



**AARP Maine**  
1685 Congress Street  
Portland, ME 04102

T 1-866-554-5380  
F 207-775-5727  
[www.aarp.org/me](http://www.aarp.org/me)

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Dear Commissioner Mayhew and members of the MaineCare Redesign Task Force,

Thank you for the opportunity to comment on proposed changes to the Medicaid program and the recommendations in the report. We have monitored the work of the group and appreciate the commitment you have made to a thoughtful and open process.

AARP is a nonprofit, nonpartisan social welfare organization with a membership with offices in all 50 states. AARP's mission is to help people 50+ have independence, choice and control in ways that are beneficial and affordable to them and society as a whole. We seek to help older Americans live longer and healthier lives. AARP represents more than 230,000 members here in Maine with a vital interest in the programs and services the state provides to the aged, blind and disabled through MaineCare.

AARP establishes policies for key issues through its volunteer Board of Directors and the board-appointed volunteer National Policy Council. The National Policy Council is composed of individuals who represent a diverse cross section of AARP members and have a proven record of public policy experience and interest. AARP sets out its approved policies in *The Policy Book: AARP Public Policies 2011–2012*, which is available in hardcopy or at [www.aarp.org/policybook](http://www.aarp.org/policybook).

The Report of the **MaineCare Redesign Task Force** sets the options strategies which “will enable the Legislature to redesign the MaineCare program in a manner that will maintain high-quality, cost-effective services to populations in need of health coverage. . .” It is critical that any proposed changes to the program consider the impact to an older, frail population. AARP Maine will work with all parties and make its expertise and resources available to assist as policy analysts and lawmakers take up the recommendations of this report. The following sections discuss principals and parameters important to AARP as proposed changes are made to these critical programs.

### **The Medicaid Program**

AARP's policies address Medicaid as the nation's largest publicly financed health insurance program for low income parents, children, elderly and disabled people. Efforts to restructure Medicaid should:

- maintain the government's benefit guarantee, so that all who qualify for Medicaid will be covered and maintain the entitlement nature of Medicaid funding—Medicaid funding should not be furnished through a block grant or limited for necessary services;
- maintain and improve current federal and state consumer protections; and
- adopt financing policies and payment strategies that enhance and improve access and quality.

## **Medicaid under the Affordable Care Act**

AARP supports expansion of Medicaid under the Affordable Care Act and believes any redesign of Medicaid programs in a state should include expansion to 138 percent of the Federal Poverty Level for Medicaid eligibility.

## **Task Force Recommendations Regarding Long-Term Care**

The MaineCare Redesign Task Force recommendations and findings place particular emphasis on the need to address the provision of long-term supports and services for the Top 20 Percent of MaineCare enrollees. AARP is actively engaged in protecting consumer choice where states are looking to redesign Medicaid and develop waiver alternatives. This commitment is demonstrated in the following guiding principles for the design and delivery of systems of long term care – also referred to as long term services and supports (LTSS) – that were developed by AARP and are set forth in greater detail in *The Policy Book*.

- The design and delivery of long term care services should promote consumer independence, choice, dignity, autonomy, and privacy.
- Long term care programs and services should be easy to access and affordable.
- People who qualify for Medicaid should have a choice between home- and community-based care or nursing home care, and a choice of providers.
- The federal and state governments must ensure the delivery of high-quality long term care services.
- Provider payments should be adequate.
- Public long term care services programs should include cost-containment mechanisms.
- The rights of long term care consumers should be protected.
- Services should include in-home assistance, community services, a full range of supportive housing options, institutional care, rehabilitative services and other enabling services, as well as assistive devices and home modifications.
- Long term care systems should give meaningful support to family caregivers.

## **Rebalancing Long Term Care**

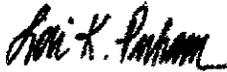
AARP has a long history of research and experience regarding state efforts to rebalance systems of long-term care. The AARP Public Policy Institute found the following characteristics to be critical in reducing reliance on nursing home care and living meaningful choice to consumers:

- ***Philosophy*** – The state’s intention to deliver long term care services in the most independent living situation and to expand cost-effective HCBS options guides all other decisions. How a state views quality of life for older adults and people with disabilities, and the importance of participants having a choice in how their services are provided, may be the most important factor in having a balanced long term care system.
- ***Array of services*** – States that provide a comprehensive array of services designed to meet the particular needs of individuals and to address the needs of people of all income levels are less likely to channel people to institutions than states providing few options.

- **Organization of responsibilities** – Assigning responsibility for overseeing the state’s long term care system to a single administrative office, agency or department is a key decision in some of the most successful states.
- **Single entry point** – A considerable body of literature demonstrates the value of having an independent, conflict-free, single point of entry for people to use to access long term care services. Effective systems that determine eligibility, coordinate services, and monitor quality can support people who have their own resources to pay for services, as well as those who qualify for public programs. A robust system of information, options counseling, and assistance is key.
- **Single appropriation** – This concept, sometimes called “global budgeting,” allows states to transfer funds among programs and, therefore, make more timely decisions to facilitate serving people in their preferred setting.
- **Timely eligibility** – Hospitals account for nearly half of all nursing home admissions. When decisions must be made quickly at a time of crisis, state Medicaid programs must be able to arrange for HCBS in a timely manner. Failure to determine timely eligibility for Medicaid HCBS often results in unnecessary nursing home placement. Successful states have implemented procedures that either presume financial eligibility for Medicaid HCBS or fast-track the eligibility determination process.
- **Standardized assessment tool** – Some states use a single tool to assess functional eligibility and service needs, and then develop a person-centered plan of services and supports. A standardized tool helps to minimize differences among care managers and prevent unnecessary institutionalization, and can be used to collect consistent data, leading to better system management.
- **Participant direction** – The growing movement to allow individuals a greater role in determining who will provide them with services, as well as when and how services are delivered, responds to the desire of all people to maximize their choices and control over their lives.
- **Qualified workforce** – A successful state program supports the development of a knowledgeable, culturally competent, highly valued, and competitively compensated long term care workforce.
- **Recognition and support for family caregivers** – Family caregivers are the backbone of the long term care services system and key partners in health care. Person- and family-centered care calls for addressing family needs and integrating family caregivers as partners in care. Providing better and more meaningful supports for family caregivers is essential to the well-being of our long term care system, our health care system, our economy, our workplaces, and our families.

AARP Maine appreciates the opportunity to comment on the MaineCare redesign. We would be happy to discuss any of these issues with you. The Medicaid program plays a crucial role in the lives of many of our members and it provides them with access to essential services not available through Medicare or private insurance. We look forward to working with you to ensure that it continues to do so in the future.

Sincerely,



Lori K. Parham  
State Director



John J. Hennessy  
Advocacy Director

*AARP is a nonprofit, nonpartisan organization, with a membership of more than 37 million, that helps people 50+ have independence, choice and control in ways that are beneficial to them and society as a whole. AARP does not endorse candidates for public office or make contributions to either political campaigns or candidates. We produce AARP The Magazine, the definitive voice for Americans 50+ and the world's largest-circulation magazine; AARP Bulletin, the go-to news source for the 50+ audience; AARP VIVA, a bilingual lifestyle multimedia platform addressing the interests and needs of Hispanic Americans; and national television and radio programming including My Generation and Inside E Street. The AARP Foundation is an affiliated charity that provides security, protection, and empowerment to older persons in need with support from thousands of volunteers, donors, and sponsors. AARP has staffed offices in all 50 states, the District of Columbia, Puerto Rico, and the U.S. Virgin Islands.*