



Multnomah County Agenda Placement Request Budget Modification

(Revised 9/23/13)

Board Clerk Use Only

Meeting Date: _____

Agenda Item #: _____

Est. Start Time: _____

Date Submitted: _____

Agenda Title: BUDGET MODIFICATION # DCHS-28-15: Increase the DCHS ADS Division
Medicaid Title XIX Federal/State Fund Appropriation by \$1,727,956

Requested Meeting Date: _____ **Time Needed:** 10 Minutes

Department: 25 - County Human Services **Division:** Aging & Disability Services

Contact(s): Dana Lloyd

Phone: 503-988-4073 **Ext.** 84073 **I/O Address** 167/240

Presenter Name(s) & Title(s): Peggy Brey, ADS Division Director 2 and Joe Easton, ADS Long
Term Care Manager Senior

General Information

1. What action are you requesting from the Board?

The Department of County Human Services (DCHS), Aging and Disability Services Division (ADSD) is requesting approval of budget modification DCHS-28-15, which increases ADSD State allocated Medicaid funds in FY2015 by \$1,727,956.

2. Please provide sufficient background information for the Board and the public to understand this issue. Please note which Program Offer this action affects and how it impacts the results.

The State of Oregon's Legislatively Approved Budget provided significant strategic investments in Aging and Persons with Disability programs for the 2013-2015 biennium and resulted in increased funding for Medicaid staffing in ADSD. These additional Medicaid funds became available in FY2015 as a result of a new State billing process for waived case management service reimbursement. In addition, the lengthy process to fill over 46 new positions last year resulted in unspent Medicaid salary dollars that are now available in FY2015 to address current year needs. The additional \$1,727,956 funding will be used to: (1) increase staff by twenty-four (24) positions – nine (9) permanent and fifteen (15) limited duration – to provide needed support and reduce workload for support staff, provide added support to case managers and clinical service specialists and to provide quality assurance, oversight and monitoring of HIPAA privacy practices in branch offices (2) contract for intercultural training and (3) reconfigure current space to accommodate the new positions.

The overall result of the additional funding will be a reduction in the Case Manager 1 caseload size from 468 to 429 and a reduction in the Case Manager 2 caseload size from 103 to 99. Support positions in Long Term Care and Adult Protective Services will increase from 58 to 65 and from 2 to 3, respectively. Adult Care Home monitoring positions will increase from 2 to 3.

The budgets in the following Aging & Disability Services Program Offers will increase:

ADS Long Term Care Program (25023) - \$1,495,836

ADS Care Home Program (25022) - \$53,325

ADS Adult Protective Services (25024A) - \$59,247

ADS Administration (25027) - \$119,548

3. Explain the fiscal impact (current year and ongoing).

The FY2015 fiscal year budget for Aging & Disability Services will increase by a total of \$1,727,956.

Personnel Costs will increase by \$1,060,242 to fund 6.00 FTE current FY permanent positions (9.00 FTE annualized) and 10.05 FTE current FY limited duration positions (15.00 FTE annualized).

Professional Services will increase by \$95,000 to fund two Building Partnerships Across Differences (BPAD) sessions and for three half-day Cultural Agility training classes for all ADSD staff.

Repairs & Maintenance expense will increase by \$450,462 to allow for the refurbishing and reconfiguration of space at the East and Mid-County Long Term Care branches and the Lincoln Building to accommodate additional staffing needs. The expense is estimated based upon previous moves/reconfiguration costs.

Other Material & Services costs related to the staff addition will increase by \$82,742.

Central Indirect costs generated by the additional Medicaid funding will increase by \$39,510.

The service reimbursement to the risk management fund will increase by \$267,240 (insurance).

Total service reimbursement to the general fund contingency will increase by \$39,510 (central indirect revenue).

4. Explain any legal and/or policy issues involved.

N/A

5. Explain any citizen or other government participation.

N/A

Budget Modification

6. What revenue is being changed and why? If the revenue is from a federal source, please list the Catalog of Federal Assistance Number (CFDA).

Medicaid funds (CFDA# 93.778) are increasing based on the legislatively approved State of Oregon budget and the new biennial allocation.

7. What budgets are increased/decreased?

The fiscal year 2015 budget for Aging & Disability Services will increase by \$1,727,956.

The service reimbursement from the Federal/State fund to the risk management fund will increase by \$267,240.

Total service reimbursement to the general fund contingency will increase by \$39,510 (central indirect revenue).

8. What do the changes accomplish?

The additional funding allows ADSD to address expanding workloads and caseloads for staff providing long term care services, adult protective services and adult care home services.

9. Do any personnel actions result from this budget modification?

Yes. This budget modification results in the addition of 9.00 FTE (annualized) permanent positions and 15.00 FTE (annualized) limited duration positions to the Aging & Disability Services division.

Case Manager 1 – 6.00 FTE (Permanent)

Case Manager 2 – 3.00 FTE (Permanent)

Office Assistant 2 – 7.00 FTE (Limited Duration)

Program Technician – 7.00 FTE (Limited Duration)

Case Management Assistant – 1.00 FTE (Limited Duration)

All positions have been submitted for classification review and have been approved by HR Class/Comp.

10. If a grant, is 100% of the central and department indirect recovered? If not, please explain why.

Medicaid Title XIX funds pay 100% of central indirect costs.

11. Is the revenue one-time-only in nature? Will the function be ongoing? What plans are in place to identify a sufficient ongoing funding stream?

This allocation represents ongoing funding.

12. If a grant, what period does the grant cover? When the grant expires, what are funding plans? Are there any particular stipulations required by the grant (e.g. cash match, in kind match, reporting requirements, etc)?

The current biennial DHS Medicaid service contract expires June 30, 2015. However the contract is renewable and on-going.

Required Signature

**Elected Official or
Dept. Director:** _____

Date: _____

Budget Analyst: _____

Date: _____

Department HR: _____

Date: _____

Countywide HR: _____

Date: _____