



Program #25023A - ADVSD Long Term Services & Supports (Medicaid) FY 2025 Department Requested

Department: County Human Services **Program Contact:** Joe Valtierra
Program Offer Type: Operating **Program Offer Stage:** Department Requested
Related Programs:
Program Characteristics: In Target

Executive Summary

Long Term Services and Supports (LTSS) supports independence and quality of life. The program provides equitable and culturally appropriate access to services. It does this by providing resources and case management that are in line with consumer choice, culture and individual needs. The program supports living in the community and avoiding nursing facility care.

Program Description

ISSUE: Older adults living below the poverty level and those with a physical disability, behavioral health need, or developmental disability can face health and safety risks. Often they are vulnerable and with complex social, daily living, and medical needs. They benefit from early intervention and effective management of their care needs.

PROGRAM GOAL: LTSS case management advocates and supports safe, healthy, and independent living in the community that considers individual needs and preferences along with quality of life. These goals help prevent or cut costly nursing facility placement, hospitalization, and readmission. The program prioritizes home and community-based services. Multnomah county has more people living in community-based settings than the national average.

PROGRAM ACTIVITY: LTSS provides two Medicaid case management programs—service and eligibility. Service case management uses a person-centered approach to assess needs. The case manager and participant create a plan for their needs. Those receiving service case management meet State guidelines for nursing facility level care. Service case managers also authorize, coordinate, and monitor these services. The staff consists of diverse staff who speak multiple languages. They are culturally knowledgeable and trained in diversity, equity, and inclusion principles. Eligibility case management participants meet financial guidelines. However, they do not meet guidelines for nursing facility level care. They enroll in programs meeting basic health, financial, and nutritional needs. Programs include the Oregon Health Plan, Medicaid, and the Supplemental Nutrition Assistance Program (SNAP). They may also receive counseling to help them choose managed care and Medicare Part D plans. Counseling and service is provided with consideration of each person’s individual and cultural background needs; this is essential to service equity.

Performance Measures

Measure Type	Performance Measure	FY23 Actual	FY24 Budgeted	FY24 Estimate	FY25 Target
Output	Number of participants served in LTSS programs	48,800 ¹	50,000	48,800	48,800
Outcome	Number of participants receiving Medicaid service case management	11,379	11,500	11,600	11,500
Output	Percent of nursing facility eligible participants who are living in the community	88%	88%	88%	88%

Performance Measures Descriptions

¹Estimated based on enrollment from Jul 2020 - Jan 2021. The conversion to the ONE system in Feb 2021 resulted in a lack of access to Medicaid Medical, SNAP and Medicare Savings Plan benefit data.

Legal / Contractual Obligation

ADVSD has a contract with the Oregon Department of Human Services to administer the Medicaid and SNAP programs in Multnomah County. Oregon Revised Statute 410 allows for the administration of services to older adults and people with disabilities through local governmental entities. The programs are guided by Federal regulations or rules including those in the Social Security Act, Medicaid Administration, and SNAP.

Revenue/Expense Detail

	Adopted General Fund	Adopted Other Funds	Department Requested General Fund	Department Requested Other Funds
Program Expenses	2024	2024	2025	2025
Personnel	\$0	\$36,183,018	\$0	\$36,507,215
Contractual Services	\$2,664,911	\$80,900	\$3,445,725	\$26,574
Materials & Supplies	\$0	\$475,406	\$0	\$238,435
Internal Services	\$0	\$10,613,948	\$0	\$11,070,190
Total GF/non-GF	\$2,664,911	\$47,353,272	\$3,445,725	\$47,842,414
Program Total:	\$50,018,183		\$51,288,139	
Program FTE	0.00	313.00	0.00	301.00

Program Revenues				
Intergovernmental	\$0	\$46,710,050	\$0	\$47,179,085
Other / Miscellaneous	\$0	\$643,222	\$0	\$663,329
Total Revenue	\$0	\$47,353,272	\$0	\$47,842,414

Explanation of Revenues

This program generates \$5,373,861 in indirect revenues.
\$47,179,085 - Title XIX (Federal)
\$183,306 - Kaiser Foundation Hospitals (Local)
\$167,077 - Case Management Assessments for Medicaid Patients (Local)
\$159,470 - Providence Medical Center (Local)
\$153,476- OHSU (Local)

Significant Program Changes

Last Year this program was: FY 2024: 25023 ADVSD Long Term Services & Supports (Medicaid)

Decrease of 13.00 FTE (Federal/ State Fund), 3.00 OA2, 2.00 Case Manager 1, 1.00 Case Manager 2, 1.00 Case Management Assistant, 3.00 Case Manager Sr, 1.00 Program Specialist Sr, 2.00 Program Supervisor

Increased/ Moved 1.00 FTE Case Manager 2 from program offer 25029 (Federal/ State Fund)