

PROTECT CONSUMER ACCESS TO ADULT DAY SERVICES

Our Nation's more than 5000 Adult Day Services centers serve the poorest families. As reported in November 2013 by the CDC National Center for Health Statistics, many of these centers receive 65% of their operating revenue from Medicaid Waivers for Home and Community-Based Services (HCBS).*

On January 16th the Centers for Medicare and Medicaid Services (CMS) published a new Rule with the laudable purpose of improving access to and the delivery of Home and Community-Based Services for Medicaid eligible older adults and citizens with disabilities. The intent of the Rule is to facilitate living and service opportunities in the most community integrated setting appropriate for Medicaid HCBS Waiver participants and based upon self-directed choice.

Unfortunately, although the new Rule is directed primarily toward separating residential facilities, such as assisted living, from institutions, the Rule is unclear with respect to non-residential facilities, such as Adult Day Centers. In fact, CMS states in the Rule that it will be applied to all settings where HCBS are delivered and that "additional guidance" will be forthcoming for non-residential HCBS.

Of great concern to NADSA, the National Association of States United for Aging and Disabilities (NASUAD), and the National Federation of Independent Business (NFIB) is language in the Rule indicating that consumer selected non-residential programs will no longer be eligible for Medicaid HCBS funding "if such settings have the effect of isolating or segregating those receiving Medicaid HCBS from the broader community." Narrowly interpreted, this language essentially would close Adult Day Centers serving the Medicaid eligible senior population and individuals diagnosed with dementia, forcing these individuals into the very institutions everyone wants to avoid.

NADSA respectfully requests that you read the attached FAQ sheet prepared by NASUAD, the talking points prepared by NADSA, and the letter of concern from NFIB. Then contact CMS and ask them to issue additional guidance that presumes non-residential Adult Day Centers meet the new Rule standards to remain Medicaid HCBS eligible providers, absent evidence to the contrary.

^{*}National Study of Long-Term Care Providers (NSLTCP), Dwyer, Lisa L., MPH, Long-Term Care Statistics Branch, National Center For Health Statistics, November 13, 2013 Webinar.