



City of Carson Report to Mayor and City Council

November 1, 2011
New Business Consent

SUBJECT: CONSIDERATION OF RESOLUTION NO. 11-128 STRONGLY URGING GOVERNOR BROWN AND OUR STATE LEGISLATORS TO RESTORE ADULT DAY HEALTH CARE AS A MEDI-CAL BENEFIT

Submitted by David C. Biggs
City Manager

Approved by David C. Biggs
City Manager

I. SUMMARY

On October 16, 2011 Mayor Dear and Councilmember Santarina attended an event at the Congresswoman Juanita Millender-McDonald Community Center in which Senator Lieu brought to their attention the fact that funding for adult day health care centers had been cut from the state budget.

More than 300 adult day health care centers are scheduled to close on December 1, 2011. Tonight the Council is asked to support Resolution No. 11-128 strongly urging Governor Brown and our state legislators to restore funding for adult day health care (Exhibit No. 1).

II. RECOMMENDATION

TAKE the following actions:

1. WAIVE further reading and ADOPT Resolution No. 11-128, "A RESOLUTION OF THE CITY COUNCIL OF THE CITY OF CARSON, CALIFORNIA, STRONGLY URGING GOVERNOR BROWN AND OUR STATE LEGISLATORS TO FIGHT TO RESTORE ADULT DAY HEALTH CARE AS A MEDI-CAL BENEFIT."
2. DIRECT staff to transmit an executed copy of the resolution to the office of Governor Jerry Brown, the office of Senator Bob Blumenfield, Senator Ted Lieu, Assembly Member Furutani, the City of Carson Senior Citizens Advisory Commission and Albert Chin Liaison for the County of Los Angeles Aging Advocacy Coalition.

III. ALTERNATIVES

TAKE another action the City Council deems appropriate.

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IV. BACKGROUND

The elimination of the entire adult day health care program as a Medi-Cal "optional benefit" was proposed by Governor Brown last January and approved by the Legislature in March as part of the larger package of spending cuts to close the enormous budget deficit. The elimination of adult day health care as a Medi-Cal "optional benefit" was the largest single sweeping reduction in health and human services in at least the last 15 years with the combined direct impact of tens of thousands of recipients, workers and hundreds of community-based providers - nearly all who face imminent closure, and for individual workers the loss of jobs and income for their own families in a matter of months. It is called a Medi-Cal "optional benefit" because it is a benefit or service that the federal government does not require the states to provide as part of their approved Medicaid program (called "Medi-Cal" in California). The program cost the State \$169 million in annual costs, which are matched by the federal government.

The current version of adult day health care as a Medi-Cal "optional benefit" is scheduled for elimination as of December 1, 2011 (the original date was September 1, 2011, but the Department of Health Care Services requested the effective date be delayed 90 days from that date to help with transition efforts.

AB 96 (Blumenfield D- San Fernando Valley) would have replaced the adult day health care program with an \$85 million alternative that would serve only the neediest patients, and convert it from Medi-Cal benefit to a program operated through a Medicaid waiver. AB 96 was the budget trailer bill that called for the creation of a new model of adult day health care would have kept the program alive through an alternative process however Governor Brown vetoed AB 96 this past July. Los Angeles County Board of Supervisors Mark Ridley-Thomas sponsored a resolution that passed in September and the Los Angeles Aging Advocacy Coalition has submitted a letter to Governor Brown explaining the immediate emergency threat to cities and counties should the closure of these centers take place (Exhibit Nos. 2 and 3).

Over 35,000 medically-fragile, elderly, and disabled Californians receive adult day health care services from over 300 adult day health care centers throughout the State as an alternative to being placed in nursing homes and other institutionalized care. Advocates for the elderly anticipate that the elimination of adult day health care and the closure of centers that offer the program will cost the State up to five times as much, as people that currently utilize the services will end up in emergency rooms, mental institutions, and nursing homes, and ultimately wipe out any savings it would have from eliminating the program.

V. FISCAL IMPACT

None.

VI. EXHIBITS

1. Resolution No. 11-128. (pgs. 4-5)
2. Los Angeles County Board of Supervisors Resolution "Transition Planning for Adult Day Health Care Cutbacks". (pgs. 6-9)
3. Letter from the Los Angeles Aging Advocacy Coalition to Governor Brown. (pgs. 10-11)

Document1

Prepared by: Lisa Berglund, Principal Admin. Analyst

TO:Rev091911

Reviewed by:

City Clerk	City Treasurer
Administrative Services	Development Services
Economic Development	Public Services

Action taken by City Council

Date _____ Action _____

RESOLUTION NO. 11-128

A RESOLUTION OF THE CITY COUNCIL OF THE CITY OF CARSON, CALIFORNIA STRONGLY URGING GOVERNOR BROWN AND OUR STATE LEGISLATORS TO FIGHT TO RESTORE ADULT DAY HEALTH CARE AS A MEDI-CAL BENEFIT

WHEREAS, the city of Carson is home to a large senior citizens population; and

WHEREAS, as much of our population is above age 60 many of Carson's senior citizens are in need or will need adult day health care services; and

WHEREAS, over thirty years ago, California was the first state to create an Adult Day Health Care (ADHC) program which is now available in more than forty states, and

WHEREAS, the Legislature and Governor have approved legislation that abolishes California's ADHC program which was an optional benefit under Medi-Cal and while the 2011 budget includes \$85 million for transitions, the language authorizing a new program and federal funding was vetoed by the Governor, so that effective December 1, 2011, ADHC services will no longer be considered eligible for Medi-Cal reimbursement, and

WHEREAS, the decision affects over 37,000 patients (most in their 70's and 80's) who are very ill and frail, half with mental health needs and nearly 30% with serious dementia, and with all patients having been medically certified as eligible for nursing home care, and

WHEREAS, ADHC services have been provided in 300+ community settings (with many facing closure) and include: skilled nursing care, mental health services, nutritional assistance and counseling, medical care and monitoring, medication management, transportation to services, chronic disease management, dementia-related care and supervision, palliative care, physical, occupational, and speech therapy, socialization to promote optimal mental and physical functioning, and

WHEREAS, a number of patients from closed centers have already been placed in nursing homes and few services exist to meet the needs of thousands of others, placing them at great risk for hospitalization and placement in a nursing home, and

[MORE]

EXHIBIT NO. 01



WHEREAS, the state has argued that ADHC services are available through other existing programs, especially Medi-Cal Managed Care plans and IHSS, but they fail to report that 1) some of the alternative programs have been financially reduced, and will be targeted for further cuts if the state revenue projects in December 2011 are not met, and 2) there are no ADHC "like" services currently being provided that will service the thousands of patients impacted by this elimination, and

WHEREAS, In some parts of the state, ADHC patients are showing up at neighborhood senior centers which are unequipped to provide any services other than meals, and cannot monitor patients who have dementia or Alzheimer,

NOW THEREFORE BE IT RESOLVED, that the City of Carson urges the Legislature and Governor to extend funding and authorization for ADHC services through the current fiscal year while effective plans are made to replace services and federal funding is identified to help offset the cost of essential community-based, congregate skilled nursing services.

PASSED, APPROVED, and ADOPTED this ___ day of November 2011.

Mayor Jim Dear

ATTEST:

City Clerk Helen S. Kawagoe, MMC

APPROVED AS TO FORM:

City Attorney



MOTION BY SUPERVISOR MARK RIDLEY-THOMAS

SEPTEMBER 13, 2011

Transition Planning for Adult Day Health Care (ADHC) Cutbacks

Adult Day Health Care (ADHC) is a licensed community-based day health care program which provides a variety of health, mental health, therapeutic and social services to frail seniors and adults with disabilities who are at risk of being placed in a nursing home. Currently, over 300 centers exist throughout the State of California. In Los Angeles County, there are 166 licensed centers with approximately 23,000 participants.

The primary objectives of the ADHC are to: (1) restore or maintain optimal capacity for self-care to frail elderly persons or adults with disabilities; and (2) delay or prevent inappropriate or personally undesirable institutionalization.

In January 2011, Governor Brown proposed the elimination of the ADHC Program in his FY 2011-2012 Budget. The Legislature supported the elimination of ADHC as a Medi-Cal State plan optional benefit.

- MORE -

MOTION

MOLINA _____

RIDLEY-THOMAS _____

YAROSLAVSKY _____

KNABE _____

ANTONOVICH _____



**MOTION BY SUPERVISOR MARK RIDLEY-THOMAS
SEPTEMBER 13, 2011
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Counties received notification that the Centers for Medicare and Medicaid Services (CMS) approved California's Medicaid State Plan Amendment to eliminate ADHC as an optional benefit. Unfortunately, there is no clear transition plan for ADHC clients in spite of the Governor retaining the \$85 million in State funding approved by the Legislature to transition current ADHC participants to other appropriate services. California Department of Health Care Benefits has extended the ADHC benefit until December 1, 2011.

The proposed reduction in ADHC services has resulted in three rounds of litigation on behalf of ADHC participants. Thus far, the cases have resulted in preliminary injunctions prohibiting any cessation of ADHC until the pivotal State agencies provide adequate and appropriate replacement services. However, because of the uncertainty of continued funding, 18 ADHC centers in the State have closed. At this time, funding for these programs will continue only through December 1, 2011. The next court hearing scheduled for November 1, 2011.



**MOTION BY SUPERVISOR MARK RIDLEY-THOMAS
SEPTEMBER 13, 2011
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It is anticipated that the gap in services for ADHC participants/families will have a local impact resulting in increased 9-1-1 calls, increased emergency room visits, increased placement of older adults and persons with disabilities in nursing homes, increased Adult Protective Services investigations for potential neglect, abuse and other forms of domestic violence, increased demand for In-Home Supportive Services and an increase of health and mental health services. In addition, unemployment will increase as ADHC employees will be laid-off and family caregivers may need to abandon work to provide direct care and supervision for their family members.

Recognizing the importance of ADHC centers and the impact on services it will have to approximately 23,000 seniors and disabled adults, it is imperative that the County of Los Angeles provide outreach, education and alternative resources to this vulnerable population.

I THEREFORE MOVE THAT THE BOARD OF SUPERVISORS DIRECT:

1. The Director of Community and Senior Services (CSS) to form a Task Force to include the Departments of Public Social Services (DPSS), Health Services (DHS) and Mental Health (DMH) to develop a fact sheet on ADHC and a resource guide for ADHC constituents on available services within the County and City of Los Angeles.
2. The Director of DPSS to identify the existing 17,000 IHSS/ADHC clients so that service needs can be assessed for this vulnerable population.



Emergency Declaration
Regarding the Future of Adult Day Health Care Services in Los Angeles

Dear Governor Brown:

The members of the LAAAC believe that the potential closure of the network of Adult Day Health Care (ADHC) programs in Los Angeles County poses an **immediate emergency threat** to the City and the County – and should generate the same planning and proactive response as would any other eminent and pending disaster. The elimination of Adult Day Health Care (ADHC) would be an immeasurable loss to this community, with immediate ripple effects felt not only by patients and their families, but also by businesses, vendors, transportation, emergency services and hospitals. The ADHC programs serve a wide variety of frail seniors and disabled adults who struggle to manage multiple chronic diseases and as a result are at risk for Skilled Nursing placement. Of this population, many live alone, and 20%-40% have dementia or Alzheimer’s disease.

The City and County of Los Angeles’s network of ADHC programs excels at and specializes in serving this population with its many diverse needs, by providing cost-effective, comprehensive health services all in one place. This ADHC network is an essential safety net of support for people who would otherwise be institutionalized, isolated, in the hospital, and/or at risk of death. It is clear to us that the other existing services in Los Angeles cannot replace the level of care and comprehensive service model offered by the ADHC program.

In Los Angeles County, 23,600 frail seniors and adults with disabilities are at immediate risk. As many as 40% of these individuals could need Skilled Nursing Facility (SNF) care within the first 3 months following the closure of ADHCs. In Los Angeles City and County, SNF bed availability for those on MediCal is minimal, in part because we have had the infrastructure of ADHCs for the past 30 years. We also know that Emergency Room visits within the first 90 days of discharge are likely for a substantial number of those ADHC patients who are released to home.

In addition, caregivers who are working would need to quit full time employment or reduce hours – an impact to businesses already struggling in this economic climate. Closure will also immediately unemploy the many staff in the ADHC centers, and dismantle an essential component of our long term care infrastructure that will be difficult, if not impossible, to replace for Los Angeles’s current and future aging population. This is an urgent matter needing immediate and decisive action.

In response to this pending crisis, the LAAAC urges you to act on the following recommendations immediately:

- 1) Continue working with LAAAC to devise a realistic and sustainable plan that will protect and provide funding for the current Adult Day Health Care programs in Los Angeles City and County;
- 2) Direct the California Department of Health and Human Services (DHHS) to collaborate closely with the LAAAC in working to identify critical community resources and conduct outreach activities.



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- 3) Actively encourage Governor Brown (and other legislative leaders) to find a solution that does not result in closure of these programs around the State.

Los Angeles cannot afford to eliminate the fragile safety net that supports our community in so many ways.

Thank you,
Members of the Los Angeles Aging Advocacy Coalition

AARP California
AltaMed Health Services Corporation
Alzheimer's Association, California Southland chapter
Assistance League Hollywood senior Center
Bet Tzedek Legal Services
Congress of California senior
International Institute of Los Angeles
Jewish Family Service of Los Angeles
Los Angeles Caregiver Resource Center
ONEgeneration
OPICA Adult Day Care & Caregiver Support Center
Partners in Care Foundation
People Coordinated Services of Southern California, Inc.
Personal Assistance Services Council of LA County
St. Barnabas Senior Services
Valley Interfaith Council:
Alicia Broadus Duncan Multipurpose Senior Center
Bernardi Multipurpose Senior Center
East Valley Multipurpose Senior Center

