

PROGRAM DESCRIPTION

Department: Social Services

HB Section(s): 11.635

Program Name: Show-Me Home

Program is found in the following core budget(s): Show-Me Home

1a. What strategic priority does this program address?

Transition from institutional care to home

1b. What does this program do?

This budget item funds administration of the Show-Me Home program, formerly known as the Money Follows the Person Demonstration (MFP), which transitions Medicaid eligible individuals who are elderly, disabled, or who have developmental disabilities from nursing facilities or state owned habilitation centers to Home and Community Based Services (HCBS).

Since the first transition in October 2007 through December 31, 2021, the Show-Me Home program has successfully transitioned 2,202 Medicaid eligible individuals from institutional settings to the community. Show-Me Home tracks data by the calendar year and plans to assist in the transition of an additional 75 individuals by December 31, 2022.

Once enrolled, participants reside in the Show-Me Home program for 365 community days after which they seamlessly transition to the regular HCBS programs. Eligible individuals who transition from institutionalized settings to HCBS are eligible for enhanced federal match for community services for the first year after transition. After one year, community services provided to Show-Me Home participants earn the standard FMAP rate. The federal grant also provides up to \$2,400 for demonstration transition services to participants transitioning from a nursing facility, as a one-time assistance for transition costs to set up a home in the community.

The Consolidated Appropriations Act (CAA) of 2021 extended funding for the Show-Me Home program through calendar year 2023, with all funding to be expended by September of 2025. It also made two changes to expand participant eligibility that are expected to increase the number of transitions into the community:

- First, the CAA of 2021 reduced the minimum length of time in an inpatient facility before an individual can qualify for Show-Me Home from 90 days to 60 days;
- Second, the days a person receives skilled nursing services or skilled rehabilitative services in a certified skilled nursing facility now can be counted toward the length-of-stay requirement.

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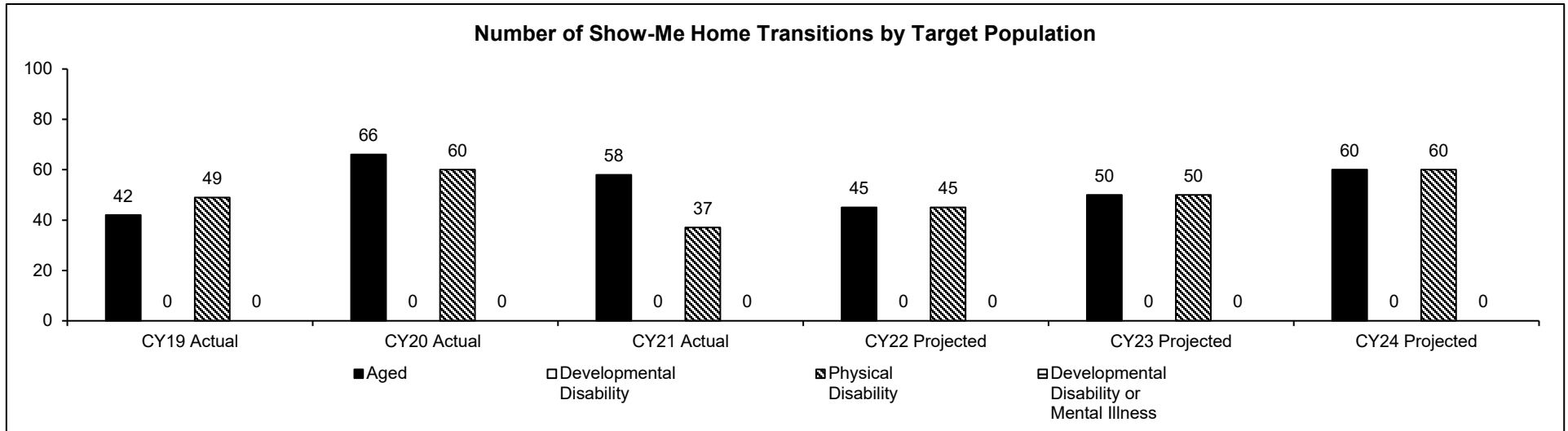
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2a. Provide an activity measure(s) for the program.



Note: The Consolidated Appropriations Act (CAA) of 2021 extended funding for the Show-Me Home program through CY2023, with all funding to be expended by September of 2025. The Show-Me Home Transition numbers are projected to drop in CY22 due to the loss of a contractor that provided services in the St. Louis City and St. Louis County area. The new contractor didn't get started until April of CY22.

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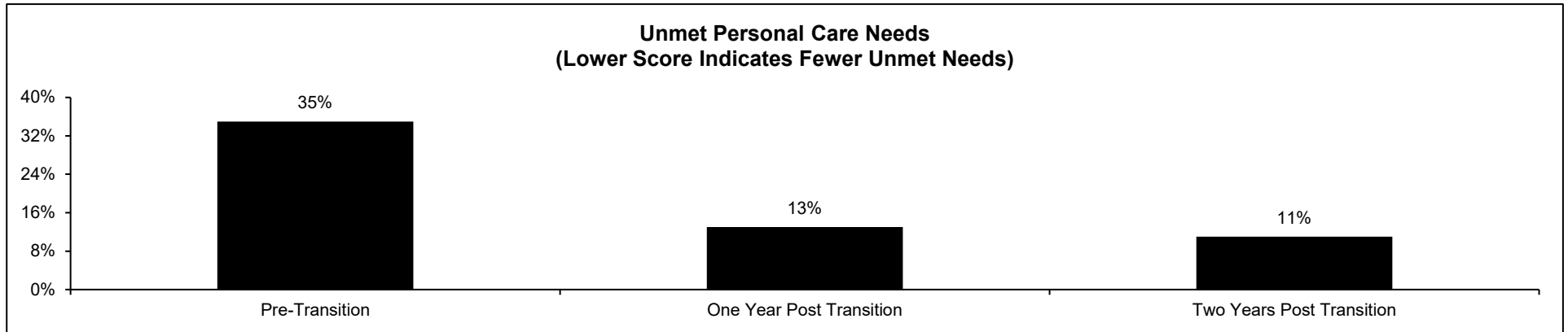
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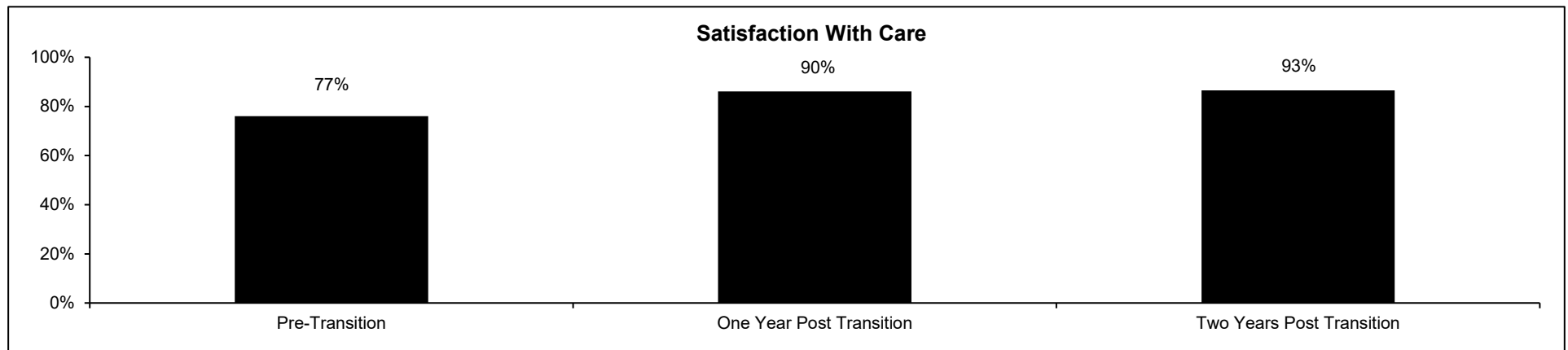
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2b. Provide a measure(s) of the program's quality.



Note: Between CY07 and CY21, Show-Me Home participants were surveyed on their unmet personal care needs and overall satisfaction with care. Overall, 35 percent of participants in the sample reported having unmet personal care needs (defined as one or more unmet needs related to eating, bathing, toileting, and medication administration) while in institutional care; this declined to 13 and 11 percent one and two years later, respectively.



Note: Between CY07 and CY21, Show-Me Home participants were surveyed on their satisfaction with care. The aspect of care showing the largest improvement was treatment with respect and dignity by providers. Pre-transition, 77 percent of participants reported being treated with respect and dignity; this increased to 90 percent one year after transition, and 93 percent after two years in the community.

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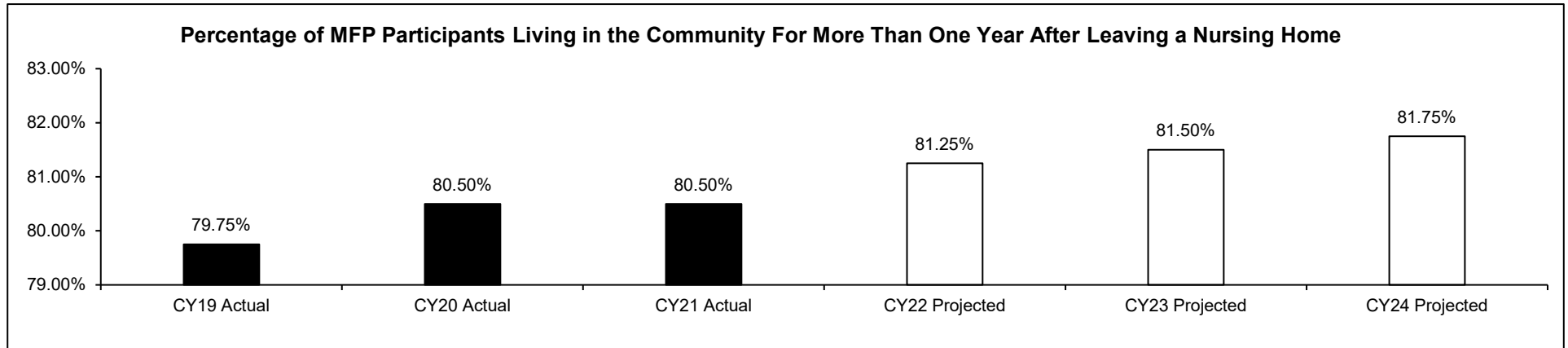
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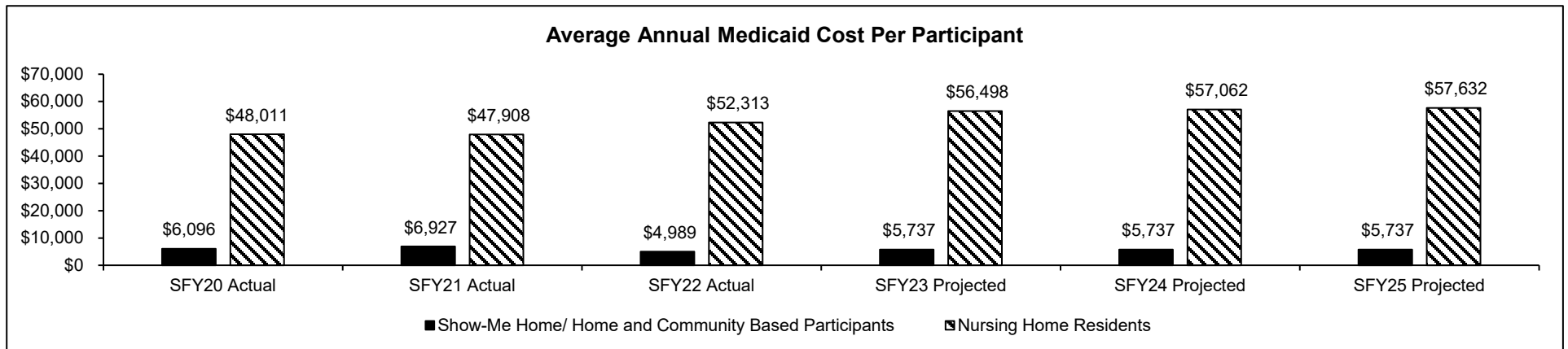
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2c. Provide a measure(s) of the program's impact.



Note: By CY22, the Show-Me Home transitions that occurred in CY21 will have had the opportunity to be in the community for 365 days.

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



Note 1: The Nursing Home Resident cost excludes the portion of costs that are the responsibility of the participant (Patient surplus).

Note 2: Show-Me Home/ Home and Community Based Participants are unduplicated Aged and Disabled participants.

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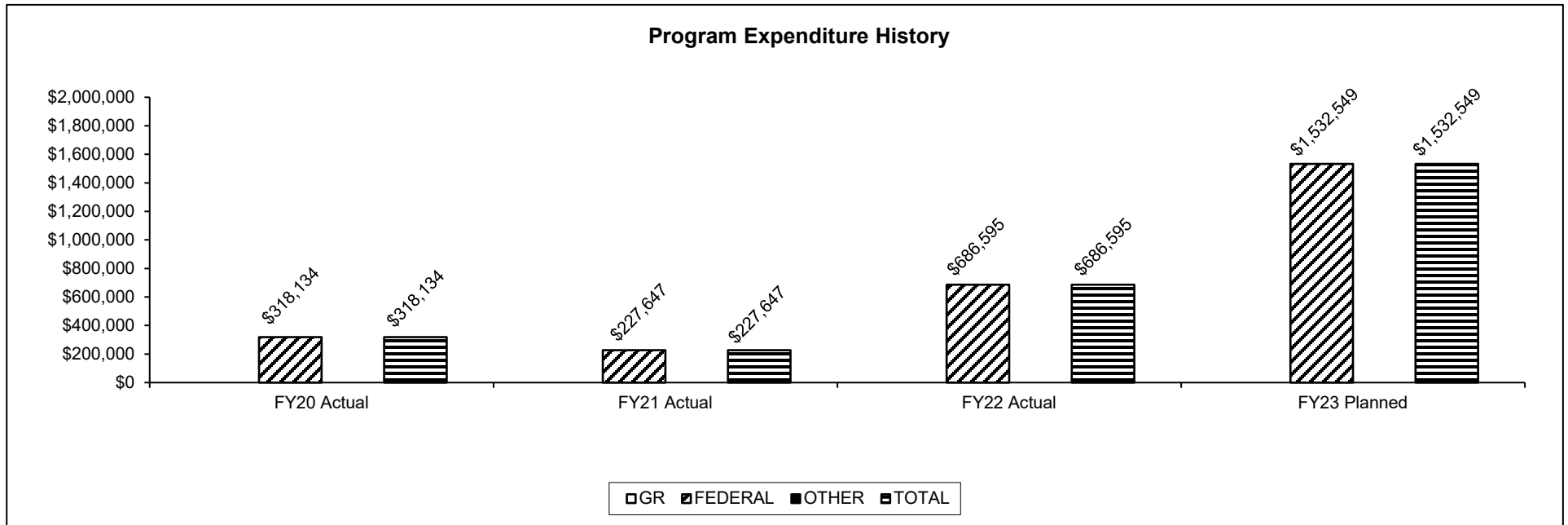
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3. Provide actual expenditures for the prior three fiscal years and planned expenditures for the current fiscal year. (Note: Amounts do not include fringe benefit costs.)



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

N/A

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

Section 6071 of the Federal Deficit Reduction Act of 2005; PL 109-171, and amended by the Affordable Care Act, Section 2403.

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

No.

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

No.