

Goals 2013-2015

1. Balance the ratio of home and community-based and institutional care:

Develop a system that provides for more choice and opportunities for community integration as alternatives to all institutional settings, and increases the proportion of individuals receiving Medicaid long-term home and community-based care from 56 percent in 2012 to 75 percent by 2025, requiring approximately a 1.4 percent increase in the proportion of individuals receiving Medicaid long-term services and supports in the community every year.

2. Balance the ratio of public and private resources:

Increase the proportion of costs for long-term services and supports covered by private insurance and other dedicated sources of private funds to 25 percent by 2025. Such an increase in private insurance and other sources of private funding would reduce the burden both on Medicaid and on individuals' out-of-pocket expenses. Nationally, private insurance (long-term care and other health insurance) represented 11.6 percent of spending for long-term services and supports in 2010.¹

Long-Term Recommendations 2013-2015

Optimally, a robust system of LTSS that is able to maximize autonomy, choice and dignity will provide a full range of services and supports. Individuals, regardless of disability or age, should have the options that allow them to live their lives as meaningfully and productively as possible in the settings that best suit their needs and preferences, in the least restrictive environment. As in any system, all the constituent parts are interrelated and interdependent. In order to meet the growing demand for LTSS and the goals set forth in this plan, investment in the community-based infrastructure is critical. Over the long term, to realize the vision and achieve the goals set out in this plan, actions must be taken on the following fronts:

- Provide true individual choice and self-direction to all users of long-term services and supports.
- Promote efforts to enhance quality of life in various long-term services and supports settings.
- Ensure the availability of a wide array of support services for those living in the community, including meals and adult day care.

¹ “Other dedicated sources of private funds” means private long-term care insurance, other types of private insurance and other private spending for nursing facilities and home health services. It does not include “out-of-pocket” spending or informal care. Source: National Health Policy Forum; *The Basics: National Spending for Long-Term Services and Supports*; George Washington University; February 23, 2012.

- Ensure quality of long-term services and supports in the context of a flexible and person-centered service delivery system that acknowledges the dignity of risk.
- Achieve greater integration and uniformity of administration of State long-term services and supports serving both older adults and people with disabilities and their families, and emphasize policies related to function as opposed to age or diagnosis.
- Encourage communities to take an active role in planning and supporting long-term services and supports for their residents.
- Address the long-term services and supports education and information needs of the Connecticut public, including specialized educational efforts to specific groups, such as baby boomers and employers.
- Address the anticipated long-term services and supports workforce shortage.
- Provide support to informal caregivers.
- Preserve and expand affordable and accessible housing for older adults and individuals with disabilities, including assisted living, residential care homes, and other supportive housing and emergency housing options for older adults.
- Encourage and enable the provider community to transform and develop services and supports that will help to achieve the goals of this Plan.
- Expand and improve employment opportunities and vocational rehabilitation for persons with disabilities and older adults.
- Increase availability of readily accessible, affordable, and inclusive transportation that accommodates the need for family and direct care worker companions.
- Improve quality of life and reduce utilization of long-term services and supports and health care services by focusing on health promotion and disease prevention.
- Address emergency preparedness/disaster planning for older adults and persons with disabilities.

Short-Term Recommendations 2013-2015

These short-term recommendations provide an action agenda for improving the system of long-term services and supports in Connecticut in the three years spanning 2013 through 2015. Criteria for proposing these targeted priority recommendations are that they will help to ensure the success of the system of long-term services and supports and can be acted upon in the next three years.

Programs and Services

- Adequately support and increase the number of slots of all the existing Medicaid home and community-based services waivers to meet the needs of all eligible applicants.
- In the State-funded tiers of the Connecticut Home Care Program for Elders, eliminate the required co-payment.
- Identify skills needed for nursing facility residents who desire to transition back to the community and provide appropriate skill training and resources.
- Expand funding for State-funded respite services, such as the Statewide Respite Program, the state-funded tiers of the Connecticut Home Care Program for Elders and the Department of Developmental Services in-home and out-of-home respite services in order to provide support to informal caregivers.
- Support family caregivers through compensation with the development of the new Adult Family Living initiative.
- Address isolation of all older adults and individuals with disabilities living in the community. Also, address the impact of isolation on elder abuse and exploitation.
- Strengthen the connection of State and local services by strengthening the relationship to senior centers, municipal government offices and services offered locally.

Infrastructure

- Achieve greater integration of and uniformity of administration of State long-term services and supports serving both older adults and people with disabilities and their families, and emphasize policies related to function as opposed to age or diagnosis.
- Under the Balancing Incentive Program (BIP), create the BIP infrastructure investments of a consumer friendly statewide No Wrong Door system, a conflict free case management, and a uniform assessment tool.

- With a focus upon hospital admission and discharge, use best efforts to divert individuals to an appropriate care setting of their choice.
- Address the historical fragmentation of the Medicaid home and community-based waivers, which are associated with specific age and diagnostic eligibility criteria.
 - Explore the development of a broader 1915(i) State plan amendment to provide home and community-based supports based exclusively on functional limitations and financial need.
- Provide timely eligibility decisions regarding eligibility in all government sponsored long-term services and supports programs.
- Expand Aging and Disability Resource Centers (Community Choices) statewide in support of providing information, referral, assistance and LTSS options counseling.
- Achieve greater integration of employment of persons with disabilities into the Money Follows the Person Rebalancing Initiative and home and community-based services.
- Support improved coordination, communication and guidance among the medical care, behavioral health and long-term services and supports systems.
 - Ensure that current and future initiatives such as Money Follows the Person, Rightsizing, and the Demonstration to Integrate Care for Medicare-Medicaid Enrollees (MMEs) are well coordinated and complementary.
 - Support the development of electronic health records by providers of long-term services and supports and exchange of electronic health records among providers across the Connecticut health care system to streamline care transitions, coordinate care delivery and improve quality and outcomes.
 - Support a learning collaborative approach to bring together providers across disciplines and perspectives, and to learn from older adults and individuals with disabilities.
- Change the names of the Long Term Care Planning Committee and the Long Term Care Advisory Council to the Long Term Services and Supports Planning Committee and the Long Term Services and Supports Advisory Council.

Financing

- Achieve adequate and sustainable provider reimbursement levels that support the cost of long-term services and supports and quality requirements for all segments of

the long-term services and supports continuum in order to ensure capacity to meet the evolving needs and demographics of Connecticut residents.

- Provide greater flexibility in the budgeting and use of Medicaid funds for long-term services and supports.
- Capture and reinvest cost savings across the long-term services and supports continuum.
 - Reinvest savings resulting from Money Follows the Person, the Balancing Incentive Program and other emerging Medicaid long-term services and supports programs to enhance the availability and capacity of home and community based services.
- Reform the Medicaid rate setting system to reflect quality, reimbursement related to the actual costs of care, and uncompensated care for all LTSS providers across the continuum consistent with long-term services and supports rebalancing, rightsizing and a range of home and community based service initiatives.
- Explore various methods to increase the private sector's greater involvement as a payer of long-term services and supports.
 - Explore the development of tax incentives for the purchase of private long-term care insurance, including tax incentives for employer-based coverage.
- Work with the Federal government to preserve Older Americans Act funding. This federal funding source is currently at risk.

Quality

- Enable a collaborative, flexible and efficient regulatory environment that is adaptive and receptive to individual provider's forward thinking ideas and planning. Such an environment would encourage providers of the long-term services and supports continuum to adjust, modernize and diversify their models of care to address current and future consumer needs and expectations, which in turn should lead to higher quality care.
- The Departments of Public Health and Social Services should work together to ensure consistency among their respective regulations.
- Review licensing certification requirements and Probate Court protocols (currently there is no licensing for conservators or guardians) for training of community-based formal caregivers, conservators and guardians to assure that the specialized needs

of the individual, such as those with Alzheimer's disease, are met and provide training where there are gaps.

- Expand the scope of the Long-Term Care Ombudsman program to provide Ombudsman support to consumers receiving long-term services and supports regardless of setting in order to align the program with Medicaid LTSS rebalancing efforts. Additional appropriations to the Long-Term Care Ombudsman program would be necessary to expand beyond their current jurisdiction.

Housing

- Support programs that divert or transition individuals from nursing facilities or other institutions to community housing options.
- Address the community housing needs of nursing facility residents who are returning to the community because they no longer need this level of care but have lost their community residence.
- Develop new housing alternatives for persons with serious and persistent mental illness who do not need nursing facility level of care.
- Support legislation that requires new homes to provide features to make it easier for individuals with mobility-impairments to live in and visit.
- Continue the progressive State investment in the development of housing that is affordable and accessible for older adults and persons with disabilities.
- Encourage the growth and development of community- based service models that bring long- term services and supports to housing residents. Work with the federal government to secure at-risk housing subsidy, preservation, and development funds.

Workforce

- Endorse the full recommendations of the Long-Term Services and Supports Workforce Development Strategic Plan.
<http://www.cga.ct.gov/coa/pdfs/publications/2012/workforce%20plan%202.27.12.pdf>