Choices for Independence Home Health Services

HOUSE FINANCE, DIVISION III SUBCOMMITTEE MARCH 10, 2021



Medicaid-waiver Services Choices for Independence (CFI)

- Medicaid—waiver program for elderly & adult citizens who need nursing home level of care
 - Financial eligibility determined by DHHS
 - Clinical eligibility clinical assessment by DHHS RN, eligibility determination by BEAS staff
- Clients can live at home with supportive services
- CFI is a good investment! Average annual cost is less than \$20,000/ year, compared to over \$50,000 for nursing home care.

CFI Budget Lines 05-95-48-482010-2152

Home care services are in class lines 506 & 529.

Granite State Home Health & Hospice Association

HB 0001	02/12/2021 VERSION NO: 01	FISCAL YEAR 2022	FISCAL YEAR 2023 PAGE 551
05 HEALTH AND SOCIAL SERV 95 HEALTH AND HUMAN SVCS 48 HHS: DLTSS-ELDERLY&ADU 481010 GRANTS FOR SOCIAL S	DEPT (CONT.) JLT SVCS (CONT.)		
EXPENDITURE TOTAL FOR GR	ANTS FOR SOCIAL SVC PROG	28,359,125	28,450,704
FEDERAL FUNDS GENERAL FUND TOTAL ESTIMATED SOURCE O	F FUNDS FOR GRANTS FOR SOCIAL SVC PROG	16,581,476 11,777,649 28,359,125	16,625,159 11,825,545 28,450,704
05 HEALTH AND SOCIAL SERV 95 HEALTH AND HUMAN SVCS 48 HHS: DLTSS-ELDERLY&ADU 482010 WAIVER AND NURSING 2152 WAIVER/NF PMTS-COUN	DEPT JLT SVCS FACILITIES		
041 Audit Fund Set Aside	4	152,851	152,851
504 Nursing Home Payments 505 Mid-Level Care Expenses	*	221,547,432 11,578,076	221,547,432
506 Home Support Waiver Service	ces	56,288,970	11,578,076 56,288,970
529 Home Health Care Waiver S	ervic	8,411,292	8,411,292
TOTAL		297,978,621	297,978,621
ESTIMATED SOURCE OF FUND WAIVER/NF PMTS-COUNTY PAI			
005 Private Local Funds		143,912,885	143,912,885
FEDERAL FUNDS GENERAL FUND		149,065,736 5,000,000	149,065,736 5,000,000
TOTAL SOURCE OF FUNDS		297,978,621	297,978,621
CLASS NOTES			

The appropriation in Class 504 shall not lapse, except where noted below, shall not be used for any other purpose, and shall not be considered for budget reductions required pursuant to any section of this act or any other budget reduction, including executive orders, required of the department of health and human services. To the extent that nursing home rates paid to providers in 504-Nursing Home Payments are less than the rates established by the department, prior to applying the budget adjustment factor, any balance remaining, less transfers made into class 504 which shall lapse, shall be paid out to providers as a lump sum payment within 30 days of the year end, proportionally based on Medicaid class 504 payments made to such providers during the fiscal year.

ORGANIZATION NOTES

Appropriations made under the Choices for Independence Waiver program paid from class 505 mid-level care, class 506 home support services, and class 529 home health care services shall only be transferred in and among such classes, which does not prevent transfers in from other accounts within the department. Payments made from class 505, 506 and 529 shall not be used for any other purpose, and shall not be considered for budget reductions required pursuant to any section of this act or any other budget reduction including executive orders required of the department of health and human services. Such accounts shall not lapse until June 30, 2023.

Home Care Services Provided to CFI Clients

- Skilled Nursing Visits (529)
 - Clinical assessments & care plans
 - Wound care; catheter care
 - Medication administration; filling pill planners
 - Patient and family education
 - ► LNA Supervision
- Home Health Aide Services (529)
 - Licensed Nursing Assistants (LNAs)
 - ▶ 100 hours of training
 - Observe & report medical conditions
 - Bathing, toileting, dental care
 - Assistance with transfers, dressing, walking, feeding, medications

- Personal Care Services (506)
 - Unlicensed Personnel about 16 hours of training
 - Bathing, toileting, dental care
 - Assistance with transfer, dressing, walking, feeding
 - Assistance with medication reminders
 - Transportation to grocery, pharmacy
- Homemaker Services (526)
 - Light housekeeping
 - Grocery Shopping
 - Laundry
 - Meal preparation

CFI Challenges: Growing Caseloads, Gaps in Care

- CFI unduplicated clients
 - **>** 2015 2,885
 - **2020** 3,672
- Gaps in Care (undelivered services, 2017-2020 average)

Skilled Nursing Visits 32%

► Home Health Aide short visits 45%

Home Health Aide long visits 31%

Personal Care Services 25%

► Homemaker Services 45%

Payments to providers are not based on economic realities



CFI Challenges: Inadequate Provider Payments



- Payments are based on the time the caregiver is in the home.
- It must cover ALL these expenses:
 - Caregiver and supervisor wages
 - Mileage and travel time
 - Workers' comp, payroll taxes, benefits, other insurance
 - Training, criminal background checks, TB tests, COVID tests,
 - Scheduling, case management, overtime, billing

CFI Challenges: Rate Disparities

Services	2021 CFI Rates	Gov's Proposed 22-23 Rates	NH Title XX & IIIB Rates	Median NH Private 2020 Pay Rates*	2018 Medicare Cost of Care**
Nursing Visits	\$100.63	\$100.63	NA	NA	\$170.00
Home Health Aide Visits > 2 hours	\$33.03	\$33.03	NA	NA	\$60
Home Health Aide Units & Hourly	\$6.41/\$26.64	\$6.41/\$25.64	\$32/hour	NA	\$60
Personal Care Units & Hourly	\$4.89/\$19.56	\$5.62/\$22.48	NA	\$29.50	NA
Homemaker Units & Hourly	\$5.09/\$20.36	\$5.40/\$21.60	\$24/hour	\$28.50	NA

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CFI Challenges: Workforce Shortages

STAFF VACANCY RATES

(week of 12/31/20)

Registered Nurses	23%	Registered Nurses	
Licensed Practical Nurses	33%	Licensed Practical Nurses	
Home Health Aides	33%	Home Health Aides	
Personal Care Providers	30%	Personal Care Providers	
Homemakers	33%	Homemakers	

Source: Home Care, Hospice & Palliative Care Alliance of NH Workforce Survey, February 2021, conducted by Helms & Company

34%

51%

36%

41%

23%

STAFF TURNOVER RATES

(2020 Annual Average)

Public Policy Issues

- ► CFI enables vulnerable adults to remain in their homes, for less than the cost of nursing home care.
- NH is **failing in its commitment to support individuals** on CFI.
- **Low rates cripple providers,** especially in a competitive workforce environment.
- Gaps in care result in dangerous conditions for individuals who depend on these services and waitlists for people who need help now.
- There is great **risk that individuals will require hospitalization** or nursing home care **or may die** while they await services.
- Home care providers are limiting or ceasing participation in the CFI program.





Public Policy Issues



- Between 2017- 2020, \$11 million \$15 million a year were unspent for CFI home health services.
- Rather than lapsing, budgeted funds should be used to increase rates to market level in order to stabilize the delivery of CFI services.
- The Legislature should direct DHHS to further increase CFI home health rates within the proposed appropriation.
- We recommend that DHHS consider adopting a footnote, similar to the nursing home footnote currently in the budget, to pay out unspent funds to CFI providers.
- The recent federal stimulus bill includes a 10% FMAP increase for home and community-based services for 4/1/21 3/33/22. The funds must be used to strengthen programs. It cannot supplant existing state funds.

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Questions?

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