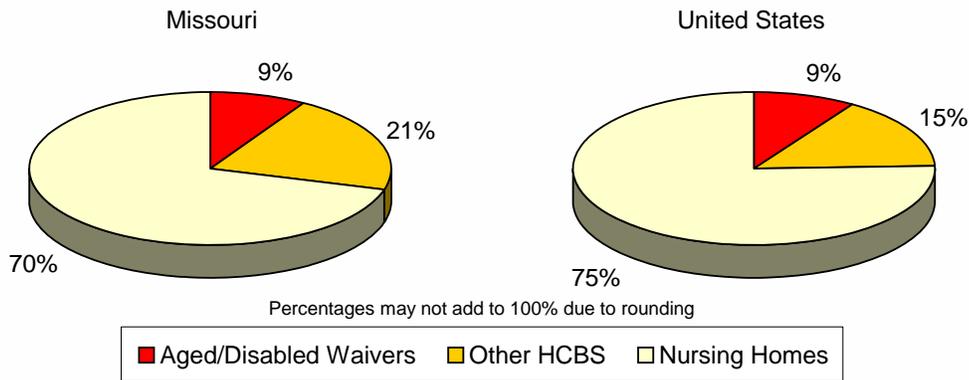


State Long-Term Care Reform in
MISSOURI

Medicaid Long-Term Care Spending for Older People and Adults with Physical Disabilities in Missouri and the U.S., 2006



Compared to the U.S. average, Missouri allocates a greater percentage (70 percent) of its Medicaid long-term care (LTC) spending to home and community-based services (HCBS) for older people and adults with physical disabilities. In FY 2006, Missouri spent 9 percent on waiver services and 21 percent on personal care services (PCS).

Type of Service	Medicaid Participants ¹			Expenditures (millions)		
	1999	2004	Change	2001	2006	Change
HCBS	57,407	73,160	+15,753	\$228	\$320	+\$92
Nursing Homes	39,762	39,606	-156	\$726*	\$763	+\$37

Recent Medicaid trends indicate that significant progress has occurred in recent years. Many more Medicaid participants received HCBS than did nursing home services in 2004. In fact, while the number of participants receiving HCBS increased from 1999 to 2004, the number of participants in nursing homes remained relatively constant. From FY 2001 to FY 2006, the increase in Medicaid spending on HCBS was two and a half times as much as the increase in spending on nursing homes.

¹ This analysis separates Medicaid participation and spending data for older people and adults with physical disabilities from the population with mental retardation/development disabilities (MR/DD) and other LTC populations. Participants and expenditures for HCBS include all 1915(c) waivers for older people and adults with physical disabilities, and the personal care services option, if the state offers it. All participants and expenditures for nursing homes are included, regardless of the participants' type of disability or reason for admission. Excluded are participants and expenditures for intermediate care facilities for mental retardation (ICF/MR), HCBS waivers for other populations such as MR/DD, home health, and individuals receiving LTC services through managed care programs. Participant numbers include all persons receiving services during the year, not the average number on a given day; the number of nursing home participants is greater than the number of nursing home beds in each state. The average number of Medicaid nursing home residents on any given day for each state appears in the *Tables* tab at the end of the full report *A Balancing Act: State Long-Term Care Reform (#2008-10)*.
* Expenditures for nursing homes were used from FY 2000—instead of FY 2001—because of state reporting irregularities.

Major Initiative

In 2005, the Missouri legislature passed a bill (Senate Bill 539) creating a Medicaid Reform Commission to consider how to restructure the state's Medicaid program. The commission issued a report in December 2005 that led to the creation of the MO HealthNet program, which focuses on health, wellness, and prevention for Missouri individuals eligible for Medicaid-funded health care. (MO HealthNet took effect in August 2007.)

Although the new Medicaid health care package does not contain LTC provisions, the commission addressed three major components of Medicaid reform that affect LTC: eligibility, availability, and delivery of services. For example, the commission recommended that the state develop a single-point-of-entry system to provide information, assistance, and access to LTC services. The commission also recommended that state officials encourage state residents to make better-informed health decisions about the cost associated with needing LTC through the use of a Long-Term Care Partnership Program that links purchase of LTC insurance with eligibility for Medicaid coverage of LTC services.

Missouri state agencies are attempting to build on the recommendations in the Commission report with the help of federal grants. Missouri was awarded a \$17.7 million, five-year federal Money Follows the Person grant in 2007 to transition 250 nursing home residents to community settings, and to remove barriers that may prevent nursing home residents from receiving services in a home and community-based setting.

“Money Follows the Person”

Missouri was awarded nearly \$18 million through the Money Follows the Person Demonstration grant to transition 250 nursing home residents back into the community and to develop strategies that will continue to support transition efforts.

Other Developments

Quality Assurance and Quality Improvement Project. Missouri is using funds from the federal Real Choice Systems Change grant program to develop a consistent method of gathering quality assurance data for all of the state's HCBS waiver programs. The “Quality Assurance and Quality Improvement Project” uses grant funds to support interagency collaboration to develop a comprehensive statewide system for tracking and collecting quality assurance data.

Using the Participant Experience Survey developed by the federal government, state officials are assessing the needs and concerns of older persons and people with disabilities who use in-home services. The state conducted surveys in 2006 and 2007 and posted the results on the Department of Health and Senior Services' website.

Own Your Future. The “Own Your Future” campaign to raise awareness among consumers about planning for LTC needs kicked off on August 14, 2007, with a press conference by Governor Matt Blunt. The state also ran public service announcements, sponsored town hall meetings, and distributed education materials to the general public on a variety of available resources.