

Increased Funding for Community Based Alternatives to Institutionalization

Proposal:

Endorse legislation expanding services provided under §1915c Medicaid Home and Community-based Waiver Services for Aged and Disabled as a cost-effective alternative to institutional care for frail and elderly with chronic conditions or disabilities.

Funding for care in the community should increase by a certain percentage each year until there is no longer a waiting list for Community Based Assistance. Services to persons in the community provide more dignity and independence and are less costly than services in facilities. Residents in the community are able to visit their own doctors, attend their own church, and attend their own senior centers.

Background:

The State of Texas currently operates a number of §1915c Medicaid Waiver Programs, which provide services to a limited number of eligible adults. Increasing services provided under these waiver programs will:

- 1) Increase senior access to community-based services
- 2) Reduce costs associated with long-term care
- 3) Prevent premature institutionalization
- 4) Promote senior independence and quality of life

Financial Impact:

Increased funding of this state program would have the impact of providing the supports necessary for those who are Medicaid-eligible to remain in their homes. This would have the effect on reducing the number of our seniors who must make the choice between becoming institutionalized or staying in their homes and depending on local social service programs. If the state were to fund the community based waiver programs at a higher level, the City of San Antonio's funds for the care for our seniors could be provided to non-Medicaid eligible seniors who are often not able to afford institutional care and do not qualify for supports to allow them to remain in their homes safely.

Additional Information and Comments:

The State of Texas has continued to designate the majority of its Medicaid long-term care dollars towards institutionalized care (nursing homes) versus shifting more of the dollars to community based waiver programs that allow seniors to age in their own homes. ADAPT, an advocacy group for people with disabilities, has reported that:

For decades, people with disabilities, both old and young, have wanted alternatives to nursing homes and other institutions when they need long term services. Our long term care system has a heavy institutional bias. Every state that receives Medicaid MUST provide nursing home services, but community based services are optional. Sixty five percent of Medicaid long term care dollars pay for institutional services, while the remaining 25% must cover all the community based waivers, optional programs, etc.