



**Addressing the Challenges of  
Recovery & Rebuilding  
from Hurricanes Katrina & Rita**

**Meeting of Public Health  
and Health Care Task Force  
February 15, 2006**



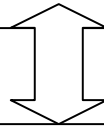
# LRA PROCESS: LRA BOARD DECISION MAKING

measure

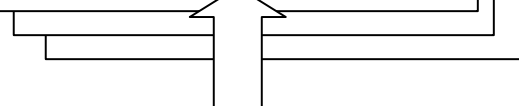
## Sources of input

- Local communities
- Agency experts
- Reform groups
- Policy and industry experts
- Other

### LRA Board



### 7 LRA Task Forces - PHHC



### LRA Recovery Teams - DHH

- Recovery team leads (**Dr. Cerise**)
- Agency staff

- Make decisions
- Provide governance

### “the WHAT”

- Review and recommend big ideas

### “the HOW”

- Identify and prioritize issues
- Develop implementation plans

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- Provide the LRA with broad-based input from key stakeholders including subject matter experts, and state and local elected officials
- Work with the Governor's Cabinet to make strategic recommendations for rebuilding and recovery in the subject matter area of each task force/committee
- Make recommendations in the form of motions based on broad policy decisions and not specific programs

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# Short Term Health Care Priorities

Representative Cheryl Gray  
Public Health and Health Care Task Force  
February 15, 2006

# Request – Tier I

- Certified Public Expenditures** – approval of the Medicaid State Plan Amendment to allow immediate payment of Federal portion of certifiable expenditures to public hospitals on a temporary basis
- 1115 Katrina Waiver/UCC Pool** – approval of method for reimbursement to providers once the legislation passes in Congress
- Social Services Block Grant** – immediate determination of Louisiana’s portion of funding that can be dedicated to programs according to the Governor’s priorities
- DSH Flexibility** – 1115 HIFA Waiver
- Graduate Medical Education** - rule changes to allow residency slots to be allocated to different facilities on a temporary basis

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# Social Services Block Grant (SSBG)

Dr. Frederick P. Cerise  
Public Health and Health Care Task Force  
February 15, 2006



## SSBG: OVERVIEW

measure

- Annual Funding for States through Title XX of the Social Security Act
- Traditional SSBG Program Goals:
  - economic self-support
  - self-sufficiency
  - preventing or remedying neglect, abuse or exploitation of children and adults
  - preserving, rehabilitating or reuniting families
  - preventing or reducing inappropriate institutional care
  - securing referral or admission for institutional care when appropriate
- SSBG is Administered in Louisiana by the Department of Social Services (\$26.2M allocation in FY 2005)

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## SSBG: STATE ALLOCATIONS

measure

- U.S. Department of Health and Human Services Announced SSBG Supplemental Appropriation on February 8, 2006
- \$550M Distributed Among all 50 States and the District of Columbia
- Distribution Based on FEMA Claims Generated From Filing Location NOT Home State of Residence
- \$220.9M (40%) Allocated to Louisiana

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# SSBG: APPROPRIATE USES FOR SUPPLEMENTAL FUNDS

measure

- Meet health care needs of people affected by the hurricanes in 2005 and lacking health insurance or other adequate access to care
- Help health care “safety-net” providers restore and resume operations
- Provide mental health services to meet the emerging public mental health crisis
- Make repairs or reconstruction needed to allow health centers and similar providers to resume or expand operations
- Help key providers meet salary and other costs associated with resuming or restoring health services
- Traditional SSBG funded programs

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# SSBG: IDENTIFIED TARGET AREAS FOR RELIEF

measure

- Preventive & Primary Care  
Coordination/Expansion of Services
- Emergency Services
- Access to Dental Care
- Access to Prescription Drugs
- Social Supports
- Housing/Transportation
- Expansion of Mental Health & Substance Abuse  
Services

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# SSBG: BEHAVIORAL HEALTH TARGET AREAS FOR RELIEF

measure

- Emergency Department Crowding
- Beds
  - Psychiatric
  - Detox
- Community Supports
- Children's Services

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**SSBG:**

# **GOVERNOR BLANCO'S PRIORITIES FOR MAXIMIZING FUNDS**

**Department of Social Services - \$34,200,000**

\$17,600,000 for Child Welfare Services

\$14,400,000 for Child Care Services

\$ 2,200,000 for monitoring and oversight of SSBG

**Department of Health and Hospitals - \$101,701,534**

\$80,000,000 for Behavioral Health Services

\$21,701,534 for Preventive and Primary Care

**LSU Health Sciences Center - \$70,000,000**

\$50,000,000 for Health Sciences Center

\$20,000,000 for Health Care Services Division

**Louisiana Family Recovery Corps - \$15,000,000**

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# SSBG: DHH PLAN FOR SSBG FUNDS

measure

## Develop Plan Based on Existing Work-Group Input

- Behavioral Health Work Group
- Community/Regional Planning Efforts
- National and Professional Issue Specific Data

## Implement Plan through Federal-State-Local Partnerships

- Human Service Districts
- Parish Planning Bodies
- DHH Program Offices
- Other State Agencies
- Federal Agencies

## Maximize Funds through Coordinated Use of Alternate Sources

- FEMA Public Assistance
- Community Development Block Grant (CDBG)
- Private Insurance
- Medicaid
- Uncompensated Care (UCC) Funding Pool
- Certified Public Expenditures (CPEs)

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# SSBG: DHH PLAN FOR INCREASING ACCESS TO BEHAVIORAL HEALTH SERVICES

of measure

\$80,000,000 shall be used to restore and expand mental health services, substance abuse treatment and prevention services and developmental disability services for children and adults as follows:

Immediate Intervention - Crisis Response	(\$37,000,000)
Substance Abuse Treatment and Prevention (\$8,000,000)	
Behavioral Health Services for Children and Adolescents	(\$18,000,000)
Preventing or Reducing Inappropriate Institutional Care (\$7,000,000)	
Behavioral Health Program Restoration and Resumption (\$10,000,000)	

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# SSBG: DHH PLAN FOR INCREASING ACCESS TO PREVENTIVE AND PRIMARY CARE

\$21,701,534 shall be used to restore and develop comprehensive and integrated primary, preventive and behavioral health care services, with an emphasis on restoring safety net services for uninsured and underinsured children and adults as follows:

- Health Care Work Force
- Operational Tools

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## LSU – HSC-New Orleans and HCSD

- Both suffered major loss of operating revenue from Katrina
  - HCSD - \$96 million
  - HSC – NO \$ 70 million
- Medicaid and UCC revisions will provide \$45 million to HCSD and \$20 million to HSC-NO
- SSBG funds will complete the relief package –
  - HCSD - \$ 20 million
  - HSC-NO - \$50 million

\* Footnote

Source:

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## LSU – HSC-New Orleans and HCSD

- Meeting HSC-NO relief request is most critical
  - Resident Matching
  - Faculty Retention
  - Cash Flow Issues
- Other options may become available that reduce SSBG required.

\* Footnote



# Public Health & Health Care Task Force – Motion Passed

measure

Move to make a recommendation that the LRA Public Health and Health Care Task Force support the current plan presented by Dr. Cerise for use of the Social Services Block Grant (SSBG) Funds be brought before the LRA Board for action at the meeting scheduled for Monday, February 20, 2006.

I would like to further move that as it relates to the \$70 million allocated to LSU-Health Science Center and LSU-Health Care Services Division, in the event alternative funding sources for these needs that can be identified – the remaining SSBG funds be identified and reported to the Human Services and the Public Health & Health Care Task Forces for possible recommendations for redistribution to appropriate priority areas.

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