Department of Human Services
2013 Ways and Means Human Services Subcommittee
DHS Overview

Erinn Kelley-Siel, DHS Director
March 7, 2013

DHS | Independent. Healthy. Safe.

Helping Oregonians Reach Their Full Potential

DHS serves more than 1 million Oregonians each year.

During 2012:

- Food benefits helped more than 1,048,000 people (381,500 of them children) avoid food insecurity and hunger.

- More than 823,900 Oregonians benefitted from OHP medical coverage.

- TANF cash assistance helped stabilize over 56,435 families living in extreme poverty.

- A total of 14,400 low-income families were able to work with child care supports.

- More than 35,360 low-income seniors and people with physical disabilities were helped with activities of daily living.

- Adult and child protective services kept more than 20,000 adults and 10,980 children safe.

- Over 20,290 adults and children with developmental disabilities were supported to live as independently as possible at home or in their home communities.

- More than 8,000 domestic violence victims were offered emergency safety supports.

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Investing in Oregon Communities

76.47% of DHS budget is spent directly in Oregon communities as direct payments to providers and clients – that number is 94.7% when including direct service staff.

Over $9.4 million/day is invested in local businesses and workers, including facilities serving seniors and people with disabilities, in-home workers, foster parents, child care providers, social service non-profits, grocers, and many more.

In 2013-15, the DHS budget will:

- Leverage over $6 billion of federal funding.
- Pay salaries of over 9,000 child care workers.
- Pay salaries of over 25,000 "In-Home Workers" that provide services to Seniors and People with Disabilities.
- Generate $414 of economic activity monthly through the average Supplemental Nutrition Assistance Program (SNAP) benefit of $230.
- Support people with disabilities to receive over $165 million each month in federal disability benefits.

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The Economy and DHS caseloads

With Oregon unemployment figures remaining high at 8.3% in December 2012 (a slight improvement from the previous month, when the rate was 8.4%), and county unemployment rates ranging from 6.7% to 13.3%, demand for temporary economic help, such as cash and food assistance, remains at record levels.

- **Supplemental Nutrition Assistance Program (SNAP)** - An 81.9% increase from April 2008 to October 2012 in households receiving SNAP benefits with more than 15,468 added in the last year. In October 2012 807,034 (1 in 5) Oregonians received SNAP benefits.

- **Temporary Assistance for Needy Families (TANF)** - A 78.3% increase from October 2008 to October 2012 statewide in families receiving TANF benefits with a 321.7% increase in the TANF two-parent program in same period.

- **Developmental Disabilities** – A 16.9% increase from June 2008 to June 2012 statewide for individuals with developmental disabilities needing supportive and comprehensive services.

- **Oregon Health Plan** – A increase of more than 238,000 families, a 55.6% increase, from October 2008 to October 2012 statewide on the Oregon Health Plan.

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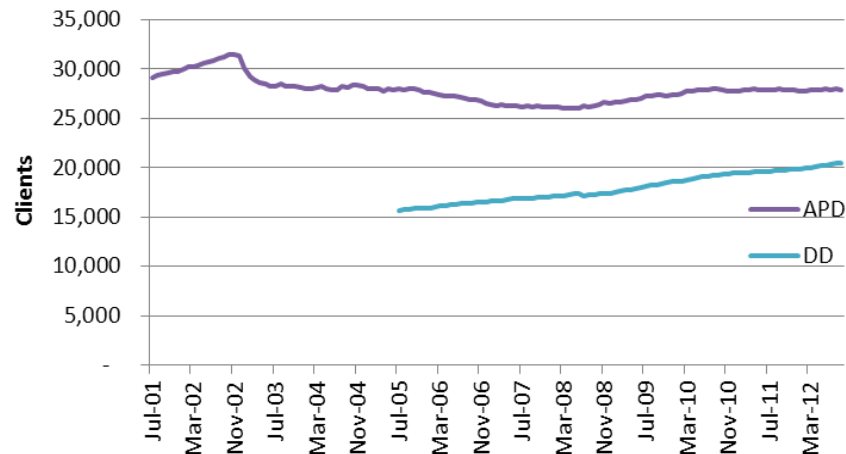
Overview of major caseload trends

MAP and SNAP Caseload History
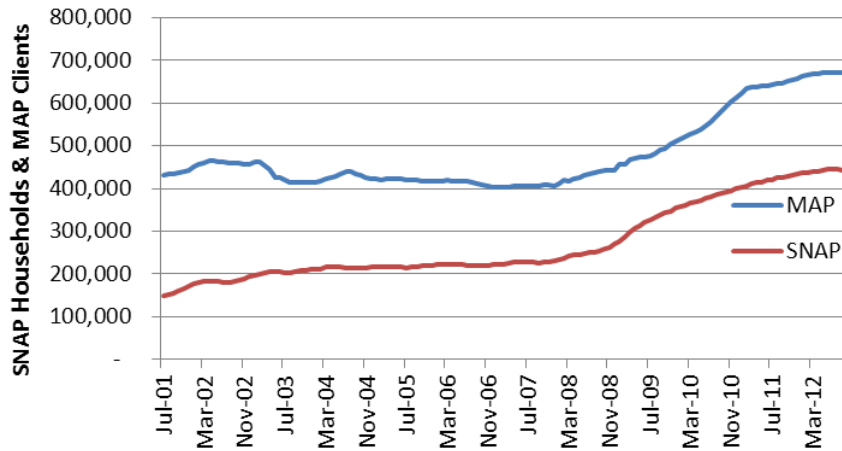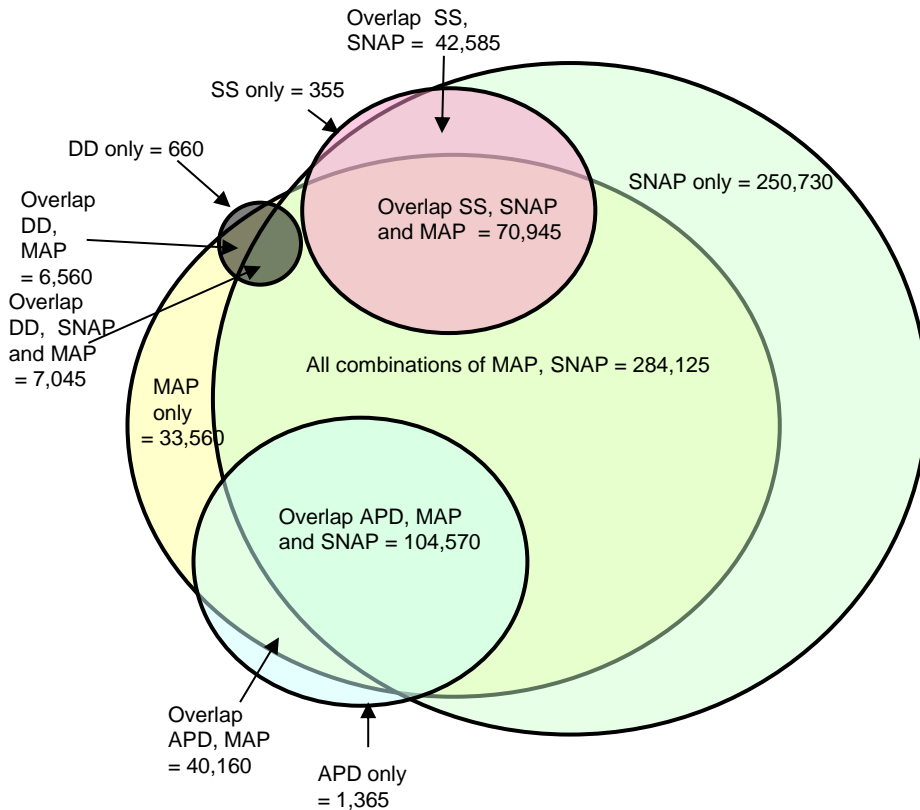

TANF Caseload History
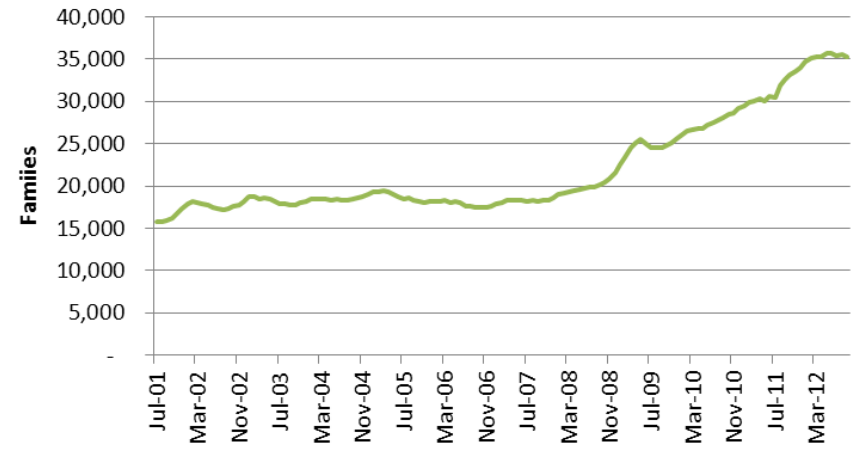
APD and DD Caseload History

813,300 Adults* Served by DHS|OHA in 2011
The graphic shows how adults overlap across major program areas.

Overlap SS, SNAP = 42,585

SS only = 355

DD only = 660

Overlap DD, MAP = 6,560

Overlap DD, SNAP and MAP = 7,045

Overlap SS, SNAP and MAP = 70,945

SNAP only = 250,730

All combinations of MAP, SNAP = 284,125

MAP only = 33,560

Overlap APD, MAP and SNAP = 104,570

Overlap APD, MAP = 40,160

APD only = 1,365

Participation by number of programs

One program	46.5%
Two programs	24.8%
Three programs	20.7%
Four programs	6.3%
Five or more	1.7%

* Adults = individuals 19 years and older

Medical Assistance Programs (MAP)

373,565 adults (45.9% of all adults) were eligible for MAP in 2011
* MAP only = 4.1% of all adults
* MAP and SNAP only = 9.3%
* Three or more including MAP = 27.2%

Supplemental Nutrition Assistance Program (SNAP)

627,450 adults (77.1% of all adults) received SNAP benefits at some time during 2011
* SNAP only = 30.8% of all adults
* SNAP and MAP only = 9.3%
* Three or more including SNAP = 27.1%

Self Sufficiency Programs (SS) - Mostly TANF

116,030 adults (14.3% of all adults)
* Self sufficiency only = 0.1%
* Self sufficiency, SNAP without MAP = 5.2%
* Self sufficiency, SNAP with MAP = 8.7%

Aging and People with Disabilities (APD)

146,420 adults (18.0% of all adults)
* APD only = 0.2%
* APD, MAP without SNAP = 4.9%
* APD, MAP with SNAP = 12.9%

Developmental Disabilities (DD)

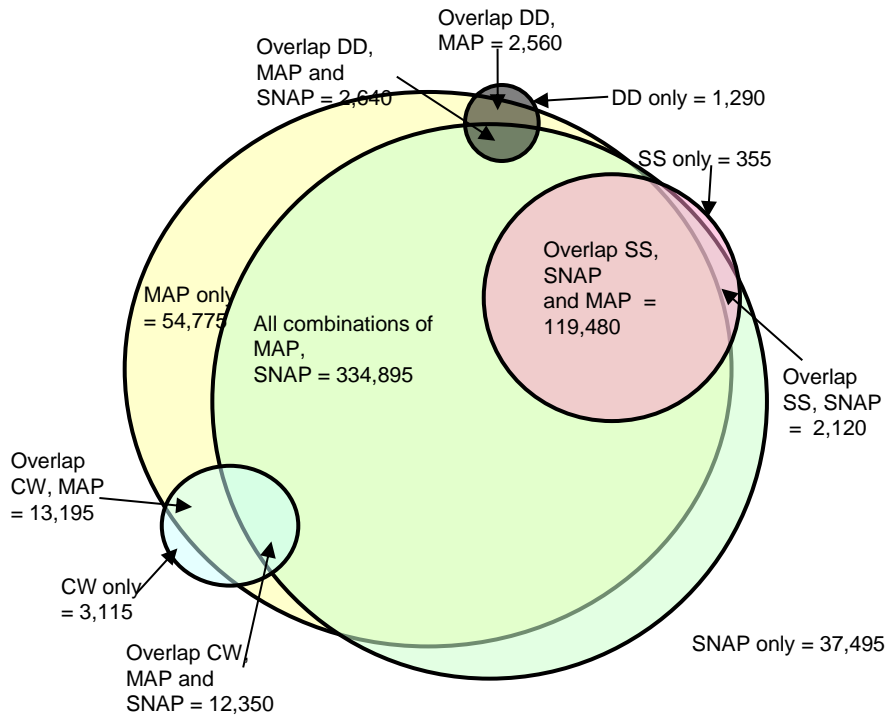14,475 adults (1.8% of all adults)
* DD only = 0.1%
* DD, MAP without SNAP = 0.8%
* DD, MAP with SNAP = 0.9%

509,590 Youth* Served by DHS|OHA in 2011
The graphic shows how youth overlap across major program areas.

Overlap DD, MAP and SNAP = 2,640

Overlap DD, MAP = 2,560

DD only = 1,290

SS only = 355

Overlap SS, SNAP and MAP = 119,480

MAP only = 54,775

All combinations of MAP, SNAP = 334,895

Overlap SS, SNAP = 2,120

Overlap CW, MAP = 13,195

CW only = 3,115

Overlap CW, MAP and SNAP = 12,350

SNAP only = 37,495

Participation by number of programs

One program	24.3%
Two programs	35.1%
Three programs	28.9%
Four programs	10.1%
Five or more	1.5%

* Youth = individuals 0-18 years
** Child Welfare client counts include Jan – July only

Medical Assistance Programs (MAP)

426,835 youth (83.8% of all youth) were eligible for MAP in 2011
✳MAP only = 10.7% of all youth
✳MAP and SNAP only = 27.3%
✳Three or more including MAP = 40.3%

Supplemental Nutrition Assistance Program (SNAP)

384,640, (75.5% of all youth) received SNAP benefits at some time during 2011
✳SNAP only = 7.4% of all youth
✳SNAP and MAP only = 27.3%
✳Three or more including SNAP = 38.7%

Self Sufficiency Programs (SS) - Mostly TANF

124,045 youth (24.3% of all youth)
✳Self sufficiency only = 0.1%
✳Self sufficiency, SNAP without MAP= 0.4%
✳Self sufficiency, SNAP with MAP = 23.4%

Child Welfare (CW) **

29,080 youth (5.7% of all youth)
✳CW only = 0.6%
✳CW, MAP without SNAP= 2.6%
✳CW, MAP with SNAP = 2.4%

Developmental Disabilities (DD)

6,665 youth (1.3% of all youth)
✳DD only = 0.3%
✳DD, MAP without SNAP = 0.5%
✳DD, MAP with SNAP = 0.5%

Oregon DHS: Leading Into the Future

The Challenge:

- Current Environment is "The New Normal"
- Current Operational Framework is Unsustainable

The Imperative:

- Improve current services
- Deliver new services
- Decrease operational costs
- Demonstrate results: Outcomes v. Outputs
- Help Oregonians Reach Their Full Potential

Oregon DHS: Leading Into the Future

What are we about?

> - Improving Health & Safety
> - Empowering Independence

What have we learned that works?

> - Prevention/Early Intervention
> - Person/Family-Driven Approaches

What's getting in our way?

> - Focus on outputs & transactions
> - Focus on programs
> - Risk aversion
> - Outdated technology & business processes

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Oregon DHS: Leading Into the Future

Where We've Been	Where We Are Going
Multiple programs, departments, divisions with own missions, visions	One Department, One Mission, One Vision, Leveraging Program Specialties
Regulative & Compliance Oriented	Outcome & Results Oriented
Policy & Program Focused	Customer Focused
Multiple, Disconnected Data, Eligibility & Technology Services	Integrated & Coordinated Data, Eligibility & Technology Services
Managers Define Solutions	Staff Are Empowered to Partner with Leadership to Create Solutions
Crisis Driven, Reactive, Risk Averse	Anticipatory, Proactive, Innovative
Government Services Operate in Relative Isolation	Collaborative Community & Business Partner

DHS

Oregon Department of Human Services

DELIVERY

CLIENT OUTCOMES

PROGRAM DESIGN

OPERATIONS

DHS DIRECTOR
Erinn Kelley-Siel

- COMMUNITY ENGAGEMENT – Margaret Carter
- EQUITY/MULTI-CULTURAL SERVICES – Gloria Anderson
- TRIBAL AFFAIRS – Rick Acevado
- MEDICAL DIRECTOR – Vacant

DELIVERY

Brokerages (13)

Community DD Programs (29)

State Operated Community Program Homes (23)

Local APD Offices (34)
District Offices (12)

Area Agencies on Aging (17)

Disability Determination

Adoption Assistance

Local Child Welfare Offices (45)

District Offices (16)

Local Self Sufficiency Offices (74)

Vocational Rehabilitation Offices (34)

PROGRAM DESIGN

Developmental Disabilities
Patrice Botsford / Trisha Baxter

Aging and People with Disabilities
Mike McCormick (d) / Trisha Baxter

Safety and Permanency for Children
Lois Day / Jerry Waybrant

Self Sufficiency
Liesl Wendt / Jerry Waybrant

Vocational Rehabilitation
Stephaine Taylor / Jim Scherzinger

OPERATIONS

Chief Financial Officer
Eric Moore

- DHS Budget
- Budget Center*
- Forecasting*
- Financial Services*

Human Resources
Carolyn Ross

- Human Resources Center*

Communications
Gene Evans

- Publications*
- Forms/Distribution*

Legislative and Client Relations
Mickey Serice

- Legislative Relations
- Legal Relations
- Rules and Contested Hearings
- Governor's Advocacy Office

Chief Operating Officer
Jim Scherzinger

Shared Services Liaison*
Jeremy Emerson

- Procurement*
- Imaging and Records Mgmt.*
- Facilities*

Internal Audits*

Business Intelligence
Angela Long

IT Business Supports
Trina Lee

Licensing and Regulatory Oversight
Donna Keddy

Adult Abuse Prevention & Investigations*
Marie Cervantes

DHS Continuous Improvement
Christy Williams

Performance Excellence*
Wes Charley

Program Integrity
Chuck Hibner

Payment Accuracy & Recovery*

* Denotes a shared services provided to DHS and OHA

Our Core Values

Integrity, Stewardship, Responsibility, Respect, Professionalism, and . . .

- *Innovation*
- *Service Equity*

DHS is committed to sustaining a learning culture which seeks to continually improve how we do our work.

Innovation

To meet the ever changing needs of the individuals we serve and of our communities, we implement the best and most INNOVATIVE practices. We encourage people at all levels to bring forth new ideas in an open collaborative environment.

DHS | Safety, health and independence for all Oregonians

INTEGRITY · INNOVATION · RESPECT · SERVICE EQUITY · RESPONSIBILITY · STEWARDSHIP · PROFESSIONALISM

SERVICE EQUITY is a measure of results, not effort.

Service Equity

We use individual approaches which are free from bias or favoritism to achieve our common outcomes. SERVICE EQUITY creates an environment of fairness and respect that values, attracts and supports diversity.

DHS | Safety, health and independence for all Oregonians

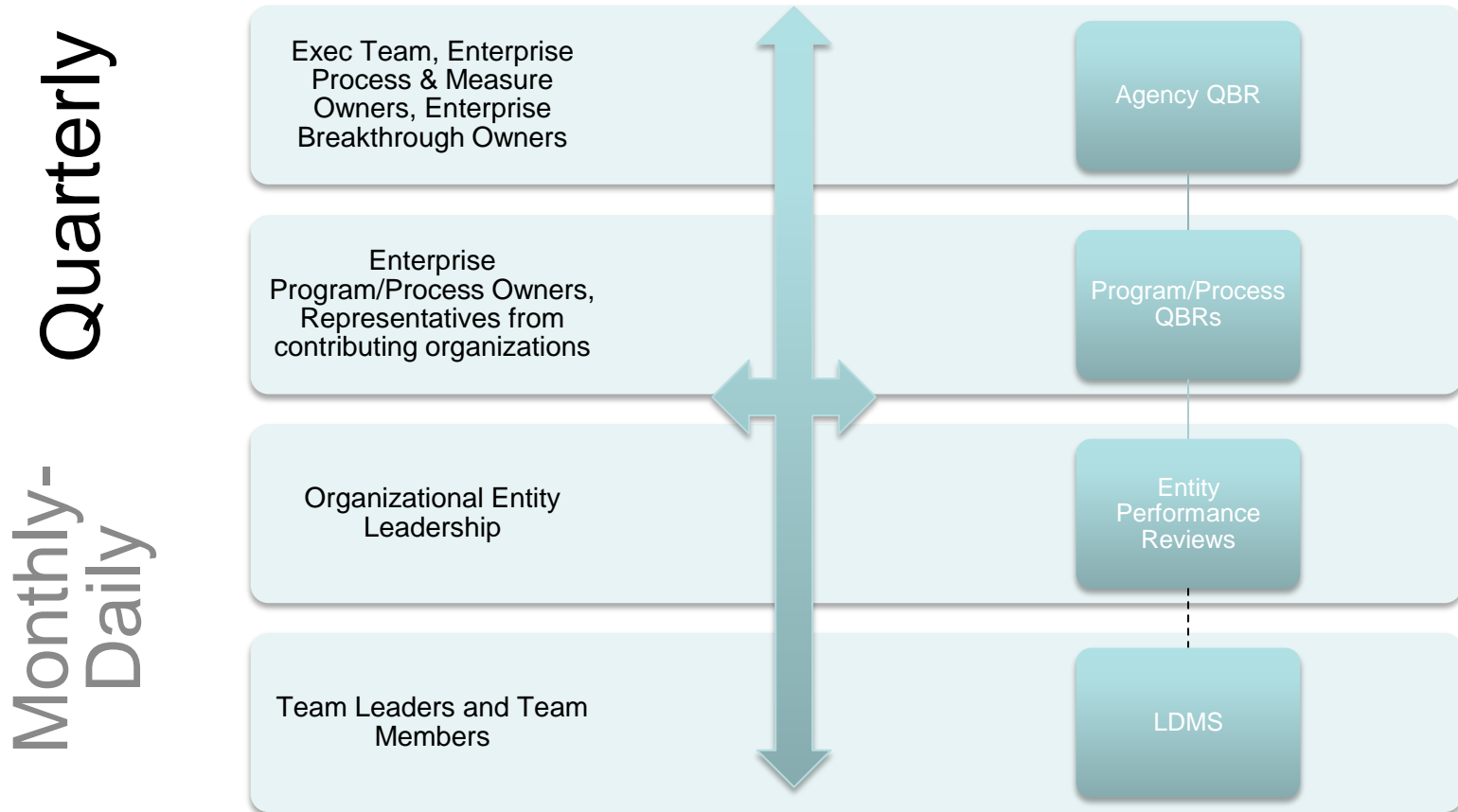INTEGRITY · INNOVATION · RESPECT · SERVICE EQUITY · RESPONSIBILITY · STEWARDSHIP · PROFESSIONALISM

DHS Performance Management System

- Clear statement of outcomes
- Description of processes to achieve outcomes
- Measures of success (outcome and process)
- Owners for each measure
- Written plans to improve outcomes
- Regular "business reviews" of progress
- Tools and training

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DHS Business Review Schedule

DHS FUNDAMENTALS MAP℠

FOUNDATIONS

DELIVERY — CLIENT OUTCOMES — PROGRAM DESIGN — OPERATIONS

MISSION
To help Oregonians in their own communities achieve wellbeing and independence through opportunities that protect, empower, respect choice and preserve dignity.

VISION
Safety, health and independence for all Oregonians

VALUES
Integrity, Stewardship, Responsibility, Respect, Professionalism, Innovation, Service Equity

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KEY GOALS

- People are safe and living as independently as possible
- Equal access, service excellence, and equity for all
- Strong Business partnerships
- Strong Community relationships
- Effective, efficient, transparent, accountable, operations
- Highly qualified, effective, valued workforce
- Enterprise Leadership

CORE PROCESSES

OPERATING PROCESSES

Program Design and Implementation OP1	Direct Service OP2	Protection and Intervention OP3	Provider Regulation OP4

SUPPORTING PROCESSES

Program Support SP1	Business Support SP2	Workforce Development SP3	Program Integrity SP4

SUB PROCESSES

Program Design and Implementation OP1
1. Developing program scope and implementation strategies
2. Defining metrics and measuring success
3. Prioritizing work and resources
4. Engaging legislatively at the state and federal levels
5. Meaningfully partnering with clients, service delivery staff and partners, business and program support services, and stakeholders
6. Managing partner/contractor performance, including accountability for culturally specific practices and services
7. Accountable for implementation of best-practices and use of data (both quantitative and qualitative) to drive decisions
8. Communicating internally and externally, both proactively and in reaction to specific circumstances
9. Continuously improving processes to maximize staff, IT, and program resources
10. Focusing across programs on client needs and enterprise outcomes

Direct Service OP2
1. Managing customer relations
2. Developing and engaging partners (Tribal, Equity, Community, Contract / Service)
3. Ensuring equitable access and inclusivity
4. Assessing safety and intervening as appropriate
5. Service delivery
   - Determining eligibility for programs
   - Providing case management services to clients
   - Coordinating with service delivery partners to maximize outcomes for clients and meet client needs
   - Partnering with program design and business program supports to maximize resources and improve client outcomes
   - Continuously improving processes to maximize staff, IT, and program resources
6. Ensuring business integrity
7. Meeting program requirements

Protection and Intervention OP3
1. Identifying at risk groups / individuals
2. Conducting Assessments
3. Responding to eligible clients/residents
4. Analyzing data
5. Developing and designing program
6. Coordinating with licensing / QA
7. Engaging stakeholders
8. Developing prevention strategies
9. Engaging Tribes
10. Providing equity in service delivery
11. Providing culturally specific interventions

Provider Regulation OP4
1. Program expectation / writing, developing, and reviewing rules
2. Certifying/licensing
3. Providing technical assistance
4. Training
5. Communicating with stakeholders
6. Collecting and interpreting data
7. Monitoring / Reviewing program
8. Ensuring compliance / Corrective action

Program Support SP1
1. Coordinating state and federal legislative activities
2. Improving external and internal communications
3. Resolving client concerns with program actions
4. Identifying systemic problems
5. Supporting service equity improvements
6. Coordinating strengthening of community relationships
7. Coordinating Improvements in tribal relations
8. Improving program data and analysis
9. Documenting and reporting program outcomes
10. Improving IT systems
11. Supporting continuous process improvement
12. Advancing accountability for results

Business Support SP2
1. Managing finances
2. Managing places
3. Managing positions
4. Managing information
5. Ensuring business continuity
6. Reporting results
7. Managing procurement
8. Managing documents
9. Collecting revenue

Workforce Development SP3
1. Diversifying Workforce
2. Recruiting, Retaining, and Succession Planning
3. Managing employee performance
4. Coaching, training, and developing staff
5. Developing leadership capacity
6. Ensuring a safe work environment
7. Involving stakeholders
8. Monitoring employee satisfaction
9. Developing professional partners

Program Integrity SP4
1. Identifying and establishing compliance requirements and performance standards
2. Proactively assuring quality
3. Implementing internal and external quality control mechanisms
4. Instituting internal controls
5. Ensuring data integrity
6. Providing technical assistance training
7. Assuring culturally appropriate and equitable services
8. Reporting Compliance

a (1) Audits/ reviews related to program integrity
(2) Corrective actions implemented
(3) Audits with no findings
(4) Percent of repeat compliance audit findings
b Internal business reviews (business & contractor services)
c Service Accuracy - eligibility determination
d (1) Employee Fraud
(2) Client Fraud and Intentional Program Violations (IPV)
(3) Client Overpayments
(4) Medicaid Provider Fraud

PROCESS MEASURES

OP1
a. Sub-process scoring
b. Outcome measure scoring

OP2
a. Equity awareness
b. (1) Field workforce strategy (2) Field workforce to forecast workload
c. Eligibility timeliness

OP3
a. Inconclusive disposition of investigations
b. Timeliness of investigation
c. Timeliness of investigation completion

OP4
a. Provider quality improvement
b. Monitoring

SP1
a. Efficiency savings

SP2
a. Business operations customer satisfaction
b. Business operational performance measures
c. Leadership accountability to performance measures

SP3
a. Cultural Competency
b. Performance feedback model – (1) position descriptions (2) development plans

PROCESS OWNER

OP1	OP2	OP3	OP4	SP1	SP2	SP3	SP4
Trina Lee	Sandy Dugan / Corissa Neufeldt	Stacey Ayers / Marie Cervantes	Donna Keddy	Angela Long / Wes Charley	Jeremy Emerson / Wes Charley	Lisa Harnisch	Chuck Hibner

OUTCOME MEASURES

Service Equity O1	Innovative Services O2	Employee Engagement O3	Customer Satisfaction O4	Fiscally Responsible O5	Safety O6	Workforce Diversity O7	Community / Business Partnerships O8	People Living as Independently as Possible O9
a. Access b. Outcomes	a. Innovations Implemented	a. Employee satisfaction	a. Client Satisfaction	a. On Target Spend b. Balanced Budget	a. Re-abuse Rate b. Abuse Rate	a. Workforce Diversity	a. Contract Results b. External Customer Satisfaction	a. In Home Service b. Successful Employment c. Progress to Less Restrictive Services d. Earning Sufficient Wages

MEASURE OWNER

O1	O2	O3	O4	O5	O6	O7	O8	O9
Carol Lamon	Stephaine Taylor	Carolyn Ross	Gene Evans	Eric Moore	Lois Day	Gloria Anderson	Mike McCormick	Trisha Baxter / Jerry Waybrant

MassIngenuity

GRB Outcomes & Investment

Focus: Improved Employment Outcomes

Temporary Assistance for Needy Families, Vocational Rehabilitation, and Developmental Disability Services have strategic employment goals focusing on youth transition and increasing employment placements. Child Welfare and Aging and People with Disability Services at the table also.

Strategic partnerships: Consumers and Families, Employers, Providers, Pre-K through 12, Higher Education, Employment Department, Contractors, Community Partners, Medical Community. Federal Government.

Areas of focus: School-to-work transitions, assessments, employer outreach, expanded training & skill development opportunities, service delivery innovations, child care & job-support services.

Results for Consumers: Economic stability and independence, improved health and mental health, community inclusion and improved quality of life.

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GRB Outcomes & Investment

Focus: Long-Term Care (LTC) 3.0

Oregon has been a recognized leader in LTC, and sustaining that title will require us to address current gaps and anticipate future demographic trends. Currently only 4% of Oregonians over the age of 65 depend on Medicaid to meet their LTC needs. With increasing financial instability among an aging demographic, Oregon's ability to continue providing high quality, cost-effective publicly-funded LTC services is at risk.

Strategic Partnerships: Consumers and Families, Providers, Health/Mental Health Care Delivery System and OHA (CCO), Federal Government.

Areas of Focus: Prevention, innovation, improved services for seniors/people with disabilities with mental health & cognitive impairments, strategic investments to increase in-home and community based care, improved coordination with medical community, and safety.

Results for Consumers: All Oregon seniors and people with disabilities will get the right services - at the right time - at the right place.

DHS

GRB Outcomes & Investment

Focus: Developmental Disability (DD) System Sustainability

Oregon's service system for individuals with developmental disabilities is entirely community based. Within the system, 67% of individuals are served at home with family. Oregon is one of only 3 states that does not utilize private or public institutional settings. To maintain high marks in customer satisfaction while managing increasing caseloads and financial instability among families, the system has an urgent need to continue evolving in a financially sustainable manner.

Strategic Partnerships: Self-advocates and Families, Brokerages, Counties, Providers, Employers, Health Care System, Child Welfare System, Vocational Rehab, Feds.

Areas of Focus: Improved service quality, expanded employment opportunities, increased use of technology, streamlined service coordination, more supports for families, and different approach to crisis.

Results for Consumers: Improved access to coordinated, community-based services, improved quality of life through community inclusion, improved health and safety outcomes.

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GRB Outcomes & Investment

Focus: Safe & Equitable Foster Care Reduction

In the past seven years, fewer children have had to experience foster care in Oregon. In 2012 Oregon had its lowest rate of FC entry in over five years. However, Oregon believes it can do more to strengthen families, protect kids, and improve life-long outcomes for abused/neglected children.

Strategic partnerships: Children, Youth and Families, Judicial Department/CRB, Tribes, Providers, Attorneys, CASA, Education, Health/ Mental Health Care System and OHA (CCO), TANF, DD programs, Communities, Philanthropy, Feds.

Areas of focus: Statewide implementation of SB 964 (2011) (local, community-based services with accountability for results), implementation of a "differential response" model of CW intervention, continued emphasis on relative placements & connections, improved ICWA compliance.

Results for Children/Youth: Stronger families, safer children/youth, reduced disparities, improved long-term outcomes and reduced costs.
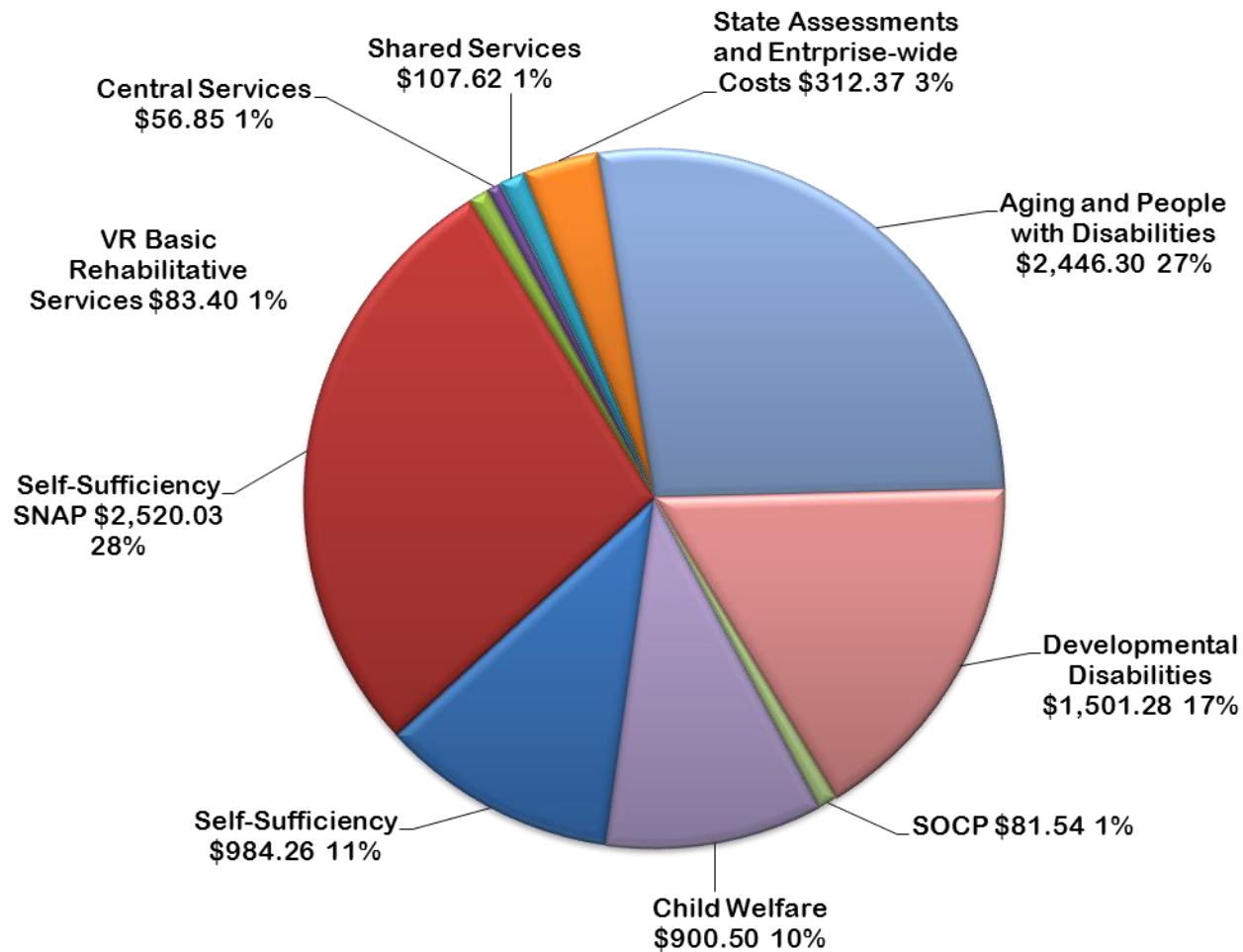
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GRB Outcomes & Investment

Focus: Modernization (SSP & APD programs)

Modernized Service Delivery: DHS and its partner agencies are committed to improving the customer experience by creating opportunities for clients to access services in more customized ways and ensuring that clients have the time they need with case managers.

Modernized Technology: The technology component of Modernization will result in new, innovative and more efficient technology systems that will streamline operations in our field offices, giving workers more time with clients and community partners and allowing for less time on paperwork & process. Data interoperability will improve service coordination across programs and service systems and improve program integrity.

Results for Consumers: Better access to DHS/OHA programs and more meaningful time with their case managers to help them along their journey to self-sufficiency and independence.

DHS

DHS GRB Budget – $8,994.20 Million

Shared Services $107.62 1%

Central Services $56.85 1%

State Assessments and Entrprise-wide Costs $312.37 3%

VR Basic Rehabilitative Services $83.40 1%

Aging and People with Disabilities $2,446.30 27%

Self-Sufficiency SNAP $2,520.03 28%

Developmental Disabilities $1,501.28 17%

Self-Sufficiency $984.26 11%

SOCP $81.54 1%

Child Welfare $900.50 10%

DHS GRB Budget by Fund Type – 69% Federal Funds

General Fund
$2,332.09 Million,
26%

Federal Funds
$6,178.41 Million
69%

Other Funds
$483.65 Million,
5%
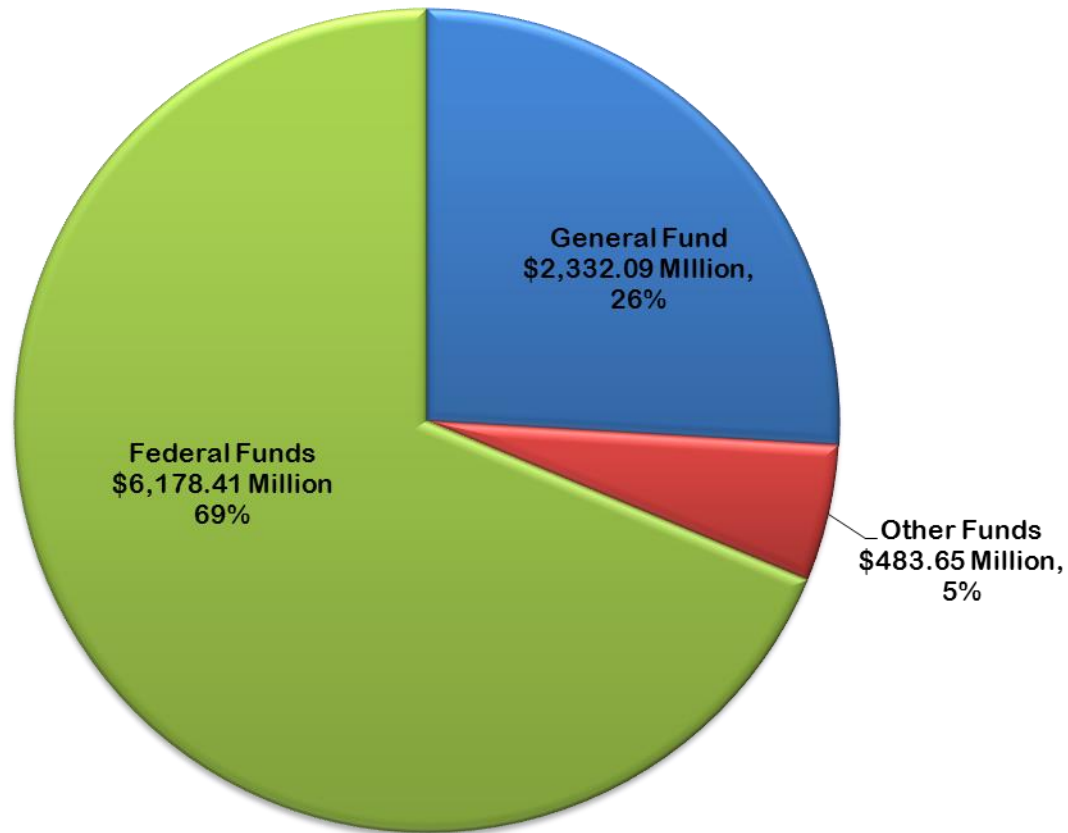
DHS GRB Program Budgets – 94.7% in Direct Payments, Services

Central Services, $56.85 Million, 0.63%

Direct Client Services, $1,639.88 Million, 18.23%

Shared Services, $107.62 Million, 1.20%

Direct Payments to Providers, $3,627.34 Million, 40.33%

State Assessments and Entrprise-wide Costs, $312.37 Million, 3.47%

Direct Payments to Clients, $3,250.09 Million, 36.14%
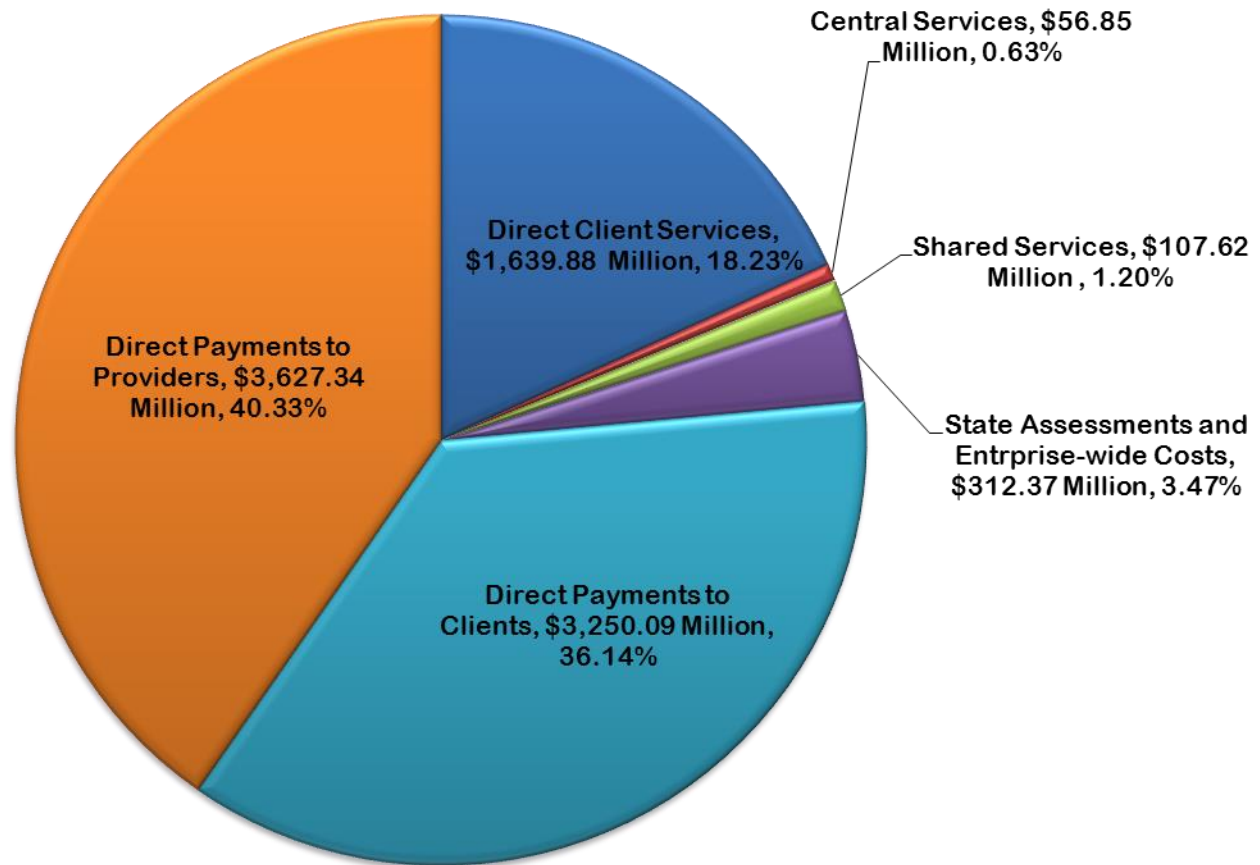
DHS Assessments, Rent and IT -- by type, 2013

Shared Services Funding, $121.28, 39%

Telecommunications$7.54, 2%

State Government Service Charge, $20.22, 7%

Risk Assessment, $17.68, 6%

State Data Center, $26.00, 8%

Facilities, $115.61, 37%

IT Direct Charge, $4.06, 1%
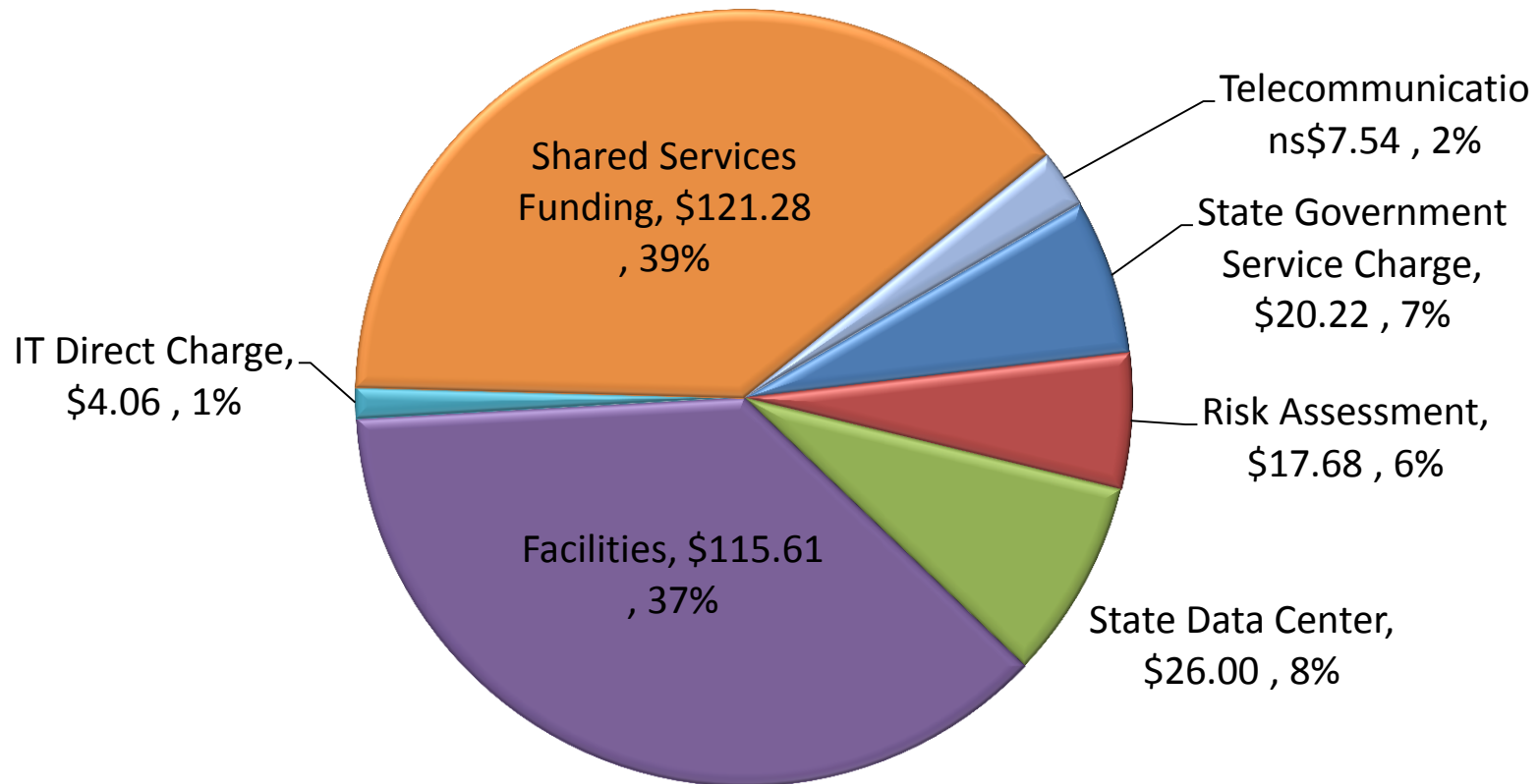
Comparison of Dec 2012 2011-13 DHS LAB with 2013-15 GRB

Department of Human Services

	General Fund	Other Funds	Federal Funds	Federal Funds Nonlimited	Total Funds	Authorized Positions	Authorized FTE
2011-13 LAB	2,180.44	514.10	3,378.87	2,514.35	8,587.75	7,405	7,311.44
2013-15 GBB	2,332.12	483.66	3,664.08	2,514.35	8,994.20	7,857	7,675.10
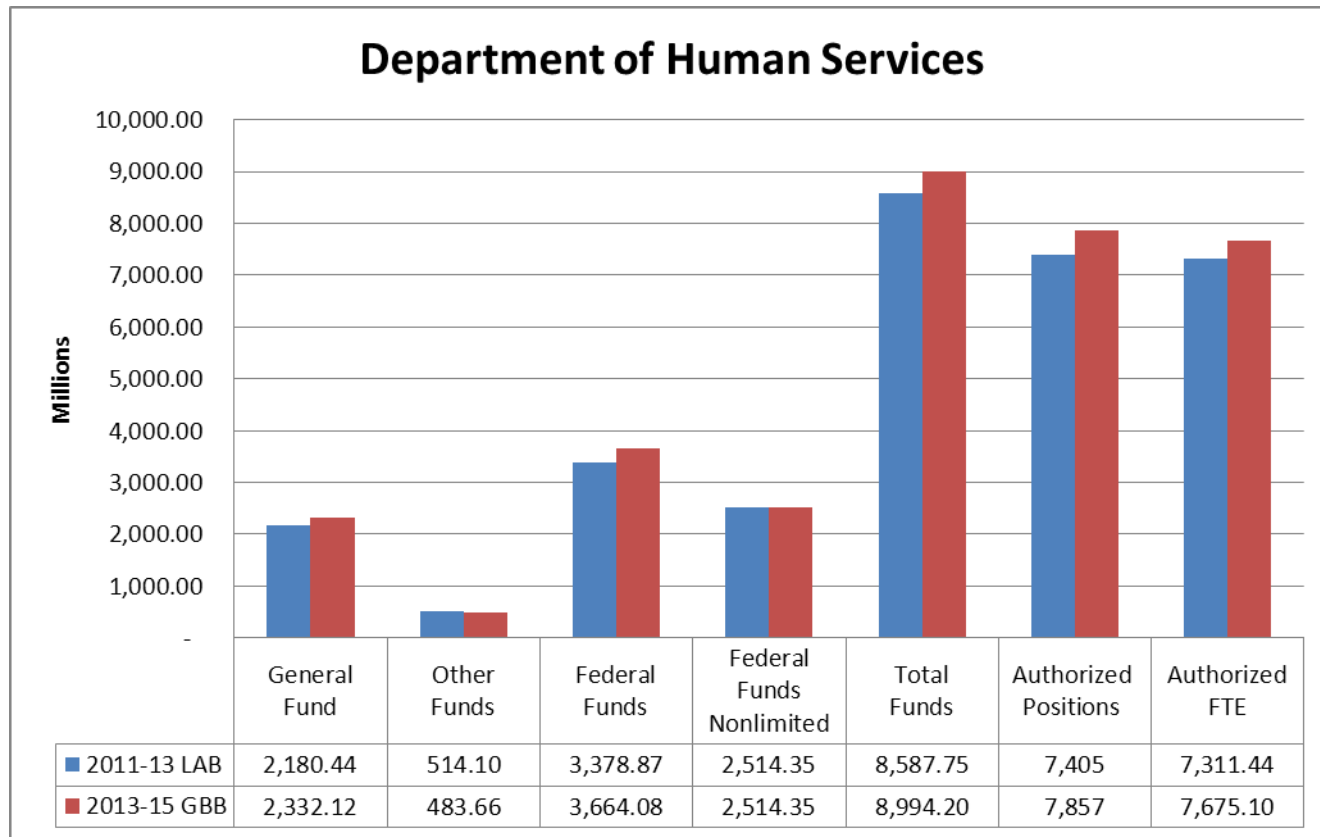
This represents a 4.52% increase in Total Funds

Wrap-Up

Coming Up Next Week:

March 11 – Office of Vocational Rehabilitation Services
March 13 – Self Sufficiency Programs
March 14 – Developmental Disability Programs

- **Who We Serve**

- **2011-13 Program, Policy and Budget Issues**

- **Performance Outcomes & Strategic Focus**

- **Opportunities/Challenges for 2013-15 Budget**

DHS

Department of Human Services

www.oregon.gov/dhs

Safety, Health and Independence for all Oregonians