

MAINE STATE LEGISLATURE

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FIRST REGULAR SESSION

ONE HUNDRED AND TENTH LEGISLATURE

Legislative Document

No. 1361

S. P. 478

In Senate, March 18, 1981

Referred to the Committee on Health and Institutional Services. Sent down for concurrence and ordered printed.

MAY M. ROSS, Secretary of the Senate

Presented by Senator Trafton of Androscoggin.

Cosponsors: Senator L. Brown of Washington, Senator Gill of Cumberland and Representative Prescott of Hampden.

STATE OF MAINE

IN THE YEAR OF OUR LORD NINETEEN HUNDRED AND EIGHTY-ONE

AN ACT Concerning Alternatives to Institutionalized Care.

Be it enacted by the People of the State of Maine, as follows:

22 MRSA c. 417 is enacted to read:

CHAPTER 417

HOME-BASED ALTERNATIVES TO INSTITUTIONALIZED CARE

§ 2131. Legislative intent

The Legislature finds that many elderly persons are placed in nursing homes with resulting consequences of social and psychological upset to the individual and also a heavy financial burden to the State.

This program is intended to establish a coordinated homebased alternative care system, with long-term care services provided by already existing facilities or agencies under the supervision of the Commissioner of Human Services or his designee, so that elderly persons are able to remain independent and in their own homes as long as possible and that public moneys are used to greatest effect.

§ 2132. Administration

The Commissioner of Human Services, or his designee, shall be responsible for

the administration of this program and shall promulgate rules and regulations pertaining to the program, pursuant to the Maine Administrative Procedure Act, Title 5, chapter 375.

§ 2133. Application; eligibility

1. Application. An individual or, in the case of an incapacitated person, his guardian, shall apply through the local regional office of the Department of Human Services for the home-based alternatives program. Any individual who applies for admission to an intermediate-care facility shall be given notice of the existence of the program.

2. Eligibility. An individual will be deemed eligible if he:

A. Qualifies for assistance under the Medicaid program;

B. Is assessed as needing intermediate-care facility level care;

C. Is determined by the patient assessment team as needing the necessary nursing, housekeeping and social services which can be furnished at home for less than 75% of the annualized cost of those services provided in a nursing home, as determined by the average monthly cost, annualized, for the area as delineated by the Health Systems Agency; and

D. Is deemed medically eligible by the patient assessment team but has the financial ability to pay privately.

§ 2134. Evaluation

Each applicant will be evaluated by a patient assessment team consisting of a program director, program nurse coordinator, social worker from area agency on aging if available and a local state nurse classifier.

The patient assessment team will evaluate the individual's eligibility for the program, with particular attention to the availability of using any services which are currently available and make a recommendation as to the additional services which would be provided by this program.

§ 2135. Providers; services

1. Providers. Intermediate care facilities, hospital or home health agencies are designated providers of home-based care, providing that they are able to offer the services indicated in subsection 2.

2. Services. Services provided shall be available directly by the provider or through contracts with other agencies.

A. Those services which must be provided directly by the provider are:

(1) Professional nursing, registered nurses or licensed practical nurses, available 24 hours a day, 7 days a week;

(2) Nurses aide and homemakers services available 24 hours a day, 7 days a week;

(3) **Supplies, equipment and appliances; and**

(4) **A full-time or part-time director, depending on the number of patients for whom the program is responsible.**

B. Those services allowed through contract with other agencies are:

(1) **Physical, speech and occupational therapy; and**

(2) **Other services, as needed, audiology and including but not limited to counseling.**

§ 2136. Financing

The costs of the services provided to eligible individuals shall be reimbursed to the provider through the Department of Human Services, following validation, proper accounting.

§ 2137. Report

The Commission of Human Services shall study the effectiveness of this program in providing appropriate care at less cost to the State and make a report of their findings to the Joint Standing Committee on Health and Institutional Services of the Legislature by January 31, 1983.

STATEMENT OF FACT

The bill provides the mechanism for a system of home-based alternatives to institutionalized care, provided by existing facilities or agencies. Such care is a vital service to those elderly who need assistance, but not full-time institutionalized care. The provision of services through existing agencies will allow for responsiveness to the needs of the elderly and also lead to greater efficiency in the delivery of services, with resulting cost savings.