



Capitol Desk

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Lawsuit Settlement Ends Fight Over ADHC

by David Gorn

Really, it's all about Esther Darling.

The 74-year-old is the poster child for adult day health care services. She had a stroke, deals with diabetes and congestive heart failure, takes multiple medications and receives care and treatment at a day center in Yolo County.

"If it wasn't for the [ADHC] therapy, I wouldn't be able to walk today," Darling said. "They said I wouldn't walk anymore, but I was determined to prove them wrong."

Darling is the named plaintiff in a lawsuit against the Department of Health Care Services settled yesterday, just prior to a scheduled federal court hearing. She stands to benefit from the new program in that settlement, Community-Based Adult Services (CBAS), which is designed to provide "ADHC-like services" to current ADHC beneficiaries who are at risk for being institutionalized, such as Darling. ADHC advocates were ecstatic at the news. And they weren't the only ones.

"I'm happy for the 35,000 ADHC people and the centers," DHCS Director Toby Douglas said, "that we finally have resolution and settlement of this issue, and now we can move forward with this transition -- whether that's Esther Darling, or any of the other 35,000 people who can be helped by this."

The settlement has three main components:

- CBAS will provide services roughly equivalent to those currently offered at ADHC centers, and funded at the same rate, for patients who qualify. Eligibility is based on medical need, for those who are at risk for institutionalization. DHCS officials estimate about half of the current ADHC beneficiaries will be eligible, though that number could rise, based on assessments that still need to be conducted.
- CBAS will provide enhanced case management in an integrated managed care setting for those who are not in imminent danger of institutionalization. All patients who want to receive these benefits -- whether it's CBAS-eligible patients or the ones who receive more intensive case management service -- will need to enroll in a managed care plan.
- The settlement extends by three months the deadline for elimination of ADHC as a Medi-Cal benefit (also referred to as an optional Medicaid benefit), from Dec. 1 to March 1.

The state Legislature, which voted to eliminate ADHC as a Medi-Cal benefit in March, allocated \$85 million to a new program to be called Keeping Adults Free from Institutions. Gov. Jerry Brown (D) vetoed the ADHC replacement plan in July.

Douglas said the new CBAS (pronounced Sea Bass) program is estimated to cost the state that same \$85 million a year.

For California Disability Rights attorney Elissa Gershon, it has been a long struggle with a satisfying ending.

"I am so happy. This has really been a long process," Gershon said. "It sends the message that, even in this economic crisis, some cuts are just not OK."

The big difference between the Legislature-backed KAFI program and the current settlement CBAS program, Gershon said, is that the new program is not capped -- that is, the benefit will be available for those who qualify for it, not restricted by a hard cap upper limit for the program cost.

Assembly member Bob Blumenfield (D-Woodland Hills), who authored the KAFI bill, had nothing but praise for the Brown administration's commitment to keeping ADHC patients independent in the new program.

"That should be our goal, to keep people out of institutions," Blumenfield said. "We criticized the veto of the KAFI bill. It looked like we were getting less health care for more money, which is the exact opposite direction that's being pursued on the national level."

In general, Blumenfield said, the state has had a progressive, common-sense attitude toward these kinds of health care programs. "With ADHC, this was sort of anomalous," Blumenfield said. "Now the direction is more in line with the stated goals, and the actual goals."