

[Cuts to Adult Foster Care begin on March 1](#)

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By Nathan Lamb

The countdown to cuts is on. On March 1, the Baker Administration will begin cutting as much as \$5.6 million from the Adult Foster Care program. The cuts will continue through the last four months of the fiscal year.

“We are running out of time to protect the elderly and people with disabilities,” said Linda Andrade of the Mass Council on Adult Foster Care. “Adult Foster Care is one of the premier ‘community first’ programs in the Commonwealth. The population in need is growing, and our budget should be growing to meet that need.”

Next year, the program could lose as much as \$22.6 million.

Adult Foster Care is a program that allows elderly and disabled people to move in with a host family that provides 24/7 support. The average cost per client is less than \$21,000 a year. Comparable round-the-clock support at a nursing facility can cost up to four or five times more.

“Community programs like this one make programmatic sense and financial sense,” noted Al Norman of Mass Home Care. “It just makes no sense to cut back community programs that help keep people out of costlier institutions.”

“Individuals with disabilities want to live in a home, in the community,” added Gary Blumenthal, CEO of the Association of Developmental Disabilities Providers. “Adult Foster Care is one of the few round-the-clock care programs that takes place in a home setting. That is why consumers are attracted to it.”

Governor Baker used his executive powers to make \$5.6 million in 9C cuts to this MassHealth service for low-income individuals. These cuts amount to a 9-percent rate cut for providers. The cuts will undermine the program and can harm those who receive Adult Foster Care services and support, including caregivers who receive visits and oversight.

Andrade, Norman and Blumenthal agreed that the Adult Foster Care program is on the verge of a crisis. Adult Foster Care providers have indicated that sizeable funding reductions to their individual programs may make this innovative cost-saving program impossible to operate.

“It is imperative that the governor rescind this 9C reduction or that the Legislature overturn this reduction in a FY 17 Supplemental Budget appropriation,” concluded Al Norman.

FY17 9C action cuts into MassHealth’s Adult Foster Care

Program Cuts Will Leave 12,000 Caregivers Without Needed Support and Oversight

MassHealth will cut rates for Adult Foster Care (“AFC”) services by 10% effective March 1, 2017, and reduce payments to AFC Providers by \$5 Million in FY17 and by more than \$20 Million in FY18.

Adult Foster Care is:

- A MassHealth program that makes it possible for 12,000 elders and younger adults with disabilities to live at home with full-time caregivers.
- A critical Community First innovation, AFC has contributed substantially to reducing utilization of nursing facilities and state-run institutions.
- One of the few community options available to MassHealth members who need assistance with personal care and around-the-clock support and supervision.
- Currently able, through its AFC Provider Agencies, to provide education and coaching to lay caregivers, most often friends and family members, without health care experience or training so they have the support they need to provide care to elders and people with disabilities who have complex physical and behavioral health conditions.

The 9C Cut will:

- Reduce the number of home visits by 50%, decreasing support for AFC caregivers, increasing the incidence of caregiver stress, and jeopardizing the health and safety of elders and people with disabilities. One of the most impactful features of the program, home visits, ensures MassHealth members and their caregivers have regular and predictable access to a trusted care team (nurse and case manager) who understand the member’s health and social circumstances. AFC care teams help caregivers manage challenging behaviors and medical conditions, and can assess situations and act quickly when a member’s conditions change, preventing unnecessary health care costs. Consumers who are enrolled in AFC are adults with intellectual disabilities/developmental disabilities, dementia, autism, behavioral health needs and/or are medically complex and many have co-morbidities. AFC supports provide the opportunity to manage individual situations, keep people stable at home and maintain program integrity through frequent visits. The program serves people who would otherwise not be living in an independent apartment or who would be in a nursing facility or group home.
- Undermine the ability of quality agencies to continue to operate across the Commonwealth. A 10% rate cut is decimating and unprecedented. AFC providers are not able to absorb such losses.
- Limit the Commonwealth’s capacity to provide care at home where people want to be, and jeopardize the savings that MassHealth realizes by supporting members in AFC. Clinically

comparable members are \$85 p/day in AFC and ~\$160 p/day in nursing facilities. Without ongoing support from their care teams, some families will be unable to continue their around-the-clock commitment to caregiving at home and may be forced to obtain more expensive out-of-home alternatives. This model works because of dedicated caregivers and because of the comprehensive support system and professional help that AFC Provider Agencies provide to those caregivers. AFC serves a complex and vulnerable consumer base. Host families are trained and supported. In a time of direct care worker shortages, this model of care offers a residential option for consumers and quality caregiving through host or natural family members who receive a modest monthly stipend.