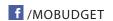


Budget Basics: Community-Based Senior Services

2017

An introduction to Missouri's community-based senior services and funding





Community-Based Services for Seniors

Missouri provides an array of services that collectively seek to promote the health, independence and safety of Missouri seniors. By 2030, nearly 1 in 5 Missourians will be over the age of 65, compared to around 1 in 7 in 2010. This underscores the importance of programs that support seniors who want to remain in their own homes and communities as long as possible.

Benefits of community based services for seniors:2

- Home and community based services (HCBS) cost less than institutional care.
 - HCBS promote independence and keep seniors in their own home.
 - HCBS provide support and relief to family caregivers.



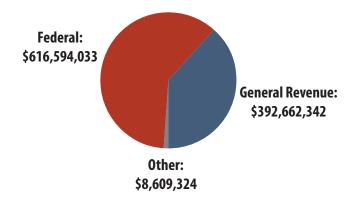
Note: home & community-based services, Missouri RX & protective services serve seniors and people with disabilities. The numbers above reflect services to all clients of these services.

This primer is intended to serve as a guide for those who care about programs that serve older Missourians, and increase the transparency of the budget by providing information on where key programs can be found in the budget bills. This primer also identifies the major programs that serve seniors in Missouri. **Amounts included are Appropriated and reflect Gubernatorial vetoes, but not any mid-year restrictions that may have been made.**

Funding for Community-Based Senior Services

In the FY 2017 budget year, Missouri dedicated over \$1 billion to community-based senior services, nearly 2/3 of which is funded by federal revenue.³

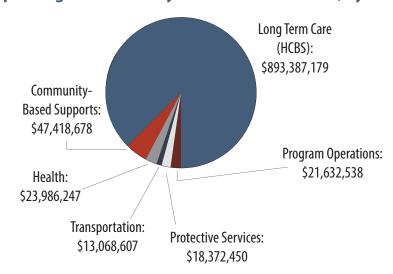
Total Spending on Community-Based Senior Services, by Source of Funding



Senior services fall under five primary categories:

- Long-term care
- Community based supports
 - Health
 - Transportation
 - Protective Services

Total Spending on Community-Based Senior Services, by Program Type



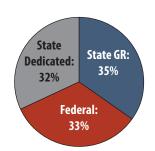
Note: Only 3.68% of program operation funds pay for administrative staff, with the remainder paying for field staff (who investigate claims of abuse and exploitation) and programs such as the Long-Term Care Ombudsman and Central Registry Unit.

Budget Basics

Each year the state takes in and spends approximately \$27 billion.



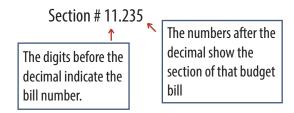
- Another third is state revenue dedicated to specific state purposes, like the fuel tax, which is dedicated to transportation.
- Lawmakers have the most authority to allocate the final third, referred to as General Revenue.



Community-based senior services in Missouri are housed within:

- Department of Health & Senior Services (DHSS) Senior and Disability Services (SDS) [HB 10]
- Department of Health & Senior Services (DHSS) Division of Regulation and Licensure [HB 10]
- Department of Social Services (DSS) MOHealthnet [HB 11]
- Department of Social Services (DSS) Family Support (FS) [HB 11]
- Department of Transportation (DOT) [HB 4]

In order to track appropriations for a specific program, one must locate the appropriate budget bill and section number.

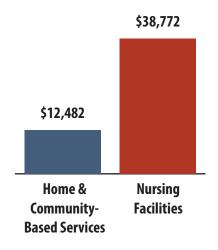


See Appendix for a detailed list of specific senior service programs, relevant section numbers, and FY2017 funding levels and sources.

Unless otherwise noted, all data on funding levels & sources, eligibility criteria, and program enrollment & efficacy were obtained from the 2018 Department Budget Requests through the Office of Administration, Division of Budget Planning https://oa.mo.gov/.

Home and Community-Based Long Term Care

Over the past several decades, the provision of long-term care has shifted from primarily institutional settings⁴ to a heavier reliance on care provided within the home and community. This is due in part to the changing preferences of older adults and their caregivers, but also to the cost savings associated with Home and Community Based Services (HCBS).



Home & Community-Based Services cost an estimated \$12,482 per participant, compared to \$38,772 per nursing facility resident.

Home and Community-Based Services (HCBS) afford Medicaid-eligible seniors and adults with physical disabilities control and access to a full array of long-term services and supports in the community that promote independence, health, and quality of life, including:

- personal care & nurse visits
- adult day & respite care
- homemaker services & home delivered meals
- adaptive equipment

Money Follows the Person (MFP) is a demonstration program which transitions individuals who are elderly, disabled, or who have developmental disabilities from nursing facilities to Home and Community-Based Services.

Supplemental Nursing Care provides monthly cash benefits to eligible persons in Residential Care Facilities, Assisted Living Facilities, non-MO HealthNet certified areas of Intermediate Care Facilities, and Skilled Nursing Facilities. These grants help low-income seniors and persons with disabilities afford adequate care and remain in a less restrictive environment for long term care, improving their quality of life.

Community-Based Supports⁵

Community support services for older Missourians are provided largely through provisions of the Older Americans Act of 1965.6 These services are available to seniors statewide and are administered by the ten Area Agencies on Aging (AAAs).

AAAs provide supportive services (including transportation, adult day care, and in-home services), nutrition services, family caregiver support (including respite and counseling services), ombudsman services, senior employment and training, and health promotion services.

FY 2017 Projected Number of Persons Served 7











Nutrition	Congregate	64,828
Services	Nutrition	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	Home Delivered	37,567
	Meals	
Supportive	Transportation	15,269
Services	Homemaker	2,349
	Personal Care	577
	Respite Care	654
	Adult Day Care	74
	Other	24,129
Family	Information	3,045
Caregiver	Counseling,	429
Support	Support Groups	
	Respite Care	876
	Supplemental	1,000
	Services	
Elder Rights	Health	16,898
	promotion	
	Employment	334
	training &	
	opportunities	
	Legal Services	2,232

Naturally Occurring Retirement Communities (NORCS) establish programs, supports, and services within local communities that allow seniors in designated geographic areas with high proportions of older adults to remain in the community rather than entering a long-term care facility. These programs support the healthy aging of older adults through increased community involvement and easy access to services that include transportation, socialization and education, assistance with household maintenance, healthcare, and security.

It is projected that in FY2017 this program will reach 1,979 seniors.

Alzheimer's grants provide funding for organizations that serve patients and families dealing with Alzheimer's and other dementia-related diseases, to provide caregiver respite, peer-to-peer counseling, and caregiver safety training programs such as those that prevent wandering. This program will serve an estimated 29,793 clients in FY2017.

Older refugee & immigrant programs provide assistance to elderly and/or disabled refugees residing in Missouri who are unable to take advantage of the normal naturalization process due to health, functional, or literacy barriers, by helping them access services, navigate the naturalization process, and ultimately gain United States citizenship.

Health*

The Missouri Rx Plan provides pharmaceutical benefits to certain seniors who are struggling financially and facilitates coordination of benefits between the Missouri Rx plan and the federal Medicare Part D drug benefit program.



247,209 MO Rx members monthly

projected monthly average

Missouri Rx Eligibility & Benefits

- Available to elderly and disabled Missourians below 185% of the Federal Poverty Level (FPL)
- Covers 50% of members' out of pocket costs (after Medicare Prescription Drug Plan payment).
 - 50% of the deductible,
 - 50% of the co-pays before the coverage gap,
 - 50% of the coverage gap
 - 50% of the co-pays in catastrophic coverage.
- Does not cover Medicare Part D premiums

^{*} There are several public health programs serving seniors, including the Bureau of Immunizations. For a detailed discussion of these programs see MBP's *Budget Basics: Family & Community Supports* and *Medicaid in Missouri: 2017 Chartbook* at www.mobudget.org

Transportation

Senior and disabled transit provides funding for essential transportation programs, including the purchase of vehicles for non-profit agencies serving senior citizens and persons with disabilities that have limited access to their communities where public transportation is unavailable or insufficient.

The Missouri Elderly and Handicapped Transportation Assistance Program (MEHTAP) partially matches the local share of funds used to provide essential transportation programs for seniors and/ or persons with disabilities. The MEHTAP program reimburses on average less than ten percent of eligible mobility operating expenses. Average cost per trip to seniors is estimated at \$8.13 in FY2017.

Protective Services

Adult Protective Services provides short-term intervention services to eligible adults who have been victims of abuse, neglect, or financial exploitation. These individuals can obtain temporary and emergency services to assist them in remaining safely in their homes and communities including case management follow-up; emergency food, shelter, and caregiver services; financial and economic assistance; legal assistance; medical care; home support and temporary housing; and social and educational services.

In FY2017 it is estimated that APS will complete 25,696 investigations into abuse or neglect.

Funding for field staff who investigate claims of abuse and neglect is housed in the program operation budget for the Division of Senior and Disability Services. This budget also includes the **Long-Term Care Ombudsmen Program** that oversees advocacy for the rights of long-term care residents and the **Central Registry Unit** (a hotline that registers complains of abuse, neglect, and exploitation of seniors and the disabled).

The Family Care Safety Registry provides background screenings to employers and individuals or families who want to hire a caregiver for a child or disabled or senior adult.

Regulatory and licensing programs provide an essential service in ensuring that institutional and home based long-term care services in Missouri meet quality and safety standards.

- The Board of Nursing Home Administrators consists of ten individuals appointed by the governor who are responsible for establishing qualifications for licensure, testing standards, and license renewal requirements of individuals who serve as a licensed administrator in a skilled, intermediate care, assisted living facility, or residential care facility.
- Home Care and Rehabilitative Standards inspects home health and hospice agencies to assure state and federal requirements are met, patient rights are protected and promoted, and quality care is provided.
- The Long Term Care Program licenses and conducts inspections of long-term care facilities and adult day care facilities; reviews and approves applications; completes building plan reviews; administers the certified nurse aide, certified medication technician, and level one medication aide programs; and takes enforcement actions as needed.

In FY2017, it is projected that the LTCP will receive and investigate 8,400 complaints.

Appendix

Amounts shown are Appropriated and reflect Gubernatorial vetoes, but do not include any mid-year restrictions that may have been made.

Program	Department Budget	Budget Section	FY17 GR	FY17 Federal	FY17 Other	FY17 TOTAL
Senior and Disability Services Program Operations	DHSS	10.800	\$10,037,095	\$11,595,443	\$0	\$21,632,538
Medicaid Home and Community- Based Services	DHSS	10.815	\$316,949,858	\$547,283,887	\$0	\$864,233,745
Medicaid Home and Community- Based Services reassessments	DHSS	10.815	\$1,500,000	\$1,500,000	\$0	\$3,000,000
Money Follows the Person	DSS	11.430	\$0	\$532,549	\$0	\$532,549
Supplemental Nursing Care	DSS	11.130	\$25,620,885	\$0	\$0	\$25,620,885
OAA – AAAs	DHSS	10.820	\$11,805,720	\$34,500,000	\$62,958	\$46,368,678
NORCS	DHSS	10.830	\$300,000	\$0	\$0	\$300,000
Senior Refugees & Immigrants	DHSS	10.805	\$200,000	\$0	\$0	\$200,000
Non-Medicaid Eligible Programs	DHSS	10.810	\$717,936	\$0	\$0	\$717,936
Alzheimer's grants	DHSS	10.825	\$550,000	\$0	\$0	\$550,000
Missouri RX Plan	DSS	11.435	\$18,602,844	\$728,077	\$4,655,326	\$23,986,247
Senior and Disabled Transit	DOT	4.451	\$0	\$10,600,000	\$0	\$10,600,000

MO Elderly and Handicapped Transportation Assistance Program (MEHTAP)	DOT	04.455	\$1,194,129	\$0	\$1,274,478	\$2,468,607
Board of Nursing Home Administrators	DHSS	10.900	\$82,546	\$13,516	\$0	\$96,062
Family Care Safety Registry	DHSS	10.900	\$595,601	\$236,834	\$0	\$832,435
Home Care and Rehabilitative Standards	DHSS	10.900	\$458,900	\$1,073,350	\$0	\$1,532,250
Long Term Care Program	DHSS	10.900	\$4,473,837	\$8,363,349	\$2,616,562	\$15,453,748
Adult Protective Services	DHSS	10.810	\$290,927	\$167,028	\$0	\$457,955

Notes

- 1. Missouri Department of Health and Senior Services and University of Missouri Office of Social and Economic Data Analysis. (2016). Missouri Senior Report 2013. Available from http://missouriseniorreport.org.
- 2. Fox-Grage, W., & Walls, J. (2013). State studies find home and community-based services to be cost-effective. Spotlight. Wash-ington, DC: AARP Public Policy Institute.
- 3. Program operation costs for the Division of Senior and Disability Services is included in calculation of total funding.
- 4. Institutional long-term care is financed primarily through Medicaid. For more detailed information on Medicaid eligibility see *Medicaid in Missouri: 2017 Chartbook*, Missouri Budget Project, January 2017, www.mobudget.org
- 5. Programs related to energy assistance and nutrition are critical resources for community dwelling seniors. For a detailed discussion of these programs see *Budget Basics: Family and Community Supports*, Missouri Budget Project, January 2017, www.mobudget.org
- 6. *The Older Americans Act: Aging Well Since 1965*, online at: https://acl.gov/NewsRoom/Observances/OAA50/docs/OAA-Brief-Final.pdf
- 7. Categories/clients served are not mutually exclusive.