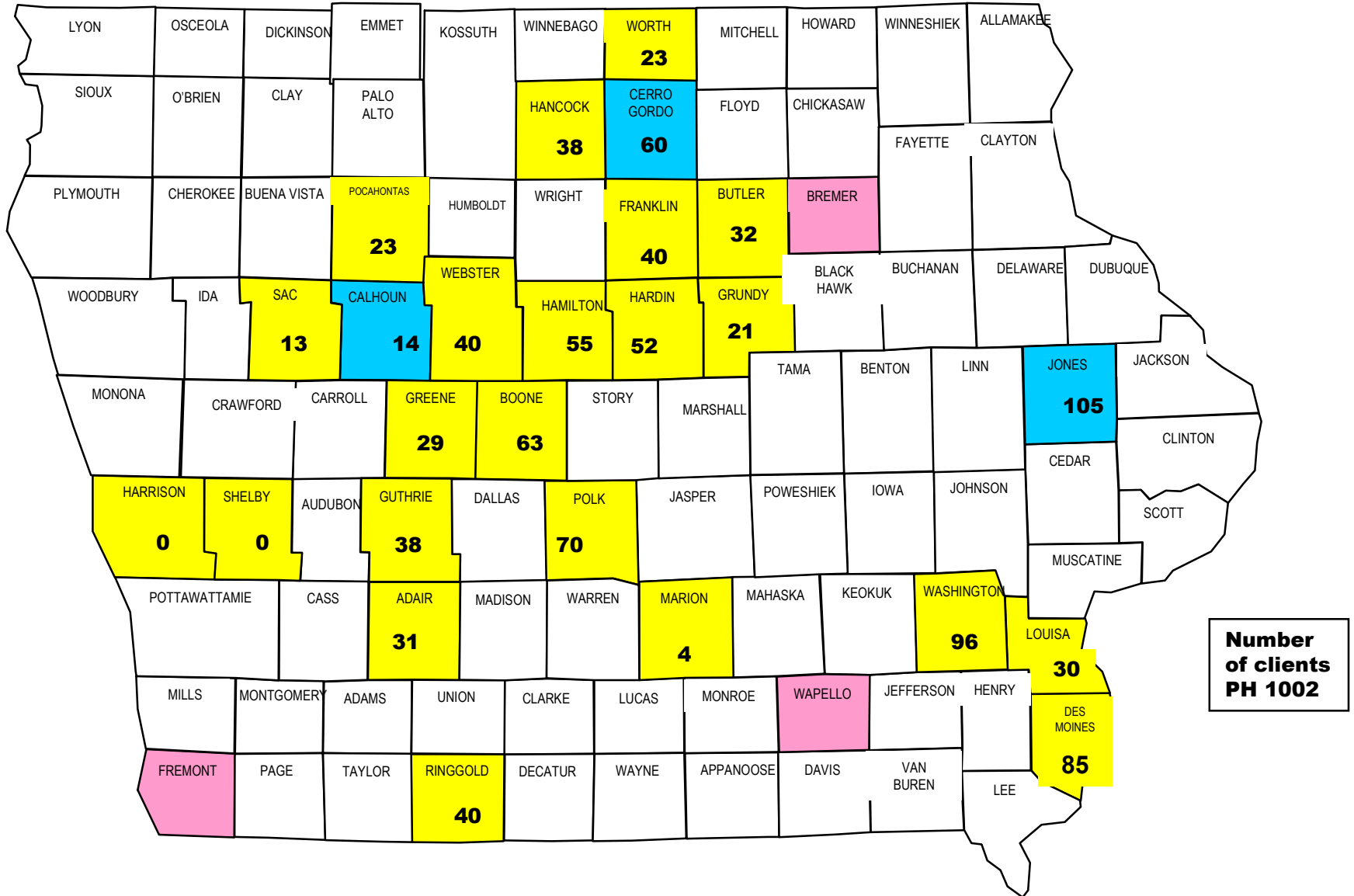


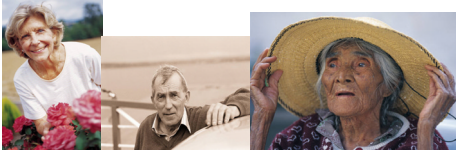
Local Public Health Agencies

Case Management – Elderly Waiver (021207)



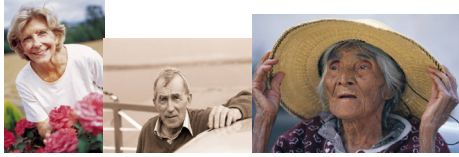
Number of clients PH 1002

**Number in box indicates number of persons agency is currently serving.
 Yellow color indicates Local Public Health directly providing Case Management for Elderly Waiver
 Pink color indicates county is in process of developing Case Management service for Elderly Waiver
 Blue color indicates Local Public Health contracted with a AAA to provide Case Management**



**Local Public Health Agencies (LPHA)
Case Management – Elderly Waiver
Quick Facts (021207)**

Number of counties in which LPHA is actively providing Elderly Waiver Case Management	28 counties
Number of clients actively being case managed by a LPHA through the Elderly Waiver program	1002 clients
Is \$70 adequately covering the cost of service?	\$70 is not covering the cost of providing Case Management Services based on cost analysis. LPHA incurred additional costs since the implementation of the waiver that contributed to current costs. Most agencies report that they anticipate some reduction in costs as they stabilize expense and increase efficiency; however, none of the agencies believe that \$70.00 is sufficient to cover costs associated with quality case management services.
Case Management Costs reported per client per month	Grundy: \$102 Guthrie: \$115 Washington: \$120 Pocahontas: \$200 Polk: \$143 Jones: \$148 Butler: \$120 Franklin: \$122 Green: \$237
Challenges	Implementation challenges for DHS, AAA, and LPHA Costs associated with delivery of quality case management services



Local Public Health Agencies Case Management – Elderly Waiver Program *Success Stories*

(Grundy) Since we participated in the program prior to being approved as a provider, our clients know and trust us. A rapport was built between the nurse case manager and the client. One success story was of an elderly gentleman who lived in an old house and was fairly isolated. The case manager was able to relocate him into an elderly housing unit where he is around other seniors. He is very happy in his new surrounding. Public Health nurses live and work in their communities and know what is available. It is a natural fit as we do case management all the time. For the community and the seniors in general it saves us all by delaying nursing home placement and the seniors are definitely happier in their homes for a long as possible.

(Polk) We have two Vietnamese interpreters and once they realized that we were providing these services, they went into the Vietnamese communities and we have identified nearly 25 (since December!) elderly Vietnamese folks that qualify and are living in pretty bad conditions. They had not previously been utilizing Elderly Waiver services. Now we have homes where we have put in bathroom grab bars, arranged for senior companions and/or home health aides, assisted in transportation....and many other services. There is a huge need and we have only begun to tap into the ethnic populations that would qualify and truly need the case management services.

(Webster) A disabled, low-income elderly client was able to remain living safely in her home by receiving case management services. The case manager arranged for this client to receive a home care aide to provide personal care including a bath several days a week, and environmental services such as house cleaning. The client was able to receive Meals on Wheels daily and also was set up with Lifeline so she could call for help when needed. All of these services greatly increased her health, safety and sense of security. This is allowing her to remain living independently at home instead of going into a nursing home

(Guthrie) We strive to meet the needs of a referral within 24 to 48 hours. For our last referral, the case manager was able to obtain a notice of decision within one day of discharge of the nursing home. By accessing services quickly we avoid an adverse event such as rehospitalization, a fall, or reentering the nursing home. If a provider of service or the client/family member calls in and says that they need an assistive device, lifeline, or meals on wheels the case manager is able to immediately work on the care plan to make these changes and get services going as soon as possible. Because we live in the community we are accessible to the clients or family members. Our case manager/s are able to meet face to face and discuss needs without waiting for a case manager who lives two or three counties away to schedule an appointment or try to discuss needs by telephone.

(Franklin) The family of a 76 year old female with a diagnosis of Diabetes, crippling Rheumatoid arthritis and dementia was referred for case management services. The family was very concerned that the constant care that their father was providing was causing health concerns for him. All activities of daily living had become their father's responsibility. The case manager worked with the couple and family and identified that the woman was eligible for Title XIX and arranged for several in-home services. Public Health nursing/Skilled Nursing, Home Care Aide, Homemaker and Lifeline are being provided to this woman. As a result of accessing these services, the spouse's health status has improved and the family is reassured that their parents can remain together at home for the foreseeable future.

(Hamilton) Case managers in Hamilton County are advocates for the elderly and are dedicated to improving their clients' well being. The case managers have identified that many elderly living in the county were not knowledgeable about services and their eligibility to receive services that would help them remain at home and in the communities where they have lived their entire lives.