

Priority: Basic Needs

Lead Agency: County Human Services

Program Offer Type: Existing Operating

Program Contact: Mary Shortall

Related Programs: 25023B

Program Characteristics:

Executive Summary

Eligibility Specialists and Case Managers determine eligibility for financial, food, medical, and case management services for 33,088 low-income seniors and persons with disabilities. Case-managed clients meet state criteria for nursing home care due to their need for assistance with self-care. Case Managers help clients with service and living options that will promote or maintain their independence outside of a nursing home. This is a reduced service level offer. Purchasing 25023B will bring it to the current service level.

Program Description

Aging and Disability Services (ADS), Long Term Care (LTC) program determines eligibility and enrolls seniors and people with disabilities in programs to meet basic health, financial and nutritional needs, such as the Oregon Health Plan, Medicaid and Food Stamp programs. Clients receive counseling to help them choose managed care and Medicare Part D plans, and referrals to community resources to address other critical needs. These vulnerable adults typically have incomes below the poverty level and include individuals with a mental illness or those with a developmental disability. More intensive case management is provided to 9,747 seniors and people with disabilities annually who meet state criteria for nursing home care due to the need for help with such things as mobility, eating, and toileting. Case Managers assess clients' needs, create care plans, and authorize, coordinate, and monitor services in an effort to ensure early intervention and effective management of multiple, complex and fluctuating care needs of this high-risk population. Case Managers work in partnership with clients to develop cost effective service plans that address health and welfare risks in the least restrictive environment. Collaboration with other professionals, divisions, and community agencies is an essential aspect of ensuring that all of the client's needs are addressed.

Program Justification

This program links to the Poverty Framework, the 10-year Plan to End Homelessness, and several Basic Living Needs Priority strategies by serving vulnerable, at-risk seniors and people with disabilities who can't meet their basic needs without these services. Local offices hire multi-lingual staff and offer cultural resource information as needed to ensure equal access to ADS services. An agency brochure explaining ADS services is available in seven languages and access is ensured with bi-lingual staff and use of the Language Line; translated forms, notices, and information are provided as needed. The growth of the aging population, particularly those 85+ who are at most risk of needing long-term care services, will continue to increase the demand and societal relevance of services offered through this program.

Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY05-06)	Current Year Purchased (FY06-07)	Current Year Estimate (FY06-07)	Next Year Offer (FY07-08)
Output	Nursing home eligible clients receiving long term care assistance ¹	9,747	12,100	9,747	9,747
Outcome	Nursing home eligible clients served in the community vs. nursing home	81.3%	80.0%	80.3%	80.3%
Output	Clients receiving medical, financial and food assistance	33,088	33,300	33,088	33,088
Quality	Clients reporting "I received the help I needed" ²	0.0%	0.0%	0.0%	80.0%

Performance Measure - Description

 **Measure Changed**

¹State was unable to provide FY05 actual figures; therefore, both FY05 and FY06 current year estimates were calculated using monthly client counts and historical turnover rate information. This resulted in overestimates for FY06 and FY07. This year the State provided FY06 actual information. Caseloads are expected to be flat; no State projections for FY08.

²New FY08, all ADS offices will have a Client Report Card for clients to complete after receiving services.

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
	2007	2007	2008	2008
Program Expenses				
Personnel	\$0	\$14,092,272	\$0	\$14,698,682
Contracts	\$1,832,476	\$80,623	\$1,832,492	\$124,179
Materials & Supplies	\$0	\$273,633	\$0	\$264,417
Internal Services	\$0	\$3,577,577	\$0	\$3,830,167
Subtotal: Direct Exps:	\$1,832,476	\$18,024,105	\$1,832,492	\$18,917,445
Administration	\$97,749	\$588,104	\$77,657	\$557,122
Program Support	\$180,994	\$385,653	\$228,900	\$374,494
Subtotal: Other Exps:	\$278,743	\$973,757	\$306,557	\$931,616
Total GF/non-GF:	\$2,111,219	\$18,997,862	\$2,139,049	\$19,849,061
Program Total:	\$21,109,081		\$21,988,110	
Program FTE	0.00	192.35	0.00	196.90
Program Revenues				
Indirect for dep't Admin	\$137,489	\$0	\$372,035	\$0
Intergovernmental	\$0	\$17,954,493	\$0	\$18,746,711
Other / Miscellaneous	\$0	\$69,612	\$0	\$170,734
Program Revenue for Admin	\$0	\$973,757	\$0	\$931,616
Total Revenue:	\$137,489	\$18,997,862	\$372,035	\$19,849,061

Explanation of Revenues

State allocated Medicaid, County General Fund used for Medicaid match to leverage additional federal Medicaid funds, and local hospital funding for on-site program eligibility determinations.

Significant Program Changes

✔ Significantly Changed

Last year this program was: #25023A, ADS Long Term Care

This offer combines offers 25023A&B from FY07. The B performance measure was:

1) OUTPUT: Decrease in # of clients on case manager caseloads: Purchased FY07 = 3; Current Year Estimate FY07 = 3.

Overall County General Fund request for ADS programs is reduced by \$443,735 due to increases in the Governor's proposed budget.

The Governor's budget includes funding for Medicare Modernization Act activities, Quality Assurance, and Equity (funding local governments at 95% of state costs), and reflects changes in our Medicaid match formula and caseload adjustments.

Positions added: 4.5 FTE Eligibility Specialists to support the Medicare Prescription Drug program, 1.0 FTE Program Development Specialist for Quality Assurance and 1.0 FTE Case Manager Senior funded by Oregon Health Sciences University and dedicated to hospital Medicaid eligibility determinations.

Additional County General Fund for Medicaid match of \$120,000 needed to maintain services at current levels due to

1) Federal officials lowered the Medicaid match rate from 45/55 to 46/54 decreasing the federal share/revenue and
2) inflationary increases for expenditures. The additional County General Fund is included in a scaled offer: 25023 ADS Long Term Care Scaled Offer B and includes the following positions: .5 FTE Medicare Prescription Drug program Eligibility Specialist and 2.0 FTE Community Health Nurses.