

Office of Aging and Disability Services (OADS)

Paul Saucier, Director
January 2021



OADS: What We Do

Mission

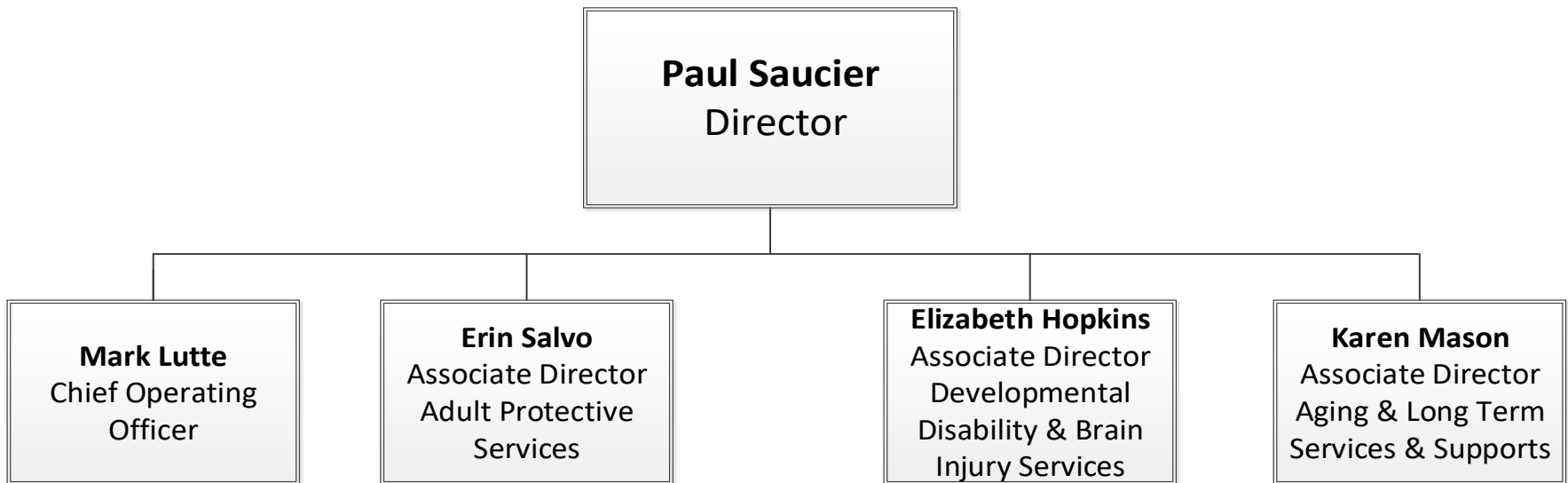
We promote the highest level of independence, health, and safety for older adults and adults with disabilities throughout Maine.

The Office of Aging and Disability Services (OADS) oversees community-based services for older adults and adults with physical disabilities, brain injury, intellectual and developmental disabilities (IDD) and other related conditions. We also provide Adult Protective Services for all adults who are at risk for abuse, neglect or exploitation. Our programs are funded with a combination of State, MaineCare and other Federal sources.

OADS Program Leadership



Office of Aging and Disability Services



OADS: Community Programs for Adults

Aging and Physical Disability

- Older Americans Act Programs
- MaineCare- and State-funded Home Care
- “Level of Care” Assessments for home care and facility care

Intellectual and Developmental Disability (IDD)

- MaineCare Home- and Community-Based Services (HCBS) for adults with IDD, brain injury and other related conditions
- Crisis Prevention and Intervention
- Case Management

Adult Protection

- Investigation
- Guardianship and Conservatorship
- Estate Management

Common Policy References

Chapter 11 (OADS)	Consumer Directed Attendant Services
Section 12 (MaineCare)	Consumer Directed Services
Section 18 (MaineCare)	Waiver Services for Adults with Brain Injury
Section 19 (MaineCare)	Waiver Services for the Elderly and Adults with Disabilities
Section 20 (MaineCare)	Waiver Services for Adults with Other Related Conditions
Section 21 (MaineCare)	Waiver Services for Members with Intellectual Disabilities or Autistic Disorder
Section 29 (MaineCare)	Waiver Support Services for Adults with Intellectual Disabilities and Autistic Disorder
Section 40 (MaineCare)	Home Health Services
Section 50 (MaineCare)	Intermediate Care Facility for Individuals with Intellectual Disabilities (ICF/IID)
Section 61 (OADS)	Adult Day Services
Section 63 (OADS)	In Home and Community Supports
Section 67 (MaineCare)	Nursing Facility (NF)
Section 69 (OADS)	Independent Support Services (Homemaker)
Section 96 (MaineCare)	Private Duty Nursing/Personal Care Services (PDN/PCS)
Section 97 (MaineCare)	Private Non-Medical Institutional Services (PNMI) Residential Care

District Offices

Augusta:	41 Anthony Ave., Augusta 04333-0011	(800) 452-1926	(207) 624-8060
Bangor:	19 Maine Avenue, Bangor 04401-3095	(800) 432-7825	(207) 561-4380
Caribou:	30 Skyway Drive, Unit 100, Caribou	(800) 432-7366	(207) 493-4037
Ellsworth:	17 Eastward Lane, Ellsworth 04605	(800) 432-7823	(207) 664-1400
Farmington:	114 Corn Shop Lane, Farmington 04938	(800) 442-6382	(207) 778-8400
Fort Kent:	139 Market Street, Suite 109, Fort Kent 04743-1449	(800) 432-7340	(207) 834-1000
Houlton:	11 High Street, Houlton 04730	(800) 624-8404	(207) 532-5000
Lewiston:	200 Main Street, Lewiston 04240-7098	(800) 482-7517	(207) 795-4664
Machias:	38 Prescott Drive, Machias 04654-9984	(800) 432-7846	
Rockland:	91 Camden Street, Suite 103, Rockland 04841	(800) 704-8999	(207) 596-4200
So. Paris:	243 Main Street, Suite 6, So. Paris 04281-1620	(800) 593-9775	(207) 744-1200
So. Portland:	151 Jetport Blvd, Suite 100, So. Portland 04102-1946	(800) 482-7520	(207) 822-2225

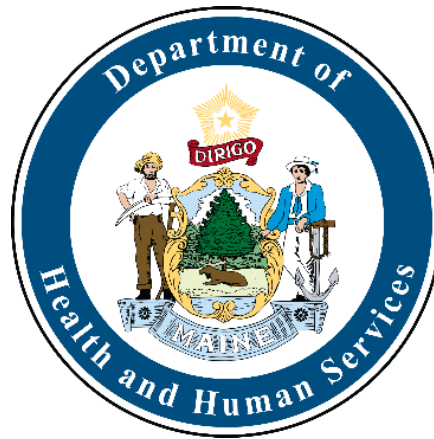
Officewide Priorities

- Implement federal Home- and Community-Based Services (HCBS) Settings Rule, which requires services to facilitate individualized participation in all aspects of community life, including employment.
 - ✓ Maine's initial statewide [transition plan](#) was posted for public comment in March, 2020 and approved by CMS in May.
 - ✓ This applies to all 5 of the HCBS waiver programs administered by OADS (Sections 18, 19, 20, 21, 29)
 - ✓ Full compliance required by March, 2023.
- Finalize corrective actions resulting from the 2017 federal HHS Office of Inspector General (OIG) audit of how Maine responds to reportable events in our HCBS system.

Officewide Priorities

- Strengthen quality assurance and measurement and develop transparent value-based payment methods.
- Support recruitment and retention of the long term services and supports (LTSS) workforce.
 - ✓ Combine direct support certifications across populations for consistency and mobility
 - ✓ Add specialized training for advancement opportunities and to build needed expertise in the system
- Implement new client-level IT system (Evergreen) and retire legacy systems.
 - ✓ Implemented for APS in 2020

Aging and Long Term Services and Supports (LTSS)



Aging and LTSS Key Services

Services for Older Adults
and Adults with Physical
Disability
(Section 19 HCBS Waiver
and PDN Section 96)

Older Americans Act
(OAA) Services, including
Nutrition, Supportive
Services, Legal Services,
Health Promotion and
Caregiver Support

Maine Long Term Care
Ombudsman Program
(OAA and State-Funded)

State Health Insurance
Assistance Program (SHIP)

State-Funded Home Care
and Adult Day Programs

Employment and Volunteer
Programs for Older Adults

Long Term Services and
Supports Functional Needs
Assessments

Fiscal Intermediary
Services for Individuals
Who Choose Self-Directed
Services

State Unit on Aging

- OADS is designated as Maine's State Unit on Aging under the Older Americans Act (OAA) and is responsible for planning, developing, managing and providing services to promote independence for older adults.
- OADS contracts with five Area Agencies on Aging (AAAs) which serve as local "one-stop-shops" to provide referrals to and answer questions about a wide range of services and resources. AAA main offices:
 - ✓ Aroostook Agency on Aging, Presque Isle
 - ✓ Eastern Area Agency on Aging, Bangor
 - ✓ Spectrum Generations, Augusta
 - ✓ SeniorsPlus, Lewiston
 - ✓ Southern Maine Agency on Aging, Scarborough

LTSS Service Access Points

- Maine uses a “No Wrong Door” approach for people seeking long term services and supports. Entry points may include:
 - ✓ Area Agencies on Aging
 - ✓ Independent Living Center (Alpha One)
 - ✓ Application to Office of Family Independence for MaineCare LTSS eligibility
 - ✓ Referrals to Assessing Services Agency (Maximus), which commonly come from physicians, hospitals, providers, individuals and family members
- Applicants must meet both financial and functional eligibility requirements for LTSS programs.
 - ✓ Financial eligibility is determined by the Office of Family Independence
 - ✓ Functional eligibility is determined by the Assessing Services Agency (Maximus)

Aging and LTSS Key Statistics

2152

- Participants in Section 19 as of 11/1/20

3768

- SHIP contacts during open enrollment 2020
- 33% reduction from 2019 due to COVID

1050

- Participants in State-funded home care programs (Sections 11 and 63)
- 777 on wait list as of December, 2020

2300

- Participants in State-funded Independent Support Services Program (Section 69)
- 1003 on wait list of of December, 2020

\$60.7M

- MaineCare expenditures for Section 19, SFY 2020

Aging & LTSS Legislative and Program Priorities

- Resolves 2019 c. 106 directed DHHS to contract for a time study of the needs of residents in Assisted Housing with a focus on residents with Alzheimer's and related dementias. The RFP was issued and was recently awarded.
- Although the federal HCBS settings rule is not applicable to many of the services delivered in peoples homes via Section 19, certain principles do apply. We are reviewing our approach to person-centered planning as part of this work.

Aging & LTSS Legislative and Program Priorities

Age Friendly State Plan

- In 2019, Maine was designated as one of six Age-Friendly States, joining cities and communities across the globe who are part of the *AARP Network of Age-Friendly States and Communities* and in the *World Health Organization's Global Network for Age-Friendly Cities and Communities*.
- In the past year, the State developed its first Age-Friendly State Plan, led by six State agencies (Maine State Housing and the Departments of Agriculture, Conservation, and Forestry; Health and Human Services; Labor; Public Safety; and Transportation), with input and assistance from a stakeholder group of more than 50 organizations and individuals statewide.
- The Plan is being released this month.

Aging & LTSS Legislative and Program Priorities

State Plan on Aging

- Required by the federal Older Americans Act to be submitted every four years to receive Older Americans Act funding. Planning for the latest renewal started in July 2019 with the convening of an advisory council consisting of representatives from:
 - ✓ Area Agencies on Aging;
 - ✓ Maine Long Term Care Ombudsman Program;
 - ✓ Maine Legal Services for the Elderly;
 - ✓ Maine Council on Aging; and
 - ✓ Organizations serving diverse, underserved populations
- New [State Plan on Aging](#) was approved as of October 1, 2020 for 4 years.

Aging & LTSS Legislative and Program Priorities

LTSS Reforms

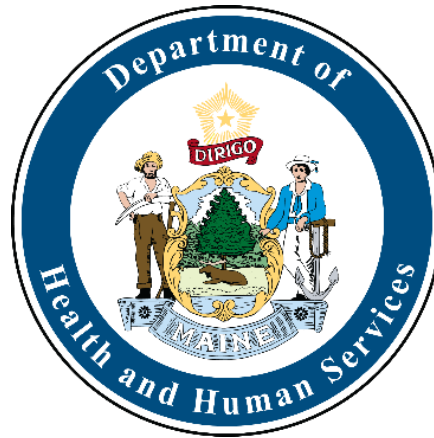
- Plan and implement an HCBS MaineCare State Plan option under federal Section 1915(k) authority-Community First Choice Option.
 - ✓ States receive a six percentage point increase in federal matching funds for the provision of 1915(k) services
 - ✓ This initiative has been included in the Governor's biennial budget proposal

Aging & LTSS Legislative and Program Priorities

LTSS Reforms

- Improve coordination of care across the LTSS system to improve consumer experience and outcomes, increase flexibility and simplify billing.
 - ✓ Selected for and participated in CMS Medicaid Innovation Accelerator Program (IAP) to assist Maine with developing a value-based payment method for care coordination
 - ✓ Section 19 HCBS waiver program rule change that includes a per member per month payment methodology for care coordination is currently posted for public comment
 - ✓ As of 1/1/21, Medicare Dual Eligible Special Needs Plans (D-SNPs), which serve individuals with both Medicare and Medicaid, must coordinate with LTSS Service Coordination Agencies to improve care transitions

Intellectual and Developmental Disability (IDD) and Brain Injury Services



IDD and Brain Injury Key Services

Section 18 HCBS
Waiver Services for
Brain Injury

Section 20 HCBS
Waiver Services for
Other Related
Conditions

Section 21 HCBS
Comprehensive
Services for
Intellectual Disability

Section 29 HCBS
Support Services for
Intellectual Disability

Section 13 Targeted
Case Management for
Intellectual Disability

IDD and Brain Injury Key Statistics

3252

- Participants in Section 21 as of 10/1/20
- 550 are on wait list without other coverage

2276

- Participants in Section 29 as of 10/1/20
- 173 are on wait list without other coverage

207

- Participants in Section 18 as of 10/1/20
- 45 are on wait list without other coverage

38

- Participants in Section 20 as of 10/1/20
- 17 are on wait list without other coverage

\$486M

- MaineCare expenditures for Sections 18, 20, 21 and 29, SFY 2020

IDD Legislative and Program Priorities

- Improve access to and effectiveness of crisis services.
 - ✓ 8 new positions added in 2019-20
 - ✓ Pursuant to PL 2019, c. 290:
 - Adopted preliminary rules for greater transparency; currently before Legislature for review
 - Submitted report on rates for persons with challenging behaviors: [Strengthen Supports for Adults with Intellectual Disabilities or Autism in Crisis Report](#)
 - ✓ Affiliated with the national START program at UNH Institute on Disability, joining 17 other states to improve outcomes for individuals with intellectual and developmental disabilities with behavioral health needs
 - ✓ Collaborating with the Office of Behavioral Health to improve outcomes for individuals served by OADS with criminal justice involvement

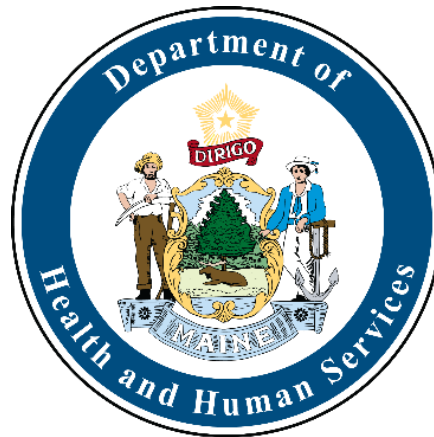
IDD Legislative and Program Priorities

- OADS launched an IDD reform process in 2020. Stakeholder groups have convened on two reform topics.
 - ✓ *Community Membership*, addressing employment, individualized community opportunities, family supports, self-advocacy and the federal HCBS settings rule
 - ✓ *Innovation*, addressing expanded use and equal access to technology and alternative residential and support options
 - ✓ A third group, *Quality*, will convene to address data development and provider onboarding, support and monitoring
- Implement a conflict-free needs assessment process.
 - ✓ Foundational to IDD reforms is implementation of an objective needs assessment process to ensure equity in the system. The assessment is under development and implementation is included in the Governor's biennial budget proposal

IDD Legislative and Program Priorities

- More than 2,000 IDD service settings submitted self-assessments for compliance with the federal HCBS settings rule. These are now being validated by OADS and contractors using multiple methods.
- The Governor's biennial budget proposal includes funding to add 30 additional individuals to the Section 29 waiver each month.
- The Governor's biennial budget proposal includes a substantial IDD rate increase to ensure that rates reflect the current minimum wage, and to make Sections 21 and 29 rates consistent with increases already implemented in Sections 18 and 20. This is an interim approach for the upcoming biennium while a simpler, more transparent value-based rate system is developed.
- IDD rates are being modified to better support individualized community opportunities.
- The Governor's biennial budget proposal includes funding to establish a mortality review panel at Maine CDC. The panel would review all deaths occurring among adult HCBS waiver participants as recommended by the federal Centers for Medicare and Medicaid Services.

Adult Protective Services (APS)



APS Investigations

- In accordance with the APS Act, the Adult Protective Services program is specifically responsible for the following:
 - ✓ Receiving, promptly investigating, and determining the validity of reports of alleged abuse, neglect, and exploitation of incapacitated and dependent adults (including older adults, adults with intellectual and developmental disabilities, adults with brain injuries, adults with mental health diagnoses and other dependent populations);
 - ✓ Taking appropriate action, including providing or arranging for the provision of appropriate services and making referrals to law enforcement; and
 - ✓ Petitioning for guardianship or a protective order when all less restrictive alternatives have been tried and have failed to protect an incapacitated adult.

APS Investigations

- APS investigates allegations of abuse, neglect (including self-neglect), and exploitation that are reported through a statewide APS Intake phone line (1-800-624-8404) and or web referral form.
- Certain professionals are mandated by statute to make reports to APS.
- The Financial Abuse Specialist Team (FAST) within APS focuses on addressing financial abuse and working with local district attorneys to prosecute criminal acts.
- Investigation reports are confidential except in specific circumstances such as when a court orders them to be released. This is to protect the victim and reporters.

Public Guardianship and Conservatorship

- OADS is the DHHS Commissioner's designated public guardian/conservatorship representative.
 - ✓ Acts on behalf of and as decision-maker for incapacitated adults subject to public guardianship and/or conservatorship
 - ✓ Goal to support self-determination to the greatest extent possible
- Appointment is made as a “last resort” when:
 - ✓ Less restrictive options are not available
 - ✓ No suitable and willing private individual is available

Public Guardianship and Conservatorship

- Emergency guardianship is sought when appointment of a guardian/conservator is “likely to prevent substantial harm to the adult’s physical health, safety, or welfare or (for conservatorship) prevent substantial and irreparable harm to the adult’s property or financial interests.”
- The emergency guardianship process includes fewer due process protections for the adult than the non-emergency process and is therefore used sparingly.
- The Probate Court may limit the Department’s decision-making authority to certain areas, such as financial or medical.

APS Key Statistics

8608

- Reports investigated SFY 2020
- Down 3.7 % from SFY 2019 due to COVID

1265

- Number of clients subject to public guardianship or conservatorship

\$14.3M

- Assets under management on behalf of clients

65%

- APS clients 60+ years of age

23%

- APS clients receiving HCBS waiver services under Sections 18, 19, 20, 21 or 29

APS Legislative and Program Priorities

- 128th – LD 123 *An Act to Recodify and Revise the Maine Probate Code (effective September 2019)*
 - ✓ Substantial update to public guardianship and conservatorship practices, policies, and forms to increase self-determination for adults subject to guardianship
- 129th – LD 1229 *Resolve, to Establish the Committee to Study and Develop Recommendations to Address Guardianship Challenges that Delay Patient Discharges*
 - ✓ Increased regular contact between hospitals and APS to address case-specific issues
 - ✓ Identified mechanisms to reduce total time associated with public guardianship process where appropriate
 - ✓ Identified co-existing barriers for further discussion/problem-solving
- 129th – LD 2058 *An Act to Strengthen Protections for Incapacitated and Dependent Adults from Abuse, Neglect, and Exploitation*
 - ✓ Expands APS Substantiation Registry to include perpetrators regardless of diagnosis of the adult abused, neglected, or exploited (had previously applied only to Intellectual and Developmental Disability)

APS Legislative and Program Priorities

- Implemented Structured Decision-Making Intake Assessment (screening and priority determinations) and Safety Assessment (safety planning at initial meeting with client) for APS investigations to increase consistency, accuracy, and equity in APS practices, and incorporated them into our Evergreen information system.
- Elder Justice Coordinating Partnership
 - ✓ Established by Governor Mills by Executive Order, the Partnership is made up of government and private sector experts in law enforcement, advocacy and services
 - ✓ The Partnership is meeting to identify challenges, develop strategic priorities, and make policy recommendations and will submit an Elder Justice Roadmap to Governor Mills by December 2021.

COVID-19 Response: Access to Services

- Administered \$5.5 million in federal Supplemental Older Americans Act Funding to increase home-delivered meals, legal services for older adults, and long-term care ombudsman services.
- Distributed \$536,000 from Corona Relief Fund (CRF) to Area Agencies on Aging (AAAs) to extend increases in home delivered meals.
- AAAs, with existing and new community partners, nearly tripled meal deliveries during the pandemic.

Older Americans Act-funded Home-Delivered Meals Pre- and During COVID-19 Pandemic

Month	Feb 2020	Oct 2020
Meals Served	35,067	102,638

COVID-19 Response: Access to Services

- Implemented temporary MaineCare HCBS waiver benefits and flexibilities under federal Emergency Preparedness and Response waiver provisions (Appendix K).
 - ✓ Increased number of allowable home-delivered meals under Section 19
 - ✓ Increased limits on care coordination
 - ✓ Increased limits on personal care, respite, and home supports
 - ✓ Increased assistive technology, monthly data transmission charges and environmental modifications
 - ✓ Enabled services to be delivered in alternate settings, and via telehealth
 - ✓ Expanded options to pay families for providing supports
 - ✓ Created option for agency staff to support clients in hospital
 - ✓ Expanded number of individuals who may be served in shared living
 - ✓ Created emergency transitional service for individuals with COVID-19
 - ✓ Self-directed option added to Sections 18 and 20 to expand choices
- Modified State-funded in-home services to allow telephonic visits and services on behalf of client (e.g., grocery shopping).

COVID-19 Response: Provider Assistance

- Temporary rate increases for MaineCare waiver service providers focused on frontline workers.
- Early implementation (on 4/1/20) of Personal Support Services rate increases scheduled for 7/1/20.
- Distribution of PPE via County Emergency Management
- Fit testing for N-95s by National Guard.
- Free consultation to develop Infection Prevention and Control plans, to meet upcoming regulation for assisted housing.
- Assistance with outbreaks, including testing, isolation, additional PPE and staffing strategies.
- Promotion of federal relief opportunities, including Paycheck Protection Program, Provider Relief Fund, and Pharmacy Partnership Program.
- Flexibility with staffing levels, provided that health and safety can be assured.

COVID-19 Response: Stakeholder Outreach

- Regular open calls with stakeholders to provide updates and receive feedback.
- Written policy guidance, best practices and other resources reviewed on calls and available on website:

<https://www.maine.gov/dhhs/oads/covid-19-resources>

COVID-19 Response: Monitoring

- Collaborated with other DHHS Offices to implement federal CDC Infection Control Assessment and Response (ICAR) survey in nursing homes and all types of Assisted Housing.
- Monitored COVID-related concerns (exposures, testing results, etc.) for among waiver program participants via reportable events system, with follow up from staff as needed.
- Supported a Public Service Announcement (ran through June 2020) encouraging reporting to Adult Protective Services (in collaboration with Legal Services for the Elderly).

COVID-19 Response: Operations

- Implemented COVID-19 screening criteria for APS investigations.
- Established a respiratory protection program in order to deploy N95 masks and other personal protective equipment (PPE) for client-facing staff and activities at OADS.
- Mobilized non-client-facing OADS staff to perform duties remotely with necessary technology and video conference capabilities.
- Conducted regular all-staff video conferences to ensure that OADS staff members were properly informed of updated processes and protocols.

Resources

To Report Abuse, Neglect or Exploitation of an Adult:

Nationwide 24-hour, toll-free 1-800-624-8404

TTY In State, Maine Relay 711

TTY Out-of-State 207-287-3492

Area Agencies on Aging:

1-877-353-3771

Developmental Services and Brain Injury Crisis:

1-888-568-1112

Questions?



Paul Saucier Office Director, OADS

Maine Department of Health and Human Services

Aging and Disability Services

11 State House Station

41 Anthony Avenue

Augusta, Maine 04333-0011

Tel: (207) 287-9200; Toll Free: (800) 262-2232

Fax (Disability) (207) 287-9915

Fax (Aging) (207)287-9229

TTY: Dial 711 (Maine Relay)