

**PROGRAM DESCRIPTION**

<b>Department of Health and Senior Services</b>				<b>HB Section(s):</b> <u>10.800, 10.810, 10.815</u>			
<b>Medicaid Home and Community-Based Services (HCBS)</b>							
<b>Program is found in the following core budget(s):</b>							
	<b>DSDS Program Operations</b>	<b>Medicaid HCBS-CDS</b>	<b>Medicaid HCBS</b>				<b>TOTAL</b>
<b>GR</b>	1,473,923	179,059,618	152,048,897				332,582,438
<b>FEDERAL</b>	1,519,508	334,490,783	284,033,635				620,043,926
<b>OTHER</b>		0	0				0
<b>TOTAL</b>	2,993,431	513,550,401	436,082,532				952,626,364

**1a. What strategic priority does this program address?**

Enhance access to care.

**1b. What does this program do?**

- This program provides Medicaid Home and Community Based Services (HCBS) to allow children and adults with disabilities, as well as seniors, to remain safely and independently in the least restrictive environment as an alternative to institutional care.
- Program Medicaid eligibility is determined by the Department of Social Services, Family Support Division (FSD). Service eligibility requires all participants to meet nursing facility level of care (LOC). Department of Health and Senior Services (DHSS) staff complete LOC assessments to determine whether HCBS participants are at a functional level of need that would require institutional care without the assistance of HCBS. Program eligibility is reassessed annually.
- HCBS provides assistance with Activities of Daily Living (ADL) and Instrumental Activities of Daily Living (IADL). ADLs include assistance with dressing, grooming, meal preparation, bathing, toileting, etc. IADLs include laundry, light housework, financial management services, grocery shopping, transportation, etc.
- HCBS includes the following waiver and state plan services:
  - Adult Day Care Waiver: provides Adult Day Care services to adults aged 18 to 63 in an effort to promote community and social engagement;
  - AIDS Waiver: provides personal care and support services to Missourians diagnosed with HIV;
  - Aged and Disabled Waiver: provides Homemaker, Respite, Chore, and Adult Day Care services to adults aged 63+ to ensure each participant has the tools and support needed to remain in the least restrictive environment possible;
  - Healthy Children and Youth Program: provides personal care services to Missourians under the age of 21 with complex medical needs whose needs cannot be met through Missouri's State Plan programs;
  - Independent Living Waiver: provides self-direction services beyond the allowable maximum of the Consumer Directed Services program to adults aged 18 to 63 in order to provide the support necessary for participants to remain in their homes and communities;
  - Medically Fragile Adult Waiver: provides personal care services to Missourians aged 21+ with complex medical needs; and
  - State Plan Personal Care (Agency-Model and Consumer Directed) services: provides personal care and other support services to adults aged 18+ in order to allow them to remain in their homes and communities as an alternative to institutional care.

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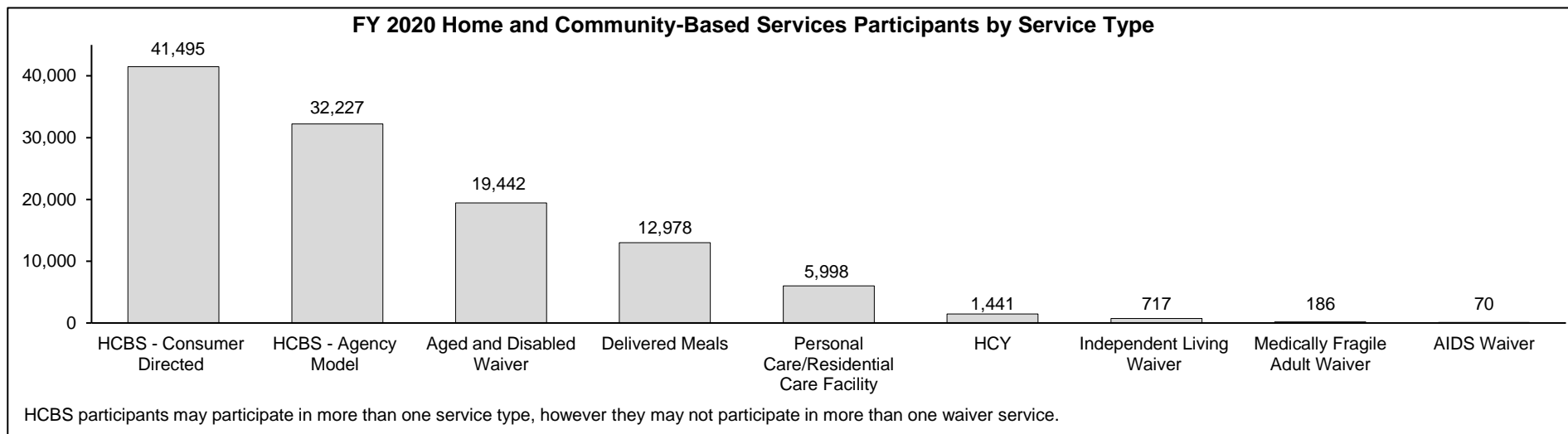
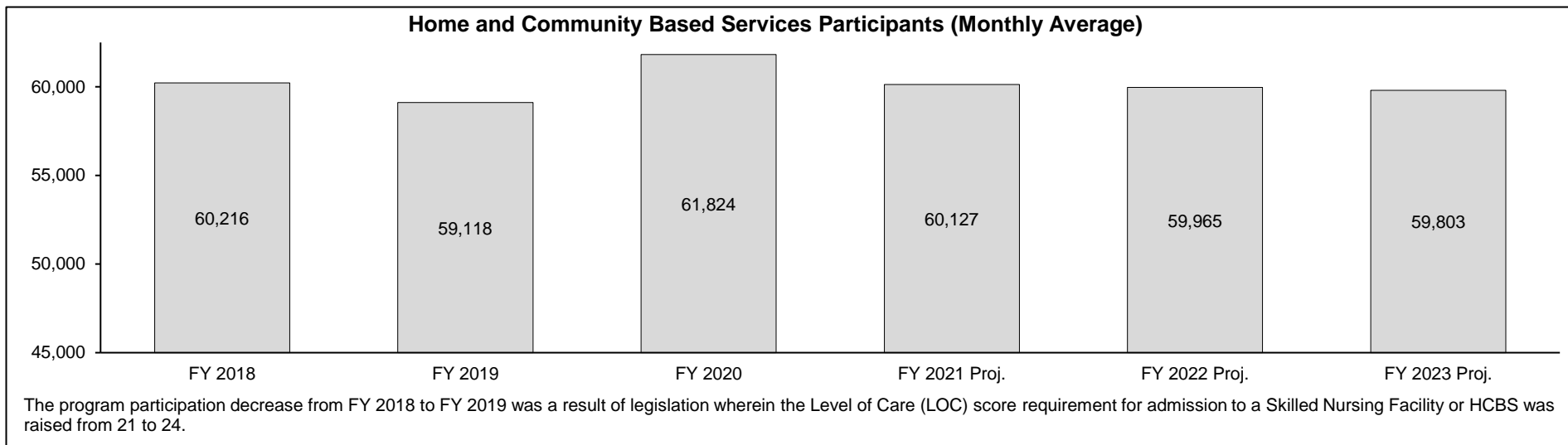
**Department of Health and Senior Services**

**HB Section(s):** 10.800, 10.810, 10.815

**Medicaid Home and Community-Based Services (HCBS)**

**Program is found in the following core budget(s):**

**2a. Provide an activity measure(s) for the program.**



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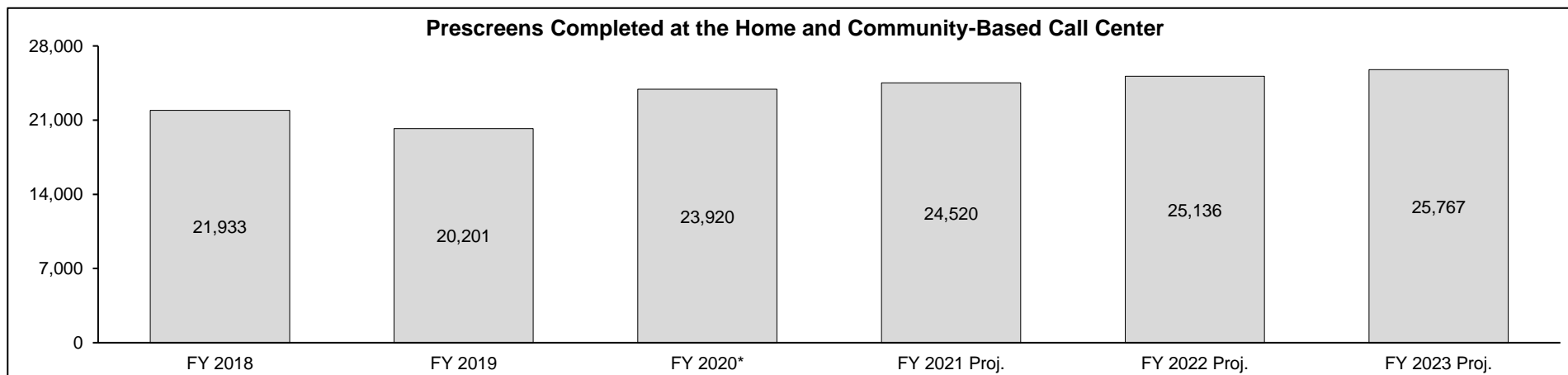
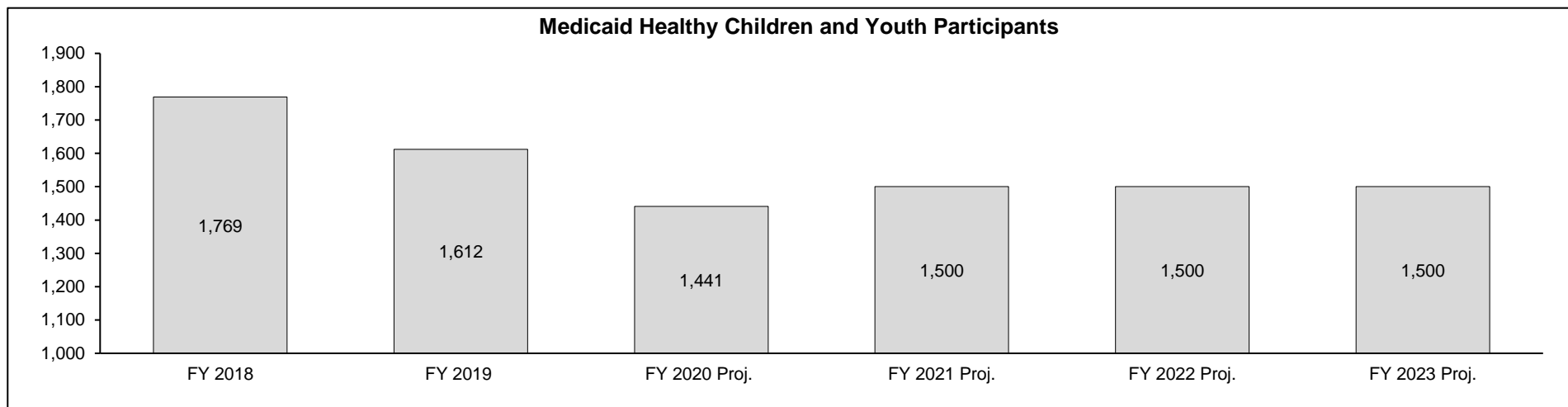
**Department of Health and Senior Services**

**HB Section(s):** 10.800, 10.810, 10.815

**Medicaid Home and Community-Based Services (HCBS)**

**Program is found in the following core budget(s):**

**2a. Provide an activity measure(s) for the program. (continued)**



\*FY 2020: Prescreen no longer includes preliminary LOC assessment. Prescreen consists of confirming Medicaid eligibility prior to referring for comprehensive assessment. The HCBS Prescreen is an eligibility tool designed to assess preliminary eligibility for HCBS. HCBS applicants who meet preliminary requirements at the Prescreen are referred to DSDS staff for a comprehensive LOC assessment.

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Department of Health and Senior Services

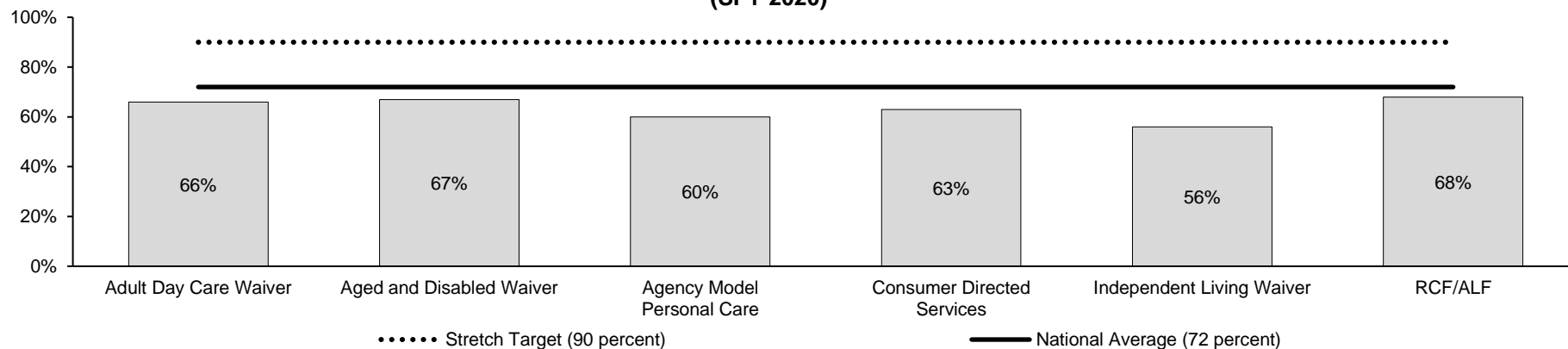
HB Section(s): 10.800, 10.810, 10.815

Medicaid Home and Community-Based Services (HCBS)

Program is found in the following core budget(s):

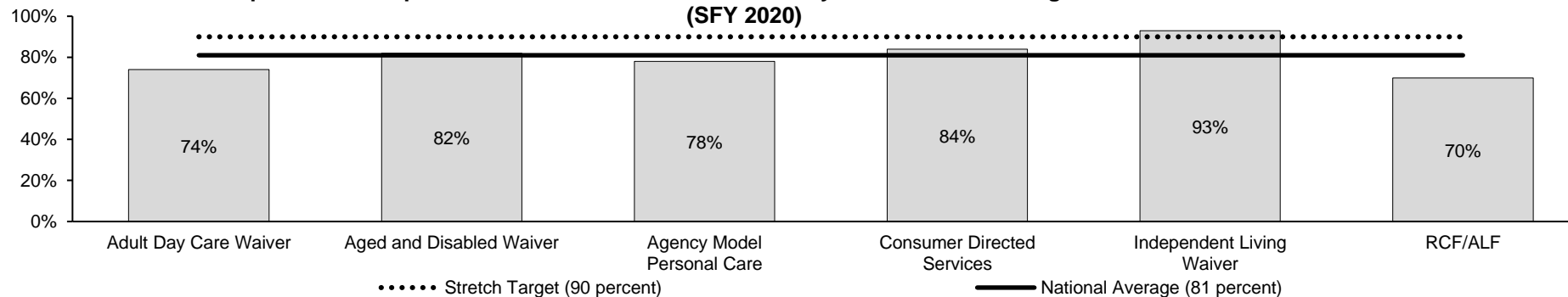
2b. Provide a measure(s) of the program's quality.

**Proportion of People Whose Long-Term Care Services Meet all Their Current Needs and Goals  
(SFY 2020)**



Data gathered from 2019-2020 National Core Indicators - Aging & Disabilities (NCI-AD) Adult Consumer Survey. National average result from NCI-AD Adult Consumer Survey 2018-2019 was 72 percent for this category.

**Proportion of People Who Know Whom to Contact if They Want to Make Changes to Their Services  
(SFY 2020)**



Data gathered from 2019-2020 National Core Indicators - Aging & Disabilities (NCI-AD) Adult Consumer Survey. National average result from NCI-AD Adult Consumer Survey 2018-2019 was 81 percent for this category.

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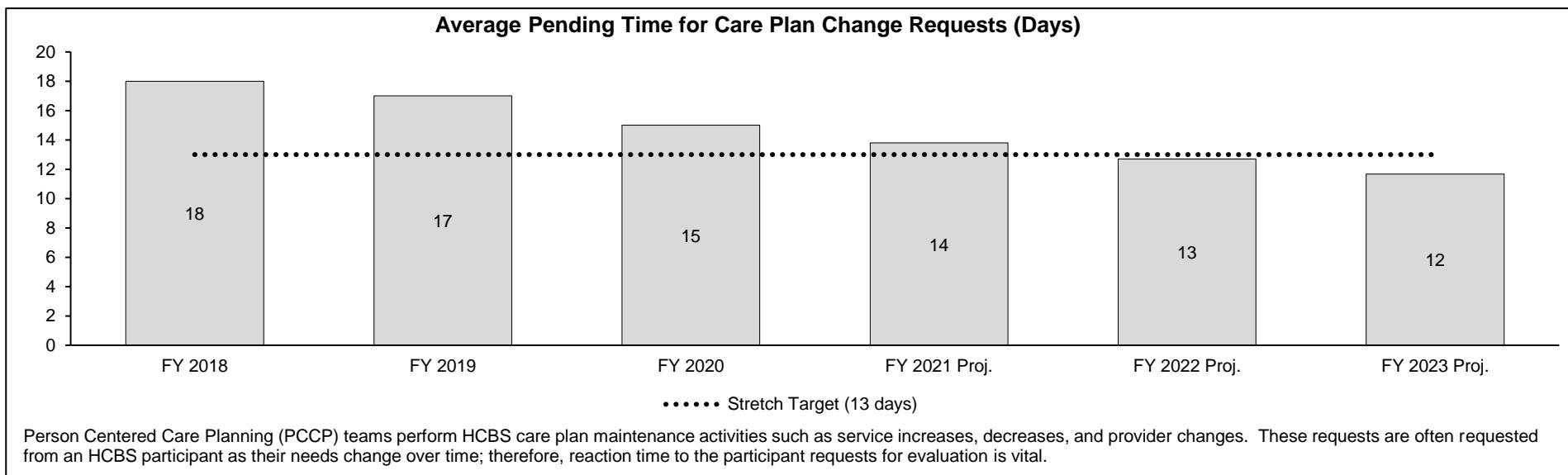
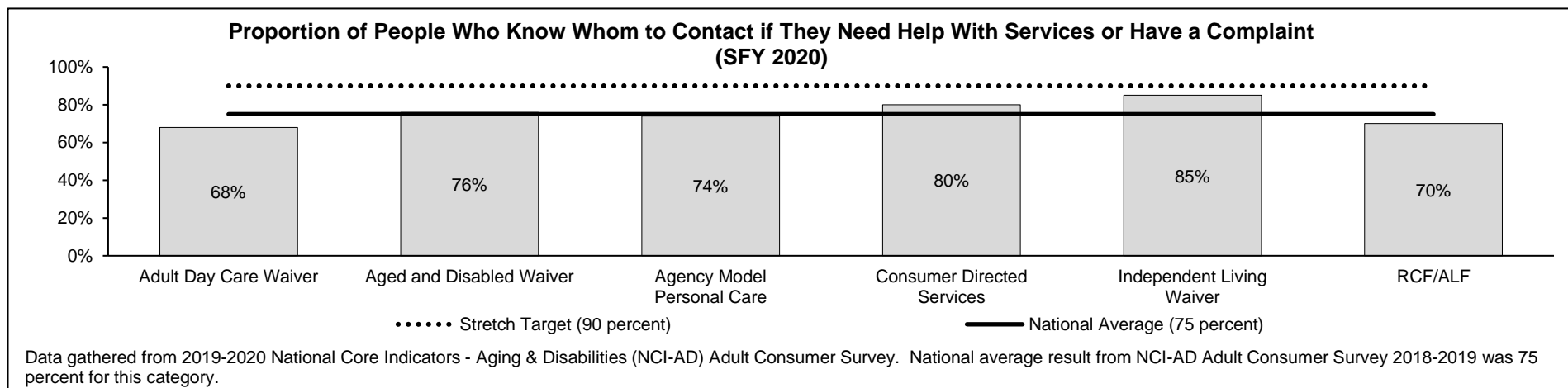
**Department of Health and Senior Services**

**HB Section(s):** 10.800, 10.810, 10.815

**Medicaid Home and Community-Based Services (HCBS)**

**Program is found in the following core budget(s):**

**2b. Provide a measure(s) of the program's quality (continued)**



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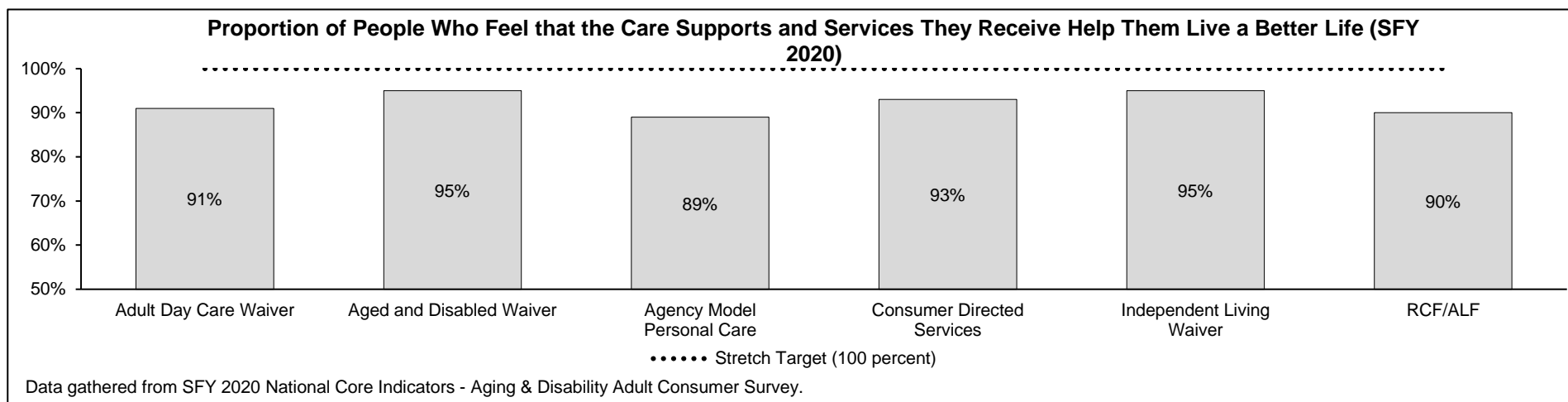
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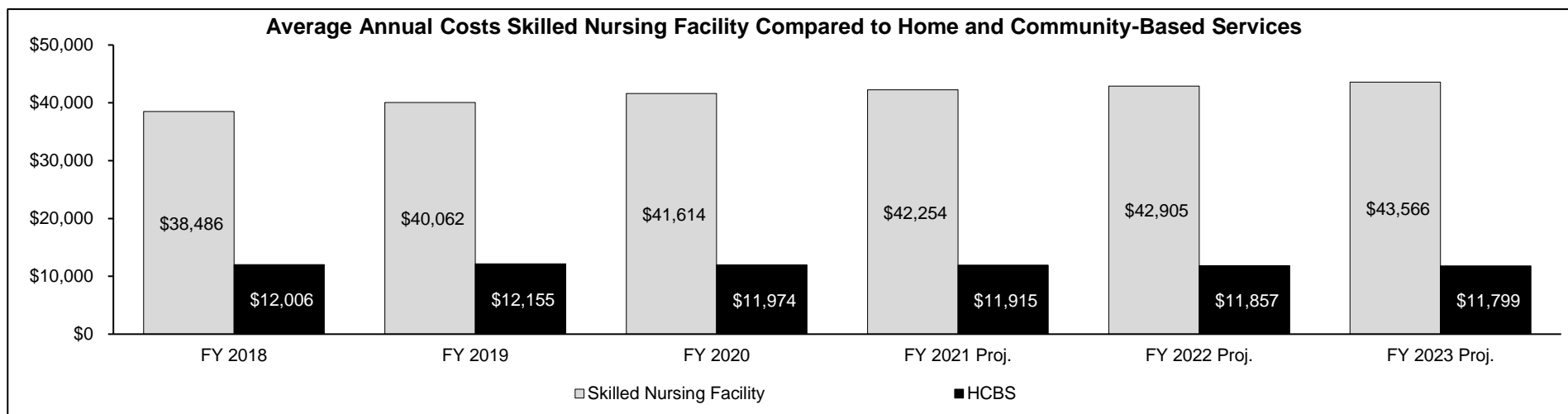
**Medicaid Home and Community-Based Services (HCBS)**

**Program is found in the following core budget(s):**

**2c. Provide a measure(s) of the program's impact. How much effort is invested to achieve impact.**



**2d. Provide a measure(s) of the program's efficiency.**



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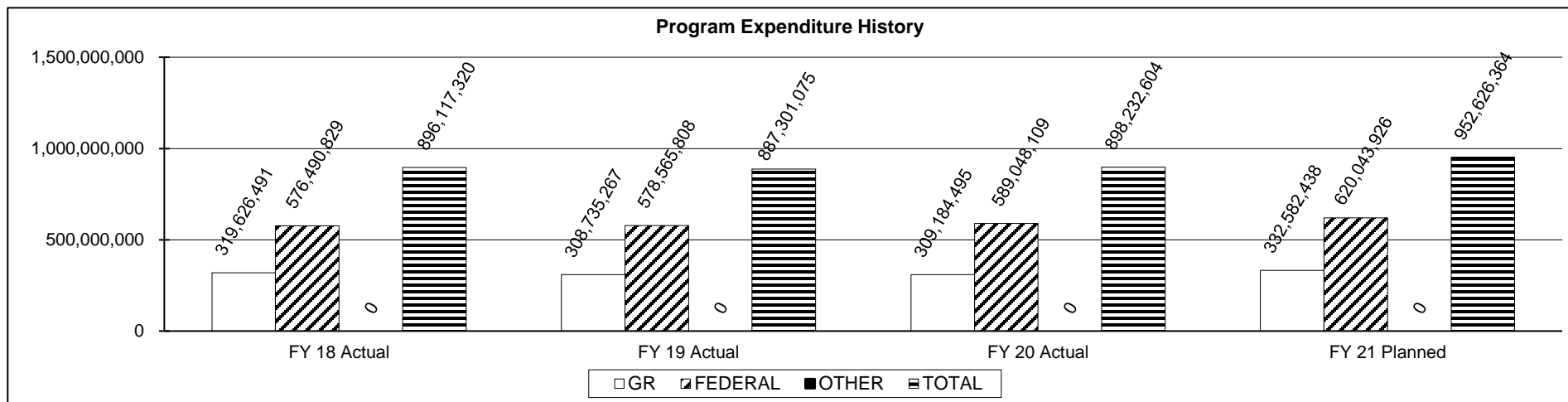
Department of Health and Senior Services

HB Section(s): 10.800, 10.810, 10.815

Medicaid Home and Community-Based Services (HCBS)

Program is found in the following core budget(s):

3. Provide actual expenditures for the prior three fiscal years and planned expenditures for the current fiscal year. (Note: Amounts do not include fringe benefit costs.)



**4. What are the sources of the "Other " funds?**

Not applicable.

**5. What is the authorization for this program, i.e., federal or state statute, etc.? (Include the federal program number, if applicable.)**

Title XIX and Title XX of the Social Security Act; PL 89-73 Older Americans Act, updated in 2006 by PL 109-365; and Sections 192.2000, 192.2400 to 192.2505, 208.152, and 208.900 to 208.930, RSMo.

**6. Are there federal matching requirements? If yes, please explain.**

Yes, HCBS provided under State Plan Personal Care, the Adult Day Care Waiver, the Aged and Disabled Waiver, the Independent Living Waiver, the AIDS Waiver, the Medically Fragile Adult Waiver, and Healthy Children and Youth (HCY) are matched by General Revenue according to the standard Federal Medical Assistance Percentage (FMAP) rate for activities related to home and community-based care for eligible participants.

**7. Is this a federally mandated program? If yes, please explain.**

No. Due to Missouri opting to offer HCBS, oversight of federal funding is required for use of Title XIX and Title XX of the Social Security Act funds and PL 89-73, Older Americans Act. Additional oversight of the Medicaid HCBS waivers is required by the Centers for Medicare and Medicaid.