

JUSTICE IN AGING

FIGHTING SENIOR POVERTY THROUGH LAW

Breaking Barriers to Personal Care: Unlocking Vital Services for Those Who Need Them Most

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JUSTICE IN AGING

FIGHTING SENIOR POVERTY THROUGH LAW

Justice in Aging is a national organization that uses the power of law to fight senior poverty by securing access to affordable health care, economic security, and the courts for older adults with limited resources.

Since 1972 we've focused our efforts primarily on fighting for people who have been marginalized and excluded from justice, such as women, people of color, LGBTQ+ individuals, and people with limited English proficiency.

Justice in Aging's Commitment to Advancing Equity

To achieve Justice in Aging, we must:

- Advance equity for low-income older adults in economic security, health care, housing, and elder justice initiatives.
- Address the enduring harms and inequities caused by systemic racism and other forms of discrimination that uniquely impact low-income older adults in marginalized communities.
- Recruit, support, and retain a diverse staff and board, including race, ethnicity, gender, gender identity and presentation, sexual orientation, disability, age, and economic class.

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About Carol Wilkins

- Independent consultant working to advance cross-sector solutions to end homelessness for people with complex health needs and vulnerabilities
- Supporting state and local governments, health systems, foundations, and community-based organizations to align housing and supportive services

Agenda

- Overview: California's Personal Care Services
- Project Background: Barriers to Care Experienced by Non-Self-Directing Individuals
- Findings: Barriers to Self-Direction, Barriers to Care
- Policy Opportunities
- Questions/Comments/Feedback



Medi-Cal Personal Care Services

Background: Personal Care Services Delivery Options

- State Plan: In-Home Supportive Services (IHSS)
- Waivers
 - Assisted Living Waiver
 - Home and Community-Based Alternatives
 - Multipurpose Senior Services Program
- CalAIM Managed Care: Community Supports
 - Personal Care Services
 - Nursing Facility Diversion/Transition to Assisted Living
 - Recuperative Care

IHSS Care Delivery Models

Independent Provider Mode:

- **Consumer-Directed**: The person receiving care acts as an employer including hiring, supervising, and managing a provider, coordinating multiple providers, reviewing and signing off on time sheets, and instructing on when, where and how care is delivered.

Contract Mode:

- **Agency-Directed**: Home health or other agency hires, supervises, coordinates and manages the care provider, coordinates, handles timesheets and payments, oversees quality of care.
- **Homemaker Mode**: County is the home health agency (unused).

In-Home Support Services

- Accounts for majority of Personal Care Services delivered to low-income California residents
 - +780,000 Participants
 - 72% receive care from family members
- Can be provided through Independent Provider or Contract Modes
 - Only SF delivers IHSS through Contract Mode to 1,100 consumers
- Requires Consumer to be self-directing

Contract Mode Models

- Homebridge Continuum of Choice Model
 - Non-profit agency recruits, trains and supervises workers to care for people with complex needs
 - Agency option facilitates access to and stability in interim and permanent supportive housing
 - Participants can choose to transition between contract services and individual provider mode
- LA County planning
 - Build upon and leverage state and local funding
 - In-home caregiving services in permanent supportive housing for people experiencing homelessness

Alternatives to IHSS Consumer-Directed Personal Care

- Waiver Services:
 - Agency mode delivery option is available
 - Comprehensive services including care management and coordination support community living for higher-needs consumers
 - Geographic and capacity limitations, long waitlists significantly limit availability
- CalAIM Community Supports
 - Potential for filling gaps
 - Optional services not provided across all plans/regions
 - Low utilization

HCBS Enrollment

Program	Current Enrollment	Waitlist	Limitations
Assisted Living Waiver	14,532	3,256	15 counties
Home and Community Based Alternatives	9301	5,345	Statewide
Multipurpose Senior Services Program	9,653	2,384	Soon to be statewide
Personal Care/Homemaker Community Support (2023)	1,780	--	82% by one plan
NH Diversion to Assisted Living (2023)	552	--	Majority by 2 plans
Recuperative Care (2023)	4,518	--	Limited ADL



Barriers to Personal Care Project

Project Background

Questions Asked:

- What groups of people face obstacles to self-directing their care?
- What are other programmatic barriers?
- How do these obstacles present barriers to personal care services through California's Medi-Cal Programs?

Interview methods and limitations:

- Identifying stakeholders from all parts of the state
- Missing populations

Project Participants

- IHSS consumers and providers
- State and national policy experts
- Consumer advocates
- Community-based organizations
- Supportive housing organizations
- County IHSS personnel
- IHSS Public Authorities
- Labor organizations



Findings

Key Project Finding

Services are inaccessible to people who are not able to self-direct their care, particularly if they do not have family or community support.

Some Groups Disproportionately Face Difficulty in Accessing IHSS

- Cognitive/Decision-making impairments
- Behavioral health disorders
- Trauma and distrust
- Homelessness
- Incarceration
- Discrimination
- Limited English Proficiency
- Rural Communities

Design and Rules Create Significant Barriers to Self-Direction and Hinder Access to Personal Care Services for Certain Groups

Program design elements like...	...can be a barrier due to
<ul style="list-style-type: none">• Program Navigation• Employer Duties/Provider Management/Retention• Quality Assurance	<ul style="list-style-type: none">• Cognitive impairments• Memory difficulties• Organizational Difficulties• Complex needs or behaviors• Unstable housing• Isolation & Stigma• Power dynamics

Compounding factors

Individuals Experiencing Homelessness Face Unique Barriers

- Unsheltered individuals have no care options
- Counties often refuse to go to shelters to establish eligibility for benefits
- Providers are reluctant to serve the population
- Survival needs and challenges create additional barriers
- Logistical difficulties in shelter settings

Waiver Programs and Other Approaches to using Medi-Cal for Personal Care Services Do Not Fill the Gaps

Waiver programs offer additional services that support access to personal care services...

- 24-hour care & supervision
- Intensive case management and care coordination
- Agency-provided personal care

...but are inaccessible due to

- Eligibility criteria
- Administrative burdens
- Waitlists
- Geographic Limitations

Community Supports Fall Short

Community Support	Potential	Limitations
Personal Care/Homemaker Community Support	<ul style="list-style-type: none">• Fill the IHSS Gaps through agency-provided care	<ul style="list-style-type: none">• Temporary• Poor county-plan coordination• Inconsistent implementation
Nursing Facility Diversion/Transition to Assisted Living	<ul style="list-style-type: none">• Intensive 24-hour services, care and supervision in a home-like community setting for non-directing individuals	<ul style="list-style-type: none">• Inadequate provider participation• Limited settings/geographic reach
Recuperative Care	<ul style="list-style-type: none">• Stabilize after hospital stay• Facilitate discharge to housing or shelter	<ul style="list-style-type: none">• Little or no capacity to offer ADL support• Not linked with the Personal Care CS

Those Who Cannot Access Personal Care Services Face Serious Harm

- Significant unmet needs
- Poor health/psychological harm
- Increased falls/injury
- Repeated avoidable hospitalization
- Abuse and Neglect by others
- Self-Neglect
- Evictions/unstable housing
- Barriers to accessing interim or permanent housing
- Institutionalization
- Death



Recommendations for Equitable Access to Care for
People with Diverse Needs

Expand Contract Mode IHSS

- Expand Contract Mode IHSS alongside IP Mode
 - Reduce financial maintenance of effort impact on county costs
 - Provide technical assistance/blueprint
 - Provide financial incentives/assistance
 - Pay parity for homemaker mode
 - Collective bargaining

Make HCBS Waiver Services Available Statewide Through the State Plan

- State Plan Amendment
- 1915(i) State Plan HCBS benefit

Reduce Barriers to Program Enrollment

- Require Counties to do IHSS assessments for individuals experiencing homelessness in all settings
- Increase County capacity through dedicated social workers and case management support
- Invest in wraparound models that connect housing with waiver-like intensive personal care and care management services (e.g. Cardea Health)
- Reduce reliance on Adult Protective Services by increasing access to advanced health planning

Improve Availability and Use of Community Supports in Managed Care

- Mandate provision of Community Supports across all plans
- Standardizing member referrals and identification processes for Community Support eligibility
- Require access to Personal Care CS upon assessed need regardless of IHSS referrals
- Facilitate alignment of Personal Care CS with Recuperative Care and Housing-Related CS
- Allow the Personal Care CS to fully replace IHSS for individuals who cannot direct their care

Implement Innovative Practices

- Offer differential pay, training, and peer support for providers supporting people with complex/high care needs
- Fund social work services for people referred by APS, individuals experiencing homelessness, or in supportive housing
- Expedite or prioritize people experiencing housing instability or impairment to care direction for access to waiver programs
- Fund Public Authority peer support, employment mentorship and other programs

Additional Resources

- Dickman, Hagar and Carol Wilkins, [“Breaking Down Barriers to Personal Care: Unlocking Vital Services for Those Who Need Them Most,”](#) (October 2024).
- Bailit Health, [“Targeted Use of Agencies for Personal Care Services: Analysis of a Health Plan’s Natural Experiment,”](#) (July 12, 2023).
- Dickman, Hagar, [“California’s In-Home Supportive Services Program—An Equity Analysis,”](#) (June 2023).



Questions?

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