# Presentation to the Joint Ways and Means Subcommittee on Human Services

# Aging and People with Disabilities

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#### **Presentation Outline**



### Oregon Revised Statute 410

### The Legislative Assembly created a vision:

Older citizens of this state are entitled to enjoy their later years in health, honor and dignity, and citizens with disabilities are entitled to live lives of maximum freedom and independence.



#### **Vision Statement**

Oregon's older adults, people with disabilities and their families experience personcentered services, supports and early interventions that are innovative and help maintain independence, promote safety, wellbeing, honor choice, respect cultural preferences and uphold dignity.





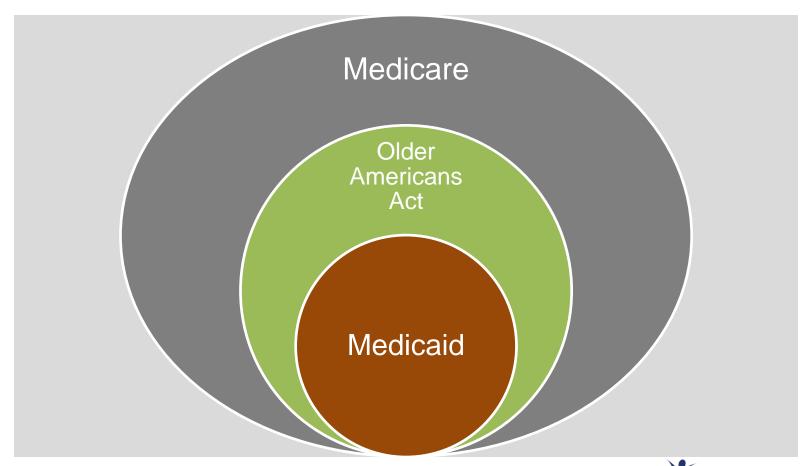


#### Goals

- Well Being: Older adults and people with disabilities feel safe and experience their best quality of life.
- Accessibility: Oregonians can readily and consistently access services and supports to meet their needs.
- Quality Outcomes: Oregonians engage in services and supports that are preventive, evidence-informed, and lead to quality outcomes.
- Service Equity: Oregonians experience programs, services and supports that are designed, improved and responsive to historical inequities, current disparities, and individual experiences.
- **Engagement:** Consumers are empowered by information, communication and advocacy through strong, collaborative partnerships with stakeholders and rich community dialogue.



# Laws Passed in 1965: The Vision for Older Americans

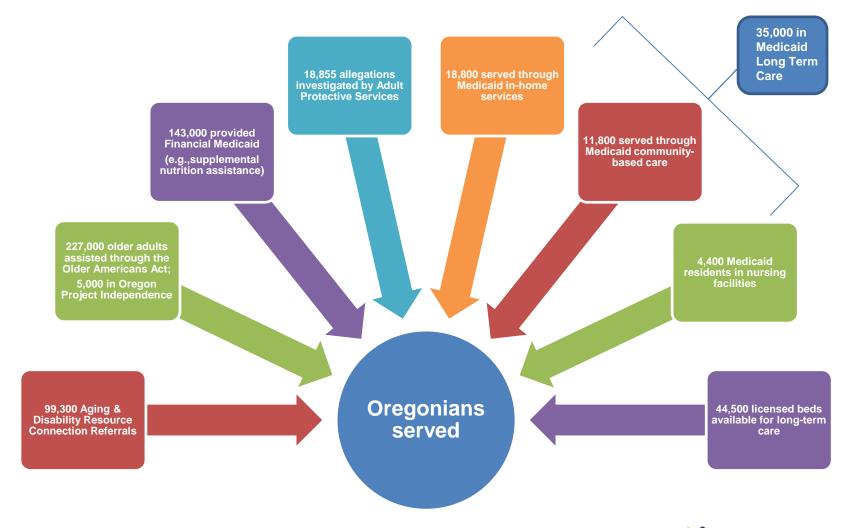


### **Services We Offer**

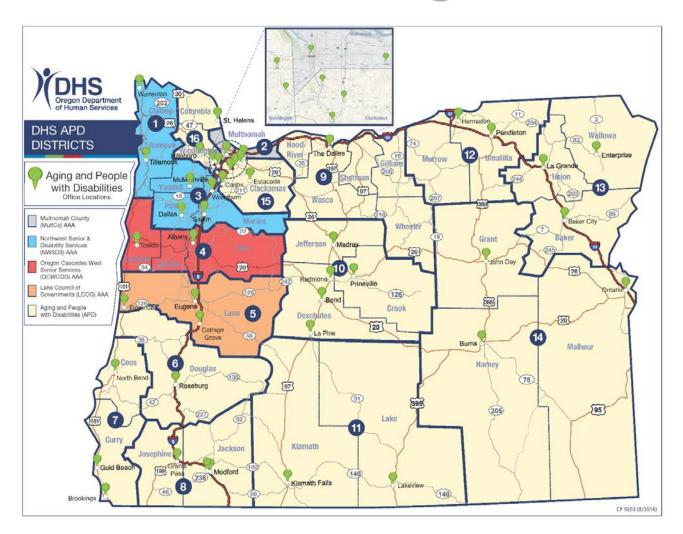
N-HOME SERVICES DISABILITY DETERMINATIONS MEMORY CARE N-HOME SERVICES OREGON PROJECT INDEPENDENCE MEDICAID IN-HOME SERVICES Older Americans Act ADULT PROTECTIVE SERVICES MEMORY CARE



### **Oregon's Long Term Care System**



# Where We Serve Oregonians





# **Aging Services Network Overview**

Aging & People with Disabilities (State DHS Offices)

Area Agencies on Aging (AAAs)

Type A - AAA (Non-Medicaid – OPI /OAA)

Type B - AAA (Medicaid, OPI, OAA, APS, etc.)



## **How Oregonians Navigate the System**



adrcoforegon.org

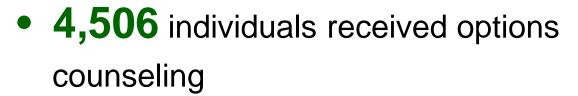
1-855-ORE-ADRC

1-855-673-2372



# **Assistance Provided to Oregonians**

- **66,020** calls received
- 99,300 referrals made



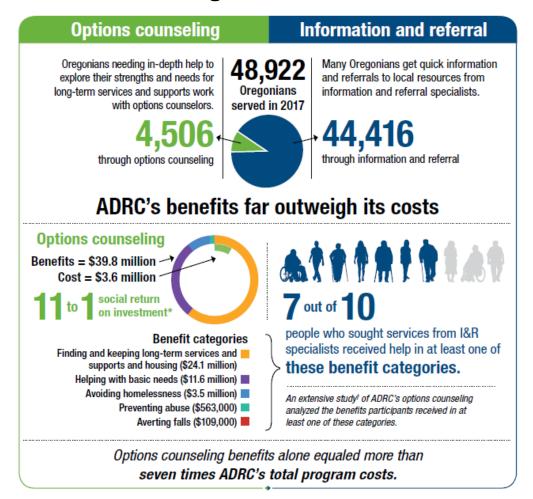


- 29% of information and assistance/referral consumers were in rural/frontier communities
- 73% of options counseling consumers reported greater independence as a result of ADRC services



### **Business Case for the ADRC**

#### **How Oregonians Are Served**





## **Eligibility Transformation**

DHS and the Oregon Health Authority are making it easier for Oregonians to apply for benefits through two projects: **Integrated Eligibility** and **Eligibility Transformation**.

#### Among the benefits included:

- Medicaid
- Supplemental Nutrition Assistance Program (SNAP)
- Temporary Assistance for Needy Families (TANF)
- Temporary Assistance for Domestic Violence (TADV)
- Employment Related Day Care (ERDC)
- Summer Meals
- Refugee Cash, Refugee Medical



# **Eligibility Transformation: Service Delivery**



#### **Store Fronts**









#### **\*** Virtual Eligibility Center



Online / Phone Applications



Renewals



Change Reports



#### **Adult Protective Services**

Specializes in investigating and preventing abuse of older adults and adults with disabilities.

#### The staff has expertise in:

- Financial Exploitation
- Domestic Violence
- Diminished Capacity
- Self-Neglect
- Guardianships

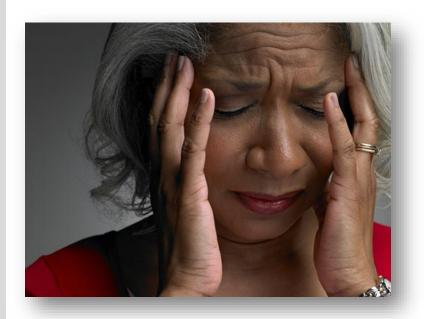
#### **Enhanced focus on:**

 Outreach to banks, real estate professionals, credit unions, and community organizations to increase awareness of how to prevent and identify signs of abuse.

#### **Oregon's Safeline:**

Since 2014, a reliable, easy resource to report abuse:

1-855-503-SAFE





# Centralized Abuse Management System

# A comprehensive web-based system for abuse reports and investigations:

- Standardizes APD and Type B AAA abuse screening, investigations and reports statewide.
- Replaces manual processes and outdated, disparate systems.
- Provides investigators with the ability to better track perpetrators to help prevent further abuse.





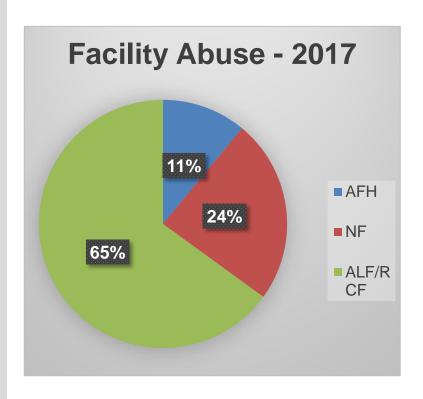


#### **Adult Protective Services**

#### In 2017 APS investigated:

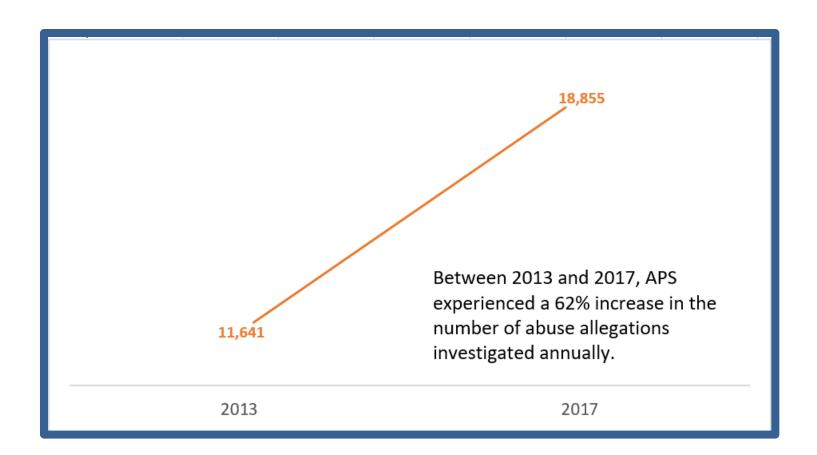
**18,855** distinct allegations, some of which involved multiple victims

- Of those allegations:
  - ➤ 13,138, or about 70%, involved allegations of abuse in the community
  - > 5,717, or about 30%, were allegations of abuse in licensed facilities



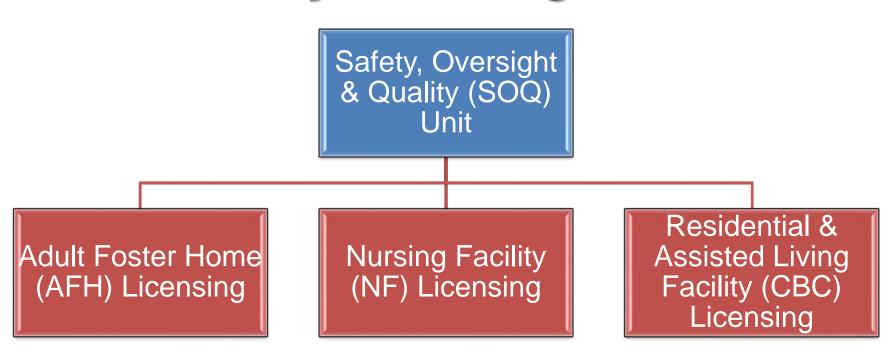


## **APS Workload Increasing**





## **APD - Facility Licensing**



Staff in our program have an unwavering commitment to the safety, independence, choice and dignity of vulnerable Oregonians in our licensed care settings.



# **Long Term Care Settings**





| Settings  | Number of facilities | Memory<br>Care<br>Endorsed |
|---|----------------------|----------------------------|
| Nursing<br>Facilities                           | 136                  | 11                         |
| Assisted Living and Residential Care Facilities | 538                  | 191                        |
| Adult Foster<br>Homes                           | 1,566                | N/A                        |



### **Licensing Oversight and Compliance Tools**

APD works with licensed facilities and uses progressive enforcement of compliance tools as needed. Those tools include:

- Licensing Complaint Unit (phone/email)
- Surveys
- Civil penalties
- Letters of Agreement
- Licensing Conditions
- Suspension/Revocation/Non-Renewal of a license



Active
Enforcement by the Department

Enhanced
Enforcement and
Oversight by the
Department



# **Licensing Backlogs**

| License Type                                | Backlog | Total Licenses | Percent Late |
|---|---------|----------------|--------------|
| Adult Foster Homes                          | 24      | 1,566          | 1.5%         |
| Nursing Facilities                          | 21      | 136            | 15.4%        |
|   |         |                |              |
| Assisted Living/Residential Care Facilities | 124     | 538            | 23.0%        |
| Combined                                    | 169     | 2,240          | 7.5%         |



### **House Bill 3359 – 2017 Session**



Governor Brown signs HB 3359 with individuals from the Alzheimer's Association, Oregon Health Care Association, AARP, LeadingAge, Agencies and Legislators.

### **House Bill 3359 – 2017 Session**

#### Large bipartisan, multi-stakeholder bill that:

- Established first-in-the-nation Quality Measurement Council;
- Introduced a fine (\$1,000) for failure to self-report abuse of residents;
- Increased fines for abuse and licensing fees;
- Added training requirements for staff around dementia and Alzheimer's disease;
- Set new standards for safer medication administration;
- Provided for standard staffing measurement via an online acuity tool;
- Required an enhanced regulatory oversight program.

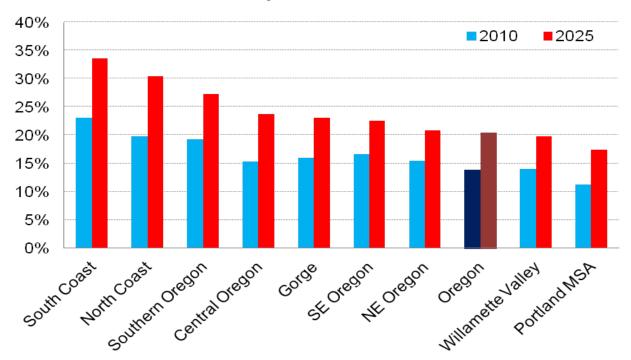


#### **Presentation Outline**



### Oregon's Population Is Growing Older

#### Percent of Population 65 Years and Older



Source: Oregon Office of Economic Analysis



# Crisis in retirement savings

US News & World Report What Happens if We All Run Out of Money for Retirement?

The New Hork Times

Why the World Needs to Rethink Retirement

For your retirement planning, count on living until age 95

#### **CNN Money**

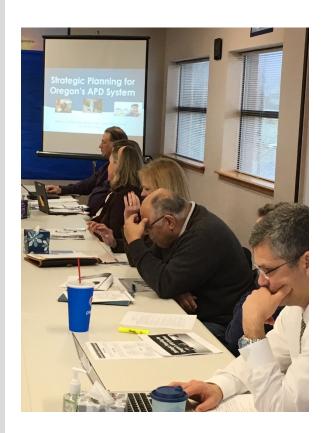
1 in 4 people have almost nothing saved for retirement

The Motley Fool Half of American baby boomers face a frightening retirement reality



# Strategic Plan: The Case for Change

- Oregon has been a national leader in home- and community-based services and supports.
- APD is updating its Strategic Plan in collaboration with stakeholders to continue to innovate.
- We must adapt to new realities increasing percentage of population is 65+ with low retirement savings and worse health.
- We need to do better in serving all consumers including younger people with disabilities, communities of color and historically underserved communities.





## Strategic Plan: Program Goals

#### **WELL BEING**

Older adults and people with disabilities feel safe and experience their best quality of life.

#### **ACCESSIBILITY**

Oregonians can readily and consistently access services and supports to meet their needs.

#### **SERVICE EQUITY**

Oregonians experience programs, services and supports that are designed, improved and responsive to historical inequities, current disparities, and individual experiences.

#### **GOALS**

#### **QUALITY OUTCOMES**

Oregonians engage in services and supports that are preventive, evidence-informed, and lead to quality outcomes.

#### **ENGAGEMENT**

Consumers are empowered by information, communication and advocacy through strong, collaborative partnerships with stakeholders and rich community dialogue.



# Strategic Plan: Short and Long Term

### **Short Term: Two Year Action Plans**

 Example: Pilot providing services and supports to consumers who want to be active outside their home (volunteering, employment, etc.).

# Long Term: Multi-Year Action Plans

• Example: If successful, statewide expansion of service planning for consumer activities outside the home.



# **Older Americans Act (OAA)**

- Delivered through Area Agencies on Aging (AAAs)
- Keep older adults safe and independent
- Federal funds
- Not means-tested
- 2.6 million meals (home-delivered and congregate)
- 477,000 hours homemaker/personal care services
- 25,000 sessions of nutrition education
- 23,000 trips with assisted transportation





# Oregon Project Independence (OPI)

- State funded program
- Reduces risk of more costly, out-of-home placements
- Only 12% of those served ended up on Medicaid services
- Average cost-per-case
  - **>** 60+: \$244
  - People with disabilities:\$393





## Medicaid & Financial Eligibility

- Supplemental Nutritional Assistance Program (SNAP)
- Medicaid as primary health care
- Medicare Savings Programs
- Medicare Part D Assistance







## **Medicaid Long Term Care**

- Long term services and supports for individuals who meet financial eligibility & nursing home level of care
- If eligible, Medicaid pays for activities of daily living and other supports





### A Social Model of Services

Holistic assessment

Resources to keep people independent, healthy, and safe

Strengths based service planning

Balance paid services with natural supports

Value a person's choice, dignity, and self-direction



# **Service Priority Levels (SPLs)**

### 411-015-0010 Priority of Paid Services

| ===================================  |   |   |
|--|---|---|
| Requires Full Assistance in Mobility, Eating, Elimination, and Cognition.                              | Requires Substantial Assistance with Mobility and Assistance with Elimination.        | Requires Assistance with Elimination. (13 is current cutoff for Medicaid)   |
| Requires Full Assistance in Mobility, Eating, and Cognition.   | Requires Minimal Assistance with Mobility and Assistance with Eating and Elimination. | Requires Assistance with Eating.  |
| Requires Full Assistance in Mobility, or Cognition, or Eating.   | Requires Assistance with Eating and Elimination.                                      | Requires Minimal Assistance with Mobility.  |
| Requires Full Assistance in Elimination.   | Requires Substantial Assistance with Mobility.  | Requires Full Assistance in Bathing or Dressing.  |
| Requires Substantial Assistance with Mobility, Assistance with Elimination and Assistance with Eating. | Requires Minimal Assistance with Mobility and Assistance with Elimination.            | Requires Assistance in Bathing or Dressing.   |
| Requires Substantial Assistance with Mobility and Assistance with                                      | Requires Minimal Assistance with Mobility and Assistance with                         | Independent in the above levels but requires structured living for supervision for complex medical problems or a complex medication |

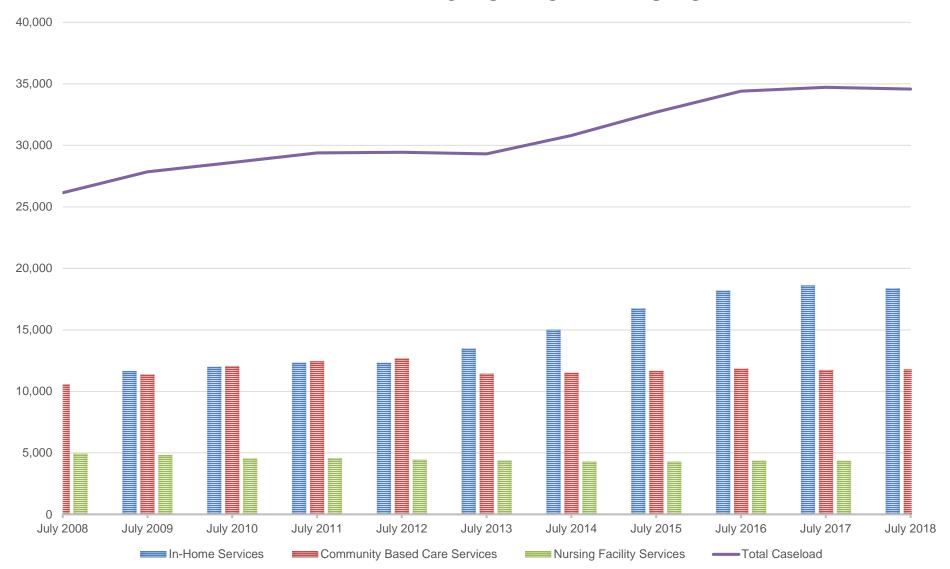
Eating.



regimen.

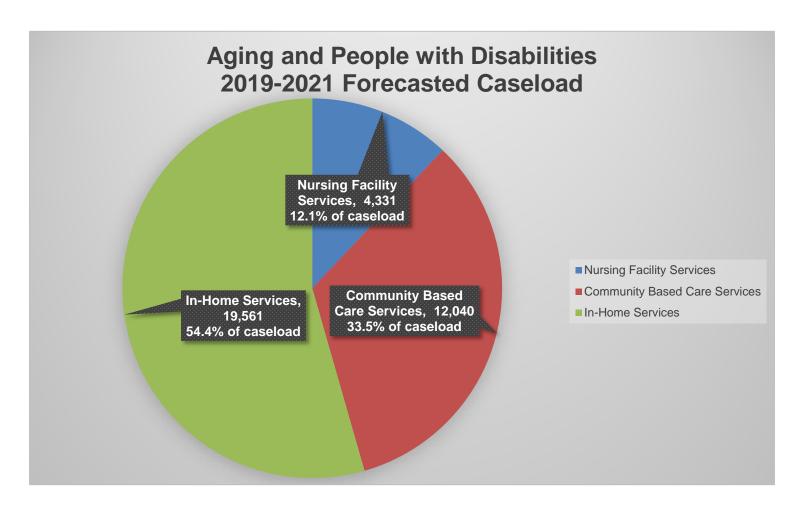
Eating.

## APD TEN YEAR CASELOAD HISTORY





## Caseload Forecast 2019-2021





# Consumer Profile: Nursing Facility Alternative

### Needs:

- Fractured shoulder and plans for knee surgery.
- Assistance walking in and out of her home, using the bathroom, and bathing.
- Preparing some meals, shopping, house cleaning, and transportation.



#### Plan:

- Two paid providers visit for approximately 20 hours per week total to meet the above needs.
- Ongoing APD case management for monitoring and plan modification.
- Ongoing familial connections.

Cost: \$1,039 per month vs. \$9,388 in a nursing facility



# Consumer Profile: Hospital Alternative

### **Adult Foster Home:**

- 62-year-old female
- Autoimmune neuromuscular disease
- Ventilator dependent

Cost: \$8,586 per month





# Consumer Profile: Oregon State Hospital Alternative

- 51-year-old male;
- Two traumatic brain injuries;
- Criminal history starting in the early 1990s;
- Numerous failed placements;
- OSH admission lasting six years;
- Attacked a neighbor with a knife;
- Readmitted to OSH for 10 months;
- Discharged to one-person
   Specialized Living setting with
   same provider, but more intensive
   supports.
- Safe placement for 12 months and counting.

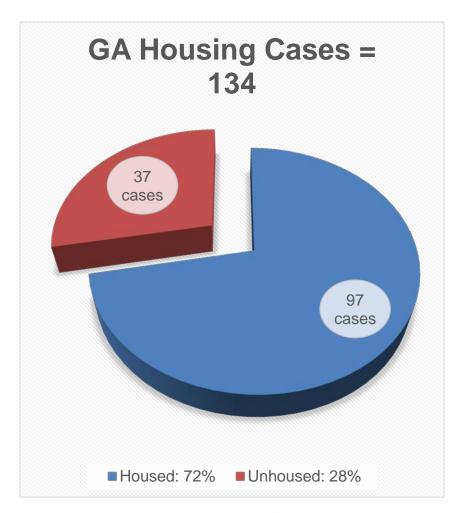


Cost: \$42,070 per month



## **General Assistance Program**

- 4,552 referrals to date
- 3,558 closures
- 159 SSI/SSDI determinations
- 134 current housing cases





# **Disability Determination Services**

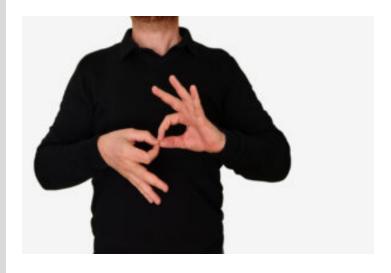
- 100% federally funded
- Medical determination for Social Security disability benefits
- 203 staff
- 53,000 claims annually
- Cash and medical coverage provided to recipients
- \$175.6 Million benefits monthly in Oregon





# Deaf and Hard of Hearing Services

- Coordination of interpreters for members of the deaf, deaf-blind, and hard-of-hearing communities to interact with government;
- Serve as single point of contact for government agencies to request interpreters for their clients;
- Publicize needs and concerns of deaf and hard of hearing communities;
- Provide information to individuals about where they may obtain assistance in rehabilitation and employment and about laws prohibiting discrimination in employment;
- Promote advocacy with state agencies to increase accessibility of government services.



Partnership with Department of Administrative Services to promote ASL videos:

https://www.youtube.com/channel/UCQhOtzmEDcf4XZk-vYf9hYQ/featured



## **Oregon Home Care Commission**



# Supports homecare and personal support workers and consumer/employers by:

- Defining qualifications of homecare workers (HCW) and personal support workers (PSW).
- Providing a statewide registry of HCWs and PSWs (where consumers and workers can be matched).
- Providing hundreds of trainings statewide, including culturally and linguistically specific opportunities.
- Serving as "employer of record" for collective bargaining for HCW and PSWs who receive service payments that are from public funds.



# Senate Bill 1534 (2018): Improving In-Home Quality

- Core curriculum for existing and new homecare workers;
- Continuing education requirements for all homecare workers;
- Rule Advisory
   Committees begin in February 2019;
- Rolling implementation scheduled to begin in January 2020.





## Governor's budget proposals

## **Community Based Care rates:**

- 5% effective 7/1/19
- 5% effective 7/1/20
- \$17.2M GF

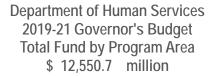
## **Adult Foster Home rates:**

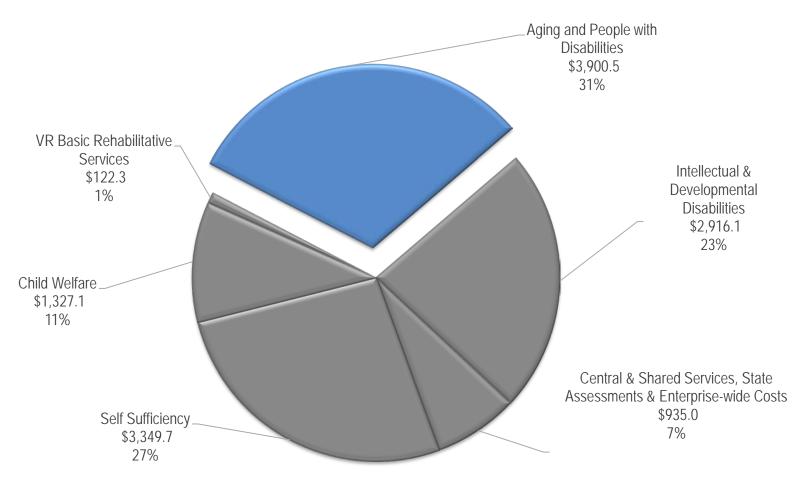
- 10% effective 1/1/20
- 4% effective 7/1/20
- \$5M GF



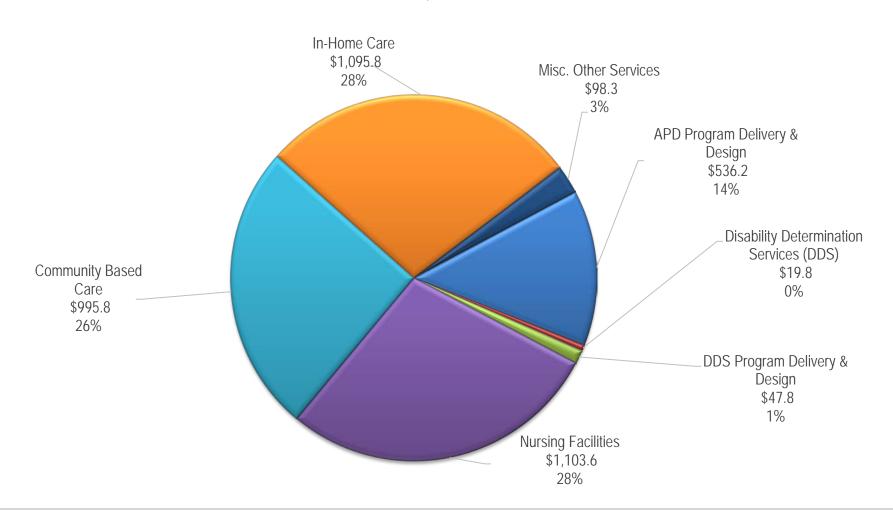
# Governor's budget proposals (continued)

- Funding to support the operations and maintenance of the Centralized Abuse Management system (CAM) across programs.
- Additional surveyors to address the timeliness and quality of surveys/inspections of communitybased care providers.

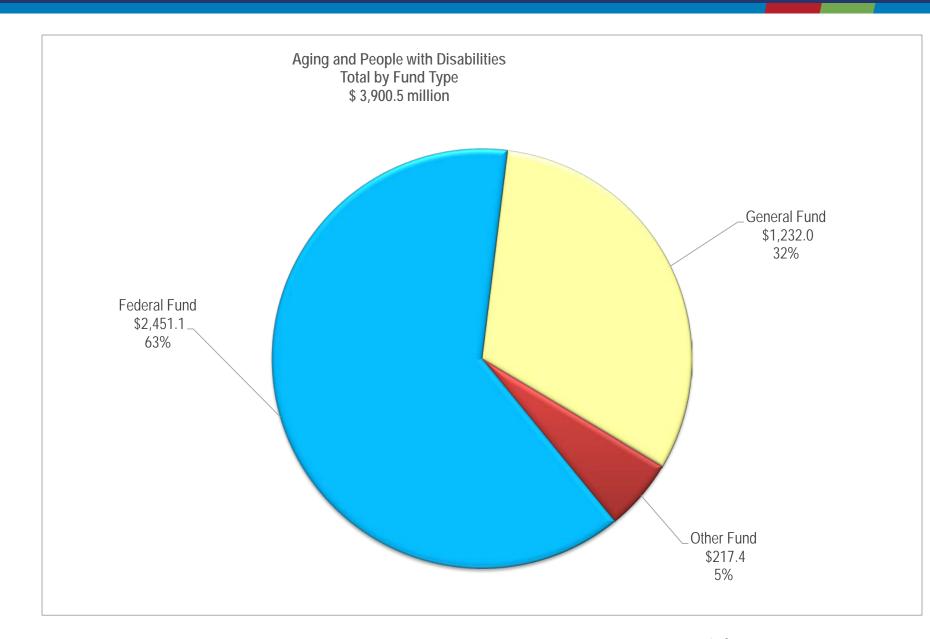




#### Aging and People with Disabilities Total Fund by Program Area \$ 3,900.5 million



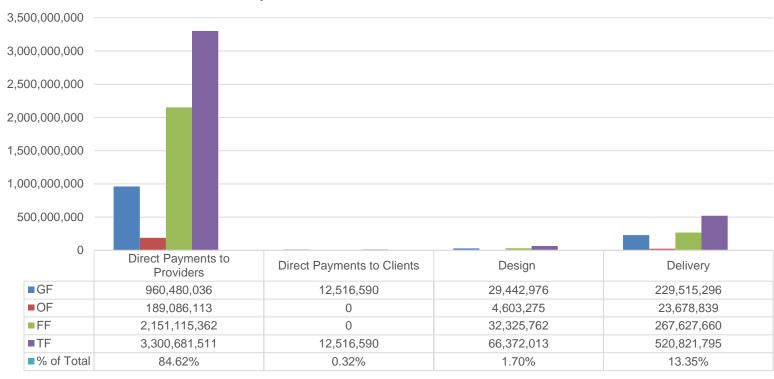






# DHS APD Direct Payments and Services 2019-21 Governor's Budget

Department of Human Services - APD

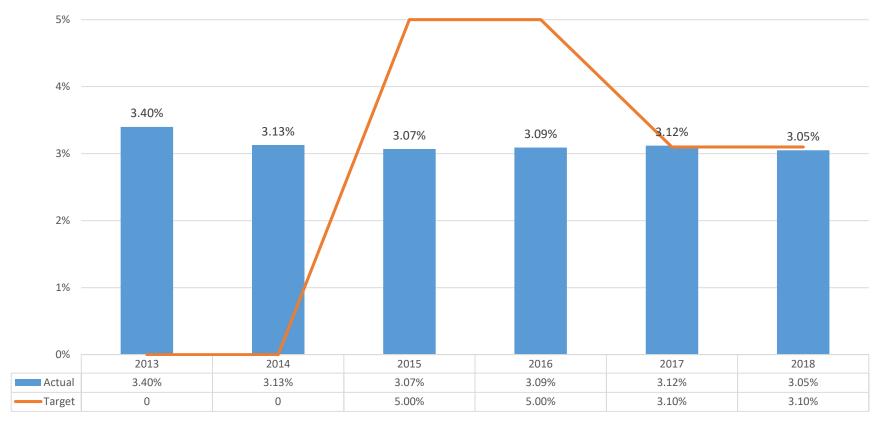


Note: 98.3% of budget is direct services (Delivery) or direct payments to clients or providers



#### KPM #10 LTC NEED PREVENTION

% of seniors (65+) needing publicly-funded long term care services Time Period: Jan- Dec.



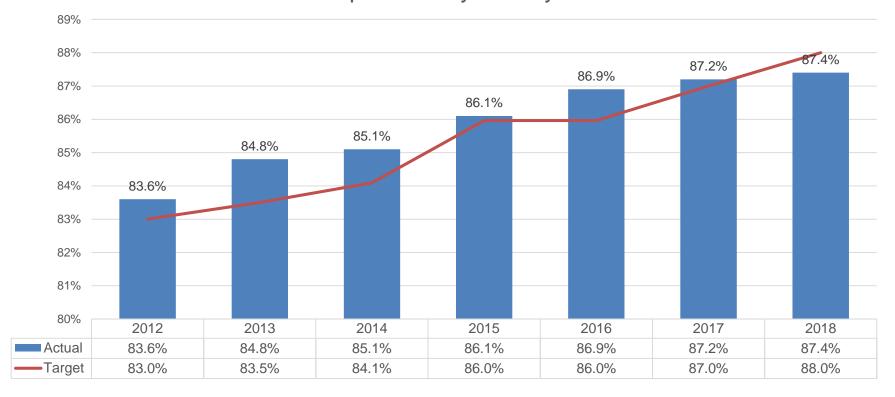
#### Note:

- Targets were not established until 2015.
- They were subsequently reduced from 5% to 3.1% by the 2017 Legislature.



## KPM #11 LTC RECIPIENTS LIVING OUTSIDE OF NURSING FACILITIES

The percentage of Oregonians accessing publicly-funded longterm care services who are living outside of nursing facilities. Time period: July 1 - July 31

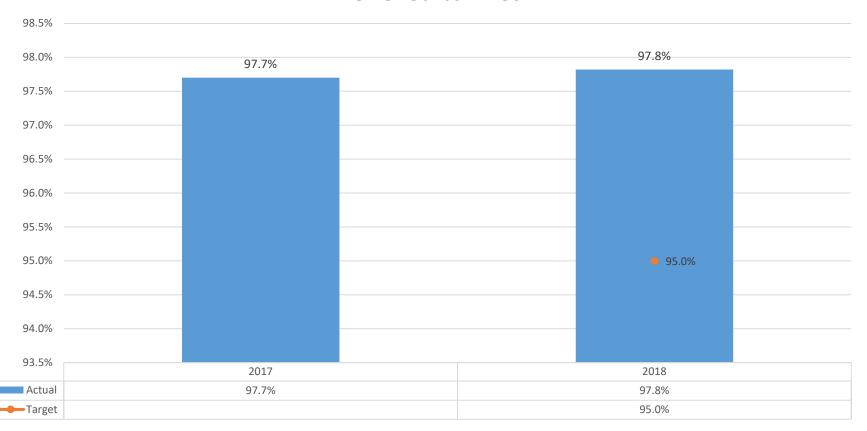




#### KPM #16 ABUSE INVESTIGATION TIMELINESS

# The percentage of abuse reports assigned for field contact that meet policy timelines

Time Period: Jan-Dec





# Thank you



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