

**COMMUNITY CARE SERVICES  
PROGRAM  
Annual Report  
State Fiscal Year 2005**



**In Memory of Martha Eaves, Advocate of the CCSP**

**In Memory of Martha Eaves (1917- 2005)**

*“Of Martha Eaves' many passions, none was greater than her fight to give older Georgians the chance to remain at home in their final years.*

*The Teamster-turned-aging advocate spent the last two decades lobbying lawmakers and bird-dogging the state budget for money for home-delivered meals and other services to keep senior citizens independent.*

*Former Lt. Gov. Pierre Howard said of her: "There was nothing done in the interest of older Georgians in the last 20 years that Martha didn't have a hand in. I think the state of Georgia owes Martha a debt of gratitude."*

*Mrs. Eaves was selected twice as a delegate to the White House Conference on Aging, most recently by Gov. Sonny Perdue, who called her "a passionate and effective advocate". Martha Talbot Helms Eaves, 88, died of colon cancer."*

Atlanta-Journal Constitution

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# **PROVISIONS OF COMMUNITY CARE SERVICES ACT**

This Annual Report reflects State Fiscal Year 2005 activities completed by the Georgia Department of Human Resources Division of Aging Services and other agencies. It is prepared in accordance with provisions set by the Community Care and Services for the Elderly Act for the following legislators and officers:

- **SPEAKER OF THE HOUSE OF REPRESENTATIVES**
- **PRESIDENT OF THE SENATE**
- **CHAIRMAN OF THE HOUSE HEALTH AND HUMAN SERVICES COMMITTEE**
- **CHAIRMAN OF THE HOUSE HUMAN RELATIONS AND AGING COMMITTEE**
- **CHAIRMAN OF THE SENATE HEALTH AND HUMAN SERVICES COMMITTEE**

The General Assembly, in enacting the Community Care and Services for the Elderly Act, indicated its intent (O.C.G.A. §49-6-60 [et seq. 49-6-64]) as follows:

- To assist functionally impaired elderly persons in living dignified and reasonably independent lives in their homes or with their families or caregivers through the development, expansion and coordination of various community-based services;
- To establish a continuum of care for such elderly persons age 60 and older in the least restrictive environment suitable to their needs;
- To maximize use of existing community social and health services to prevent unnecessary placement of individuals in long-term care facilities; and,
- To develop innovative approaches to program management, staff training, and service delivery that result in cost avoidance, cost effectiveness and program efficiency.

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# COMMUNITY CARE SERVICES PROGRAM

## Success: The CCSP Makes a Difference

**The Community Care Services Program (CCSP) continues to be less costly than all the other long term care programs in Georgia.<sup>1</sup>**

- ✓ **A long-term service resource option** to eligible individuals and their families/caregivers, the CCSP is a resource and not a substitution of individual and family responsibility.
- ✓ **The CCSP supports personal choice and responsibility and promotes consumer independence.**
- ✓ **Comprehensive care coordination** may involve multiple stakeholders: the consumer, family members, care coordinator, Department of Family and Children Services, physician, transportation, and service provider(s). In order to provide improved client outcomes in service delivery and quality of life, care coordinators collaborate with consumers and access other community resources to develop each consumer care plan.
- ✓ **This programmatic cooperation is efficient and results in ongoing taxpayer cost savings.**

*“Post-hospitalization after breaking her hip, my wife was admitted to the nursing home. Three months later she was declining physically and mentally. She was non-compliant with physical therapy and refusing meals. I was fearful she would give up and die if we didn’t get her out of there. I called the CCSP care coordinator, and through consultations between us and the physical therapist at the nursing home, I completed needed home modifications so my wife could come home. With CCSP services my wife is thriving. She has regained some walking ability and has begun to attend her family church again. Without the CCSP my wife would have died.”*

Caregiver spouse, Female consumer, age 79  
Crawfordville (Central Savannah River Area Agency on Aging)

<sup>1</sup> *Comparative Assessment of Cost and Care Outcomes Among Georgia’s Community-Based and Facility-Based Long-Term Care Programs, Final Report, June 22, 2004.*

*“I express my sincere gratitude to the people in CCSP involved in organizing and providing care for my grandmother, in particular the personal support aides for attending to her needs with such warmth and attention and to the care coordinator for organizing the care process.”*

Caregiver granddaughter, Female consumer, age 81  
Atlanta (Atlanta Regional Commission Area Agency on Aging)

*“I am very much pleased with the services I receive in this program and I don’t know how I would manage without it as my health is not very good and I could not manage alone to care for my sister.”*

Caregiver sister, Female consumer, age 80  
Cataula (Lower Chattahoochee Area Agency on Aging)

*“My husband and I are taking care of both our mothers in our home. We are very pleased with the CCSP services which we needed in order to keep our parents at home with family. The CCSP program improves my attitude and allows my life to be less interrupted. Our mothers can be at home and I can see what's going on with them and not have to be totally responsible for all their care. I receive good instruction and direction from care coordination and the visits are always pleasant.”*

Caregiver daughter and daughter-in-law, Female consumers, age 93 and 85  
Tunnell Hill (Northwest GA Area Agency on Aging)

*“We heard about the CCSP in 2001, and it was a blessing for us up until my wife died. Whatever we needed, you were there for us. Everybody responded to us, and that’s what matters. We couldn’t have made it without you, and everybody I know who needs help will know about what you did for us.”*

Caregiver, deceased Female consumer, age 65  
Columbia County (Central Savannah River Area Agency on Aging)

## **INTRODUCTION**

### **VISION**

The *Division of Aging Services* (DAS), its 12 Area Agencies on Aging (AAAs), and our service providers comprise Georgia's Aging Network. We assist older consumers, their families and caregivers to achieve safe, healthy, independent and self-reliant lives. The program is a resource to families, not a substitute for a support network. Georgia's *Community Care Services Program (CCSP)* is the leader in community-based care options, providing support and direction to the Aging Network to ensure that Georgians eligible for nursing facility placement have the option of remaining in their homes or communities.

### **SERVICES**

The CCSP has successfully completed its 23rd year of operation. The program provides a range of community-based services designed to delay or prevent more costly nursing facility placement. These services include: Telephone Screening, face-to-face Consumer Assessment, Care Coordination, Adult Day Health, Alternative Living Services, Emergency Response Services, Home Delivered Meals, Home Delivered Services (Home Health), Out-of-Home Respite Care, Skilled Nursing Services, and Personal Support Services.\*

### **ELIGIBILITY**

CCSP is the cost-effective alternative to institutional placement. The CCSP provides Medicaid eligible consumers with community-based services that support the consumer's choice to remain at home or in the community. Consumers must meet the same medical, functional, and financial criteria as for placement in a nursing facility under Medicaid. A physician certifies that the needs of the consumer may be met by the CCSP and available community resources.

### **FUNDING**

Under Title XIX of the Social Security Act, the Georgia Medicaid Program, funded with federal and state dollars, reimburses provider agencies for services through a federal Medicaid 1915(c) waiver for Home and Community-Based Services. Provider agencies render services in the consumers' homes, licensed personal care homes, or adult day health facilities. The Department of Human Resources (DHR), Division of Aging Services (DAS) administers and manages the CCSP through an inter-agency agreement with the Georgia Department of Community Health (DCH), and the Division of Medical Assistance (DMA).

\* Refer to page 25 for **CCSP SERVICE DEFINITIONS**

## STATISTICAL HIGHLIGHTS

### SFY 2005

- The CCSP served 15,830 consumers;
- Georgia taxpayers saved \$16,728 for *each* consumer served by the CCSP instead of a nursing facility - a statewide savings of over \$264 million;
- The cost to taxpayers to support a consumer in the CCSP was only 26% of the Medicaid cost to maintain a person in a nursing facility;
- Fifty-nine percent of CCSP Medicaid clients pay a portion of the costs for their service(s);
- One hundred eighty-seven consumers served were 100 years of age or older; 14% were 90 or older; 28% were 85 or older; 55% were 75 or older; 81% of CCSP consumers were 60 or older; and, 19% of consumers were under age 60;
- Personal Support Services was utilized by 79% of consumers. It was the most frequently used CCSP service;
- The average community length of stay for enrolled CCSP consumers was 45 months, nearly 4 years.

# CCSP ACCOMPLISHMENTS IN SFY 2005

## QUALITY INITIATIVES

### Partnerships

- ***Decreasing Depression in Community Elders***  
The CCSP partnered with the Fuqua Research Center at Wesley Woods, Emory University to identify and treat depression and to prevent suicide among Georgia's elderly population by training caregivers and other service providers on recognizing symptoms of depression and in referral and intervention strategies. Statewide rollout of this initiative is in process.
- ***Specialist Providers In Teams for Dementia Care (SPRINT-D)***  
The CCSP partnered in this community-based prevention research grant project with the Rollins School of Public Health, Emory University to establish a culturally appropriate, skills based training program to equip caregivers, aides, nurses, social workers and families with evidence-based strategies to deal with dementia related problem behaviors. Statewide project expansion is anticipated.
- ***Aging and Disability Resource Center***  
A three year Administration on Aging / Centers for Medicare and Medicaid Services grant awarded to Georgia integrates information, assistance and referral for individuals with developmental disabilities into the aging network management information system, which serves as a statewide single point of access for these populations. Pilot initiatives are in place in Augusta and Atlanta.
- ***Consumer Self-Direction***  
The CCSP continued to partner with the Department of Human Resources Division of Mental Health, Developmental Disabilities and Addictive Diseases and the Department of Community Health to implement a consumer-directed services option in statewide waiver programs.
- ***Nursing Facility to Community Transition***  
The CCSP admitted 146 consumers from nursing facilities and transitioned them into the community.

## CONTINUOUS QUALITY PROGRAM AND SERVICE IMPROVEMENT

### Activities

- ***CCSP Consumer Satisfaction Survey***  
The CCSP set a consumer satisfaction benchmark for consumers receiving Personal Support Services and Alternative Living Services. Results of the survey indicated satisfaction with services and affirmed the effectiveness of care coordination working with the service provider and consumer to provide quality care.
- ***Comprehensive Care Coordination***  
Emphasis was placed on continuous quality improvement in areas including disease management, development of community resources and monitoring of program costs. Disease management guides were issued for the following chronic illnesses: Chronic Obstructive Pulmonary Disease; Pneumonia; Heart Failure; Hypertension; Diabetes; and, Stroke. CCSP care coordinators and providers participated in the statewide training sessions and workshops on foot care. These training sessions and workshops promoted awareness and identification of interventions to address common foot problems that occur in older adults.
- ***Service providers respond to consumer needs***  
In order to allow caregivers in rural and/or underserved areas a respite from 24-hour a day care giving responsibilities, Adult Day Health (ADH) services will also be offered as Adult Day Health- Mobile (ADH-M) in these areas. From the primary location of the CCSP ADH facility, staff will travel with supplies and materials needed for the day's activities to the rural or underserved area to provide this service.

## **PROGRAM STRUCTURE AND ADMINISTRATION**

Consumers receive CCSP services through the cooperation and partnership of the following state and local agencies and private businesses:

**The Division of Aging Services** (DAS) of the Department of Human Resources has the primary responsibility for development and administration of the CCSP. Coordination of the various entities working together to deliver quality consumer-focused and cost effective services to consumers is the priority of the CCSP.

**The Division of Medical Assistance** (DMA) of the Department of Community Health reimburses service providers and monitors services for appropriateness.

**The Division of Family and Children Services** (DFCS) in the Department of Human Resources determines consumer Medicaid eligibility and cost share for services.

**The Division of Mental Health, Developmental Disabilities and Addictive Diseases** (MHDDAD) of the Department of Human Resources provides consumer psychological and psychiatric evaluations and therapeutic services.

**Area Agencies on Aging** (AAAs) contract with the Department of Human Resource's Division of Aging Services to serve as Lead Agencies or regional managers of the CCSP. The twelve AAAs serve as the local "Gateway to Community Resources" for consumers and their families, service providers, and potential service providers. The AAAs manage service benefit allocations, assuring the CCSP does not exceed budget limitations.

**Care coordinators** work with consumer physicians, assess consumers for CCSP eligibility, develop a comprehensive individualized plan of care, link consumers to service providers and families and consumers to other community-based services, and monitor quality consumer care. Care coordinators assure reliable, cost effective, consumer-focused service delivery, avoiding duplication and over-utilization of services.

**Providers** enrolled in the CCSP deliver services ordered by the consumer's care coordinator and physician. The Division of Aging Services recommends service provider applicants for enrollment in the CCSP.

## PROGRAM SAVINGS AND COSTS

### EXPENDITURES

<b>CCSP PROGRAM EXPENDITURES SFY 2002 - SFY 2005</b>				
<b>CATEGORY</b>	<b>SFY 2002</b>	<b>SFY 2003</b>	<b>SFY 2004</b>	<b>SFY 2005</b>
<b>Consumer Service Benefits</b>	\$84,738,390	\$85,717,353	\$88,866,386	\$93,956,571
<b>Care Coordination</b>	\$17,806,115	\$17,806,114	\$18,174,150	\$20,700,359
<b>State Administration</b>	\$1,403,005	\$1,035,747	\$1,336,010	\$1,371,880
<b>TOTAL</b>	\$103,947,510	\$104,559,214	\$108,376,546	\$116,028,810

**Figure 1** In SFY 2005 the CCSP reimbursed provider agencies over \$93 million for consumer services provided, yet state administrative cost was only 1% of total expenditure for the CCSP.

### OTHER SERVICES

<b>CARE COORDINATION COST - SFY 2005</b>		
<b>DOLLARS EXPENDED</b>	<b>CONSUMERS SERVED</b>	<b>AVG. COST PER CONSUMER</b>
\$20,700,359	15,830	\$1,308

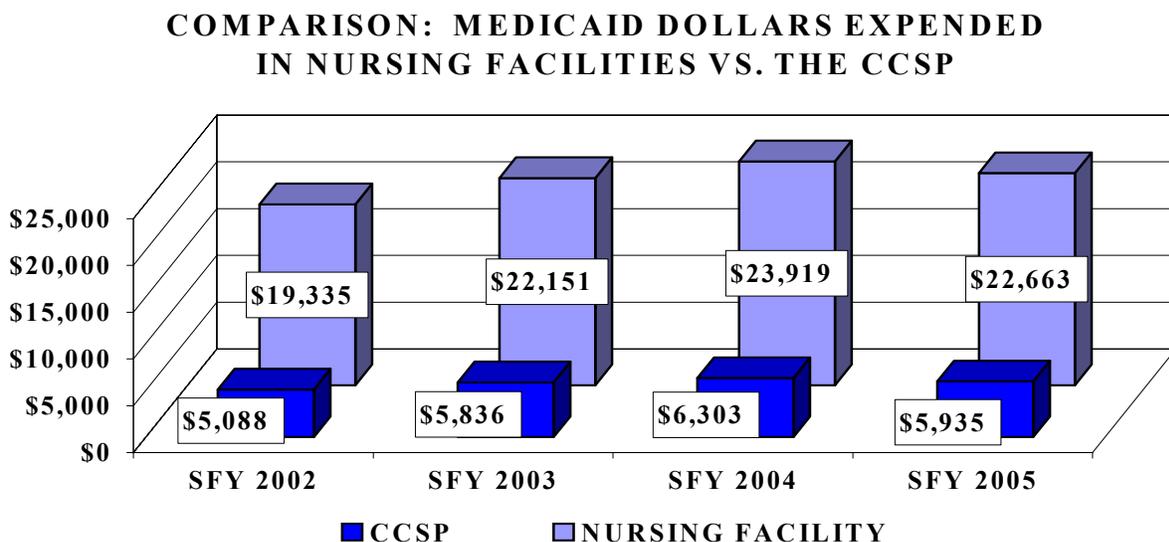
**Figure 2** Comprehensive care coordination is the foundation of providing consumer-centered care to CCSP consumers. Care coordination assures that enrolled consumers receive cost-effective, appropriate, and coordinated services.

## MEDICAID SAVINGS

In SFY 2005, the average annual benefits cost to the CCSP for a consumer's services was \$5,935. If the consumers had received Medicaid reimbursed care in a nursing facility the average annual cost to taxpayers would have been \$22,663 per consumer. The CCSP provided a **statewide taxpayer savings of over \$264 million.**

ANNUAL SAVINGS PER CONSUMER SERVED IN CCSP INSTEAD OF IN A NURSING FACILITY				
SFY 2002	SFY 2003	SFY 2004	SFY 2005	AVG. SAVINGS SFY 2002 - 2005
\$14,247	\$16,315	\$17,616	\$16,728	\$16,227

**Figure 3** The above chart illustrates the cost effectiveness of CCSP.



**Figure 4** Since SFY 2002, CCSP Medicaid per-consumer expenditure has averaged 26% of nursing facility Medicaid expenditure.

## Cost Savings: Caregiver / Consumer Quotes

*“The cost share is well worth the advantages of the CCSP program. My mother goes to an adult day health facility five days a week. With extended personal support services as well, I am able to continue to care for my mother at home and keep my full time job because of the CCSP.”*

Caregiver daughter, Female consumer, age 61  
Albany (Southwest GA Area Agency on Aging)

*“When I moved back home my goal in life was to make sure my parents were never placed in a nursing home. The Community Care Program has been instrumental in helping me achieve this goal by allowing my mother to stay in her home, be monitored and receive services every day. The Community Care Program is more cost effective to keep clients at home rather than placing them in a nursing home.”*

Caregiver, Female consumer, age 45  
Savannah (Coastal GA Area Agency on Aging)

*“I have had surgery and multiple health problems in recent months. Several times doctors wanted to admit me to the hospital because they were afraid that my husband could not manage without help. I gladly told the doctors that I have help under CCSP and because of that they allowed me to go home. My aide takes care of me and keeps everything clean.”*

Female consumer, age 52  
Gainesville (Georgia Mountains Area Agency on Aging)

*“If I didn’t have CCSP I wouldn’t know what to do. My family would have to quit their jobs or I would have to go somewhere. The money spent on this program is the best spent money by whoever funds it.”*

Male consumer, age 37  
Douglas (Southeast GA Area Agency on Aging)

*“My aide comes in, knows what she is doing, gets it done and is really great. My sister helps all she can, but I would be lost without my aide. I'm unable to do things without assistance and she takes charge.”*

Female consumer, age 79  
Barnesville (Southern Crescent Area Agency on Aging)

*“Receiving assistance through CCSP helps to make me live a better life and is probably even extending my life. My doctor has stated that I am not to stay alone so my wife quit her job. By having an aide my wife has been able to go back to work. If we didn’t have this service and my wife had not gone back to work we would probably be on the street because my income alone was not meeting our monthly bills every month. I am thankful for the CCSP.”*

Male consumer, age 61  
Macon (Middle GA Area Agency on Aging)

*“I am a working professional, yet understanding the ins and outs of the eldercare system, much less the laws, rules, and regulations of the Medicaid system threw me into a giant tizzy. The CCSP staff were reassuring; sometimes they gave direction, but mostly they stayed in contact with me to help me navigate a system that is entirely foreign to me. Taking care of elderly parents and family members is challenging. The CCSP staff helped me understand the things I needed to do, and had patience with me. Care for the elderly is costly and complex, so I enter my plea for full support of this program. They know their job, they know what is expected of them, but they also know how to really help people like me.”*

Guardian niece, Female consumer, age 89  
Jonesboro (Atlanta Regional Commission Area Agency on Aging)

*“You never know whose hands you’re going to fall into, and I wish I was able to take care of my wife. She’s always been independent, and this stroke left her where she can barely stand up. The aide is dependable, and we know when she’s coming and when she’s not. Everybody has done what they said they would do, and we are pleased with the services.”*

Caregiver, Female consumer, age 77  
Sandersville (Central Savannah River Area Agency on Aging)

*“Our care coordinator has helped me so much. Her efficiency far surpasses anyone else who has served me in my senior years.”*

Female consumer, age 69  
LaGrange (Southern Crescent Area Agency on Aging)

# **CONSUMER ASSESSMENTS AND WAITING LIST**

## **ASSESSMENTS**

Community Care Services Program (CCSP) consumers must meet the same medical, functional, and financial criteria as consumers receiving nursing home care under Medicaid.

Area Agencies on Aging staff conduct telephone interviews to screen consumers for potential service eligibility.

- Consumers are prioritized for assessment based on the results of the telephone screening. Consumers with high impairment levels and unmet needs are the first to enter services.
- A face-to-face assessment determines the consumer's need for services.
- Care coordinators determine consumer medical and functional eligibility.
- Eligibility staff at the Division of Family and Children Services determine consumer financial eligibility for Medicaid.

The CCSP care coordinators visit consumers at least every four months or more frequently as needed to assure they remain eligible for services and services are addressing the consumer's needs.

The CCSP is the undisputed choice over institutional placement for 92% of assessed consumers.

## **GEORGIA'S CCSP WAITING LIST**

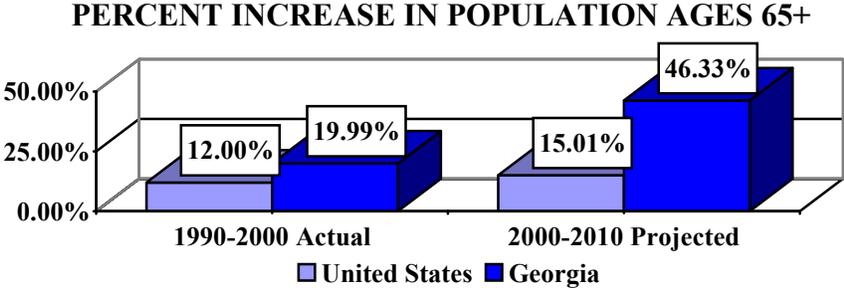
By 2030, there will be over 71 million older persons in the United States, more than twice their number in 2000. People 65 and older represented 12.4% of the population in the year 2000, and will represent 19.7% by the year 2030<sup>2</sup>. "The elderly population in Georgia will increase by 143% between 2000 and 2030 versus a total population increase in Georgia of 46.8%."<sup>3</sup>

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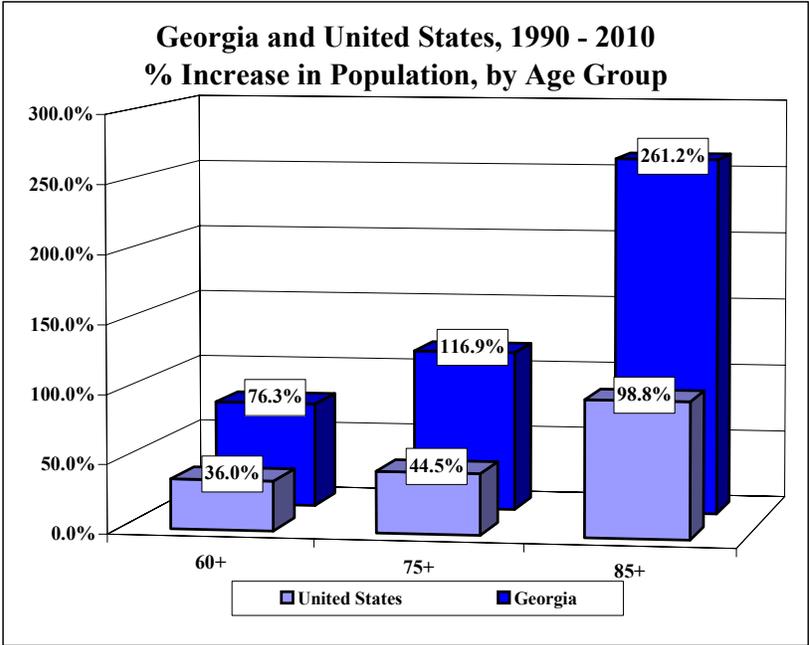
<sup>2</sup> U.S. Bureau of the Census, "US Interim State for Five-Year Age Groups and Selected Age Groups by Sex: July 1, 2004 to 2030" <http://www.census.gov/population/projections/DownldFile2.XLS>

<sup>3</sup> Georgia's Aging Population: What to Expect and How to Cope? Dr. Glen Landers et al, Fall 2005

Georgia had the tenth fastest growing elderly population (ages 60+) in the United States during 1990-2000. Over the 20<sup>th</sup> century (1900-1999), the number of Georgians ages 60 and above increased ten-fold, compared to a four-fold growth in the population overall.



**Figure 5** The graph shows the projected increase in Georgia’s elderly population from 1990 – 2010<sup>4</sup>.



**Figure 6** The graph shows the projected increase, by age group, in Georgia’s elderly population. This is significantly greater than the anticipated U.S. increase.

<sup>4</sup> US Bureau of the Census, Summary File 1, 1990 and 2000; Governor’s Office of Planning & Budget Projections 2010.

<b>CCSP WAITING LISTS SFY 2002 - SFY 2005</b>	
<b>SFY</b>	<b>AVG. COUNT OF CONSUMER WAIT LISTS</b>
<b>2002</b>	4,115
<b>2003</b>	5,560
<b>2004</b>	5,018
<b>2005</b>	1,919

**Figure 7** The number of consumers on the CCSP Waiting List decreased substantially due to additional funding given to CCSP to admit consumers near the end of the 2005 state fiscal year.

<b>PROJECTION OF POTENTIAL CCSP CONSUMERS</b>			
<b>Year</b>	<b>2015</b>	<b>2020</b>	<b>2025</b>
<b>Estimated Number of Potential CCSP Consumers</b>	54,007	65,337	80,003

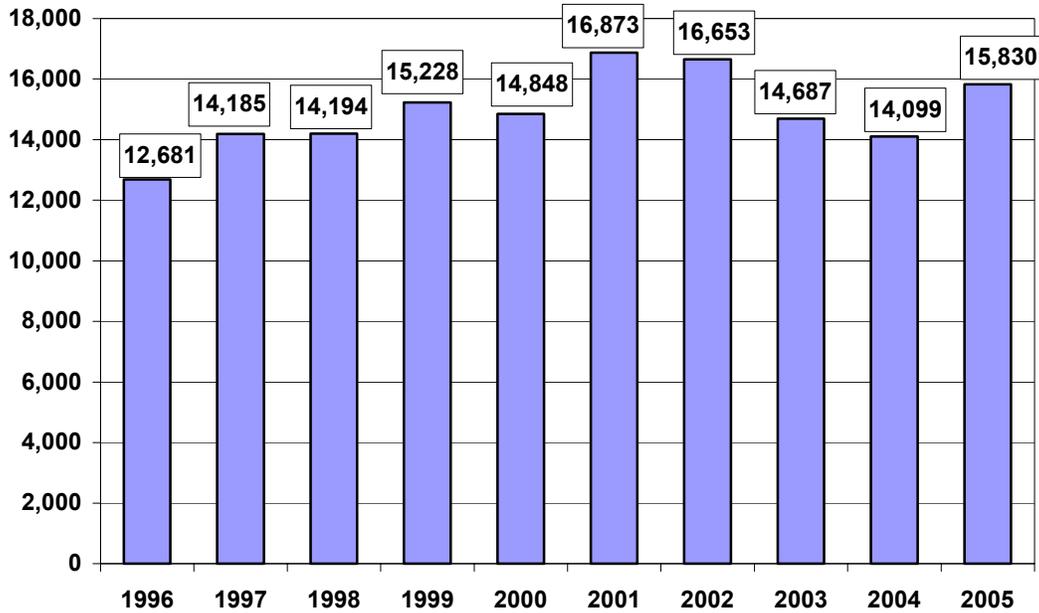
**Figure 8** The above projections calculate the number of consumers who may need CCSP services over the next 20 years. Projections are based on U.S. 2000 Bureau of the Census population statistics: older Georgians served by Medicaid who have chronic conditions, no spouse, who are not in nursing facilities, or, who are eligible for services provided by the Division of Mental Health, Developmental Disabilities and Addictive Diseases.

## **SUMMARY**

Growth projections for Georgia seniors with chronic conditions clearly suggest that there will continue to be a substantial demand for home and community-based services as well as the probability of a significant impact on future Medicaid expenditures.

# CONSUMER DEMOGRAPHICS

## CONSUMERS SERVED BY CCSP



**Figure 9** The above illustrates a 25% increase in the number of consumers served over ten years ago.

<b>PROFILE OF CCSP CONSUMERS - SFY 2005</b>	
Unduplicated consumer count	15,830
Consumers 100 years of age or older	1%
Consumers 90 years of age or older	14%
Consumers 85 years of age or older	28%
Consumers 75 years of age or older	55%
Consumers 60 years of age or older	81%
Consumers under 60 years of age	19%
Percentage of consumers who are female	75%
Percentage of consumers who are minorities (non-white)	44%

**Figure 10** In SFY 2005, the CCSP served 15,830 consumers. Seventy-five percent were female. Fifty-five percent were over the age of 75, and 28% of

consumers were 85 or older. Nineteen percent of consumers served were younger than age 60. The number of consumers age 100 years or older was 187.

<b>AVERAGE LENGTH OF STAY &amp; DISPOSITION OF CONSUMER DISCHARGES SFY 2005</b>	
<b>Average Consumer Length of Stay</b>	45 months
<b>Disposition of Discharged Consumers:</b>	
- <b>Death</b>	44%
- <b>Nursing facility placement</b>	30%
- <b>Hospice/ Other Waiver Programs/ Ineligible/ Moved From Service Area/ No Service in 60 Days/ Requested Termination</b>	26%

**Figure 11** The above chart shows the average time a person remains in the CCSP. Thirty percent of those discharged from the CCSP enter a nursing facility because of their need for continuous higher level of skilled care services. The average length of time consumers enrolled in the CCSP live in the community is nearly four (4) additional years.

<b>CONSUMERS BY PAYMENT SOURCE - SFY 2005</b>	
<b>Consumers receiving SSI Medicaid</b>	41%
<b>✓ <u>NOTE: Consumers contributing toward cost of service(s) is 59%</u></b>	
<b>-Consumers receiving Medical Assistance Only (MAO)</b>	53%
<b>-Consumers whose Cost Share covered all service costs</b>	6%

**Figure 12** Forty-one percent of CCSP consumer care is fully paid by Medicaid, because the consumer's income is less than the federal Supplemental Security Income (SSI) level. Fifty-three percent of consumers receive partial Medicaid payment for their services. According to their income levels Medical Assistance Only (MAO) consumers pay a portion of the cost of their services known as Cost Share. Services for the remaining 6% are provided at no cost to Medicaid because the consumer pays the entire cost of the CCSP services.

## Independence and Choice: Consumer / Caregiver Quotes

*“The client originally moved into a nursing home because she was not taking medications properly and lived there for 3½ years. The client’s family encouraged the client to consider a personal care home alternative. Eight months after admission to a CCSP personal care home, the client reports increased exercise, intentional weight loss advised by her doctor, and goes to town, church, and recently, to her son’s wedding. She is taking fewer medications. She is enjoying the personal care home and wishes she had come out of the nursing home sooner. Due to the less restrictive environment, she has been able to live a more independent lifestyle.”*

Care coordinator, Female consumer, age 61  
Vidalia (Heart of Georgia/ Altamaha Area Agency on Aging)

*“My husband and I know we can’t live on our own with our health problems, and we would never burden our children with taking care of us. The staff at the personal care home is very good to us. We just love living here.”*

Husband and wife consumers, age 76 and 73  
Perry (Middle GA Area Agency on Aging)

*“The Community Care Services Program is an excellent program. It’s a God-send for the elderly and disabled clients who would not be able to stay home without the services. My success with CCSP is due to the effective communication and hands-on approach between the attending contractual agencies and me. I find the care coordinator social worker to be caring and compassionate.”*

Caregiver, Female client, age 99  
Madison (Northeast GA Area Agency on Aging)

*“This program has been tremendous help for me and for my mother. I don’t know what I would have done without it. When my mama got real sick and was in the hospital, I knew that I did not want her to go to a nursing home, and Community Care made it where she could come home. When she first got home, she could not even get out of bed and now she can get around pretty good. And it certainly helps me because I have a business to run and could not do this without the aide coming and staying with mama. It is just wonderful.”*

Caregiver daughter, Female consumer, age 79  
Pearson (Southeast GA Area Agency on Aging)

*“I have been receiving help from CCSP for over 10 years. My sister died last year. She was a big help to me but now I am more dependent on the people at CCSP. The aide helps me stay as independent as possible. I am paralyzed so my aide has to help me with everything and my care coordinator checks out other services in the community for me.”*

Male consumer, age 45  
Eatonton (Middle GA Area Agency on Aging)

*“Although she received excellent care at the nursing home she was miserable, homesick and terribly depressed. Now with CCSP services she is home in her own environment, surrounded by personal things dear to her, has excellent professional care almost every day and has such a better quality of life than she would have in the nursing facility. She strives every day to get better and has everything to look forward to. Although I see her almost every night and talk on the phone I can continue working, keep her at home, and also take care of my husband who has a terminal illness and without my job we would not be able to afford the medical insurance we need for him.”*

Caregiver daughter, Female consumer, age 79  
Lumber City (Heart of Georgia/ Altamaha Area Agency on Aging)

*“CCSP has helped me remain in my home and improve my quality of life. I receive assistance with things I had trouble doing in the past. My aide helps me with bathing, dressing, and housekeeping, she also picks up my medicines for me from the drug store. I feel safe knowing I can push my ERS button and help will arrive on the days that I am home alone!”*

Female consumer, age 74  
Pembroke (Coastal GA Area Agency on Aging)

*“If it weren't for the CCSP, mother would have had to go into the nursing home. She pleaded with me and my sister not to put her there, so we juggled work and stayed with her for years. Then she got so weak and forgetful that we had to have someone stay around the clock. My sister and I rotate nights staying with her and this starts over every day. Your services have been a life saver to our family. I am single and self-employed and if I don't work no money comes in to pay my bills. With the CCSP, mother has been able to maintain her dignity and wish to stay in her own home.”*

Caregiver daughter, Female consumer, age 94  
Waycross (Southeast GA Area Agency on Aging)

## CCSP SERVICES

### UTILIZATION AND EXPENDITURES

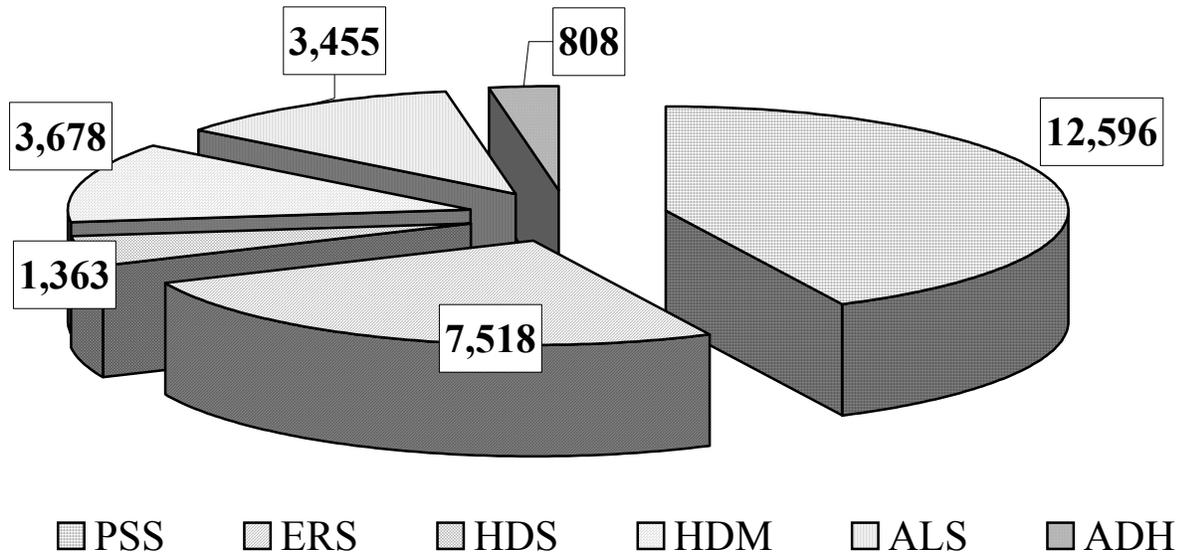
<b>CONSUMERS SERVED AND CCSP MEDICAID FUNDS EXPENDED BY SERVICE TYPE - SFY 2005</b>				
<b>CCSP SERVICE</b>	<b>CONSUMERS SERVED*</b>	<b>% TOTAL CONSUMERS*</b>	<b>FUNDS EXPENDED</b>	<b>% TOTAL FUNDS**</b>
Adult Day Health (ADH)	808	5%	\$3,840,381	4%
Alternative Living Services (ALS)				
- Group Model	2,740	12%	\$8,174,879	>9%
- Family Model	715	5%	\$3,291,956	>4%
Emergency Response Services (ERS)	7,518	47%	\$1,604,121	>2%
Home Delivered Meals (HDM)	3,678	23%	\$4,169,699	4%
Home Delivered Services (HDS) / Skilled Nursing Services (SNS)	1,363	9%	\$139,150	>1%
Out-of-Home Respite Care (OHRC)	47	>1%	\$70,844	>1%
Personal Support Services (PSS, PSSX)	12,549	79%	\$72,665,636	77%

\* Duplicated consumer count. Consumers may receive more than one service.

\*\* Percentages are rounded.

**Figure 13** The above outlines by CCSP service the number of consumers served and expenditures of CCSP Medicaid dollars.

**CONSUMERS SERVED BY SERVICE TYPE  
SFY 2005**



**Figure 14** This graph displays by service type the number of CCSP consumers who receive each service. Consumers may receive more than one service.

\*NOTE: Personal Support Services consumer count includes Out-of-Home Respite Care consumers. Home Delivered Services includes consumers receiving Skilled Nursing Services.

**SUMMARY**

Seventy-nine percent of CCSP consumers use Personal Support Services (PSS), the provision of personal assistance, stand-by assistance or supervision of consumers with inability to perform activities such as feeding, dressing, bathing, toileting, transferring or walking, or light housekeeping. It may also provide respite care to the caregiver. This service accounts for 77% of total CCSP expenditures. Alternative Living Services (ALS) ranks second in expenditures (12%).

Accounting for less than 2% of CCSP Medicaid expenditures, 47% of CCSP consumers use the cost-effective Emergency Response Services (ERS).

## PROVIDERS OF SERVICE

<b>PROVIDERS BY SERVICE TYPE* - SFY 2005</b>	
Adult Day Health	39
Alternative Living Services - Family Model	19
Alternative Living Services - Group Model	157
Emergency Response Services	15
Home Delivered Meals	32
Home Delivered Services	92
Out-of-Home Respite Care Services	9
Personal Support Services	152

\* Some providers provide more than one service.

**Figure 15** This chart reports the number of providers enrolled in each CCSP Medicaid service.

The Community Care Services Program manages, coordinates, and provides services to consumers by partnering with 414 public and private licensed CCSP enrolled businesses and agencies. The CCSP supports and grows small local businesses.

## CCSP SERVICE DEFINITIONS

### **Care Coordination**

The care coordinator screens and assesses the consumer's medical, functional and social problems/needs to determine the appropriateness for Community Care and, with input from the client, caregiver, and physician develops a specific plan of care for each consumer admitted to the CCSP.

The care coordinator brokers/monitors provider services for consumers by planning, arranging, coordinating, and evaluating the service delivery to assure that appropriate, quality services are provided in a timely and cost effective manner and assures that consumer costs are contained.

*“Your services, support, caring and love were a great source of strength and helped to give us the courage to face each day with hope, a good attitude, and a lighter heart. You are to be commended for the services which you provide to elderly people like mother and for the attitude which you display toward them. Your love and concern for her welfare and well-being will long be remembered in our very grateful hearts.”*

Caregiver daughter, deceased Female consumer, age 86  
Eastman (Heart of Georgia/ Altamaha Area Agency on Aging)

*“I appreciate services coming in and the care coordinator coming out and checking on us and getting other services in place. There is no way possible I could take care of him at home by myself.”*

Caregiver wife, Male consumer, age 58  
Douglas (Southeast GA Area Agency on Aging)

*“When I call my care coordinator for help she listens and takes my concerns seriously. She takes steps to solve the problem.”*

Female consumer, age 80  
Conyers (Atlanta Regional Commission Area Agency on Aging)

*“My care coordinator has a very professional and courteous manner when she conducts her interview with us. If she does not know the answer to any of our questions, she calls back by phone with the answer usually the same day. She is a pleasant person and sensitive to our situation.”*

Female consumer, age 28  
Columbus (Lower Chattahoochee Area Agency on Aging)

## Care Coordination Quotes, cont'd.

*“The current aide has been very dependable. I can leave mother and not worry about her. The service allows mother to see someone else coming in the home and she looks forward to it. It gives me a break and helps me get my nerves together. Care coordination has been very helpful with problems. We could not make it without CCSP services because mother does not want to go to a nursing home.”*

Caregiver, Female consumer, age 88  
Calhoun (Northwest GA Area Agency on Aging)

*“These CCSP care coordinators and aides that work with the elderly are outstanding. I am very pleased with the services and the program. I live out of state and know that my mother is well taken care of and at home instead of being in a nursing home.”*

Caregiver son, Female consumer, age 85  
Cornelia (GA Mountains Area Agency on Aging)

## Adult Day Health (ADH)

ADH provides care in a community-based day program for consumers who are functionally or cognitively impaired. ADH provides consumers a variety of activities, health, therapeutic and social services in a group setting: nursing care, special therapeutic services, personal care services, planned therapeutic activities, dietary services, transportation, and social work services.

*“I lost hope after my husband died last year because I have never lived alone. I had forgotten what it's like to socialize with other people. I go to the adult day health program three times a week, which is enough to keep me from getting bored. I recommend it to anybody.”*

Female consumer, age 80  
Thompson (Central Savannah River Area Agency on Aging)

*“It is just me and my husband at home, so going to the adult health center gives me a chance to get out of the house. We do exercise in a group and we do crafts and the nurse makes sure I get my medicines right.”*

Female consumer, age 69  
Dry Branch (Middle GA Area Agency on Aging)

### **Alternative Living Services (ALS)**

ALS provides twenty-four hour supervision, medically-oriented personal care, periodic nursing supervision, and health-related support services in a residential setting other than the consumer's home. This service is provided in state licensed personal care homes.

*“I love living in the personal care home. I enjoy being with other people and help with the little things. I do not think I would be this healthy at home alone with no help.”*

Female consumer, age 92  
Ocilla (Southeast GA Area Agency on Aging)

*“Daddy likes being at the personal care home. They treat you like family, and he’s got everything he needs. I sure can’t take care of him, and it’s good they have programs that can.”*

Caregiver, Male consumer, age 66  
Lincolnton (Central Savannah River Area Agency on Aging)

### **Emergency Response System (ERS)**

ERS provides an in-home electronic support system for two-way communication between isolated consumers and a communication control center twenty-four hours a day, seven days a week.

*“My ERS unit saved my life. I started feeling bad and took an antacid tablet thinking it was heart burn. When the pain did not ease, I called my sister who was not home. I pushed my ERS button when the pain increased. The doctor told me if I hadn’t gotten treatment when I did I wouldn’t have survived. My ERS button is my safety blanket.”*

Male consumer, age 49  
Flowery Branch (Georgia Mountains Area Agency on Aging)

*“I’ve had this button since the early ‘90’s, and my children don’t worry about me half as much. Everywhere I go, it goes. It’s my best friend.”*

Female consumer, age 85  
Washington (Central Savannah River Area Agency on Aging)

## Emergency Response System (ERS) Quotes, cont'd.

*“Having my ERS button is such a comfort to me. I live alone and sometimes the only people I see all day are my home delivered meals person and my aide. I would hate to think of what might happen if I fall and can't get to the phone.”*

Female consumer, age 79  
Savannah (Coastal GA Area Agency on Aging)

*“Being a legally blind woman living alone is hard. But with the help of CCSP I can continue to live in my home without worrying whether I will have help if I need it. I keep the ERS button around my neck in case of emergency.”*

Female consumer, age 62  
Perry (Middle GA Area Agency on Aging)

## Home Delivered Meals (HDM)

HDM ensures improved nutrition to enhance consumer health and well-being. Consumers may receive home delivered meals only in conjunction with another CCSP service.

*“I am grateful for the services. The aide helps with housekeeping chores, which I cannot do; without the aide I would not be able to keep my apartment clean. Through the program I am able to receive meals during the day. I am able to maintain living in my apartment alone with this program!”*

Female consumer, age 87  
Bloomingtondale (Coastal GA Area Agency on Aging)

*“We are very grateful for the hot meals daily. I don't know how my husband and I would make it without the CCSP.”*

Caregiver wife, Male consumer, age 89  
Atlanta (Atlanta Regional Commission Area Agency on Aging)

*“Since I can't stand up long anymore, I depend on the home delivered meals to bring me something to eat until my son comes by with some more food in the evening.”*

Female consumer, age 83  
Gordon (Middle GA Area Agency on Aging)

## **Home Delivered Services (HDS)**

HDS Medicaid Home Health Services (HHS) provides traditional home health on an intermittent basis to consumers in their homes. Services include skilled nursing; physical, speech and occupational therapy; home health aide and medical social services.

*“I would not be at home if not for this program. I would probably not be alive. This program allows me to stay in my home and receive skilled services like you receive in the nursing home. Right now a nurse is coming everyday and providing wound care for my leg. I thank God everyday for this wonderful program.”*

Female consumer, age 71  
Waycross (Southeast GA Area Agency on Aging)

*“I had a head injury and stroke from a motor vehicle accident leaving me with no use of my right side. Due to my unsteady gait and weakness I fell and broke my right leg. Upon release from the hospital I was bed bound and had a urinary catheter. I had no one at home to assist me. I lived alone, was incontinent, had skin breakdown and couldn't shop for groceries or make meals. Because of the CCSP, now my needs are met. I have improved enough to transfer to the bedside commode. The aide makes sure I have a meal cooked and enough left over for later. Without the services I would be back in the hospital and in a nursing home.”*

Female consumer, age 39  
Douglas (Southeast GA Area Agency on Aging)

## **Personal Support Services (PSS)**

PSS provides a range of support services for CCSP consumers. Services include assistance with activities such as light housekeeping, running essential errands, and basic personal care needs including feeding, dressing, bathing, toileting, and transferring.

*“I have a super aide and I hope you never take her away. She will not leave me until I am taken care of; she bathes me, shampoos my hair, anything. She picks out my clothes and says, ‘Oh wear this today, this looks so good on you’. She is so tender.”*

Female consumer, age 76  
Lake Park (Southeast GA Area Agency on Aging)

### **Personal Support Services (PSS) Quotes, cont'd.**

*“The service you give me helps my mother stay clean and gives me time to run errands and rest.”*

Caregiver daughter, Female consumer, age 83  
Greensboro (Northeast GA Area Agency on Aging)

*“The CCSP provides me with a daily bed bath, transfer assistance, laughter, meals, outings, relief for my caregiver, and most importantly enables me to live without going to a nursing home. My daughter could not care for me at home without CCSP.”*

Female consumer, age 51  
Athens (Northeast GA Area Agency on Aging)

*“I thank God for my Community Care Services. My aide does a wonderful job!”*

Female consumer, age 84  
Brunswick (Coastal GA Area Agency on Aging)

### **Extended Personal Support Services (PSSX)**

PSS-X provides personal support services in a home setting that includes respite care for the full time caregiver over an extended period of time.

*“Whoever referred us to this CCSP program was a life saver. I am a working mother and this program has really helped me with daily activities especially in the morning. Aides help to get my son ready in the morning.”*

Caregiver mother, Male consumer, age 13  
Milledgeville (Middle GA Area Agency on Aging)

*“My plate is so full working and caring for my mother and husband. I don't know what I would do without the CCSP. I guess I wouldn't be able to make it.”*

Caregiver daughter, Female consumer, age 77  
LaGrange (Southern Crescent Area Agency on Aging)



**“A partner in the Aging Network”**

**Community Care Services Program**

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