

## Long Term Care Restructuring Initiatives in Iowa

### Encouraging Home Care:

- The state has established higher level-of-care eligibility standards for nursing home care, case management for individuals at risk of nursing home care (implemented under the Elderly Waiver program), and consumer direction with credit unions providing financial services. The credit unions pay for goods and services on behalf of the participants. The new eligibility standards mandate that an individual must require physical assistance of one or more persons on a daily basis for *three or more* activities of daily living (ADLs), or require a "safe, secure environment" because of chronic confusion or mental illness. In addition, home and community-based services will be available for persons who require hands-on assistance on a daily basis with *one to three* ADLs or who suffer from chronic confusion or mental illness.
- The state also raised the level of care for admission to an Intermediate Care Facility for Mental Retardation (ICF/MR) to encourage home and community-based care unless an ICF/MR admission is determined to be medically necessary or appropriate HCBS waiver services are not available.
- The state received a grant from the Centers for Medicare and Medicaid Services (CMS), part of which calls for training hospital discharge planners and other health professionals to provide better information and supports to consumers at risk of unnecessary institutionalization.
- The original legislation of the Iowa Care Medicaid Reform Act required higher level of care standards for entry into nursing homes, while maintaining the current level of care for HCBS, thereby encouraging expansion of HCBS. As of spring 2008, the state had been unable to implement this provision, though officials were still investigating ways of incorporating it into the overall reforms.

### Utilizing Federal Grants to Develop Comprehensive Databases and Policy Planning Tools:

- Iowa also received a federal Real Choice Systems Transformation grant in 2005, which provided funding for planning, analysis, policy and program development, as well as assistance in the development of a statewide database of accessible housing. The grant was also used to provide financial and technical support for implementing the balancing provisions of the Iowa Care Act.
- The Iowa Department of Elder Affairs also used a federal grant from the Aging and Disability Resource Center, to set up a single point of entry

web-based information and referral system for those residents seeking long term care. This system links several different information and referral networks, expanded databases, and ensures regular updating of systems. The state is also developing an eligibility calculator to help consumers and professionals determine eligibility for a wide-range of services.

At present, there have been no studies or findings evaluating to the success or failure of these programs.

### **Resources**

1. Kassner, E., Reinhard, S., Fox-Grage, W., Houser, A., Accius, J., *A Balancing Act: State Long-Term Care Reform*, AARP Public Policy Institute, July, 2008 ([http://assets.aarp.org/rgcenter/il/2008\\_10\\_ltc\\_ia.pdf](http://assets.aarp.org/rgcenter/il/2008_10_ltc_ia.pdf)).
2. Folkemer, D. and Coleman, B (Consultant), *Long-Term Care Reform: Legislative Efforts To Shift Care To The Community*, National Conference of State Legislatures, December, 2006.
3. *IowaCare: Rebalancing for Increased Community Capacity, Access, and Choice*, Iowa Medicaid Enterprise, Iowa Department of Human Services (<http://www.ime.state.ia.us/docs/SummaryofIowaCareandRCSC.doc>).