

AGING STRATEGIC ALIGNMENT PROJECT

State Profile for

GEORGIA

Home- and Community-based Services for Older Adults and Adults with Physical Disabilities

Background

- Georgia's 60+ population was 1,433,316 in 2008 (14.8% of the state's total population), with 11.7% below the federal poverty level.¹
- The 60+ population is projected to be 2,296,693 in 2025 (20.1% of the state's total population).²
- About 19.1% of all households in 2007 had one or more persons age 65 years, and older and 44.8% of person's age 65 years and older had a disability.³
- Of the 1,732,120 Medicaid beneficiaries in the state in 2003, 5.8% were aged, 13.5% were blind and disabled, 13.9% were Dual Eligible, and 1.3% were HCBS waiver beneficiaries.⁴
- Medicaid expenditures for institutional long-term care were 61.7% of total long-term-care expenditures, compared to 38.3% for HCBS in fiscal year 2007.⁵

Abbreviations

AAA	Area Agency on Aging
ADL	Activities of Daily Living
AoA	Administration on Aging
CMS	Centers for Medicare and Medicaid Services
HCBS	Home- and Community-based Services
IADL	Instrumental Activities of Daily Living
MRDD	Mental Retardation and Developmental Disabilities
OAA	Older Americans Act
PACE	Program of All-inclusive Care for the Elderly
SUA	State Unit on Aging

¹ Department of Health and Human Services, Administration on Aging. (2009). *AGing Integrated Database (AGID): American Community Survey (ACS) demographic data 2004-2007 and state-level population estimates data 2000-2008* [Data files]. Available from <http://198.136.163.234/default.asp>

² Department of Health and Human Services, Administration on Aging. (2009). *AGing statistics: Projected future growth of the Older population; By state: 2005-2030; Aged 60 and above* [Data files]. Available from http://www.aoa.gov/AoARoot/Aging_Statistics/future_growth/future_growth.aspx.

³ Reimbursement and Research Department, American Health Care Association. (2006, August 29). *The state long-term health care sector 2005: Characteristics, utilization, and government funding*. Washington, DC: Author.

⁴ U.S. Census Bureau, 2007 American Community Survey, United States and States. *Percent of households with one or more people 65 years and over (R1104) and Percent of people 65 years and over with a disability (R1803)*.

⁵ Burwell, B., Sredl, K., & Eiken. S. (2008, September 26). *Medicaid long term care expenditures FY 2007*. Eagan, MN: Thomson Reuters.

Government Structure to Manage HCBS

- **SUA:** Georgia Division of Aging Services.
www.aging.dhr.georgia.gov
- **State Medicaid Agency:** Department of Community Health.
www.dch.georgia.gov
- Georgia does not have a consolidated agency for long-term-care programs. The Department of Community Health ultimately directs all long-term care; however, there is a long-term-care unit in the Department of Community Health and in the Division of Aging Services. The Division of Aging Services operates many of the state's programs and manages the Elderly and Disabled Waiver for Community Care Service Program.
- The Director of the Division of Aging Services reports to the Commissioner of the Department of Human Resources, who reports to the Governor.
- Georgia has 12 Area Agencies on Aging.

Single Point of Entry (SPE)/Aging and Disability Resource Center (ADRC)

- Georgia has an ADRC that is in the process of becoming statewide.
- None of the ADRC sites have a physical (bricks and mortar) infrastructure, but all the ADRC sites operate under a virtual model.
- In addition to serving older adults, Georgia's ADRC serves those with MRDD, physical disabilities, traumatic brain injury, spinal cord injury and mental health patients.
- Georgia's ADRC is called Gateway. There are six ADRCs that cover half of the AAAs. Georgia's ADRC uses a centralized and decentralized model. With the decentralized model there are partner groups, for example, an Independent Living Center. Individuals would be directed to specific agencies based on need through web-based software in connection with care management. Upgraded software provides the capacity for standardized assessment processes and client tracking.

Assessment Process

Medicaid

- For Medicaid applicants, in determining functional eligibility for nursing home pre-admission, Georgia does not require an in-person assessment by someone other than nursing home staff.
- All applicants undergo the Level 1 assessment of the Preadmission Screening and Resident Review (PASRR), to determine if there is a mental health or mental retardation diagnosis. It is first completed by the nursing home. For those who meet certain criteria, the Georgia Medical Care Foundation conducts a Level 2 assessment. If an individual is referred to the community program, the assessment is done in-person by the Division of Aging Services. The level-of-care determination is done by a nurse and is then signed off by a physician.

Non-Medicaid

- For non-Medicaid applicants in Georgia, nursing home pre-admission assessment is not performed by someone other than nursing home staff. No assessments are done for non-Medicaid applicants.

State Medicaid Plan

- Georgia provides HCBS through the state Medicaid plan.
- Refer to Table 1 for specific services provided.
- **PACE:** Georgia has no PACE sites.

Medicaid Waivers

- Georgia has three waivers that provide HCBS to older adults and/or adults with physical disabilities. These are: Elderly and Disabled Persons-Community Care Services Program, Physically Disabled Persons-Independent Care Waiver, and Service Options Using Resources in the Community Environment (SOURCE) Program.

- **Elderly and Disabled Persons-Community Care Services Program (CCSP):** This program primarily serves adults age 60+ and individuals of all ages with disabilities. The income limits are \$657 for individuals and \$2,000 for married persons; asset limits are \$1,000 for individuals and \$3,000 for married persons. There are approximately 14,000 participants in this program. Cost sharing may apply in this program in that participants who meet all other criteria for Medicaid except the financial limits are allotted \$657 per Social Security; the additional money goes toward the cost of their care, which is paid to their provider. This process enables them to qualify for Medicaid.
- **Physically Disabled Persons-Independent Care Waiver:** This program serves all age groups and targets physically disabled individuals. Consumer direction requirements include: Georgia residency; 21-64 years of age (persons older than 65 years will go into SOURCE or CCSP programs); physical disability or traumatic brain injury; eligible for Medicaid; meet clinical criteria for hospital or nursing home level of care; cognitively able to hire, train, supervise, and communicate effectively through verbal or other communication methods; able to maintain maximum control over daily schedules and decisions; able to assume responsibility for cost-effective use of medical supplies and services; do not display behavior that puts them at risk of neglect, social isolation, or injury; able to manage their budget; and able to make an informed choice to accept Medicaid waiver services in the plan of care. The income and asset limits for single individuals for this program are \$1,911 and \$2,610, respectively. This program does not require an agency to handle case management responsibilities.
- **Service Options Using Resources in the Community Environment (SOURCE):** This program serves adults age 65 and over who receive Supplemental Security Income (SSI) and those adults who are on SSI and are blind or disabled. The income and asset limits for single individuals for this program are \$1,911 and \$2,610, respectively.
- Refer to Table 2 for an overview of selected HCBS programs. Table 1 shows the types of services offered under each program.

CMS-funded Programs and Grants

- Georgia has one CMS-funded program and grant that provides HCBS to older adults and/or adults with physical disabilities. The program is Money Follows the Person.
- **Money Follows the Person:** This program serves aged, blind and disabled persons. Participants in this program must be Medicaid eligible, meet nursing home level of care, and reside in an institutional setting for longer than six months but less than two years. A screening process is completed to ensure that the participant can meet the basic criteria to leave the institution. There is an additional functional assessment required, which is conducted by the waiver program and then signed off by a physician. When a person is identified as wanting to leave the nursing facility, a package of supports is developed by the transition coordinator, who will work with a care coordinator and possibly an ombudsman to ensure the individual's successful transition to the community. Within the next five years, this program should have 1,024 slots implemented.
- Refer to Table 2 for an overview of selected HCBS programs. Table 1 shows the types of services offered.

State-funded HCBS Programs

- Georgia does not have state-funded programs that provide HCBS to older adults and/or adults with physical disabilities. However, Gateway (ADRC) is supported with state funds.

Locally Funded HCBS Programs

- Georgia uses local funds for HCBS for older adults and/or adults with physical disabilities.

OAA-funded Programs and Grants

- Georgia uses cost-sharing mechanisms or sliding fee scales in the delivery of Title III services.
- Refer to Table 1 for services provided through Title III of the OAA.

- Georgia has one other OAA-funded program that provides HCBS to older adults and/or adults with physical disabilities. It is the Nursing Home Diversion Grant.
- **Nursing Home Diversion Grant:** Working with the Atlanta AAA, this program provides a package of support and care management services to participants. The services are personally tailored, and consumer-directed options are made available using vouchers.

Social Service Block Grants (SSBG) and Community Service Block Grants (CSBG) for HCBS

- Georgia uses SSBG to provide HCBS for older adults and/or adults with physical disabilities.
- Georgia uses CSBG to provide HCBS for older adults and/or adults with physical disabilities.
- These grants supplement services in the community. When the state gets access to these monies, they are allocated to AAAs and used at their discretion.

Consumer Direction

- Georgia offers consumer-directed options. The HCBS programs in the state that offer consumer direction are: Elderly and Disabled Persons – Community Care Services Program; Physically Disabled – Independent Care Waiver; Services Options using Resources in the Community Environment Program; and Money Follows the Person.
- Models of consumer direction available in the state include: a Cash & Counseling grant, an option modeled after Cash & Counseling, voucher options, and cash options.
- Those permitted to provide services under consumer direction in Georgia are: adult children of the consumer, other family members, and friends. For Medicaid, a provider of consumer direction would have to be an approved Medicaid Provider. For non-Medicaid HCBS, it varies tremendously and does not include an approved list of qualifications. Children and family are permitted to provide services only under extenuating

circumstances, and anyone who has legal guardianship or represents the individual is not allowed to be the paid caregiver.

- Georgia uses fiscal intermediary services in connection with consumer direction. There is one fiscal intermediary in the state.

Managed Care

- Georgia does not have HCBS programs run by managed care health plans.

Major Accomplishments and Initiatives

- Georgia has secured a consumer-directed care grant and now has the waiver option of self-directed care.
- The state has seen an expanded effort to redirect resources into the community. The state hopes for continued shifting from nursing homes into the community, as well as better transportation alternatives and options.
- ADRC/Gateway has affected HCBS in Georgia.
- Community Care Services Program has done a great job of managing the individuals in the program. The state was able to demonstrate that they were keeping people who are considered medically intensive in the program and in the community. The average length of stay in the program has increased.
- Georgia has had gradual incremental growth of the capacity of its waiver programs.
- The state notes increased recognition of caregiver needs.
- There has been greater emphasis on evidence-based programs as related to chronic disease prevention and depression.
- There are six Naturally Occurring Retirement Communities in Georgia with federal and state funding.
- The state is actively engaged in building healthier communities, and would like to believe that within the next 5-10 years, there will be some breakthroughs in Alzheimer's disease management and treatment.

Table 1: Types of Home- and Community-based Services Provided Under Georgia’s Programs for Older Adults and Adults with Physical Disabilities

Types of Services	Program Type / Funding Source					
	Medicaid Waivers			CMS-funded Programs and Grants	State Medicaid Plan	OAA Title III
	Elderly and Disabled Persons Community Care Services Program	Physically Disabled Persons Independent Care Waiver	Service Options Using Resources in the Community Environment Program			
Adult Day Care / Adult Day Health	X	X			X	X
Assisted Living	X				X	
Caregiver Services / Respite / Education	X	X	X	X		X
Case Management / Care Coordination	X	X	X	X		X
Chore / Homemaking	X	X	X	X		X
Companion Services / Socialization Activities				X		
Employment						
Equipment / Supplies / Modifications / Assistive Technology	X	X	X	X	X	
Health Promotion Activities	X	X	X	X		
Home Health / Personal Care	X	X	X		X	X
Information / Assistance / Referral	X	X	X	X		X
Legal Assistance / Financial Advice						X
Medical / Dental / Medication Care	X					
Mental and Behavioral Health Services		X				
Nursing					X	
Nutrition / Meals	X	X	X		X	X
Personal Supports for Community Living / Transitioning				X		
Rehabilitation / Therapy	X		X		X	
Residential Services				X		
Transportation				X	X	X
Other/Unspecified HCBS				X		

Table 2: Selected HCBS Programs for Older Adults and Adults with Physical Disabilities in Georgia

Program Type / Funding Source	Program Name	Ages Served	Nursing Home Level of Care Required	Entity Responsible for Functional Assessment	Entity Responsible for Financial Assessment	Entity Responsible for Case Management	Waiting List (Number)	Consumer Direction Option
Medicaid Waivers	Elderly and Disabled Persons - Community Care Services Program	60+ or 0-59 with a disability	No	Area Agency on Aging; Provider entity	State Agency: Department of Children and Family Services; Non-profit (other than AAA or CIL)	Area Agency on Aging; Case Management Entity	Yes (700)	Yes
	Physically Disabled Persons - Independent Care Waiver	All ages	Yes	Case Management Entity; (Independent Providers)	State Agency: Department of Children and Family Services; Non-profit (other than AAA or CIL)	Case Management Entity; (Independent Providers)	Yes (135)	Yes
	Service Options Using Resources in the Community Environment Program	18+	Yes	State Agency: Department of Children and Family Service	State agency; Non-profit (other than AAA or CIL)	Case Management Entity (Independent Providers)	No	Yes
CMS-funded Programs and Grants	Money Follows the Person	not specific to age; serves the aged, blind, and disabled	Yes	Non-profit (other than AAA or CIL); Physician	State agency: Department of Children and Family Services	Case Management Entity; (Independent Providers)	No	Yes