



TESTIMONY

Delivered by Tracy Wodatch, Vice President of Clinical and Regulatory Services
Before the Human Services Committee

February 23, 2016

To SUPPORT

SB No. 114:

AAC PRESUMPTIVE MEDICAID ELIGIBILITY FOR HOME CARE

Senator Moore, Representative Abercrombie and members of the Human Services Committee, my name is Tracy Wodatch, Vice President of Clinical and Regulatory Services at the Connecticut Association for Healthcare at Home. I am also an RN with over 30 years experience in home health, hospice, long term and acute care.

The Association represents 65 Connecticut DPH licensed/Medicare certified home health and hospice agencies that foster cost-effective, person-centered healthcare in the setting people prefer most – their own home.

Collectively, our agency providers deliver care to more Connecticut residents each day than those housed in CT hospitals and nursing homes combined. As a major employer with a growing workforce, our on-the-ground army of 17,500 home health care workers is providing high-tech and tele-health interventions for children, adults and seniors.

Our Association and its members support Presumptive Medicaid Eligibility for Home Care.

Here's some general information...

- **What is Presumptive Eligibility (PE)?**
 - PE helps older individuals obtain Medicaid homecare services faster and has been successfully implemented in several states as a means to move away from institutional care.
 - It provides for a simplified eligibility determination within 10 days of referral for Medicaid homecare services.
- **Why does CT need it?**
 - Medicaid eligible patients in CT can often wait weeks/months to obtain homecare services burdening family caregivers and resulting in expensive emergency room and hospital visits.
 - Examples with results of other states with PE:
 - **Washington:** PE program shrank the average wait time to determine Medicaid financial eligibility 66%. WA officials



- determined PE clients saved Medicaid an average of \$1,964 a month.
- **Colorado:** CO's PE pilot cost \$106,879 but saved \$407,012 by diverting patients from costly nursing home care into HCBS.
 - **Kansas:** PE pilot would need to divert just 5 people away from institutional care to be cost effective. In the end the pilot diverted 22 of 200 program participants with less than a 1% error rate.
 - **Ohio:** PE has helped OH reduce the % of its Medicaid budget spent on institutional care from 60% to 48%. The error rate in assessments is about 1%.

In Connecticut, the Department of Social Services launched a presumptive eligibility pilot program last July 2015 which was proposed by Senator Kennedy. This pilot was designed to help Connecticut's seniors receive prompt approval for home care and avoid costly nursing home or hospital stays. This program is modeled after Senate Bill 271, a bill introduced by Senator Ted Kennedy, Jr. (D-Branford) to implement an innovative payment reform that streamlines applications, promotes timely home care accessibility and aims to prevent taxpayer spending on more costly institutional care.

The following bullets summarize the status of the pilot from 7/1/15 to 12/31/15:

- Of the 2674 CT Home Care Program for Elders applications, 220 were chosen to be fast tracked through the pilot PE process
- Of the 220
 - 91 (41%) followed through on their applications resulting in full Medicaid coverage.
 - 97 (44%) had their application denied
 - 74 for failure to provide verification
 - 23 for other technical reasons (e.g., income and assets)
 - 32 (15%) refused services—reasons not stated

Although the results of the pilot are not overwhelmingly positive, these results do support 91 applicants who were able to complete the application process were found to be eligible for Medicaid and to continue to receive services without a gap. However, 97 applicants had their applications denied and their services were eventually stopped.

Since according to the data, 31% of the applications were incomplete, perhaps the fast track process needs further streamlining to ensure full understanding of the application process which, in turn, should result in more successful completed applications.



CONNECTICUT ASSOCIATION FOR
HEALTHCARE AT HOME

Again, we support Presumptive Eligibility for Home Care and ask for continued efforts to ensure an efficient process supporting the state's rebalancing initiatives to allow Medicaid clients to receive the most cost-effective care in the right setting without gaps in coverage.

Thank you.

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