



LEGISLATIVE FINANCE COMMITTEE HEARING

Katrina Hotrum-Lopez, Cabinet Secretary
November 17, 2020

AGENCY INITIATIVES



Increased Medicaid billing through APS



Continuing to address senior food insecurity

- Over 12,000 food boxes from now till 10/31



AAA and provider contracts now cost reimbursement not 'unit cost' based



ALTSD On-Demand App



Expanding volunteer capacity – 563 applied through online portal as of 8/6



SamScan for Aging Network and all tribes and pueblos



Increased social media presence



Implementing and expanding peer support services and community health workers



Adapted senior services to meet needs and ensure safety

- “grab-and-go meals”
- Create and Connect Initiative



Increasing access to health care and behavioral healthcare through provider partnerships



Worked with local farmers to provide fresh fruits and vegetables



Managing testing in nursing homes and assisted living facilities about 5,000 tests a week



ADRC utilizing reverse mortgage counseling



Ombudsman Town Halls



Increased guardianship filings



Almost 30% increase in seniors served through the aging network since March



ALTSD BUDGET OVERVIEW

Agency Language Request

- Program Transfer Authority
- Non-Reverting Language
- 12.5% Distribution
- Conference on Aging Non-Reverting
- Tax Refund Non-Reverting
- Emergency Funding for Aging Network Providers (\$600,000)

FY 20 Actuals	\$46,290,500
FY 21 Budget	\$48,628,900
FY 22 Request (5% Cut)	\$46,197,500
FY 22 Anticipated Costs	\$52,519,212
Difference	- \$6,321,712



FY22 Proposed Reductions

<u>Division</u>	<u>Amount</u>	<u>Percentage</u>
P591 – Program Support	\$360,000	6.4%
P592 – Consumer and Elder Rights	\$60,000	3.6%
P593 – Adult Protective Services	\$1,619,000	14.9%
P594 – Aging Network	\$392,500	1.3%
Total Reduction	\$2,431,500	5%

P591 – Program Support IT

WellSky

- Purchased tablets for all AAA providers
- Purchased service scan licenses for all AAA providers
- Updated system configuration
- Upgrades and maintenance

Software and Hardware

- Implemented E-File Cabinet for the Aging Network Division
- Remote management software


Upgrade IT Infrastructure

- Cloud-based platforms for enhanced telework
- Unexpected COVID-related IT costs


WellSky - FY 21 Costs	\$451,020
All Other IT Costs	\$434,813
WellSky - FY 22 Estimated Costs	\$816,110



P592 CERD – Aging and Disability Resource Center

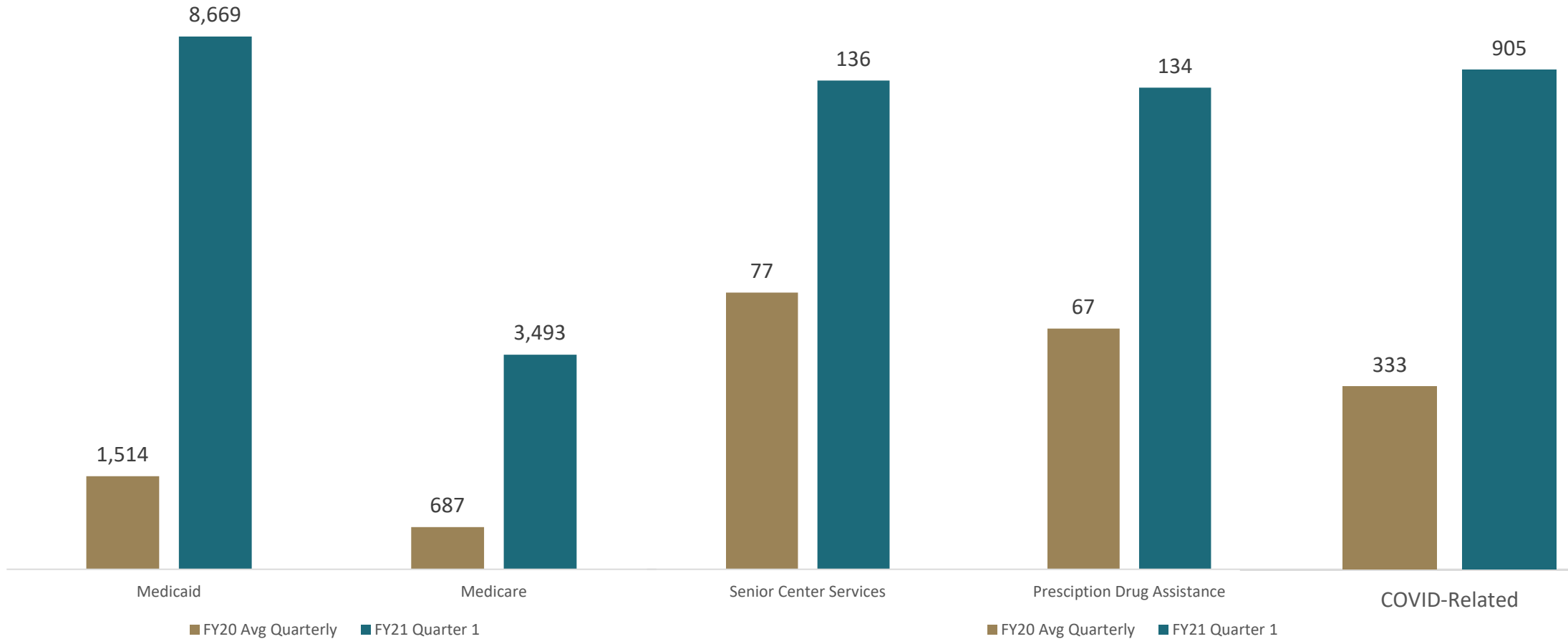
 **472%**
Increase

 **408%**
Increase

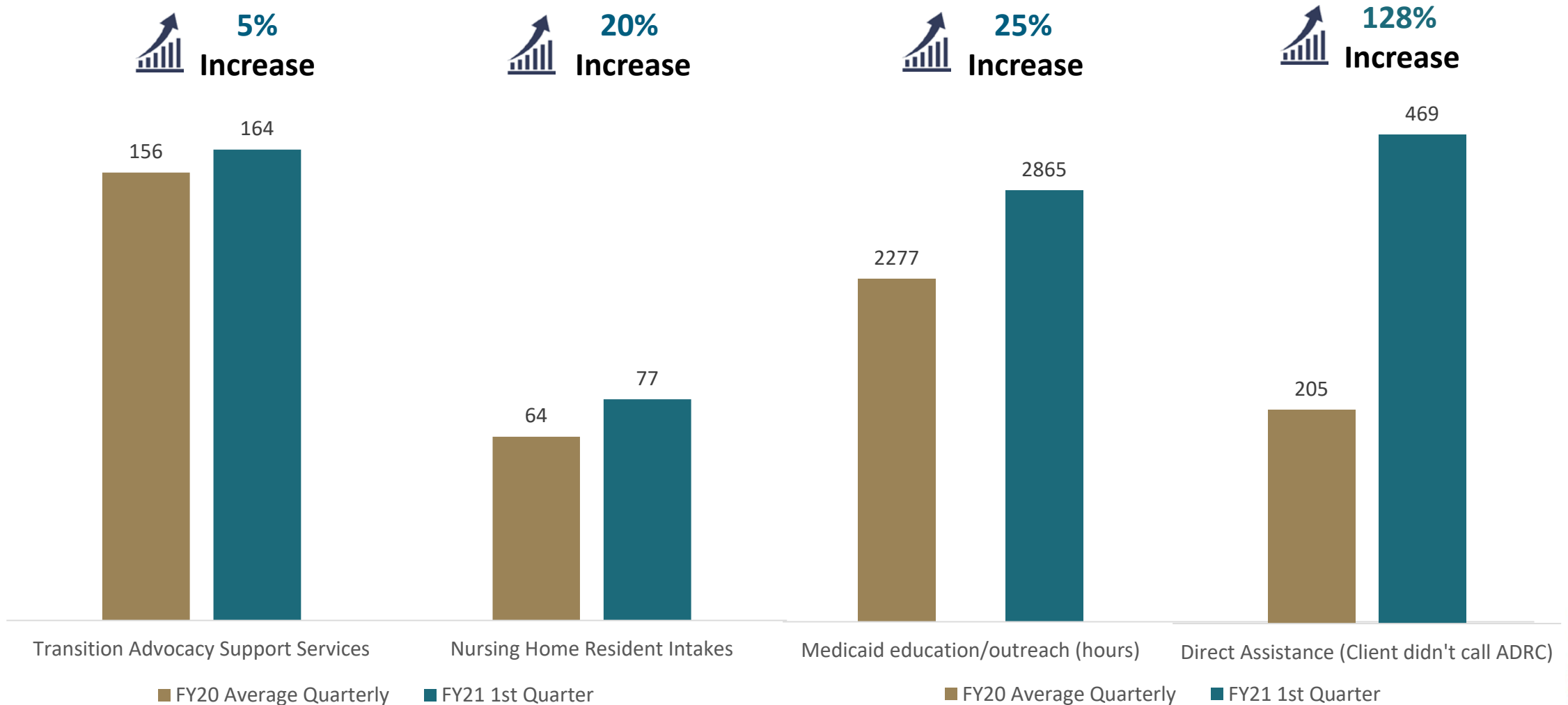
 **76%**
Increase

 **100%**
Increase

 **171%**
Increase



P592 CERD - Care Transitions



*8 Staff

Investing for Tomorrow, Delivering Today



P592 Long-Term Care Ombudsman

Resident Rights

Advocacy

Complaints and Investigations

Quality of Care

Access to Justice

11,000+

Residents across 340 long term care facilities

- ❑ 457 non-covid related complaints since August 2020
- ❑ Current process is using digital (phone and camera) and closed window visits for communication

8

Designated statewide ombudsman. 52 statewide volunteers, 23 inactive due to COVID, 7 newly recruited volunteers pending training. 25 prospective recruitments.

2,374

Contacts with residents and families needing assistance. Aug 2020-Nov 2020

11

Involuntary discharge disputes from August 4 2020– November 4 2020

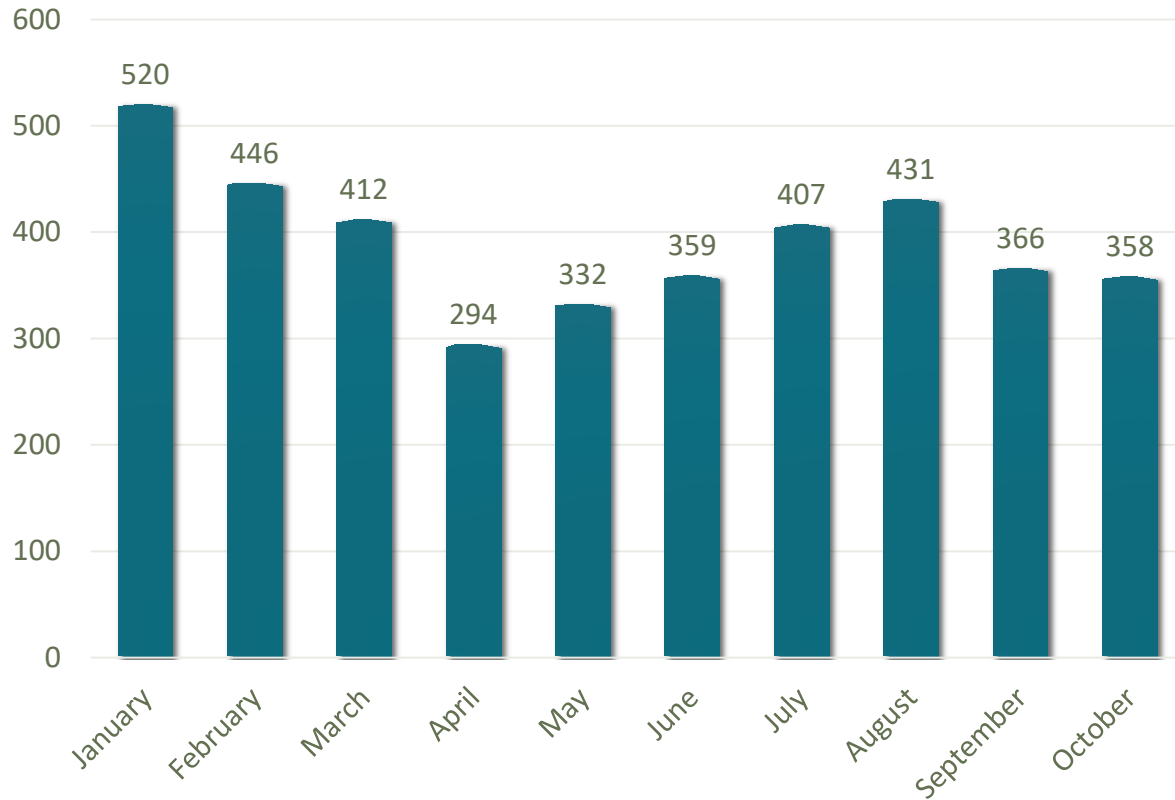
*Involuntary discharge dispute is a discharge from a facility without consent of resident that is challenged by OMB and CTS staff.



P593 – Adult Protective Services

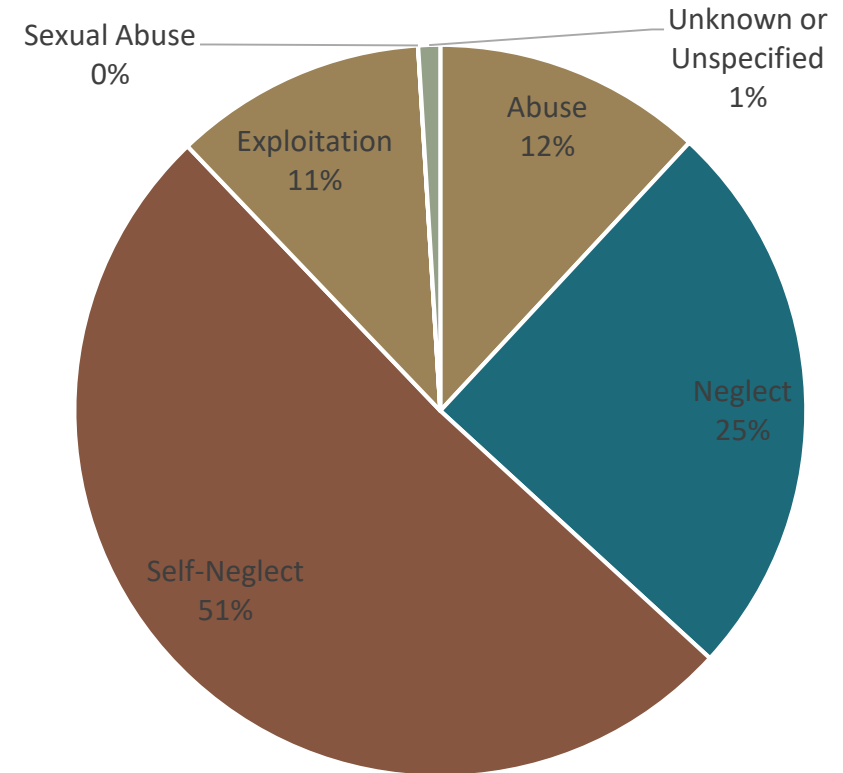
Investigations

January – October 2020



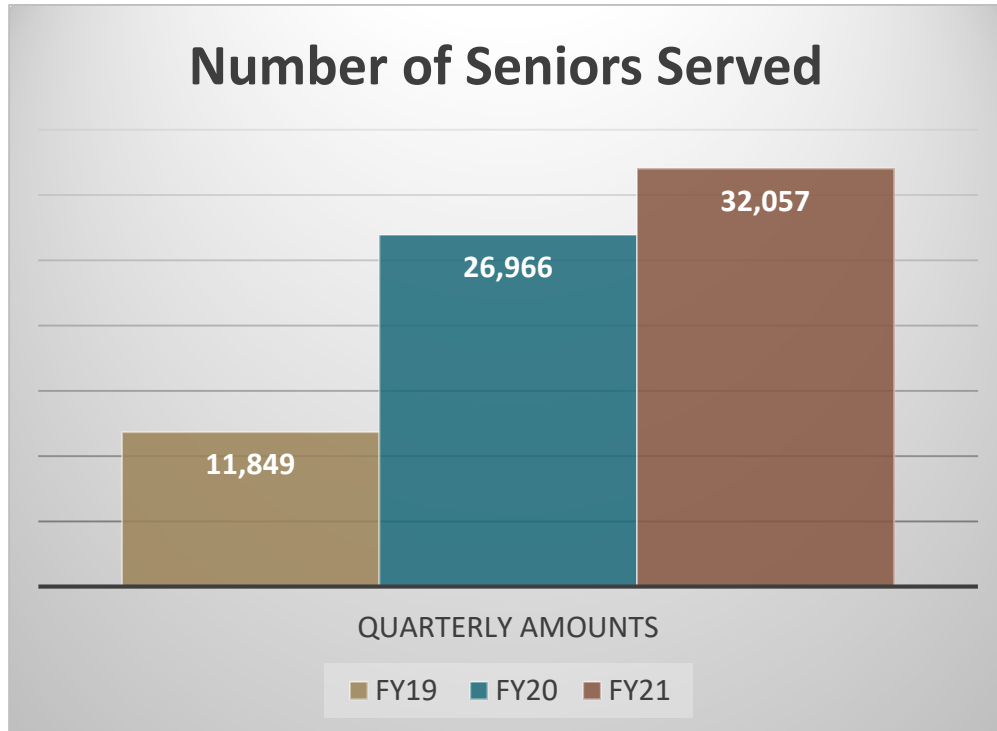
Allegations

January – October 2020

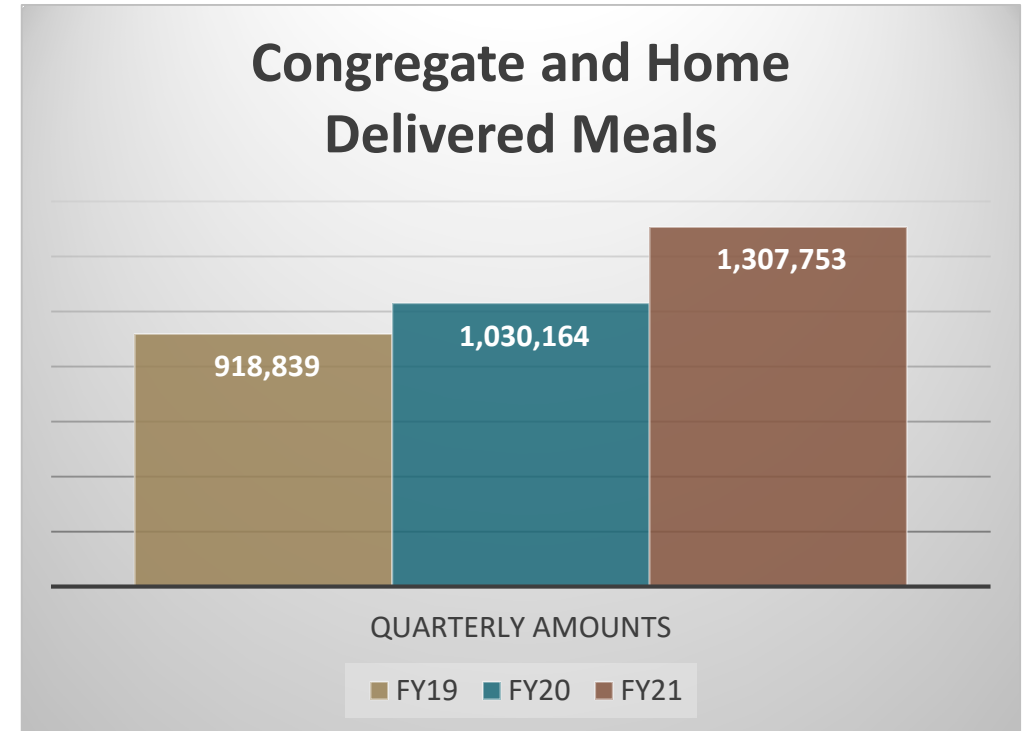


■ Abuse ■ Neglect ■ Self-Neglect ■ Exploitation ■ Sexual Abuse ■ Unknown or Unspecified

P594 – Aging Network



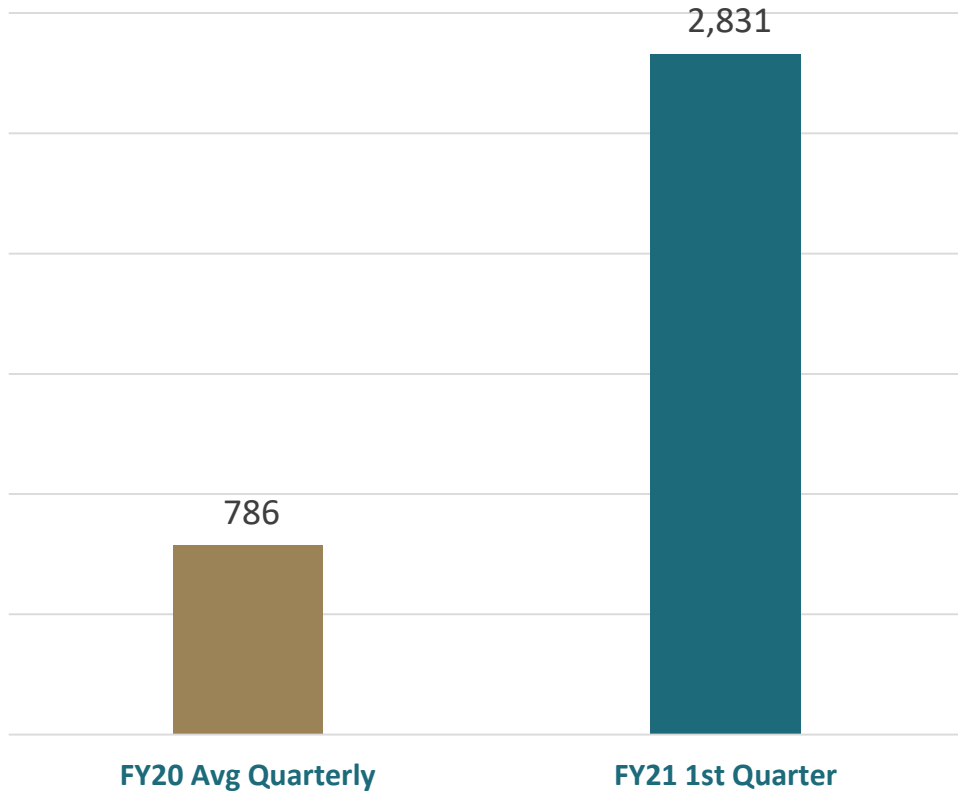
*First quarter in FY21 has exceeded average quarterly amounts in FY20 by 19%



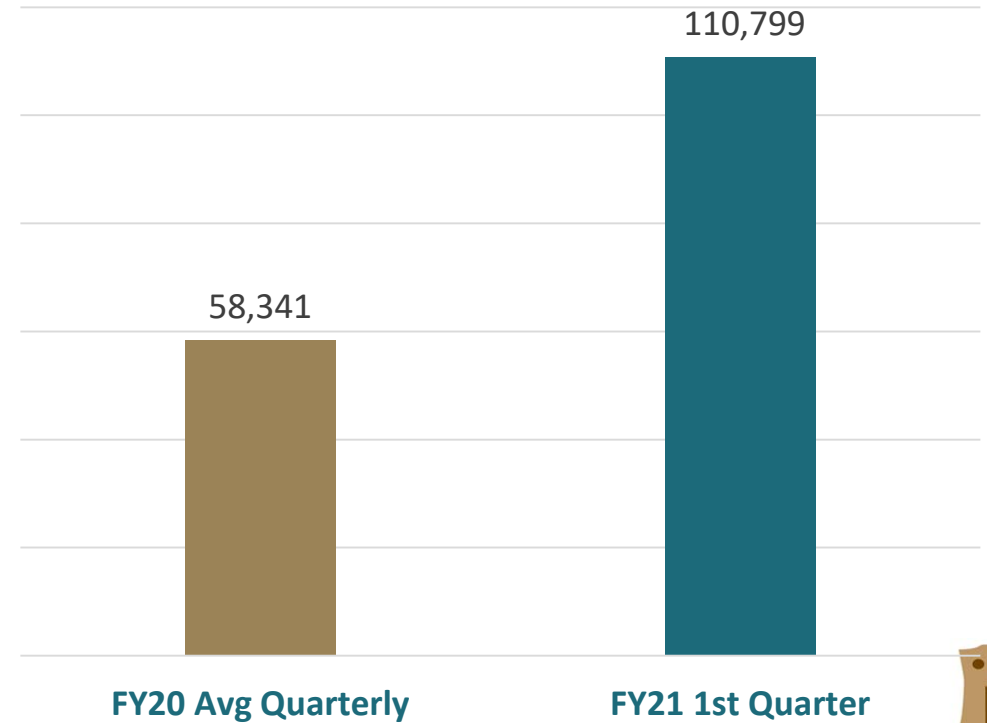
*First quarter in FY21 has exceeded average quarterly amounts in FY20 by 27%

P594 – Aging Network – IAAA

 **260% Increase**
Seniors Served



 **90% Increase**
Meals Served



* Does not include Navajo Nation

Program Support

300's – Eliminated professional services contract

400's – Reduced IT

- However, we are seeing the longer term affects of teleworking is requiring increased expenses to streamline and digitize paper driven processes, while also ensuring systems are remotely accessible and secure.

Program	Revised Operating	Reduction*	FY22 Request	Total % Change
200	3,972.0		3,972.0	
300	190.2	(30.0)	160.2	
400	1,456.9	(330.0)	1,126.9	
P-Code Total	5,619.1	(360.0)	5,259.1	6.4%



Consumer and Elder Rights Division (CERD)

- **200's** – Flat from FY21 due to the required Medicaid Match.
- **300's** – Analyzed contracts that have not been fully utilized and reduced appropriately.
- **400's** - Leverage federal money where appropriate to cover leased vehicles

Program	Revised Operating	Reduction*	FY22 Request	Total % Change
200	1,427.2		1,427.2	
300	99.8	(30.0)	69.8	
400	154.9	(30.0)	124.9	
P-Code Total	1,681.9	(60.0)	1,621.9	3.6%



Adult Protective Services (APS)

- **200's** - is being reduced by relying on an increase to the Medicaid dollars. If we do not receive this increase the division will not be able to withstand this decrease.
- **300's** - New price agreement for providers of adult services aligned with Medicaid rates, in order to ensure appropriate transition to Medicaid or other services.
- **400's** – eliminated lease agreements.

Program	Revised Operating	Reduction	FY22 Request	Total % Change
200	8,992.8	(1,698.2)	7,294.6	
300	945.1	309.2	1,254.3	
400	939.4	(230.0)	709.4	
P-Code Total	10,877.3	(1,619.0)	9,258.3	14.9%



Aging Network Division (AND)

- In the Aging Network Division, the agency reduced programs by 2% or less.(Pegasus, LREP, SEP, Senior Olympics, FGP, SCP) These reductions were made in order to reach the 5% cut to the FY22 budget.
- Increase of senior services since the onset of COVID-19 has resulted in increase expenditures. A shortfall is predicted based on 1st quarter expenditures.

Program	Revised Operating	Reduction	FY22 Request	Total % Change
200	800.7	(6.1)	794.6	
300	1,237.2	(2.1)	1,235.1	
400	28,412.7	(384.3)	28,028.5	
P-Code Total	30,450.6	(392.5)	30,058.1	1.3%



CONSUMER AND ELDER RIGHTS DIVISION

PAST

- Telephonic (live), web-based, and in-person counseling, including Medicaid, Medicare, prescription drug assistance, Veterans' Direct Program, and information and assistance
- In person outreach presentations

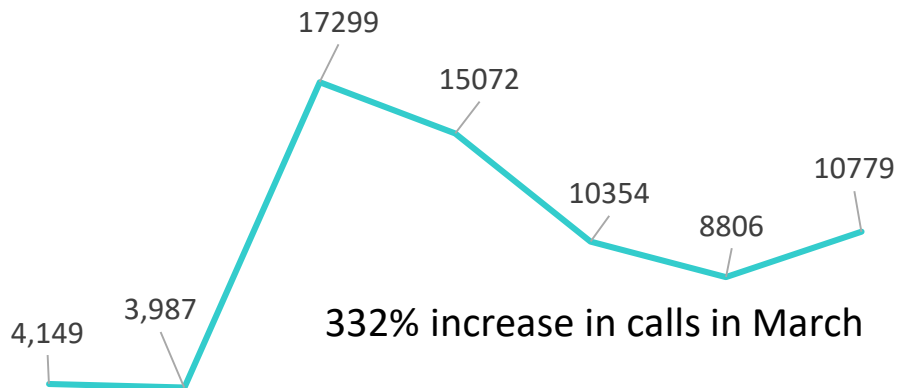
PRESENT

- Telephonic call-backs
- Web-based, and virtual counseling for
 - Medicaid & Medicare
 - Prescription drug assistance
 - Veterans' Direct Program
 - Information and assistance
- Virtual outreach presentations for community partners
 - Cancer Foundation of New Mexico, New Vistas, and Quay County Health Council

FUTURE

- Telephonic, virtual, and on-demand counseling and services
 - YesNM, HHS 2020, digital signatures
- Implementation of virtual presentations and training
- Increase advertisement and outreach through community partners to reach rural populations
- Engaging volunteers in modernizing intakes and benefit services

ADRC # of Contacts
January - July 2020



AGING NETWORK DIVISION

PAST

Senior Services- Title III & GF funds support:

- 3 AAA's
- 6 PSA's
- 161 senior centers
- 14 meal sites
- 39 centers on the Navajo Nation

To provide in person:

- nutritional services
- congregate and home delivered meals
- transportation
- in-home services
- case management
- caregiver respite
- chore service
- adult day services

PRESENT

- 127% increase in seniors accessing services
 - Grab-and-go/home delivered meal requests
 - Modified services transportation, chore services, adult day
 - Providing virtual check-ins
- In FY20 9,341 seniors accessed transportation services for a total of 290,072 transports
- All senior centers remain closed
- Reopening guidance drafted

FUTURE

- Hybrid model for senior centers with both in-person and virtual service options
- Sites will continue to provide grab-and-go & home delivered meals
- Modernizing activities and services to combat isolation
- Adult day services and in-home services (homemaker and caregiver respite) is a priority



LONG-TERM CARE OMBUDSMAN

PAST

- In-person access to facilities and one-on-one in-person meeting with residents
- Undercover work at facilities to gather information regarding abuse, neglect, and substandard care
- Meetings with multiple families at facilities or designated locations to discuss concerns
- Recruitment efforts in local and county communities

PRESENT

- Window visits, virtual visits via tablets, digital spot checks
- Close contacts with family members and residents for monitoring facilities
- Digital team of 30+ volunteers statewide
- 15 volunteers that support our window visitation efforts
- Facility visitation plans – the ombudsman receives these plans and ensures distribution to families
 - 20 facilities have submitted plans
- Weekly town halls with resident families

FUTURE

- Dedicated support to expand volunteer positions and technology assistance to facilities
- Expanded joint ventures with local and county governments to help refer cases of abuse, neglect, and exploitation to District Attorney's and Attorney Generals Office (special prosecutor)
- Anticipating needs for discharge defense and legal resource support to establish a dedicated legal team for this specific group of residents
- MDS data utilization to target at-risk facilities and engage families



ADULT PROTECTIVE SERVICES

PAST

- In-person investigations of allegations, alleged victims and perpetrators as well as collateral contacts
- Home and attendant care services provided in alleged victims homes
- In person outreach presentations at senior centers, banks, law enforcement and healthcare organizations

PRESENT

- Conducting phone, FaceTime, and socially distanced investigations
- Modified home and attendant care services
- APS has developed a testing procedure that allows Investigative Case Workers to make more face-to-face contact while ensuring client and worker safety
- Presenting at Ombudsman Town hall meetings

FUTURE

- Blended model of in person and virtual investigations based upon allegation severity and client comfort level
- Implementing a robust outreach plan included virtual options
- Adult service adaption to ensure safety and support
- MDS data utilization

