# State of Alaska
# FY2009 Governor's Operating Budget

## Department of Health and Social Services
## Senior and Disabilities Services
## Results Delivery Unit Budget Summary

## Senior and Disabilities Services Results Delivery Unit

## Contribution to Department's Mission

The mission of the Division of Senior and Disabilities Services is to promote the independence of Alaska's seniors and people with physical and developmental disabilities.

## Core Services

1) Institutional and community-based services for older Alaskans and persons with disabilities.

2) Protection of vulnerable adults.

| End Result | Strategies to Achieve End Result |
|---|---|
| **A: Improve and enhance the quality of life for seniors and persons with disabilities through cost-effective delivery of services.**<br><br>Target #1:  Reduce % of Medicaid recipients not receiving medical assessments to less than 5%.<br>Measure #1:  % of clients not receiving medical review. | **A1: Arrange for beneficiaries to receive a medical assessment to determine what services they are eligible for and at what level.  Through prior authorization process, ensure beneficiaries only receive the services they are eligible to receive.** |
| End Result | Strategies to Achieve End Result |
| **B: Promote improved service and compliance with federal/state regulations through provider agencies.**<br><br>Target #1:  Reduce incidence and severity of errors resulting in audit findings by 10% by providing adequate training to provider agencies.<br>Measure #1:  Show an overall reduction in error rates from audit findings from current rate by 10%. | **B1: Develop, implement and maintain an on-going system of review and improvement through Technical Assistance Plans for each grantee and provider agency.  Provide eight care coordination training sessions each year in Alaskan communities.** |
| End Result | Strategies to Achieve End Result |
| **C: Ensure manageable caseload number in Adult Protective Services (APS) and Quality Assurance Units to provide timely investigations.**<br><br>Target #1:  Reduce APS staff assigned case loads by 10%.<br>Measure #1:  Annual cases assigned to each case worker.<br><br>Target #2:  Reduce length of time a case is "open" by 10%.<br>Measure #2:  Length of days required to close an "open" case. | |

| FY2009 Resources Allocated to Achieve Results | | |
|---|---|---|
| **FY2009 Results Delivery Unit Budget: $376,793,000** | **Personnel:** | |
| | Full time | 119 |
| | Part time | 1 |
| | **Total** | 120 |

## Performance Measure Detail

### A: Result - Improve and enhance the quality of life for seniors and persons with disabilities through cost-effective delivery of services.

**Target #1:** Reduce % of Medicaid recipients not receiving medical assessments to less than 5%.
**Measure #1:** % of clients not receiving medical review.

**SDS Outstanding Medicaid Assessments (FY05-FY07)**

| Year | % Not Reviewed |
|---|---|
| FY 2005 | 30.9% |
| FY 2006 | 23.18% |
| FY 2007 | 4.50% |

*This chart shows the percentage of Senior and Disabilities Services Medicaid recipients that have not been assessed using a standardized assessment tool by an objective assessor from FY05-FY07.*

**Analysis of results and challenges:** The Personal Care Attendant (PCA) program was the only Medicaid program that did not require a state-approved medical assessment to receive services until implementation of new regulations in April of 2006. These new regulations began requiring a state-approved medical assessment and prior authorization of Medicaid benefits to ensure that beneficiaries are only receiving the services they are eligible to receive. This table shows the percentage of outstanding Medicaid assessments from FY2005-2007. Senior and Disabilities Services (SDS) has worked hard to catch up on back-logged Medicaid Waiver assessments through a contractor, state staff authorized to perform assessments and through agencies with staff on-site that have the appropriate credentials to complete assessments. In spite of these efforts, there were too many pending assessments required when new regulations went into effect in April of 2006 for the Personal Care Attendant program. SDS has dramatically decreased the assessment back-log but will not be caught up until all recipients receiving PCA services have been assessed. SDS will work hard to be fully caught up with all pending assessments by the end of FY08.

### A1: Strategy - Arrange for beneficiaries to receive a medical assessment to determine what services they are eligible for and at what level. Through prior authorization process, ensure beneficiaries only receive the services they are eligible to receive.

## B: Result - Promote improved service and compliance with federal/state regulations through provider agencies.

**Target #1:** Reduce incidence and severity of errors resulting in audit findings by 10% by providing adequate training to provider agencies.

**Measure #1:** Show an overall reduction in error rates from audit findings from current rate by 10%.

| Summary of Myers and Stauffers FY05 & FY06 | Error Rate Fiscal Year 2005 | Error Rate Fiscal Year 2006 |
|---|---|---|
| Skilled Nursing | 8.55% | 0.00% |
| Home & Community Services | 18.53% | 6.33% |
| Assisted Living | 26.28% | 16.14% |
| Care Coordination | 16.23% | 1.61% |
| Personal Care | 14.42% | 4.75% |
| **SDS Total** | **15.83%** | **6.43%** |

**Analysis of results and challenges:** The chart shows SDS Medicaid programs that have been audited by Myers and Stauffer and the percentage of audit exceptions that have been assigned to each program. These audit numbers are preliminary until the provider agencies have had a chance to respond, so these numbers should decrease as providers respond to the findings. However, it does show that significant improvement was made in the error rates across SDS programs from FY05 to FY06. In FY07 and FY08, Senior and Disabilities Services has been working with provider agencies to help provide them with the training and support they need to improve their error rates noted in FY05 and FY06.

## B1: Strategy - Develop, implement and maintain an on-going system of review and improvement through Technical Assistance Plans for each grantee and provider agency. Provide eight care coordination training sessions each year in Alaskan communities.

## C: Result - Ensure manageable caseload number in Adult Protective Services (APS) and Quality Assurance Units to provide timely investigations.

**Target #1:** Reduce APS staff assigned case loads by 10%.
**Measure #1:** Annual cases assigned to each case worker.



ANNUAL CASES PER CASE WORKER
FY2004 - FY2008*
*FY2008 = Projected
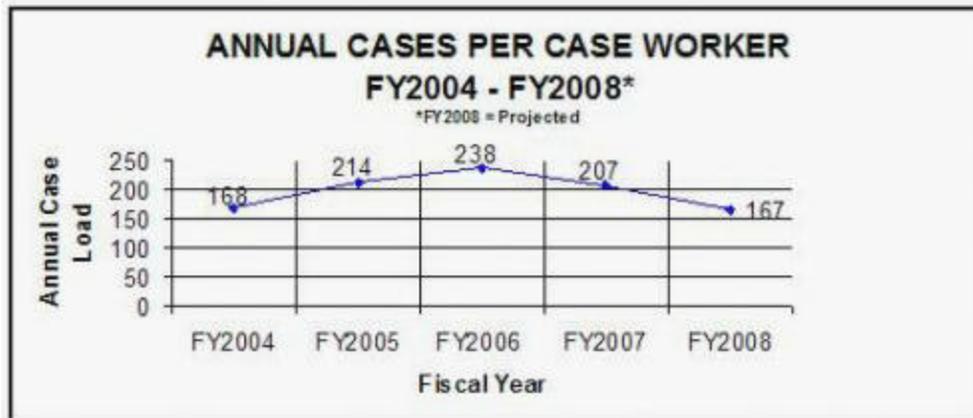
**Adult Protective Services Caseloads**

| Year | Total Investigations | Full Time Workers | Annual Cases/Worker | Days to Investigate |
|------|---------------------|-------------------|---------------------|---------------------|
| FY 2004 | 1173 | 7 | 168 | 0 |
| FY 2005 | 1497 +27.62% | 7 0% | 214 +27.38% | 0 0% |
| FY 2006 | 1666 +11.29% | 7 0% | 238 +11.21% | 2.6 0% |
| FY 2007 | 1866 +12.00% | 9 +28.57% | 207 -13.03% | 2.1 -19.23% |
| FY 2008 | 2000 +7.18% | 12 +33.33% | 167 -19.32% | 1.932 -8.00% |

*FY08 = projected numbers based on addition of new case worker staff and current estimated case load decrease of 8%.*

**Analysis of results and challenges:** The annual caseload for an Adult Protective Services (APS) case worker was steadily on the rise from FY04 to FY06. From FY04 to FY05, the average caseload increased by more than 27%. From FY05 to FY06, the average caseload increased again, this time by more than 11%. From FY06 to FY07 the average caseload decreased by more than 13% after two new case workers were hired. Based on this unexpected growth, Senior and Disabilities Services has added five new positions since FY06. Because of these new positions, FY07 finally saw a decrease in the number of open cases per case worker. With additional new position in FY08, Senior and Disabilities Services expects to see a decrease to the number of annual cases per case worker. Senior and Disabilities Services will keep adding new positions until case loads for Alaska Adult Protective Services case workers are at a more manageable level.

**Target #2:** Reduce length of time a case is "open" by 10%.
**Measure #2:** Length of days required to close an "open" case.

**Days to Investigate Open Case**

| Year | Days to Investigated | YTD |
|------|---------------------|-----|
| 2006 | 2.6 | 2.6 |
| 2007 | 2.1 -19.23% | 2.1 -19.23% |
| 2008 | 1.932 -8.00% | 1.932 -8.00% |

*FY08 = Projected*

**Analysis of results and challenges:** The average length of time it took to investigate a new case was approximately 2.6 days in FY06, when there were only seven case workers. In FY07, two additional case worker positions were added, bringing the average length of time to investigate a report of harm down to 2.1 days. In FY08, SDS added three additional positions, for a total of 12. With these new positions, Senior and

Disabilities Services anticipates a decrease to the number of annual cases per worker of more than 13.75%. Senior and Disabilities Services anticipates that with additional new staff being added in FY08 that the number of days it takes to investigate a new case could drop to less than two days.

## Key RDU Challenges

Key issue for the Division of Senior and Disabilities Services is cost containment of the Medicaid Waiver and Personal Care Attendant (PCA) programs.  To accomplish this, the division is:

1. Improving procedures for maintaining the Disabilities Waitlist tool to assure the criteria for listing are consistent, objective and meaningful.  It is the intent of the Legislature that the department act expeditiously in the administrative processing of the individuals on the waitlist so that they may receive services as quickly as possible.
2. Reviewing and revising regulations relating to the General Relief / Temporary Assisted Living Program to minimize the length of time that the state provides housing alternatives and assure the services are provided only to intended beneficiaries who are actually experiencing harm, abuse or neglect.
3. Hiring/training staff to begin completing assessments effective 11/1/07.  On 10/31/07, two contracts for the completion of waiver assessments expired.  Applicants for Medicaid services cannot begin receiving services until they have been assessed.
4. Strengthening the Quality Assurance Unit including random audits, utilization reviews, and client satisfaction interviews to ensure program compliance, quality of services and detection of suspected fraud.
5. Controlling costs in Medicaid Programs.

## Significant Changes in Results to be Delivered in FY2009

The Division of Senior and Disabilities Services (SDS) began taking over Medicaid assessments using state employees, effective 11/1/07.  This change will result in more control over the Medicaid assessment process.  SDS will also begin to establish state employees to perform care coordination, giving clients the choice between agency-based, private or state care coordinators.

These changes should result in more programmatic consistency among these functions and allow the greatest number of clients to be served with the resources that are available.

## Major RDU Accomplishments in 2007

During FY07, the Division of Senior and Disabilities Services provided home and community based services to more than 6,105 individuals and their families.  By providing these services in the community setting, the division was able to delay the entry of these individuals into institutions.

Also in FY07, the division provided services to 736 individuals in Nursing Homes.

The division continued to provide technical assistance to Assisted Living Homes and to communities for the expansion of Home and Community Based services.  They also continued participating in workforce development projects for the recruitment and retention of direct service workers.

Regulation changes in the Personal Care Attendant (4/06) program have resulted in civil litigation against SDS.  However, new processes that have come about as a result of these regulation changes allow SDS the freedom to resolve many legal actions "pre-hearing" which reduces the number of legal actions that end up in a formal "fair hearing."

| Contact Information |
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## Senior and Disabilities Services
## RDU Financial Summary by Component

*All dollars shown in thousands*

| | FY2007 Actuals | | | | FY2008 Management Plan | | | | FY2009 Governor | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | General Funds | Federal Funds | Other Funds | Total Funds | General Funds | Federal Funds | Other Funds | Total Funds | General Funds | Federal Funds | Other Funds | Total Funds |
| **Formula Expenditures** | | | | | | | | | | | | |
| Senior/Disabilities Medicaid Svc | 118,991.9 | 162,737.1 | 1,454.2 | 283,183.2 | 137,245.9 | 178,789.1 | 2,575.0 | 318,610.0 | 151,370.2 | 179,816.4 | 2,879.8 | 334,066.4 |
| **Non-Formula Expenditures** | | | | | | | | | | | | |
| Senior/Disabilities Svcs Admin | 5,241.1 | 5,688.4 | 124.9 | 11,054.4 | 4,339.6 | 6,414.3 | 135.0 | 10,888.9 | 4,998.4 | 7,073.0 | 139.9 | 12,211.3 |
| Genl Relief/Temp Assisted Living | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 0.0 | 3,488.7 | 0.0 | 0.0 | 3,488.7 |
| Protection and Comm Svcs | 5,730.8 | 0.0 | 0.0 | 5,730.8 | 3,488.7 | 0.0 | 0.0 | 3,488.7 | 0.0 | 0.0 | 0.0 | 0.0 |
| Senior Community Based Grants | 4,408.8 | 5,789.7 | 558.9 | 10,757.4 | 4,781.9 | 6,043.4 | 385.3 | 11,210.6 | 5,256.9 | 6,043.4 | 385.3 | 11,685.6 |
| Senior Residential Services | 815.0 | 0.0 | 0.0 | 815.0 | 815.0 | 0.0 | 0.0 | 815.0 | 815.0 | 0.0 | 0.0 | 815.0 |
| Community DD Grants | 7,557.3 | 0.0 | 904.6 | 8,461.9 | 7,697.3 | 0.0 | 864.9 | 8,562.2 | 13,661.1 | 0.0 | 864.9 | 14,526.0 |
| **Totals** | **142,744.9** | **174,215.2** | **3,042.6** | **320,002.7** | **158,368.4** | **191,246.8** | **3,960.2** | **353,575.4** | **179,590.3** | **192,932.8** | **4,269.9** | **376,793.0** |

| Senior and Disabilities Services Summary of RDU Budget Changes by Component From FY2008 Management Plan to FY2009 Governor | | | | |
| --- | --- | --- | --- | --- |
| | | | | *All dollars shown in thousands* |
| | **General Funds** | **Federal Funds** | **Other Funds** | **Total Funds** |
| **FY2008 Management Plan** | 158,368.4 | 191,246.8 | 3,960.2 | 353,575.4 |
| **Adjustments which will continue current level of service:** | | | | |
| -Senior/Disabilities Medicaid Svc | 8,522.4 | -9,487.4 | 0.0 | -965.0 |
| -Senior/Disabilities Svcs Admin | 658.8 | 658.7 | -130.1 | 1,187.4 |
| -Genl Relief/Temp Assisted Living | 3,488.7 | 0.0 | 0.0 | 3,488.7 |
| -Protection and Comm Svcs | -3,488.7 | 0.0 | 0.0 | -3,488.7 |
| -Senior Community Based Grants | 0.0 | 0.0 | -385.3 | -385.3 |
| -Community DD Grants | 1,148.1 | 0.0 | -227.5 | 920.6 |
| **Proposed budget decreases:** | | | | |
| -Senior/Disabilities Medicaid Svc | -3,000.0 | 0.0 | 0.0 | -3,000.0 |
| **Proposed budget increases:** | | | | |
| -Senior/Disabilities Medicaid Svc | 8,601.9 | 10,514.7 | 304.8 | 19,421.4 |
| -Senior/Disabilities Svcs Admin | 0.0 | 0.0 | 135.0 | 135.0 |
| -Senior Community Based Grants | 475.0 | 0.0 | 385.3 | 860.3 |
| -Community DD Grants | 4,815.7 | 0.0 | 227.5 | 5,043.2 |
| **FY2009 Governor** | 179,590.3 | 192,932.8 | 4,269.9 | 376,793.0 |