

***Presentation to the 2021 Health and Human Services
Joint Appropriation Subcommittee***

Senior and Long Term Care Division

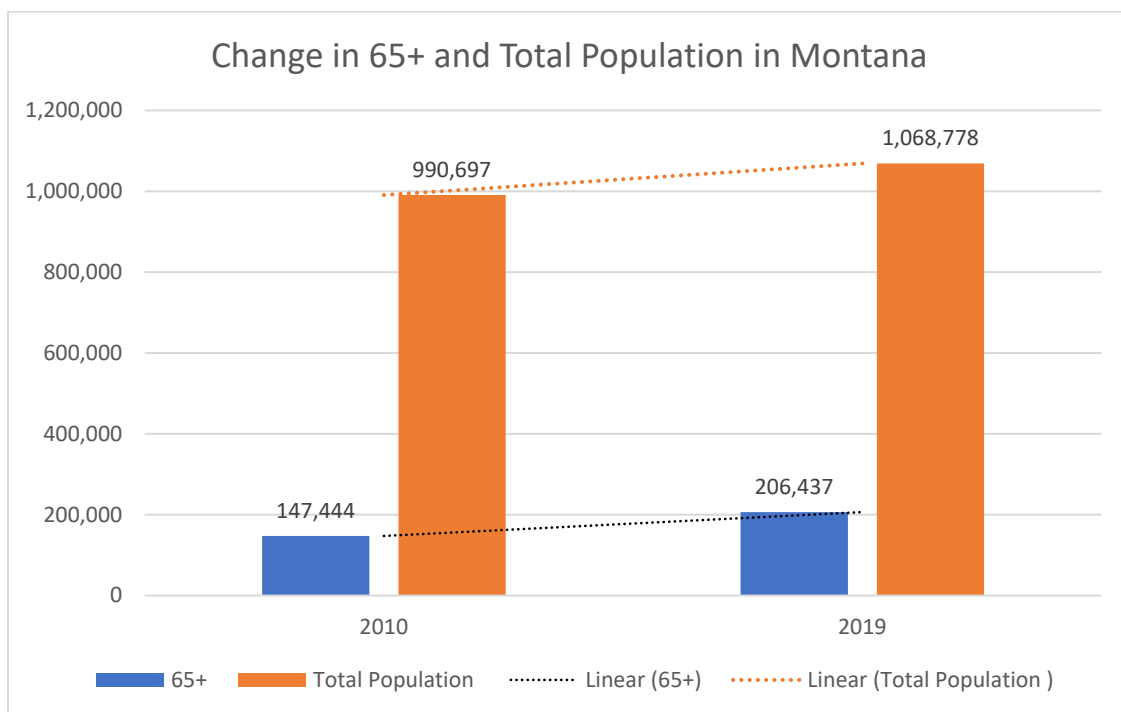
**Medicaid and Health Services Branch
Department of Public Health and Human Services**

The following topics are covered in this report:

- **Overview**
- **Summary of Major Functions**
- **Highlights and Accomplishments during the 2021 Biennium**
- **Funding and FTE Information**
- **Change Packages**

Overview

The State of Montana is aging. In 2019, persons over the age of 65 accounted for 19.3% of our population; by 2030 Census projections indicate Montana could rank 3rd in the nation with more than 25% of the population over age 65. Montana is also projected to be 1 of 10 states with more people over the age 65 than under 65. Individuals with physical disabilities are living fuller, longer lives with the advancement of medical technologies and the availability of community-based care. The Senior and Long Term Care Division (STLCD) is constantly seeking creative opportunities to improve education, service delivery and quality within the limits of lean division resources for seniors and disabled Montanans.



Source: Census & Economic Information Center

Between the years 2010 and 2019 the general population grew by 7.3%. The over sixty five demographics grew by 28.6 %. The following page provides the top ten by population count and by percentage. Note the counties with the highest percentages are rural, creating service delivery challenges.

Top Ten by Population and by Percentage			
1	Yellowstone County	28,085	1 Prairie County 33.5%
2	Flathead County	20,994	2 Sanders County 32.4%
3	Missoula County	19,337	3 Meagher County 31.6%
4	Cascade County	15,555	4 Granite County 31.6%
5	Gallatin County	15,030	5 Mineral County 29.6%
6	Lewis and Clark County	13,471	6 Lincoln County 29.5%
7	Ravalli County	11,628	7 Madison County 29.5%
8	Lake County	6,899	8 Treasure County 28.9%
9	Silver Bow County	6,808	9 Daniels County 28.3%
10	Lincoln County	5,902	10 Golden Valley County 27.8%

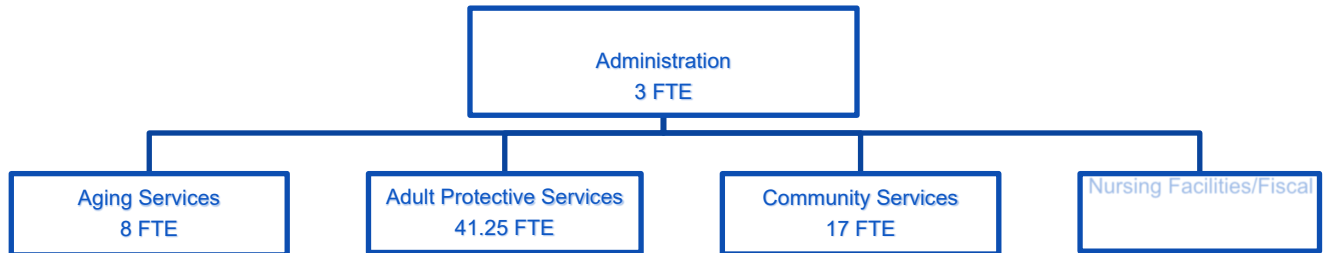
The SLTCD provides services to seniors and the physically disabled by:

- Establishing and managing a state plan on aging led by the Office of Aging in collaboration with the ten Area Agencies on Aging (AAA) and tribal programs for the Montanans 60 years of age and older. The Office of Aging oversees nutritional programs, the long-term care ombudsman program, legal services, caregiver support, and information and referral services.
- Administering Medicaid programs through the Nursing Facilities and Community Services Bureaus, comprised of nursing facility services, the Big Sky Waiver program, the Community First Choice program, home health, and hospice.
- Supporting aging and disabled veterans through the management of the Montana Veterans Home, the Eastern Montana Veterans Home, and the Southwest Montana Veterans Home.
- Providing education on and investigative work pertaining to abuse, neglect, and financial exploitation of Montana's seniors and intellectually disabled community with the Adult Protective Services (APS) program.

The SLTCD leadership consists of the Administrator, Barb Smith and four individuals who work as a team to see that seniors and disabled individuals are free from abuse and neglect, have access to assistance for planning services, receive quality care, and can choose where services are delivered. This team includes:

- Kerrie Reidelbach, Aging Services Bureau Chief,
- Michael Hagenlock, APS Bureau Chief,
- Jill Sark, Community Services Bureau Chief,
- Shaunda Hildebrand, who oversees the Fiscal and Nursing Facility Services Bureaus.

Summary of Major Functions



Aging Services

Aging Services, also known as the Office on Aging, helps elderly individuals in Montana gain access to services in their communities. This includes food and nutrition services such as home delivered meals, congregate meals, and supplemental food. It also includes information and advocacy services such as Aging and Disability Resource Centers (ADRC), long-term care ombudsman, state health insurance assistance, legal services assistance, and lifespan respite and supports for those with Alzheimer’s or related dementias. The aging network includes Area Agencies on Aging (AAA), ADRC, senior centers, private providers, dedicated volunteers, and local governments. The Office on Aging is responsible for establishing and managing a state plan on aging in collaboration with the ten Area Agencies on Aging (AAA) and tribal programs for the elderly. Most services are free of charge with an opportunity to donate.

The Office on Aging is guided by a three-year, federally-approved state plan. The current plan is for FFY 2020-22.

Food and Nutrition Services

- **Congregate Meals:** This program provides meals (and socialization) in a group setting, often at senior centers. In FY 2020, 536,531 congregate meals were served to about 16,746 Montanans through 215 congregate meal sites.
- **Home Delivered Meals:** By providing nutritional meals on a regular basis, individuals are more likely to remain in their homes rather than moving to a higher level of care. The home delivered meals program provides meals to individuals who are unable to attend a congregate meal site. In FY 2020, there were 1,033,151 meals delivered to 14,279 persons across Montana by a total of 204 home-delivered meal providers.
- **USDA Community Supplemental Food:** This program provides a 30-pound box of food each month to Montanans age 60 or over who earn less than 130% of the federal poverty level.

Information and Advocacy Services

- Aging and Disability Resource Center (ADRC):** ADRC works to empower individuals to make informed choices, streamline access to long-term support, and organize the long-term support system reaching people before they become Medicaid-eligible. ADRCs serve individuals aged 60 and older and people with disabilities over the age of 18. Currently, nine of the 10 Area Agencies on Aging are ADRCs covering 49 of our 56 counties.
- Long-Term Care Ombudsman:** Ombudsman advocate for all residents of long-term care facilities which include 70 nursing facilities, 47 critical access hospitals with swing beds, and 214 assisted living facilities. Ombudsman work to resolve issues related to the health, safety, dignity and rights of residents to remain in their homes and community of choice. Common issues include loss of personal items such as clothing or dentures, medication management, staffing challenges, and frequency/quality of care. Ombudsman also work on cases of improper discharge planning or resident eviction. Services are provided at the local level by 25 individuals (19.56 FTE) who are certified Local Ombudsman and Regional Ombudsman, 2 Ombudsman Interns and 5 volunteers. These individuals are hired and directly supervised by local service agencies.

The Ombudsman program works to resolve problems related to the health, safety, welfare, and rights of individuals who live in the 332 Long Term Care facilities in Montana.

FY 2020 Ombudsman Services		
Visits to Long-Term Care Facilities	Complaint Responses	Individual Consultations
3,624	1,891	3,561

- State Health Insurance Assistance (SHIP):** The Montana SHIP is a free health benefits counseling and advocacy service for Medicare beneficiaries and their families or caregivers. The 120 plus local SHIP counselors are specialists trained in Medicare eligibility, benefits and options, health insurance counseling, and related insurance products. The Office on Aging provides training and support for this program. In FY 2019, SHIP counselors handled over 18,464 referrals. Through face-to-face visits, SHIP counselors assisted 8,875 individuals in Montana regarding Medicare, Medicare Prescription Drug plans, and other beneficiary issues.
- Legal Services Assistance:** This program provides training on elder law to seniors, family members, professionals, and providers. The program responds to a wide array of legal issues to assist persons 60 years of age and older. The program teams with the Montana Board of Crime Control and pro bono attorneys to educate Montanans on legal documents and protection of assets. To date, for calendar year 2020, a total of 555 cases have been opened, involving 1,242 legal issues.

The top ten legal assistance requested in FY 2020 were: Estate planning, Probate, Landlord/Tenant, Exploitation, Guardianships, Collections/Garnishments, Contract Issues, Medicaid Eligibility, Property Issues and Long Term Care Facility Issues.

Attorneys helped seniors in completing important legal documents free of charge, such as: Durable Power of Attorney for Financial and Health Care, Homestead Declarations, Wills, Beneficiary Deeds, and Indian Wills. The program completed 701 documents through three legal clinics and the program is conducted in clinics across the state and by phone.

In addition, due to COVID-19 program staff created materials and guidance for aging professionals on legal issues related to COVID-19. These materials included a memo on accessing services, a memo on the economic impact payments and a memo on scams related to COVID-19.

FY 2020 Legal Services Assistance			
Opened Cases	Legal Issues	Estate Planning	Legal Volunteers Pro Bono
555	1,242	701	\$54,000

- Montana Lifespan Respite:** This program supports family caregivers with education and relief. Caregiver support is critical in maintaining the family member in the community. DPHHS, in collaboration with the Statewide Lifespan Respite Coalition, the Developmental Educational Assistance Program (DEAP) and the Aging and Disability Resource Center network, seeks to increase caregiver awareness of the purpose, need for and availability of respite, and options for caregiver training. Providing respite vouchers for eligible individuals to pay for respite services of their choosing is a key emphasis. The 2018 3-year grant is currently in the final year with funding through August of 2021. A focus to recruit and train individual respite providers is underway. Additional funding was also awarded to provide caregivers other options during the pandemic in order to keep their loved one safe. These funds will be used to purchase items such as: weighted blankets, puzzles/coloring books, robotic pets, fidget blankets, etc. to help calm the care recipient and help the caregiver with some relief.

Medicaid Services

The SLTCD administers two Medicaid programs: Community Services and Nursing Facility Services.

Community Services

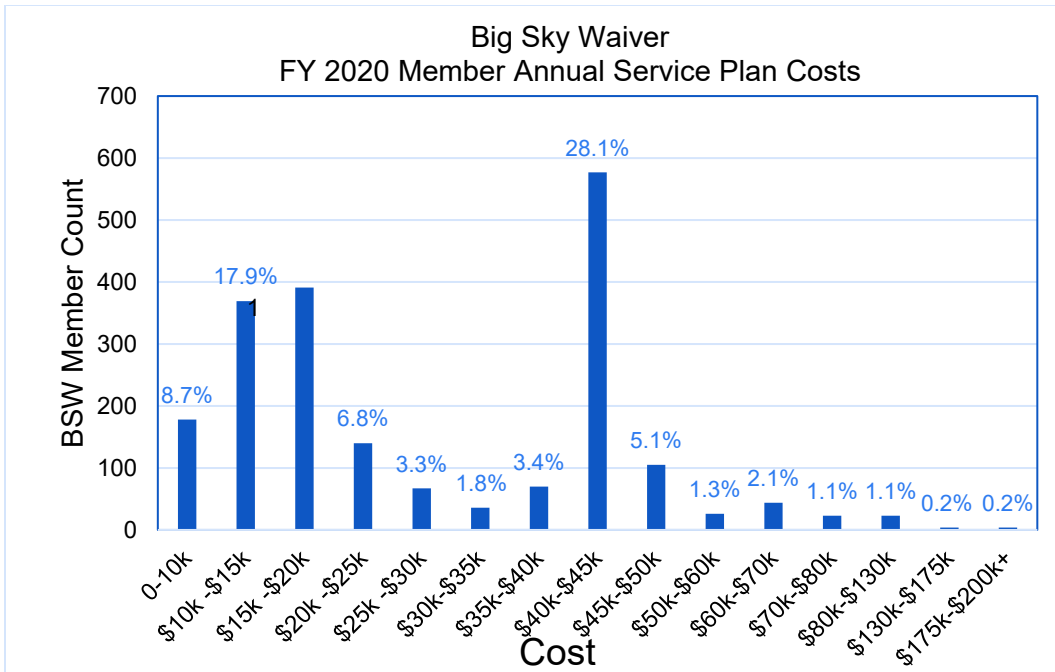
The SLTCD manages Medicaid community-based services for eligible members to remain in their homes and integrated into their communities. Programs help with activities of daily living such as bathing, dressing, meal preparation, grocery shopping, limited housekeeping, and an array of specialized services. Most of the following services can be received through an agency or self-managed by the member. The programs include:

- **Community First Choice (CFC):** The CFC program covers support to assist members with activities of daily living, health maintenance tasks, community integration and related support services such as transportation and assistance to medical appointments. Members must meet the nursing facility level of care requirement. State participation in CFC comes with a 6% higher federal medical assistance percentage (FMAP).
- **Personal Assistance Services (PAS):** This entitlement program is designed to delay institutionalization by providing medically necessary maintenance or supportive care in the home to Medicaid members whose health problems cause them to be functionally limited in performing activities of daily living, but do not meet level of care. The program provides for attendant services for direct care and incidental support.
- **Big Sky Waiver:** This program began in 1982 and has been adapted over time to provide person centered services to the elderly and 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 or an appropriate “slot” must be available, or the individual is placed on the waiting list.

The biggest challenge of CFC and PAS is the recruitment and retention of direct care workers.

Big Sky Waiver services available may include case management, homemaker, personal assistance, adult day care, respite, habilitation, transportation, home modification, nursing services, and adult residential care provided in an assisted living facility or adult foster home. The services most used are case management, personal assistance and adult residential care provided in an assisted living facility.

DPHHS contracts with two agencies to provide case management services to members. Case Managers are responsible for developing a person-centered plan for each individual, complete necessary follow ups, and be available to assist members at the level the member requires. In SFY 2020, individual service plans ranged from \$1,974 to \$220,852 per year, with the average of \$29,302. Groupings of care plans are at \$10,000 to \$20,000 representing basic slots and \$40,000 to \$54,000 covering assisted living.



HCBS SERVICES REQUESTED	#Consumers	Percent
AR	105	45.65
Basic	123	53.48
CC3 - Group Home	1	0.43
CC3 - Specialized Residential Habilitation	1	0.43
Total	230	

As of January 14th, 2020, there were 230 individuals on the wait list. The current waiting time is 130 days. SLTC will be examining contracts to make changes in enrollment requirements to reduce this wait time.

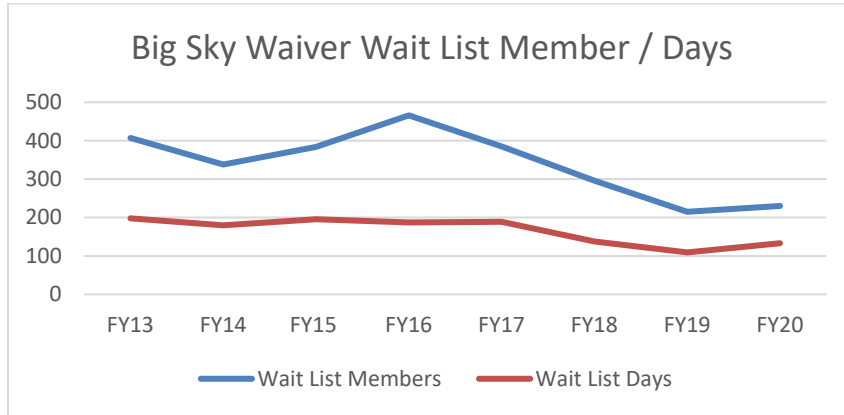
WL Residential Status	#Consumers	Percent
Acute Care Hospital/From Nursing Facility	2	0.87
Group Residence/Adult Residential	25	10.87
Group Residence/Group Home	2	0.87
Group Residence/Retirement Home	4	1.74
Institution/Nursing Facility	36	15.65
Institution/State Institution	3	1.30
Private Residence/Lives Alone	77	33.48
Private Residence/Lives with Parents or Adult Children	33	14.35
Private Residence/Lives with Spouse	20	8.70
Private Residence/Shared Living with Non-Relatives	10	4.35
Private Residence/Shared Living with Relatives	12	5.22
Unknown	6	2.61
Total	230	

The wait list is based upon need, not time on the list. As slots become available it is offered to the neediest member on the wait list. Individuals on the wait list are often receiving CFC, facility services, aging services and family support.

SLTC maintains data on the wait list. This is an example of one portion of the report. Wait list by case management team and by county is also available.

A historic look at the wait list and days is provided below. During FY 2016 the department reviewed the entire waitlist and removed those individuals who were residing out of state, those that could not meet the Medicaid income levels, deceased individuals and individual who no longer met level of care. The waiting list now contains individuals who are

Medicaid eligible, meet level of care, need a service available under the waiver. This is considered a best practice and utilized by most states.



**Base In-Home
Care Services
\$8,590**

Nancy is an elderly woman that lives alone in home. She receives in-home services through the Community First Choice program as well as Big Sky Waiver services. One of Nancy’s goals is to be able to continue to live at home and continue to remain healthy. Along with CFC services to meet her activities of daily living needs, Nancy also receives assistance **with non-medical transportation, personal assistance in the community, home delivered meals and case management services** through the Big Sky Waiver program. Nancy plans to continue to follow the exercise program prescribed by her Physical Therapist to maintain her health.

**Adult
Residential –
Assisted Living
Facility
\$42,092**

Bob is an elderly man living in an assisted living facility. He had been living on his own in a senior apartment building, but his health declined, and he required a higher level of services. He moved to an assisted living facility privately paying his costs until he had spent his personal resources. At that time, Bob was enrolled in the Big Sky Waiver program receiving **Adult Residential and case management services**. Bob continues to pay his room and board. He has adjusted well and enjoys the interaction with other residents. He stated that he is no longer lonely.

**Specialized
Adult
Residential –
TBI Assisted
Living
\$64,638**

Marla was in an automobile accident eight years ago and suffered a traumatic brain injury. After undergoing rehabilitation services out of state, she moved to an in-state facility designed to provide 24-hour care for persons with brain injuries. Marla was enrolled in the Big Sky Waiver program upon moving to the facility and receives **Specialized Adult Residential and case management**

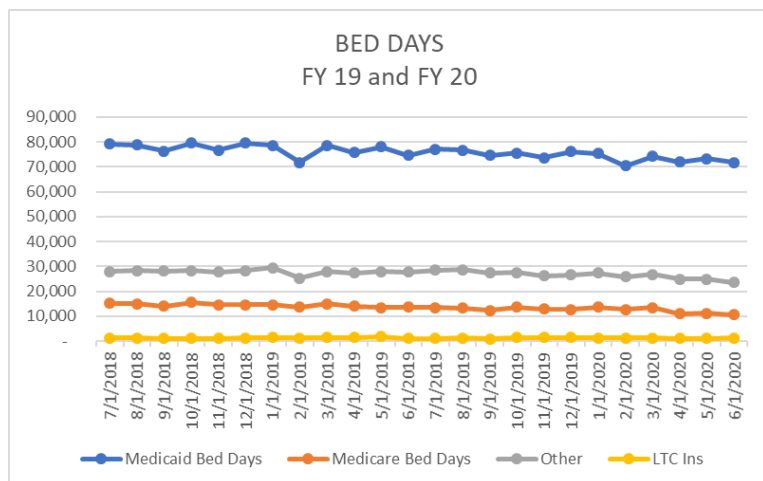
- **Home Health Services:** Licensed and certified home health agencies provide skilled nursing and physical, occupational, or speech therapy services in settings where normal life occurs. Agencies are also able to provide medical supplies and durable medical equipment.
- **Hospice:** Hospice agencies focus on providing palliative non-curative care to individuals with a terminal condition. The hospice agency manages the care and is reimbursed for the cost of services for the individual, including nursing facility services. The service also includes support to families during the illness and after the loved one’s death.
- **Additional Supports:** SLTCD has federal approval to provide funding for direct care worker (DCW) wages and health care for health care workers (HCHCW) supplemental payments.
 - SLTCD’s direct care worker program provides funding to improve wages of direct care personnel in community services and nursing facilities. This funding is utilized to enhance wage scales and/or provide bonuses.
 - HCHCW funding is allocated to community services providers who offer medical insurance to their employees.

Nursing Facility Services

Although members (and their families) in need of services may prefer to remain in their home and community, nursing facility services are often necessary and appropriate. Nursing facility services pay for short and long-term nursing care to people who are Medicaid eligible (including Medicaid Expansion) and in need of the level of care provided by the 70 Montana nursing facilities located in 35 of Montana's 56 counties. Nursing facilities are reimbursed under a base rate with enhancements for quality based on the five star system. Facilities are also eligible for add-ons for difficult cases such as bariatric care and dementia care.

During the public health emergency a \$40 per Medicaid member per day payment was made to offset the increase in the cost of providing services. Additionally, Coronavirus Relief Funds were used to reimburse providers an enhanced rate for those residents who were quarantined or isolated from direct exposure.

Montana Medicaid is the predominate payor in the nursing home industry at 64.8% of all bed days. Medicare, private pay, VA contracts and long term care insurance accounts for the other 5.2%. The following table demonstrates bed days per source with private pay and VA contracts rolled together as “other”. Nursing facility services are funded with a utilization fee, intergovernmental transfer funds,



tobacco dollars, general fund and the corresponding federal match. The intergovernmental transfer funds are declining due to the switch of county long term care beds to swing beds.

- **Swing Bed Services:** “Swing bed” means a bed approved by Medicare/Medicaid to be used to provide either acute care or nursing facility care to a member. Swing beds are in hospitals and critical access hospitals. When a swing bed is used as a nursing facility bed, providers receive the average statewide per deim for nursing facilities. Swing beds are not subject to nursing facility regulations and the health care facility utilization fee.

To qualify for payment, there must not be an appropriate nursing facility bed within 25 miles. Given the remote location of these facilities, this is often the case. The Division utilizes a continued stay review to assure individuals are appropriately placed and served in swing beds.

State Veterans Nursing Homes

Montana Veterans Home (MVH) in Columbia Falls was established in 1896 and is a 105-bed licensed and certified skilled nursing facility, which includes a 15-bed special care unit for Alzheimer or dementia care. It is funded in part by charging members for their care at the facility based on their ability to pay; Medicaid and Veterans Affairs. In addition to the nursing facility, MVH operates a 12-bed domiciliary unit. This unit, known as the “Dom”, provides supervision and assistance in a residential setting to veterans who can address their own self-care needs. Montana veterans are admitted if they are over 55 years of age, or in need of care, and have had active service in the armed forces. Spouses of veterans may also be admitted if space is available. As of the first week in January the nursing facility was home to 76 veterans and veteran spouses, and seven residents in the Dom. The waiting list included 170 veterans and 35 spouses.

Census at MVH is down to assist in managing COVID risks. This has a direct impact on waiting list numbers.

Eastern Montana Veterans Home (EMVH) in Glendive was built in 1994 and opened in July of 1995. There are 80 skilled nursing facility beds, including a 16-bed special care unit. The facility’s average occupancy for 2020 was 61 residents or 75% filled; slightly higher than the average occupancy rate for other nursing facilities in that geographic area. The availability of workforce prevents the facility from expanding occupancy. The Division contracts for the day-to-day operation and management of the EMVH facility. The Glendive Medical Center has been the contractor responsible for management and operation of the facility since 1995.

“It is a wonderful place for a loved one. They are VERY responsive to the needs of the resident and the family.”
- Resident

Southwest Montana Veterans Home (SWMVH) in Butte is scheduled to open in early 2021. The federal omnibus bill for FFY 2017 contained funding for SWMVH. Five cottage style units were built in a neighborhood design with a community center on the property. The facility will be home to 60 veterans and spouses. Admissions to the facility are staggered by cottage to provide

the best care and transition to the facility. The division contracts for the day-to-day management to Eduro, Inc., a Salt Lake based corporation who manages three other facilities in Montana.

Adult Protective Services (APS)

Adult Protective Services (APS) programs promote the safety, independence, and quality-of-life for adults who are, or are in danger of, being abused, sexually abused, neglected by self or others, or financially exploited, and provide for his or her own care or protection is impaired. APS is authorized by law to investigate reports of abuse, neglect, exploitation, and self-neglect or other maltreatment of “at-risk” adults and to intervene to protect the victims to the extent possible.

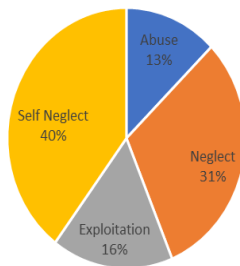
Adults 60 and older and intellectually disabled individuals over 18 are covered by APS.

APS investigators work in the field gathering information, interviewing the alleged victim, other persons aware of the situation and the alleged perpetrator. APS investigators coordinate with law enforcement officials and tribal entities when suspected criminal activity occurs. To prosecute offenders, APS works with the local county attorney who determines if the alleged perpetrator should be charged with a crime.

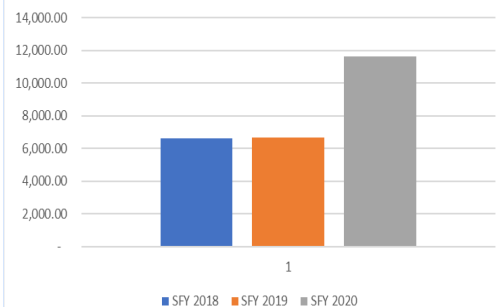
The number of at-risk adults otherwise a vulnerable adult in Montana communities has grown rapidly over the past few years, increasing the demand for investigative services provided by APS investigators.

Nationally, all APS programs respond to reports of adult maltreatment in private dwellings, while only half of the State APS programs including Montana investigate reports in nursing homes, assisted living, group homes and other facility settings.

APS Investigations by Percentage



Total APS Referrals



To report suspect abuse, neglect or exploitation:
Call 1-844-277-9300 or
Report online at www.aps.mt.gov

Highlights and Accomplishments during the 2019 Biennium

During 2021 biennium, the Senior and Long Term Care Division (SLTCD) made every effort to maintain services and support with the core goal of protecting the health and safety of the members served. SLTCD revised operational strategies to meet the challenge. Some examples are:

- Collaborated with Montana Correctional Enterprises Food Factory to deliver frozen meals to areas where impacts of COVID resulted in food insecurity among seniors.
- Realigned staff in the Community Services Bureau to have dedicated staff for development and management of federally required Quality Assurance programs.
- Established an open work group to update policy of the Big Sky Waiver.
- Revised the rate methodology for nursing homes as a collaborative effort with the industry.
- Implemented case management process to increase oversight to members living in the community or congregate setting who experienced COVID quarantines.
- Implemented quarantine/isolation reimbursement for individuals impacted by COVID in assisted living and nursing facilities.
- Simplified the Assisted Living rate calculation removing regional discrepancies.

Pursuing Grant Opportunities

The SLTCD received a few competitive grants to address specific critical issues for seniors and expand capacity.

Adult Protective Services obtained a grant to enhance the APS data System; this new data system has allowed for more efficient technology for the public and providers of services to report suspected abuse, neglect or exploitation of older adults and adults with disabilities.

As second grant was awarded to Adult Protective Services to improve the capacity in assisting older adults and adults with disabilities while addressing opioid issues. Data collection and review to better understand opioid misuse related to abuse, neglect and exploitation and grandparents raising grandchildren.

The Aging Services Bureau received a grant in partnership with the Alzheimer's Association Montana Chapter (AAMC), the Montana Alzheimer's Disease and Related Dementias (ADRD) workgroup, Montana for Area Agencies on Aging Association (M4A)/AAAs, and the Developmental Education and Assistance Program (DEAP). This group will work over the next

18 months to expand the model for dementia-capable aging network and long-term services and supports throughout Montana. This includes increased access to, awareness of and referrals for dementia-capable services, delivery of education, care planning, and dementia-capable services; preplanning in early stages to document the wishes people with dementia and their caregivers regarding current and future service needs and supports.

Strengthening Communication with Partners

The Aging Services Bureau manages the Governor's Advisory Council on Aging. This Council provides advice to the Governor's office on issues related to aging. This Council will be an integral part of executing the Aging State Plan for 2020-2022.

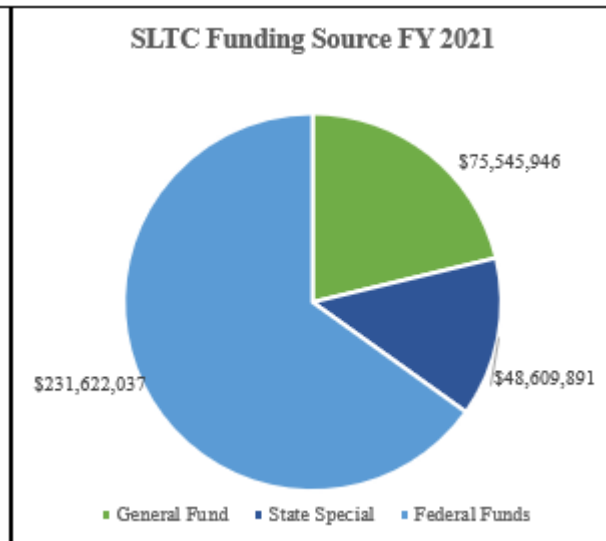
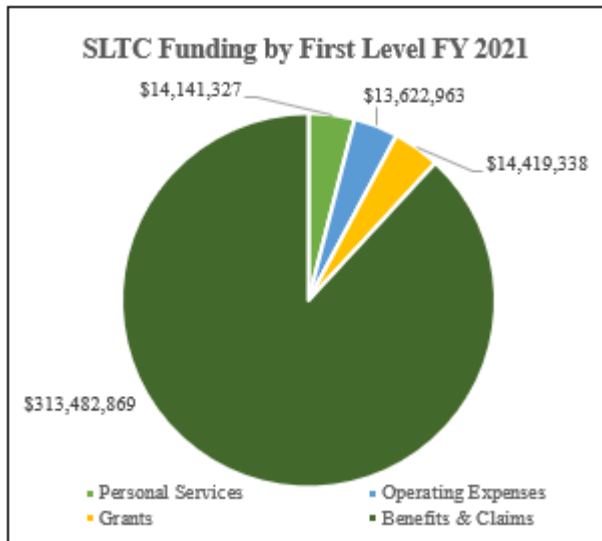
The Community Services Bureau manages the Community First Choice (CFC) and Big Sky Bonanza Advisory Councils to discuss issues, resolve problems, and plan for the future of programs. In addition, the bureau created an Assisted Living work group to improve communication, address policy concerns and collaborate on rate setting.

The Nursing Facility Bureau formed a provider group to collaborate on a new rate methodology due to the discontinuation of CMS data. The group created add ons to the rate to reward quality care and establish a mechanism to reimburse for higher than average care.

The Adult Protective Services bureau continued with education and training of groups across the state, including nursing home providers, law enforcement and bankers. In addition, the Eastern Montanan Coalition for Elder Abuse was launched. This collaborative team seeks to work across lines to investigations, protection and convictions.

Funding & FTE Information

Senior & Long Term Care FTE	FY 2021 Budget	FY 2022 Request	FY 2023 Request
	216.55	217.55	217.55
Personal Services	\$ 14,141,327	\$ 14,681,079	\$ 14,824,419
Operating Expenses	\$ 13,622,963	\$ 13,810,757	\$ 14,121,528
Equipment	\$ 31,093	\$ 31,093	\$ 31,093
Grants	\$ 14,419,338	\$ 14,419,338	\$ 14,419,338
Benefits & Claims	\$ 313,482,869	\$ 303,646,593	\$ 307,647,974
Transfers	\$ 4,000	\$ 4,000	\$ 4,000
Debt Services	\$ 76,284	\$ 91,099	\$ 91,099
TOTAL COSTS	\$ 355,777,874	\$ 346,683,959	\$ 351,139,451
	FY 2021 Budget	FY 2022 Request	FY 2023 Request
General Fund	\$ 75,545,946	\$ 77,584,365	\$ 79,286,298
State Special	\$ 48,609,891	\$ 45,245,048	\$ 45,254,467
Federal Funds	\$ 231,622,037	\$ 223,854,546	\$ 226,598,686
TOTAL FUNDS	\$ 355,777,874	\$ 346,683,959	\$ 351,139,451



Change Packages

Present Law Adjustments:

SWPL 1 – Personal Services

The budget includes an increase of \$285,100 total funds in FY 2022 and \$314,942 total funds in FY 2023 to annualize various personal services costs including FY 2021 statewide pay plan, benefit rate adjustments, longevity adjustments related to incumbents in each position at the time of the snapshot, and vacancy savings.

	General Fund	State Special	Federal Funds	Total Request
FY 2022	\$286,192	(\$60,047)	\$58,955	\$285,100
FY 2023	\$294,974	(\$67,660)	\$87,628	\$314,942
Biennium Total	\$581,166	(\$127,707)	\$146,583	\$600,042

SWPL 2 – Fixed Costs

Fixed costs are fees charged to agencies for a variety of services provided by other state agencies. The executive requests adjustments in fixed costs. Examples include warrant writer, motor pool, etc. The rates charged for these services are approved in the section of the budget that provides the services.

	General Fund	State Special	Federal Funds	Total Request
FY 2022	\$0	\$12,334	\$4,531	\$16,865
FY 2023	\$0	\$12,334	\$4,531	\$16,865
Biennium Total	\$0	\$24,668	\$9,062	\$33,730

SWPL 3 – Inflation Deflation

The executive requests adjustments to reflect budgetary changes generated from the application of inflation and deflation factors to specific expenditure accounts. Affected accounts include food, postage, gasoline, and others.

	General Fund	State Special	Federal Funds	Total Request
FY 2022	(\$10,237)	(\$27)	(\$2,120)	(\$12,384)
FY 2023	(\$6,420)	(\$17)	(\$1,329)	(\$7,766)
Biennium Total	(\$16,657)	(\$44)	(\$3,449)	(\$20,150)

PL – 22002 - Overtime-Holiday-Differential-MVH Montana

The executive requests a present law adjustment to maintain existing services for the Montana Veterans' Home in the Senior and Long-Term Care Division. This change package requests \$576,403 in total funds for the biennium. The increase is intended to fund overtime to maintain required staffing levels at this 24/7 acute services facility in addition to what is funded in SWPL 1. This change package requests an increase of \$432,303 in state special revenue and \$144,100 in federal funds for the biennium.

	General Fund	State Special	Federal Funds	Total Request
FY 2022	\$0	\$210,921	\$70,306	\$281,227
FY 2023	\$0	\$221,382	\$73,794	\$295,176
Biennium Total	\$0	\$432,303	\$144,100	\$576,403

PL – 22004 - MVH Per Diem Request – SLTC

The executive requests a present law adjustment to federal authority for the federal Veterans Administration per diem rates that will be reimbursed for the nursing facility days of care at the Montana Veterans Home (MVH) in the Senior and Long-Term Care Division in the 2023 biennium. The VA per diem rate increases effective October 1st of each year. This change package requests a federal funds reduction of \$223,395 in FY 2022 and an increase of \$5,006 in FY 2023.

	General Fund	State Special	Federal Funds	Total Request
FY 2022	\$0	\$0	(\$223,395)	(\$223,395)
FY 2023	\$0	\$0	\$5,006	\$5,006
Biennium Total	\$0	\$0	(\$218,389)	(\$218,389)

PL – 22005 - EMVH Per Diem Request - SLTC

The executive requests a present law adjustment to federal authority for the federal Veterans Administration per diem rates that will be reimbursed for the nursing facility days of care at the Eastern Montana Veterans Home (EMVH) in the Senior and Long-Term Care Division in the 2023 biennium. The VA per diem rate increases effective October 1st of each year. This change package requests an increase in federal funds of \$440,965 in FY 2022 and \$518,769 in FY 2023.

	General Fund	State Special	Federal Funds	Total Request
FY 2022	\$0	\$0	\$440,965	\$440,965
FY 2023	\$0	\$0	\$518,769	\$518,769
Biennium Total	\$0	\$0	\$959,734	\$959,734

PL – 22006 - Medicaid Fund Switch

The executive requests a present law change package which reduces state special expenditures by \$851,852 each year of the biennium with an offsetting increase in general fund to align appropriation with anticipated expenditures.

Fiscal Year	General Fund	State Special	Federal Funds	Total Request
FY 2022	\$851,852	(\$851,852)	\$0	\$0
FY 2023	\$851,852	(\$851,852)	\$0	\$0
Biennium Total	\$1,703,704	(\$1,703,704)	\$0	\$0

PL – 22891 - Med Exp Core SLTC

The executive requests a present law adjustment for caseload growth in the Senior and Long-Term Care Division to cover anticipated increase in the number of eligible individuals, utilization, acuity levels, and cost per service for medical care. This change package requests an increase of \$1,519,974 in total funds for the biennium. The biennial funding is \$151,998 in general fund and \$1,367,976 in federal funds.

	General Fund	State Special	Federal Funds	Total Request
FY 2022	\$72,296	\$0	\$650,664	\$722,960
FY 2023	\$79,701	\$0	\$717,313	\$797,014
Biennium Total	\$151,997	\$0	\$1,367,977	\$1,519,974

PL – 22893 - Med Exp Fed SLTC

The executive requests a present law adjustment which consists of a reduction of \$79,886 federal funds authority over the biennium. Funding is 100% federal funds.

	General Fund	State Special	Federal Funds	Total Request
FY 2022	\$0	\$0	(\$39,943)	(\$39,943)
FY 2023	\$0	\$0	(\$39,943)	(\$39,943)
Biennium Total	\$0	\$0	(\$79,886)	(\$79,886)

PL – 22991 - Med Core SLTC

The executive requests a present law adjustment for caseload growth in the Senior and Long-Term Care Division to cover anticipated change in the number of eligible individuals, utilization, acuity levels, and cost per service for medical care. This change package requests a reduction of \$5,236,901 in total funds. The biennial funding is a reduction of \$1,115,620 in general fund and a reduction of \$5,236,901 in federal funds.

	General Fund	State Special	Federal Funds	Total Request
FY 2022	(\$1,657,097)	\$0	(\$2,921,697)	(\$4,578,794)
FY 2023	(\$393,137)	\$0	(\$264,970)	(\$658,107)
Biennium Total	(\$2,050,234)	\$0	(\$3,186,667)	(\$5,236,901)

PL – 22992 - Med Waiver SLTC

The executive requests a present law adjustment for caseload growth in the Senior and Long-Term Care Division to cover anticipated increase in the number of eligible individuals, utilization, acuity levels, and cost per service for medical care. This change package requests an increase of \$3,929,968 in total funds. The biennial funding is \$1,351,909 in general fund and \$2,578,059 in federal funds.

	General Fund	State Special	Federal Funds	Total Request
FY 2022	\$687,548	\$0	\$1,277,436	\$1,964,984
FY 2023	\$689,710	\$0	\$1,275,274	\$1,964,984
Biennium Total	\$1,377,258	\$0	\$2,552,710	\$3,929,968

PL – 22993 - Med Federal SLTC

The executive requests a present law adjustment for caseload growth in the Senior and Long-Term Care Division to cover anticipated change in the number of eligible individuals, utilization, acuity levels, and cost per service for medical care. This change package requests a reduction of \$130,008 in total funds for the biennium. The program is funded with 100% federal funds.

	General Fund	State Special	Federal Funds	Total Request
FY 2022	\$0	\$0	(\$68,323)	(\$68,323)
FY 2023	\$0	\$0	(\$61,685)	(\$61,685)
Biennium Total	\$0	\$0	(\$130,008)	(\$130,008)

PL – 22994 - Med Other SLTC

The executive requests a present law adjustment in the Community Services Bureau Direct Care Wage and Health Care for Health Care Workers program and the Medicaid Intergovernmental Transfer (IGT) program in the Senior and Long-Term Care Division. The change package requests a reduction in total funds of \$15,674,320. The biennial funding is a reduction in state special revenue of \$5,393,492, and a reduction in federal funds of \$10,181,254.

	General Fund	State Special	Federal Funds	Total Request
FY 2022	(\$49,708)	(\$2,692,514)	(\$5,094,938)	(\$7,837,160)
FY 2023	(\$49,864)	(\$2,700,978)	(\$5,086,316)	(\$7,837,158)
Biennium Total	(\$99,572)	(\$5,393,492)	(\$10,181,254)	(\$15,674,318)

PL – 22996 - Med Core FMAP SLTC

The executive requests a present law adjustment to maintain existing services for the Nursing Facility and Home-Based programs in the Senior and Long-Term Care Division. This change package requests a general fund increase of \$1,766,536 In FY 2022 and \$2,011,992 in FY 2023 with offsetting federal fund adjustments for each year. The total cost for the program does not change.

	General Fund	State Special	Federal Funds	Total Request
FY 2022	\$1,766,536	\$0	(\$1,766,536)	\$0
FY 2023	\$2,011,992	\$0	(\$2,011,992)	\$0
Biennium Total	\$3,778,528	\$0	(\$3,778,528)	\$0

PL – 22997 - Med Waiver FMAP SLTC

The executive requests a present law adjustment in the Medicaid waiver program in the Senior and Long-Term Care Division. This change package requests a reduction in general fund of \$71,765 in FY 2022 and \$24,285 in FY 2023 with offsetting federal fund adjustments for each year. The total cost for the program does not change.

	General Fund	State Special	Federal Funds	Total Request
FY 2022	(\$71,765)	\$0	\$71,765	\$0
FY 2023	(\$24,285)	\$0	\$24,285	\$0
Biennium Total	(\$96,050)	\$0	\$96,050	\$0

PL – 22998 - Med Other FMAP SLTC

The executive requests a present law adjustment in the Community First Choice Direct Care Wage and Health Care for Health Care Workers program and the Intergovernmental Transfer program in the Senior and Long-Term Care Division. This change package requests an increase in general fund of \$262,300 in FY 2022 and \$285,829 in FY 2023 with offsetting reductions in state special revenue of \$37,139 in FY 2022 and \$22,113 in FY 2023 and in federal funds of \$225,161 in FY 2022 and \$263,716 in FY 2023. The total cost for the program does not change.

	General Fund	State Special	Federal Funds	Total Request
FY 2022	\$262,300	(\$37,139)	(\$225,161)	\$0
FY 2023	\$285,829	(\$22,113)	(\$263,716)	\$0
Biennium Total	\$548,129	(\$59,252)	(\$488,877)	\$0

New Proposals:

NP – 22001 - SW MT Veterans Home FTE

The executive requests 1.00 FTE to serve as a full time, on-site liaison to oversee the operations of Southwest Montana Veterans Home, which will be managed by a third-party vendor. The federal Veterans Administration requires this liaison to be onsite in order to be eligible for VA funding. DPHHS currently has a modified FTE in the position but needs a permanent FTE to fulfill the VA requirements. There is no net additional cost to fund the permanent position.

	General Fund	State Special	Federal Funds	Total Request
FY 2022	\$0	(\$1,519)	\$0	(\$1,519)
FY 2023	\$0	(\$1,520)	\$0	(\$1,520)
Biennium Total	\$0	(\$3,039)	\$0	(\$3,039)

NP – 18001 - O&M for New Facilities

Pursuant to 17-7-210, operations and maintenance costs for the Southwest Montana Veterans' Home Enclosed Walkways are projected to total \$110,000 of state special funds for FY 2022 and FY 2023. This new proposal is contingent on passage and approval of HB 14, and that HB 14 include an appropriation for construction of the enclosed walkways.

	General Fund	State Special	Federal Funds	Total Request
FY 2022	\$0	\$55,000	\$0	\$55,000
FY 2023	\$0	\$55,000	\$0	\$55,000
Biennium Total	\$0	\$110,000	\$0	\$110,000

NP – 5555 - Reduce GF Budget for State Share Holiday

Governor Gianforte has proposed legislation to impose a two-month state share holiday for employer contributions into the state health insurance fund. This change package removes the general fund portion of the savings generate by the contribution holiday. Savings from other funding sources will remain in the agency to be able to address ongoing functions of the agency. This change package is contingent on passage and approval of the proposed legislation.

	General Fund	State Special	Federal Funds	Total Request
FY 2022	(\$99,498)	\$0	\$0	(\$99,498)
FY 2023	\$0	\$0	\$0	\$0
Biennium Total	(\$99,498)	\$0	\$0	(\$99,498)