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## STATE OF CONNECTICUT

#### LONG TERM CARE PLANNING COMMITTEE

January 1, 2021

The Honorable Derek Slap, Senate Chair The Honorable Joseph C. Serra, House Chair Aging Committee State Capitol, Room 011 Hartford, CT 06106

The Honorable Marilyn V. Moore, Senate Chair The Honorable Catherine F. Abercrombie, House Chair Human Services Committee Legislative Office Building, Room 2000 Hartford, CT 06106

#### **Dear Committee Chairs:**

As required by Section 17b-337(d) of the Connecticut General Statutes, enclosed please find the Long-Term Care Planning Committee's annual report on the number of persons receiving long-term services and supports in the community and the number of persons receiving long-term services and supports in institutions.

If you have any questions on the report, please call me at the Office of Policy and Management at 860-418-6286.

Sincerely,

**David Guttchen** 

David J. Golfeber

Chair, Long-Term Care Planning Committee
Office of Policy and Management

cc: Members and Clerks of the Aging and Human Services Committees

Long-Term Care Planning Committee Long-Term Care Advisory Council

Melissa McCaw, Secretary, Office of Policy and Management

Clerk of the Senate

Clerk of the House

Office of Legislative Research

State Librarian

## CT Rebalancing: Medicaid Long-Term Care Clients and Expenditures SFY 2020

## <u>Clients</u>

- From SFY 2019 to SFY 2020, the percentage of individuals receiving Medicaid long-term care services in the community versus an institution increased by two percent (2%). Sixty-five percent (65%) of Medicaid clients (a monthly average of 30,185) were served in the community and thirty-five percent (35%) of Medicaid clients (a monthly average of 16,188) received care in an institution.
- Since SFY 2003, the percentage of Medicaid clients receiving care in the community has increased by 41%: from 46% in SFY 2003 to 65% in SFY 2020.

## PROPORTION OF CONNECTICUT MEDICAID LONG-TERM CARE CLIENTS OVER TIME

a===	Home &		Total Monthly Average LTC Medicaid
SFY	<b>Community Care</b>	Institutional Care	Clients
2002-03	46%	54%	37,969
2003-04	49%	51%	39,305
2004-05	50%	50%	40,417
2005-06	51%	49%	41,773
2006-07	52%	48%	41,335
2007-08	52%	48%	40,057
2008-09	53%	47%	40,097
2009-10	54%	46%	40,448
2010-11	55%	45%	41,468
2011-12	56%	44%	41,719
2012-13	58%	42%	42,577
2013-14	59%	41%	44,712
2014-15	60%	40%	45,876
2015-16	60%	40%	46,024
2016-17	61%	39%	45,598
2017-18	64%	36%	46,270
2018-19	64%	36%	46,194
2019-20	65%	35%	46,373

### **Expenditures**

- In SFY 2020, Medicaid long-term care expenditures for individuals in the community versus in an institution increased by 10% from SFY 2019. Of the long-term care expenditures for individuals enrolled in Medicaid, 54% were for services provided in the community and 46% were for institutional care.
- Since SFY 2003, the percentage of Medicaid long-term care expenditures for home and community-based care has increased by 74%, from 31% in SFY 2003 to 54% in SFY 2020.

## PROPORTION OF CONNECTICUT MEDICAID EXPENDITURES FOR LONG-TERM CARE OVER TIME

SFY	Home & Community Care	Institutional Care	Total LTC Medicaid Expenditures	Total Medicaid Expenditures	Percentage of Total Medicaid Expenditures for LTC
2003	31%	69%	\$1,914,273,731	\$3,406,301,048	56%
2004	33%	67%	\$1,955,406,395	\$3,541,153,371	55%
2005	35%	65%	\$1,977,418,433	\$3,715,210,091	53%
2006 a	32%	68%	\$2,227,237,142	\$4,003,243,481	56%
2007	33%	67%	\$2,299,133,950	\$4,016,531,371	57%
2008	33%	67%	\$2,403,524,813	\$4,361,642,828	55%
2009 b	35%	65%	\$2,499,416,752	\$5,481,108,439	46%
2010 c, d	38%	62%	\$2,586,673,481	\$5,120,011,692	51%
2011	40%	60%	\$2,695,265,598	\$5,764,332,014	47%
2012	41%	59%	\$2,770,265,028	\$5,932,580,102	47%
2013	43%	57%	\$2,894,062,447	\$6,230,395,960	46%
2014 <sup>e</sup>	45%	55%	\$2,876,616,284	\$6,880,327,373	42%
2015	45%	55%	\$2,889,022,951	\$7,167,438,562	40%
2016 <sup>f</sup>	49%	51%	\$3,063,784,905	\$7,424,270,721	41%
2017 <sup>g</sup>	50%	50%	\$3,214,941,505	\$7,521,804,316	43%
2018	53%	47%	\$3,259,286,335	\$7,740,843,361	42%
2019	52%	48%	\$3,203,349,467	\$7,947,891,454	40%
2020	54%	46%	\$3,384,915,173	\$8,140,654,231	42%

### Notes:

- a -Between SFY 2005 and SFY 2006, the percent of Medicaid long-term care expenditures for institutional care increased, from 65 to 68 percent, reversing a trend toward shifting expenses toward community-based care. The increase was not due to an increase in the use of institutional care or a shift away from home and community-based care, but rather reflects the significant Medicaid rate increase provided specifically to nursing homes in the fall of 2005.
- b Beginning in SFY 2009, expenditures are adjusted to account for retroactive claims.
- c For SFY 2010, the proportion of long-term care Medicaid expenditures for care in the community increased by 5% over the previous year. This large increase is due in part to a rebasing of rates for Medicaid long-term care services for persons with developmental disabilities.
- d Beginning in SFY 2010, two new Medicaid services were added: 1) a new service category of Hospice was added to both Home and Community Care and Institutional Care and 2) the new Mental Health Waiver.
- e Beginning in SFY 2014, the Autism Medicaid Waiver was added and the MR Waiver was eliminated.
- f- SFY 2016 CFC and ABI II expenditures included for the first time.
- g- This reflects a correction from SFY 2017 reported numbers. In SFY 2018 it was realized that SFY 2017 expenditure data inadvertently did not pull-in CFC expenditures. This is the corrected figure for SFY 2017 made Nov 2018.

## CT Rebalancing: Non-Medicaid Long-Term Care Clients SFY 2020

### State-Funded Levels of the Connecticut Home Care Program for Elders<sup>1</sup>

In addition to Medicaid funded long-term services and supports programs, the State of Connecticut operates two state-funded levels of the Connecticut Home Care Program for Elders (CHCPE). The state-funded CHCPE program allows seniors who qualify for nursing facility level of care, but have incomes and assets exceeding Medicaid levels, to receive home care services in their home rather than a nursing facility.

- In SFY 2020, on average, the state-funded levels of CHCPE provided home care services to 3,172 clients per month.
- Of the 3,172 CHCPE clients served, the average monthly enrollment for level 1 was 268 and 2904 for level 2.
- In 2020, the total annual expenditures for the state-funded levels of CHCPE were \$34,306,557.

## Estimated Number of Non-Medicaid Nursing Facility Occupants<sup>2</sup>

- From 2004 to 2020 the total number of licensed nursing facility beds declined by 16.5% (from 29,801 to 24,878).
- On September 30, 2020, nursing facilities in Connecticut had an average occupancy rate of 74% (of the 24,878 available nursing facility beds in Connecticut, 18,402 were occupied)<sup>3</sup>.
- During SFY 2020, an estimated monthly average of 15,186<sup>4</sup> were occupied by Medicaid clients and 3,216 beds were occupied by non-Medicaid clients.

	Nursing Facility Occupancy Data 2019 - 2020		
24,878	Total nursing facility beds in CT on 9/30/20 <sup>5</sup>		
74%	Average occupancy rate on 9/30/20		
18,402	Number of occupied beds on 9/20/20		
15,186	Average monthly number of Medicaid clients in a nursing facility in SFY 2020 <sup>3</sup>		
	Estimated average monthly number of non-Medicaid clients in a nursing facility in SFY		
3,216	2020.		
83%	Estimated percent of occupied nursing facility beds funded by Medicaid in SFY 2020 <sup>6</sup> .		

 $<sup>^{</sup>m 1}$  Data from Department of Social Services CHCPE monthly reports as submitted to OPM.

<sup>&</sup>lt;sup>2</sup> Unless otherwise noted, all data in this section is from the OPM Annual Nursing Facility Census Annual Nursing Facility Census, 2020.

<sup>&</sup>lt;sup>3</sup> The dramatic decrease in occupancy is due to the COVID-19 pandemic. In years prior to the pandemic the average occupancy rate was 88%.

<sup>&</sup>lt;sup>4</sup> Data from OPM 2020 Medicaid rebalancing LTC client calculation spreadsheet.

<sup>&</sup>lt;sup>5</sup> Does not include Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/IIDs) and Chronic Disease Hospitals.

<sup>&</sup>lt;sup>6</sup> Percentage calculated using data from the OPM Annual Nursing Facility Census Annual Nursing Facility Census, 2020 and the OPM 2020 Medicaid rebalancing LTC client calculation spreadsheet.

## CT Rebalancing: Combined Medicaid and Non-Medicaid Long-Term Care Clients<sup>7</sup>

## **SFY 2020**

Total Monthly Average Home and Community Care Clients SFY 2020						
State-Funded Home Care Clients	Medicaid Home Care Clients	<b>Total Home Care Clients</b>				
3,172	30,185	33,357				
Total Monthly Average Institutional Care Clients SFY 2020 <sup>8</sup>						
Non-Medicaid Institutional Clients	Medicaid Institutional Clients	Total Institutional Clients				
2,214	16,188	18,402				
Total Monthly Average Medicaid and Non-Medicaid Long-Term Care Clients SFY 2020						
Total Monthly Average N	ledicaid and Non-Medicaid Long-Term Care	Clients SFY 2020				
Total Monthly Average M  Total Non-Medicaid Long-Term Care  Clients	ledicaid and Non-Medicaid Long-Term Care  Total Medicaid Long-Term Care Clients	Clients SFY 2020  Total Long-Term Care Clients				

<sup>&</sup>lt;sup>7</sup> Non-Medicaid and non-state-funded home care data is not available.

<sup>&</sup>lt;sup>8</sup> Institutional Care includes: nursing facilities, Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/IIDs) and chronic disease hospitals.