



Missouri Medicaid Home and Community Based Services Programs

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The Home and Community Based Services (HCBS) Program

- Provides assistance to seniors and adults with disabilities
- Enables individuals to remain out of nursing facilities
- Consists of Consumer Directed Services (CDS) and In-Home Services (IHS) programs

The HCBS Program is operated by three state agencies:

MO HealthNet Division (MHD): Administers the Missouri Medicaid program.

Missouri Medicaid Audit and Compliance (MMAC): Determines eligibility and compliance of Missouri Medicaid providers.

Division of Senior and Disability Services (DSDS): Assesses and authorizes services for Missouri Medicaid participants. DSDS develops and authorizes the care plans

SERVICE AUTHORIZATION

- Referral is received
- Participant is assessed for Financial Eligibility and Needs Assessment
 - Medicaid Eligibility is based on monthly income of \$933 per month for individuals and \$1,254 for Couples
 - Needs Assessment is based on an algorithm and points criteria of 21 currently. The revised assessment which includes an updated algorithm will be 18 points and is estimated to be effective in 2024
- If participant meets all eligibility and assessment criteria -
 - Care plan is developed and services are authorized
 - Completed by Division of Senior and Disability Services
 - Contains a list of tasks to be performed, weekly schedule of service delivery and maximum number of units of service
- Participant is informed of the services available to him or her

SERVICE INITIATION

- Upon receipt of the personal care plan, the provider of care must initiate care within seven (7) days.

Homemaker Services

Homemaker services are general household activities provided by a trained homemaker. Services are provided when the client is unable to manage the home him/herself or when the individual responsible for these tasks is temporarily absent.

Chore Services

Chore services are short term, intermittent tasks necessary to maintain a clean, safe, sanitary and habitable home environment. They are authorized when the services have been determined by the division as critical in maintaining the client's health and safety.

Respite Services

Respite care services are maintenance and supervisory services provided to an individual in his/her residence to provide temporary relief to the normal caregiver.

Services include: Supervision, Companionship, Direct Client Assistance

Basic Personal Care Services:

Basic personal care services are medically oriented, maintenance services provided to a client in the individual's residence to assist with the activities of daily living, when this assistance does not require devices and procedures related to altered body functions. Each service has certain authorized tasks.

Advanced Personal Care Services

Advanced personal care services are maintenance services provided in the client's home to assist with the activities of daily living when this assistance requires devices and procedures related to altered body functions.

Authorized Nurse Visits


Authorized nurse visits are skilled nursing services of a maintenance or preventative nature provided to clients with stable chronic conditions.

These visits are NOT intended as treatment for an acute health condition.

These visits can be performed by an LPN under RN supervision.



IN-HOME SERVICES MODEL

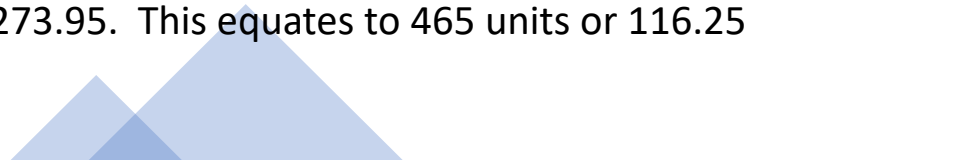
- Under the In-Home Services Model the Medicaid Provider Agency is the Employer
 - Their responsibilities include: hiring, training, scheduling, managing, and paying the Caregiver that is servicing the Client.
 - They are also responsible for disciplining, replacing and terminating the Caregiver if necessary.
 - This model can also include an Authorized Nurse Visit for tasks such as medication set up, diabetic nail care, monitoring of skin conditions and health assessments.
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- **Reimbursement**
 - The rate of reimbursement for the hourly services is \$30.52 per hour.
 - This is the highest reimbursement we have ever had in the State of Missouri for the Program.
 - However, it does also mean that the Medicaid Participant can potentially receive a reduction in authorized units based on the Medicaid Cost Cap of \$3,789.92. For Basic Personal Care Services the Cost Cap is 60% which is \$2,273.95. This equates to 298 units or 74.5 hours
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CONSUMER DIRECTED SERVICES MODEL

- Under the Consumer Directed Services model, the Consumer/Participant is actually the employer of record.
- This is a program that allows an individual to direct his or her own personal assistance services at NO cost to the consumer.
- Being on a consumer controlled personal attendant services program gives the person with a disability control over their own life. To do this, the person with a disability actually becomes the employer and hires their personal attendant.
- Individuals on the CDS program are trained to hire their own attendants to assist them with daily tasks authorized by the DHSS approved Plan of Care.
- On this program the attendant may be able to provide essential transportation to the participant IF it is approved on the Plan of Care. They are not allowed to take the participant to doctors appointments.
- A friend or family member may be hired with the exception of a spouse or anyone under the age of 18.

Reimbursement

- The rate of reimbursement for the hourly services is \$19.56 per hour.
 - This is the highest reimbursement we have ever had in the State of Missouri for the Program.
 - However, it does also mean that the Medicaid Participant can potentially receive a reduction in authorized units based on the Medicaid Cost Cap of \$3,789.92. For Consumer Directed Services the Cost Cap is 60% of that which is \$2,273.95. This equates to 465 units or 116.25 hours
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QUESTIONS???