Testimony to HCBS Committee

Shawn Sullivan, Secretary
August 23, 2011
Nursing Home Caseload

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<tbody>
<tr>
<td>Average Monthly Caseload</td>
<td>10,508</td>
<td>10,581</td>
<td>10,809</td>
<td>10,442</td>
<td>9,939</td>
<td>9,990</td>
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<tr>
<td>Average Monthly Expenditure</td>
<td>$2,693</td>
<td>$2,800</td>
<td>$2,840</td>
<td>$2,861</td>
<td>$3,464</td>
<td>$3,663</td>
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- Current caseload numbers are trending generally downward, however average expenditures have increased.

- Money Follows the Person and Community Transition Opportunities have transitioned 158 individuals to the community since October of 2010.
## Senior Care Act

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<tbody>
<tr>
<td>Total Unduplicated Customers</td>
<td>6,060</td>
<td>5,696</td>
<td>5,113</td>
<td>5,100</td>
<td>5,100</td>
</tr>
<tr>
<td>Total expenditures (including local match)</td>
<td>$8,800,000</td>
<td>$8,823,413</td>
<td>$7,886,412</td>
<td>$7,036,794</td>
<td>$4,946,587*</td>
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- KDOA restored the $1.3 million in reduced resources from internal agency savings.

- The Senior Care Act covers these services:
  - Homemaker
  - Attendant Care
  - Case Management
  - Chores

- Senior Care Act provides services to individuals in their homes and is designed to prevent premature nursing home placement. There is a sliding fee scale based upon self-reported income and liquid assets for individuals served by this program.

* SGF Only
Older Americans Act
Nutrition

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<tbody>
<tr>
<td>Total Meals Served</td>
<td>3,467,695</td>
<td>3,494,987</td>
<td>3,551,518</td>
<td>3,428,410</td>
<td>3,428,410</td>
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<tr>
<td>Total Expenditures</td>
<td>$5.17</td>
<td>$5.41</td>
<td>$5.40</td>
<td>$5.40</td>
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• KDOA restored the $300,000 in reduced resources from internal agency savings.

• This program provides grants to Area Agencies on Aging for the provision of nutrition services in either a congregate setting or in the homes of older Kansans who are homebound. Federal, state and special revenues at the state level are combined with local funds to support the program. Customers also share in the cost of nutrition service by voluntarily contributing toward the cost of their meals.
Home and Community Based Services
Frail and Elderly Waiver

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<tbody>
<tr>
<td>Average Monthly</td>
<td>5,765</td>
<td>5,706</td>
<td>5,667</td>
<td>5,823</td>
<td>5,885</td>
</tr>
<tr>
<td>Customers</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Actual Expenditure</td>
<td>$26,246,366</td>
<td>$25,151,011</td>
<td>$21,737,877</td>
<td>$24,752,901</td>
<td>$31,936,854</td>
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- $2.5 million reduced resources has been made up through internal agency savings.

- Recent changes in HCBS- FE waiver:
  - Standard measures on times per task given to case managers. This is not a cap on services.
  - Services such as housekeeping, cooking and grocery shopping are no longer allowed to be paid for, if a caregiver resides with a customer. If caregiver is unwilling or unable, an agency will direct those services.
  - Telehealth implementation October 1, 2011. KDOA views this as a long-term cost saving idea.
  - FMS implementation November 1, 2011. This system is replacing the current payroll agent system used for participants of the HCBS waivers.

August 23, 2011
HCBS Philosophy

• KDOA recognizes the importance of HCBS in our aging network and fully supports this program.

• KDOA will also continue to look at ways to make our HCBS support network more robust, especially in rural areas of Kansas.
## Money Follows the Person

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<th>FY 2008</th>
<th>FY 2009</th>
<th>FY 2010</th>
<th>FY 2011</th>
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<tbody>
<tr>
<td>Number of HCBS FE Customers Transitioned</td>
<td>6</td>
<td>28</td>
<td>64</td>
<td>32</td>
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<tr>
<td>Service Average</td>
<td>N/A</td>
<td>$3,729</td>
<td>$2,399</td>
<td>$2,569</td>
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- Money Follows the Person - Frail Elderly Covers the Cost of:
  - Adult Day Care
  - Assistive Technology
  - Attendant Care
  - Personal Emergency Response System
  - Nurse Evaluation
  - Comprehensive Support
  - Community Bridge Building
  - Transition Services ($2,500 max.)
  - Transition Coordination Services
Money Follows the Person

• A Money Follows the Person workgroup has been formed to overcome the barriers that have been identified, including:

  • Transportation
  • Housing
  • Education
  • Mental health needs
  • Assisted Living Facility reimbursement
  • Lack of home health