

Program #25023 - ADS Long Term Care Program 2/24/2014

Department: County Human Services **Program Contact:** Cathy Clay-Eckton
Program Offer Type: Existing Operating Program **Program Offer Stage:** As Requested
Related Programs:
Program Characteristics: In Target

Executive Summary

The Long Term Care (LTC) program determines eligibility for financial, nutritional, medical and case management services for 45,180 low-income older adults and persons with disabilities. Intensive case management is provided to 7,133 clients each month who meet state criteria for nursing home care because they need help with daily self-care tasks. LTC served 5,811 clients in community-based settings and 1,322 clients in nursing facilities. LTC brings over \$33.5 million into the local economy through Supplemental Nutrition Assistance, medical, dental and LTC benefits received monthly by clients.

Program Summary

Under contract with the state, the Long Term Care (LTC) program determines eligibility and enrolls older adults and people with disabilities in programs that meet basic health, financial and nutritional needs through the Oregon Health Plan, Medicaid and Supplemental Nutrition Assistance Program (SNAP). Clients receive counseling to help them choose the most appropriate managed care and Medicare Part D plans. The program provides referrals to community resources to address other critical unmet needs. These vulnerable adults typically have incomes below the poverty level and also includes individuals with a mental illness or a developmental disability.

Case managers assess clients' needs, create service plans, and authorize, coordinate and monitor services that address health and welfare risks in the least restrictive environment. They ensure early intervention and effective management of the complex and fluctuating care needs of this high-risk population. Nurses provide consultation to case managers to ensure appropriate care planning for medically complicated and unstable cases. Additionally, they support caregivers and provide wellness counseling/education and disease management for clients to optimize health. Collaboration with other professionals, divisions and community agencies to address the needs of a diverse client population is an essential aspect of this program.

A primary goal of case management is to promote and support healthy and independent living in the community, preventing or minimizing more costly nursing home care and hospitalizations and readmissions whenever possible. Case managers provide services for a monthly average of 7,133 nursing home-eligible clients; 5,811 clients (81%) receive in-home or community-based services that promote or support their independence outside of a nursing home, while an additional 1,322 (19%) are served in a nursing home setting. While the proportion of nursing home-eligible clients residing in community-based settings in Multnomah County far exceeds the national average, it is a major program priority to improve on this percentage through more intensive case management and the expansion of programs targeting community-based care enhancements. The long term care system continues to focus on opportunities to innovate around services for clients with difficulty accessing care as well as those with greater challenges to reach our shared goal of greater independence living in the community.

Performance Measures

Measure Type	Primary Measure	FY13 Actual	FY14 Purchased	FY14 Estimate	FY15 Offer
Output	Avg monthly number of nursing home-eligible clients receiving long term care assistance	7,133	7,332	7,190	7,190
Outcome	Ratio of nursing home-eligible clients served in the community vs. nursing home ¹	81.5%	81.0%	81.7%	82.0%

Performance Measures Descriptions

¹A higher ratio indicates a better outcome.

Legal / Contractual Obligation

§1903(a) of the Social Security Act, 42 CFR-Medicaid Administration; 7 CFR-SNAP; §1915c and 1115 of Title XIX of the Social Security Act. All Oregon Administrative rules related to and governing programs administered by Aging and Disability Services.

Revenue/Expense Detail

	Proposed General Fund	Proposed Other Funds	Proposed General Fund	Proposed Other Funds
Program Expenses	2014	2014	2015	2015
Personnel	\$108,282	\$18,947,797	\$0	\$21,735,090
Contractual Services	\$2,151,498	\$120,912	\$1,844,183	\$164,632
Materials & Supplies	\$3,091	\$351,777	\$0	\$467,641
Internal Services	\$0	\$4,571,465	\$0	\$4,972,607
Total GF/non-GF	\$2,262,871	\$23,991,951	\$1,844,183	\$27,339,970
Program Total:	\$26,254,822		\$29,184,153	
Program FTE	1.12	221.88	0.00	258.00

Program Revenues				
Indirect for Dept. Admin	\$5,703	\$0	\$6,368	\$0
Intergovernmental	\$0	\$23,740,450	\$0	\$27,087,665
Other / Miscellaneous	\$0	\$251,501	\$0	\$252,306
Total Revenue	\$5,703	\$23,991,951	\$6,368	\$27,339,971

Explanation of Revenues

\$26,988,278 - Title XIX
\$133,685 - Providence Medical Center
\$118,621 - Oregon Health Sciences University Case Manager (FTE) grant
\$99,387 – LTSS Innovator Agent Funding
\$1,794,183 - County General Fund Match
\$50,000 - County General Fund

Significant Program Changes

Last Year this program was: 25023A ADS Long Term Care Program

This program offer incorporates PO #25023B ADS Long Term Care - Continuing Service Level and partial funds from PO #25037 ADS Restore County General Fund Match to Maintain Staffing. Increased Medicaid funding, as result of 95% equity, caseload growth and workload staffing model, resulted in an increase of 38 FTE: 4 FTE Office Assistant 2's, 1 FTE Office Assistant Senior, 1 FTE Case Management Assistant, 1 FTE Program Tech, 11 FTE Case Manager 1's, 7 FTE Case Manager 2's, 8 FTE Case Manager Seniors, 1 FTE Program Specialist, 1 FTE Program Specialist Senior, 3 FTE Program Supervisors. Transition & Diversion (T&D) resources have nearly doubled to address increased state focus on T&D and reducing nursing facility census. Other changes include implementation of the K-plan Option, Medicaid expansion, and MOU's with Coordinated Care Organizations (CCO) regarding interaction between CCO partners and LTC program.