

## **GRAY MATTERS: New program may fill gaps if ADHC gets cut**

Carol Harrison/For the Times-Standard

Posted: 09/20/2011 02:40:20 AM PDT

While the door may be closing on adult day health care services for the poor and frail, a window to a full range of long-term care services may be opening in Humboldt County.

Joyce Hayes, executive director of the Humboldt Senior Resource Center, believes a multi-year effort to bring the Program of All-inclusive Care for Elderly, or "PACE," to the North Coast could bear fruit inside 18 months. "The earliest target to be up and running would be January 2013," Hayes said earlier this month. "We've done everything possible to make sure this is do-able and we need to go forward. We'll have the first part of the application done by the end of September."

PACE is a comprehensive, managed-care system for nursing home-eligible seniors age 55 and older. The program, which would be administered by the senior center, offers a full range of long-term care services to recipients and receives payment from Medicare and, for low-income participants, from Medi-Cal.

The program is licensed through the California Department of Health Services and Medicare and "provides a substantial cost savings to the state and federal government" compared to 24-hour skilled nursing care, Area 1 Agency on Aging's Health Committee wrote in its August report to the Advisory Committee.

"For most participants, the comprehensive service package permits them to continue living at home while receiving services -- rather than be institutionalized," wrote the legislative analyst for AB 574, co-authored by state Assemblymembers Bonnie Lowenthal and Wes Chesbro.

AB 574 went to Governor Brown's desk for his signature on Sept. 13. The bill seeks to expand the maximum number of authorized PACE sites from 10 to 15.

According to analyst Robert MacLaughlin, California currently has five authorized sites and "several" applications in process.

The five in operation are based in major metropolitan areas: AltaMed Senior Buena Care in Los Angeles County; Center for Elders Independence in Alameda County; On Lok Senior Health San Francisco County; Sutter Seniorcare in Sacramento County; and Community Eldercare of San Diego in San Diego County.

"Sometimes rural areas can't get PACE going because they don't have a building or structure or the capacity to develop the program," Hayes said. "Humboldt County has the buildings and the skilled staff that have run Adult Day Health Care for 25 years."

That's a resource that brings the cost of PACE implementation down from \$5 or \$6 million to \$2 million, Hayes said. "If it's managed well, it is a proven, sustainable program to provide the highest quality of care for our most frail elders," Hayes said. "But PACE eligibility has a much narrower focus than adult day health. It is really only a partial solution for meeting the client needs that ADHS can meet."

Unless the governor does an about-face on his decision to eliminate Medi-Cal's optional adult day health care benefit in California, it may also be the only hope for some of the 206 Humboldt County participants in adult day health care, about half of whom have dementia or developmental disabilities and 70 percent of whom require skilled nursing care.

Seven months ago, every Democrat in the Assembly voted to support the governor's proposal to eliminate the ADHC benefit.

"It is a vote I regret daily," said Mariko Yamada, chairperson of the Assembly Committee on Aging and Long-Term Care since 2009.

According to Yamada, that vote was done on the belief that Brown would support a smaller program based on medical acuity. It was outlined in AB 96, authored by Bob Blumenfeld, and known as Keeping Adults Free from Institutions. Brown vetoed AB 96 in July.

Hayes and Julie Damron of Adult Day Health Care of Mad River say 75 percent of their day health clients rely on Medi-Cal and the roughly \$76 per day it reimburses them for care recipients receive anywhere from one to five days a week.

"We will still be here, but we can't be here for everyone," Damron said.

Damron said Mad River Community Hospital has been "very supportive" of the day health program over the years, offering a "unique space" without a "whole lot of rent."

The overhead is a little different at the Humboldt Senior Resource Center, which as a nonprofit took on the task of building the cutting edge Alzheimer's Resource Center next door to its overcrowded day health care center on California Street in Eureka. Like Damron, Hayes is hoping to offset some of the potential loss of Medi-Cal funding by growing participation among private pay users, veterans and regional center clients.

Hayes called it "unrealistic" to expect a lot of growth in those places.

"We are hoping to bridge the gap with a small adult day health program until we can get PACE up and running," she said.

"We strongly support the availability of the PACE program in Humboldt County," Area 1 Agency on Aging Executive Director Cindy Denbo said, "but it is at least a year or more away. The issue right now, this day, is that adult day health care is slated to be eliminated. That goes against the social contract Californians have supported for 40 years -- our commitment to a network of support for the most frail seniors. Make no mistake: The elimination of ADHC will affect us all."

Hayes, Damron and Denbo all expressed frustration with a state plan to transition those impacted by the loss of the optional Medi-Cal benefit.

"The state in its transition plan says there will be other services, but there aren't," Damron said. "Every day health program in the state will tell you the same thing."

"It's a transition to nowhere," Denbo said. "From what I hear, folks in other rural counties are telling their Assemblymembers the same thing."

"There may be a plan, but the services aren't going to be there to give them what they need and get in ADHC," Hayes said. "People will have to make decisions about entering into residential care, getting more private pay in homes or going to skilled nursing."

Hayes said a disability rights lawsuit to be heard Nov. 1 could reverse the outcome for adult day health services. It could also confirm it, or lead to an extension of support until transition services can be identified and provided. "Right now, when we look at this year, our projections have the assumption of six months of Medi-Cal dollars taking us through Nov. 30," Hayes said.

Once the Medi-Cal dollars dry up, Damron expects hospital emergency departments to fill up.

"People will still need the services and they won't be able to get them," she said. "We help people with daily monitoring. We give medication. We can run over to the hospital next door to do a lab. We do a lot that enables people to stay in their homes, out of the E.D. and out of skilled nursing."

Denbo said there is still an opportunity to delay the cut until March. Last week, Yamada submitted such a request signed by 31 Assemblymembers to Toby Douglas, director of the Department of Health Care Services.

"PACE is the future -- a future some of our frailest and poorest seniors may not live to see if this short-sighted approach to balancing a budget is allowed to proceed," Denbo said.

-----

Area 1 Agency on Aging commissions Carol Harrison to produce this column every other week because Gray Matters -- to everyone.