SENATE BILL 2012 SENATE APPROPRIATIONS SENATOR RAY HOLMBERG, CHAIRMAN

Long Term Care
Nancy Nikolas Maier, Aging Services Director
Maggie Anderson, Medical Services Director

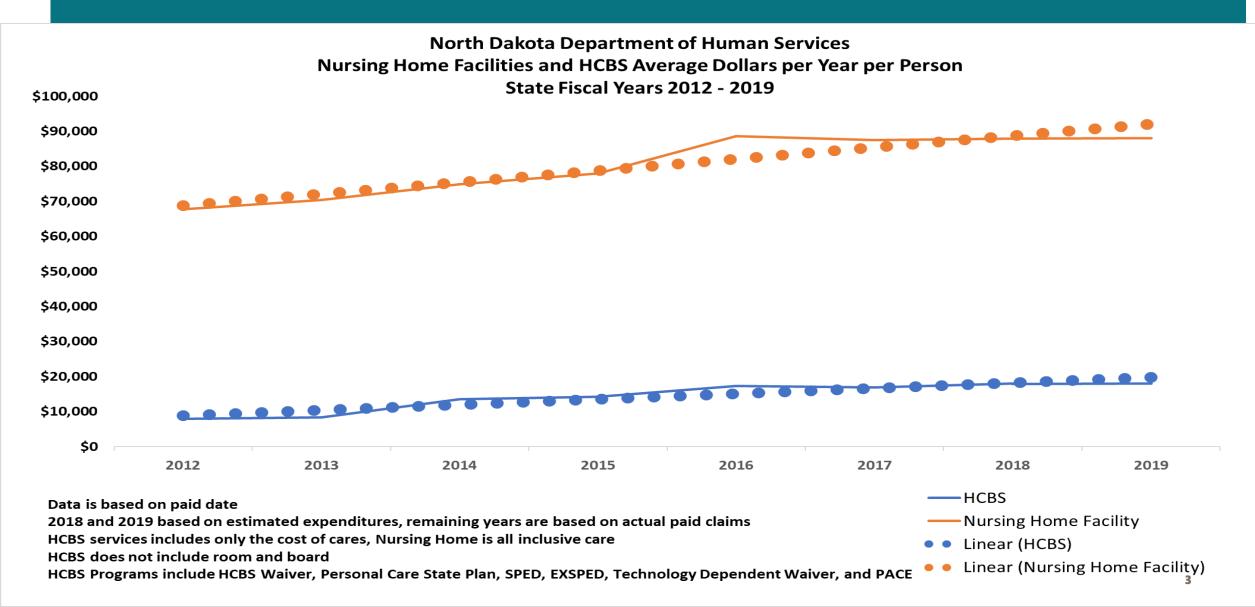


LONG TERM CARE

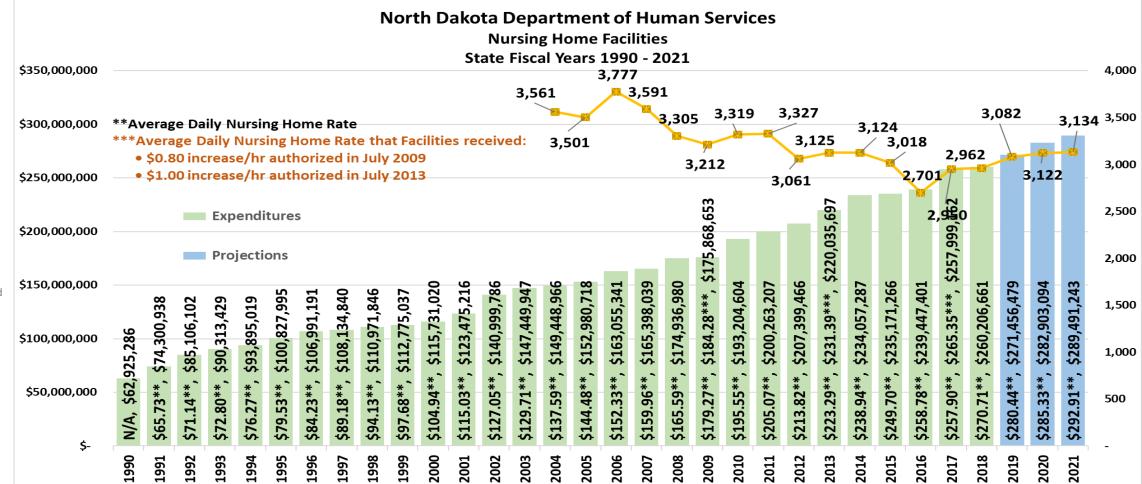
- Nursing Homes
- Basic Care
- Assisted Living Licensing
- Service Payments for the Elderly and Disabled (SPED)
- Expanded SPED (Ex-SPED)
- Program of All-Inclusive
 Care for the Elderly

- Autism Spectrum Disorder
 Voucher
- Medicaid 1915-c Waivers
 - Aged and Disabled
 - Tech Dependent
 - Autism Spectrum Disorder
 - Medically Fragile
 - Children's Hospice

Nursing Home Facilities and HCBS Average Dollars Per Year Per Person State Fiscal Years 2012 - 2019



Nursing Home Facilities State Fiscal Years 1990 - 2019



Data is based on paid date.

*1990-2017 represents actual expenditures.

2019, 2020, and 2021 represents estimated expenditures in the Executive Budget.

The average daily nursing home rate is effective January 1 of each year unless otherwise indicated.

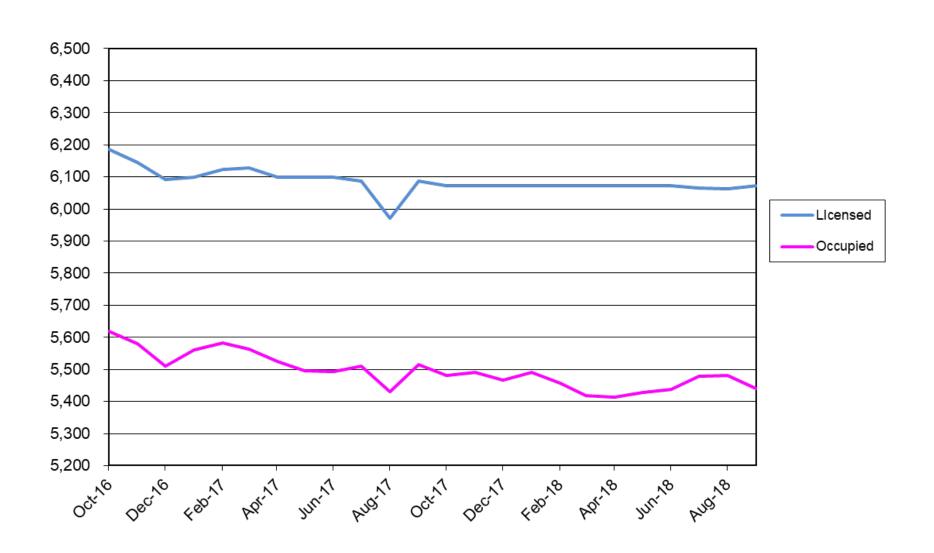
Data is based on paid date

*1980 - 2017 represents actual expenditures

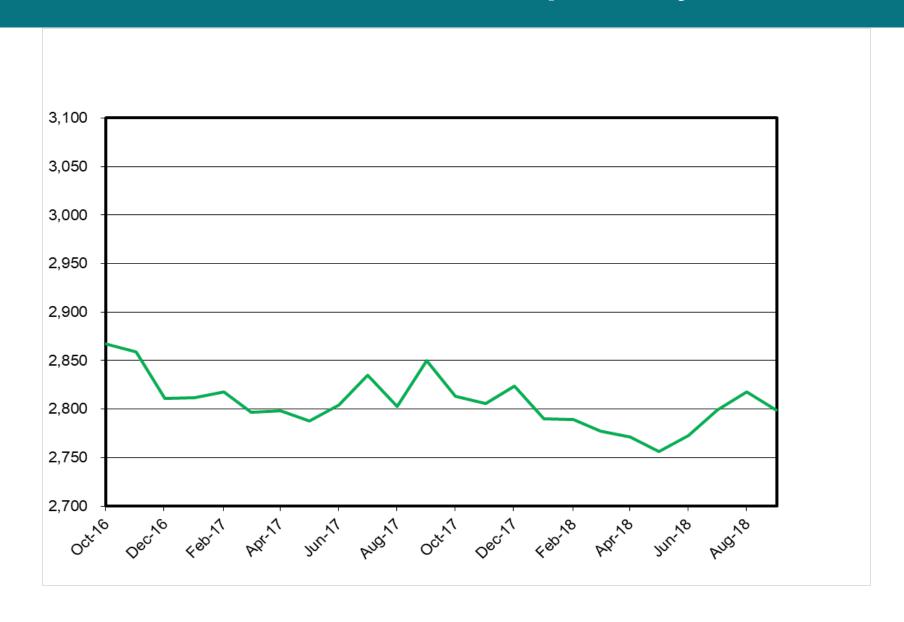
2018 and 2019 represents estimated expenditures in the Executive Budget

The average daily nursing home rate is effective January 1 of each year unless otherwise indicated

Nursing Facility Occupancy

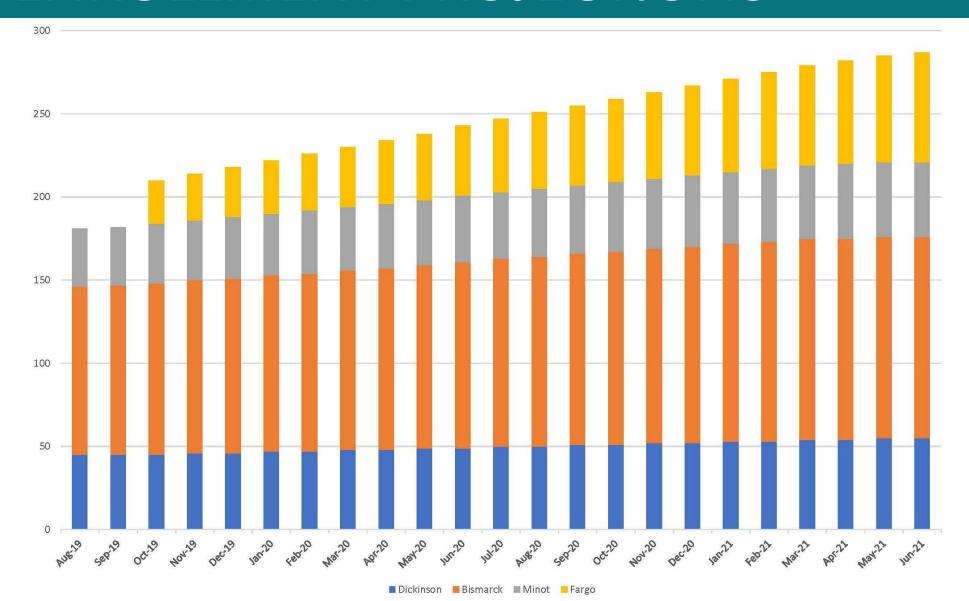


Medicaid Occupancy

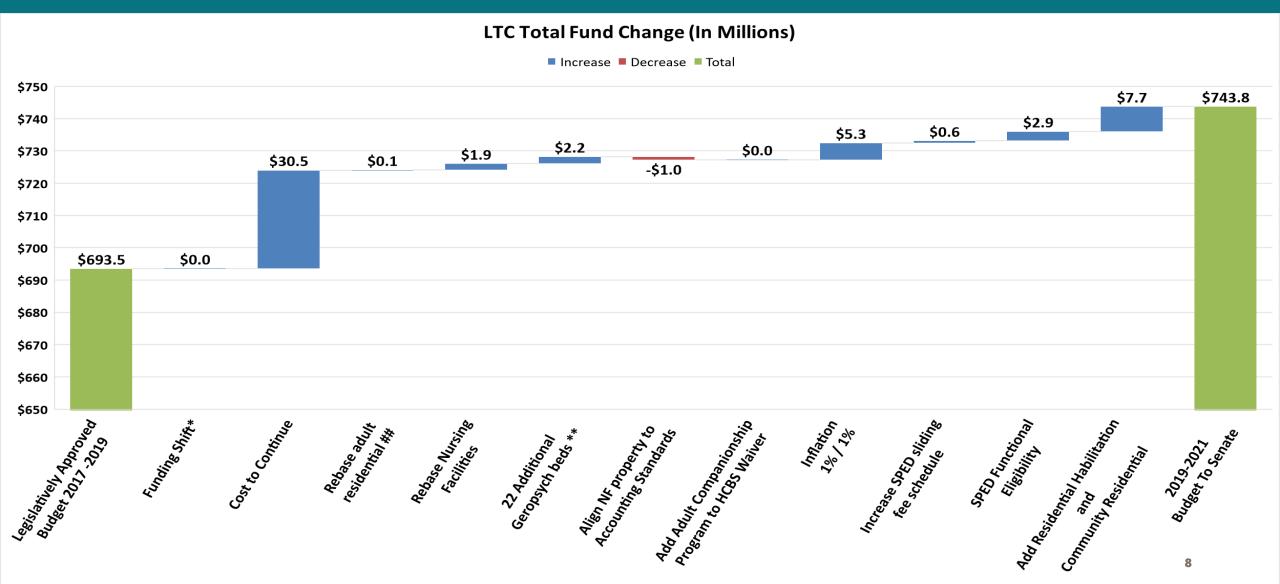


PACE ENROLLMENT PROJECTIONS

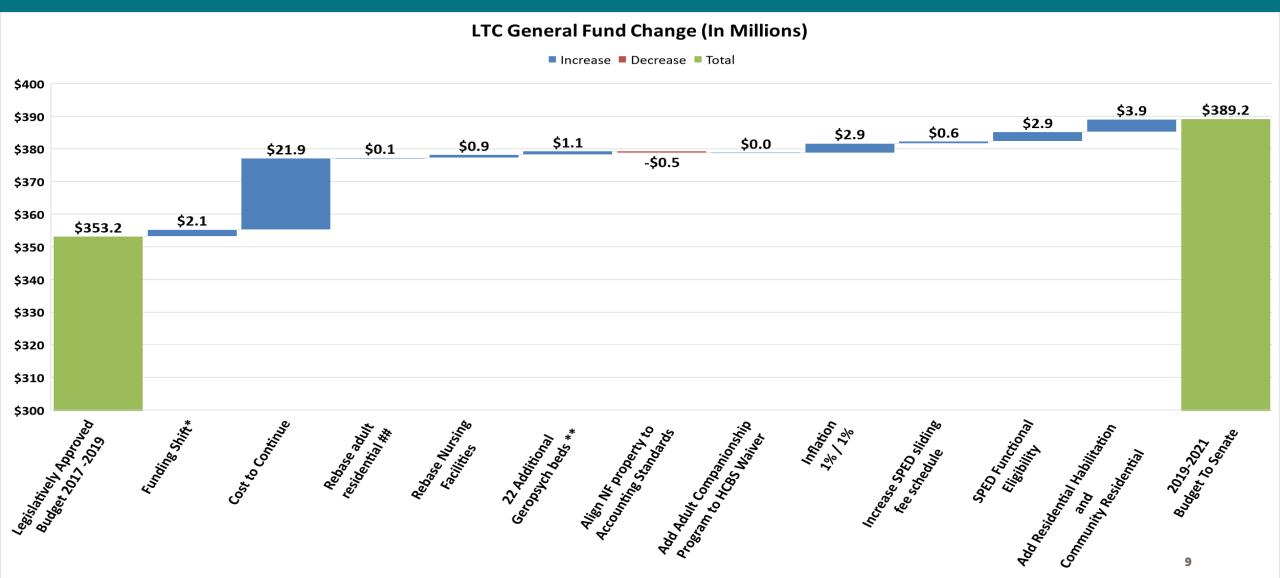
2019-2021 Biennium



LTC TOTAL FUND CHANGE (IN MILLIONS)



LTC GENERAL FUND CHANGE (IN MILLIONS)

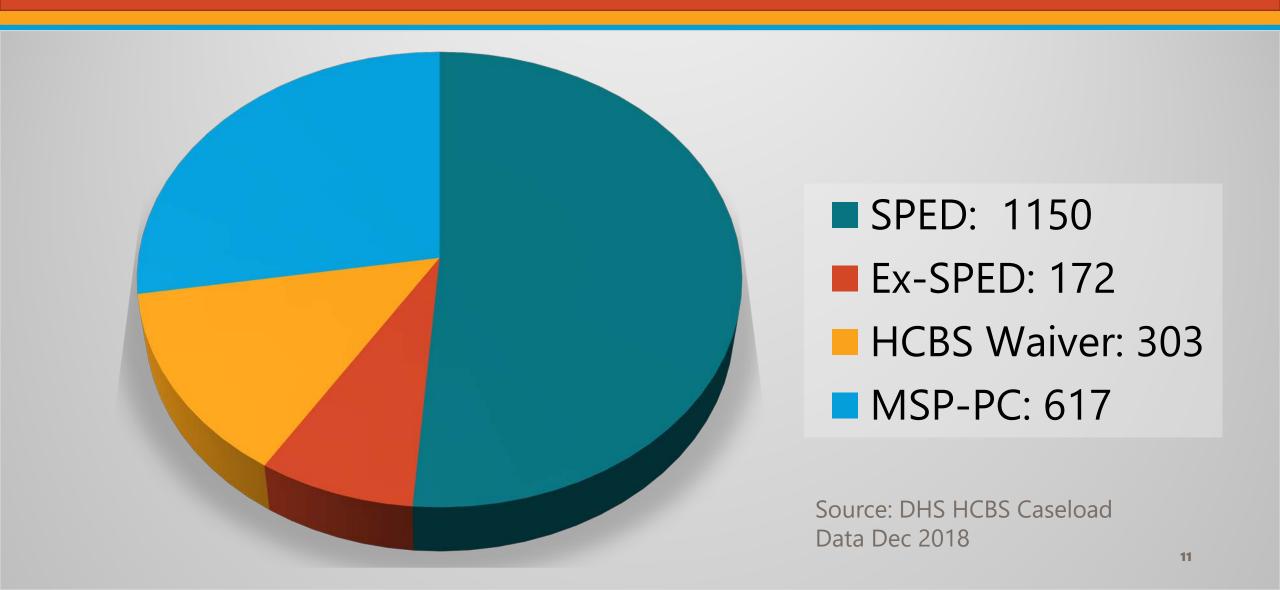


HOME & COMMUNITY BASED SERVICES

- Older Adults & Individuals with Physical Disabilities
- Service Payments for the Elderly and Disabled (SPED)
- Expanded SPED (Ex-SPED)

- Medicaid 1915-(c) Waivers
 - Aged and Disabled
 - Tech Dependent
- Medicaid State Plan
 Personal Care (MSP-PC)

CURRENT ACTIVE CLIENT CASES AS OF DECEMBER 2018



BENEFITS OF HCBS

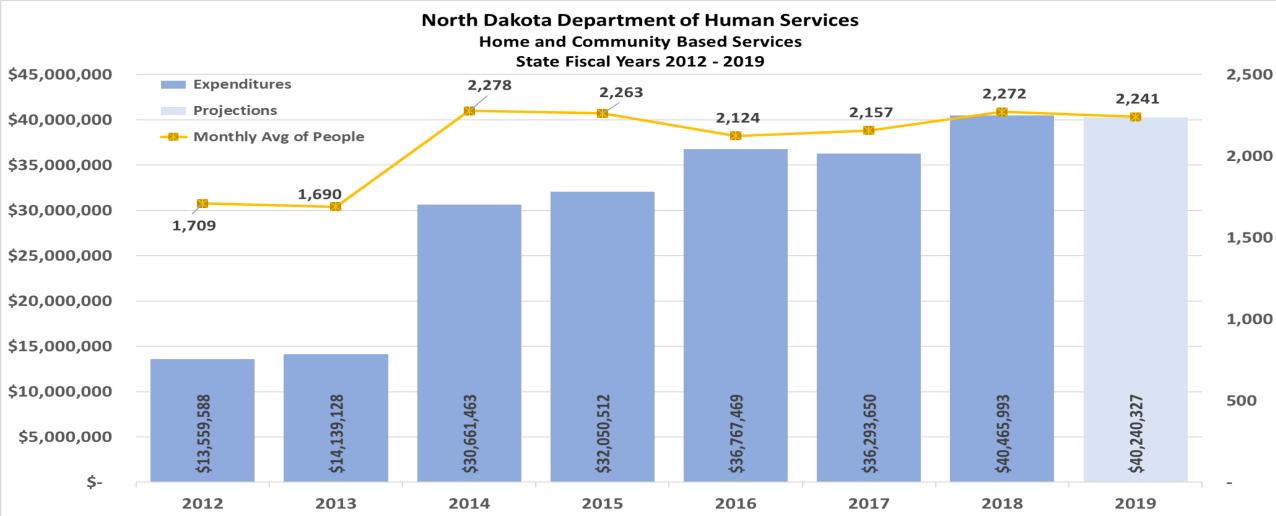
- Assist in Meeting Olmstead Requirement of the Most Integrated Setting
- Preferred Choice for Care
- Cost Effective
- Avoid or Delay Institutional Placement



OLMSTEAD DECISION

- The Americans with Disabilities Act (ADA) requires public agencies to eliminate unnecessary segregation of persons with disabilities and provide services in the most integrated setting appropriate to the needs of the individual.
- In 1999 the State Supreme Court Olmstead decision affirmed the ADA requirements.
- Increasing access to HCBS will assist the State in meeting this requirement.

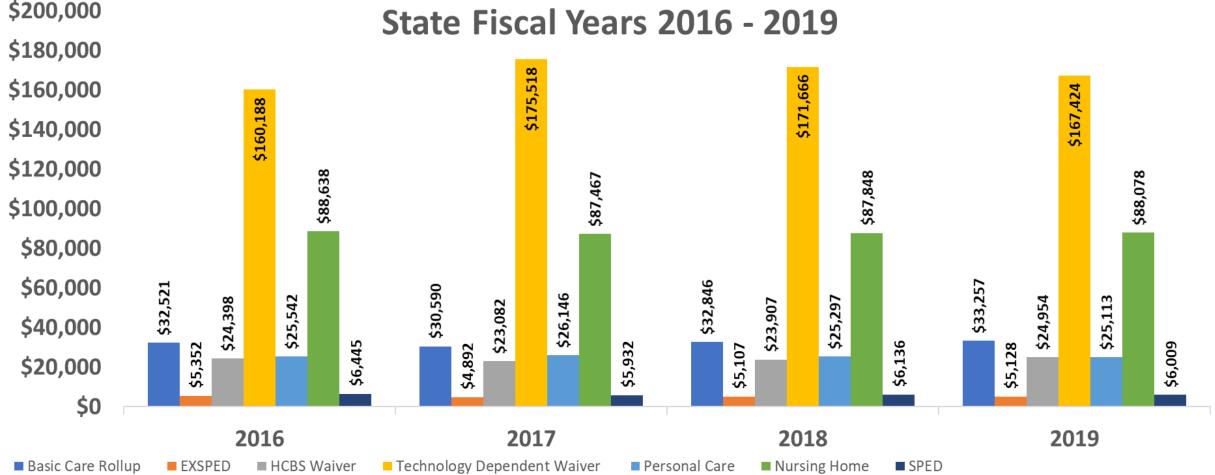
Home and Community-Based Services State Fiscal Years 2012 - 2019



Data is based on paid date

^{*2012 - 2018} represents actual expenditures based on paid date 2019 represents estimated expenditures

North Dakota Department of Human Services Aging Average Recipient Cost Per Year State Fiscal Years 2016 - 2019

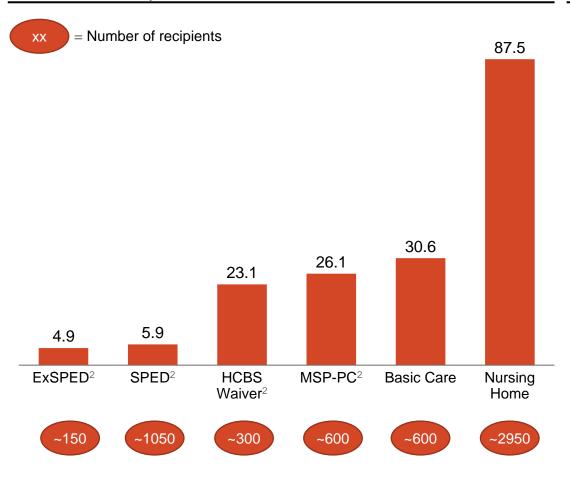


Data is based on paid date
2019 based on estimated expenditures, remaining years are based on actual paid claims
HCBS does not include room and board

COMPARISON OF PROGRAM COSTS FOR OLDER ADULTS AND PERSONS WITH PHYSICAL DISABILITIES

Cost Per Recipient Per Year

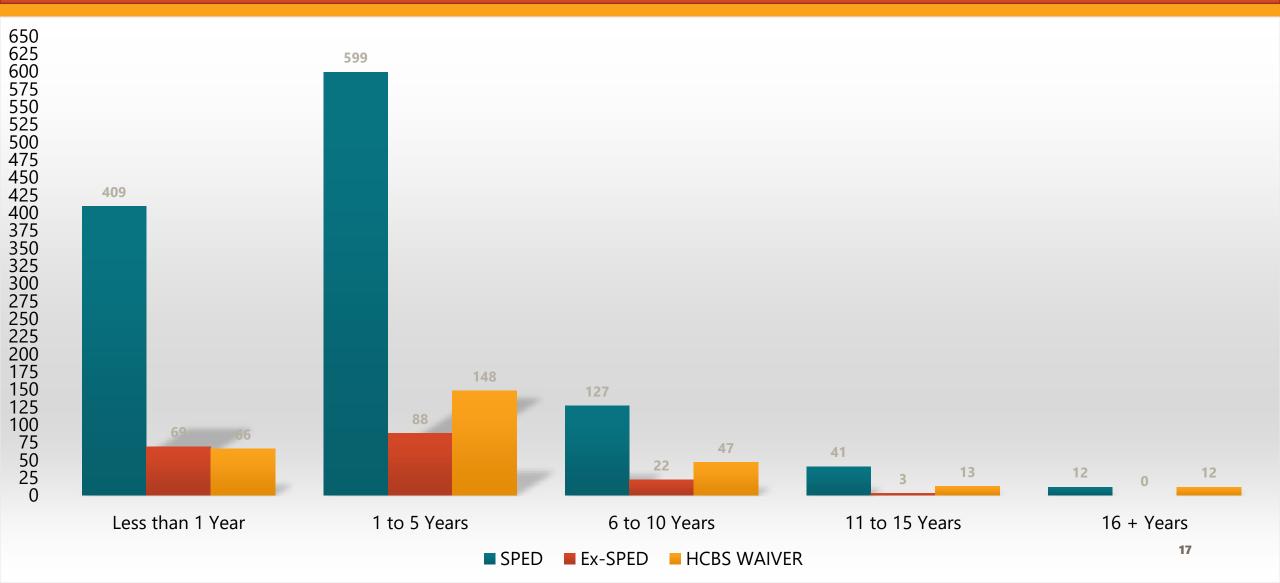
Cost paid by state by service in \$ in State Fiscal Year 2017¹



Program Descriptions / Detail

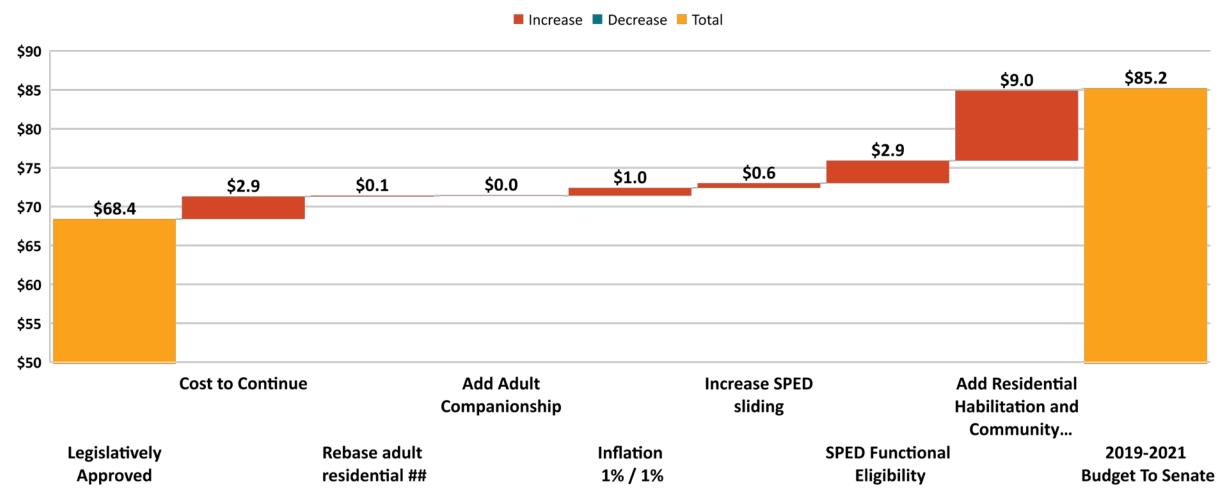
- Service Payments for the Elderly and Disabled (SPED): Provides services for people who are older or physically disabled, have limited assets, and who have difficulty completing tasks that enable them to live independently at home.
- Expanded SPED (Ex-SPED): Pays for in-home and community-based services for people who would otherwise receive care in a licensed basic care facility.
- Home and community-based services (HCBS) waiver: This waiver from the federal government allows the state to use Medicaid funds to provide services enabling eligible individuals who would otherwise require nursing home services to remain in their homes or communities.
- Medicaid State Plan personal care (MSP-PC): Personal care services available under the Medicaid state plan and enable persons with disabilities or chronic conditions accomplish tasks they would normally do for themselves if they did not have a disability.
- Basic Care: Room and board and personal care services for persons eligible for Medicaid.

ACTIVE SPED, EX-SPED, & HCBS WAIVER CLIENT SERVICE LONGEVITY



HCBS ITEMS INCLUDED IN EXECUTIVE BUDGET REQUEST

Aging Services HCBS Total Fund Change (In Millions)



SPED SLIDING FEE SCHEDULE

Current Fee Schedule

- Income and Asset Based Sliding Fee Scale
 - Two scales based on assets above or below \$25,000
 - Schedule 1 \$0-24,999
 - If a consumer lives alone and has more than \$1038 in countable income, they will have a client cost share
 - Schedule 2 \$25,000-\$50,000
 - If a consumer lives alone and has more than \$855 in countable income, they will have a client cost share

Proposed Fee Schedule

- Income and Asset Based Sliding Fee Scale Rebased and Annual Cost of Living Adjustment (COLA)
 - Two scales based on assets above or below \$25,000
 - Schedule 1 \$0-24,999
 - If a consumer lives alone and has more than \$1132 in countable income, they will have a client cost share
 - Schedule 2 \$25,000-\$50,000
 - If a consumer lives alone and has more than \$949 in countable income, they will have a client cost share

SPED CURRENT ELIGIBILITY

Functional Eligibility

- Impaired in 4 Activities of Daily
 Living (ADL) or at least 5 Incidental
 Activity of Daily Living (IADL) totaling
 8 or more points or if living alone
 totaling at least 6 points or
- If under age 18, meet nursing facility level of care screening criteria
- Impairments must have lasted or are expected to last 3 months and
- Impairment is not the result of an intellectual disability or a closely related condition or mental illness

Financial Eligibility

- Income and Asset Based Sliding Fee Scale
- Resources of \$50,000 or less
 - Resources are cash or similar assets that can be readily converted to cash and include residences owned by the applicant other than the applicant's primary residence

SPED PROPOSED ELIGIBILITY

Functional Eligibility

- Impaired in at least 2 ADLs or in at least four (4) IADLs totaling six (6) or more points (if living alone - totaling four (4) points)
- If under age 18, meet nursing facility level of care screening criteria
- Impairments must have lasted or are expected to last 3 months and
- Impairment is not the result of an intellectual disability or a closely related condition or mental illness

Financial Eligibility

- Income and Asset Based Sliding Fee Scale Rebased and Annual Cost of Living Adjustment (COLA)
- Resources of \$50,000 or less
 - Resources are cash or similar assets that can be readily converted to cash and include residences owned by the applicant other than the applicant's primary residence

HCBS MEDICAID WAIVER

Residential Habilitation Services

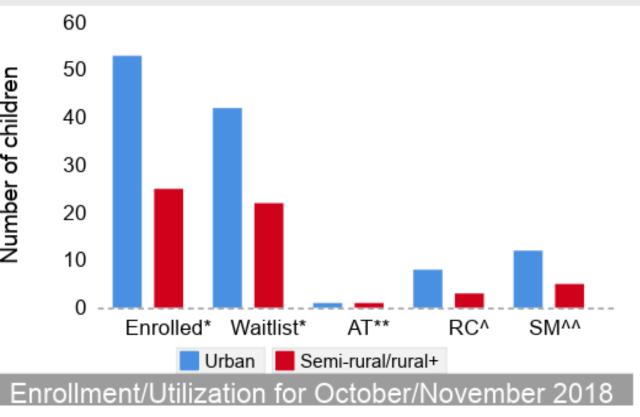
- Up to 24-hour services for eligible older adults and individuals with physical disabilities
- Must meet a nursing facility level of care, live alone, and can benefit from care coordination, skills restoration or maintenance, and community integration
- Could include adaptive skill development, assistance with activities of daily living, community inclusion, social, leisure skill development, personal care/homemaker, protective oversight and supervision
- Target population
- Individuals with TBI, early stage dementia etc.

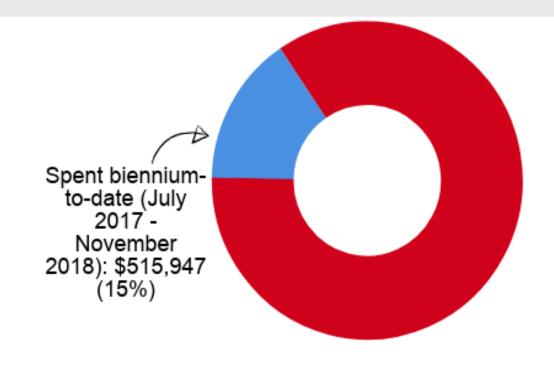
Community Residential Services

- Up to 24-hour services for eligible older adults and individuals with physical disabilities
- Must meet a nursing facility level of care, live alone, and can benefit from care coordination, and community integration
- Could include assistance with activities of daily living, community inclusion, social, leisure skill development, personal care/ homemaker, protective oversight and supervision
- Target population
 - Individuals with physical disability, complex health needs etc.

AUTISM SPECTRUM DISORDER (ASD)

Waiver~ (96 slots)





Total appropriation (2017-19 biennium): \$3,363,979

~Children enrolled in the waiver also receive Medicaid State Plan services. Between July 2017 and November 2018, \$228,548 was expended for State Plan services provided to these children (not including ABA services, which are reported separately on this document).

^{*}As of November 30, 2018.

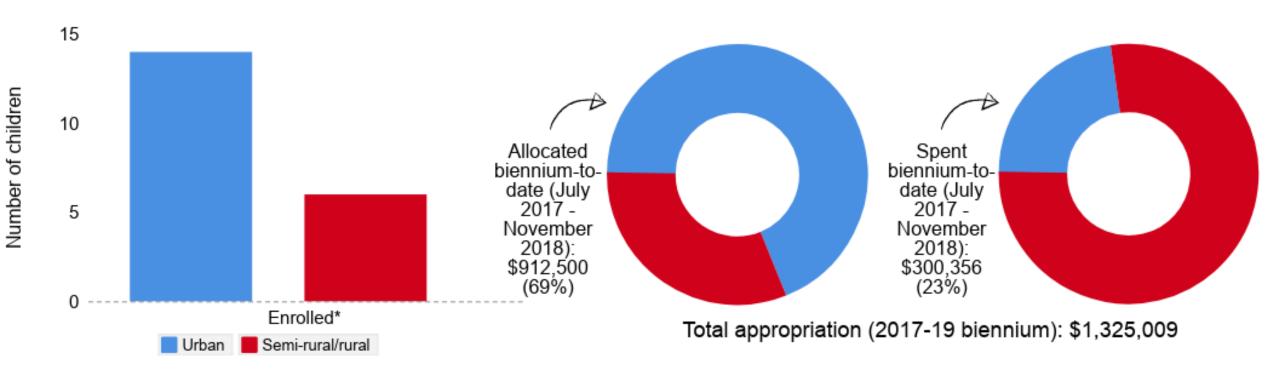
^{**}AT=received assistive technology between 10/1/18-11/30/18.

[^]RC=received respite care between 10/1/18-11/30/18.

[^]SM=received service management between 10/1/18 -11/30/18.

AUTISM SPECTRUM DISORDER (ASD)

Voucher (53 slots)



^{*}As of November 30, 2018.

- Request related to ASD Medicaid Waiver
- The Task Force is <u>not</u> requesting funding in excess of what is included in the Executive Request, rather the Task Force is requesting authority for DHS to increase the number of waiver slots and increase the age of children eligible for the waiver. Currently, the waiver has 96 approved slots and serves children through the age of 11. The Task Force requests DHS consult with the Task Force at the November 2019 Task Force meeting to evaluate biennium expenditures to date and, based on that evaluation, propose expanding the number of slots and ages covered by the waiver for the remainder of the 2019-2021 biennium. This would require intent language in SB 2012.

- Request related to Extended Services
 - Extended Services provides job coaching that helps consumers maintain integrated, competitive, community-based employment, which is an important part of their recovery, rehabilitation, and habilitation process. Extended services are currently available through DHS to individuals with a serious mental illness or a traumatic brain injury. The Task Force is requesting \$170,000 of state general fund be included in the DHS appropriation to provide funding for Extended Services. The estimate is based on \$390 per consumer per month, for three consumers per region, with an effective date of January 1, 2020.

- Request related to Voucher
 - The Task Force is **not** requesting funding in excess of what is in the Executive Request, rather the Task Force is requesting authority for DHS to seek additional flexibility for the administration of the voucher, to ensure more families can be served with the appropriations available. DHS has rule making authority for the voucher; however, the Task Force believes DHS should have legislative support for the changes the Task Force would like considered. These changes include consideration for a voucher that is solely for technology support and one that is for "in-home" supports; adding case management or parent to parent support as an allowable service for voucher funds; and reducing the amount of time during which a household must use approved voucher funds.

- Request related to Work Force Development
 - The task force recommends an additional eight slots designated for applied behavior analysts (ABA). It would be helpful to add slots specifically for the ABAs, otherwise they would be competing with other behavioral health professionals for slots, which would likely not help the workforce issues.

CHILDREN'S MEDICALLY FRAGILE WAIVER

Who is eligible?

- Children eligible for Medicaid
- Between the ages of 3 and 18
- Meets nursing facility level of care
- Child is living in their legally appointed caregiver's home

Waiver services:

- Transportation
- Dietary supplements
- Individual and family counseling
- In-home support
- Equipment and supplies
- Environmental modifications
- Institutional respite
- Case management

MONEY FOLLOWS THE PERSON

Grant Year	Older Adult	Individuals with a physical disability	Individuals with an Intellectual disability	Children	TOTAL
2007	0	0	0	0	0
2008	1	1	3	0	5
2009	4	7	4	0	15
2010	4	6	16	0	26
2011	5	8	19	0	32
2012	13	21	11	1	46
2013	14	18	19	1	52
2014	17	27	14	2	60
2015	14	28	17	5	64
2016	15	28	17	4	64
2017	9	15	10	3	37
2018 YTD	10	18	14	2	44
Totals	106	177	144	18	445

OVERVIEW OF BUDGET CHANGES

Description	2017-2019 Budget	Increase/ (Decrease)	2019-2021 Executive Budget
Grants	313,200	540,000	853,200
Medical Grants	693,467,835	50,309,162	743,776,997
Total	693,781,035	50,849,162	744,630,197
General Fund	353,540,677	36,498,088	390,038,765
Federal Funds	334,447,824	17,547,246	351,995,070
Other Funds	5,792,534	(3,196,172)	2,596,362
Total	693,781,035	50,849,162	744,630,197
Full Time Equivalent (FTE)	0.0	0.0	0.0