

## PRESENTATION TO THE 2023 HEALTH AND HUMAN SERVICES JOINT APPROPRIATION SUBCOMMITTEE

# Senior and Long-Term Care Division

### **Medicaid and Health Services Practice**

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 2023 Biennium**
- **Efficiencies and Cost Savings**
- **Funding and FTE Information**
- **Change Packages**

# OVERVIEW

The Senior and Long-Term Care Division (SLTC) serves older adults and the physically disabled through three main programs. Aging and Community Service Bureaus, provide services, ranging from basic in-home care to nursing facility services, which create a long-term care system for Montanans. The third program, Adult Protective Services, acts as the safety system to assure older adults and adults with disabilities are protected from abuse, neglect, and exploitation.

The Mission of the Senior and Long-Term Care Division is to work to advance dignity and independence through quality long term care services and supports.

## DEMOGRAPHICS

The work of SLTC is influenced by the changing demographics of older and disabled Montanans. Technology and advancements in medical care have extended life expectancy for both groups. This population growth is best represented by the predicted growth of the over 60 population by 2030.

By 2030, Montana can expect an 8.44% growth (or 91,151 persons) in persons over the age of sixty. The highest growth counties by percentage and persons are:

Population Growth by Percentage		Population Growth by Persons	
<u>Madison</u>	35.95%	<u>Gallatin</u>	34,218
<u>Gallatin</u>	29.30%	Yellowstone	12,266
Treasure	27.29%	Flathead	12,119
Meagher	26.47%	Missoula	11,177
Powder River	25.80%	Lewis and Clark	7,718
Stillwater	15.48%	<u>Ravalli</u>	6,074
Broadwater	15.38%	<u>Madison</u>	3,219
Carbon	14.18%	Silver Bow	2,153
Golden Valley	13.70%	Park	1,756
<u>Ravalli</u>	13.50%	Lincoln	1,601

*Demographics drive the size of the direct care work force needed for community based and facility services, the location of Adult Protective Service Investigators, number of nursing home beds and the need for congregate and delivered meals.*

The counties with the greatest population loss are:

Population loss by percentage		Population loss by persons	
Pondera	-8.23%	Custer	(497)
Petroleum	-8.60%	<u>Musselshell</u>	(554)
<u>Chouteau</u>	-9.84%	<u>Chouteau</u>	(560)
<u>BigHorn</u>	-10.33%	Richland	(604)
<u>Blaine</u>	-10.35%	Dawson	(617)
<u>Musselshell</u>	-11.88%	<u>Blaine</u>	(681)
<u>Glacier</u>	-12.19%	<u>Big Horn</u>	(1,349)
Liberty	-13.65%	<u>Roosevelt</u>	(1,598)
<u>Roosevelt</u>	-14.59%	<u>Glacier</u>	(1,657)
<u>Rosebud</u>	-21.20%	<u>Rosebud</u>	(1,872)

## PRIMARY SERVICES

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Senior and Long-Term Care provides services to seniors and the physically disabled by:

- The Adult Protective Services (APS) program, which provides education on and investigative work pertaining to abuse, neglect, and financial exploitation of Montana's seniors and adult disabled community. Additionally, APS serves as guardian for 90 plus individuals as ordered by a court.
- Establishing and managing a state plan on aging led by the Aging Services Bureau, in collaboration with the ten Area Agencies on Aging (AAA), and tribal programs for the Montanans 60 years of age and older. The Aging Services Bureau oversees nutritional programs, the long-term care ombudsman program, legal services, caregiver support, and information and assistance service.
- Administering Medicaid programs through the Community Services Bureau, which is comprised of nursing facility services, the Big Sky Waiver program personal assistance, Community First Choice, home health, and hospice.
- Nursing Facility Services – Establishes and maintains a state plan for 60 Skilled Nursing Facilities (SNF) and 47 Critical Access Hospitals (CAH) for Swing Bed services across the state.

## SUMMARY OF MAJOR FUNCTIONS

The division is divided into three bureaus: Adult Protective Services Bureau, Aging Services Bureau and the Community Services Bureau. Administrative functions are supported by a Central Services Bureau.

### ADULT PROTECTIVE SERVICES BUREAU

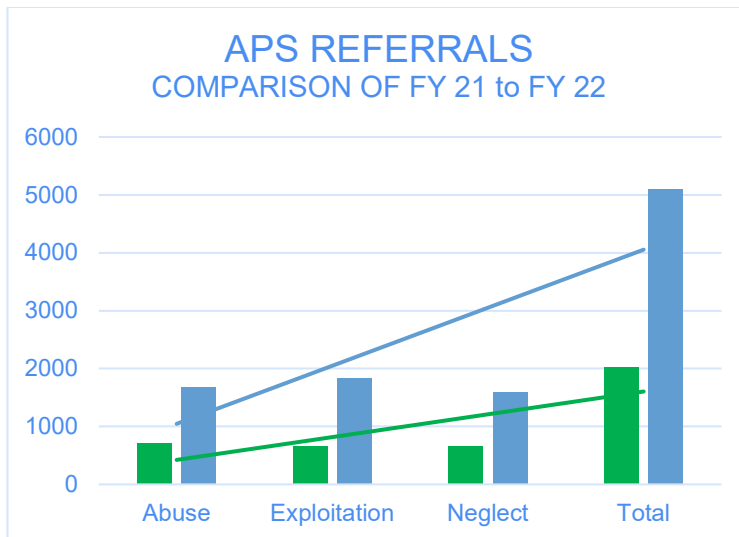
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APS promotes the safety, independence, and quality-of-life for adults ages 60 years of age and older, and those ages 18-59 with a disability, by providing effective investigation of suspect abuse, neglect, and exploitation

APS investigators work in the field gathering information by interviewing the alleged victim, other persons aware of the situation, and the alleged perpetrator. APS investigators coordinate with

*APS experienced an 86% increase in referrals between FY 21 and FY 22, of those 8% were cross reported to law enforcement or tribal services.*

local law enforcement officials, county attorneys, and the Elder Justice Prosecutor with DOJ, when suspected criminal activity results in a recommendation for prosecution. Investigators also work with provider entities to address systemic issues. APS Investigators collaborate with Tribal agencies and partners to address maltreatment in Tribal communities.



Montana’s aging population is growing rapidly, and reports of adult maltreatment are increasing. There is a demand for investigative services provided by Adult Protective Services to address the issues of adult maltreatment, track perpetrators, and connect at-risk adults to support services.

### Guardianship Work

APS used dedicated grant funds to create a Social Services Program to monitor, re-assess and evaluate the guardianship needs of the 90+ guardianship cases appointed to the State. A major issue is the inconsistency related to the process of appointment of the department the ward. No two counties completed it in the same manner.

### Public Education

Staff members are assigned to provide education on identifying and reporting abuse, neglect and/or exploitation. The team has worked with nursing homes, private businesses, the Montana Law Enforcement Academy, and other bureaus in the division. All SLTC contracts require APS training as those working under contracts are mandatory reporters.

**To Report Abuse, Neglect or  
Exploitation**  
**1 800 277 9300**

### Elder Justice Councils

By executive order Governor Gianforte expanded the Elder Justice Council to include four regional councils: Western, North Central, South Central, and Eastern. The councils will provide coordination of agency and community efforts within their regions to address and reduce the abuse, neglect, and exploitation of senior citizens and adults with disabilities. Duties include establishing partnerships with stakeholders, providing and promoting educational outreach, and defining best practices. The council work is administratively tied to DPHHS. Key partners include Department of Justice and Commissioner of Securities and Insurance.

# AGING SERVICES BUREAU

## Oversight of the Older Americans Act (OAA) Programs.

The mission of the OAA is broad: to help older people maintain maximum independence in their homes and communities, and to promote a continuum of care for older adults. The Act is considered the major vehicle for the delivery of supportive and nutrition services to the aging population. In Montana, OAA services are managed through contracts with ten local Area Agencies on Aging (AAA). As Montana ages, additional supports will be needed to maintain and build on the network of services created by the local AAAs.

Older America Act services such as nutritional programs, the long-term care Ombudsman program, legal services developer activities, caregiver support and information and assistance services. These services have experienced increases since last biennium. COVID allowed for increased identification of seniors in need. In FY 2022:

- 612,909 meals were served in a congregate setting
- 1.1 million meals were served under the home delivery program
- Provided direct assistance in 39,056 information and assistance calls
- The legal developer program experienced 739 cases involving 2,776 legal issues for support by program, contract and volunteer staff, including pro bono attorneys
- The value of services rendered under the legal developer program exceeded \$350,000
- Respite vouchers of \$202,000 were distributed to eligible Montanans living in 48 counties, and
- The Ombudsman program received 1593 complaints from residents and/or family members.

The Ombudsman program may not, *by federal law*, report suspected abuse, neglect, or exploitation to APS without the permission of the resident.

Among the challenges to the aging services network is the ability to keep up with demand in the face of a growing older adult population, especially those with multiple chronic conditions, socially isolated, have low incomes, live in rural areas and/or those who live in long term care facilities and lack advocates. In addition is the impending impact of Alzheimer’s and dementia diagnosis growth and the need for specific services as well as the dwindling numbers of individuals choosing Aging Services as a career.

Ombudsman Complaints Received			
FY 2022			
Top Five Complaint Categories	Nursing Home	ALF & SB	Total
Abuse, Neglect, and Exploitation	287	86	373
Care	273	100	373
Admission, Transfer, Discharge, Eviction	110	73	183
Autonomy, Choice, Rights	109	65	174
Activities, Community Integration, Social Services	78	27	105
Subtotal	857	351	1208
All Other Categories	186	199	385
Total Received	1043	550	1593

## Funding

*Geographic size of a state is not a factor in the federal funding formula. MT and VT receive the same federal allotment.*

The federal funding formula provides for a pro rata share of the total congressional appropriation-based population of individuals over 60 or a minimal allotment. Montana receives a minimal allotment, which is a flat amount. In accepting this allotment Montana agrees to provide mandatory services such as the long-term care Ombudsman program. OAA services in Montana are matched with state and local funds.

## State Plan

To be eligible for OAA funds, each state must complete a state plan every four years. Montana is currently completing the state plan for FFY 2024 through FFY 2028. This plan is a compilation of the Area Agency on Aging (AAA) plans rolled into a single statewide plan focusing on common activities and actions over the next four years. Grant funds were used to complete a statewide survey that includes a breakdown by each planning and service area. Results of this survey indicate older adult needs include affordable and accessible housing (44%), quality health care (44%), information about available services (42%), quality physical health care (39%) and the variety and quality of employment opportunities (22%).

## COMMUNITY SERVICES BUREAU

SLTC manages Medicaid community-based services for eligible members to remain in their homes and 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. Community Services also manages the nursing facility services program. The bureau includes:

*All services in this unit are dependent upon the direct care workforce. Challenges include recruitment, retention, availability, continuing training, background checks (for some services) and pay.*

- Personal Assistance Services – Basic assistance in the member’s home.
- Community First Choice Services – Expanded personal assistance including time for community integration. Members must meet nursing facility level of care. This program receives an additional 6% in federal match.
- Home Health - Licensed and certified home health agencies provide skilled nursing and physical, occupational, and speech therapy services in settings where normal life occurs.
- Hospice- Hospice agencies focus on providing palliative, non-curative, care to individuals with a terminal condition. The service also includes support to families during the illness and after the loved one’s death.

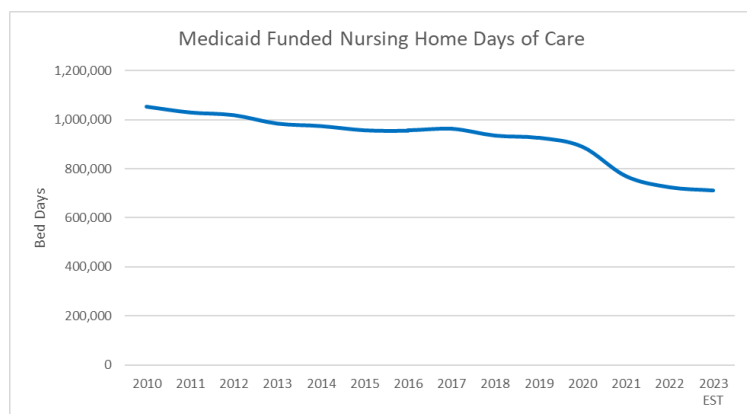
- Big Sky Waiver - This program began in 1982 and has been adapted over time to meet service delivery preferences of the elderly and the physically disabled. To be eligible for the Big Sky Waiver an individual must be Medicaid eligible for long term care services, require nursing facility level of care, and need a service available only through the program. To receive services, funding must be available, or the individual is placed on the waiting list.
  - Big Sky Waiver services include homemaker, extended personal care, adult day care, respite, habilitation, transportation, home modifications, nursing services, and adult residential care provided in an assisted living facility or adult foster home. All members receive case management services. The service highest in demand is Assisted Living.
    - During FY 22, 305,188 days of Assisted Living were covered at the cost of \$31.7 million.
- Montana's Money Follows the Person (MFP) - This is a federal grant that helps elders and/or those with disabilities move from facility-based care back to the community. MFP provides supports and connects members to home and community based served (HCBS) that transition from nursing facilities and other long stay hospital settings to the community.

To comply with federal law, the bureau must execute a strong quality assurance strategy for personal assistance, Community First Choice, and the Big Sky Waiver. This includes such items as monitoring the federal settings rule, providing oversight of incident management to assure health and safety, and member satisfaction.

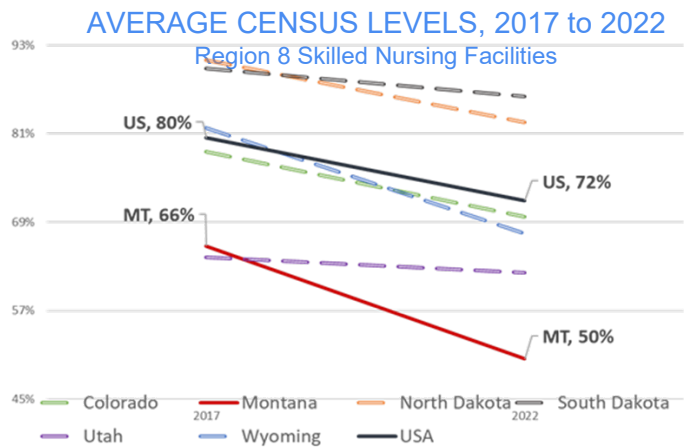
## Nursing Facility Services

This program provides room, board, daily attendant and nursing services, ancillary items, and some specialty care in Montana's 60 nursing homes. All facilities must be certified and licensed to qualify for payment. Montana Medicaid members pay a resident contribution rate that is set based on individual circumstances.

Facilities are paid a per day rate, an annual lump sum payment for the Intergovernmental Transfer program, and biannual payments for direct care worker wages. The demand for nursing home services has been slowly decreasing since 2010. COVID accelerated that decline.



Montana is not the only state facing challenges. Across the nation states are struggling with similar issues. Montana was hit particularly hard from COVID. The FY 2017 occupancy rate of 66% fell to 50% in February of 2022. For comparison, national averages were 80% and 72% respectively. Montana experienced the sharpest decline in occupancy within CMS Region 8 states. The chart indicates that Montana’s occupancy rate fell twice the national average.



Montana’s occupancy decline is due to several different influences, including the COVID-19 public health emergency (PHE) as well as continued interest in home and community-based services that better permit individuals to age in place. As is apparent in the above figures, the COVID-19 pandemic accelerated these trends, considering that the onset of the pandemic had a higher morbidity and mortality impact on nursing facilities than on some other provider types.

This pandemic-related impact was two-fold: first, a reduction in patient census, which lowered patient revenue, and second, a reduction in available staff, due to clinical workers becoming infected or staying home to avoid illness. This reduction in staff made fewer beds available for patients, further reducing occupancy and revenue.

Montana has experienced the closures of 11 facilities over the course of the biennium. This has removed 857 licensed beds from inventory. Department staff have calculated the occupancy rate calculation of the percentage of licensed beds occupied, since the late 1970s. During that period the denominator has changed from due to closures, conversions, and expansions. As of December 19, 2022, the occupancy rate is 55.9%. Montana could just return to pre-covid occupancy rate, due only to the reduction in the number of licensed beds.



# ACCOMPLISHMENTS DURING THE 2023 BIENNIUM

## FINANCIAL SAVINGS FOR SENIORS

- The legal developer program opened 793 cases which had 2776 legal issues associated with them. The legal clinics, in person or by phone, provided services to 322 individuals. The value of such services was approximately \$350,000
- The State Health Insurance Assistance Program (SHIP) provides Medicare counseling services during open enrollment and during other special enrollment periods. Often SHIP counselors made a difference in the quality of life of Montana seniors, such as assuring correct pricing for insulin which can save a beneficiary about \$565 a month.

## INCREASED SERVICES IN RURAL AREAS

Adult Protective Services was awarded funds to aid individuals impacted by COVID who needed assistance to remain in their homes. Area 1 Agency on Aging based out of Glendive worked with APS and Aging Services Bureau to identify homes where individuals could remain if safety issues were resolved. Over 100 referrals were received. Area 1 consists of 17 eastern counties and is the largest AAA in the nation.

## FORENSIC INTERVIEWING TRAINING FOR ADULT PROTECTIVE SERVICES STAFF

Forensic interviewing is a technique to gather information from older adults or the disabled who may have experienced abuse, neglect, or exploitation. Forty-four APS staff, predominantly investigators are enrolled in the 96-hour class. The department is the second entity to take this training targeted specifically to older adults. The first was the US Federal Bureau of Investigations.

## EFFICIENCIES AND COST SAVINGS

### REVISED THE CIVIL MONETARY PENALTY REINVESTMENT PROGRAM

Montana received a portion of the penalties levied to Montana nursing facilities for routine or special survey deficiencies. A portion of the funds can be used for the purpose of enhancing resident lives. SLTC collects, reviews, and submits the applications to Centers for Medicaid and Medicare Services. Improvements included:

- Utilized contract services to create and manage plan revisions
- Revised the state plan for CMP grants
- Created a Montana Application Template for ease the application process
- Utilized an email box for questions and submissions of applications

- Implemented auto reminder for providers to request an application

## NURSING FACILITIES UNIT TRANSITION

The nursing facilities unit was integrated into the Community Services Bureau and the newly created Facility Services Section. The section covers policy, reimbursement and monitoring requirements for both Nursing Facilities and Assisted Living. This change has allowed:

- Increased customer services to providers
- Revision of business process to improve efficiency for all parties
- Provided education to assist providers for accessing all Medicaid resources
- Implemented training programs for internal and external customers

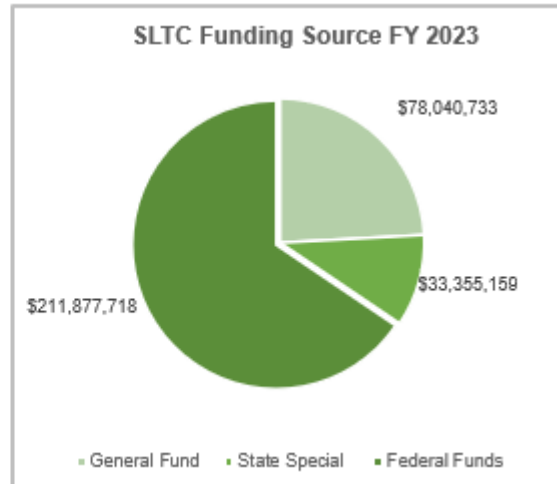
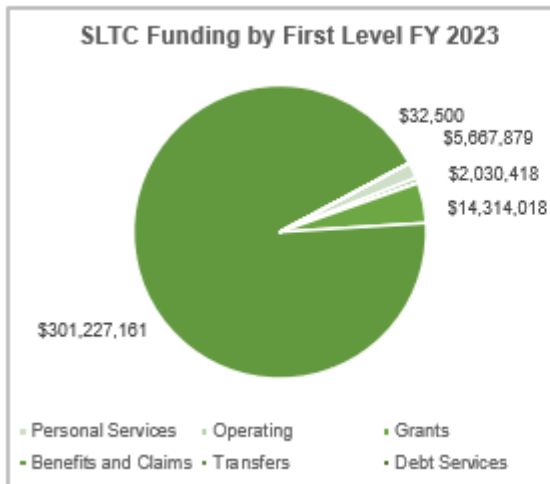
## SUPPORT SAFE NURSING HOME AND ASSISTED LIVING TRANSFERS

SLTC division staff created an assistance process that supported member choice, efficiency, and safety during transfers from closing facilities.

- Created a work group consisting of SLTC and Office of the Inspector General staff to share information, update plans, and work through situations as they arose
- Worked directly with facility staff to assist in discharge planning to place high need/risk individuals
- Negotiated rates and service for high need/risk individuals avoiding out of state placements
- Involved Adult Protective Services in suspect abuse, neglect, or exploitation situations
- Assured availability of ombudsman services throughout process

# FUNDING AND FTE INFORMATION

SENIOR & LONG TERM CARE	FY 2023 Budget	FY 2024 Request	FY 2025 Request
FTE	74.75	74.75	74.75
Personal Services	\$5,667,879	\$5,417,488	\$5,452,074
Operating	\$2,030,418	\$2,588,605	\$2,616,549
Grants	\$14,314,018	\$14,314,018	\$14,314,018
Benefits and Claims	\$301,227,161	\$305,233,434	\$340,820,491
Transfers	\$32,500	\$32,500	\$32,500
Debt Services	\$1,634	\$1,634	\$1,634
<b>TOTAL COSTS</b>	<b>\$323,273,610</b>	<b>\$327,587,679</b>	<b>\$363,237,266</b>
	<b>FY 2023 Budget</b>	<b>FY 2024 Request</b>	<b>FY 2025 Request</b>
General Fund	\$78,040,733	\$81,479,398	\$92,824,666
State Special Fund	\$33,355,159	\$33,137,160	\$33,128,000
Federal Fund	\$211,877,718	\$212,971,121	\$237,284,600
<b>TOTAL FUNDS</b>	<b>\$323,273,610</b>	<b>\$327,587,679</b>	<b>\$363,237,266</b>



# CHANGE PACKAGES

## PRESENT LAW ADJUSTMENTS

### SWPL 1 – Personal Services

The request includes reductions of \$205,041 in FY 2024 and \$170,455 in FY 2025 to annualize various personal services costs including FY 2023 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
<b>FY 2024</b>	(\$62,355)	(\$41,190)	(\$101,496)	(\$205,041)
<b>FY 2025</b>	(\$37,756)	(\$40,905)	(\$91,794)	(\$170,455)
<b>Biennium Total</b>	(\$100,111)	(\$82,095)	(\$193,290)	(\$375,496)

### SWPL 3 – Inflation Deflation

The request includes an increase of \$108,006 in FY 2024 and \$135,950 in FY 2025 to reflect budgetary changes generated from the application of inflation to specific expenditure accounts. Affected accounts include those associated with supplies & materials, communications, repair & maintenance, state motor pool, and other services.

	General Fund	State Special	Federal Funds	Total Request
<b>FY 2024</b>	\$52,263	\$1,608	\$54,135	\$108,006
<b>FY 2025</b>	\$69,201	\$2,143	\$64,606	\$135,950
<b>Biennium Total</b>	\$121,464	\$3,751	\$118,741	\$243,956

### PL 22003 – Ombudsman Caseload

This present law adjustment is necessary to maintain existing services for the Long Term Care Ombudsman Program in the Senior and Long Term Care Division. This change package requests \$499,980 in total funds for the biennium including \$249,990 in state special and \$249,990 in federal funds.

	General Fund	State Special	Federal Funds	Total Request
<b>FY 2024</b>	\$0	\$124,995	\$124,995	\$249,990
<b>FY 2025</b>	\$0	\$124,995	\$124,995	\$249,990
<b>Biennium Total</b>	\$0	\$249,990	\$249,990	\$499,980

## PL 22006 – Increase Capacity of CMP Grant Program

This present law adjustment is necessary to maintain existing services for Civil Monetary Penalty (CMP) Program in the Senior and Long Term Care Division. This change package requests \$159,682 in federal funds for the biennium.

	General Fund	State Special	Federal Funds	Total Request
<b>FY 2024</b>	\$0	\$0	\$79,841	\$79,841
<b>FY 2025</b>	\$0	\$0	\$79,841	\$79,841
<b>Biennium Total</b>	\$0	\$0	\$159,682	\$159,682

## PL 22100 – Med Core CFC Caseload SLTC

This present law adjustment is necessary to fund the caseload growth in the Community First Choice Program in the Senior and Long Term Care Division. This request covers the increase in the number of eligible individuals, utilization, acuity levels, and cost per service for medical care. This change package requests \$2,240,863 in total funds for the biennium including \$668,775 in general fund and \$1,572,088 in federal funds.

	General Fund	State Special	Federal Funds	Total Request
<b>FY 2024</b>	\$172,729	\$0	\$401,313	\$574,042
<b>FY 2025</b>	\$496,046	\$0	\$1,170,775	\$1,666,821
<b>Biennium Total</b>	\$668,775	\$0	\$1,572,088	\$2,240,863

## PL 22101 – FMAP Adjustment CFC SLTC

This present law adjustment is necessary to maintain existing services for the Community First Choice Program in the Senior and Long Term Care Division. The biennial funding increases general fund by \$127,544 and includes an offsetting decrease in federal funds. The total cost for the program does not change.

	General Fund	State Special	Federal Funds	Total Request
<b>FY 2024</b>	\$132,565	\$0	(\$132,565)	\$0
<b>FY 2025</b>	(\$5,021)	\$0	\$5,021	\$0
<b>Biennium Total</b>	\$127,544	\$0	(\$127,544)	\$0

## PL 22891 – Expansion Core Caseload SLTC

This present law adjustment is necessary to fund the caseload growth in the Senior and Long Term Care Division. This request covers the increase in the number of eligible individuals, utilization, acuity levels, and cost per service for medical care. This change package requests \$436,142 in total funds for the biennium including \$43,614 in general fund and \$392,528 in federal funds.

	General Fund	State Special	Federal Funds	Total Request
<b>FY 2024</b>	\$14,606	\$0	\$131,456	\$146,062
<b>FY 2025</b>	\$29,008	\$0	\$261,072	\$290,080
<b>Biennium Total</b>	\$43,614	\$0	\$392,528	\$436,142

## PL 22892 – Expansion CFC Core Caseload SLTC

This present law adjustment is necessary to fund the caseload growth in the Expansion Community First Choice (CFC) Program in the Senior and Long Term Care Division. This covers the increase in the number of eligible individuals, utilization, acuity levels, and cost per service for medical care. This change package requests \$4,457,165 in total funds for the biennium including \$178,287 in general fund and \$4,278,878 in federal funds.

	General Fund	State Special	Federal Funds	Total Request
<b>FY 2024</b>	\$91,377	\$0	\$2,193,042	\$2,284,419
<b>FY 2025</b>	\$86,910	\$0	\$2,085,836	\$2,172,746
<b>Biennium Total</b>	\$178,287	\$0	\$4,278,878	\$4,457,165

## PL 22991 – Med Core Caseload SLTC

This present law adjustment is necessary to fund a caseload reduction in the Senior and Long Term Care Division. The change in the number of eligible individuals, utilization, acuity levels, and cost per service for medical care. This change package reduces \$2,462,547 in total funds for the biennium including reductions of \$883,562 in general fund and \$1,578,985 in federal funds.

	General Fund	State Special	Federal Funds	Total Request
<b>FY 2024</b>	(\$2,109,738)	\$0	(\$3,736,031)	(\$5,845,769)
<b>FY 2025</b>	\$1,213,900	\$0	\$2,169,322	\$3,383,222
<b>Biennium Total</b>	(\$895,838)	\$0	(\$1,566,709)	(\$2,462,547)

## PL 22992 – FMAP Adjustment Med Core SLTC

This present law adjustment is necessary to maintain existing services for the Senior and Long Term Care Division. The biennial funding increases general fund by \$3,046,581 and includes an offsetting decrease in federal funds. The total cost for the program does not change.

	General Fund	State Special	Federal Funds	Total Request
<b>FY 2024</b>	\$1,690,522	\$0	(\$1,690,522)	\$0
<b>FY 2025</b>	\$1,356,059	\$0	(\$1,356,059)	\$0
<b>Biennium Total</b>	\$3,046,581	\$0	(\$3,046,581)	\$0

## PL 22993 – Med Federal Caseload SLTC

This present law adjustment is necessary to fund a caseload reduction in the Senior and Long Term Care Division. The change in the number of eligible individuals, utilization, acuity levels, and cost per service for medical care. This change package requests a biennial reduction in federal funds of \$949,530.

	General Fund	State Special	Federal Funds	Total Request
<b>FY 2024</b>	\$0	\$0	(\$474,765)	(\$474,765)
<b>FY 2025</b>	\$0	\$0	(\$474,765)	(\$474,765)
<b>Biennium Total</b>	\$0	\$0	(\$949,530)	(\$949,530)

## PL 22994 – Med Other IGT Caseload SLTC

This present law adjustment is necessary to fund a caseload reduction for the Medicaid IGT Program in the Senior and Long Term Care Division, including the changes in the number of eligible individuals, utilization, acuity levels, and cost per service for medical care. This change package reduces \$2,642,016 in total funds for the biennium including reductions of \$947,956 in state special and \$1,694,060 in federal funds.

	General Fund	State Special	Federal Funds	Total Request
<b>FY 2024</b>	\$0	(\$476,752)	(\$844,256)	(\$1,321,008)
<b>FY 2025</b>	\$0	(\$473,978)	(\$847,030)	(\$1,321,008)
<b>Biennium Total</b>	\$0	(\$950,730)	(\$1,691,286)	(\$2,642,016)

## PL 22995 – FMAP Adjustment IGT SLTC

This present law adjustment is necessary to maintain existing services for the Intergovernmental Transfer (IGT) Program in the Senior and Long Term Care Division. The biennial funding increases state special funds by \$183,296 and includes an offsetting decrease in federal funds. The total cost for the program does not change.

	General Fund	State Special	Federal Funds	Total Request
<b>FY 2024</b>	\$0	\$98,340	(\$98,340)	\$0
<b>FY 2025</b>	\$0	\$85,586	(\$85,586)	\$0
<b>Biennium Total</b>	\$0	\$183,926	(\$183,926)	\$0

## PL 22996 – Med Waiver Caseload SLTC

This present law adjustment is necessary to fund the caseload growth in the Home and Community Based Waiver Program in the Senior and Long Term Care Division. This request covers the increase in the number of eligible individuals, utilization, acuity levels, and cost per service for medical care. This change package requests \$448,437 in total funds for the biennium including \$160,899 in general fund and \$287,538 in federal funds.

	General Fund	State Special	Federal Funds	Total Request
<b>FY 2024</b>	(\$192,229)	\$0	(\$340,408)	(\$532,637)
<b>FY 2025</b>	\$352,009	\$0	\$629,065	\$981,074
<b>Biennium Total</b>	\$159,780	\$0	\$288,657	\$448,437

## PL 22997 – FMAP Adjustment Med Waiver SLTC

This present law adjustment is necessary to maintain existing services for the Home and Community Based Waiver Program in the Senior and Long Term Division. The biennial funding increases general funds by \$242,493 and includes an offsetting decrease in federal funds. The total cost for the program does not change.

	General Fund	State Special	Federal Funds	Total Request
<b>FY 2024</b>	\$181,388	\$0	(\$181,388)	\$0
<b>FY 2025</b>	\$61,105	\$0	(\$61,105)	\$0
<b>Biennium Total</b>	\$242,493	\$0	(\$242,493)	\$0



## PL 22998 – FMAP Adjustment Med Other DCW HCHCW SLTC

This present law adjustment is necessary to maintain existing services for the Direct Care Wage and Healthcare for Healthcare Workers Program in the Senior and Long Term Care Division. The biennial funding increases general funds by \$646,904 and includes an offsetting decrease in federal funds. The total cost for the program does not change.

	General Fund	State Special	Federal Funds	Total Request
<b>FY 2024</b>	\$338,218	\$0	(\$338,218)	\$0
<b>FY 2025</b>	\$308,686	\$0	(\$308,686)	\$0
<b>Biennium Total</b>	\$646,904	\$0	(\$646,904)	\$0

## PL 22999 – FMAP Adjustment Med Other CFC DCW HCHCW SLTC

This present law adjustment is necessary to maintain existing services for the Community First Choice (CFC) Direct Care Wage and Health Care for Health Care Workers (HCHCW) Program in the Healthcare Facilities Division. The biennial funding increases general fund by \$292,914 and includes an offsetting decrease in federal funds. The total cost for the program does not change.

	General Fund	State Special	Federal Funds	Total Request
<b>FY 2024</b>	\$155,685	\$0	(\$155,685)	\$0
<b>FY 2025</b>	\$137,229	\$0	(\$137,229)	\$0
<b>Biennium Total</b>	\$292,914	\$0	(\$292,914)	\$0

## NEW PROPOSALS

### NP 22555 – Develop Aps Guardianship Program OTO/Bien

This new proposal seeks biennial, one-time-only (OTO) funding for contracted legal services to review current guardianships to identify policy and programmatic issues related to the guardianship process. The contractor would propose solutions and assist Adult Protective Service (APS) Guardianship staff with developing training for case managers, protective services, attorneys, and judges. Additionally, the contractor, in collaboration with APS Guardianship staff, would manage the legal process required to correct, refine, or dismiss current guardianships as appropriate. Funding supports contracted services, travel, equipment, and access to department data. The total funding over the biennium will be \$150,000 in state special funds.

	General Fund	State Special	Federal Funds	Total Request
<b>FY 2024</b>	\$0	\$75,000	\$0	\$75,000
<b>FY 2025</b>	\$0	\$75,000	\$0	\$75,000
<b>Biennium Total</b>	\$0	\$150,000	\$0	\$150,000

## NP 22001 – Med Core Nursing Home Refinance

This new proposal requests a refinance for Medicaid core nursing homes caseload in the Senior and Long Term Care Division. This fund switch will increase state special revenue I-149 funds and decrease state special revenue (nursing home utilization) funds by \$2,850,305 in FY 2024 and \$3,087,305 in FY 2025. The total cost for the program does not change.

	General Fund	State Special	Federal Funds	Total Request
<b>FY 2024</b>	\$0	\$0	\$0	\$0
<b>FY 2025</b>	\$0	\$0	\$0	\$0
<b>Biennium Total</b>	\$0	\$0	\$0	\$0

## NP 22015 – Prov Rate Adj - Medicaid Core

This new proposal requests \$32,411,122 over the biennium for provider rate adjustments. For provider types that were included in the 2023 Biennium provider rate study, the requested increase is a portion of the study's rate proposals. The requested increase for providers not included in the provider rate study is estimated at 4% in FY 2024 and an additional 4% in FY 2025. Those providers eligible for the statutory increases in 53-6-125, MCA, are not captured in this proposal as their adjustment is already included in the Medicaid caseload change packages. Funding for additional one-time-only provider rate adjustments intended to stabilize the care delivery system post-pandemic is included in CP 4444. The biennial request includes \$10,956,255 in general funds, and \$21,454,867 in federal funds.

	General Fund	State Special	Federal Funds	Total Request
<b>FY 2024</b>	\$2,334,427	\$0	\$4,539,460	\$6,873,887
<b>FY 2025</b>	\$8,621,828	\$0	\$16,915,407	\$25,537,235
<b>Biennium Total</b>	\$10,956,255	\$0	\$21,454,867	\$32,411,122

## NP 22016 – Prov Rate Adj - Medicaid Waiver

This new proposal requests \$6,089,624 over the biennium for provider rate adjustments. For provider types that were included in the 2023 Biennium provider rate study, the requested increase is a portion of the study's rate proposals. The requested increase for providers not included in the provider rate study is estimated at 4% in FY 2024 and an additional 4% in FY 2025. Those providers eligible for the statutory increases in 53-6-125, MCA, are not captured in this proposal as their adjustment is already included in the Medicaid caseload change packages. Funding for additional one-time-only provider rate adjustments intended to stabilize the care delivery system post-pandemic is included in CP 4444. The biennial request includes \$2,171,624 in general funds, and \$3,918,000 in federal funds.

	General Fund	State Special	Federal Funds	Total Request
<b>FY 2024</b>	\$466,129	\$0	\$840,196	\$1,306,325
<b>FY 2025</b>	\$1,705,495	\$0	\$3,077,804	\$4,783,299
<b>Biennium Total</b>	\$2,171,624	\$0	\$3,918,000	\$6,089,624

## NP 22017 – Prov Rate Adj - Aging Services

This new proposal requests \$1,678,082 over the biennium for provider rate adjustments. For provider types that were included in the 2023 Biennium provider rate study, the requested increase is a portion of the study's rate proposals. The requested increase for providers not included in the provider rate study is estimated at 4% in FY 2024 and an additional 4% in FY 2025. Those providers eligible for the statutory increases in 53-6-125, MCA, are not captured in this proposal as their adjustment is already included in the Medicaid caseload change packages. Funding for additional one-time-only provider rate adjustments intended to stabilize the care delivery system post-pandemic is included in CP 4444. The biennial request includes \$419,520 in general funds, and \$1,258,562 in federal funds.

	General Fund	State Special	Federal Funds	Total Request
<b>FY 2024</b>	\$139,841	\$0	\$419,520	\$559,361
<b>FY 2025</b>	\$279,679	\$0	\$839,042	\$1,118,721
<b>Biennium Total</b>	\$419,520	\$0	\$1,258,562	\$1,678,082

## NP 22018 – Prov Rate Adj - Medicaid Expansion Core

This new proposal requests \$1,120,393 over the biennium for provider rate adjustments. For provider types that were included in the 2023 Biennium provider rate study, the requested increase is a portion of the study's rate proposals. The requested increase for providers not included in the provider rate study is estimated at 4% in FY 2024 and an additional 4% in FY 2025. Those providers eligible for the statutory increases in 53-6-125, MCA, are not captured in this proposal as their adjustment is already included in the Medicaid caseload change packages. Funding for additional one-time-only provider rate adjustments intended to stabilize the care delivery system post-pandemic is included in CP 4444. The biennial request includes \$111,917 in general funds, and \$1,008,476 in federal funds.

	General Fund	State Special	Federal Funds	Total Request
<b>FY 2024</b>	\$26,325	\$0	\$237,230	\$263,555
<b>FY 2025</b>	\$85,592	\$0	\$771,246	\$856,838
<b>Biennium Total</b>	\$111,917	\$0	\$1,008,476	\$1,120,393

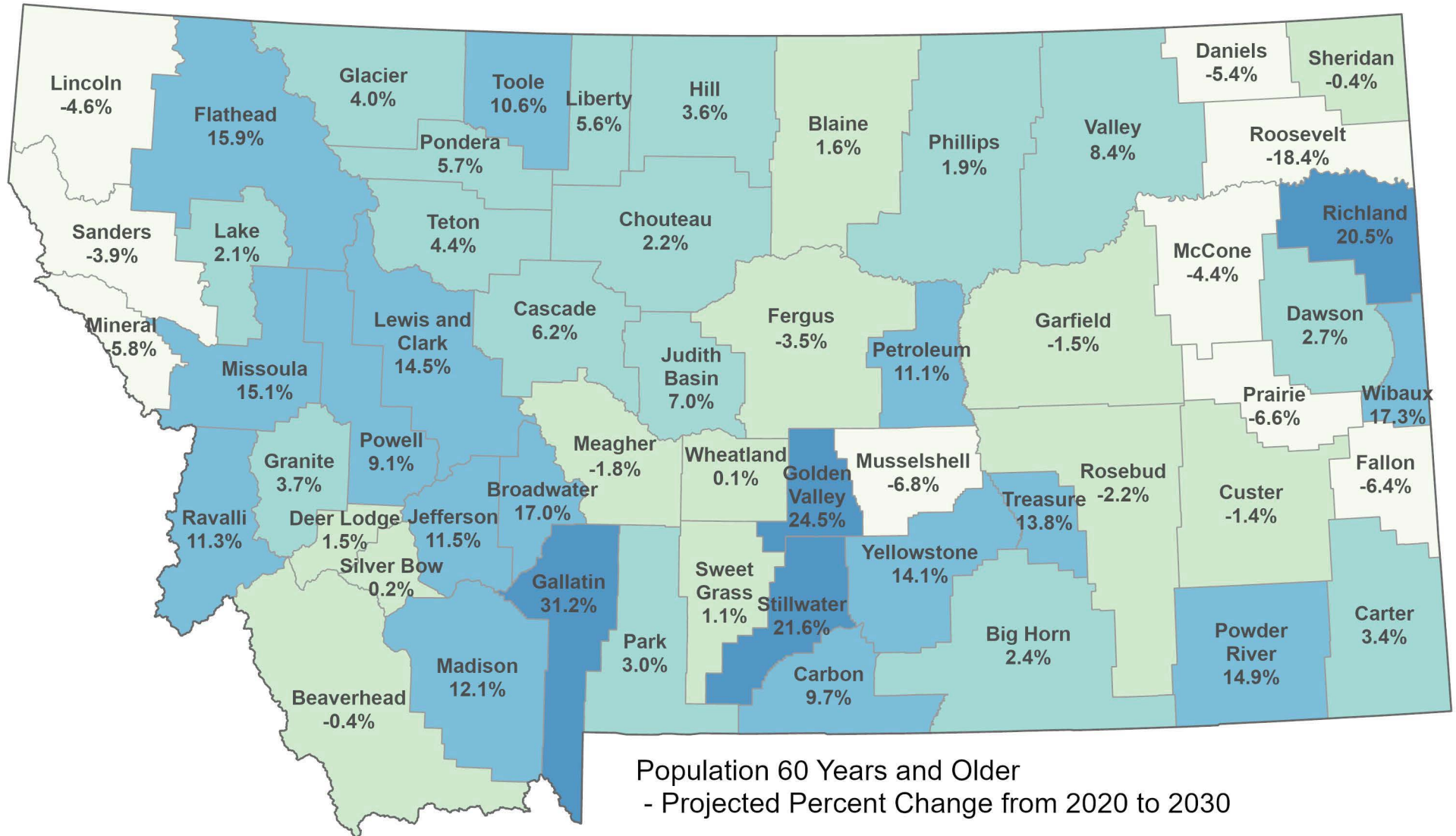
## NP 22019 – Prov Rate Adj - Prov Rate Adj - Medicaid Expansion Core CFC

This new proposal requests \$771,868 over the biennium for provider rate adjustments. For provider types that were included in the 2023 Biennium provider rate study, the requested increase is a portion of the study's rate proposals. The requested increase for providers not included in the provider rate study is estimated at 4% in FY 2024 and an additional 4% in FY 2025. Those providers eligible for the statutory increases in 53-6-125, MCA, are not captured in this proposal as their adjustment is already included in the Medicaid caseload change packages. Funding for additional one-time-only provider rate adjustments intended to stabilize the care delivery system post-pandemic is included in CP 4444. The biennial request includes \$30,875 in general funds, and \$740,993 in federal funds.

	<b>General Fund</b>	<b>State Special</b>	<b>Federal Funds</b>	<b>Total Request</b>
<b>FY 2024</b>	\$6,912	\$0	\$165,889	\$172,801
<b>FY 2025</b>	\$23,963	\$0	\$575,104	\$599,067
<b>Biennium Total</b>	\$30,875	\$0	\$740,993	\$771,868

# Montana Population 60 Years and Older

Projected Percent Change from 2020 to 2030



Population 60 Years and Older  
- Projected Percent Change from 2020 to 2030



Data Source: Montana State and County Population Projection by Gender, Race and Age from Regional Economic Models Incorporated (REMI), vintage 2020.