Public Testimony

Good afternoon,

My name is Leah Jones and I am currently the Vice President of the Indiana Association for Adult Day Services board, also known as IAADS. I want to thank you for this opportunity to speak today. This is an honor and a responsibility on both a macro and micro level. It is an honor to be able to actively participate in the democratic process. It is a responsibility because it directly effects the people that I serve on a daily basis. On a macro scale, it effects the forty-nine adult day centers that are operating within our state. On a micro scale, I work at Joy's House at Uindy in the role of Family Care Manager, and that is when, and where I see the effects; up close and personal. I also wanted to share that I have twenty years’ experience working with an aging and disabled population. My experience has been in nursing homes, assisted living facilities, sub-acute rehab, acute rehab settings and for the last 13 years within adult day service.

There were several questions or talking points that were asked of people to answer during this testimony. The first talking point was to evaluate the current system of services. This is to determine which services provide the most appropriate use of resources.

Adult day services are a viable option for Hoosiers who want to keep their loved one at home despite a life changing diagnosis. It is also a service that has a potential for growth within our state. Adult day services provide a safe environment for people who are living with Alzheimer's disease, dementia, Cardiovascular disease, Parkinson's disease, pulmonary disease, developmental disabilities or a physical disability. Every weekday in our state there are 1,123 people who attend an adult day center. This number reflects an increase of 4% of people attending adult day centers in just one year. This percentage of people who utilize adult day services has and will steadily increase as our population ages.

Adult day services offer a wide range of benefits to the person who attends the center. The person who attends the center receives a chance to socialize with other people in the community. This sounds like a simple and easy thing but for someone who is living with a life changing diagnosis it is everything. There are many obstacles put in the path of someone who is dealing with cognitive or physical changes and adult day services help to remove or eliminate them all together. We give people a chance to feel needed and valued again. We do this in several ways. We provide person centered care during the day, providing group activities that are designed for abilities and interest, making items for other people who might be in a homeless shelter, doing outings, having a fishing tournament at the center, bringing in students from high schools, and universities within our state. Adult day centers also provide meals and snacks during the day. This gives the caregiver peace of mind knowing that their loved one ate something nutritious during the day. Again, it sounds like a simple thing but for our families it is a big deal. This takes a portion of the worry off the plate of the caregiver to know that when Mom attends ABC center she is going to have a well-balanced lunch and possibly breakfast and an afternoon snack. Several centers in the state are able to provide transportation to and from the center. This is a huge benefit to the individual and their family. The person attending the center gets to reclaim a portion of their independence by riding the bus and the family member knows that their loved one is attending the center.
Adult day services often have a benefit that frequently extends beyond the person receiving care. Families are able to stay intact because they have support from an adult day service. Medicaid waiver helps to make this possible for many families in our state. The care and support of each individual living with a life changing diagnosis is estimated at $82,000 per year. Adult day centers also provide opportunities for the caregiver. Those opportunities might come in the form of respite, educational opportunities, or the opportunity to maintain their employment. Some centers in the state offer free Saturdays or support groups. Adult day centers take a look at the whole dynamic of the caregiving process.

Adult day services are funded by a variety of sources. All centers accept private pay but as an industry we know that we must have varied funding streams. The second largest payer source in Indiana is Medicaid waiver. Centers in our state accept the aged and disabled waiver, the traumatic brain injury waiver, the family support waiver and the community integration and habilitation waiver. Twenty-nine centers accept either CHOICE or Title III funding. Twenty centers currently receive VA funding. Eleven centers are United Way agencies. Many non-profit centers also seek grants from varied sources and have fundraisers to keep their doors open to their families. Other centers offer sliding scale for private pay participants or offer scholarship options to those families presenting with a financial need.

Delay of an individuals’ admittance to a nursing home is a positive thing for all parties involved. The person living with a life changing diagnosis gets to stay in their own home longer. Families stay together and the state saves money by utilizing the financial resources in a cost-effective manner. Adult day services helps to delay that entry into a nursing home.

These are just some of the reasons that adult day services are a viable and appropriate use of resources.

The second point was in regards to the study of the eligibility assessment process, including the functional and financial assessment process, for home and community based services to determine how to streamline the process to allow access to services in a time frame similar to institutional care.

The eligibility assessment process could be improved. It is similar to any process that needs to be evaluated on a routine basis and updated accordingly. The eligibility process is a two-part process. The individual must qualify and obtain traditional Medicaid. Then, they are assessed by a case manager from one of the area agency on aging to see if they qualify for the level of care needs identified by the appropriate waiver. There is a lag time within this process. Several member centers in the state have experienced a delay recently from 6 months to almost a year for people becoming eligible for waiver benefits. This lag time puts strain and stress on the person who needs services, the families who are desperately trying to keep their loved one at home and the provider. The person who needs services and their families often times cannot pay privately for the services even at a center that offers scholarship or a sliding scale. Improvement to this process would also help to improve the quality of long term care support services within our state. I know that none of us were happy or pleased to be 51st on the AARP ranking of long term care services.

The third point was in relationship to options for individuals to receive services and supports appropriate to the individual needs in a cost effective and high-quality manner that focuses on health and social outcomes.
Adult day centers by design are focused on health and social outcomes. One of the reasons someone attends an adult day center is because they have health needs. These health needs range from depression to complex levels health needs. We provide care for people with blood sugar issues, trachea care, incontinent episodes, feeding issues, seizures and a myriad of other health needs. A centers level of health or medical intervention is determined by the level of care they are certified at by the FSSA. There are three levels of care that a center can be qualified. Each level has an increase in the standards of health services it can provide.

Another reason that someone attends an adult day center is for the social aspect of the daily programming. Where else can you go to play cards, have an indoor snowball fight, create a beautiful piece of artwork, listen to your favorite music, pull pranks on the staff and laugh while facing some of life’s most difficult moments.

At an association level, we have recently launched a quality accreditation program. This process evaluates Indiana centers against national benchmarks of key quality indicators for adult day centers. Health and social outcomes are emphasized in the quality accreditation standards. It also allows centers in the state to have an affordable option to an accreditation process. We live in a world where consumers and reimbursement agencies want to see surveys, accreditations and certifications. By offering this as a state association we are giving smaller adult day centers that ability to compete with other options for care.

The fourth point discuss the evaluation of the adequacy of reimbursement rates to attract and retain a sufficient number of providers, including a plan to regularly and periodically increase reimbursement rates to address increased costs of providing services.

The reimbursement rates for adult day services has not been reviewed or increased since January of 2014. The increase at that time went from twelve dollars an hour to twelve dollars and twenty-four cents an hour. Our reimbursement rate is actually calculated in fifteen-minute increments at a rate of $3.06. The reimbursement rate does not change or increase based on the care needs of the person attending the center. This means that providers who care for a person who is living with dementia but can toilet and feed themselves and also provide care for a person who is in a wheelchair that needs to be mechanically lifted out for toileting and feed via a feeding tube receive the same amount of reimbursement. Informal surveys of association members have put the true cost of providing quality care around $20.00 per hour. This is when you factor in staffing for the level of acuity, meeting meal prep and serving standards, paying for the physical building, and paying for the education level of the staff required to provide quality care. A trend we have noticed at a state level is that the competition for quality and qualified staff has increased due to the state’s return to lower unemployment rates.

Also on the subject of reimbursement rates, adult day services provided under the waiver programs cost the state less money than institutional level of care. We provide the chance for families to avoid or delay the decision to move their loved one into a nursing home.

The final point was in regards to the migration of individuals from the aged and disabled waiver to amended waivers, new waivers, the state Medicaid plan or other programs that offer home and community based services.
IAADS is aware that the state has no intention of discounting the aged and disabled waiver. This waiver is vital for the thirty-eight out of the forty-nine centers that are current providers. As I mentioned earlier, waivers are the second largest payer for adult day centers in our state. A complete discontinuing of this waiver would have an adverse and devastating effect on families and providers. The aged and disabled waiver is relied on by countless families as the means to keep their loved on in their own homes and the family intact. The effect on providers would be that they would be able to serve less Hoosiers who could benefit and that some providers would have to close because waiver payment is a pivotal part of what keeps their doors open. A modernization of the waiver is in order but not a complete discontinuation. Improve the entry points for families, find ways to bring more providers into the playing field, help to educate the referral sources or change the name if you feel it is necessary but we ask not to remove this type of resource option from Hoosier families. Modernization of this waiver would also to help improve the score that Indiana received on the most recent AARP survey of long term care services. We are a state that takes care of our own. Give providers the tools to continue to take care of people in their communities.

Thank you for your time and this opportunity to speak.