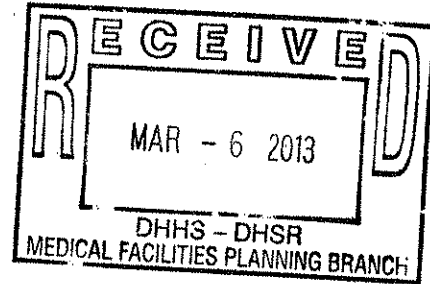


March 5, 2013

Jerry Parks
NC Division of Health Services Regulation
Medical Services Planning Branch
2714 Mail Service Center
Raleigh, North Carolina 27699



Dear Committee Members,

██████████, my brother is a resident of Spring Glen Retirement Community – Residential Services, Inc.

Our parents desired that ██████████ have a full and inclusive life. Despite being advised in 1954 to have him institutionalized, ██████████ came home to be a full part of our family and community.

██████████ grew and prospered and our parents worked to find education opportunities, and later a workplace, Durham Exchange Industries. These community spaces weren't always available early on to ██████████ and others like him.

██████████ lived at home until our parents could no longer take care of themselves. We then began a search in the community for a new place. ██████████ had worked for 35 years at Durham Exchange. He wanted to retire. One parent passed away the week after ██████████ move to Spring Glen-Residential Services Inc. The transition was rough but because Spring Glen, we all made it.

We have found Spring Glen to be the environment that is right for ██████████. He has continued to grow into even more independence with the help of trained staff and excellent services. When we found out last year that Spring Glen could no longer accept CAP Medicaid funding, we had an overwhelming dilemma. ██████████ could lose his funding source or leave Spring Glen. Spring Glen had provided the support, 24 hour supervision for medical issues, activities in the community and a family environment for him for seven years. After that adjustment period, he had just begun to accept Spring Glen as home. We stayed. It is right for ██████████. Rarely do we ask able minded citizens to leave a place they have chosen to live, a place where they are gaining community involvement and are also cared for. But in this situation, the residents of Spring Glen have been asked to do just that.

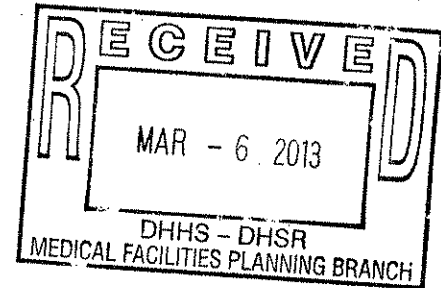
██████████ has not had the advantage of his medical insurance – Medicaid since August 2013 because of that “right decision”. He has had 3 hospitalizations.

Please consider moving ICF beds to help Spring Glen maintain its present residential (family) and funding for continuity of services. ██████████ and his housemates need your support.

Janice King
237 Fork Junction Road
Timberlake, NC 27583

March 5, 2013

Jerry Parks
NC Division of Health Services Regulation
Medical Services Planning Branch
2714 Mail Service Center
Raleigh NC 27699-2714



To the Committee:

My family has been touched by recent changes in CAP-Medicaid funding. Our brother has been living at Spring Glen Retirement Community for seven years. We were recently (August 2012) asked to make a choice between allowing him to continue to choose his living place or losing our CAP Medicaid funding. We feel this is unfair.

- Currently, CMS Regulations require that CAP Funding is available to residents of domiciliary care facilities with 6 or fewer residents, as well as facilities with 7-15 residents that meet Home and Community Based Standards. The intent of this standard is that residents reside in a manner close to normal community counterparts.
- However, the aged developmentally disabled or those whose developmental disabilities make them medically older than their actual chronological age require a different standard to more closely match normal community living situations for the aged or retired.
- Some non disabled retired/aged persons within our society live in retirement communities, assisted living or skilled nursing facilities with 60 or more residents. This offers them social contact, recreational and economical opportunities and enhances their chances of benefiting from strategies related to economies of scale.
- Matching a resident to a facility that meets the aging needs of the individual is right for the individual and right for our society.
- Please consider these ideas when determining how money will be spent to support citizens whose CAP Medicaid funding has been denied.
 - Community living standards for the retired/aged developmentally disabled or those whose developmental disabilities make them effectively medically older than their actual chronological age are different from other developmentally disabled individuals.
 - Matching the resident's aging needs to a proper facility should be taken into account regardless of facility size.

- The economies of scale offered by somewhat larger facilities are expected to be a more cost effective way of meeting needs.
- Changing beds from CAP-Medicaid funding to ICF funding will best meet the needs of the residents, including our brother, at Spring Glen Retirement Community.

An example of an exemplary facility that meets the needs noted above is Spring Glen Retirement Community.

Thank you for your immediate attention to these very important issues that not only have serious implications for my brother's welfare, but also for the many aged developmentally disabled who are in danger of being overlooked by funding sources.

Sincerely,

Candace M. Black

Candace M. Black
Sister of [REDACTED]