ADULT CARE HOMES: IMPACT ON BUNCOMBE COUNTY

Buncombe County
Board of Commissioners Briefing

April 17, 2012

The Perfect Storm

- State/local budget limits
 Medicaid cost controls, Local costs
- Adult Care Home Oversight Limits Admissions, Quality of Care
- Special Assistance Limits Admissions
- •U.S. Dept of Justice ADA, IMD
- Imminent Impact of PCS/I Waiver changes

Adult Care Home Discharge Planner at Assault Hospital looking for place for individual to **Issued Immediate Psychiatrically** Discharge from cleared ACH Sent to Taken to ER Detention Facility **Human Impact** Picked up by LE on 2 days Later, involuntary Released from commitment papers Detention MH Provider ACT Team Located by LE files involuntary wandering around trying to get back to ACH Come to know individual has Mental LE attempts to Health Provider locate shelters/all full DSS screens for a need Call to DSS re: Need for Adult Protective for somewhere for Services or Placement individual to go

Fiscal Impact

Costs	FY11
Detention Center	\$21,239
EMS/Fire/BCSD/DSS SW	\$189,940
Emergency Room/Medical and MH Admits Cost (one year timeframe from 5/1/10 to 4/30/11)	\$258,804
Mobile Crisis Management	\$18,044
Special Assistance (approximate county portion only, data detail available)	\$453,888
<u>Totals</u>	<u>\$941,915</u>

Buncombe County Sheriff's Office Sheriff Van Duncan Major Glen Matayabas



FY 10	LE	Cost of Service LE
ACH A	144	\$ 6,480.00
ACH B (1/1/10-6/30/10 only)	4	\$ 180.00
ACH C	14	\$ 630.00
FY 10 Subtotals	162	\$ 7,290.00
avg/month FY10 (12 months)		\$ 607.50
FY 11		
ACH A	237	\$10,665.00
АСН В	6	\$ 270.00
АСН С	30	\$ 1,350.00
FY 11 Subtotals	273	\$12,285.00
avg/month FY10 (12 months)		\$ 1,023.75

Sheriff Van Duncan

Buncombe County Detention Facility Inmate Bookings

	Bookings	Days	Cost
FY10	19	149	\$15,943
FY11	29	199	\$21,293
FYTD12	17	136	\$14,552
Total	65	484	\$51,788

- Inmate cost per day \$107
- Total cumulative bookings after arrest from ACH was 148
- Average length of stay was 8.31 days
- Cost of 148 bookings at 8.31 days was \$131,597

Buncombe County Detention Facility Inmate Bookings

Total Charges for these 44 Bookings was 78 with the top seven listed below:

• 16 Simple Assault	20.48%
9 Second Degree Trespass	11.5%
8 Assault on Female	10.24%
6 Resist Public Officer	7.68%
• 5 Possession of MJ less than ½ ounce	6.4%
4 Disorderly Conduct	5.12%
3 Assault with a Deadly Weapon	3.84%

• Characteristics of the 44 inmates were identified as Mental Subjects, Suicidal, Special Watch, Disabled, Diabetic and Homeless.

FY 10 All	EMS	Cost of Service EMS	Fire	Cost of Service Fire
ACH A	66	\$23,628.00	83	\$ 7,113.10
АСН В	59	\$21,122.00	28	\$ 2,399.60
ACH C	36	\$12,888.00	40	\$ 3,428.00
FY 10 Subtotals	161	\$57,638.00	151	\$12,940.70
avg/month FY10 (12 months) FY 11		\$ 4,803.17		\$ 1,078.39
ACH A	165	\$59,070.00	152	\$13,026.40
АСН В	59	\$21,122.00	51	\$ 4,370.70
ACH C	44	\$15,752.00	50	\$ 4,285.00
FY 11 Subtotals	268	\$95,944.00	253	\$21,682.10
avg/month FY10 (12 months)		\$ 7,995.33		\$ 1,806.84

Jerry VeHaun EMS Director

Buncombe County Adult Care Home Medicaid Expenditures *

	Buncombe County	Three Highlighted ACHs	Facility A	Facility B	Facility C
Total Residents	1141	127	95	20	12
% of total residents (county)	100%	11%	8.3%	1.75%	1%
All Medicaid					
Total Expenditures	\$11,489,331.96	\$3,366,359.35	\$2,645,448.0 9	\$494,248.26	\$226,663.00
% of total (county)	100%	29.3%	23%	4.3%	2%
Inpatient Medicaid					
Total IP Medicaid	\$832,916.50	\$328,338.18	246,234.81	\$43,457.76	\$38,645.61
% of total IP (county)	100%	39.4%	29.5%	5.2%	4.6%
Emergency Room Medicaid					
Total ER Medicaid	\$189,159.13	\$76,957.42	\$65,794.35	\$5791.82	\$5371.25
% of total ER (county)	100%	40.6%	34.7%	3%	2.8%
Pharmacy- Medicaid					
Total Pharmacy Medicaid	\$1,927,178.75	\$822,070.41	\$658,127.06	\$136,916.93	\$27,026.42
% of total Pharmacy (county)	100%	42.7%	34.1%	7.1%	1.4%



^{*}Prepared by Wendy Sause, MSW Community Care of Western North Carolina 828-348-2834 Data from Statewide CCNC Adult Care Home-Medicaid Expenditure Summary Report Residents Medicaid Eligible October 2011 Costs July 1, 2010 – June 30, 2011

Donald Reuss, Provider Services Director Western Highlands



Impact for DSS

Increased community concern

Increased number of facility complaints

Increased placement disruptions

Obvious need for individual(s) to have alternative placement

Potential increase DSS to provide guardianship assessment services/petitioning

Potential increase in Adult Protective Service reports

Potential correlating increase in staffing need= additional funds needed

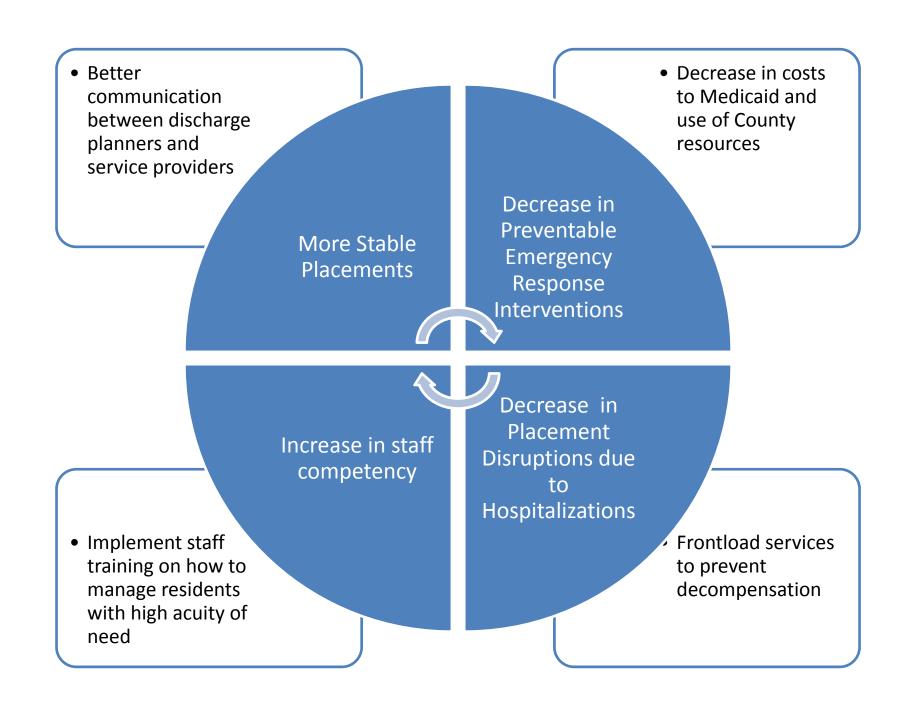


Strategies and Suggestions for Solutions

Recommendation from local Legislative Delegation Briefing

Submission of a local bill for a pilot intervention within the current structure of Adult Care Home rules:

- Ability for DSS/WHN/CCWNC to work together to address issues related to quality of care for residents
- Intense focus on increasing the enrollment of ACH residents into CCNC
- A comprehensive assessment process prior to placement in an ACH, allowing for a better match for the resident
- Care coordination and monitoring of residents status
- A coordinated Plan of Care with all providers



Other Proposed Solutions

(*indicates State support/change needed)

Challenge	Solution
Inappropriate placement of consumers	Implementation of a <u>pilot team</u> , consisting of DSS/WHN/CCWNC. Eight to ten homes would be identified with which to partner. A team of staff from all three organizations are in the process of meeting and outlining a plan to present to the Management Team for approval and implementation by Jan 2012* When applying for Special Assistance, DSS would take the lead in questioning the FL2 and appropriateness of the consumer's placement. DSS to monitor and cite violations as outlined within policy and practice as it relates to facilities obligation to assess resident and their needs prior to admission. There are only three specific parts of the FL2 that DSS can review and if those are filled out, DSS must process the application regardless of other information missing* Collaboration with discharge planners before contact with any facilities to determine appropriate placement

Challenge	Solution
Non-Buncombe consumers, many with an extensive criminal record, being placed with no supports, ending up in jail, hospitals or homeless	Collaboration between DSS/WHN/CCWNC and ACH/FCH facilities to ensure use of Crisis Plans and follow through to prevent immediate discharges and subsequent utilization of jail and hospital services Diversion of non-Buncombe originating residents to home locations where family supports can be located*

Challenge	Solution
Need for optional housing and supports, both after IMD assessment and ongoing, to prevent future issues	Collaboration with Asheville Housing Authority, WHN and Homeward Bound to establish community based housing with supportive case management to enhance independent living and stable housing for consumers who can live in the community * Use of additional SA In Home slots to financially support residents that choose to live in the community with community supports*

Challenge	Solution
Potential increase of APS and Guardianship needs	Ongoing monitoring of data related to these two issues
Significant Fiscal Impact to Buncombe County Taxpayers	See above – meeting with local delegation and implementation of pilot team model
 Other State Issues: DOJ Directive CMS plan for Personal Care Services HB 677 	 Continue to address issues both locally and statewide, as opportunities arise Multi-disciplinary ACH discharge team to collaborate for most appropriate placement when the team is requested to convene Implementation of Recommendations 3.1, 3.2, 3.3, 4.1, 4.2, 4.3, 5.1, 5.2 and 5.3 from the NCIOM Task Force on the Co-Location of Different Populations in Adult Care Homes*

Challenge	Solution
In NC, local Departments of Social	This is a duplication of service and should
Services are responsible for monitoring	be assessed.
Adult Care Homes, however there is no	
local authority specific to upholding	
penalties, issuing orders to cease	
admissions or close down facilities. The	
State Department of Health Regulatory	
Services holds this authority.	