

Reforming the Delivery of Medical, Behavioral, and Long Term Services for People with Disabilities and the Elderly

Alameda County Board of Supervisors

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Presented by

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- I. About the Congress of California Seniors
- II. Governor Brown's Proposal to Reform Services
 - a. Scale of the Project

b.Scope of Project

c. Timeline of the Project

- **III.** Opportunities
 - a.Integrating LTSS Which Are Fragmented and Not Consumer Friendly
 - b.Creating Incentives to Encourage Rebalancing of Spending
 - c.Creating a Service System That Is Client Centered, Built on Assessment, and Offers Coordinated Care
 - d.Recognizing Behavioral Health Services Critical for This Population

- e.Restoring Ancillary Services Such As Dental, Vision, Podiatry
- f. Creating Cost Savings
- **IV.** Cautions
 - a.State and Federal Governments Are Seeking Savings; Funding Must Be Adequate
 - b.Redirecting Resources Should Allow Reinvestment of Savings in Better Services
 - c.Managed Care Rate Setting Must Be More Transparent
 - d.Possible System Overload
 - i. ACA Expansion of Medi-Cal to Childless Adults
 - ii. Realignment of Homecare (IHSS) and Collective Bargaining Issues

- iii. Merging Three Payment Systems and Reporting Mechanisms: Medicare, Medi-Cal, and HCBS
- e. Trying to Blend Two Very Different Cultures of Care
- V. Considerations for Alameda County
 - a.Need for Stakeholder Involvement in Design, Program Implementation, and On-going (Including Seniors, Disabled, LTSS Providers, Medical Providers, Insurers)
 - b.Close Oversight and Engagement of Elected Officials
 - c.Recognize the Importance of Family Caregivers, Community Supports, Faith-Based Community

d.Do It Right, Not Just Fast