



**Weathering the Storm: The Impact of the Great
Recession on Long-Term Services and Supports**
State Profile: MISSOURI

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INTRODUCTION

Weathering the Storm: The Impact of the Great Recession on Long-Term Services and Supports is the most comprehensive analysis to date on the budget cuts to both Medicaid and non-Medicaid funded long-term services and supports (LTSS) in each state. It also illustrates state-by-state how LTSS are financed. In addition, this study provides a very early snapshot of the likelihood of states pursuing some of the LTSS provisions within the Affordable Care Act (ACA).

Weathering the Storm contains several components:

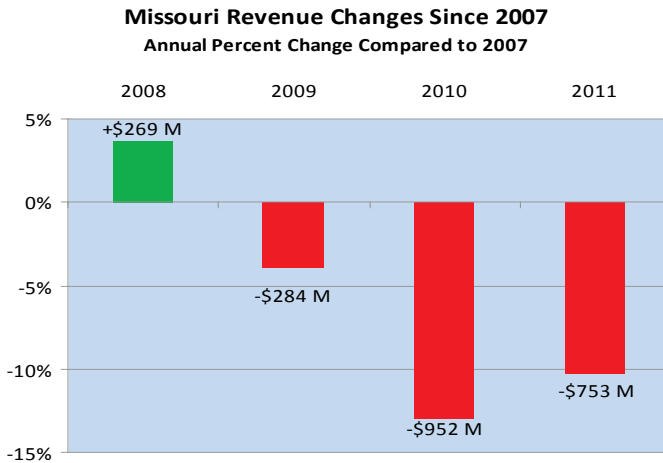
- The full report with an overview of findings and state-by-state tables;
- State profiles, which are 4 to 5 pages in length, for each state that participated in the study;
- An In Brief, which is a short synopsis; and
- A videotaped interview about the key findings.

Hard copies of *Weathering the Storm* are available free of charge. To order, please call the AARP Public Policy Institute at (202) 434-3890 or email jgasaway@aarp.org.

All of the components of *Weathering the Storm* are also available on the web and can be found at www.aarp.org/ppi, www.nasuad.org, and www.healthmanagement.com.

MISSOURI

TAX COLLECTIONS



Source: HMA analysis of state tax collection data from the National Association of State Budget Officers (NASBO), Spring Fiscal Survey of States, 2008 (for baseline 2007 data); Spring Fiscal Survey of States, 2009 (for 2008 data) and Spring Fiscal Survey of States, 2010 (for 2009 actual, 2010 estimated, and 2011 projected). Revenue represents the following taxes if collected by the state: **Personal Income, Corporate, and Sales**. Percent change and change in amount collected (in millions) represents the divergence between the state fiscal year noted and baseline SFY 2007.

ARRA FUNDING

IMPACT OF ARRA ENHANCED MEDICAID FMAP EXPIRATION

- Missouri used enhanced FMAP to support a variety of short-term projects and special needs.
- In anticipation of the expiration, Missouri cut funding for services for older adults and reduced rates for home and community-based services (HCBS) provided to older adults and adults with disabilities.

PREDICTED IMPACT OF THE EXPIRATION OF THE ARRA NUTRITION FUNDING

- ARRA funding was used by Missouri Area Agencies on Aging (AAAs) primarily to offset large SFY 2010 state funding reductions; therefore, ARRA funding was not used to expand services. In late SFY 2010, state funding for AAAs was decreased by approximately 10 percent of their annual award to be absorbed in the last quarter.
- Missouri AAAs began SFY 2011 with approximately \$2.8 million or 25 percent less state funding than they received in SFY 2010. It is too soon to determine how the AAAs will adjust service delivery and spending, but staff reduction, reduced service, and waiting lists are all very likely.

STATE UNIT ON AGING AND DISABILITY (NON-MEDICAID) SERVICES

STATE UNIT ON AGING NUMBER SERVED (UNDUPLICATED)

SFY 2009 (actual)	SFY 2010 (projected)	SFY 2011 (projected)	% Change SFY 2009–2011
3,148	2,879	None Listed	NA

MISSOURI

STATE UNIT ON AGING TOTAL EXPENDITURE REDUCTIONS – ACTION TAKEN

SFY 2009 2010 **SFY 2010 2011**
 Over 25% 5% or less

STATE UNIT ON AGING SERVICE DEMAND AND EXPENDITURE CHANGES

Program	Change in Expenditures		Change in Service Requests
	SFY 2009–2010	SFY 2010–2011	SFY 2009–2010
Adult Foster Care	NA	NA	
Adult Day Care	0	-	+
Adult Protective Services*	0	0	+
Assisted Living	NA	NA	
Behavioral Supports	0	0	+
Case Management	0	0	+
Chore	0	-	+
Community Transition	0	0	+
Congregate Meals	0	*	DK
Day Habilitation	NA	NA	
Disease Prevention/Health Promotion	0	0	DK
Elder Abuse Prevention	0	0	+
Environmental Modifications	NA	NA	
Equipment and Supplies	NA	NA	
Family Caregiver Support	*	*	DK
Food Stamps/Supplemental Nutrition Assistance Program			
Foreclosure Counseling	NA	NA	
Homemaker	0	-	+
Home-Delivered Meals	0	-	+
Housing Assistance	NA	NA	
Information and Referral	0	0	+
Legal Assistance Development	0	0	DK
LIHEAP			
Long-Term Care Ombudsman	0	0	DK
Nutritional Supplements	NA	NA	
Occupational Therapy	NA	NA	
Personal Care/Assistance	0	-	+
Physical Therapy	NA	NA	
Recreational Therapy	NA	NA	
Residential Habilitation	NA	NA	
Respite	0	-	+
Senior Community Service Employment Program	+	0	+
Senior Centers	*	*	DK
Speech Therapy	NA	NA	
State Adult Guardianship Program	NA	NA	
State Pharmaceutical Assistance	NA	NA	
Supported Employment	NA	NA	
Supported Living	NA	NA	
Transportation	*	*	DK
+ Expenditure/demand increase	0	No change in expenditure/demand	DK Don't know
- Expenditure/demand decrease	NA	Program not administered by SUA	

MISSOURI

- * Since SFY 2009, the State Unit on Aging has received increased calls for Adult Protective Services, e.g., financial exploitation, physical abuse, neglect, emotional abuse, and sexual abuse.
- A significant number of reports regarding self- and circumstantial abuse or neglect, mental health issues, financial neglect, and other legal issues have been received.
- All "DK" responses concern services administered by AAAs who have flexibility to increase or decrease services according to the needs of planning and service areas. The State Unit on Aging does not maintain service request information for these services.

STATE UNIT ON AGING NON-MEDICAID HCBS EXPENDITURES

SFY 2009 (actual)	SFY 2010 (projected)	SFY 2011 (appropriation)	% Change SFY 2009–2010
\$8,504,642	\$6,706,909	\$1,080,796	-21%

MEDICAID LONG-TERM SERVICES & SUPPORTS

NUMBER OF BENEFICIARIES: WAIVERS & NURSING FACILITIES

Waiver Name	Avg. Daily Caseload			% Change SFY 2009– 2010
	SFY 2009	SFY 2010	SFY 2011 (planned)	
Aged & Disabled Waiver	14,319	14,419	14,620	1%
Physical Disabilities Waiver	66	76	87	15%
Independent Living Waiver	435	400	400	-8%
Nursing Facility Services	Avg. Daily Census 2010		Expected Change 2011	
NF Average Daily Census	23,839		No change	

LTSS EXPENDITURES (FEDERAL AND STATE)

Service	SFY 2009	SFY 2010 (Estimate)	SFY 2011 (Appropriation)	% Change SFY 2009–2010
HCBS Waivers (For Older People and Adults with Physical Disabilities)	\$112,341,067	\$119,159,450	\$103,849,274	6%
Medicaid LTSS State Plan	\$336,692,424	\$387,015,907	\$332,753,761	15%
Nursing Facility*	\$885,318,233	\$923,607,538	\$948,528,718	4%

- For nursing facilities, SFY 2011 data is estimated expenditures (not appropriations).

LTSS PROVIDER PAYMENT RATE CHANGES

Provider Type	SFY 2009–2010 % change	SFY 2010–2011 % change
Nursing Home	+4.96%	DK
Home Health	0	
Personal Care Services	0	-2%
HCBS Waiver Services*	0	-2%
+ Provider rate increase - Provider rate decrease 0 No change in provider rate		NA Not applicable

- Home-delivered meals, an HCBS waiver service, is not affected by the 2 percent reimbursement rate reduction.

OPTIONS, OUTLOOK, AND PROMISING PRACTICES

The Medicaid agency and State Unit on Aging were asked about their intent to pursue options under health care reform, to provide their thoughts on the outlook for LTSS, and to share promising practices in their state. This section combines information from both agencies if both agencies responded. See the Overview for descriptions of these provisions.

State’s Intent to Pursue LTSS Provisions in the Affordable Care Act	Very Likely	Somewhat Likely	Not Likely	Don’t Know
State Balancing Incentive Program				X
Community First Choice Option				X
Money Follows the Person Demonstration				
1. Apply for new program				
2. Apply for extension of existing program	X			
Medical/Health Home Initiative				
1. Agency applying for planning grant				X
2. State plan amendment to establish medical/health home services				X
3. Apply to establish community health teams				X

STATE PRIORITIES: 18–24 MONTHS

- Exploring privatization of HCBS level of care assessment and service planning so that the state is better able to monitor the health, welfare, and safety of clients.
- Accessing 100 percent administrative match opportunities under the Money Follows the Person Demonstration Grants.

STATE ISSUES

- Funding.
- Ability to maintain appropriate staffing levels.

STATE PROMISING PRACTICES

- Money Follows the Person (MFP) and the Aging and Disability Resource Center (ADRC)/Hospital Discharge Planning (HDP) Grant.

The information in this profile represents information available to state officials at a point in time. Surveys were conducted from June through September 2010. Missouri’s fiscal year begins July 1 and ends June 30.