

Aging in Missouri: An Overview of State Services & Funding



Missouri provides an array of services that collectively seek to promote the health, independence, and safety of older adults. These programs serve several different needs and are therefore administered and funded through various state departments.

As such, it can be difficult to both identify relevant state programs and track their funding.

This report provides a comprehensive overview of state programs serving older adults and people living with disabilities in Missouri with a specific focus on the adequacy of state funding to support these programs. Additionally, this document, and the online budget tool that accompanies it, is intended to increase the transparency of the budget by providing information on where key programs can be found in the budget bills.

Following the **Executive Summary** on the next page, the report is structured as follows:

The **Introduction** provides key demographic and background information that highlights the growing demand for programs that serve older adults.

Budget Background identifies relevant programs and explains how they are funded, as well as key budget sources and dynamics affecting the provision of services.

The **Findings** section discusses major trends identified in the funding for these services over time, and how they affect Missourians.

The report then provides a **Summary of the Programs** that serve older adults, including information that enables individuals to locate and track the funding of these programs in the state budget and the annual appropriations process.

This report was prepared by Missouri Budget Project in partnership with the Missouri Association of Area Agencies on Aging (MA4) and Missouri Council on Aging, and was supported by Missouri Foundation for Health.

EXECUTIVE SUMMARY

As the number of older Missourians increases, demand for programs serving older adults and people living with disabilities has grown dramatically. However, the availability of and funding for these services has not kept pace.

This report provides an overview of state programs serving older adults and people living with disabilities in Missouri, with a specific focus on the adequacy of state funding to support these programs.

Our findings suggest that Missouri does not adequately fund services for older adults and people living with disabilities, particularly critical wrap-around services targeted toward community dwelling Missourians that are designed to prevent and delay the need for much more costly institutional care.

We find that:

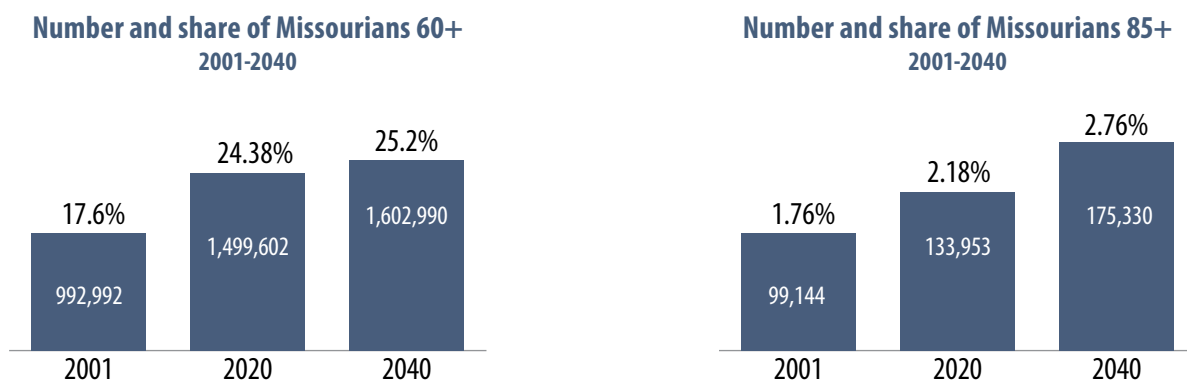
- Recent cuts to home-based care threaten to roll back the progress and cost savings that have been realized due to Missouri's shift away from institutional care, pushing older Missourians into more costly and restrictive care settings.
- Funding for programs designed to support independent community living and enhance quality of life for older adults and people living with disabilities is both low and stagnant. These programs account for less than 1% of the state budget and have grown little over time despite increasing need for and rising cost of providing services.
- Community-based supports and services have been hit especially hard by cuts related to budget shortfalls in the last decade. These programs were cut by over 40% between FY2017 & FY2018 and have yet to recover to prior levels.
- Programs enacted through statute, such as the "Circuit Breaker" tax credit and the senior levies, do not automatically adjust to keep pace with demand, leading to an erosion in the value of benefits over time and fewer Missourians able to access needed services.

INTRODUCTION

Population Changes Demonstrate Need for Supportive Services

All older adults and people living with disabilities should be able to live where and with whom they choose regardless of their zip code or the size of their bank account. Yet, nearly one in four nursing home residents in Missouri have a low need for care, a rate higher than every other state in the nation.ⁱ This indicates that far too many Missourians are prematurely placed in institutions – at great cost to those residents, their families, and to our state.

As Missourians live longer, both the number and share of older adults in our state has increased. This trend will continue, with one in four Missourians projected to be age 60 or over by 2040.ⁱⁱ While most of these Missourians will continue to live independently, many will require support to live at home for as long as they choose and to continue to fully participate in and contribute to their communities. This is especially true among Missourians 85+, a group that will continue to grow over the next two decades.



Source: Missouri Census Data Centerⁱⁱⁱ; University of Virginia Weldon Cooper Center^{iv}

As such, the need for quality public services designed to support community living has grown and will continue to increase in the coming decades. Moving forward, it is critical that Missouri be prepared to provide an adequate level of support to older adults, people living with disabilities, and the family and friends who often act as their primary caregivers. In the long run, it is much more cost effective for Missouri to ensure older adults and people living with disabilities have access to the supportive services they need to prevent and delay more costly institutional care.

How Missouri Funds Services for Older Adults & People living with Disabilities

Most of programs that promote the health, independence and safety of older adults and people with disabilities are found in the state budget and require an annual appropriation. Lawmakers have the final say in how these funds are spent, but advocacy opportunities also exist at the department and executive level. To learn more about the budget process and points at which advocates can influence it, see *An Introduction to Missouri's State Budget*.^v

Some programs provide services to Missourians who already need assistance with daily activities.



Long-term Supports and Services (LTSS): Institutional and home-based care provided to older adults and people living with disabilities. These programs serve Missourians who need assistance with daily activities and are generally targeted toward those who qualify for a nursing home level of care.

Other programs support independent community living and enhance quality of life for older adults and people living with disabilities. These services represent a critical investment, as they are designed to prevent and delay more costly care in the future.



Community-Based Supports and Services (CBSS): Programs designed to help older adults and people living with disabilities remain safely in their homes. These services provide a much-needed complement to LTSS and can reach Missourians who do not yet need a high level of care in order to delay or prevent institutionalization.



Employment: Programs designed to support employment among people living with disabilities in order to maximize independence and integration into the community.



Transportation: Programs designed to provide older adults and people with disabilities access to reliable transportation for medical appointments, work, grocery shopping and other activities essential to remaining in the home and community.



Prevention of Elder Abuse: Programs designed to provide intervention services to older adults and adults living with disabilities who have been abused, neglected, or exploited as well as the infrastructure needed to investigate these allegations and prevent future abuse.



Regulation & Licensure: Programs designed to provide regulation and oversight of home-based and institutional care for older adults, including background screenings, inspections of facilities, and licensing standards.

Funding for programs within Missouri's state budget comes from three main sources.

Federal Funds: Funds that come from the federal government for very specific purposes, such as Medicaid. Often requires the state to match a certain percent of funding (referred to as a state match).

Earmarked State Funds: State revenue dedicated to specific purposes, such as the gas tax (which pays for transportation programs) or the gambling tax (which goes toward education).

General Revenue Funds: State revenue not dedicated to specific purposes. *This is the source of revenue that lawmakers have the most authority to allocate, and it is where the greatest opportunity for advocacy exists within the budget process.*

These programs are delivered and funded through appropriations in five departments.

The legislature outlines its recommendations for the state budget in the first 13 numbered House Bills (HB), referred to as the budget bills.

Programs serving older adults and people living with disabilities are housed in several departments and budget bills. The following five budget bills include the services discussed in this paper.

For detailed information on FY2022 budget line items that fund programs for older adults and people living with disabilities see Appendix 1.

HB2 Department of Elementary and Secondary Education (DESE)

HB4 Department of Transportation (DOT)

HB10 Department of Health and Senior Services (DHSS)

Department of Mental Health (DMH)

HB11 Department of Social Services (DSS)

In order to track appropriations for a specific program, one must locate the appropriate budget bill and section number. For example, funding for Area Agencies on Aging and Meals on Wheels is listed as:

OAA – AAAs core & Meals on Wheels [10.825]:

Section # 10.825

The digits before the decimal indicate the bill number.

The numbers after the decimal show the section of that budget bill

Other key programs have been enacted through state statute and do not require an annual appropriation.



These include:

“Circuit Breaker” Tax Credit: The Missouri Property Tax Credit provides property tax relief for low-income older adults and people living with disabilities.

Tax credits like the Circuit Breaker are enacted by state statute and are not appropriated within the state budget. Rather, the credits reduce the amount of state general revenue that is collected through Missouri’s tax system. The annual cost of the program is determined by the number of eligible Missourians who apply each year and the size of the credit for which they are eligible. Any adjustments to tax credits, including the “Circuit Breaker” tax credit, must be implemented through the legislative (vs. budgetary) process.

Senior Levy Funds: Earmarked funds collected through a local property tax levy that provide funding for vital services that help older Missourians remain in their homes and communities. Although these taxes are assessed at the local level, the ability to levy them, and the caps on the amount of taxes that can be collected, are authorized through state statute.

Improvements to these programs must be made by changing statute, amending the constitution, or through a vote of the people.

The Hancock Amendment limits budget and revenue flexibility.

The Constitution of Missouri has several provisions designed to limit the amount of revenue raised by the state & localities commonly referred to collectively as the Hancock amendment.

- The Hancock Lid limits the amount of Missourians’ personal income that may be used to fund state government to no greater than the portion used to do so in 1981, when it was 5.6 percent. Missouri revenue is now approximately \$4.4 billion BELOW the Hancock lid.^{vi}
- Another part of the Constitution requires voters to approve taxes or fees passed by the General Assembly that exceed specific annual limits. In fiscal year 2021, the legislature had authority to authorize tax changes that would generate up to \$111.8 million.^{vii}
- Yet another provision limits the growth in local property taxes to no more than the rate of annual inflation.^{viii}

Taken together, these provisions of the Missouri Constitution arbitrarily limit the amount of revenue that can be collected in Missouri and hamper the ability of the state and localities to quickly respond to new dynamics, including the increasing need for services necessitated by the growth in both number and share of older Missourians. The Hancock lid greatly reduces the amount of funding available to the senior levy funds and to services funded through the appropriations process.

FINDINGS

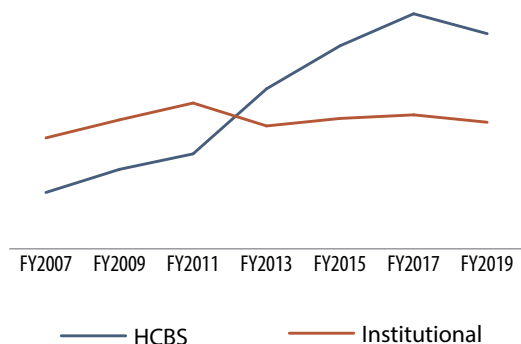
Funding has shifted away from expensive and restrictive institutional care toward care provided in the home and community, but recent cuts to home care threaten to roll back the progress and cost savings that have been realized.

Many older adults and people living with disabilities prefer to continue living independently in their communities. This preference is supported by the 1999 Olmstead decision which prevents the unlawful segregation of people with disabilities in institutions^{ix} and federal grants and incentives^{x,xi} designed to promote community living. The combined impact of personal preference and policy decisions have shifted services away from expensive institutional care toward more cost-effective home-based care (referred to as “rebalancing” Long-Term Supports and Services (LTSS)).^{xii} Yet the savings realized by this change are not easily visible because the cost of institutional care is spread throughout multiple line items in the budget.

However, examination of Medicaid expenditures shows that there have been significant savings in institutional care costs resulting from the shift toward home care. Unfortunately, recent restrictions on home care threaten to roll back this progress, even though Missouri’s LTSS expenditures currently fall in line with national trends.

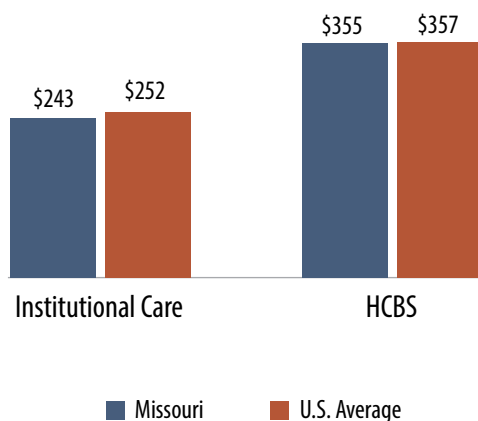
Missouri’s shift toward home care has recently leveled off due in part to restrictions on eligibility for these services.

Medicaid LTSS Expenditures in Missouri
FY 2007 - FY 2019



Source: Centers for Medicare and Medicaid Services (CMS)^{xiii}

Per Capita LTSS Expenditures, 2019



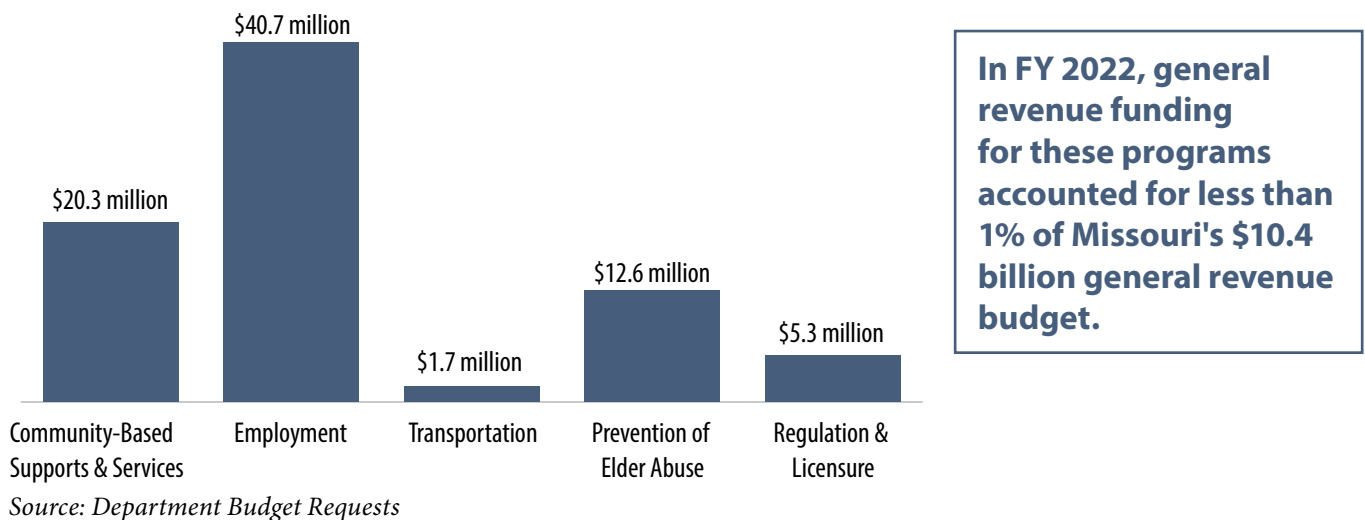
Missouri’s current per capita spending on LTSS, both institutional and HCBS, sits slightly below the national average.

Source: Centers for Medicare and Medicaid Services (CMS)^{xiv}

Funding for “wraparound” type services - programs designed to support independent community living and enhance quality of life for older adults and people living with disabilities - is both low and stagnant.

As a result, many Missourians experience health declines because they cannot access appropriate support, while others “spend down” to qualify for services. This can cost the state more in the long term as Missourians who do not yet need a high level of care enter more costly and restrictive settings than would have otherwise been needed. Wrap-around services that prevent and delay costly institutional care would not only be cheaper, but would better serve the needs of older Missourians and Missourians living with disabilities.

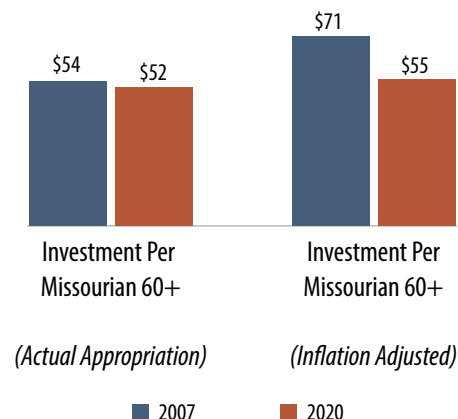
General Revenue Funding for Services Designed to Support Independent Community Living FY2022



Average Investment in Programs to Support Independent Community Living Per Missourian 60+ FY 2007 - FY 2020

The average investment in these programs per Missourian 60+ has been stagnant for decades.

Adjusting to today's dollars, this translates to a 22% cut in the value of that investment since 2007.



Community-based supports and services have been hit especially hard by cuts related to budget shortfalls in the last decade.

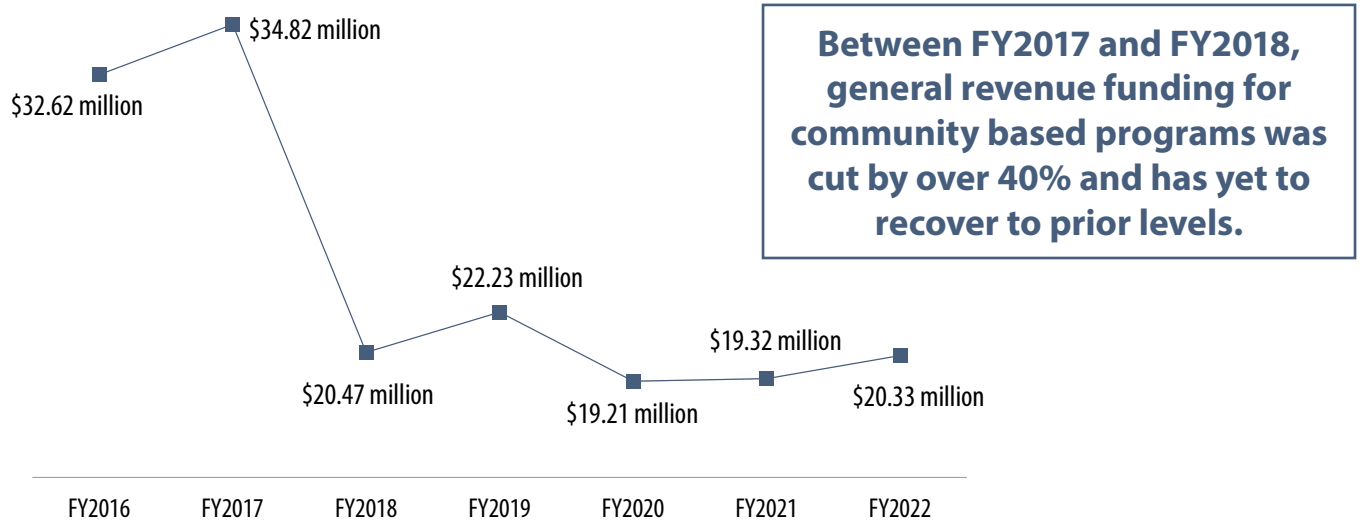
Between FY2015 and FY2016, net corporate tax revenue in Missouri declined by \$155 million, a loss of over one-third of corporate revenue collected annually.^{xvi} This collapse led to widespread expenditure restrictions in FY2017 and permanent budget cuts in FY2018.

Many community-based supports and services, including MORx, Centers for Independent Living (CILS), and the Senior Independent Living Program (SILP) suffered devastating budget cuts as part of an effort to balance the budget. Eligibility restrictions making it harder to qualify for HCBS in Missouri were also imposed as part of the budget balancing efforts.

This collapse in corporate tax collections was largely attributed to an error in what is referred to as Missouri's corporate apportionment rate. Legislators subsequently fixed this error; however, the recaptured revenue was used to fund a reduction in the corporate tax rate from 6.25% to 4%, rather than restoration of services.^{xvii}

General Revenue Funding for Community-Based Supports & Services

FY 2016 - FY 2022



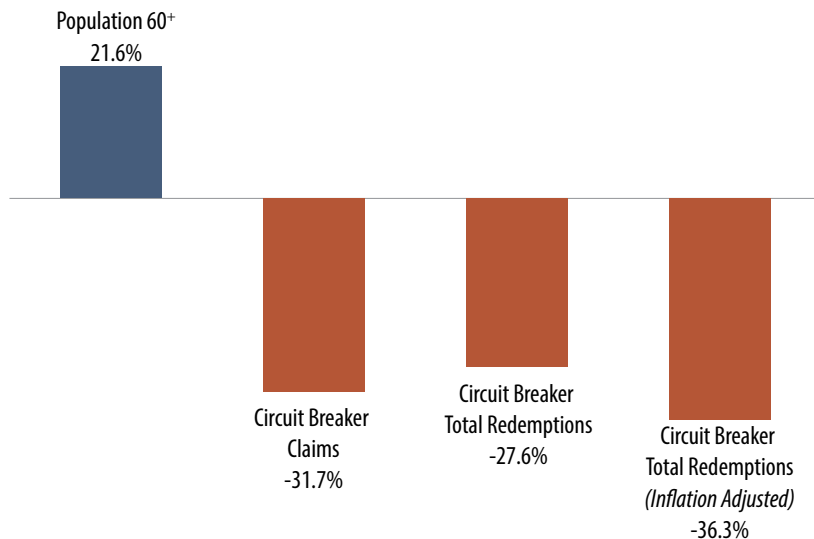
Source: Department Budget Requests: FY 2017 - FY 2023

Programs enacted through statute do not automatically adjust to keep pace with demand for services, leading to an erosion in value over time.

Income eligibility limits and benefit amounts for the Circuit Breaker Tax Credit are fixed and do not automatically adjust for inflation.

As a result, *fewer* Missourians qualify for a *smaller credit* over time - despite growing out-of-pocket costs and an increase in the number of Missourians who need services.

Change in Circuit Breaker Claims, Redemptions, and Number of Missourians 60+ Fiscal Years 2011 - 2019



Between 2011 and 2019, the number of older adults in Missouri grew by over 20%. During the same time, the number of Missourians receiving the Circuit Breaker Tax Credit and the value of those credits declined dramatically.

Source: Missouri Senate Appropriations Committee Annual Fiscal Reports; Missouri Census Data Center^{xviii}

Similarly, because senior levies are subject to arbitrary limits on the amount of funding they can collect, localities cannot easily adjust and prepare for the increasing need for services associated with a growing population of older adults. In practice, this means that the value of senior levy funds in Missouri has effectively declined and become spread thin over time.

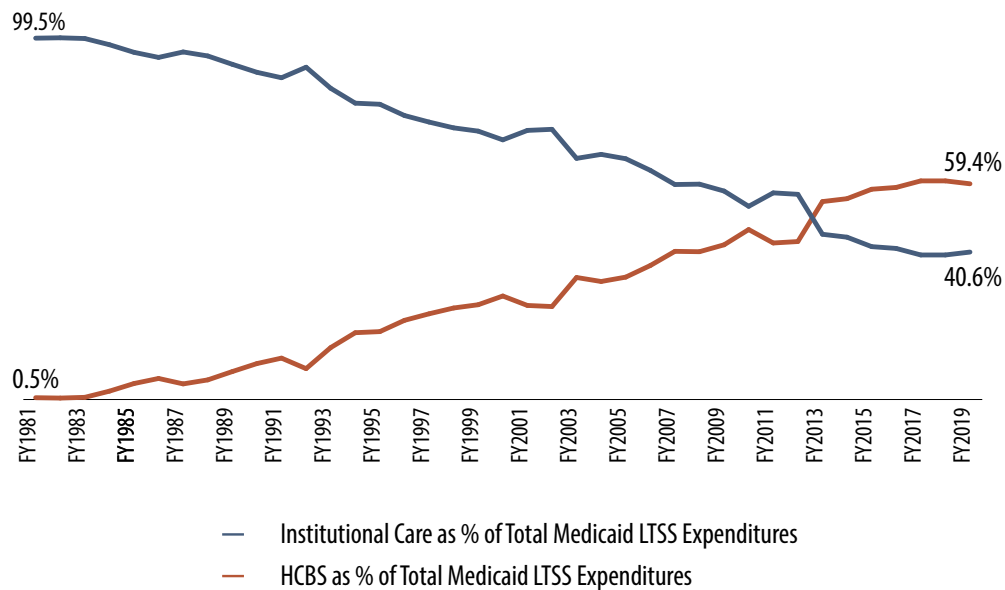
Summary of Programs

LONG TERM SERVICES AND SUPPORTS



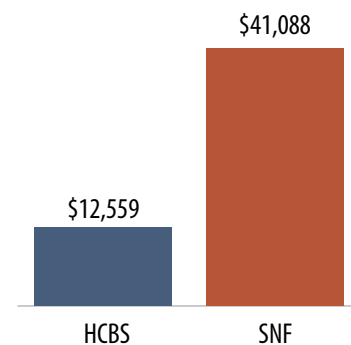
Over the past several decades, the provision of long-term services and supports (LTSS) for older adults and people living with disabilities has shifted away from primarily institutional care settings (such as nursing homes) toward care provided within the home, commonly referred to as Home and Community Based Services (HCBS).

**Medicaid HCBS & Institutional LTSS Expenditures in Missouri as a Share of Total Medicaid LTSS Expenditures
FY 1981 - FY 2019**



Source: Centers for Medicare and Medicaid Services (CMS)^{xix}

**Average Annual Cost of Care:
HCBS vs. Skilled Nursing Facilities (SNF) in Missouri**



On average, the cost of providing HCBS is less than a third of the cost of providing institutional care. Thus, the shift toward care provided in the home is not only preferable to older adults, people living with disabilities, and their caregivers; it is also more cost-effective in the long run and will help Missouri prepare for the increased budgetary cost associated with population aging.

Source: Fiscal Year 2023 Missouri Department of Health and Senior Services Budget Request

LONG TERM SERVICES AND SUPPORTS



In Missouri, the bulk of funding for LTSS is provided through MO HealthNet, Missouri's Medicaid Program, which provides health coverage to low-income Missourians. Medicaid is funded jointly by the state and federal governments, with federal funds covering nearly two-thirds of the cost of the program.^{xx} In order to qualify for LTSS, recipients must have chronic or disabling conditions, meet certain "level of care" (LOC) criteria, and meet eligibility criteria for Medicaid MO HealthNet for the Aged, Blind, or Disabled (MHABD) category.

Eligibility for MO HealthNet for the Aged, Blind, or Disabled (MHABD)

- Must be age 65 or older or be "permanently and totally disabled".
- Must make less than 85% of the federal poverty level (or ~\$963 monthly for a single adult).
- Must have property/assets valued less than \$3,000 (or \$6,000 for couples), excluding certain items such as a home and vehicle.
- Monthly income limit is reduced by the amount spent on medical expenses (Spend Down).

Note: In FY2006, income limits for MHABD reduced from 100% FPL to 85% FPL; in FY2019 asset limit raised from \$2,000/\$3,000

Institutional care for older adults and people living with disabilities, such as care provided within a skilled nursing facility, is considered a "mandatory" Medicaid benefit, meaning that Missouri is federally required to provide this benefit through MO HealthNet, and all eligible enrollees automatically receive services.

*Funding for institutional LTSS is spread throughout various line items in the **Department of Social Services MO HealthNet Division [HB 11]** and thus the cost of institutional care is not easily visible to lawmakers as they craft the budget.*

Home and Community-Based Services (HCBS) afford Medicaid-eligible older adults and people living with 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.

HCBS is an "optional" Medicaid benefit, meaning that states can choose to provide HCBS, but are not required to do so. Missouri's HCBS services are provided through a state plan amendment (SPA) that provides personal care and other support service to older adults and people living with disabilities in addition to ten federal waivers targeted toward specific populations.^{xxi} Services provided through Missouri's waiver programs are allowed to set limits on the number of enrollees and to establish waiting lists for services.

LONG TERM SERVICES AND SUPPORTS



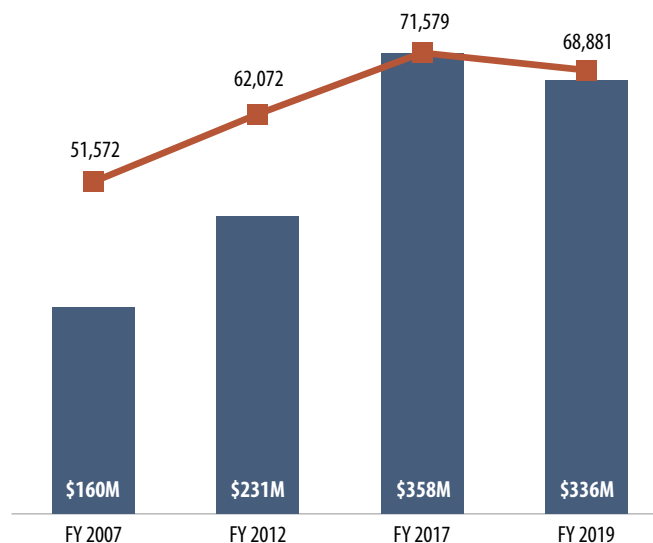
Most older adults and people living with disabilities receiving HCBS in Missouri have services administered by DHHS through one of two models:

Agency Model (HCBS): Clients are assigned a caregiver by an agency.

Consumer Directed Services (CDS): Clients hire a caregiver of their choice, including a friend, neighbor, or family member other than a spouse or legal guardian.

*These models for HCBS are funded through separate line items: **Medicaid Home and Community-Based Services (HCBS) [10.815]** & **Medicaid Consumer Directed Services (CDS) [10.810]**. Additional funding for HCBS provided to people with intellectual and developmental disabilities flows through various line items in DMH Division of Developmental Disabilities [HB 10].*

**HCBS & CDS Total Annual General Revenue Appropriation (TAFP) and Actual Enrollment
FY 2007 - FY 2019**



Source: Department of Health and Senior Services Budget Requests; DHSS administrative data

Prior to the pandemic (at which point federal incentives to enhance HCBS funding were included in federal stimulus packages), Missouri's investment in HCBS had begun to level off and even reverse as a result of restrictions to HCBS eligibility that had been imposed. Such restrictions risk shifting clients to more expensive institutional care settings if they are not able to obtain coverage for the services needed to remain in their home.

- In both FY2005 & FY2018, the "level of care" eligibility limit for HCBS was raised, meaning that clients must have a higher level of need to receive services than in prior years.
- In FY2018, the cost of CDS was capped at 60% of the cost of care in a nursing facility.

LONG TERM SERVICES AND SUPPORTS



Several other programs that flow through Missouri's state budget are designed to support or fill gaps in Missouri's Medicaid LTSS programs.

Money Follows the Person (MFP) is a federal grant that has transitioned over 2,100 older adults and people living with disabilities in Missouri from nursing facilities to HCBS services at a cost savings of over \$32,000 per person.^{xxii} The Consolidated Appropriations Act (CAA) extended MFP funding through federal fiscal year 2023, with all funding to be expended by September 2025.

***Money Follows the Person [11.640]:** Missouri has received MFP grant funding since 2007; the grant award has remained steady at approximately \$533,000 annually and is not supplemented with state dollars.*

Supplemental Nursing Care provides support primarily to older adults and adults living with disabilities who live in a licensed residential care facility (RCF) or an assisted living facility (ALF) in order to ensure low-income Missourians are able to receive adequate care while remaining in a less restrictive and less costly environment. The program provides a cash payment of \$156 per month for RCF residents, and \$292 per month for ALF residents. Recipients also receive a \$50 personal needs allowance.

***Supplemental Nursing Care [11.170]:** Supplemental nursing care is entirely funded out of general revenue and has seen little change in funding over the past several years.*

The Non-Medicaid Eligible Program funds services to meet personal care needs for consumers who are not Medicaid eligible. Individuals must meet annual eligibility requirements regarding income and assets, and must need assistance with activities of daily living. This program has not been renewed, and no new participants are being enrolled as it phases out.

***Non-Medicaid Eligible Programs [10.805]:** The NME program is set to end on June 30, 2025; funding has steadily declined as the number of participants decreases in anticipation of the program termination.*

COMMUNITY-BASED SUPPORTS & SERVICES

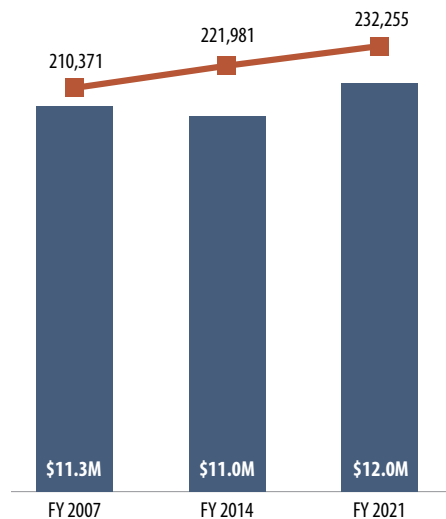


Area Agencies on Aging (AAAs) provide supportive services to Missourians age 60+ through provisions of the Older Americans Act of 1965. The services, which are administered by Missouri's ten Area Agencies on Aging, are funded by a patchwork of federal, state and local funding, and are available statewide.

***OAA – AAAs core & Meals on Wheels [10.825]:** State funding for AAAs has been stagnant over time, meaning that while the number and share of older adults grow, the AAAs have struggled to keep pace with demand for services.*

General revenue accounts for only around ten percent of the budget of Missouri's AAAs; only 6 states in the nation provide a lower share of support.^{xxiii} Because general revenue is such a small share of the total budgets, AAAs have not experienced the dramatic cuts in enrollment necessitated by budget cuts in other programs. Yet as the number of older adults in Missouri increases, and more become eligible for services, demand has outpaced the capacity of the AAAs.

**AAAs Annual General Revenue Appropriation (TAFP) and Actual Enrollment
FY 2007 - FY 2021**



Source: Department of Health and Senior Services Budget Requests; DHSS administrative data

The Senior Services Growth and Development Program was created in 2019 to provide funding to enhance services provided through Missouri's AAAs, with 50% of funds designated for development and expansion of senior center programs, facilities, and services. Funding was to come from a portion of the premium tax collected from certain insurance companies and associations.

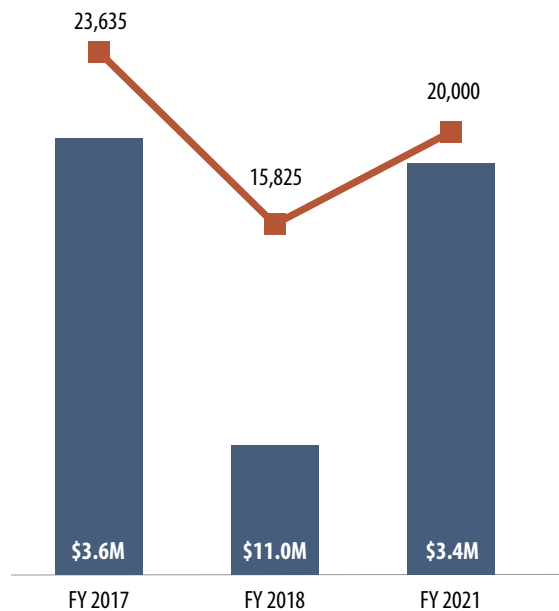
***Senior Services Growth and Development Program Transfer [10.820]:** As of FY 2022, this program remains unappropriated and funding has not been made available to AAAs.*



Centers for Independent Living (CILS) provide supportive services to Missourians with disabilities to maintain their independence and remain in their homes and communities. The first Missouri CIL was established in 1979, and was one of the first CILS in the nation to receive federal funding.^{xxiv} Missouri was also one of the first states to establish and provide state funding for CILS.

***Centers for Independent Living (CILS) [2.200]:** In FY2018, dramatic cuts were made to the CILS budget which led to large cutbacks in services. Funding for the CILS has only recently been restored to prior levels.*

**CILS Annual General Revenue Appropriation (TAFP) and Actual Enrollment
FY 2017 - FY 2021**



Source: Department of Health and Senior Services Budget Requests

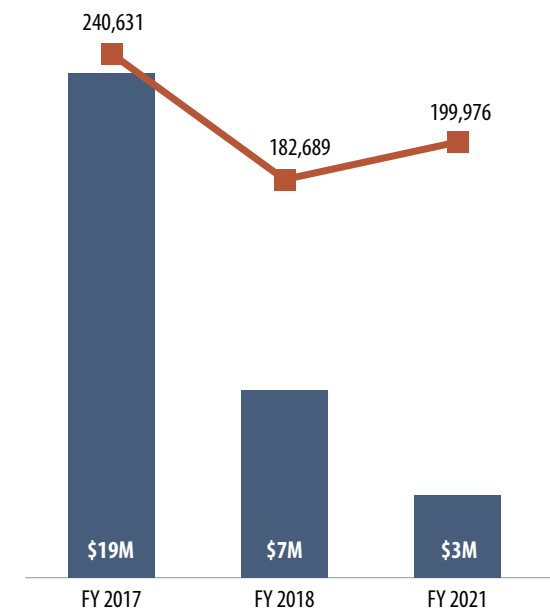
COMMUNITY-BASED SUPPORTS & SERVICES



The Missouri RX Plan (MORx) was established in 2005 to facilitate coordination of benefits with the federal Medicare Part D drug benefit program for low-income Missourians. MORx pays for 50% of out-of-pocket costs on medications that are covered by a Medicare Part D plan. Missourians can receive MORx coverage if they are eligible for both Medicare and Medicaid, sometimes referred to as “dual eligibles.”

Missouri Rx Plan [11.705]: *In FY2018, low-income Missourians only eligible for Medicare (or non-dual eligibles) were cut from MORx in response to budget shortfalls. As a result, nearly 58,000 older adults lost prescription drug coverage through MORx – or nearly 1 in 4 enrollees.*

**MORx Annual General Revenue Appropriation (TAFP) and Actual Enrollment
FY 2017 - FY 2021**



Source: Department of Social Services Budget Requests

In 2019, SB 514 restored eligibility for non-dual eligibles subject to appropriation; however, as of FY22 funding had not yet been restored and eligibility cuts remain in place.

Due to the subsequent closure of the Medicare Part D coverage gap^{xxv} (also known as the “donut hole”), restoration of MORx would not require a return to prior funding levels as Medicare now covers a larger share of prescription drugs costs; thus a restoration of MORx would cost significantly less than in previous years.

COMMUNITY-BASED SUPPORTS & SERVICES



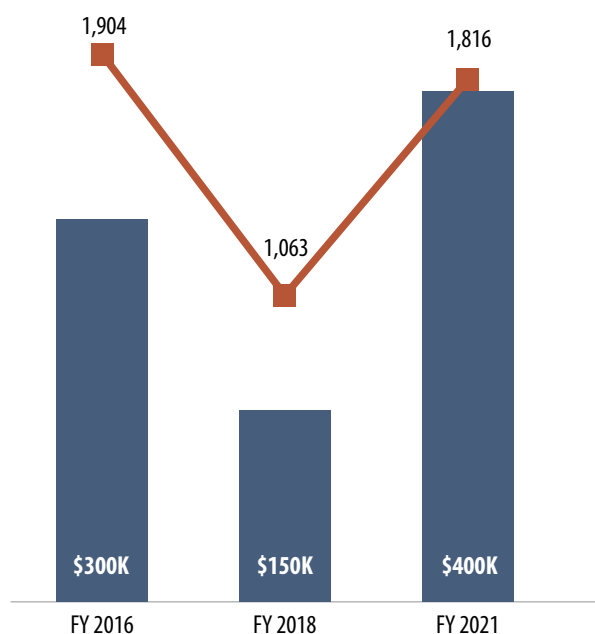
Alzheimer's Grants provide funding for organizations that serve patients and families dealing with Alzheimer's and other dementia-related diseases, to provide caregiver respite, peer-to-peer counseling, and caregiver safety training programs such as those that prevent wandering. In 2020 management of the Alzheimer's grants was transferred from the Alzheimer's Association to the Rural Health Association in order to expand programming to more rural areas across Missouri.

***Alzheimer's grants [10.830]:** For many years the Alzheimer's grants were partially funded through federal grants; however, Missouri has not received federal funding for this purpose for several years. Alzheimer's grants have been flat funded entirely from general revenue since FY2016.*

Senior Independent Living Program (SILP) - formerly known as Naturally Occurring Retirement Communities (NORCS) - establishes 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.

***Senior Independent Living Programs [10.835]:** SILP core funding was cut dramatically during the budget shortfalls of FY2017 & 2018. Core funding was restored in FY2019.*

**SILP Annual General Revenue Appropriation (TAFP) and Participants Reached
FY 2016 - FY 2021**



Source: Department of Health & Senior Services Budget Requests

EMPLOYMENT



Sheltered Workshops provide employment to adults with severe disabilities who are unable to secure employment through competitive job markets. Sheltered workshops are adapted to the needs and abilities of persons with developmental disabilities. There are 87 sheltered workshops in Missouri.

***Sheltered Workshops [2.290]:** Sheltered workshops are funded entirely out of general revenue and have received flat funding since FY2017.*

Vocational Rehabilitation (VR) helps individuals with physical or mental disabilities to choose, prepare for, and engage in employment in order to maximize independence and integration into the community. VR also works to help educate businesses about accessibility and develops workplace opportunities for persons with disabilities.

***Vocational Rehabilitation Services [2.190]:** VR is funded through a federal grant that requires a 21.3% state match rate. Funding for VR has grown at a steady pace for several years as the size of the federal grant increases annually.*

TRANSPORTATION



Senior/Elderly & Disabled Transit provides funding for essential transportation programs, including the purchase of vehicles for non-profit agencies serving older adults and persons with disabilities that have limited access to their communities where public transportation is unavailable or insufficient.

***Senior & Disabled Transit [4.495]:** Senior and Disabled Transit is funded through a Federal Transit Administration (FTA) grant. Grant funding has been flat since FY2016.*

The Missouri Elderly and Handicapped Transportation Assistance Program (MEHTAP) is a state funded program that partially matches local funds used to provide essential transportation programs for older adults and persons with disabilities.

***Missouri Elderly and Handicapped Transportation Assistance Program (MEHTAP) [4.500]:** General revenue support for MEHTAP was reduced by half during the Great Recession. Recent increases have not yet returned funding to prior levels.*

PREVENTION OF ELDERLY ABUSE



Adult Protective Services (APS) registers complaints of abuse, neglect, and exploitation and provides funding for the field staff who investigate those allegations. This funding also provides short-term intervention services to Missourians who have been victims of these crimes.

*Funding for Adult Protective Services accounts for the bulk of funding in **Senior and Disability Services Program Operations [10.800]**. Additional funding for services is found in **Adult Protective Services [10.805]**.*

The **Long-Term Care Ombudsman Program (LTCOP)** oversees advocacy for the rights of long-term care residents by conducting visits to the facilities on a regular basis, investigating complaints, and providing information and assistance. Missouri's LTCOP program has a decentralized structure that includes three and a half federally funded state employees, including the State Long Term Care Ombudsman (SLTCO); 15.5 regional ombudsman, who are either contracted or employed by the Area Agencies on Aging (AAA); and about 130 ombudsman volunteers across the state.

*LTCOP is primarily funded through **Senior and Disability Services Program Operations [10.800]**. Local services managed by the AAAs are funded through **OAA – AAAs [10.825]**. A small amount of funding flows through the **DHSS Division of Regulation and Licensure Program Operations [10.900]**.*

REGULATION AND LICENSURE



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 older adult.

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.

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.

*Funding for all Regulation and Licensure programs flows through the **DHSS Division of Regulation and Licensure Program Operations [10.900]**.*

PROGRAMS ENACTED THROUGH STATUTE



Missouri Senior Services Tax Levy Funds are designed to provide funding for vital services that help older Missourians remain in their homes and communities. These local funds are collected through a property tax levy authorized by state statute and approved through a vote of the people.

Fifty-two of Missouri's counties (or nearly half) currently have a senior services tax levy. Collectively, these counties raise over \$17.5 million annually, which is used to provide home care, meals, transportation, respite care, and other services to Missourians over age 60.

Missouri Senior Service Levy Funds: Current Levy Rate & Revenue Collected by County, 2021

Statewide	\$17.5M			Daviess	\$.0500	\$75K		Polk	\$.0461	\$183K
Andrew	\$.0273	\$84K		DeKalb	\$.0294	\$63K		Pulaski	\$.0441	\$243K
Atchison	\$.0492	\$90K		Dent	\$.0480	\$86K		Putnam	\$.0452	\$47K
Barry	\$.0483	\$277K		Gentry	\$.0500	\$54K		Ray	\$.0461	\$180K
Bates	\$.0500	\$124K		Greene	\$.0486	\$2.7M		Reynolds	\$.0300	\$53K
Benton	\$.0472	\$143K		Grundy	\$.0500	\$68K		Ripley	\$.0465	\$52K
Butler	\$.0476	\$315K		Harrison	\$.0496	\$66K		Schuyler	\$.0490	\$61K
Caldwell	\$.0500	\$91K		Henry	\$.0423	\$183K		Shannon	\$.0492	\$44K
Camden	\$.0460	\$828K		Holt	\$.0463	\$72K		St. Francois	\$.0473	\$428K
Cape Girardeau	\$.0478	\$714K		Lawrence	\$.0473	\$258K		St. Louis City	\$.0488	\$2.3M
Carter	\$.0497	\$42K		Linn	\$.0486	\$87K		Ste. Genevieve	\$.0295	\$263K
Cedar	\$.0497	\$98K		Livingston	\$.0498	\$102K		Stone	\$.0482	\$359K
Chariton	\$.0500	\$129K		Mercer	\$.0455	\$38K		Sullivan	\$.0500	\$54K
Christian	\$.0469	\$715K		Miller	\$.0479	\$228K		Taney	\$.0475	\$574K
Clark	\$.0500	\$64K		Morgan	\$.0417	\$239K		Washington	\$.0472	\$137K
Clay	\$.0427	\$2.3M		Nodaway	\$.0496	\$198K		Webster	\$.0455	\$231K
Crawford	\$.0464	\$169K		Oregon	\$.0465	\$52K		Worth	\$.0500	\$17K
Dallas	\$.0500	\$99K		Platte	\$.0457	\$1.5M				

Source: Office of the Missouri State Auditor

Despite growth in the number and share of older Missourians, the ability of the levy funds to meet an increasing need for services is hampered by several factors.

- The levy fund is capped at five cents per \$100 of assessed valuation and has not changed since enactment in 1989.
- Missouri's Hancock Amendment limits the collection of local property taxes to no more than the rate of inflation,^{xxvi} a limit which has not kept pace with the growth in need for services.
- The Hancock lid also requires that any change to levy fund collections must be approved by a vote of the people, which in practice means they cannot easily adjust to fluctuations in need for services.

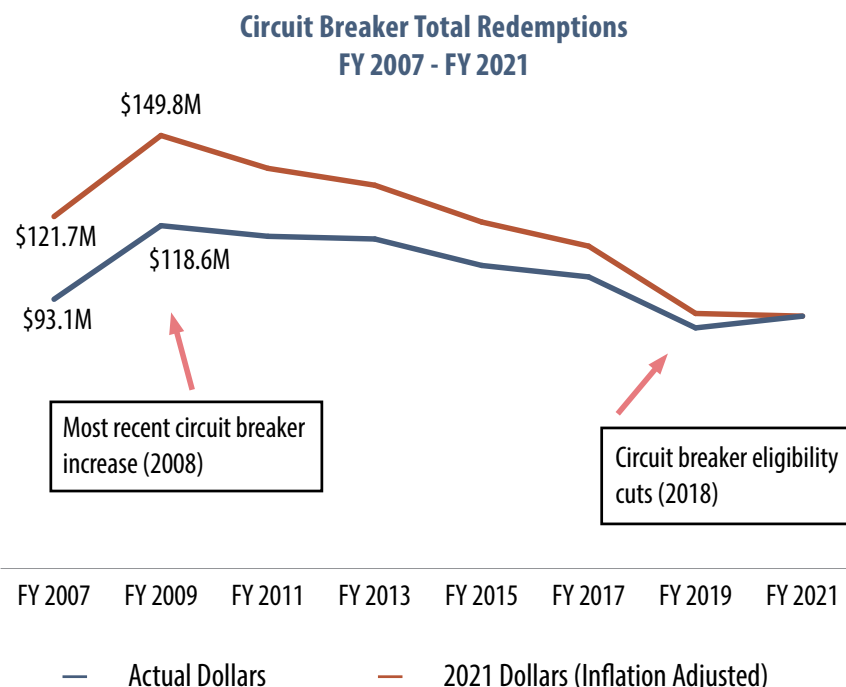
The Missouri Property Tax Credit, commonly referred to as the “circuit breaker” tax credit, helps older Missourians and Missourians living with disabilities who have fixed incomes stay in their homes by offsetting costs related to property taxes. Both homeowners and renters are eligible for the credit, which is based on the amount of property tax or rent paid, respectively.

Missouri “Circuit Breaker” Tax Credit

- **Income Limits:** Renters (Single: \$27,500; Married: \$29,500); Homeowners (Single: \$30,000; Married: \$34,000).
- **Eligibility Criteria:** Must be age 65+, age 18-64 & 100% disabled, or 60+ and receiving surviving spouse social security benefits. Cannot rent from a facility that does not pay property taxes.
- **Max Credit:** \$750 for renters and \$1,100 for owners. The actual credit varies based on the amount of property tax or rent paid and total household income, taxable and nontaxable.

In tax year 2019, Missouri’s circuit breaker property tax credit helped offset property taxes for nearly 150,000 households containing older adults & Missourians living with disabilities.

While average incomes and property taxes increase over time, circuit breaker eligibility guidelines and the size of the credit have remained flat since the last increase in 2008. As a result, fewer people qualify for the credit over time and those that do are more likely to fall higher on the phase-out scale – meaning they qualify to receive a smaller credit. In addition, Missourians who rent from a facility that is tax-exempt were cut from the Circuit Breaker Program in 2018.



APPENDIX: FY 2022 APPROPRIATIONS FOR PROGRAMS SERVING OLDER ADULTS AND PEOPLE LIVING WITH DISABILITIES

Program	Department	House Bill	Budget	General Revenue	Federal	Other	FY22 Total
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Long Term Services and Supports

Medicaid Home & Community-Based Services (HCBS)	DHSS	10	10.815	\$162,138,625	\$338,576,619	\$0	\$500,715,244
Medicaid Home and Community-Based Services (CDS)	DHSS	10	10.810	\$183,386,444	\$355,441,532	\$0	\$538,827,976
Money Follows the Person (MFP)	DSS	11	11.640	\$0	\$532,549	\$0	\$532,549
Supplemental Nursing Care	DSS	11	11.170	\$25,420,885	\$0	\$0	\$25,420,885
<i>Non-Medicaid Eligible Program</i>	DHSS	10	10.805	\$392,986	\$0	\$0	\$392,986

Community Based Supports and Services

OAA – AAAs core & Meals on Wheels	DHSS	10	10.825	\$11,955,720	\$37,617,480	\$62,959	\$49,636,159
Senior Services Growth & Development Program	DHSS	10	10.82	\$0	\$0	\$0	\$0
Centers for Independent Living (CILS)	DESE	2	2.200	\$3,660,001	\$1,402,546	\$390,556	\$5,453,103
Missouri RX Plan	DSS	11	11.705	\$3,765,778	\$0	\$2,788,774	\$6,554,552
Alzheimer's grants	DHSS	10	10.830	\$550,000	\$0	\$0	\$550,000
Senior Independent Living Program (SILP)	DHSS	10	10.831	\$400,000	\$0	\$0	\$400,000

Employment

Sheltered Workshops	DESE	2	2.290	\$26,041,961	\$0	\$0	\$26,041,961
Vocational Rehabilitation Services	DESE	2	2.190	\$14,616,241	\$52,877,223	\$1,400,000	\$68,893,464

Transportation

Senior/Elderly & Disabled Transit	DOT	4	4.495	\$0	\$10,600,000	\$0	\$10,600,000
Missouri Elderly & Handicapped Transportation Assistance Program (MEHTAP)	DOT	4	4.500	\$1,725,522	\$0	\$1,274,478	\$3,000,000

Prevention of Elderly Abuse

<i>Adult Protective Services (APS)</i>	DHSS	10	10.805	\$290,927	\$2,616,414	\$0	\$2,907,341
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Regulation and Licensure

<i>Family Care Safety Registry</i>	DHSS	10	10.900	\$668,012	\$297,061	\$0	\$965,073
<i>Board of Nursing Home Administrators</i>	DHSS	10	10.900	\$102,184	\$3,810	\$0	\$105,994
<i>Long Term Care Program</i>	DHSS	10	10.900	\$4,510,579	\$9,401,601	\$3,702,680	\$17,614,860

Source: FY2023 Department Budget Requests

Note: Columns in italics indicate program budget taken from program expenditure history as opposed to appropriation amount. All other amounts indicate final budget allocation.

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