

Program # 25023 - ADS Long Term Care

Version 6/11/2012 s

Lead Agency: County Human Services Program Contact: Cathy Clay-Eckton

Program Offer Type: Existing Operating

Related Programs:

Program Characteristics:

Executive Summary

Aging and Disability Services (ADS) Long Term Care program determines eligibility for financial, nutritional, medical and case management services for 39,278 low-income older adults and persons with disabilities. Intensive case management is provided to about 7,000 clients each month who meet state criteria for nursing home care due to the need for help with daily self-care tasks such as mobility, eating and toileting. Long Term Care serves about 5,600 clients in community-based settings and 1,380 clients in nursing facilities. This program offer brings more than \$33.5 million into the local economy through SNAP (Supplemental Nutrition Assistance Program, formerly food stamps), and medical and long term care benefits received by ADS program clients.

Program Description

Under contract with the state, the Long Term Care 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 SNAP (Food Stamp) programs. 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 include 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 7,000 nursing home-eligible clients; about 5,600 clients (80%) receive community-based services that promote or support their independence outside of a nursing home, while an additional 1,380 (20%) 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 future will bring even greater challenges, and therefore, opportunities for innovation, as the over 85 population—the demographic most likely to utilize nursing facility care—grows in number and proportion of the total population.

Performance Measures

Measure Type	Primary Measure	Previous Year Actual (FY10-11)	Current Year Purchased (FY11-12)	Current Year Estimate (FY11-12)	Next Year Offer (FY12-13)
Output	Avg monthly # of nursing home-eligible clients receiving long term care asst	6,920	7,162	7,010	7,269
Outcome	Ratio of nursing home-eligible clients served in the community vs. nursing home ¹	80.7%	80.0%	80.8%	81.0%

Performance Measure - Description

¹A higher ratio indicates a better outcome.

Legal/Contractual Obligation

Section 1903(a) of the Social Security Act, 42 CFR-Medicaid Administration; 7 CFR-Food Stamps (SNAP); 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	Proposed Other	Proposed General	Proposed Other				
Program Expenses	2012	2012	2013					
Personnel	\$193,870							
Contracts	\$850,631	\$149,446						
Materials & Supplies	\$0	\$503,688	\$0					
Internal Services	\$0	\$4,007,377	\$0	\$4,275,179				
Total GF/non-GF:	\$1,044,501	\$22,453,153	\$1,935,552	\$22,849,340				
Program Total:	\$23,49	97,654	\$24,784,892					
Program FTE	0.00	218.80	0.00	220.55				
Program Revenues								
Indirect for dep't Admin	\$5,231	\$0	\$5,265	\$0				
Fees, Permits & Charges	\$0	\$21,437	\$0	\$21,573				
Intergovernmental	\$0	\$22,187,606	\$0	\$22,599,490				
Other / Miscellaneous	\$0	\$102,623	\$0	\$228,277				
Total Revenue:	\$5,231	\$22,311,666	\$5,265	\$22,849,340				

Explanation of Revenues

\$22,599,490 - Title XIX: Based on FY12 revised budget and approved match application.

\$124,147 - Providence Medical Center: Based on FY12 grant award.

\$104,130 - OHSU: Based on FY11 grant award.

\$21,573 - Misc fees: Based on FY12 actual & projected revenue Y-T-D.

\$1,935,552 - County General Fund (Match)

Significant Program Changes

Last year this program was: #25023A, ADS Long Term Care
Last year this program was: #25023A, B & C ADS Long Term Care, Adopted FY11 Service Level (LTC), and Continuing Service Level for FY12 (LTC). Adds 1.0 FTE Program Coordinator and 0.75 FTE Case Manager 1.