

## PRESENTATION TO THE 2022 INTERIM BUDGET COMMITTEE

# Senior and Long-Term Care Division

### **Medicaid and Health Services Branch**

Department of Public Health and Human Services

#### **THE FOLLOWING TOPICS ARE COVERED IN THIS REPORT:**

- **Overview**
- **Summary of Major Functions**
- **Highlights and Accomplishments during the 2023 Biennium**
- **Efficiencies and Cost Savings**
- **Funding and FTE Information**

# OVERVIEW

The mission of the Senior and Long-Term Care Division (SLTC) is to work to advance dignity and independence through quality long term care services and supports. SLTC serves older adults and the physically disabled through three main programs. The Aging and Community Service Bureaus provide services ranging from basic in-home care to nursing facility services, which create a long-term care system for Montanans. The third program, Adult Protective Services, acts as the safety system to assure older adults and adults with disabilities are protected from abuse, neglect, and exploitation.

The division consists of 74.75 permanent FTE of which 56.5% (42.25 FTE) work for adult Protective Services Bureau, mostly outside of Helena. The Division has 5.5 vacancies.

Vacant positions limit SLTC’s capacity to complete assessment work for the Older Americans Act (OAA) programs, create delays in completing quality assurance reviews in the Community Services Bureau (CSB), and sidelines work to improve administrative claiming in the Aging Services Bureau (ASB) and Adult Protective Services (APS). Vacancies for APS are filled easier than those in the ASB and CSB.

Additionally, SLTC has authority for 4.0 modified FTE for the Money Follows the Person (MFP) program. The inability to recruit additional qualified individuals has limited the ability of the division to re-boot the MFP program. There are also thirteen social services employees who oversee guardianship cases and provide case follow up. These positions are funded through FYE 2025.

## DEMOGRAPHICS

The work of SLTC is influenced by the changing demographics of older and disabled Montanans. Technology and advancements in medical care have extended life expectancy for both groups. This population growth is best represented by the predicted growth of the over 60 population by 2030. Montana can expect an 8.44% growth (or 91,151 persons) in this group. The highest growth counties by percentage and persons are:

Population Growth by Percentage		Population Growth by Persons	
<i>Madison</i>	35.95%	<i>Gallatin</i>	34,218
<i>Gallatin</i>	29.30%	Yellowstone	12,266
Treasure	27.29%	Flathead	12,119
Meagher	26.47%	Missoula	11,177
Powder River	25.80%	Lewis and Clark	7,718
Stillwater	15.48%	<i>Ravalli</i>	6,074
Broadwater	15.38%	<i>Madison</i>	3,219
Carbon	14.18%	Silver Bow	2,153
Golden Valley	13.70%	Park	1,756
<i>Ravalli</i>	13.50%	Lincoln	1,601

Demographics drive the size of the direct care work force needed for community based and facility services, the location of Adult Protective Service Investigators, number of nursing home beds and the need for congregate and delivered meals.

The counties with the greatest population loss are:

Population Loss by Percentage		Population Loss by Persons	
Pondera	-8.23%	Custer	(497)
Petroleum	-8.60%	<i>Musselshell</i>	(554)
<i>Choteau</i>	-9.84%	<i>Choteau</i>	(560)
<i>Big Horn</i>	-10.33%	Richland	(604)
<i>Blaine</i>	-10.35%	Dawson	(617)
<i>Musselshell</i>	-11.88%	<i>Blaine</i>	(681)
<i>Glacier</i>	-12.19%	<i>Big Horn</i>	(1,349)
Liberty	-13.65%	<i>Roosevelt</i>	(1,598)
<i>Roosevelt</i>	-14.59%	<i>Glacier</i>	(1,657)
<i>Rosebud</i>	-21.20%	<i>Rosebud</i>	(1,872)

A map depicting growth rates by county is attached for reference.

## PRIMARY SERVICES

Senior and Long-Term Care provides services to seniors and the physically disabled by:

- The Adult Protective Services (APS) program, which provides education on and investigative work pertaining to abuse, neglect, and financial exploitation of Montana’s seniors and adult disabled community. Additionally, APS serves as guardian for more than 90 individuals as ordered by a court.
- Establishing and managing a state plan on aging led by the Aging Services Bureau, in collaboration with the ten Area Agencies on Aging (AAA), and tribal programs for the Montanans 60 years of age and older. The Aging Services Bureau oversees nutritional programs, the long-term care ombudsman program, legal services, caregiver support, and information and assistance service.
- Administering Medicaid programs through the Community Services Bureau, which is comprised of nursing facility services, the Big Sky Waiver program personal assistance, Community First Choice, home health, and hospice.
- Nursing Facility Services, which establishes and maintains a state plan for 60 Skilled Nursing Facilities (SNF) and 47 Critical Access Hospitals (CAH) for Swing Bed services (11/28/2022) across the state.

A figure illustrating the interrelationships of SLTC functions is attached for reference.

# SUMMARY OF MAJOR FUNCTIONS

The division is divided into three bureaus: Adult Protective Services Bureau, Aging Services Bureau and the Community Services Bureau. Administrative functions are supported by a Central Services Bureau.

## ADULT PROTECTIVE SERVICES BUREAU

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APS promotes the safety, independence, and quality-of-life for adults ages 60 years of age and older, and Montanans ages 18-59 with a disability, by providing effective investigation of suspect abuse, neglect and exploitation

APS investigators work in the field gathering information by interviewing the alleged victim, other persons aware of the situation, and the alleged perpetrator. APS investigators coordinate with local law enforcement officials, county attorneys, and the Elder Justice Prosecutor with DOJ, when suspected criminal activity results in a recommendation for prosecution. APS Investigators collaborate with Tribal agencies and partners to address concerns of adult maltreatment in Tribal communities.

APS experienced an 86% increase in referrals between FY 21 and FY 22, of those 8% were cross reported to law enforcement or tribal services.

Montana's aging population is growing rapidly, and reports of adult maltreatment are increasing. There is a demand for investigative services provided by Adult Protective Services to address the issues of adult maltreatment, track perpetrators, and connect at-risk adults to support services.

### Guardianship Work

APS used dedicated grant funds to create a Social Services Program to monitor, re-assess and evaluate the guardianship needs of over 90 guardianship cases appointed to the State.

### Public Education

Staff members are assigned to provide education on identifying and reporting abuse, neglect and/or exploitation. The team has worked with nursing homes, private businesses, the Montana Law Enforcement Academy, and other bureaus in the division.

**To Report Abuse, Neglect  
or Exploitation**  
1-800-277-9300

All SLTC contracts require APS training as those working under contracts are mandatory reporters.

### Elder Justice Councils

By executive order, Governor Gianforte expanded the Elder Justice Council to include four regional councils: Western, North Central, South Central, and Eastern. The councils will provide coordination of agency and community efforts within their regions to address and reduce the abuse, neglect, and exploitation of senior citizens and adults with disabilities. Duties include establishing partnerships with stakeholders, providing and promoting educational outreach, and defining best practices. The council work is administratively tied to DPHHS. Key partners include Department of Justice and Commissioner of Securities and Insurance.

## AGING SERVICES BUREAU

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### Oversight of the Older Americans Act (OAA) Programs

The mission of the OAA is to help older people maintain maximum independence in their homes and communities, and to promote a continuum of care for older adults. The Act is considered the major vehicle for the delivery of supportive and nutrition services to the aging population. Although the OAA has a comprehensive mission, its reach is constrained by limited resources.

Among the many challenges to the aging services network is its ability to keep up with demand in the face of a growing older adult population, especially those who have multiple chronic conditions, are socially isolated, have low income, live in rural areas, and/or those who live in long-term care facilities and lack advocates. In Montana, OAA services are managed through contracts with ten local Area Agencies on Aging (AAA). As Montana ages, additional supports will be needed to maintain and build on the network of services created by the local AAAs.

### Funding

The federal funding formula provides for a pro rata share of the total congressional appropriation-based population of individuals over 60 or a minimal allotment. Montana receives a minimal allotment, which is a flat amount. OAA services in Montana are matched with state and local funds.

Geographic size of a state is not a factor in the federal funding formula. MT and VT receive the same federal allotment.

### State Plan

To be eligible for OAA funds, each state must complete a state plan every four years. Montana is currently completing the state plan for FFY 2024 through FFY 2028. This plan is a compilation of the Area Agency on Aging (AAA) plans rolled into a single statewide plan focusing on common activities and actions over the next four years.

Grant funds were used to complete a statewide survey that includes a breakdown by each planning and service area. Results of this survey indicate older adult needs include affordable and accessible housing (44%), quality health care (44%), information about available services (42%), quality physical health care (39%) and the variety and quality of employment opportunities (22%). Respondents were able to choose multiple issues, so these numbers won't add up to 100 percent.

## COMMUNITY SERVICES BUREAU

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All services in this unit are dependent upon the direct care workforce.

Challenges include recruitment, retention, availability, continuing training, background checks (for some services) and pay.

SLTC manages Medicaid community-based services for eligible members to remain in their homes and communities. Programs help with activities of daily living such as bathing, dressing, meal preparation, grocery shopping, limited housekeeping, and an array of specialized services.

Most of the following services can be received through an agency or self-managed by the member. Community Services also manages the nursing facility services program. The bureau includes:

- **Personal Assistance Services** – Basic assistance in the member’s home.
- **Community First Choice Services** – Expanded personal assistance including time for community integration. Members must meet nursing facility level of care. This program receives an additional 6% in federal match.
- **Home Health** – Licensed and certified home health agencies provide skilled nursing and physical, occupational, and speech therapy services in settings where normal life occurs.
- **Hospice** – Hospice agencies focus on providing palliative, non-curative, care to individuals with a terminal condition. The service also includes support to families during the illness and after the loved one’s death.
- **Big Sky Waiver** – This program began in 1982 and has been adapted over time to meet service delivery preferences of the elderly and the physically disabled. To be eligible for the Big Sky Waiver an individual must be Medicaid eligible for long term care services, require nursing facility level of care, and need a service available only through the program. To receive services, funding must be available, or the individual is placed on the waiting list.
  - Big Sky Waiver services include homemaker, extended personal care, adult day care, respite, habilitation, transportation, home modifications, nursing services, and adult residential care provided in an assisted living facility or adult foster home. All members receive case management services. The service highest in demand is adult residential care provided in an assisted living facility.
- **Montana’s Money Follows the Person (MFP)** – This is a federal grant that helps elders and/or those with disabilities move from facility-based care back to the community. MFP provides supports and connects members to home and community based served (HCBS) designed to help individuals transition from nursing facilities and other long stay hospital settings to the community.
- **Nursing Facility Services** – This program provides room, board, daily attendant and nursing services, ancillary items, and some specialty care in Montana’s 60 nursing homes. All facilities must be certified and licensed to qualify for payment. Montana Medicaid members pay a resident contribution rate that is set based on individual circumstances. Facilities are paid a per day rate, an annual lump sum payment for the Intergovernmental Transfer program, and biannual payments for direct care worker wages.

To comply with federal law, the bureau must execute a strong quality assurance strategy for personal assistance, Community First Choice, and the Big Sky Waiver. This includes such items as monitoring the federal settings rule, providing oversight of incident management to assure health and safety, and member satisfaction.

# HIGHLIGHTS AND ACCOMPLISHMENTS DURING THE 2023 BIENNIUM

## SUPPORTS TO NURSING HOMES

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- Continued to assist with COVID issues
  - Assisted providers with obtaining PPE from state stockpile
  - Per HB 632 (2021 Session), released \$15.0 M of ARPA funds to facilities based on occupancy rates during calendar year 2020
  - Maintained Ombudsman services
- Worked with providers to assure all available Medicaid funding is being accessed
  - Increased utilization of the add-on payments program through provider education and elimination of billing obstacles.
  - Established reimbursement for COVID vaccinations in nursing facilities
  - Increased communication of policy, procedures, and/or billing tips through provider notice system, direct email, and via associations
  - Experienced an uptick in the number of claims resolution questions

## FINANCIAL SAVINGS FOR SENIORS

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- The legal developer program opened 793 cases which had 2,776 legal issues associated with them. The legal clinics, in person or by phone, provided services to 322 individuals. The value of such services was approximately \$322,178.
- The State Health Insurance Assistance Program (SHIP) provides Medicare counseling services during open enrollment and during other special enrollment periods. SHIP counselors improved the quality of life of Montana seniors in many ways, such as assuring correct pricing for insulin, which can save a beneficiary about \$565 a month.

## INCREASED SERVICES IN RURAL AREAS

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Adult Protective Services was awarded funds to aid individuals impacted by COVID who needed assistance to remain in their homes. Area 1 Agency on Aging, based out of Glendive, worked with APS and Aging Services Bureau to identify homes where individuals could remain if safety issues were resolved. Over 100 referrals were received. Area 1 consists of 17 eastern counties and is the largest AAA in the nation.

# EFFICIENCIES AND COST SAVINGS

## REVISED THE CIVIL MONETARY PENALTY REINVESTMENT PROGRAM

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Montana received a portion of the penalties levied to Montana nursing facilities for routine or special survey deficiencies. A portion of the funds can be used for the purpose of enhancing resident lives. SLTC collects, reviews and submits the applications to Centers for Medicaid and Medicare Services. Improvements included:

- Utilized contract services to create and manage plan revisions
- Revised the state plan for CMP grants
- Created a Montana Application Template for ease the application process
- Utilized an email box for questions and submissions of applications
- Implemented auto reminder for providers to request an application

## SUPPORT SAFE NURSING HOME TRANSFERS

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SLTC division staff created an assistance process that supported member choice, efficiency, and safety during transfers.

- Created a work group consisting of SLTC and Office of the Inspector General staff to share information, update plans, and work through situations as they arose
- Worked directly with facility staff to assist in discharge planning to place high need/risk individuals
- Negotiated rates and service for high need/risk individuals avoiding out of state placements
- Involved Adult Protective Services in suspect abuse, neglect, or exploitation situations
- Assured availability of ombudsman services throughout process

# FUNDING AND FTE INFORMATION

Senior and Long-Term Care	FY 2022 Budget	FY 2023 Budget
FTE	74.75	74.75
Personal Services	\$5,216,445	\$5,490,515
Operating Expenses	\$2,054,048	\$2,030,418
Grants	\$14,339,014	\$14,314,017
Benefits and Claims	\$257,635,491	\$301,227,161
Transfers	\$6,829,995	\$32,500
Debt Services	\$4,520	\$1,634
<b>TOTAL COSTS</b>	<b>\$286,079,513</b>	<b>\$323,096,245</b>
	FY 2022 Budget	FY 2023 Budget
General Fund	\$52,477,676	\$77,929,673
State Special	\$32,572,761	\$33,347,358
Federal Funds	\$201,029,076	\$211,819,214
<b>TOTAL FUNDS</b>	<b>\$286,079,513</b>	<b>\$323,096,245</b>

