

Petition for Change in NC State Medical Facilities Plan
Policies Applicable to Home Health Services (HH)

Petitioner: LeadingAge North Carolina
C/O Tom Akins, President and CEO

Speaker: Lee Syria
President and CEO, United Church Homes and Services

- Residents who move into a CCRC are planners. They choose this option because they want to be prepared if their future needs changes as they age.
- At the time CCRCs were gaining popularity in the state in the 70s/80s – the post-acute continuum of care consisted primarily of the options of assisted living and/or skilled nursing care.
- The world of health care has and is changing rapidly, and now the post-acute continuum includes not only assisted living and skilled nursing but also home health and home care.
- CCRC providers would like to be able to live up to our ‘promise’ of being able to provide for our residents as they age and their care needs change even if they need home health services.
- They would still be allowed choice of providers just as they currently are allowed choice for other levels of care (AL and SNF).
- Many residents come to CCRCs so that they will know and can form a relationship with the providers that they may need in the future.
- The ability to be a home health provider would better enable us to manage the coordination of the person’s care.
- In the case where an independent living resident living in a CCRC goes to the hospital for an acute episode, is discharged to our SNF for a few days, and then discharged to home health (or skips SNF and is discharged directly to home health)– home health services would enable us to manage and follow their care more closely. Hopefully preventing or reducing the likelihood of a readmission to the hospital. It essentially would reduce having 3 providers trying to communicate/coordinate care to 2 providers –one of which (the CCRC) has a long history with the person.
- In closing, I do not believe all CCRC providers will apply to become a certified home health provider for a variety of reasons, but many would like the opportunity to do so if it proves to fit our business plan in order to maintain our brand promise to our residents by coordinating their care throughout the continuum and potentially lowering the cost of care through avoided admissions and/or readmissions to the hospital or skilled nursing facility.