Cash and Counseling Demonstration and Evaluation

Policy Implications
Michael O’Grady
Alliance for Health Reform Briefing
July 29, 2005
HHS - A Proud Co-Sponsor of Cash and Counseling

- Consumer direction, Medicaid policy innovation
- Medicaid modernization/LTC reform
- Value of research
- Research informing policy
Key LTC Reform Goals Exemplified by C & C

• Encouraging independence
• Sustaining natural supports
• Access to dependable home care
• Overcoming “institutional bias”
• Setting predictable budgets
• Empowering consumers
HHS is Committed to Improving Home Care Access/Quality

- President’s New Freedom Initiative --- *Olmstead* Ruling

- CMS Quality Initiative
HHS Committed to Medicaid Cost Control

• Medicaid LTC cost control efforts must be strategic

• Target – alternative LTC financing
Cost Containment Must Support, Program Goals

• Savings illusory
• C & C meets disability needs, reduces nursing home costs
Budget Neutrality

- C & C budget neutral by design
- No abuse of funds
- Almost no one chose “cash”
- Support services prevent fraud
Moving Beyond Experimental “Demonstration”

- C & C has influenced Medicaid policy
- Independence Plus initiative
- Exploring C&C in state plan services
Conclusion

- ADA Anniversary
- C&C improves quality of life
- Cost-effective improvements in access, quality
- DHHS will work to eliminate federal barriers