

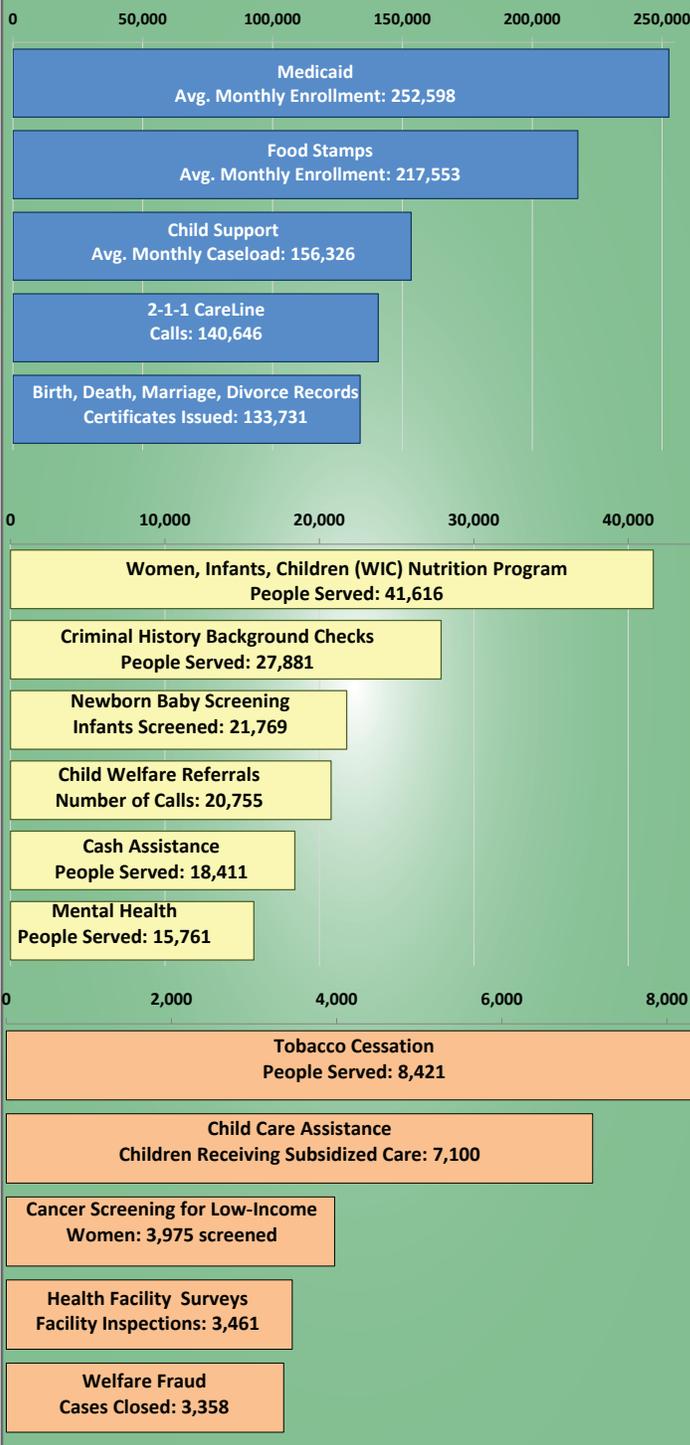


# A Report to Our Citizens

## The Idaho Department of Health & Welfare

July 1, 2013 to June 30, 2014

**Mission: To Promote and Protect the Health and Safety of all Idahoans**



## Improving Lives of Idahoans

The Idaho Department of Health and Welfare (DHW) offers programs that deal with complex social, economic and individual issues. These programs are designed to promote self-sufficiency and strengthen families during crisis. Last year, DHW served more than 400,000 Idahoans. Here are just some of the highlights of changes we've made to better serve all Idahoans:

- Child welfare:** Idaho was approved for a Title IV-E Waiver, which allows the state to use federal funds more flexibly to implement practices that assure child safety; help children in foster care more quickly move to safe, permanent homes; or to improve the well-being of children in foster care or at risk for entering foster care.
- Access to care:** The Bureau of Rural Health and Primary Care established a state loan repayment program in designated Health Professional Shortage Areas. This is the first multi-discipline, state-based loan repayment program for clinicians and physicians.
- Smoking cessation:** Project Filter, Idaho's Tobacco Prevention and Control Program, was recognized in January 2014 by the North American Quitline Consortium for offering eight weeks of free nicotine replacement therapy. The Idaho QuitLine experienced its highest monthly enrollment in the program's history.
- Behavioral health:** Lawmakers appropriated \$1.52 million in ongoing state general funds and \$600,000 in one-time federal money for a regional behavioral health crisis center. It opened in December 2014 in Idaho Falls. The crisis center is a place where Idahoans experiencing a behavioral health crisis can voluntarily go for help, rather than jail or a hospital emergency room.

### DHW By the Numbers

- 2014 Appropriation: \$2.5 B.
- Full-time Employees: 2,847
- State Offices: 23
- Psychiatric Hospitals: 2
- Divisions: 8
- Director: Richard M. Armstrong

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**Values:** Integrity, high quality customer service and compassion are the foundation for all DHW activities. Focusing on these values will lead to success.

## Public Assistance Trends 2002-2014

Counts are taken annually on June 30th. Percentages reflect the percent of Idaho's total population.

Year	Total Population	Cash Assistance	Medicaid	Food Stamps	Child Care	Unduplicated Total
2002	1,321,006	13,301 1.0%	146,956 11.1%	71,478 5.4%	9,898 0.8%	165,580 12.5%
2004	1,366,332	15,366 1.1%	165,909 12.1%	92,963 6.8%	9,016 0.7%	191,918 14.1%
2006	1,429,096	15,893 1.1%	171,795 12.0%	91,032 6.4%	8,100 0.6%	196,802 13.8%
2008	1,499,402	16,004 1.1%	189,396 12.6%	104,057 6.9%	6,717 0.4%	215,317 14.4%
2010	1,545,801	18,107 1.2%	217,539 14.1%	204,994 13.3%	5,812 0.4%	304,414 19.7%
2012	1,584,985	17,885 1.1%	239,472 15.1%	232,081 14.6%	6,306 0.4%	322,288 20.3%
2014	1,612,136	18,479* 1.1%	272,363 16.9%	209,070 13.0%	7,230 0.4%	332,338 20.6%

\*98.5% of cash assistance goes to the elderly, disabled, blind, or children being raised by relatives. Four of five recipients received an average monthly payment of \$53.

A total of 332,338 people received public assistance in the form of Medicaid, Food Stamps, Child Care or Cash Assistance in June 2014. Some people, such as the elderly or disabled, may receive more than one service. The total column on the right provides an unduplicated count of program participants.

Eligibility in some programs is determined by income, while others such as Medicaid also consider other eligibility determinants, such as a disability. Food Stamps is an income-based program for people earning less than 130% of poverty. For a single person, that would be an annual income of \$15,180; for a family of four, \$31,008. The average Food Stamps allotment per person in Idaho is about \$127 per month, or about \$1.40 per meal.

DHW is still feeling the effects of The Great Recession, which began in 2008 and increased people's need for services in many public assistance programs. Before the economic downturn, the Food Stamp program served fewer than 75,000 people. In January 2012, enrollment peaked, with more than 238,000 participants. As the economic recovery continues and Idahoans find employment, Food Stamp numbers are expected to continue declining slowly.

## DHW's Medicaid Readiness Initiative critical to shared services

The Medicaid Readiness Initiative was a top priority for the department's Division of Welfare/Self Reliance to meet federal requirements and implement Medicaid changes on January 1, 2014. During the open enrollment period, the division enrolled about 15,000 Medicaid participants identified by the Federal Marketplace.

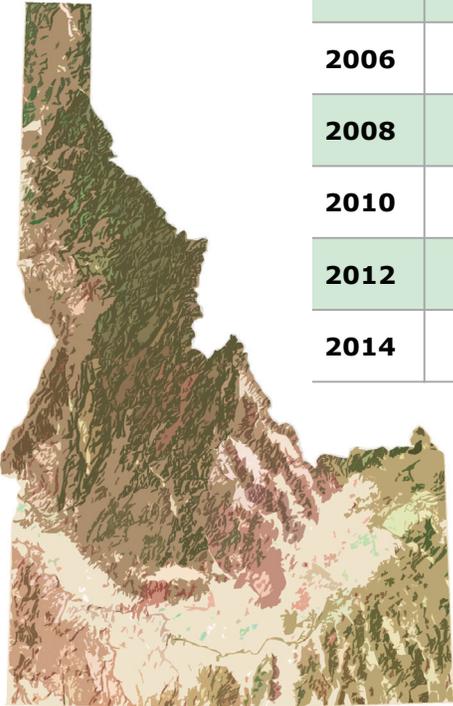
The initiative was a critical part of the development and implementation of Your Health Idaho, the state's health insurance

exchange, in November 2014. DHW partnered with Your Health Idaho to leverage the department's infrastructure for application, verification, and eligibility determinations required for the exchange.

This partnership and shared services model helped minimize costs to taxpayers for building the new marketplace as it maximized coordination and consistency while Idaho transitioned off of the federal exchange and implemented Idaho's new

technology platform.

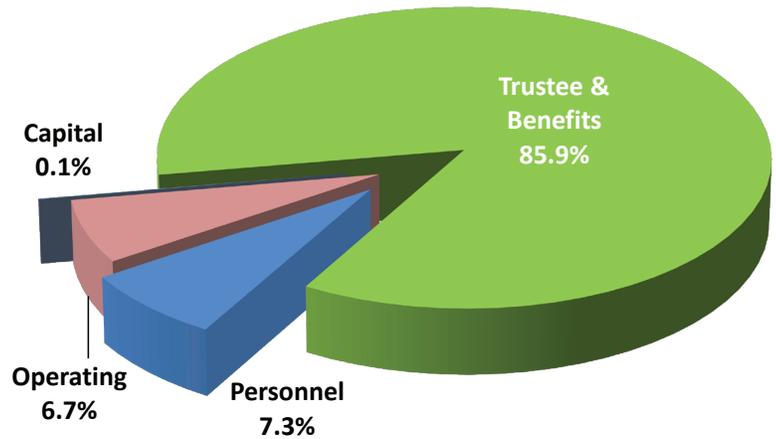
Just like other states, Idaho has been challenged to adapt and prepare for the changing landscape of healthcare on a national level. With a focus on Idaho values and priorities, DHW has created a path to success that will position Idaho to not only meet federal requirements, but to do so in a way that most effectively supports Idaho families seeing health coverage.



**Vision:** Provide leadership for development and implementation of a sustainable, integrated health and human services system.

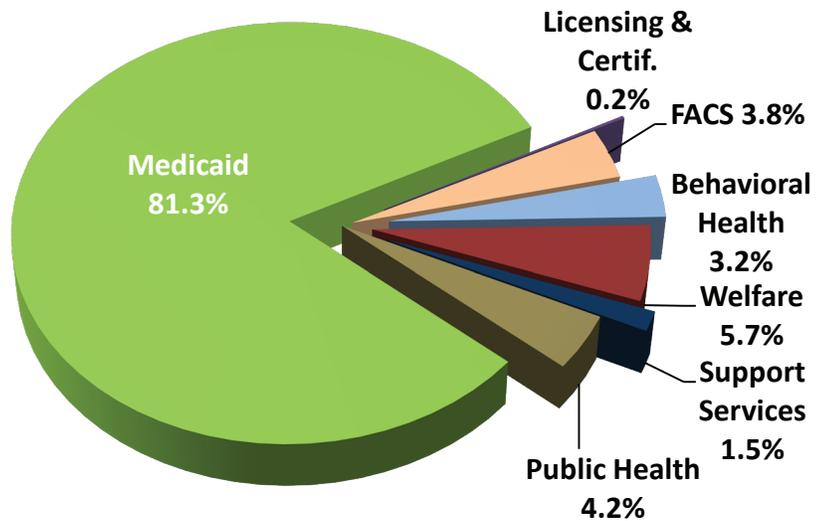
## State Fiscal Year 2014 DHW Expenditures

Personnel Costs	\$183,170,900
Operating Expense	\$166,090,800
Capital Outlay	\$1,334,300
Benefit Payments	<u>\$2,144,692,900</u>
<b>Total</b>	<b>\$2,495,288,900</b>
Full Time Workers	2,847



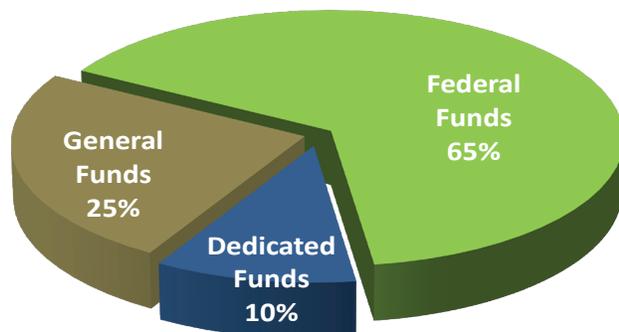
## State Fiscal Year 2014 DHW Expenditures by Program

Medicaid	\$2,024,182,500
Licensing & Certification	\$5,455,400
Family & Community Svcs	\$95,145,700
Behavioral Health	\$80,412,900
Public Health	\$104,630,400
Welfare	\$142,655,300
Support Services	<u>\$37,900,700</u>
<b>Total</b>	<b>\$2,495,288,900</b>



## State Fiscal Year 2014 DHW Sources of Funding

Federal Funds	\$1,615,650,500
State Funds	\$616,834,800
Dedicated Funds*	<u>\$262,803,600</u>
<b>Total</b>	<b>\$2,495,288,900</b>



\*Dedicated includes funds such as drug rebates in Medicaid, car registration fees for Emergency Medical Services, or the assessment of insurers to pay for children's immunizations.

# Moving Forward: What's Next?

## DHW is steering the SHIP for healthcare transformation

Department officials have been working very hard with stakeholders throughout the state on an initiative that will redesign healthcare in Idaho. It's called the State Healthcare Innovation Plan, or SHIP for short.

### The mission of SHIP

1. To improve Idahoans' health by strengthening primary and preventive care through the patient-centered medical home.
2. To evolve from a fee-for-service, volume-based payment system of care to a value-based payment system that rewards improved health outcomes.

Work on the SHIP began in 2013 when Idaho stakeholders came together to study Idaho's current healthcare system and develop a plan to transform it. In early 2014 Gov. C.L. "Butch" Otter established the Idaho Healthcare Coalition (IHC) which has continued to build on earlier stakeholder work and momentum. IHC members include private and



public payers, legislators, health system leaders, primary care providers, nurses, healthcare associations and community representatives.

### The SHIP's seven goals

1. Transform primary care centers across the state into patient-centered medical homes (PCMH).
2. Improve rural patient access to patient-centered medical homes by developing virtual PCMHs.

3. Establish seven regional collaboratives to support the integration of each PCMH with the broader medical neighborhood.
4. Improve care coordination through the use of electronic health records and health data connections among PCMHs and across the medical neighborhood.
5. Build a statewide data analytics system.
6. Align payment mechanisms across payers to transform payment methodology from volume to value.
7. Reduce healthcare costs.

### What's next

The SHIP model test period begins on Feb. 1, 2015, and lasts for four years. The first year of the award period is a pre-implementation year; it will be dedicated to hiring staff and contractors. By the end of 2015 the first cohort of primary-care clinics will be identified and beginning to transform to PCMHs. Funding will be provided with a federal grant the SHIP received in December 2014.

### Idahoans can now text Idaho Careline for answers

It has never been easier for Idahoans seeking information about health and human services to get answers. Idahoans can now text their inquiries to the 2-1-1 Idaho CareLine at 898211.

Texters must include their zip code in the body of the message. This allows a 2-1-1 agent to begin searching the database for appropriate local referral information. Standard text messaging rates may apply and will be based on an individual's cellphone service plan.

### SNAP benefits to be issued over 10 days

The Idaho Legislature passed legislation in 2014 to change the way Supplemental Nutrition Assistance Program (SNAP), or food stamps, benefits are distributed. Starting July 1, 2016, benefits will change from being issued on the first day of the month to being issued over the first 10 days of the month. This change was made to reduce stress on grocers' resources on the first of the month.

Most of the initial development and implementation costs are one-time and will be funded with program incentive funds, earned when the state was recognized by the federal government for its high performance in processing applications. It is expected to cost the state \$668,300 the first year, and an additional \$211,400 in ongoing costs each year after for additional personnel and operating costs.

DHW will work with retailers and partners on a communication and implementation plan that minimizes confusion to customers when their date of issuance changes.

**We want to hear from you! Do you like this report?**  
What would you like to see next year? Please let us know, [citizensreport@dhw.idaho.gov](mailto:citizensreport@dhw.idaho.gov).

