

COL A93 SCH VIIIB-2 REDUCTIONS		
POS	AMOUNT	CODES
ELDER AFFAIRS, DEPT OF		65000000
PGM: SERVICE TO ELDERS PGM		65100000
HOME & COMMUNITY SERVICES		65100400
HEALTH AND HUMAN SERVICES		13
LONG-TERM CARE		<u>1303.00.00.00</u>
PROGRAM REDUCTIONS		33V0000
AGED AND DISABLED ADULT MEDICAID WAIVER		33V0010
SPECIAL CATEGORIES		100000
HOME/COMM SERVICES WAIVER		101555
GENERAL REVENUE FUND	2,335,532-	1000
OPERATIONS AND MAINT TF	3,010,159-	2516
TOTAL APPRO.....	5,345,691-	
	=====	

AGENCY ISSUE NARRATIVE:

SCH VIIIB-2 NARR 12-13 NARRATIVE: IT COMPONENT? NO
 PRIORITY # 02 - Issue Title: Aged and Disabled Adult Medicaid Waiver

This issue proposes to cap participation in the Aged and Disabled Adult Medicaid Waiver to 9,000 program slots for the entire fiscal year of 2012-2013 that will generate a reduction of \$2,335,532 in General Revenue.

This Medicaid program provides alternative, less restrictive long-term care options for elders who qualify for skilled nursing home cares. Services include adult day health care, attendant care, case aide, case management, chore, companionship, consumable medical supplies, counseling, emergency alert response, environmental modifications, escort, family training and support, financial assessment, home-delivered meals, homemaker, personal care, pest control, rehabilitative engineering evaluation, respite, risk reduction, skilled nursing, specialized medical equipment and supplies, and therapies. The average care plan cost for this program is \$10,308 per year.

Capping this program at 9,000 slots for an entire year would impact approximately 519 seniors. Based on client frailty in this program it is estimated that 42% of the impacted Aged and Disabled Adult Medicaid Waiver clients (221 clients) could end up in nursing home care at a total annual cost of \$12,830,155 of which \$5,605,495 would be General Revenue.

No statutory change would be required to implement this reduction.

COL A93 SCH VIIIB-2 REDUCTIONS		CODES
POS	AMOUNT	
ELDER AFFAIRS, DEPT OF		65000000
PGM: SERVICE TO ELDER'S PGM		65100000
HOME & COMMUNITY SERVICES		65100400
HEALTH AND HUMAN SERVICES		13
LONG-TERM CARE		<u>1303.00.00.00</u>
PROGRAM REDUCTIONS		33V0000
ALZHEIMER'S DISEASE INITIATIVE		33V0020
SPECIAL CATEGORIES		100000
G/A-ALZHEIMER'S RESP/PROJ		100092
GENERAL REVENUE FUND.....	378,506-	1000
	=====	

AGENCY ISSUE NARRATIVE:

SCH VIIIB-2 NARR 12-13 NARRATIVE: IT COMPONENT? NO
 PRIORITY ISSUE # 03 Issue Title: Alzheimer s Disease Initiative

This issue proposes to cap participation in the Alzheimer s Disease Initiative program to 900 program slots for the entire fiscal year of 2012-2013 that will generate a reduction of \$378,506 in General Revenue.

Many Alzheimer s victims require care 24 hours a day, especially in the late stages of the disease. ADI respite includes in-home, facility-based (usually at adult day care centers), emergency and extended care (up to 30 days) respite for caregivers who serve victims of memory disorders. On average, fewer than three hours of respite care per week is provided per person. In addition to respite care services, caregivers and consumers may receive supportive services essential to maintaining persons with Alzheimer s disease or related dementia in their own homes. The supportive services may include caregiver training and support groups, counseling, consumable medical supplies and nutritional supplements. The average care plan cost of this program is \$6,300 per year.

Capping this program at 900 slots for an entire year would impact approximately 60 seniors. Based on client frailty in this program it is estimated that 49% of the impacted ADI clients (30 clients) could end up in nursing home care at a total annual cost of \$1,741,650 of which \$760,927 would be General Revenue.

No statutory change would be required to implement this reduction.

ASSISTED LIVING FOR FRAIL ELDER'S		
MEDICAID WAIVER		33V0030
SPECIAL CATEGORIES		100000
ALF WAIVER		101557
GENERAL REVENUE FUND	6,153,214-	1000
OPERATIONS AND MAINT TF	7,930,589-	2516

TOTAL APPRO.....	14,083,803-	
	=====	

COL A93		
SCH VIIIB-2		
REDUCTIONS		
POS	AMOUNT	CODES

ELDER AFFAIRS, DEPT OF		65000000
PGM: SERVICE TO ELDERS PGM		65100000
HOME & COMMUNITY SERVICES		65100400
HEALTH AND HUMAN SERVICES		13
LONG-TERM CARE		<u>1303.00.00.00</u>
PROGRAM REDUCTIONS		33V0000
ASSISTED LIVING FOR FRAIL ELDERS		
MEDICAID WAIVER		33V0030

AGENCY ISSUE NARRATIVE:

SCH VIIIB-2 NARR 12-13 NARRATIVE: IT COMPONENT? NO
 PRIORITY # 04 Issue Title: Assisted Living for Frail Elders Medicaid Waiver

This issue proposes capping participation in the Assisted Living for the Frail Elders Waiver program to 2,000 slots for the entire fiscal year 2012-2013 that will generate a reduction of \$6,153,214 in General Revenue.

This Medicaid program provides alternative, less restrictive long-term care options for elders who qualify for skilled nursing home cares. Appropriate services are made available based on the recipient s level of need. The program includes three broad services: assisted living, case management and incontinence supplies. The components of these services include: attendant call system, attendant care, behavior management, case management, chore services, companion services, homemaker, incontinence supplies, intermittent nursing, medication management, occupational therapy, personal care, physical therapy, specialized medical equipment and supplies, speech therapy, and therapeutic social and recreational services. The average care plan cost for this program is \$10,500 per year

Capping this program at 2,000 slots for an entire year would impact approximately 1,341 seniors. Based on client frailty in this program it is estimated that 60% of the impacted Assisted Living Medicaid Waiver clients (806 clients) could end up in nursing home care at a total annual cost of \$46,792,330 of which \$20,443,569 would be General Revenue.

No statutory change would be required to implement this reduction.

COMMUNITY CARE FOR THE ELDERLY		33V0040
SPECIAL CATEGORIES		100000
G/A-COMMUNITY CARE/ELDERLY		100547
GENERAL REVENUE FUND.....	5,769,617-	1000
	=====	

AGENCY ISSUE NARRATIVE:

SCH VIIIB-2 NARR 12-13 NARRATIVE: IT COMPONENT? NO
 PRIORITY # 05 Issue Title: Community Care for the Elderly

This issue proposes to cap participation in the Community Care for the Elderly program to 6,500 program slots for the entire fiscal year 2012-2013 that will generate a reduction of \$5,769,617 in General Revenue.

COL A93 SCH VIIIB-2 REDUCTIONS		
POS	AMOUNT	CODES
ELDER AFFAIRS, DEPT OF		65000000
PGM: SERVICE TO ELDERS PGM		65100000
HOME & COMMUNITY SERVICES		65100400
HEALTH AND HUMAN SERVICES		13
LONG-TERM CARE		<u>1303.00.00.00</u>
PROGRAM REDUCTIONS		33V0000
COMMUNITY CARE FOR THE ELDERLY		33V0040

The Community Care for the Elderly (CCE) Program provides community-based services organized in a continuum of care to help functionally impaired older people live in the least restrictive yet most cost-effective environment suitable to their needs. Services in this program include: adult day care, adult day health care, case management, case aide, chore, companionship, consumable medical supplies, counseling, escort, emergency alert response, emergency home repair, home-delivered meals, home health aide, homemaker, home nursing, information and referral, legal assistance, material aid, medical therapeutic services, personal care, respite, shopping assistance, transportation, and other community-based services. The average care plan cost for this program is \$5,340 per year

The capping of this program at 6,500 slots would impact approximately 1,080 seniors. Based on client frailty in this program it is estimated that 38% of the impacted CCE clients (416 clients) could end up in nursing home care at a total annual cost of \$24,150,880 of which \$10,551,519 would be General Revenue.

No statutory change would be required to implement this reduction.

HOME CARE FOR THE ELDERLY		33V0050
SPECIAL CATEGORIES		100000
G/A-COMMUNITY CARE/ELDERLY		100547
GENERAL REVENUE FUND.....	2,467,357-	1000
	=====	

AGENCY ISSUE NARRATIVE:

SCH VIIIB-2 NARR 12-13 NARRATIVE: IT COMPONENT? NO

PRIORITY ISSUE # 06 Issue Title: Home Care for the Elderly

This issue proposes to cap participation in the Home Care for the Elderly Program for fiscal year 2012-2013 to 1,500 program slots that will generate a reduction of \$2,467,357 in General Revenue.

The Home Care for the Elderly (HCE) program encourages the provision of care for elders age 60 and older in family-type living arrangements in private homes as an alternative to institutional or nursing home care. Individuals must be 60 or older, have income less than the Institutional Care Program (ICP) standard, meet the ICP asset limitation, be at risk of nursing home placement, and have an approved adult caregiver living with them who is willing and able to provide or assist in arranging for care. A basic subsidy is provided each month to the adult caregiver for support and maintenance of the elder, including some medical costs. A special subsidy may also be provided for services/supplies. The average care plan cost for this program is \$3,624 per year

The capping of this program to 1,500 slots would impact approximately 681 seniors. Based on client frailty in this

COL A93 SCH VIIIB-2 REDUCTIONS		CODES
POS	AMOUNT	
ELDER AFFAIRS, DEPT OF		65000000
PGM: SERVICE TO ELDERS PGM		65100000
HOME & COMMUNITY SERVICES		65100400
HEALTH AND HUMAN SERVICES		13
LONG-TERM CARE		<u>1303.00.00.00</u>
PROGRAM REDUCTIONS		33V0000
HOME CARE FOR THE ELDERLY		33V0050

program it is estimated that 37% of the impacted HCE clients (252 clients) could end up in nursing home care at a total annual cost of \$14,629,860 of which \$6,391,786 would be General Revenue.

No statutory change would be required to implement this reduction.

CAPITATED NURSING HOME DIVERSION
 WAIVER
 SPECIAL CATEGORIES
 NURSNG HOME DIVRSN WAIVER

33V0060
 100000
 109970

GENERAL REVENUE FUND	14,510,845-	1000
OPERATIONS AND MAINT TF	18,707,915-	2516

TOTAL APPRO.....	33,218,760-	
	=====	

AGENCY ISSUE NARRATIVE:

SCH VIIIB-2 NARR 12-13 NARRATIVE: IT COMPONENT? NO

PRIORITY ISSUE # 07 Issue Title: Capitated Nursing Home Diversion Waiver

This issue proposes to cap participation in the Capitated Nursing Home Diversion Waiver at 17,465 program slots for the entire fiscal year of 2012-2013 which will generate a reduction of \$14,510,845 in General Revenue.

The Long-Term Care Community Diversion Pilot Project (diversion program) is designed to target the frailest individuals who would otherwise qualify for Medicaid nursing home placement, instead offering them community based alternatives. The project uses a managed care delivery system to provide comprehensive acute and long-term care services to individuals who are dually eligible for Medicare and Medicaid. Specifically, clients choose to receive care in a managed care delivery setting intended to increase the coordination of their care between service providers and Medicare. The state, through a monthly capitated rate, pays for Medicare co-insurance and deductibles and other medical services not covered by Medicare. The rate also covers all home and community based services and nursing home care. Contractors are at risk for in-home and nursing home services and may choose to use assisted living facilities as a lower-cost option to nursing home care when appropriate as an alternative to nursing home care. By receiving integrated acute and long-term services, such as home-delivered meals, coordination of health services and intensive case management, clients are better able to remain in the community. The average capitated rate in this program is \$18,468 per year.

Capping the number of program slots at 17,465 for an entire year would impact approximately 1,799 seniors. Based on client frailty in this program it is estimated that 67% of the impacted Capitated Nursing Home Diversion Waiver clients

 COL A93
 SCH VIIIB-2
 REDUCTIONS
 POS AMOUNT

ELDER AFFAIRS, DEPT OF		65000000
PGM: SERVICE TO ELDERS PGM		65100000
HOME & COMMUNITY SERVICES		65100400
HEALTH AND HUMAN SERVICES		13
LONG-TERM CARE		<u>1303.00.00.00</u>
PROGRAM REDUCTIONS		33V0000
CAPITATED NURSING HOME DIVERSION		
WAIVER		33V0060

(1,203 clients) could end up in nursing home care at a total annual cost of \$69,840,165 of which \$30,513,168 would be General Revenue.

No statutory change would be required to implement this reduction.

TOTAL: LONG-TERM CARE		<u>1303.00.00.00</u>
BY FUND TYPE		
GENERAL REVENUE FUND	31,615,071-	1000
TRUST FUNDS	29,648,663-	2000

TOTAL PROG COMP.....	61,263,734-	
	=====	

COL A93 SCH VIIIB-2 REDUCTIONS		CODES
POS	AMOUNT	
ELDER AFFAIRS, DEPT OF		65000000
PGM: SERVICE TO ELDERS PGM		65100000
EXECUTIVE DIR/SUPPORT SVCS		65100600
GOV OPERATIONS/SUPPORT		16
EXEC LEADERSHIP/SUPPRT SVC		1602.00.00.00
MANAGEMENT REDUCTIONS		33G0000
HEADQUARTER EXPENSES		33G0010
EXPENSES		040000
FEDERAL GRANTS TRUST FUND.....	58,792-	2261

AGENCY ISSUE NARRATIVE:
 SCH VIIIB-2 NARR 12-13 NARRATIVE: IT COMPONENT? NO
 PRIORITY # 01 Issue Title: Headquarter Expenses

This issue proposes to reduce the Expenses category in the Executive Direction and Support Services budget entity by \$58,792 in the Federal Grants Trust Fund.

This category is used to pay for travel, office supplies, leases, phones and utilities. This reduction proposal would reduce general expenses in the Executive Direction and Support Services budget entity by limiting travel and office supply expenditures by \$58,792 in order to meet the 10% reduction exercise.
