

# WHC urges lawmakers to not cut adult health funds

By DAWN PURKEY

Posted: 02/20/2011 02:32:02 AM PST

Gov. Jerry Brown has proposed the state stop providing Medi-CAL payments to adult day health care programs in an effort to offset a \$25.4 billion state budget deficit.

According to the California Department of Aging, an adult day health care program is a licensed community-based day care program providing health, therapeutic and social services to frail elderly persons or adults with disabilities. There are more than 300 adult day health care centers in the state. The centers are licensed by the California Department of Public Health and certified for participation in the Medi-CAL Program by the California Department of Aging.

The Yolo Adult Day Health Center and Alzheimer Day Care Resource Center, both services of Woodland Healthcare, are designed to promote the independence and self-esteem of adults. Assistance is provided to help manage health conditions related to illness, injury, Alzheimer's Disease and other dementia. Both programs offer diverse health, social, rehabilitation and recreational services.

Here are the top six reasons to protect Medi-Cal Funding for ADHC

1. The ADHC model of multi-disciplinary team care is widely touted as the solution to management of chronic conditions and rising health care costs. ADHC serves 37,000 low-income vulnerable elderly or disabled adults in California. In Yolo County 334 will be displaced. Of those, 50 will be in nursing homes in 30 days and an estimate of 6 will have a serious psychiatric crisis within 30 days. Medicare and health insurance do not pay for long-term care benefits such as ADHC.
2. According to a May 2010 report by The Lewin Group, elimination of ADHC would cost the state \$51 million more than it saves because of cost-shifting to other more expensive settings; loss of tax revenue resulting from the closure of 310 small businesses (two in Yolo County); and loss of employment ( 51 current ADHC employees) and worker productivity due to caregivers having to quit their jobs or reduce their work hours to care for their family members (estimate 18 caregivers will have to quit jobs). This loss would continue into future budget years.
3. A federal court ruled in 2010 that the state is responsible for the care of these ADHC patients and also for the provision of alternative services to institutional care. In court briefs, the state has claimed it does not bear responsibility for assisting displaced frail elders, mentally ill or disabled adults with finding other services, even though it has approved their level of need for ADHC. The same public interest senior law groups that won a temporary injunction for ADHC patients in 2010 would most likely litigate to protect the health and well-being of these patients should the benefit be eliminated, under the Americans with Disabilities Act and the U.S. Supreme Court *Olmstead v. L.C.* decision, which requires that states make reasonable program and policy modifications to prevent unnecessary institutionalization.

4. The state would forfeit \$177 million annually in federal matching funds. As an alternative, the California Association of Adult Day Services has submitted a proposal that includes streamlining State oversight, reducing billable days and enforcing eligibility requirements with an estimated savings of \$24 million. This is in addition to the \$65 million in savings already realized with ADHC reforms between 2008 and present.

5. Restarting these programs, should funding be restored at a future date, would be prohibitive because of significant bureaucratic and regulatory barriers and unreimbursed costly start-up expenses estimated to be \$1 million per site. The Legislature invested \$3.4 million in "start-up" grants to encourage the opening of ADHC centers for this reason. With the implementation of the upcoming 1115 Waiver for Seniors and Persons with Disabilities and the Dual Eligibles, managed care providers such as Partnership will be incentivized to adult day health care to cost-effectively address the complicated needs of chronically ill patients.

6. There is no comparable medically-based long term care service to Adult Day Health Care except for a nursing home. In Home Support Services does not provide medical care or therapy service.

*-- Dawn Purkey, is program manager of the Yolo Adult day Health Center in Woodland. She wrote this article on behalf of Catholic Healthcare West/Mercy healthcare*