

## 2020 Budget Request Form – Douglas County, KS

### Summary and Community Partner Overview

Community Partner:	<b>Trinity In-Home Care</b>
2020 Request	\$30,000

Contact Name:	Ginger Kurtz
Address:	2201 W 25 <sup>th</sup> St, Suite Q
City, State Zip	Lawrence, KS 66047
Phone No.	785-842-3159
E-mail:	<a href="mailto:ginger@tihc.org">ginger@tihc.org</a>

#### Community Partner Overview:

A local 501(c)3 since 1976, Trinity In-Home Care (TIHC)'s ~110 caregivers currently provide non-medical in-home support services to ~150 of Douglas County's most vulnerable residents who are elderly and/or have a disability, for a total of ~60,000 hours of care annually. In addition to our affordable full-rate private pay services, we provide services for:

- Medicaid's Intellectual-Developmental Disability, Physical Disability and Frail/Elderly programs (aprox. 65% of our services)
- Jayhawk Area Agency on Aging programs (*Senior Care Act and Older Americans Act*)
- Veterans Administration
- Working Healthy
- PACE (Program for All-Inclusive Care for Elderly, a version of Medicaid operated locally by Midland Care)
- Sliding scale for private pay to those whose income is too high to qualify for Medicaid but whose budget prevents them from affording services elsewhere or at our full rate. This sliding scale is based on the 2014 Kansas poverty guidelines, and is designed to pick up where Medicaid drops off.

## 2020 Budget Request Form – Douglas County, KS

### Service Overview - Metrics and/or data that describe the service impact:

To understand the individuals who use these services, imagine yourself with a physical disability, developmental disability, or with a body that is aging and cannot do what it used to do every day. *TIHC's caregivers assist these individuals with basic tasks of self-sufficiency that many people take for granted.* If your physical body did not have the strength to lift yourself out of bed, use the restroom or get dressed, stand long enough to prepare a meal or wash your dishes, lift the bag of trash to take to the curb or vacuum your living room, drive yourself to a doctor's appointment or to the grocery store, or even raise your arms to comb your hair or the steadiness of hand to trim your fingernails, what would you do? If your cognitive ability prevented you from making safe decisions about things like when it's safe to cross a street, or the memory to take a shower, take medications (which ones have to be taken with a meal? Which ones on an empty stomach? How many in the morning or at night?), or even to remember to eat in general, what would you do? Maybe you would have a family member who could care for you. But what if you didn't? Or what if your family member had to go to work to financially support your family, but you couldn't be left alone? These are the day-to-day tasks that TIHC's caregivers provide to our clients. The alternative would be for these individuals to live in a nursing facility or institution, a solution that is unnecessarily expensive and reduces the quality of life for the individual.

TIHC has been providing these services for over 40 years, so it's hard to imagine Douglas County without TIHC's caregivers in place to fill this need. Unfortunately, without TIHC, all indications point to a scenario where individuals would be moved into restrictive, expensive facilities and institutions at the cost of taxpayers.

TIHC differs from other area providers for a few reasons. Affordability, scope of programs, and one more very specific difference: unlike other Medicaid providers, we recruit, hire, supervise and schedule caregivers for our clients, most of whom would be unable to hire on their own or who do not have family available to assist them. This is referred to in the industry as "Agency Directed Services". TIHC works directly with other local agencies to prevent duplication of services and correctly refer clients to the agency most appropriate for their care. However, TIHC is currently the only agency in Douglas County providing this specific scope of services, depth of reduced rates and personalized options for supportive care.

For example, VNA primarily provides *medical* in-home supportive care and in fact, we work in partnership to support some of the same individuals. Independence Inc.'s developmental and physical disability supports look similar from the outside. But when a person cannot "self direct" their employees, they are referred to TIHC. Lastly, the Senior Resource Center does not provide in-home support services. However, TIHC and SRC refer to each other, helping each other meet the needs of individual Douglas County's senior residents in the most efficient ways possible.

**TIHC is a primary employer, bringing new dollars to Douglas County, averaging over \$800,000 per year through our various payee programs.** By supporting our clients' ability to stay at home, these individuals are also able to continue as part of the Douglas County economic cycle, spending their money in our community—whereas payments made to nursing home frequently leave the county, as nursing homes are often corporate, out-of-state entities.

## 2020 Budget Request Form – Douglas County, KS

**A frequently unrecognized factor of TIHC's important role in the Douglas County community is as a significant employer to ~110 individuals (over 200 through the calendar year), many of whom must overcome barriers to having and holding a job.** Because our hours are so widely varied, we can employ individuals for literally any minute of the day. For example:

- A single parent of young children who can only get childcare at unusual hours can have consistent work with TIHC.
- A person who can only work nights or weekends can secure work at TIHC.
- A person without anything more than a high-school education and a dedicated, caring personality can thrive at TIHC.
- KU students on the pre-healthcare track who want hands-on experience in the field to raise their professional experience. For two years now, TIHC has partnered with KU's pre-healthcare advising team to purposefully tap into this rich resource of KU students. Unfortunately, they are often gone over spring break/ winter break/ summer break which creates other staffing and scheduling challenges for TIHC and our clients. But while here, these students are an amazing workforce.

TIHC strives to provide quality partnerships with community social service agencies to support the employment of individuals who are returning to the workplace following physical health, mental health or chronic unemployment, such as JobLink, DCF and with other various job-coaching organizations. In addition, TIHC provides supportive employment for the social issues that can persist with our employees.

**For example, in 2016, we had recently started an Employee Emergency Pay Advance program. In 2017, TIHC provided 57 of these emergency pay advances (each between \$50 and \$250) to 25 employees who financially vulnerable, and reasons stated for their need include paying utility bills, car repairs, medications, gas for transportation to get to work and groceries. Additionally, recently:**

- **TIHC nominated an employee to receive a donated vehicle from the Washburn Tech/ Laird Noller Ford car donation program so she could continue traveling to the homes of her clients (she did receive the vehicle!),**
- **An employee whose garnishments from past medical bills had taken over her life was given counseling referrals to the Heartland Community Health Center and Legal Aid of Douglas County,**
- **An employee whose landlord was threatening eviction was referred to Housing and Credit Counseling for assistance,**
- **An employee who experienced a legal complication which prevented the employee from continuing at TIHC was given job counseling to aid him in finding new employment somewhere that his legal issues are not a constraint,**
- **A suddenly-terminally-ill employee without insurance was given free support services in conjunction with her hospice care, and,**
- **An employee who is actively in recovery from addiction to meth is given additional time necessary to attend her daily meetings. Additionally, she regularly meets with administrative staff to "touch base" on how she's doing.**

**As you can easily see, TIHC is not just about supporting our clients in their times of need, but truly has an open door to employees who are struggling and need a supportive work environment to stay on their feet.**

For most of our 40+ years, TIHC has enjoyed a healthy financial history, and a great deal of growth in the early 2000s. But multiple changes to TIHC's circumstances over the past few years led to our current need for continued Douglas County funding.

## 2020 Budget Request Form – Douglas County, KS

First and foremost, Medicaid from the State of Kansas currently reimburses only a portion of what it costs to provide in-home support services. **Despite a minor increase after Gov. Brownback's veto of the 2017-18 was overridden, the reimbursement is still barely enough to pay the hourly wage to the caregiver and the employer's withholding taxes. But, cost of doing business and cost of living for employees continues to increase. As mentioned in last year's request, a number of costly new regulation requirements have rolled out to providers, but there was no increase in reimbursements to cover the costs of these requirements, in neither actual cost nor time compensation for the administrative work they created. These new regulations include a new license requirement that was unexpectedly implemented in July 2017, requiring that TIHC hire a Registered Nurse as a supervisor for all employed CNAs (Certified Nursing Assistant) and an increase in the frequency with which TIHC runs background checks on our employees (a cost of \$20/employee).** Additionally, legislation to expand Medicaid in Kansas continues to be discussed in Topeka. The continued financial support from Douglas County provides a baseline for TIHC to ensure we can continue our work while all the chaos occurs around us.

Next, in a recent rate survey of the for-profit and other providers in Douglas County, TIHC's sliding scale is as much as \$20/hr *less* than some other providers. Yet TIHC continues to have clients whose household budget cannot even support these reduced rates.

For example, recently an elderly couple came to TIHC for assistance and they could barely afford TIHC's sliding scale. The wife has a progressive disease that affects her cognition and physical ability, leaving her unable to be alone for her safety. Her husband drives for Uber, so his hours are irregular. Yet for him to work, she must have a caregiver with her at all times. They do not qualify for Medicaid, but if Medicaid were to expand in Kansas, this couple's needs would be picked up and the husband could work more consistently. If he could work consistently, their income could increase enough that they would lose their Medicaid qualification. So unfortunately, this couple falls into the crack left behind in a true Catch-22 situation. TIHC is able to assist this family when other in-home providers would not.

In the past, TIHC could balance our Medicaid services and sliding scale capacity with the clients who are able to pay our full rate. The increase in for-profit providers means the market share of those who can afford to pay the full cost of services has shrunk to the point the financial balance of our sliding scale and Medicaid reimbursement is no longer in balance. Additionally, because we prioritize services to all, TIHC has become a safety net for other agencies. Other agencies have told us that we are the referral given to clients with difficult circumstances-- when other agencies are unable to provide the quantity or type of support needed, or the individual is difficult to work with.

At the same time, demand for in-home supportive and respite care for low-income individuals has increased. As the Managed Care Organizations (KanCare) attempt to balance their own budgets, individuals who MOCs believe can live on their own are moved out of nursing homes and institutions (expensive care) to live back in their homes (more cost effective). Because these clients are on the brink of requiring nursing home or institutional care, TIHC is requested to provide a significant number of hours of care to those individuals. **Not only does this trend continue, but more Medicaid patients are being placed back in their home with the expectation that in-home services will fulfill their complex care needs. This includes I-DD clients with severe behavioral issues who should be served by the SED Waiver. (SED waiver = Severe Emotionally Disturbance, which lacks facility space and community providers, thus they turn to I-DD providers like TIHC. The type of training required for a caregiver for someone with SED is far beyond what TIHC recruits and**

## 2020 Budget Request Form – Douglas County, KS

hires for.) As a result, the demand continues to grow for all demographics of Medicaid clients, but again, at a rate *below* the cost of providing services.

Starting in 2016, another trend has risen; the type of care being requested by our referral sources (KanCare, JAAA, VA) continues to increase. Clients still need the usual basic day-to-day needs around their home (light housekeeping, laundry, running errands, etc.), but it is more common that more clients in all TIHC's programs also need more personal, higher-skilled care (using the toilet or changing briefs, bathing, being "transferred" from bed to wheelchair-wheelchair to toilet, etc). Additionally, our clients who have Intellectual-Developmental Disabilities more frequently exhibit more severe behaviors (violent outburst, biting, hitting, yelling). Both of these situations require caregivers with greater technical skills, emotional maturity and physical strength. The historic scope of services TIHC provides has always included these tasks, however, they used to be rare, and therefore easier to find adequate numbers of appropriately skilled caregivers. Despite an increased focus on employee recruitment, with the increase in this demand, the pool of existing and potential staff has not grown at the same pace. Thus, recruitment for these staff is more challenging, and more critical for success of the client's care.

TIHC now needs continued supplemental support to pay the caregivers to provide the vital services for these low-income individuals. TIHC has an efficient operational model, balancing our budgetary restraints by using a lean salary model and effective oversight of expenditures. Consequently, this lean model also limits our ability to provide non-monetary compensation benefits, such as quality job training, desired level of supervision, and skill training to ensure quality of care. Because of the Douglas County funding, TIHC is able to accomplish these necessary quality assurances at a basic level.

*The stability created because of the Douglas County funding has given TIHC the ability to strengthen this model and maintain—in some ways, to even increase—our current quality of care, including safety net services for the individuals we serve.*

## 2020 Budget Request Form – Douglas County, KS

### Alignment to County Focus Areas and Collaboration:

Community Partner:	<b>Trinity In-Home Care</b>
--------------------	-----------------------------

<b>Focus Area:</b>	Human Services and Economic/Workforce Development
<p>Trinity In-Home Care (TIHC) provides community value in the area of <b>Human Services</b> through business partnerships, collaborative teamwork with local agencies, and providing care to vulnerable individuals in Douglas County.</p> <p>In 2016, TIHC and DCCCA partnered to meet critical staffing needs at their residential drug and alcohol treatment facility for women, First Step at Lakeview (one of the only facilities in the state able to accommodate the children of those in treatment, so families can remain intact). At the time First Step had lost a number of long term staff and was struggling to find enough staff and adequately train them in a timely manner to meet federal laws. Without our partnership, they would have been required to ask staff to work large amounts of overtime or pull professional staff (i.e. nurses, therapists, etc.) from their jobs to work on the floor. Neither option was sustainable for long. The partnership has continued on an as needed basis but is critical to the continued provision of addiction treatment in our area. Last year TIHC partnered with Boys and Girls Club to try a two school pilot program of our staff providing additional 1 on 1 or small group support for children with disruptive behaviors and other unique challenges. Previously these children would be at risk of being asked not to return—meaning their parents would have to find more expensive after school care, which is not financially possible for many families. Yet without childcare at least one parent would be unable to work. This month Boys and Girls Club let us know that our pilot program has been wildly successful and they would like to begin rolling it out at all 20 Lawrence area Boys and Girls Club programs.</p> <p>TIHC staff works frequently with numerous local agencies to provide coordinated assistance to vulnerable clients. Many of our clients have special medical needs that require home health agencies such as Visiting Nurses Association (VNA) to be involved. For example, a nurse may come in for wound care twice per week but bandages will need changed more frequently, which our staff would be able to do after training by VNA. A physical therapist might also be involved with the client and have assigned specific exercises to be done daily which our staff would remind or even physically assist clients to complete. This type of support is essential for keeping older adults and individuals with physical disabilities safe in their home, avoids overuse of emergency services and keeps preventable issues from necessitating emergency room visits or hospital stays. We also frequently work with Bert Nash to help our clients remember to take medication, attend appointments, and use coping techniques to help manage their symptoms. Our staff also provides a great deal of transportation to medical appointments at rates comparable to the T-lift, so even lower income clients can attend to their medical needs without undue hardship. Cottonwood is another frequent partner for our clients. Many have unique challenges fully integrating in the community, but with team coordination and support through Cottonwood our staff is able to understand their unique needs and provide applicable supports to break down such barriers. Then our clients can participate in activities throughout the county without overtaxing staff at community facilities like the library or public pools who are untrained to provide for their unique needs.</p> <p>One of the important aspects of TIHC’s mission is providing care for the most vulnerable within our community. This vulnerability can be caused by many things such as mental illness, physical disability or cognitive disability but most frequently it includes poverty. TIHC is one of very few entities providing agency-directed Medicaid waiver services in this region of the state. The reason for this is the extremely low reimbursement rates— far below the cost of providing such care. It costs roughly \$14.50 per hour to provide services and the</p>	

## 2020 Budget Request Form – Douglas County, KS

lowest reimbursing waiver –the Intellectual/Developmental Disability Waiver—reimburses \$13.16 per hour. Last year TIHC provided an average of 2,060 hours per month of service to individuals on this waiver, which meant an average monthly net loss of \$2,760.

Trinity In-Home Care provides community value in the area of **Workforce Development/Economic Development** by preserving clients safety at home, though our business partnerships with First Step and Boys and Girls Club, serving clients through the vocational rehab and working healthy programs, providing supportive employment and recruiting KU students in pre-medical, education and other helping professions.

When clients are able to stay at home safely because of regular preventative care they are far less likely to need expensive emergency services or suffer an injury that forces them to move out of their home and into a nursing facility. At home they are paying property taxes, volunteering and interacting with the community; in a nursing home they pay no property tax, and depending on the length of the stay may run out of savings and be forced to enroll in Medicaid to continue receiving needed care. The cost of skilled nursing facility care for those on Medicaid is very high and without addressing preventable issues that lead to nursing home admission, the large number of baby boomers will strain budgets at the federal and state level, eventually leading to strain at county/city level for the next few decades. The type of care TIHC provides is one of the most cost effective solutions to addressing preventable illness/injury in our community. Our staff provides mobility, transfer and bathing assistance to prevent client falls. We have older adults that try to take as few baths as possible because of fear of falling which then leaves them susceptible to skin problems and infection. With assistance into and out of the tub both issues can be addressed and prevent a more serious illness/injury from occurring. Our staff assists clients with grocery shopping, meal preparation and medication reminders all of which contribute to controlling health problems like diabetes and heart disease. Our staff also provides transportation to medical, mental health, and physical therapy appointments helping our clients access the type of preventative medicine that will reduce the likelihood of more expensive care in the future.

Our partnerships with both First Step and Boys and Girls Club have been successful in addressing barriers for parents to be able to work and provide adequately for their families. By TIHC supporting these agencies we are able to not only fulfill our own mission but had the honor of assisting in fulfilling their missions as well and strengthening our community.

TIHC provides services for clients funded through our local vocational rehabilitation program as well as the Medicaid program, Working Healthy. Both programs seek to address barriers to employment for individuals with a disability. For some that means helping transfer to the shower and then wheelchair as a part of their morning routine, for others that may be washing their laundry so they have clean clothes to wear at work and preparing meals for them so they have healthy food to eat at work, which then frees those individuals to use that time to address other care needs. These programs allow individuals who would otherwise be living off Social Security Disability to work. For many individuals this helps relieve symptoms of depression or anxiety, helps them feel more productive and can help provide meaning and structure to their life.

TIHC is able to provide mission-driven and meaningful employment to people in our community that need accommodations and/or flexibility that typical employers cannot handle. We have a large number of employees who are members of one car families or lower income parents who need far more flexibility than most jobs allow. TIHC employs KU student athletes who have difficulty finding employment that can work around their school and seasonal athletic schedules, older adults not ready to fully retire but needing accommodations because of their age, individuals with their own disabilities—who have struggled to find employment but are able to easily connect with our clientele around shared experiences. TIHC provides ongoing training to our employees to grow their skills both in and out

## 2020 Budget Request Form – Douglas County, KS

of the work environment. These trainings have included mental health first aid and topics such as transferring, mental illness, healthy care giving, professional boundaries and person first language.

TIHC has a unique and mutually beneficial relationship with KU students. Every September, we hire around twenty students by recruiting at on campus events and through counselors in various schools. This allows us to meet the care needs of more clients with young, energetic and high quality employees and provides students with employment that is flexible with their very busy schedules. We have a lot of students working toward careers in medicine, nursing, laboratory sciences, special education, social work, and many other helping professions. During their employment at TIHC they gain real life experience with a variety of everyday challenges our clients work with daily, which allows them to better understand the realities of people very different than themselves. It is wonderful to see their understanding and confidence grow as they engage in applying the theoretical from classes in the very practical setting of clients in hospice, older adults struggling with loss of independence or clients with autism learning to navigate the social world. They are able to interact with professionals from other partnering agencies and see what working in that field really looks like. We have had a number of students change majors due to their experiences here, having found a passion for a particular population.

## 2020 Budget Request Form – Douglas County, KS

double click on spreadsheet to open

[2020 Budget Request Detail](#)

calculated fields

Community Partner:	<b>Trinity In-Home Care</b>					
	2016 Actuals	2017 Actuals	2018 Actuals	2019 Adopted Budget	2019 Current Estimates	2020 Budget Request
<b>Revenues:</b>						
Unrestricted Fund Balance 1/1/xx	(58,049)					
<b>Douglas County</b>	<b>30,000</b>	<b>30,000</b>	<b>30,000</b>	<b>30,000</b>	<b>30,000</b>	<b>30,000</b>
City of Lawrence	0	0	0	0	0	0
United Way	15,641	15,921	0	0	0	0
Grants	10,000	600	0	0	0	0
Fundraisers	22,089	35,314	23,490	28,000	16,000	20,000
Contributions	0	0	14,174	7,200	7,500	7,800
Other: (Increase Private Pay clients)	1,035,501	1,010,681	912,854	996,000	850,000	900,000
Other:				0	0	0
Interest	818	3,148	65	4,000	100	500
<b>Total Revenues:</b>	<b>1,114,049</b>	<b>1,095,664</b>	<b>980,583</b>	<b>1,065,200</b>	<b>903,600</b>	<b>958,300</b>
<b>Total Revenues and Fund Balance</b>	<b>1,056,000</b>	<b>1,111,027</b>	<b>980,583</b>	<b>1,065,200</b>	<b>903,600</b>	<b>958,300</b>
<b>Expenditures:</b>						
Salaries	900,890	928,597	881,628	960,864	781,550	840,000
Employee Benefits	0	0	0	0	0	0
Health Insurance	15,890	22,307	21,173	21,996	23,000	25,000
Supplies	3,373	3,627	3,986	3,410	3,400	3,000
Utilities, Building Maintenance	7,061	15,169	10,878	10,308	10,300	10,500
Travel & Training (DSPs)	11,835	13,153	15,155	8,085	8,000	9,000
Office Equipment (Special software, etc.)	13,738	8,949	11,877	11,160	11,100	11,500
Debt Payments	26,611	11,897	0	0	0	0
Other:(insurances & WC)	22,110	23,199	24,023	25,100	26,000	28,000
Other: (Prof. Fees, e.g. audit)	1,680	500	12,944	10,590	10,000	10,000
Other:	37,449	29,786	17,314	24,650	25,000	25,000
<b>Total Expenditures:</b>	<b>1,040,637</b>	<b>1,057,184</b>	<b>998,978</b>	<b>1,076,163</b>	<b>923,350</b>	<b>962,000</b>
Ending Fund Balance 12/31/xx	15,363	53,843	(18,395)	(10,963)	(19,750)	(3,700)

0.00%

## 2020 Budget Request Form – Douglas County, KS

### Budget Request Analysis

Community Partner:	<b>Trinity In-Home Care</b>
--------------------	-----------------------------

#### Analysis of Revenue Sources:

The financial support from the Douglas County Commission continues to be a critical piece of the financial security for TIHC's ability to ensure the long-term sustainability of this community support service organization. New revenue continues to be unlikely, as outlined in the next section. Therefore, TIHC looks to leverage current revenue in the most strategic, thoughtful and responsible ways possible.

##### *Strategic Sustainability*

The Board of Directors and Administrative Staff updated the 2016 Strategic Plan for TIHC in July 2017. **This Strategic Plan update includes a determination of financial benchmarks for TIHC. Currently, the goal is to have at least 3 months of expenses in reserves, or approximately \$260,000. TIHC is currently about half-way to this goal.** Reserves are as critical as ever, because Medicaid in Kansas continues to be uncertain at a state level, but now federally, as well. Because both the federal government and the Kansas government have not shown a dedication toward Medicaid's importance, Medicaid providers are concerned. Because the Kansas legislature continues to block any conversation of Medicaid for this current session, it's difficult to determine the temperature of future funding for Medicaid programs.

##### *Partnerships for Employee Retention*

TIHC works to increase and improve our community visibility to improve employee recruitment, donor cultivation and private pay services. In 2016-17, TIHC completed a brand audit and subsequent modest brand re-fresh to re-launch our fundraising and marketing plan. One significant focus of this plan was to improve employee recruitment. **The national industry standard for turn-over (nursing facilities and in-home care organization) is about 60%. TIHC current enjoys a much lower turn-over rate; closer to 40% at this time. Partially this is credited to the supportive, flexible work environment. But, 40% is still incredibly high and requires significant on-boarding costs, both actual costs as well as administrative time for orientation and supervision. Yet another hidden cost is the employee's time spent driving between clients, for which they do not receive their hourly rate. Especially when serving rural, Baldwin, Eudora and Lecompton clients, this drive time can be considerable and can be a deterrent for employees. At this time, TIHC is working with the Douglas County Community Foundation on a concept to build a fund specifically to support the drive-time of caregivers between clients, especially focused on the drive time to clients outside Lawrence. This prospect is quite expensive, as TIHC provides around 22,000 shifts per year. To compensate caregivers for drive time at \$4 per shift would be upwards of \$88,000. Obviously, this is far beyond what TIHC can currently support. But, if TIHC can work with businesses to help build a fund, TIHC could start to compensate caregivers for their time driving up to 40 minutes each shift, in addition to the current gas reimbursement of \$.25/mile, even if we only start with shifts outside Lawrence. We believe this would increase employee retention as well as improve employee's willingness to accept shifts outside of Lawrence. It would then be a clear connection to better serviced clients who live in other parts of Douglas County.**

## 2020 Budget Request Form – Douglas County, KS

### *Fundraising Success*

TIHC has a limited administrative staff, and the Executive Director is also solely responsible for any fund development efforts. Historically, individual giving and event-based fundraising has not been particularly successful, as the Executive Director does not have the available time to fully invest in the necessary cultivation activities. **However, after TIHC's new branding was introduced and efforts toward community recognition has begun to gain some more traction, this year TIHC has experienced a small up-tick in individual donors as well as a more successful annual fundraising event. Thankfully, because TIHC lost revenue from the United Way at the same time, TIHC has experienced a revenue-neutral budget adjustment. But, continued donor loyalty and community awareness will hopefully continue to build the individual giving to help maintain TIHC's financial needs.**

### **Analysis of beginning & ending fund balances, and dedicated or restricted cash reserves:**

Since 2013, Medicaid changed with the addition of the private Managed Care Organizations through KanCare, and reimbursements became more complicated and unpredictable. In addition, the needs of Douglas County's vulnerable Medicaid clients who are not approved for nursing facilities have increased, increasing the requirements of care. No longer is general housekeeping the primary service provided; much more responsibility is being asked of TIHC employees by Medicaid's Plans of Care, but for no increase in pay. TIHC's deep cash reserve was depleted. In 2013, we began course-correction with a number of significant actions, including the elimination of administrative staff, closure of programs, fee increase for our private pay services, and more. **As is evidenced by our current Budget Request Form, diligent financial oversight and careful planning, TIHC has turned the corner. But before those critical adjustments could take effect, a great deal of damage had been done to TIHC's previously healthy savings. In 2017, TIHC was able to pay off the line of credit that was secured and kept TIHC afloat during those years. TIHC continues to be debt free, opening the door to work toward three-months worth of financial reserves, as previously mentioned in the section about Strategic Sustainability.**

In accordance with the instructions of the Douglas County Commissioners upon receipt of our first allotment starting in 2016, TIHC has used county money to ensure our caregivers are employed and cared for. These ~110 individuals provide a monthly average of 5,000 hours of care, and the value they give to our clients and our community is immeasurable. **Thus it is even more frustrating that we cannot pay them their worth due to the inadequate reimbursement rates of the State of Kansas. TIHC's Board of Directors has established a Strategic Plan long-term goal of paying closer to a living wage to our caregivers of \$10.25/hr. This would be a significant jump to do all at once, but TIHC hopes to make small, incremental changes towards this goal, thus the regular increases in salaries.**

### **Analysis of expenditure changes:**

## 2020 Budget Request Form – Douglas County, KS

TIHC is often asked: what if Kansas expands Medicaid? “Expanding Medicaid” does not mean that reimbursement rates for TIHC’s services would increase; it means that more Kansans would qualify for the services based on their level of low income. For TIHC, this would mean that many of our current sliding-scale clients would become eligible for Medicaid, as well as people who haven’t previously accessed services at all. Ironically, the best-case scenario for TIHC is that Medicaid expansion would have a budget-neutral impact, while increasing administrative demand due to the increase of case management meetings and complications due to the multi-layered requirements of TIHC’s KanCare contracts. The worst-case scenario is that demand would sky-rocket beyond what we currently expect, expanding the challenges TIHC already experiences. So although we agree philosophically with KanCare expansion in Kansas, we are concerned about how TIHC could absorb the new clients.

**TIHC does not plan to eliminate our sliding scale services or discontinue our Medicaid service. These two pieces are core to the mission of Trinity In-Home Care. Especially after conducting a rate survey of other providers in Douglas County, it is even more evident to TIHC that the low-income elderly and people with disabilities in our community have few to no other options than TIHC.**

**TIHC does intend to continue working hard to cultivate private donations from individuals and identify creative partnerships that benefit the greater Douglas County community which private businesses may feel inclined to support.**

## 2020 Budget Request Form – Douglas County, KS

### Supplemental Request for Additional Funding

(This is in addition to the 2020 Request amount on page 1)

Community Partner:	<b>Trinity In-Home Care</b>	<b>\$30,000</b>
--------------------	-----------------------------	-----------------

#### Purpose for additional revenue from County:

Additional funds will go to help offset the losses by the extremely low Medicaid reimbursement rates and our sliding scale rates. Our sliding scale rate is for people who don't qualify for Medicaid but need services to be able to maintain their homes. **Our intent would be to put any money possible toward direct care wages or other possible benefits to employees.**

#### Impact if supplemental request is not funded:

The impact if the supplemental request is not funded will be slow but dramatic. If Trinity cannot raise the starting wage to be competitive with other agencies in an already competitive market (it's actually a national crisis) it's basically a death sentence to the agency. Without Trinity's continued existence, results would be devastating to this county. Trinity In-Home Care currently serves roughly 130 people annually. Without our support these people would not be able to live independently.

Which means without the support of Trinity staff:

- **About 70 older adults would be forced to move to more "supportive" environments like assisted living facilities or skilled nursing facilities.**
- **Nearly 30 individuals with intellectual disabilities and their families would be severely impacted by the lack of respite care. Leading to increased caregiver frustration, burnout, possible abuse/neglect, employment issues and job loss, if the individual remains in the home, or increased rates of institutionalization.**
- **Around 30 individuals with physical disabilities whose daily care needs include tasks such as toileting, dressing and bathing would be driven into more restrictive settings in order to have their basic care needs met, at an increased cost.**

## 2020 Budget Request Form – Douglas County, KS

Imagine not being able to take yourself to the restroom. Imagine not being able to get out of bed or get yourself dressed. Trinity staff supports clients to do these tasks on a daily basis. Without this support these people would have far worse health outcomes, place increased strain on familial relationships and possibly be given no alternative but to live in a skilled nursing facility. Younger patients would not fit in socially and struggle with feelings of depression, anger further reducing their health outcomes.

Currently, there aren't enough beds in assisted living, rehab or skilled nursing facilities, available to support the number of people that would need care. However, even if there were, the price of care alone would be astronomical. On average the MONTHLY stay in a skilled nursing facility in Douglas County is roughly \$7,000. The state pays 43% of that. Imagine that cost monthly multiplied by 70 people! Not to mention people are not in their own homes, where they WANT to be and WILL BE PAYING TAXES. Also, we know health outcomes are better when people are able to age in place.

For families with a child with intellectual disabilities, even an adult child, it can be challenging to provide for their evolving long-term care needs. Parents and caregivers have to be able to maintain employment in order to be able to financially provide for the child and support housing and other costs of daily living. This can be very difficult for families caring for a loved one with an intellectual disability. This can lead to homelessness or force the family to make the difficult choice of placing their loved one into a residential care. Both options are costly and detrimental to families. Currently there is a 7 year waiting list for residential placement. On top of that, residential care costs an average of \$60,000-\$100,000+ annually. Most families just need minimal support to keep their loved one at home, keep the family intact and maintain their quality of life.

**The financial impact if all of Trinity's clients had to go to residential placement would be roughly \$6,600,000. ANNUALLY.** This does not account for the lost income of over 100 Trinity In-Home Care employees now without jobs and unable to support their own families.