

Priority: Basic Needs
Program Offer Type: Existing Operating
Related Programs:
Program Characteristics: Backfill State/Federal/Grant

Lead Agency: County Human Services
Program Contact: Mary Shortall

Executive Summary

This offer of (2) Case Manager Assistants and (1) Office Assistant helps clients meet basic needs by covering new responsibilities associated with Medicare Modernization Act and Home Care Worker (HCW) contract. Monthly adjustments for benefits, prescription plan counseling when medications change and HCW contract requirements resulted in this new workload.

Program Description

These positions provide direct service to seniors and people with disabilities and support to case managers in meeting new federal and State requirements by: documenting monthly prescription co-pay amounts and adjusting benefit levels for Food Stamps and other benefit levels as needed, and gathering client prescription drug information for choice counseling to determine and obtain the most cost effective prescription plan available.

Provide quality oversight of HCW voucher system as requested by recent audit findings for DHS. Review Home Care Worker (HCW) vouchers after the end of the month and issue checks within three days. Provide HCW written notification of any changes in service hours and provide updated task list. Update HCW registry. Assist in preparation for administrative hearings now granted to HCW's.

In 2005, thirty-three State policy releases or other requests requiring action were issued for Medicare Modernization Act or Home Care Worker bargaining agreement implementations.

Program Justification

This program links to the Basic Needs Priority, Poverty Framework and the 10-year Plan to End Homelessness by serving vulnerable seniors and people with disabilities who could not meet their basic needs without this help. Case managers intervene and coordinate comprehensive services to assure access to medical and medication coverage, nutritious food through Food Stamps or home delivered meals, and financial assistance. Chronic and urgent care needs are addressed through care planning and access to effective systems of support and services, such as in home services or supportive, affordable, alternative housing.

Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY04-05)	Current Year Purchased (FY05-06)	Current Year Estimate (FY05-06)	Next Year Offer (FY06-07)
Output	# of clients assisted with drug plan consultations/enrollments	0	0	0	6,000
Outcome	% decrease in # of clients experiencing difficulty with obtaining medications	0%	0%	0%	40%

Performance Measure - Description

Client count remains the same for Long Term Care regardless of whether scale is purchased. This offer provides additional case management support FTE to increase quality and meet Medicare Modernization Act and Home Care Worker Contract requirements. If not purchased case managers will take on additional workload associated with drug plan assistance and enrollment, reducing overall response time to clients for both urgent and ongoing needs.

Legal/Contractual Obligation

Section 1903(a) of the Social Security Act, 42 CFR - Medicaid Administration; 7 CFR - Food Stamps; Sections 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	2006	2006	2007	2007
Personnel	\$0	\$0	\$0	\$155,816
Contracts	\$0	\$0	\$75,896	\$0
Materials & Supplies	\$0	\$0	\$0	\$3,482
Internal Services	\$0	\$0	\$0	\$11,216
Subtotal: Direct Exps:	\$0	\$0	\$75,896	\$170,514
Administration	\$0	\$0	\$10,612	\$0
Program Support	\$0	\$0	\$28,395	\$0
Subtotal: Other Exps:	\$0	\$0	\$39,007	\$0
Total GF/non-GF:	\$0	\$0	\$114,903	\$170,514
Program Total:	\$0		\$285,417	
Program FTE	0.00	0.00	0.00	3.00
Program Revenues				
Indirect for dep't Admin	\$0	\$0	\$2,050	\$0
Intergovernmental	\$0	\$0	\$0	\$170,514
Program Revenue for Admin	\$0	\$0	\$0	\$0
Total Revenue:	\$0	\$0	\$2,050	\$170,514

Explanation of Revenues

County general funds are matched to leverage 55% additional federal funds. \$75,896 CGF match expenditure used to generate \$168,658 federal Medicaid funds. Match rate 45/55.

Significant Program Changes

Last year this program was: #25010, ADS Long Term Care (LTC)

Medicare Modernization Act, implemented in October 2005, authorizes Medicare Part D, a new Prescription Drug Program for Medicare and Medicaid clients. There is an unexpected workload resulting from this implementation. Home Care Worker bargaining agreement resulted in additional work related to that contract.