

## PROGRAM DESCRIPTION

Department of Health and Senior Services								HB Section(s): <u>10.805</u>	
Non-Medicaid Eligible Service									
Program is found in the following core budget(s):									
	Non-Medicaid Eligible								TOTAL
GR	392,986								392,986
FEDERAL	0								0
OTHER	0								0
<b>TOTAL</b>	<b>392,986</b>								<b>392,986</b>

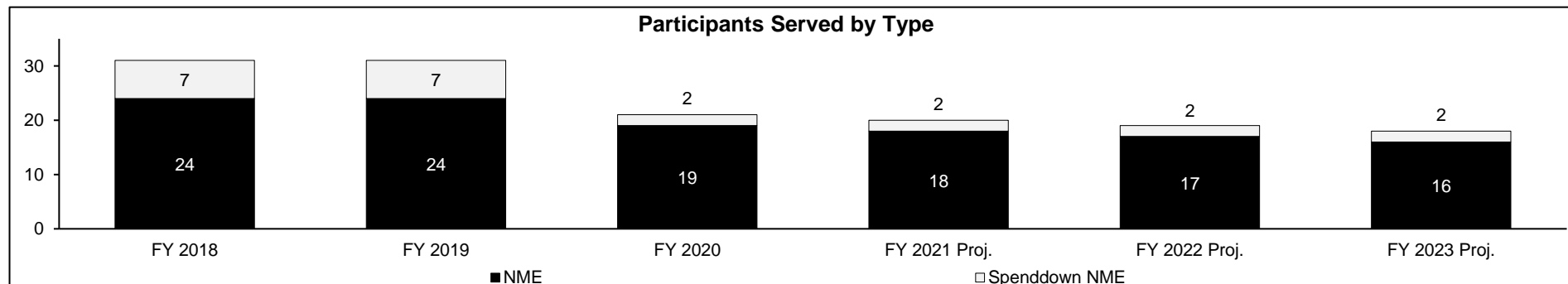
**1a. What strategic priority does this program address?**

Enhance access to care.

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

This program provides Consumer Directed Services (CDS) for Non-Medicaid Eligible (NME) adults with disabilities who need assistance in accessing care or services to perform activities of daily living necessary to maintain independence and dignity in the least restrictive environment of their choice including their homes and communities. Participants must meet all criteria set forth in Sections 208.900 to 208.930, RSMo. The NME program is available only to those participants who were receiving consumer directed services funded through NME prior to June 30, 2005 when program enrollment was frozen; no new participants shall be added to the NME program. The program was designed to assist participants who had extensive health care needs, but did not qualify for Medicaid-funded Home and Community Based Services (HCBS). Participants receiving services funded through the NME program are eligible for those services throughout their lifetime and may be added or removed from the program as necessary. The NME program will sunset on June 30, 2025, unless the program is renewed through legislative action.

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



Some Non-Medicaid Eligible participants are Medicaid Spenddown participants who must pay a spenddown amount each month in order to receive Medicaid benefits. The NME program pays these participants spenddown each month. All other participants are not currently eligible for Medicaid nor Medicaid Spenddown. Program reduction could be attributed to death, facility placement, participant choice to close services, or change in Medicaid status.

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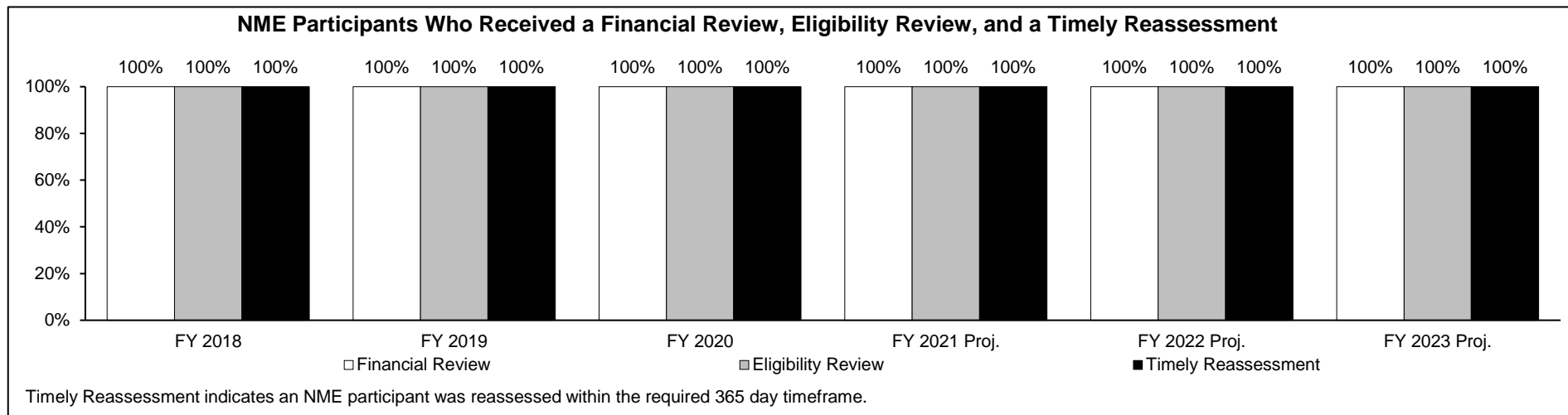
Department of Health and Senior Services \_\_\_\_\_

HB Section(s): 10.805

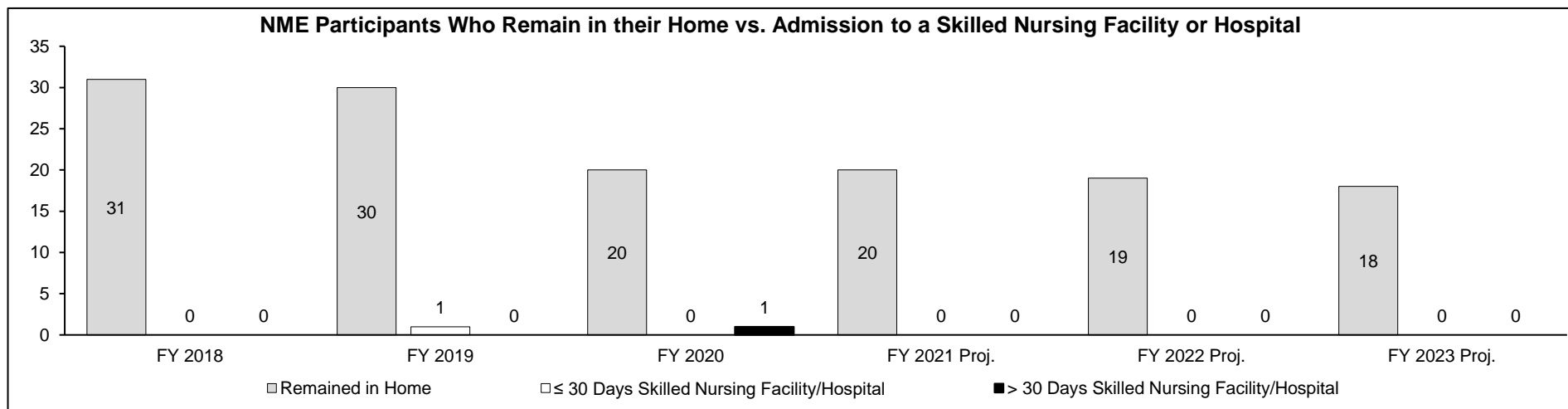
Non-Medicaid Eligible Service \_\_\_\_\_

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

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



**2c. Provide a measure(s) of the program's impact.**



### PROGRAM DESCRIPTION

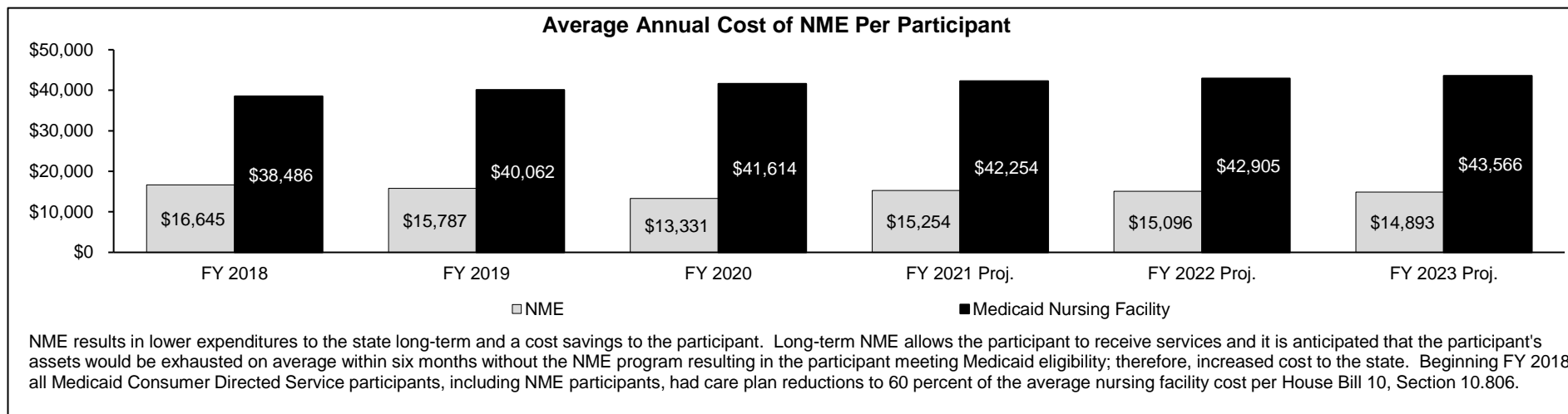
Department of Health and Senior Services

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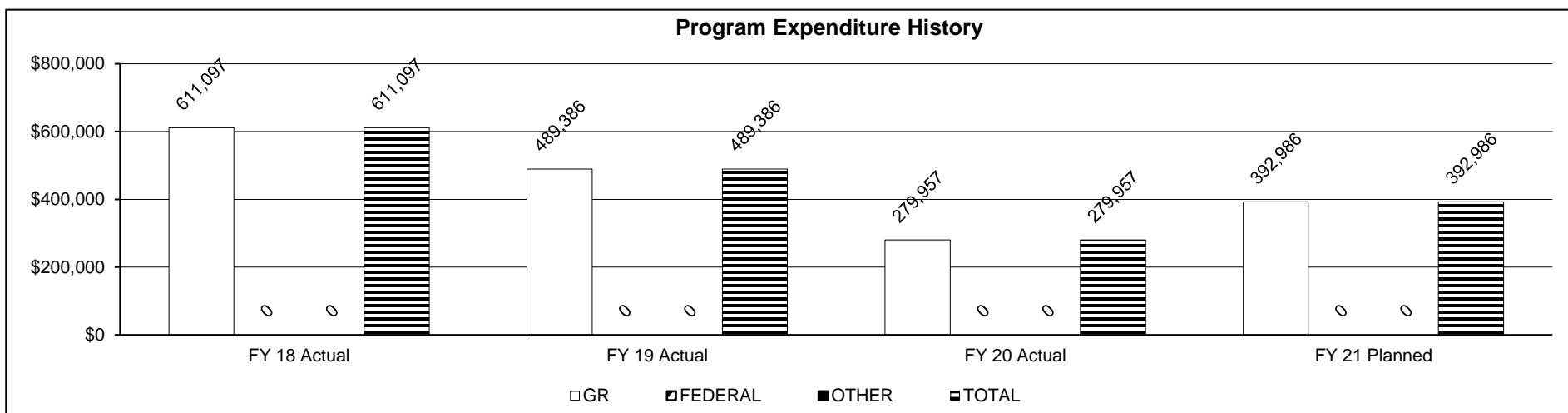
Non-Medicaid Eligible Service

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

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



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.)



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<b>Department of Health and Senior Services</b>	<b>HB Section(s):</b> <u>10.805</u>
<b>Non-Medicaid Eligible Service</b>	
<b>Program is found in the following core budget(s):</b>	
<b>4. What are the sources of the "Other " funds?</b> Not applicable.	
<b>5. What is the authorization for this program, i.e., federal or state statute, etc.? (Include the federal program number, if applicable.)</b> Sections 208.900 to 208.930, RSMo. Program sunsets on June 30, 2025 per Section 208.930.12, RSMo.	
<b>6. Are there federal matching requirements? If yes, please explain.</b> No.	
<b>7. Is this a federally mandated program? If yes, please explain.</b> No.	