Compared to the U.S. average, Mississippi allocates a greater percentage (89 percent) of its Medicaid long-term care (LTC) spending for older people and adults with physical disabilities to nursing homes, even though most people prefer to remain in their own homes and communities. In FY 2005, Mississippi spent 10 percent on waiver services and 1 percent on personal care services (PCS).

Although Mississippi still has an unbalanced LTC system for older people and adults with physical disabilities, the state has made progress in increasing access to home and community-based services (HCBS) for Medicaid participants in recent years. The number of participants receiving HCBS more than quadrupled from 1999 to 2004, while the number of participants in nursing homes decreased. From FY 2001 to FY 2006, however, the increase in Medicaid spending on nursing homes was more than four times the increase in spending on

<table>
<thead>
<tr>
<th>Type of Service</th>
<th>Medicaid Participants¹</th>
<th>Expenditures (millions)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>1999</td>
<td>2004</td>
</tr>
<tr>
<td>HCBS</td>
<td>2,667</td>
<td>11,747</td>
</tr>
<tr>
<td>Nursing Homes</td>
<td>23,909</td>
<td>22,678</td>
</tr>
</tbody>
</table>

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).

* Mississippi reported total waiver spending for 2006, but not spending for each individual waiver. Consistent with the proportion in earlier years, we estimate that 70 percent of total waiver spending went toward waivers for older people and adults with physical disabilities.
HCBS. In fact, Medicaid spending on nursing homes increased by $232 million, an amount larger than the total HCBS spending for older people and adults with disabilities ($79 million) in FY 2006.

In 1999, the Medicaid Elderly/Disabled waiver had an enrollment of 2,540 persons. By 2006, the caseload had increased to 10,732 persons, and the program still had a waiting list of between 6,500 and 7,000 persons in 2007.

**Major Initiative**

Mississippi is focusing specific LTC reform efforts on improving coordination between the LTC and housing sectors. Using federal grant money, the state developed a statewide Action Plan with recommendations for interagency coordination of policies, resources, and services to meet the needs of persons with disabilities.

Mississippi’s “Project BRIDGE” is intended to enhance collaboration between housing and long-term support services. The grant staff established a statewide BRIDGE action council composed of housing and long-term support providers, state agency staff members, individuals with disabilities, and families whose purpose is to guide an agenda for systems change.

The project plans to select two model communities to test an action plan being developed by the University of Southern Mississippi Institute for Disability Studies under the state’s direction.

**Other Developments**

**Pre-Admission Screening.** The Division of Medicaid developed a comprehensive pre-admission screening process in 2007 that established comparable eligibility criteria for nursing facility services and Medicaid HCBS waivers. All persons seeking LTC service will be assessed by a common instrument and screening criteria. The new process was scheduled for implementation in October 2007.

**Aging and Disability Resource Center (ADRC).** In September 2005, Mississippi received $750,000 from the Administration on Aging to create an Aging and Disability Resource Center. Goals for the project include creating a single point of entry to enable consumers to obtain information regarding LTC resources, streamlining and coordinating LTC services, and increasing the number of people using the single-point-of-entry system.