

MEMORANDUM

To: The Honorable Harris B. McDowell, III, Co-chair
The Honorable Melanie George Smith, Co-chair
Joint Finance Committee Members

From: Elizabeth G. Booth, Esq. on behalf of the following organizations:
State Council for Persons with Disabilities
Developmental Disabilities Council
Governor's Advisory Council for Exceptional Citizens

Date: February 7, 2017

Re: Division of Services of Aging & Adults with Disabilities ("DSAAPD") FY 2018 Budget

Please consider this memorandum a memorialization of the oral testimony presented by Elizabeth G. Booth, Esq. on behalf of the State Council for Persons with Disabilities ("SCPD"), the Developmental Disabilities Council ("DDC"), and the Governor's Advisory Council for Exceptional Citizens ("GACEC"). Today we wish to focus our comments on attendant services provided by DSAAPD.

Attendant Services

The Division administers a Personal Attendant Services (PAS) program through two non-profit contractors, Easter Seals and JEVS Family Services.¹ Through this program, low-income adults with disabilities such as Cerebral Palsy, Multiple Sclerosis, and Quadriplegia are connected with personal care attendants who assist them with activities such as bathing, shopping, housekeeping, transportation, and meal preparation.² These services are subsidized, allowing participants to seek employment, attend school, or avoid institutionalization. This program also encourages autonomy through self-direction by participants; participants choose their attendants and act as actual employers of their attendants.³ In 2015, the General Assembly passed H.B. 110, which made updates to the PAS program's enabling statute reorganizing the scheme of services for greater flexibility based on individual need, and further encouraging self-direction by participants.⁴

Data from consumer satisfaction surveys administered earlier this year by provider agencies indicates that participants have provided overwhelming positive responses regarding their experiences with the PAS program:

¹ Program description by DSAAPD is included as Attachment A.

² See Attachment A.

³ See, e.g., DSAAPD FY 18 Application to Delaware Health Fund, at p. 3 (included as Attachment B). PAS is unique among DSAAPD programs in that it is self-directed by the individual consumer. *Id.*

⁴ HB 110 was signed into law by Governor Markell on June 30, 2015, and all revisions to the statute are codified at 16 Del. C. § 9401 et seq.

INQUIRY	EASTER SEALS PERCENTAGE OF FAVORABLE (AGREE OR STRONGLY AGREE) SURVEY RESPONSES	JEVS PERCENTAGE OF FAVORABLE (AGREE OR STRONGLY AGREE) SURVEY RESPONSES
SATISFACTION WITH QUALITY OF CARE	100%	100%
AGREEMENT WITH SERVICE PLAN	100%	100%
ATTENDANTS ON-TIME	100%	100%
STAFF COURTEOUS	100%	100%
STAFF ACCESSIBLE	100%	100%
STAFF RESPONSIVE TO QUESTIONS	100%	95.5%
CLIENTS WOULD RECOMMEND PROVIDER	96%	100%
CLIENTS WOULD RECOMMEND PROGRAM	100%	100%
LIFE IMPROVED BY PROGRAM	100%	100%

Individual consumer comments are also very positive:

- "We greatly appreciate your assistance."
- "I have dealt mainly with _____, and his assistance and professionalism have been OUTSTANDING."
- "[Support broker] is great."
- "Comfortable with my attendant. Very helpful. Very timely."
- "This is a great program. More people should know about it."

As of February 2017, the waiting list for the PAS program is 243 people.⁵ Most of those individuals have been designated as “high priority.”⁶ In addition to funds requested from the Delaware Health Fund, DSAAPD is seeking money from the General Fund to serve 75 individuals through the PAS program.⁷ Given the program’s success and ongoing demand for services, we recommend funding that is at least equivalent to last year’s budget allocation. Personal attendant care services are also cost-efficient; the average cost per participant in the PAS program is approximately \$13, 220 per person.⁸ The average annual cost of nursing home care in Delaware, on the other hand, is approximately \$103, 668.⁹ The PAS program and other community-based services have allowed for the diversion of the majority of applicants for nursing home services.¹⁰

Thank you for your consideration.

⁵ Updated numbers provided to the Disabilities Law Program by DSAAPD via e-mail. As of DSAAPD’s FY 18 application to the Delaware Health Fund, submitted in September 2016, the waiting list was up to 269, an increase from 179 at the same point in 2015. See Attachment B.

⁶ DSAAPD FY 18 Application to Delaware Health Fund, at 4.

⁷ *Id.*

⁸ In the DSAAPD FY 18 Application to Delaware Health Fund, DSAAPD approximated that 43 participants would be served with the \$568,500 requested. Actual costs may vary by participant.

⁹ See DHSS Admin. Notice DMMA-06-2016 (January 22, 2016), included as Attachment C.

¹⁰ According to DSAAPD’s presentation to the Joint Finance Committee for the FY 14 budget in February 2013, 88% of referrals for admission were diverted in the previous two years.

DHSS Menu

<http://delaware.gov>

Attendant Services

☰ Services for Aging and Adults with Physical Disabilities Menu

Home [\(/dhss/dsaapd/\)](#)

About ▶

Services ▶

Information ▶

Description Attendant Services is a self-directed program in which participants serve as employers of their own attendants. The service provides support to persons with disabilities who need assistance with the functions of daily living, self-care or mobility. Specific supports may include help with activities such as bathing, dressing, personal hygiene, meal preparation, shopping, housekeeping, transportation, communication, on-the-job functions, or other related tasks.

Eligibility Delaware residents aged 18 and older with disabilities who meet specific financial and functional criteria

Availability Statewide

Info or Enrollment Contact the Delaware Aging and Disability Resource Center (ADRC) ([contact.html](#)) by phone or email.

More Resources [Guide to Services for Older Delawareans and Persons with Disabilities \(files/aging_and_disabilities_guide.pdf\)](#)
[Delaware Aging and Disability Resource Center Service Provider Search](#)
<http://www.delawareadrc.com/ADRCSearch/Search.aspx>

Related Links [Applied Self Direction \(http://www.appliedselfdirection.com/\)](http://www.appliedselfdirection.com/)
[National Resource Center for Participant Directed Services \(http://www.bc.edu/schools/gssw/nrcpds\)](http://www.bc.edu/schools/gssw/nrcpds)
[Family Caregiver Alliance Hiring In-home Help Factsheet \(https://caregiver.org/hiring-home-help\)](https://caregiver.org/hiring-home-help)



(1)

[About the Department \(/dhss/main/about.htm\)](#)
[Secretary's Letter \(/dhss/admin/welcome.html\)](#)
[Newsroom \(/dhss/newsroom.html\)](#)
[Divisions & Programs \(/dhss/main/dhssdivs.htm\)](#)
[Facts & Figures \(/dhss/main/facts_figures.html\)](#)
[State Jobs \(http://www.delawarestatejobs.com/\)](http://www.delawarestatejobs.com/)

Attachment A

[Calendar \(/dhss/calendars.html\)](#)
[Delaware Health Care Commission \(/dhss/dhcc/\)](#)
[DHSS Administration Contact \(/dhss/contact.html\)](#)

[Publications & Reports \(/dhss/pubs.html\)](#)
[Aging and Physical Disabilities \(/dhss/dsaapd/\)](#)
[Child Support Services \(/dcss/\)](#)
[Social Services \(/dhss/dss/\)](#)
[Long Term Care Residents Protection \(/dhss/dltcrp/\)](#)
[Management Services \(/dhss/dms/\)](#)
[Medicaid & Medical Assistance \(/dhss/dmma/\)](#)
[Public Health \(/dhss/dph/\)](#)
[Stockley Collaborative \(/dhss/admin/stockleycollaborative.html\)](#)

[Developmental Disabilities Services \(/dhss/ddds/\)](#)
[State Service Center \(/dhss/dssc/\)](#)
[Substance Abuse \(/dhss/dsamh/\)](#)
[Mental Health \(/dhss/dsamh/\)](#)
[Visually Impaired \(/dhss/dvi/\)](#)
[Councils and Committees \(/dhss/main/counc_comm.html\)](#)
[Health Information & Statistics \(/dhss/main/health.htm\)](#)
[Volunteer Delaware \(<http://www.volunteerdelaware.org>\)](#)
[FOIA Request Form \(/dhss/foia.html\)](#)

STATE OF DELAWARE
HEALTH FUND APPLICATION
FISCAL YEAR 2018

Applications are only being accepted from programs that received Health Fund money in FY 17 or were recommended by the Health Fund Advisory Committee to receive funding in FY 17.

FUNDING REQUESTS ARE DUE BY 4:30 PM, Monday, SEPTEMBER 12, 2016.

Requests should be submitted electronically to deborah.gottschalk@state.de.us and joanne.finnigan@state.de.us . Please send as a PDF or Image Writer file with your organization's name at the beginning of the file name. (Please remember to sign the Agreement on page 5).

Please direct questions to Debbie Gottschalk, Chief Policy Advisor, DHSS, Phone: (302) 255-9038; email: deborah.gottschalk@state.de.us or Joanne Finnigan, Phone: (302) 255-9880; email: joanne.finnigan@state.de.us .

Agency Information

1. Official Name of Organization:

State of Delaware, Department of Health and Social Services, Division of Services for Aging and Adults with Physical Disabilities

2. Date of Incorporation or Date Established by Law:

1965

3. 9-digit Federal Employer Identification No.:

51-6000279

4. Address of Management Office:

1901 N. DuPont Highway
Herman Holloway Campus
Main Building, 1st Floor Annex
New Castle, Delaware 19720

Attachment B

5. Name, Phone Number, and E-mail Address of Primary Contact Representative:

Al Griffith, 255-9355, Albert.Griffith@state.de.us

6. Did your agency receive Health Funds in Fiscal Year 2017? **Yes.** If yes, how much?

\$568,500

Program Information

1. Please provide a one paragraph summary of the program.

The goal of the Personal Attendant Services Program (PAS) is to provide attendant services to eligible adults with physical disabilities, enabling them to work and/or avoid living in highly supervised institutional settings. The PAS is intended to maximize independence and autonomy for participants. An important aspect of the Personal Attendant Services Program is self-direction. Consumers select their own attendants and direct attendant care in a manner which is consistent with their own personal lifestyle and preferences. Participants serve as the actual employers of their attendants by hiring, training, scheduling, and directing work activities, and performing other related oversight functions. Participants may act through a guardian or appointed representative. Currently, Personal Attendant Services is the only self-directed service administered by the Division of Services for Aging and Adults with Physical Disabilities (DSAAPD).

2. Why is there a need for the program for which your agency is seeking Health Funds?

The DSAAPD is committed to meeting the needs of the individuals it serves through the development and delivery of consumer-driven services. These services maximize independence through individual choice in the least restrictive environment possible, enabling individuals to continue living active and productive lives and protecting those who may be vulnerable or at risk. This is consistent with DSAAPD's mission to improve and maintain the quality of life for Delawareans who are elderly or who are at least eighteen years of age with physical disabilities.

The Personal Attendant Services program is an important component of the community-based long-term care systems supported by DSAAPD. The program provides personal care and other approved support services for adults with physical disabilities who need assistance to enable them to live in their own homes and communities and to carry out functions of daily living, self-care, and mobility. Guidelines for the Personal Attendant Services program were established through the Community-Based Attendant Services Act (HB 30), which was signed into law in 2001. The law, 16 Del.C. Ch. 94, can be reviewed online at <http://delcode.delaware.gov/title16/c094/index.shtml>

The Division contracts for the provision of Personal Attendant Services on a statewide basis. The contracted attendant services agency provides support to participants in a number of important ways. For example, the provider agency carries out person-centered planning with participants to help them identify needs and preferences. The provider agency recruits attendants and maintains a roster from which participants can select attendants who best meet their needs. In addition, the agency provides basic training to attendants and assists participants in billing, tax requirements, and other mandates required of participants when hiring attendants.

Originally funded with State general funds, the program was later expanded with the addition of funds available through the State's portion of the Tobacco Settlement.

3. What are the program goals and objectives?

- a. To provide personal attendant services to promote self-sufficiency, self-reliance, and a sense of personal responsibility among participants,**
- b. To minimize the likelihood of institutionalization and maximize the potential for independent living of individuals with disabilities,**
- c. To reduce the barriers to participation in common community-based activities.**

4. Please describe the target population affected by the program.

The target population consists of adults with low incomes who require long term care supports and services to remain in the community.

5. Where will the services be provided?

The Personal Attendant Services program is statewide and provides services in the consumer's home or other community-based settings.

6. What other agencies or organizations provide services similar to those of your agency, if any? How do you propose to work with the agencies that perform similar services?

Home health agencies provide personal care services that are used as supplementary service for some recipients of attendant care. DSAAPD will continue to coordinate scheduling and service delivery issues with these agencies.

Funding Request

1. What level of funding is your agency requesting for FY 2018?

\$568,500

2. Is the requested funding a one-time request or do you anticipate the need for on-going funding? Please explain.

The need for this funding is ongoing. It is expected that in FY 2018, Health Funds will provide attendant services for approximately 43 participants and general funds will serve an additional 75 persons for a total of 118 participants. In addition, there are currently 269 persons on the waiting list (up from 179 at this time last year), including 214 individuals designated as high priority.

3. Please submit a proposed line item budget (i.e., personnel, contractual, travel, supplies, etc.) explaining how you intend to use **FY 2018 Health Funds**. You will be asked to submit a year-end expenditure report based on the actual amount allocated in the budget.

Contractual	\$568,500
Personnel	\$0
Travel	\$0
Supplies	\$0

4. If you received Health Funds in **FY 2016**, please submit a year end expenditure report detailing how those funds have been used.

FY 2016 funds were expended as follows:

- **Attendant Care** **\$603,800**
- **Caregiver Support** **\$141,500**
- **Respite Care** **\$17,000**

5. Does your agency receive funding for this project from any of the following sources? If so, please provide the name of the funding source and the amount of funding received.

- State Funds (i.e., General Funds, ASF, Grant-in-Aid): **\$1,107,016**
- Federal Funds (including federal grants): **0**
- Other Funds (i.e., corporate grants/donations): **0**

6. In addition to sources listed in the answer to question 5, does your agency receive funding from any of the following sources? If so, please provide the name of the funding source and the amount of funding received.

- State Funds (i.e., General Funds, ASF, Grant-in-Aid): **\$21,637,458**
- Federal Funds (including federal grants): ~~**\$11,586,212**~~
- **Social Service Block Grant** **\$1,124,322**
- **Medicaid** **\$440,000**
- **Older Americans Act Title III B** **\$2,325,835**
- **Older Americans Act Title III C-1** **\$1,625,239**
- **Older Americans Act Title III C-2** **\$1,075,581**
- **Older Americans Act Title III D** **\$98,465**
- **Older Americans Act Title III E** **\$747,367**
- **Older Americans Act Title V** **\$1,846,110**
- **Older Americans Act Title VII (APS)** **\$23,759**

- Older Americans Act Title VII (Ombudsman) \$79,188
 - Nutrition Services Incentive \$466,497
 - Senior Medicare Patrol \$229,484
 - Aging & Disabilities Resource Center \$383,635
 - Lifespan Respite \$120,000
 - Lifespan Respite Expansion \$102,406
 - Alzheimer Disease Initiative \$898,324
- Other Funds (i.e., corporate grants/donations): Senior Trust Fund \$15,000

Program Evaluation

1. If you are currently receiving Health Funds, how have you evaluated your program's success at meeting the previously stated goals and objectives? Specifically, identify the performance measures you use and the corresponding results.

Division of Services for Aging and Adults with Physical Disabilities (DSAAPD) staff members monitor the Attendant Services program contracts to ensure that program goals are being met.

DSAAPD case managers provide oversight to ensure that services are delivered in accordance with individual care plans.

Recipients are surveyed annually regarding their satisfaction with the service. During the most recent program year, nearly all program participants indicated that the attendant services met their expectations, that they were satisfied with their interactions with staff, and that the staff members were responsive to their needs.

DSAAPD utilizes a tracking system which closely monitors service utilization. This system enables staff to accurately project service hour availability and allows for efficient use of existing resources.

2. If you are currently receiving Health Funds and did not meet your stated goals and objectives, how will you modify your program to meet the stated goals and objectives?

DSAAPD has met our current goals and objectives.

Agreement

The Division of Services for Aging and Adults with Physical Disabilities agrees to the following as a condition of receiving Health Funds:

1. To submit funding requests on the forms provided at the times designated and to participate in the allocations review process.
2. To provide an annual certified audit and other financial statements, service figures, and reports or audits as required by the State of Delaware.
3. To cooperate with other organizations, both voluntary and public, in responding to the needs of the community and in promoting high standards of efficiency and effectiveness.
4. To submit accurate information with this application. NOTE: Any misstatement of facts may forfeit any remaining balance of grants due and/or future grants.
5. That this agency meets the criteria established by the Health Fund Advisory Committee and uses any funds appropriated by the General Assembly in accordance with those provisions and any additional restrictions that may be set forth in State Law.
6. This agency will provide the Health Fund Advisory Committee with financial or programmatic information upon request.

This agreement has been read and approved on:

September 2, 2016

(Date)

By: Lisa Bond

(Name)

Director

(Title)

Dana Neumann

(Name)

CEO

(Title)

Health Fund Project Criteria

In accordance with Section 137 of Title 16 of the Delaware Code, moneys from the Delaware Health Fund shall be expended for Delaware citizens in accordance with any 1 or more of the following:

- (1) Expanding access to healthcare and health insurance for citizens of Delaware that lack affordable healthcare due to being uninsured or underinsured;
- (2) Making long-term investments to enhance healthcare infrastructure which meets a public purpose;
- (3) Promoting healthy lifestyles, including the prevention and cessation of the use of tobacco, alcohol and other drugs by the citizens of Delaware;
- (4) Promoting preventative care for Delawareans in order to detect and avoid adverse health conditions, particularly cancer and other tobacco-related diseases;
- (5) Working with the medical community by providing funding for innovative and/or cost effective testing regimens to detect and identify lesser-known but devastating and costly illnesses, such as sarcoidosis and hemochromatosis, fibromyalgia, lupus, lyme disease and chronic fatigue immune deficiency syndrome;
- (6) Promoting a payment assistance program for prescription drugs to Delaware's low-income senior and disabled citizens who are ineligible for, or do not have, prescription drug benefits or coverage through federal, state, or private sources;
- (7) Promoting a payment assistance program to Delaware's citizens who suffer from debilitating chronic illnesses, such as diabetes and kidney disease, which are characterized by onerous recurring costs for equipment, tests and therapy; and/or
- (8) Such other expenditures as are deemed necessary in the best interests of the citizens of Delaware provided they shall be made for health related purposes.

STATE OF DELAWARE



DELAWARE HEALTH AND SOCIAL SERVICES
DIVISION OF MEDICAID & MEDICAL ASSISTANCE

POLICY, PLANNING & QUALITY
MEMORANDUM

REPLY TO
ATTN. OF: Administrative Notice DMMA-06-2016

TO: All DMMA Staff

DATE: January 22, 2016

SUBJECT: Nursing Home Private Pay Rate

BACKGROUND

Section 1917(c) of the Social Security Act stipulates that a period of ineligibility must be assessed when a Medicaid applicant has transferred assets for less than fair market value. The average monthly cost to a private pay patient of a nursing facility is used to determine this period of ineligibility.

Note: This is not the average Medicaid per diem rate.

DISCUSSION

The daily average usual and customary nursing facility charge for a private pay patient is calculated annually. This amount is then rounded up or down, based on normal rounding rules. A monthly rate is obtained by multiplying the rounded daily rate by 30.42 days. These figures are used to calculate the period of ineligibility.

Effective January 1, 2016 the daily and monthly rates are:

Average daily cost to a private pay patient of a nursing facility in Delaware	\$ 284.00
Average monthly cost to a private pay patient of a nursing facility in Delaware	\$8639.00

ACTION REQUIRED

DMMA staff should use these figures when calculating a period of ineligibility for applications filed on or after January 1, 2016. Policy DSSM 20350.3 and DSSM 20350.3.1 should be reviewed.

The eligibility system will be updated with these figures.

DIRECT INQUIRIES TO

Kathleen J. Mahoney
(302) 424-7214

DATE

Glyne Williams, Chief
Policy, Planning & Quality
Division of Medicaid & Medical Assistance

Attachment C