

Coordination of Health Care and Home and Community-Based Services

August 26, 2013

People with disabilities and seniors have a fundamental right to quality health care and Home and Community-Based Services (HCBS). We embrace positive principles of care coordination and person-centered care and urge attention to quality and access.

- In recent years, numerous cuts to services have significantly reduced capacity and have threatened the health and life choices of people with disabilities and seniors, including the fundamental right to live independently in our communities.
- Currently, the Coordinated Care Initiative (CCI) is set for implementation in 2014. It includes demonstrations in 8 counties for those dually eligible for Medicare and Medi-Cal to coordinate these services and use managed care for both medical needs and Long-Term Services and Supports.



Creating Policy and System Change for Independent Living

- This comes very soon after the difficult transition people with disabilities and seniors made to Medi-Cal managed care in 2012.

Both transitions are being implemented with the goal of cost savings. Despite this, we must ensure that the ultimate indicator of success is quality of care – a system that allows individuals to access a wide range of health care and HCBS that will enable them to receive appropriate services in the setting of their choice, according to their needs and preferences.

The following are recommendations for the continuing implementation of the CCI, including specific points about HCBS:

RECOMMENDATIONS

- **Fully fund and ensure extensive networks of HCBS** to successfully implement the landmark 1999 Supreme Court decision in Olmstead, which found that people with disabilities have every right to live at home, not institutions. Independent living, health, and quality of life depend on effective home and community supports. Cuts to needed services have a long-lasting, negative impact and result in costing the state considerably more in the long run.
- **Rebuild the fragile structure of In-Home Supportive Services (IHSS)** threatened by cuts. Only a strong, fully funded framework will support goals that improve the health and quality of life of people with disabilities.
- **Include all services and Durable Medical Equipment necessary for home living as mandatory benefits** for those who need them to live independently. Unfortunately many of these services are now designated as optional for managed care organizations to cover, while institutional living costs are mandatory.

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- **Leverage Care Plan Option services** including expanded IHSS and IHSS-type services, home modifications, etc., to ensure that consumers remain in the home.
- **Take sufficient time to implement.** Communicate effectively so all are prepared to participate in this initiative throughout all phases: education, readiness, enrollment, assessment, implementation, and evaluation. Participants include but are not limited to 1) consumers and representatives; 2) managed care organizations; 3) providers; 4) community stakeholders; 5) state and federal agencies.
- **Ensure that the rates and policies of health plans sufficiently allow for quality of care, access, outreach, and accommodations** for people with disabilities, including cultural and linguistic competence and responsiveness. The importance of meeting consumer access needs for all services and communications cannot be overemphasized.
- **Honor and protect consumers' rights and due process**, including choice, independent assessment, grievances, and appeals. Utilize independent ombudsman and consumer assistance services to ensure accountability.
- **Include consumers and representatives in leadership roles at every level of decision making** – from policy, to implementation, assessment, evaluation, and continuous quality improvement. Create an independent stakeholder committee to ensure meaningful consumer involvement and oversight.

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The California State Independent Living Council (SILC) is an independent state agency which, in cooperation with the California State Department of Rehabilitation, prepares and monitors the State Plan for Independent Living.