

A Reprieve for Adult Day Health Care Centers

State Is offering a scaled-back program for seniors

By CASEY CAPACHI, OAKLAND NORTH on December 27, 2011 - 1:13 p.m. PST

After two years of being threatened with complete funding cutoffs from the state, some of California's adult day health care centers are finally seeing a ray of hope.

Medi-Cal-supported adult day health care centers, which currently attend to 35,000 elderly and disabled people during the day— providing medical help, socialization, and relief for family caregivers — had been targeted, amid statewide budget cuts, as one of Medi-Cal's largest general fund expenditures. But in the recent culmination of a lawsuit challenging the funding cutoff, the State's Department of Health Services has announced a new 2012 adult care program that will close some centers but allow others to stay open with continued state support.

"We had so many participants who every day cried," said Corinne Jan, CEO of Family Bridges, a health agency which runs the two Hong Fook Adult Day Care Centers in downtown Oakland, recalling the long period of uncertainty about the centers' prospects. "They walked into the social worker's room asking, 'What's going to happen to our future? What's going to happen to me?'"

Jan spoke in an office at Hong Fook, while out in the main commons, dozens of elderly patients sat around communal tables — chatting in their native Cantonese and Mandarin, receiving attentions from nurses taking their blood pressure, and mimicking the sedentary Bao Jian Cao exercises displayed on three wide screens in the room. Those too frail to extend their arms all the way out took a milder approach, by watching the others.

Hong Fook, like other publicly-supported adult day healthcare centers in California, takes in over 400 patients — providing transportation to healthcare, socialization and a support system many would be left without if confined to their own home. "If we didn't exist, in this cultural or language capacity, what would happen to them?" Jan asked. "This is their second home."

Jan said nearly all her patients depend entirely on monthly state Medi-Cal payments in order to be able to afford the center at its standard rate of \$76 a day.



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Teresa Hu, 78, is from Oakland.

Until a few weeks ago, California was scheduled to eliminate all state adult day health care funding by December 1. According to Norman Williams, a California Department of Health Services spokesman, adult day health care centers were costing Medi-Cal \$169 million a year, a figure the State could no longer afford.

“Because of California’s budget deficit, which is tremendous, the government had to look at ways to reduce spending,” Williams said. “Adult day health care is one of the largest Medi-Cal general fund expenditures, so it has to be part of the solution.”

But after a legal advocacy group called Disability Rights California filed suit to stop the cuts, the Department of Health Care Services late last month announced that it had settled the suit by arranging for a new scaled-back program, to start next year, called CBAS, Community-Based Adult Services. Under CBAS, which is budgeted for less than half the state’s current adult day care center costs, a reduced number of Medi-Cal patients will continue receiving their state allotments for subsidized adult day health care. Those with less pressing medical or disability needs, though, will instead have to be attended to at home or with occasional trips to the doctors.

Starting this month, the state will be sending out specially-trained nurses to assess patients currently receiving adult day health care, and to see which will still be eligible for the CBAS plan come March 1. Williams said he hopes the new plan will now identify those most in need.

Adult day health care centers have faced scrutiny for their patient assessment process in the past. A 2009 state study of Medi-Cal payment errors, for example, found that many such errors ended up funding patients who Williams says should have not qualified for adult day health care.

“We would go to a center and see people doing things that on the form they say they cannot do, and need therapy for,” Williams said. “Then we take a look and understand that this person has the ability to function in life, and don’t necessarily need an adult day health care center — but maybe they need other services.” Williams says the state plans to have those that do not qualify receive some attention at home or help them find other options through managed care plans.

Wendy Peterson, director of Senior Services of Alameda County, a policy advocacy coalition of senior service providers, said the medical necessity errors were found in largely in for-profit adult day health care centers in other areas of California— not nonprofits like the seven publicly-funded centers she represents. Peterson said she worries about elderly and disabled adults whose medical conditions “vary between good times and bad times” and may be assessed as not qualifying for CBAS, only to need it down the line.

“We’re all very concerned, waiting on pins and needles to find out just what the assessment process will say about who is eligible and who is not,” said Peterson. She is puzzled, she said, that the state is re-assessing people it already qualified for Medi-Cal-covered adult day care services due to the severity of their chronic conditions. “Why does the state have to reassess them, when it has already deemed them eligible?” she asked.

Williams said those patients who aren’t found eligible for CBAS may qualify to receive similar quality of care through managed care plans. In Alameda County, patients must choose between the two offered Medi-Cal health plans, Anthem Blue Cross Partnership and Alameda Alliance for Health. Patients may also qualify for a state-funded program called PACE (Program of All -inclusive Care for the Elderly) which provides services like home care in hopes to keep patients living in their own community for as long as they can.

“For patients not qualifying for adult day health care, managed care plans will provide transportation to and from clinics for patients to receive treatment,” Williams said. “The enhanced level of care would still remain important, but it won’t be center-based anymore.”

Exactly how many patients will still qualify under CBAS is a question no one can answer yet. “We don’t really know how to explain this to the families,” said Wing Wong, Program Director of East Oakland’s LifeLong Medical Care center, as she took a break from checking on patients who were eating their lunch. Many of the LifeLong patients wore bibs during the meals, needing help eating their food and making their way to the bathroom.

“A lot of families bring loved ones here, and they need to go to work and they need to make plans,” Wong said. “They’re very anxious, and want to know, ‘Should I just quit my job and continue to care for my mom, or send my mom to a nursing home, or continue to wait?’”

Both Wong and Hong Fook’s director Corinne Jan said they believe their day care programs are likely to survive under CBAS, as their centers serve an especially fragile population who depend on their medical clinic and monolingual language services respectively.

But some centers have already been forced to plan their closure before they can find out. Micheal Pope, Executive Director of Alzheimer’s Services of the East Bay, says the high rent rate at their Oakland facility, combined with across-the-board Medi-Cal cuts and the uncertainty of the reimbursement rates they would receive from the state, will be forcing their Oakland adult day health care center to close this coming February. Oakland patients will then transition to the other two Alzheimer’s Services of the East Bay locations in Berkeley and Hayward although, Pope says, they will miss the staff at the Oakland center.

“If the state thought they could cut a program for thousands of people that employs 7,000 staff, who says this is the last hurrah?” said Pope. “I’m being a skeptic – I have to every time a decision has been made that affects the folks downstairs. I’m hoping it’s all good.”

Kathryn Stambaugh, Geriatric Services Director at LifeLong Medical Care, said she has watched adult day health care funding deteriorate in the past four years, under Arnold Schwarzenegger’s administration and now Jerry Brown’s, as the state has continued looking for services to cut.

“This has been such an exhausting roller coaster ride for the families and for the staff,” she said. “With every state budget cycle, gearing up the amount of energy going into advocacy, it could be so much better spent on other things,” said Stambaugh. “I’m really ready to just move forward now. We don’t know all the details, but we’re at a new beginning — whereas over the summer we weren’t sure if we were at the end.”

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