+-----+ LOCAL COMMISSIONERS MEMORANDUM | +-----+

Transmittal No: 91 LCM-198

Date: November 4, 1991

Division: Medical Assistance

TO: Local District Commissioners

SUBJECT: Use of Social Day Care in Long Term Home Health Care Programs

ATTACHMENTS: There are no attachments to this LCM.

Chapter 165 of the Laws of 1991 specifically requires that Medical Assistance clients be assessed to determine "whether home health services recipients can be appropriately and more cost effectively served through other long term care services, including but not limited to the long-term home health care program, assisted living program and enriched housing program".

To date, social service districts have made extensive use of the Long Term Home Health Care Program (LTHHCP) targeting criteria contained in Informational Letter 89 INF-20 in their efforts to ensure that the LTHHCP is used appropriately and cost effectively. The targeting criteria contained in 89 INF-20 were designed to focus attention on individuals with more intensive care needs and more complex plans of care.

However, there are individuals within the long term care population who, though cognitively impaired, have only moderate needs for assistance with the activities of daily living, and for whom the LTHHCP's social day care may present the most appropriate service option. This segment of the long term care population would primarily include cognitively impaired individuals who are independent in ambulation and continent. These adults may also be community-based individuals who are socially isolated, not receiving adequate nutrition and who may have a history of recurring hospitalizations. They generally require assistance with one or more activities of daily living and may have a complex medication regime for which prompting or reminding is necessary. Frequently these individuals have informal supports who are willing to provide services but need assistance or respite during daytime hours.

Adult social day care offered through the LTHHCP can provide a cost effective means for delivering services to multiple individuals, improve the quality of life of functionally impaired adults, make more efficient use of paraprofessional staff, provide respite for informal cargivers and provide an alternative to the inappropriate institutionalization.

All parties involved in determining a patient's plan of care are expected to choose the most appropriate and the most cost effective service options. Social day care should be considered when it is beneficial for the individual and when its use can reduce the aggregate cost of care. A useful measure of whether or not social day care actually reduces costs, particularly for this segment of the population, is to compare the individual day cost of social day care, social transportation and any peripheral home care (i.e. personal care or home health aide) with what would have been that day's care cost without social day care.

If you have any questions concerning this policy, please call Walt Gartner at 1-800-342-3715, extension 3-5497.

Jo-Ann A. Costantino Deputy Commissioner Division of Medical Assistance