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Council on Aging to whittle list of service providers

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Suzanne Burke, CEO of the Council on Aging of Southwestern Ohio, visits with longtime client Paul, 88. Burke said the agency plans to streamline its provider network.

The Council on Aging doesn't know exactly how many companies it needs to contract with to provide services such as home care and meal delivery in Greater Cincinnati.

But it has a general idea.

"We know we don't need as many as we have now," said Suzanne Burke, CEO of the Council on Aging of Southwestern Ohio. "But we don't want just one or two. We want a good mix of high-quality providers."

The agency, which administers government-funded programs for older adults in the Tri-State, is seeking ways to pare back the number of providers it contracts with in its Elderly Services Program. It's reviewing data and examining its bidding, referral and distribution processes.

A pilot program to start in August might yield some clues on how to proceed.

The problem with having so many providers is inefficiency. Some providers are very small, claiming perhaps only a 1 percent market share or less. Yet the Council on Aging, part of the national aging services network, which includes the federal Administration on Aging, still has to perform quality control, compliance audits, financial audits and satisfaction surveys.

Eases confusion for clients

The need for efficiency goes beyond administration to on-the-ground service delivery, too.

“If you’re a client and you’re sitting and waiting for a meal to come, and you see several providers come in to serve your neighbors and all you know is that you get meals, it’s very confusing,” said Tracey Collins, executive director of Cincinnati Area Senior Services, a nonprofit contracted with the council to provide services. “In a senior high-rise building, you could have as many as four home-delivered meal providers serving that building.”

Today, contracted Elderly Services Program providers compete for client referrals based on price. The Council on Aging plans to add a quality component, with those who provide high quality at a low price getting the most business.

The efforts go back to the council’s 2006 strategic plan. Some streamlining began in 2007 and 2008, when the Council on Aging started requiring firms to submit financial documents showing they were viable in order to get a contract. A few couldn’t demonstrate financial viability, and so they were out.

Some providers struggle

Non-medical home care is not heavily regulated in Ohio, so it’s been a popular type of small business to start. But the businesses are not always built on solid financial footing.

Black Stone Home Care, a relatively large provider with about 600 employees in Southwest Ohio, has, more than once, acquired small firms that were not able to make payroll.

“Some of the smaller providers, honestly, struggle,” said Black Stone CEO David Tramontana. “There are some benefits to having more sophisticated providers and some cost efficiencies for providers who can gain economies of scale. In general, if some small providers who are having administrative challenges are weaned from the pool, that’s probably a good thing for consumers.”

The Council on Aging has not accepted applications for new providers in the Elderly Services Program for several years. It is examining its service area, which includes Butler, Clermont, Clinton, Hamilton and Warren counties, to figure out where clients live, how many hours and what types of service they’re getting, and where there’s overlap of services or providers.

Providers number in the hundreds; for its Elderly Services Program alone, the council contracts with about 40 agencies. Burke wouldn’t say exactly how many providers the council eventually would like to have as partners. The next steps haven’t been determined, but they’ll probably take place over the next two to three years, Burke said.

The council will run a trial program at a particular building with 40 to 50 clients in its Elderly Services Program. The council has identified one provider for home care and one for meal delivery. Those two entities will service all clients. Burke wouldn’t identify the providers or the building, because the clients and employees have yet to be informed.

“The providers are tripping over themselves in the same building,” Burke said. “They always say, ‘If we could deliver 30 meals in the same building, we could do it more cheaply.’”