# Seniors and People with Disabilities Division (SPD)

### Seniors and People with Disabilities

Erinn Kelley-Siel, DHS Acting Director Eric Luther Moore, Chief Financial Officer

Ways and Means March 22, 2011





#### APD 11-13 Budget At Current Rates

APD Estimate of 2011-13 costs with current rates and no reductions This					
example assumes APD is r	ot i	n a managed car	e set	tting	
Category of Service APD	24	4 Month TF Cost		GF	
Community Facilities	\$	563,480,391	\$	209,051,225	
In-Home	\$	371,886,380	\$	138,064,197	
Other Services	\$	345,359,222	\$	128,128,271	
OSIP/ OPI / OAA	\$	43,246,743	\$	11,880,104	
Sub-Total	\$	487,123,797			
Nursing Facilities	\$	656,681,914	\$	243,853,579	
Less: Projec	ted :	Estates Recovery	\$	(16,170,000)	
Less: Anti	cipa	ted Provider Tax	\$	(83,600,000)	
Net Nursing Facilities Total	\$	656,681,914	\$	144,083,579	
Total APD Based on Current Rates	\$	1,980,654,650	\$	631,207,377	
GBB - Adjusted	\$	508,454,499			
Difference Current Rates no reductio	\$	122,752,878			

#### External Constraints/Considerations

- Maintenance of Eligibility
- Maintenance of Effort
- Statutory changes
- CMS approval
- Collective Bargaining
- Medicaid Long-term Care Quality Reimbursement Advisory Council review

### New Federal MOE/Eligibility Requirements

- The Affordable Care Act (Healthcare Reform) has new Medicaid maintenance of effort requirements - dating back to March 2008 as required by the Deficit Reduction Act.
- Additionally, as a condition of receiving Federal Medicaid funding, States must maintain:
  - "eligibility standards, methodologies, and procedures that are no more restrictive than those in effect on March 23, 2010."
- Coverage for adults under the Medicaid program generally remains in place until the Secretary determines that an insurance exchange if fully operational, likely January 1, 2014.

### In-Home Services (Current Rates)

	11-13		erage Cost		Client	C	ost After				
In-Home	Caseload	I	Per Case	Con	tribution		Client	2	4 Month Cost	G	eneral Fund
Hourly	9,113	\$	907.19	\$	48.07	\$	859.12	\$	187,899,853	\$	69,710,846
Live-in	1,102	\$	1,765.32	\$	107.82	\$	1,657.50	\$	43,837,560	\$	16,263,735
Spousal	143	\$	1,796.06	\$	41.01	\$	1,755.05	\$	6,023,332	\$	2,234,656
Personal Care	827	\$	210.00	\$	-	\$	210.00	\$	4,168,080	\$	1,546,358
Non Medical Transportation				\$	-	\$	-	\$	4,860,000	\$	1,803,060
FICA (7.65% of wages)						\$	-	\$	18,507,555	\$	6,866,303
FUTA/ SUTA						\$	-	\$	14,400,000	\$	5,342,400
Health Insurance						\$	-	\$	78,000,000	\$	28,938,000
Training								\$	150,000	\$	150,000
Independent Choices	300	\$	1,950.00	\$	-	\$	1,950.00	\$	14,040,000	\$	5,208,840
					In-He	ome	Subtotal	\$	371,886,380	\$	138,064,197

#### Service Priority Levels - Activities of Daily Living



Requires Full Assistance in Mobility, Eating, Elimination & Cognition



Requires Full assistance in Mobility, Eating And Cognition



Requires Full Assistance In Mobility or Cognition or Eating



Requires Full Assistance In Elimination



Requires Substantial Assistance with Mobility, Assistance with Elimination and Assistance with Eating



Requires Substantial Assistance with Mobility and Assistance With Eating



Requires Substantial
Assistance with Mobility and
Assistance with Elimination



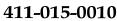
Requires Minimal Assistance with Mobility and Assistance with Eating and Elimination



Requires Minimal Assistance with Mobility and Assistance with Eating



Requires Substantial Assistance with Mobility



**Priority of Paid Services** 

(effective 04/27/2004)

To meet service priority, an individual must be found eligible, using CA/PS as the assessment tool, as meeting at least the requirements for Assist or Full assist in activities of daily living, in the following order and as designated in OAR 411-015-0015



Requires Minimal Assistance with Mobility and Assistance with Elimination



Requires Minimal Assistance with Mobility and Assistance with Eating



Requires Assistance With Elimination



Requires Assistance With Eating



Requires Minimal Assistance
With Mobility



Requires Full Assistance With Bathing or Dressing



Requires Assistance In Bathing or Dressing



Independent in the above levels but requires structured living for supervision of complex medical problems or a complex medication regimen



#### **ADL and IADL Hours by Service Priority Level**

Service				Avg Hrs IADL
Priority	Number of			at 25%
Level	Clients	Avg Hrs ADL	Avg Hrs IADL	reduction
1	230	196.2	68.7	51.5
2	18	136.1	56.9	42.7
3	2,956	125.1	60.3	45.2
4	359	85.4	54.9	41.2
5	539	76	52.2	39.2
6	86	39.5	39.5	29.6
7	3,666	50.4	43.9	32.9
8	23	44.5	38	28.5
9	17	31.4	31.5	23.6
10	1,508	24.8	31	23.3
11	371	29	31.5	23.6
12	26	31.7	40	30.0
13	260	22.5	28.1	21.1

#### In-Home Services Reduction Options

- SPD is exploring use of the Community First Choice Option authorized under the Affordable Care Act (Health Care Reform) that would increase Federal Match rate by 6 percent for a three-year period. Services likely limited to inhome direct services and supportive services to keep individual independent.
- The State collectively bargains with Homecare Workers every two years with the current contract expiring June 30, 2011. Reduction options include:
  - reducing the hourly rate paid to Homecare Workers
  - reducing insurance coverage
  - reducing other benefits such as paid leave.
- Reduce or Eliminate the limited Personal Care Medicaid Benefit used avoid higher cost waiver services – however would also impact personal care services in Mental Health and Developmental Disability programs
- GBB assumes a 25 percent IADL reduction which equals about a 10 percent loss in hours for most clients. IADLs include services such as housekeeping, meal preparation, shopping and assistance with medications.

#### Community Based Care Facilities (Current Rates)

Category of Service APD	11-13 Caseload	Average Cost Per Case			lverage Client tribution	C	Average ost After Client ntribution	24 Month Cost		General Fund	
Community Facilities											
Adult Foster Home- Commercial	3,233	\$	1,874.13	\$	280.28	\$	1,593.85	\$	123,670,009	\$	45,881,573
Adult Foster Home- Relative	1,603	\$	1,258.16	\$	116.49	\$	1,141.67	\$	43,922,328	\$	16,295,184
Assisted Living Facilities	4,348	\$	2,006.52	\$	371.29	\$	1,635.23	\$	170,639,521	\$	63,307,262
Residential Care Facilities	1,029	\$	1,485.88	\$	322.33	\$	1,163.55	\$	28,735,031	\$	10,660,696
Contract Residential Care Facilities	1,864	\$	3,356.10	\$	461.93	\$	2,894.17	\$	129,473,589	\$	48,034,702
PACE	970	\$	3,036.48	\$	396.15	\$	2,640.33	\$	61,466,882	\$	22,804,213
Specialized Living	160	\$	1,545.75	\$	94.44	\$	1,451.31	\$	5,573,030	\$	2,067,594
		Community Facilities Subtotal \$ 563					563,480,391	\$ 2	209,051,225		



### Community Based Care Facilities Medicaid Reliance

Setting	Occupancy Percentage	% Medicaid occupancy	% Non Medicaid occupancy
Assisted Living Facilities (212)	89.60%	40.20%	59.80%
Residential Care Facilities (239)	81.70%	34.90%	65.10%
Setting	Licensed Beds	Number Medicaid Filled Beds	Percent Medicaid Filled Beds
Adult Foster Homes (3,850)	10,201	4,662	45.70%
Setting	Number Enrolled	Percent of Medicaid Clients	Percent of Non- Medicaid Clients
Programs of all Inclusive Care For the Elderly (PACE)	879	98.80%	1.20%

### Community Based Care Reduction Options

- The only option available in this area is to reduce rates.
  - ➤ CBC Rates are all inclusive for 24/7 services needed by client (rates do not include room/board). As a result, there are no opportunities to decrease benefit levels.
  - ➤ Can't reduce eligibility (i.e., Before health reform, Oregon already eliminated services to individuals in SPLs 14-17)
- Rates paid to adult foster homes (both commercial and relative) are governed by collective bargaining.
- CMS approval of all rate changes will be required.
   State will be required to demonstrate rates are adequate for access and quality.

### Nursing Facility Services (Current Rates)

N	11-13	verage Cost		Client	C	ost After	•	4.14.		15 1
Nursing Facilities	Caseload	Per Case	Coi	ntribution		Client	2	4 Month Cost	G	eneral Fund
Nursing Facilities Basic	3,868	\$ 6,450.57	\$	1,081.68	\$	5,368.89	\$	498,404,379	\$	184,908,025
Nursing Facilities Complex	558	\$ 8,988.89	\$	631.01	\$	8,357.88	\$	111,928,788	\$	41,525,580
Nursing Facilities Enhanced Care	60	\$ 8,988.89	\$	558.02	\$	8,430.87	\$	12,140,450	\$	4,504,107
Nursing Facilities Pediatrics	52	\$ 10,898.34	\$	55.65	\$	10,842.69	\$	13,531,672	\$	5,020,250
Nursing Facilities Extended Care	158	\$ 4,424.66	\$	-	\$	4,424.66	\$	16,778,292	\$	6,224,746
Nursing Facilities OHP PHEC	10	\$ 8,988.89	\$		\$	8,988.89	\$	2,157,334	\$	800,371
Nurse Aide Training							\$	1,741,000	\$	870,500
					NI	F Subtotal	\$	656,681,914	\$	243,853,579

### **Nursing Facility Occupancy**

Setting	Occupancy Percentage for the year ending 6/30/10	% of census attributable to Medicaid	% of census attributable to Non Medicaid
Nursing Facilities (140 licensed NFs in Oregon)	59.15%	63.13%	36.87%

## Nursing Facility Length of Stay

Nursing Facility Services (Medicaid Long Term Care only)	Percentage of Nursing Facility Caseload
Less than 30 days	16.43%
31-60 days	5.83%
61-100 days	6.16%
101-180 days	11.53%
181-365 days	17.06%
Over one year	42.99%

### Nursing Facility Revenue Sources

Setting	Percent of Revenue attributable to Medicaid	Percent of Revenue attributable to Medicare	Percent of Revenue attributable to Other Payer Sources
Nursing Facilities	55.74%	18.97%	25.29%

### Nursing Facilities Rate Setting Basics

- Nursing Facility rate setting is tied to the Provider Tax statute. ORS 409.750
- Current statute requires SPD to pay nursing facilities at the 63<sup>rd</sup> percentile of allowable costs.
- Current statute exempts nursing facilities tied to Continuing Care Retirement Communities and those with high (85% and above) Medicaid census levels.
- GF need for NF rates reduced by collections from estates recovery (est. for 11/13 = \$16.2M) and provider taxes (anticipated for 11/13 = \$83.6M).

# **Nursing Facility Basic Rates**

Description	Rate Information
ORS 409.750 "Basic" Rate (SFY11)	\$212.12
63 <sup>rd</sup> Percentile per ORS 409.750 (SFY12)	\$236.24 (year one) \$241.95 (year two)
GBB	\$179

### **Nursing Facility Costs**

Description	Cost Per Resident Day (Year Ending 6/30/10)
Average of 1st Quartile	\$261.80
Average of 2 <sup>nd</sup> Quartile	\$226.03
Average of 3 <sup>rd</sup> Quartile	\$208.61
Average of 4 <sup>th</sup> Quartile	\$182.70
Overall Average	\$219.90

### Nursing Facility Reduction Options

- Amend NF rate-setting statute (ORS 409.750) to:
  - Reduce "allowable cost" percentile or create flat rate for NF reimbursement across service types
  - Narrow criteria or eliminate use of complex medical needs additional payment
  - Eliminate exemptions from provider tax
  - If exemptions are eliminated, Oregon could increase the maximum provider tax collections (current levels with exemptions set at 5.5 percent & 6 percent effective 10/1/11)
- Seek Federal approval to limit NF length of stay

### GBB: Long-term Care Re-design Proposal

- The GBB assumed funding for long-term care services would be combined with health benefits in a comprehensive coordinated care approach.
- The GBB assumed rate reductions to NF (19%), CBC (16%) and In-Home (16%) Long-term Care services.
- The GBB assumed Oregon significantly limited NF stays in year 2 of biennium (posthospitalization and transition only) by coordinating medical care and follow-up around high acuity clients in community settings.

### OPI/OAA/OSIP

09-11	Reduction Levers 11-13 GBB
Oregon Project Independence* \$10M GF, \$10M TF *ORS 410.410	Oregon Project Independence \$5.98M GF*, \$5.98M TF
Older Americans Act \$0 GF, \$31.3M TF	Older Americans Act \$0 GF*, \$31.3M TF *OPI is used for the required state maintenance of effort to receive OAA
Oregon Supplemental Income Program \$5.9M GF, \$5.9M TF	Oregon Supplemental Income Program \$5.9M GF, \$5.9M TF

### OPI Reductions – Implementation Options

- Create asset test to qualify for OPI in-home services.
- Ensure standard implementation of existing client cost-sharing schedule statewide.
- Define minimum core services.
- Set cap on amount spent for admin/case management.
- Implement a statewide 25-hour per month maximum services plan.
- Continue exploring opportunities for federal match.

### Other Services (Current Rates)

Other Services	11-13 Caseload		ost Per Case		erage Client ontribution		ost After Client	2	24 Month Cost		General Fund	
Home Delivered Meals								\$	6,532,000	\$	2,423,372	
Adult Day Services								\$	1,290,000	\$	478,590	
In-Home Agency								\$	8,486,300	\$	3,148,417	
Community Transition								\$	138,000	\$	51,198	
Home Adaptations								\$	616,000	\$	228,536	
Medicare Buy-in Part A	3,004	\$	456.00	\$	-	\$	456.00	\$	32,875,776	\$	12,196,913	
Medicare Buy-in Part B	102,236	\$	120.40	\$	-	\$	120.40	\$	295,421,146	\$	109,601,245	
					Other Services Subtotal				345,359,222	\$	128,128,271	

### "Other Services" Reduction Options

- Reduce or Eliminate Medicaid Home Delivered Meals to approximately 940 Seniors and People with Physical Disabilities
- Reduce or Eliminate Adult Day Services
- Reduce or Eliminate In Home Agency services However client would be eligible for similar Home Care Worker Services offsetting savings
- Reduce Medicare Buy-in / Medicare Savings Program However failure to pay premiums would result in drastically higher costs for the Oregon Health Authority since they would revert to "first payer" status.

### Next Steps for DHS APD Budget Options

Difference between cost to continue current APD programs/ services at current rates and GBB investment = \$122,752,878 GF. (slide 2)

DHS is currently working on pricing options based on the reduction options (rate/program "levers") identified today.

- ➤ Where would the committee like DHS to prioritize its focus?
- >Are there particular options highlighted today that the committee would like DHS to explore further?
- >Are there options not mentioned today the committee would like DHS to explore?