



FOR IMMEDIATE RELEASE
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National Home Healthcare Leaders Applaud Ohio Proposal for Coordinated Care to Reduce Costs, Improve Patient Care

*As lawmakers look to improve healthcare delivery, Ohio plan encourages
the use of clinically advanced and cost-effective home healthcare.*

WASHINGTON, DC – The Partnership for Quality Home Healthcare – a national coalition representing more than 1,500 community- and hospital-based home health agencies nationwide – today praised the Integrated Care Delivery System (ICDS) proposal submitted by Ohio’s Office of Health Transformation to better coordinate care for the state’s sickest and most costly Medicare and Medicaid patients. As part of its proposal, Ohio will enable more seniors to receive high-quality, cost-effective medical care in their own homes.

Ohio’s ICDS plan would change the way healthcare is delivered and coordinated for the state’s Medicare and Medicaid beneficiaries. The plan aims to more effectively coordinate the Medicare and Medicaid benefits received by dually-eligible Ohioans to ensure the delivery of the most clinically appropriate and cost-effective care. Tellingly, one of the cornerstones - and measures for success - of the pilot program is its ability to increase use of home healthcare by Ohio’s 182,000 Medicare and Medicaid patients.

“We applaud Ohio’s leaders for advancing innovative pro-senior healthcare delivery reforms,” said Eric Berger, CEO of the Partnership for Quality Home Healthcare. “Enabling seniors to remain at home allows for better chronic condition management, improved outcomes, and lower costs. This plan is right for Ohio patients and Ohio taxpayers.”

The Partnership has also praised Ohio Governor John Kasich (R-OH) and the Ohio PASSPORT program, which provides comprehensive support so that seniors can receive care in their home instead of costly institutional settings. Governor Kasich has stated, “I can’t think of anything more important to a senior than to be able to stay in their home with assistance rather than being put in a facility that they’re not comfortable with.”

“Ohio’s programs are models for improving healthcare delivery and reducing costs, and we encourage lawmakers in Washington – and in all states – to consider how they can leverage similar reforms to strengthen our healthcare system nationwide,” added Berger.

Analysis of Medicare spending illustrates the significant impact that home healthcare can have on healthcare spending. A 2011 report by Avalere Health, LLC determined that home healthcare use by patients with chronic illnesses resulted in a \$2.81 billion reduction in post-hospitalization Medicare Part A spending and an estimated 20,426 fewer hospital readmissions between October 2006 and September 2009.

Skilled home healthcare is clinically advanced, cost-effective and patient preferred. Research shows that 89 percent of American seniors prefer to age in place, stay home and remain independent. Nationwide, approximately 3.4 million Medicare beneficiaries receive skilled home healthcare services to treat illnesses related to acute, chronic or rehabilitative needs.

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The Partnership for Quality Home Healthcare was established in 2010 to assist government officials in ensuring access to quality home health services for all Americans. Representing more than 1,500 community- and hospital-based home health agencies nationwide, the Partnership is dedicated to developing innovative reforms to improve the program integrity, quality, and efficiency of home healthcare for our nation's seniors. To learn more, visit www.homehealth4america.org.



Monday, April 2, 2012

AARP Ohio statement on dual eligible demonstration proposal

AARP Ohio pleased with dual eligible demonstration proposal

“AARP Ohio is pleased with the dual eligible demonstration proposal being submitted by the Department of Job and Family Services Office of Ohio Health Plans” stated Jane Taylor, state director for AARP Ohio.

“During the past several months, AARP staff and other interested parties have interacted with Governor's Office of Health Transformation Director Greg Moody and Ohio Medicaid Director John McCarthy and their staff offering views and concerns on a highly complex proposal with the goal of ensuring high quality care to all Ohioans needing long-term care services in a setting of their choice,” Taylor continued.

“As articulated in the proposal issued today by ODJFS, there are many details and decisions which remain. AARP will continue to work with the staff of the Governor, and the legislature as appropriate, to provide even higher quality care to all Ohioans needing long-term care services.”

“We are taking a first significant step to meeting the coming demands of an older population boom and striving to keep the state’s ability to provide these needed services within the state’s means. The consumer is and will continue to be our focus,” concluded Taylor.

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Ohio Association of Area Agencies on Aging
Advocacy. Action. Answers on Aging.

Larke Recchie
Executive Director

April 2, 2012

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Directors Moody and McCarthy,

The Ohio Association of Area Agencies on Aging supports the Integrated Care Delivery System (ICDS) proposed by the Governor's Office of Health Transformation. Our support is based upon our understanding that the features described below are part of OHT's application to the Centers for Medicare and Medicaid Services (CMS) for an ICDS demonstration project. This project is designed to integrate Medicare and Medicaid funding of medical, behavioral health, and long-term care services for people who are dually eligible in an effort to improve outcomes and better manage costs.

As proposed, the ICDS demonstration will build on the longstanding success of Ohio's Area Agencies on Aging as the regional administrators and care managers of the PASSPORT, Assisted Living, and Choices Medicaid waivers. During the process of gathering consumer input on the proposed ICDS, consumers and their family caregivers throughout the state made it clear that the services and care management they receive from their Area Agency on Aging are very important to them and work well. As administered by the AAAs, via home and community services, PASSPORT has allowed individuals to remain in their own homes and reduced the percentage of long-term care recipients who are in nursing homes from 91 percent to 58 percent, while maintaining a consumer satisfaction rating of more than 99 percent.

Under the ICDS proposal:

- AAAs will retain access ("front door") services, which include information and assistance; screening; assessment; pre-admission screening and resident review (PASRR); level-of-care determination; long-term care consultation and care plan development services throughout the state. These activities will be provided by AAAs throughout the state, both inside and outside the ICDS geographic areas. The state will adequately fund the AAAs to perform these needed functions and services. It is important for the public to continue to

have a central, visible and objective source of information and connection to community resources. This role has been played by Ohio's Area Agencies on Aging for over 30 years and who receive some 300,000 calls annually from people seeking help for older adults and individuals with disabilities.

- All managed care companies will be required to subcontract with Area Agencies on Aging and other entities outside managed care entities to provide home and community long term care management services. ICDS members in need of long-term services and supports who are existing AAA clients at the time of transition will remain with the Area Agency on Aging and their AAA service coordinator (care manager) unless they request a change to another entity as described above. Individuals over age 60 needing home and community based long-term services and supports who are not AAA clients at the time of enrollment in the ICDS, will be assigned to a service coordinator from the AAAs in their region if they do not choose another entity. This measure will ensure continuity of care for older adults currently enrolled in PASSPORT, Assisted Living or Choices. For new clients, this measure will allow them to benefit from the same effective system of care management.
- Area Agencies on Aging will offer the ICDS the opportunity to purchase other existing AAA services, such as provider network management that could control costs, and help people attain better health and better care.
- For care transitions and other U.S. Department of Health and Human Services (HHS) initiatives, Managed care organizations within the ICDS will be required to contract with organizations who are recipients of HHS funding for such initiatives.
- All the items referenced above will be in place for the entire three-year term of the waiver demonstration project.

The Ohio Association of Area Agencies on Aging appreciates the on-going dialogue with the Office of Health Transformation and Ohio Health Plans. This effort has helped craft a proposal that provides continuity and builds on the successful aging network that Ohio seniors and their families have relied upon. We look forward to continuing to work collaboratively to develop a successful Integrated Care Delivery System that is responsive to both consumers and taxpayers.

Sincerely,

Larke Recchie