

**Testimony of Judith Levy
Before the District of Columbia City Council Committee on Health
Chairperson Vincent C. Gray**

**Performance Oversight Hearing on Fiscal Year 2018
February 6, 2019**

My name is Judith Levy and I am the Coordinator of the District of Columbia Coalition on Long Term Care. I am writing to express concerns of the hundreds of DC residents with disabilities that are facing reduction or termination of their life-sustaining Medicaid supported and community based services by Department of Health Care Finance (DHCF) known as the Elderly and Individuals with Physical Disabilities (EPD) Waiver Program. Please note that I am also a member of the Medical Care Advisory Committee (MCAC) and Chair of the MCAC Long Term Care Services and Supports Sub-committee. The goal of this sub-committee is twofold:

1. Review and provide feedback on the implementation/ongoing development of DHCF's replacement Case Management system (DC Care Connect) and its replacement long term care assessment contractor
2. Ensure people receiving EPD waiver services are not negatively impacted in DHCF achieving EPD waiver cost neutrality.

In July, the District overhauled the long-term care assessment process. This action was done shortly after the long standing Medicaid Director left DHCF. With the overhaul, DHCF implemented a new screening assessment tool called InterRAI despite concerns raised by the Coalition and fellow advocates. Since implementation, chaos has ensued. There are unfortunate issues with InterRAI as implemented. It was not pilot-tested before being implemented, it came with a new assessment organization called Liberty Health Care, it started with yet another new database system, DC Care Connect. Home health services have been reduced or terminated since it was implemented.

While DHCF has admitted that the new screening assessment tool does produce flawed results—specifically for beneficiaries that have the highest level of needs—, not much has been done to act on the flaws other than advising the client to request an administrative hearing. For example, service hours are being cut due to Liberty’s method of assessment. Liberty is downgrading beneficiaries’ level of care needs because they are not factoring in key functions—such as personal hygiene, transportation, and incontinence—into the beneficiaries’ functional scores. Furthermore, the beneficiaries’ assessment scores are being reduced over-again when Liberty converts the assessment tool score to the score in DHCF’s regulations. As a result of cut service hours, beneficiaries who are dependent on home health aides are now at risk of deteriorating health. Some are only left with the option of being institutionalized in a nursing facility, which violates Americans with Disabilities Act (ADA) and the Supreme Court Olmstead Decision of 1999 which guarantees the right choice. It is crucial to state that due to programming and assessment errors, beneficiaries are the ones that are being harmed and punished as a result.

As if the long-term care assessment process wasn’t already complicated enough, beneficiaries are now being faced with a potential termination of their services if their score is downgraded under 9. DHCF has set a threshold score of 9 for beneficiaries for maintaining services under the Medicaid EPD Waiver Program, which allows for a higher monthly income level than the Medicaid State Plan. With Liberty downgrading beneficiaries’ level of care scores and the conversion to the DHCF’s new system, beneficiaries face the potential loss of all their Medicaid benefits that include home health services, medications, doctors, and transportation. Liberty’s assessment tool aside, DHCF has reduced the home health aide services under the Medicaid State Plan without face-to-face assessments by Liberty. Again, the beneficiaries are the ones who suffer when acts like these occur.

Not only has DHCF reduced home health aide services without proper assessments, but they have also done so without written notice. DHCF has violated the rights of beneficiaries in DC under Federal and DC laws that require advance written notice and due process prior to service reduction or termination. At this point in time, I am unsure how many individuals are facing a reduction or termination of services overall.

Thus far, DHCF has failed to adequately address the systemic problems with the assessment and scoring processes. Additionally, DHCF has significant administrative backlogs when it comes to processing beneficiaries' recertification, which has led to more improper termination of services. DHCF has the discretion to set the functional eligibility threshold for the Medicaid Waiver services at any level.

I urge the Committee on Health to hold a roundtable hearing to fully investigate the impact of the changes in DHCF's long-term care assessment process, and its impact in the reduction and termination of home health aide services for beneficiaries as well as making it more difficult to access the EPD Waiver Program.