

**Comments on Rhode Island's draft 1115 Waiver Extension Request Submitted By:**

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The Diocese of Providence, Office of Community Services and Catholic Charities, wishes to submit the following comments on Rhode Island's 1115 Waiver Extension. The Diocese has had representation on the Global Waiver Task Force since its inception, and we compliment all involved in the hard work and accomplishments, and the proposed extension document.

Catholic Charities of the Diocese of Providence exists to provide hope and assistance to all in need. We accomplish this through programs and services that:

- ✓ Complement State Programs (For example: The Keep the Heat on Program, emergency fuel assistance)
- ✓ Help those just above income for State assistance (For example: Cabrini Child Care Scholarships for working families at or below 75% of Rhode Island's median income)
- ✓ Fill in gaps where no assistance is available (For Example the DIRE Emergency Program, providing moving expenses, replacements for lost medications, and other hard to meet needs).

It is our Mission to assist those in need and we do so in partnership with the State of Rhode Island, where possible, and with the network of programs and services available to low income Rhode Islanders.

**A few general comments about the 1115 Extension document:**

- ✓ Comprehensive, accessible Medicaid Waiver services are essential to the needy of Rhode Island. Some of the most vulnerable among this group are those from diverse cultures, limited English speakers and persons who are illiterate. These issues are essential to access and far too important "to go without saying."

It is our suggestion that where issues of access are addressed, special mention is given to a priority to creatively and effectively reach these populations, and that this requirement extend to any sub contracts or service agreements entered into as a part of the 1115 Waiver.

The 1115 waiver extension proposes "a robust Consumer Assistance Program " housed at EOHHS. While we would support efforts to provide improved customer assistance, options counseling and information and referral, we strongly urge that these efforts are done in collaboration with The POINT, Rhode Island's Resource Place for Seniors and Adults with

Disabilities. This Federally funded ADRC (Aging and Disability Center) continues to develop in RI. How will the effort proposed in the 1115 extension application compliment what is already in place with RI's ADRC?

- ✓ Rebalancing of the long term care system cannot happen without strong, adequately paid community supports. At the same time that we profess this basic tenant, the reality in Rhode Island seems at times to be in direct contradiction. Agencies that could play a much greater role in community support, such as Adult Day Centers, are funded at a rate significantly below the actual cost of the service. State funds to support Respite Care for family caregivers, and State support of RI Meals on Wheels, have been decreased during the 4 years of the global waiver. These are only a few such examples.

It is our suggestion that the State commitment to strengthen community based care is demonstrated by actions that will bring these results.

- ✓ We would like to add our support to the implementation of a truly effective expedited eligibility process. Persons most in need of this process are likely to have significant and immediate needs.

It is our suggestion that the benefits provided under this process are minimal in considering the needs of these applicants and that a process be included to allow expanded services when needed.

- ✓ We would like to add our support to the prominent inclusion of housing alternatives. Clearly Rhode Island needs an array of creative housing opportunities to support the Long Term Care population in the community.
- ✓ We would like to add our support to the continuation and expansion of CNOM services and any effort that can be made to address services for the "soon to be Medicaid eligible population." Cost effective interventions such as respite breaks for caregivers have proven to extend the amount of time a caregiver can continue to support a family member at home. Providing such a service for "pre Medicaid eligible" populations makes good economic sense and is a compassionate way to assist those who make great personal sacrifices to care for loved ones.
- ✓ One economic resource that Rhode Island does have is a growing number of retired folks who wish to, or need to, work part time. We would suggest that the development of services such as peer navigators and peer mentors provide an opportunity to provide efficient and effective service by using community agencies that focus on this opportunity for work force development.

#### **A specific concern for Caregivers**

Catholic Charities has been a partner with the State of Rhode Island for over 20 years in arranging for, and paying part of the cost of, respite breaks for caregivers of persons 60 years of age and older. Most recently under the Federal Lifespan Respite Program this partnership has expanded to work with caregivers caring for disabled family members of any age.

I was hard pressed to find the word caregiver in this 1115 extension document. And yet it is generally accepted that in RI over 100,000 of us are caring for a family member, at an enormous cost savings to the entire Long Term Care system. This uncompensated component of hundreds of care plans is as important, and sometimes most important, in the success of a care plan to keep a disabled person in the community.

Respite is mentioned as a service that is included, and will be funded, in this extension waiver. This is an essential beginning.

We suggest that the following be considered to support the important work of family caregiving:

- Assessment should include an assessment of the caregiver's role and their needs.
- Information on services available for the caregiver should be provided routinely when a caregiver is involved; information on respite breaks, support groups, options counseling.
- Information compiled on caregiver contributions, demographics and service needs and utilization should be an important component of reporting under the 1115 waiver.
- Serious consideration should be given to "early intervention" for caregivers caring for the "almost Medicaid eligible"

Thank you for the opportunity to comment

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