

PROGRAM DESCRIPTION

Department: Mental Health

HB Section(s): 10.410, 10.415

Program Name: DD Support Coordination

Program is found in the following core budget(s): Community Programs, Community Support Staff

1a. What strategic priority does this program address?

Supporting independence and self-sufficiency of Missourians with developmental disabilities by increasing employment rates and fostering self-sufficiency, building systems of positive behavior supports, and increasing the use of technology to foster increased levels of independence.

1b. What does this program do?

The Division of Developmental Disabilities (DD) assures that every consumer eligible for the Division of DD services is assigned a support coordinator who is responsible for the development and monitoring of the person's service plan. Support coordination core competencies have been developed in Missouri to ensure person-centered, consistent, and quality support coordination across the state. These core competencies consist of foundational values, developing and maintaining relationships, and having an awareness of rights and responsibilities. The support coordinator is responsible for planning with the individual through a person-centered planning process, resulting in an integrated and comprehensive plan that is reflective of and responsive to the strengths, interests, needs, and desired outcomes of the individual in all areas of their life. The support coordinator is also responsible for connecting the individual to integrated supports and services, including both paid and non-paid supports. The support coordinator facilitates the exploration and acquisition of paid supports from a variety of funding sources, and monitors for quality services that maximizes the use of support dollars to meet identified goals and minimize risks.

The support coordinator is the point of contact for the individual for questions and concerns from family members, physicians, and providers. They also coordinate necessary paperwork and applications required of the family or guardian. The Division of DD regional offices employ 199 support coordinators and 22 supervisors. In FY 2020, there are 110 counties, plus the City of St. Louis, with a Senate Bill 40 board or not for profit entity that have been approved to provide support coordination on behalf of the Division of DD. A consumer with a local support coordinator is not assigned one from the Division of DD, thus increasing the capacity for support coordination in those regions and reducing caseloads. Local support coordination is serving nearly 71% of the individuals eligible for Division of DD services.

An effective, well trained support coordinator is the crucial link between the consumer and family and the Division of DD's service delivery system. Working through service contract details, MO HealthNet changes, authorizations, Individualized Supported Living budgets, and other paperwork, the support coordinator ensures that services are available and delivered to the satisfaction of the consumer or family, and in accordance with Department of Mental Health guidelines and regulations. The role of support coordination is the direct link to connect the individual/family to employment, behavioral services, and technology to promote independence and self-sufficiency.

The Division of DD receives federal reimbursement on Medicaid eligible consumers from MO HealthNet through the DD Support Coordination program. Counties that provide support coordination are also able to bill and obtain reimbursement from MO HealthNet through agreement with Division of DD.

The Home and Community Based Services Waiver (HCBS) is an alternative to care provided in institutions. The HCBS waiver allows states to use Medicaid funding to provide services and supports to persons living in their homes or in other community based settings. The state is expected to have systems in place to measure and improve its performance in meeting the waiver assurances that are set forth in 42 CFR 441.301 and 441.302. These assurances address important dimensions of waiver quality, including assuring that service plans are designed to meet the needs of waiver participants and that there are effective systems in place to monitor participant health and welfare.

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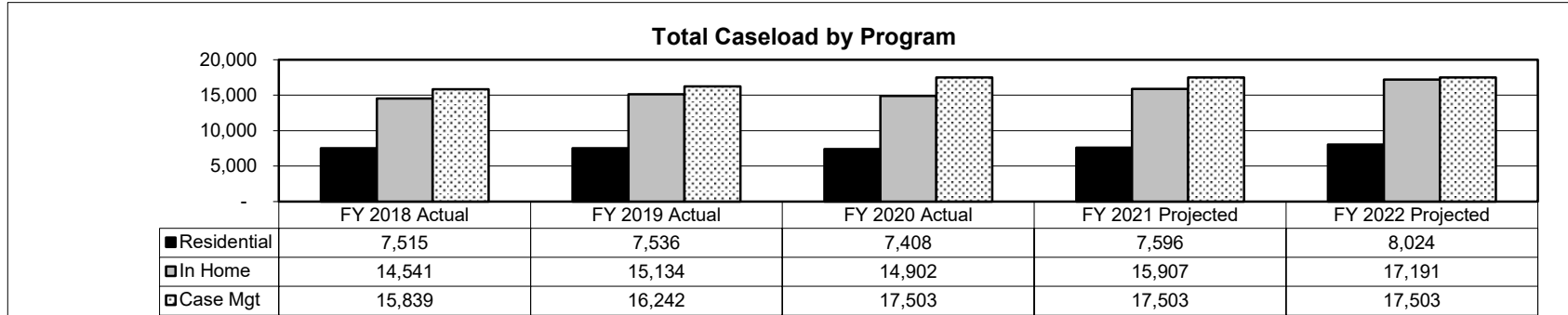
1b. What does this program do? (Continued)

The support coordinator plays a key role in assuring that the HCBS waiver works to meet participant needs and improve outcomes. This includes conducting level of care determinations in order to ensure the individual meets institutional level of care criteria, level of care determinations were made before the participant received HCBS waiver services, and conducting a review of an individual's continued eligibility for institutional level of care at least annually.

This DD Support Coordination program description form contains funding for support coordinators who are employed through the Division of DD's regional offices. Funding for these positions is appropriated in the Community Support Staff house bill section. This program form also contains funding for the Division of DD to contract with SB40 boards or not for profit entities to provide support coordination on behalf of the Division. This funding is appropriated in the Community Programs house bill section.

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

- Consumer count by category.



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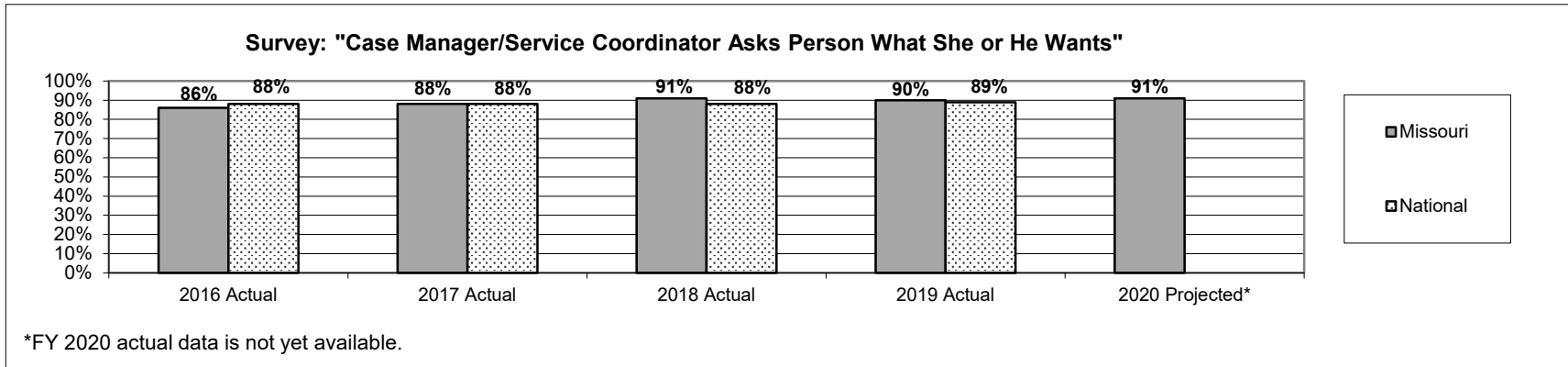
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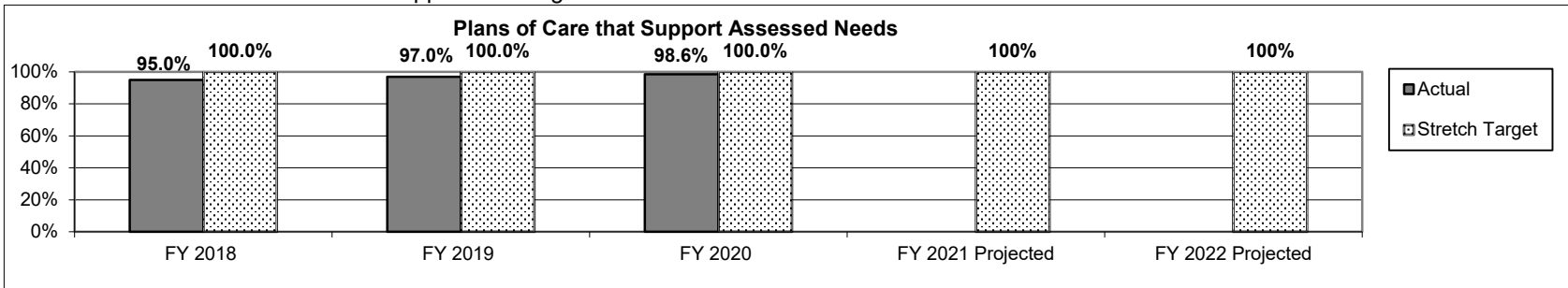
2b. Provide a measure(s) of the program's quality.

- Maintain satisfaction with DD Support Coordinator.



Note: Based on National Core Indicator (NCI) survey results. The NCI is a voluntary effort by public developmental disabilities agencies to measure and track their own performance. In 2019, 257 responses were received in Missouri, and 13,297 responded nationally.

- Plans of care where services and supports are aligned with assessed needs.



Source: The Division of DD quarterly Medicaid Waiver performance measures based on state reviews.

Note: Support Coordinators write annual service plans for all the individuals they serve. These service plans must effectively address the individual needs of each person and support the services that are authorized to be provided. The Division of DD regularly samples service plans to review for quality. The Federal Centers for Medicare and Medicaid (CMS) target is 100%, which is also reflective of Missouri's stretch target.

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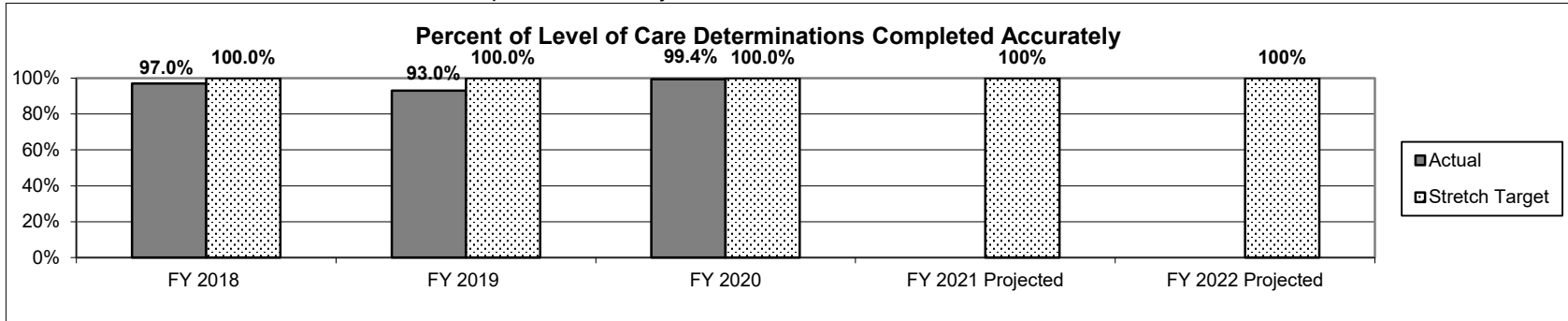
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2b. Provide a measure(s) of the program's quality.

- Level of Care determinations that were completed accurately.

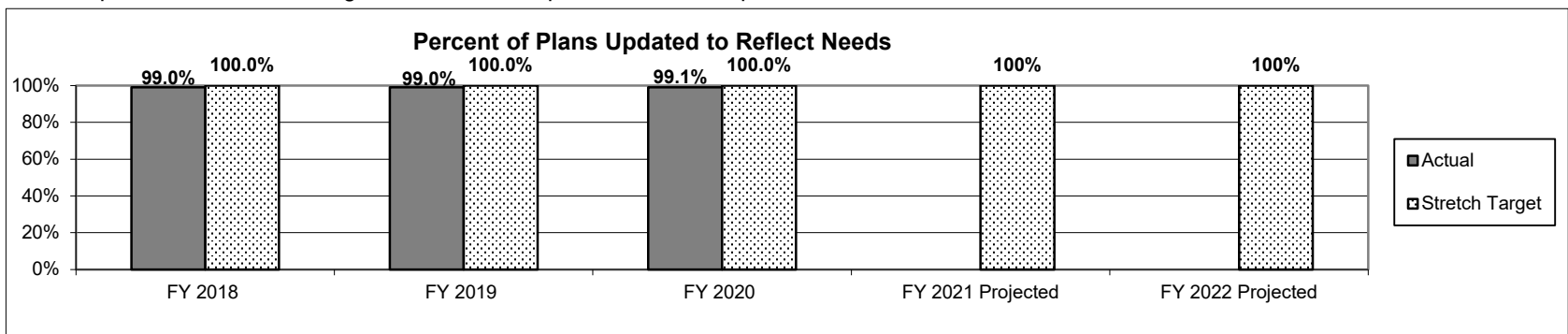


Source: The Division of DD quarterly Medicaid Waiver performance measures based on state reviews.

Note: The Level of Care is an assessment applied to all individuals to determine their eligibility for Medicaid services. The Division of DD gives assurances to Centers for Medicare & Medicaid Services (CMS) that all eligible individuals have met this level of care. The Division of DD routinely samples these assessments to assure accuracy. The Federal Centers for Medicare and Medicaid (CMS) target is 100%, which is also reflective of Missouri's stretch target.

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

- Participants who have a change of need and the plan of care was updated.



Source: The Division of DD quarterly Medicaid Waiver performance measures based on state reviews.

Note: The Federal Centers for Medicare and Medicaid (CMS) target is 100%, which is also reflective of Missouri's stretch target. Also, other impact measures relating to employment, behavior services, etc., are located in the program description forms for In Home Supports and Residential Services.

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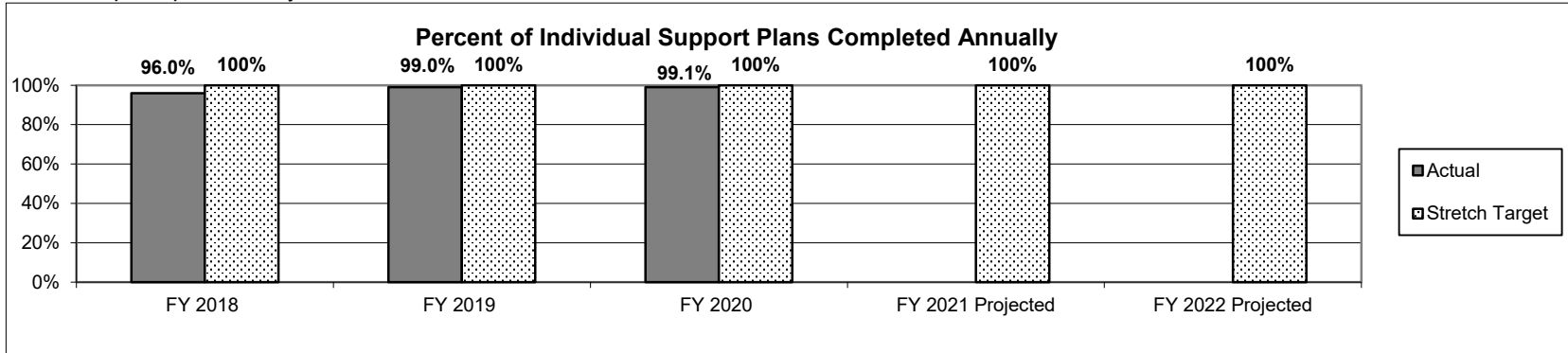
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2d. Provide a measure(s) of the program's efficiency.

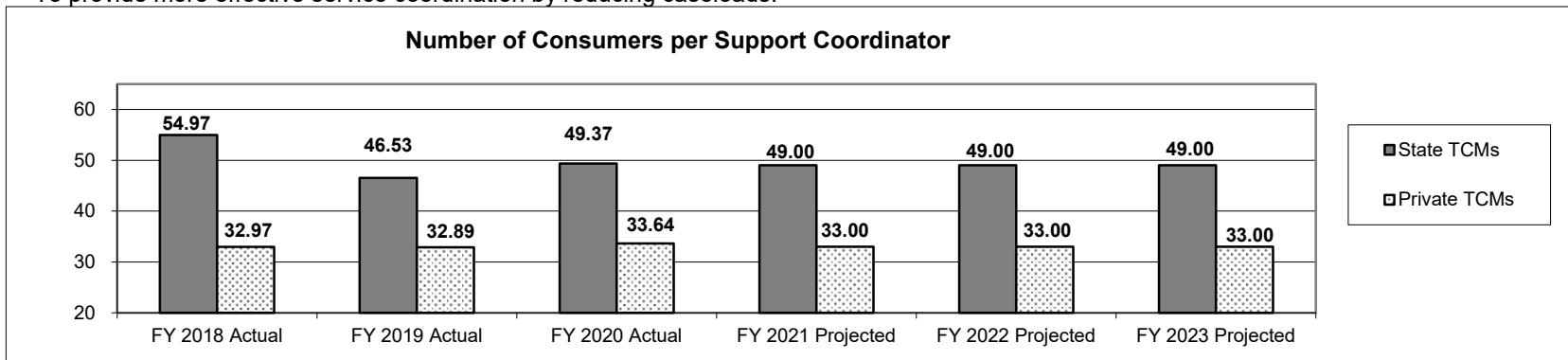
- To complete plans timely in an effort to reflect the current needs of individuals.



Source: The Division of DD quarterly Medicaid Waiver performance measures based on state reviews.

Note: The Federal Centers for Medicare and Medicaid (CMS) target is 100%, which is also reflective of Missouri's stretch target.

- To provide more effective service coordination by reducing caseloads.



Note: A service coordinator with a high caseload cannot write service plans and monitor delivered services as effectively as a service coordinator with a lower caseload. Private Targeted Case Management (TCM) agencies have found a caseload of 35 individuals per one service coordinator to be an upper limit for effectiveness.

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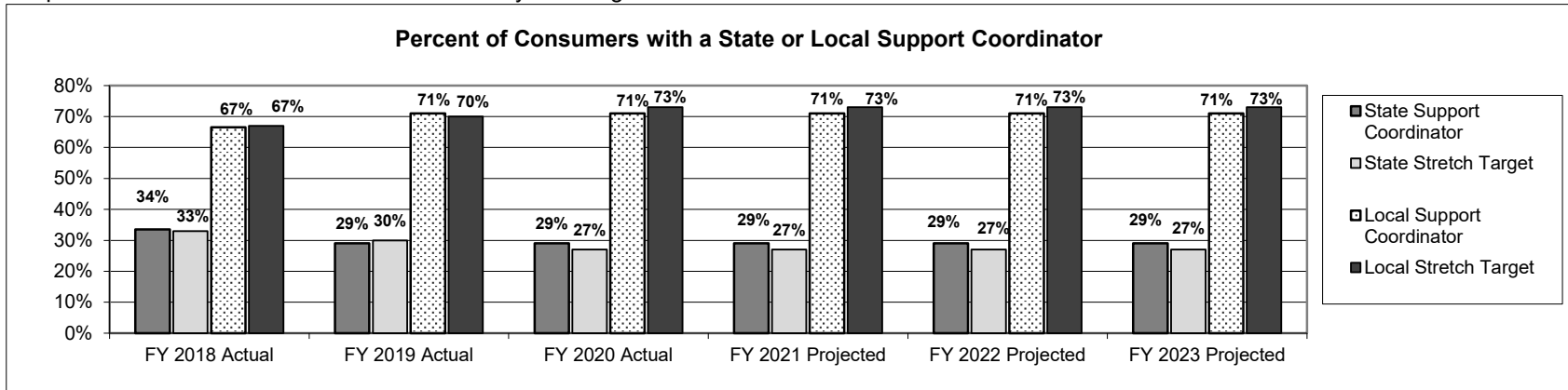
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2d. Provide a measure(s) of the program's efficiency.

- To provide more effective service coordination by reducing caseloads.



Note: For the past 12 years, the Division of DD has been actively seeking private case management options to meet the capacity for service coordination.

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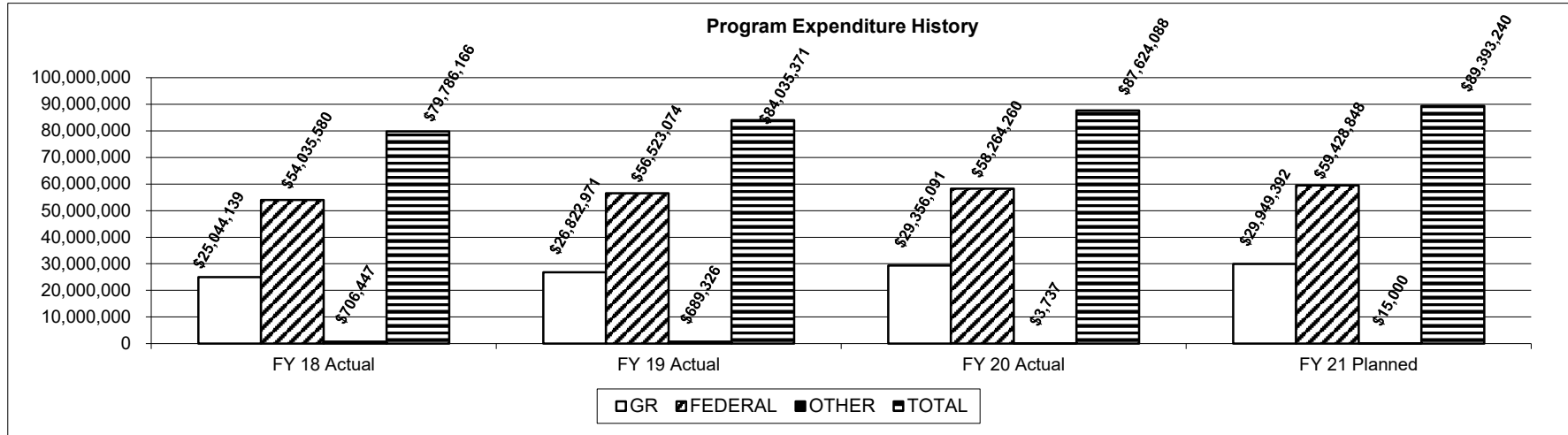
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3. Provide actual expenditures for the prior three fiscal years and planned expenditures for the current fiscal year. (Note: Amounts do not include fringe benefit costs.)



Note: Expenditure data reflected above includes the Medicaid match for private and state-paid case managers. In FY 2018 budget, DD Utilization Increase for new services was funded in Federal so the corresponding TCM costs were funded in federal, resulting in increased projected expenditures for FY 2018 Federal. FY 2021 planned expenditures exclude funding for the following: Governor's Reserve in the amount of \$68,848; \$1,900,000 in Community Support Staff Federal Personal Services and TCM Medicaid Federal Financial Participation authority; and \$1 M for TCM Match in fund 0930 Local Tax Match.

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

Other funds include Mental Health Local Tax Match Fund (0930) for support coordination provided by SB40 boards.

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

Sections 633.100 through 633.160, RSMo
 42 CFR 441.301(1) Person-Centered Planning Process
 42 CFR 441.301(2) The Person-Centered Service Plan

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

The Division of DD is reimbursed the federal share of the cost of support coordination provided by regional offices to eligible consumers. The Division of DD pays the state match from Medicaid appropriations for support coordination provided by county and private agencies. MO HealthNet requires that the state share costs be funded with state funds or local public funding.

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

No.