

Testimony on District of Columbia Department of Health Care Finance Oversight Hearing
Before the District of Columbia City Council
Committee on Health and Human Services
Chairperson Yvette Alexander
March 9, 2015
Presented by
Judith Levy, Coordinator, DC Coalition on Long Term Care

Good morning/afternoon Chairperson Alexander and members of the Committee on Health and Human Services. I appreciate the opportunity to speak to you today. My name is Judith Levy, and I am the coordinator of The DC Coalition on Long Term Care, which meets monthly to address issues and problems faced by the District's network of agencies that provide home and community based services.

Today, I want to discuss the District's Elderly and Persons with Physical Disabilities Waiver Program. Known as the EPD Waiver, this program is a vital lifeline that enables our city's most vulnerable citizens to remain in their homes rather than be institutionalized in a nursing facility. The EPD Waiver Program provides up to 16 hours per day of in-home care for residents. Some of those residents are not poor enough to qualify for Medicaid services, but are not rich enough to pay a private home health aide the going rate of \$20 per hour. The program serves individuals whose incomes are between \$980 per month and \$2,199 per month. This program is an important safety net for our most frail citizens, whose safety depends on having someone in their home help them with bathing, cooking, and dressing.

Management of the EPD Waiver program remains a mystery even to those of us in the aging network who have worked with it for years. The most mysterious issue is why the program has maintained a vacancy rate of about 33 percent for more than two years. That amounts to an average of 1,400 of the District's most vulnerable residents who are not getting the help they need in their homes. And that vacancy rate has been maintained despite the fact that 70 cents of every dollar in cost for the program is paid by the Federal Government.

Those 1,400 vacancies are as of September 2014. I wish I could give you current figures, but published reports on the EPD Waiver Program's enrollment are always five months out of date. The vacancy issue has persisted since July 2011, when a waiting list was created for Waiver Program applicants, many of whom languished without any help for more than one year.

I am bringing the EPD Waiver Program to your attention because you have oversight over part of it as chairperson of the Committee on Health and Human Services. The Aging and Disabilities Resource Center—a branch of the DC Office on Aging—is the entry point for residents who apply for home health services under the Waiver. ADRC officials take a district resident's information and—after a lengthy wait—ask them to choose three home health agencies to assist

them with their Waiver Application. This process is confusing to residents, who are mostly elderly, in poor health, and don't know anything about any of the agencies they are being asked to select from a list of EPD provider case managers, who then meets with the resident to fill out the complex application.

Once a resident's application is filed with the ADRC, it goes to the Department of Health Care Finance for the next step in the process. Health Care Finance has contracted with two companies—Delmarva and Qualis—to meet again with the resident and verify information about their medical conditions that would justify sending a home health aide to help them.

Meanwhile, the resident's financial information is sent to the Economic Security Administration (ESA) in the Department of Human Services. ESA is tasked with making sure applicants aren't over the income limit of 2,199 dollars per month, which would disqualify them. They can take up to 90 days to make this determination. So, each application for EPD Waiver services is examined by three different agencies **AND** two private contracting firms. No wonder residents are confused. No wonder that it takes a minimum of three months—and often longer as you will hear from our panelists—for a resident to have a home health aide assigned to him or her after first applying for the program. In fact, three different members of the City Council have oversight over this fractured program.

Chairperson Alexander, the Long Term Care Coalition requests that you confer with Councilmember Bonds—who has oversight over the Office on Aging—to support developing a coordinated approach on the Council level to the many problems with the EPD Waiver Program. This program is too vital and too important to the District's most frail residents for the problems to continue.

