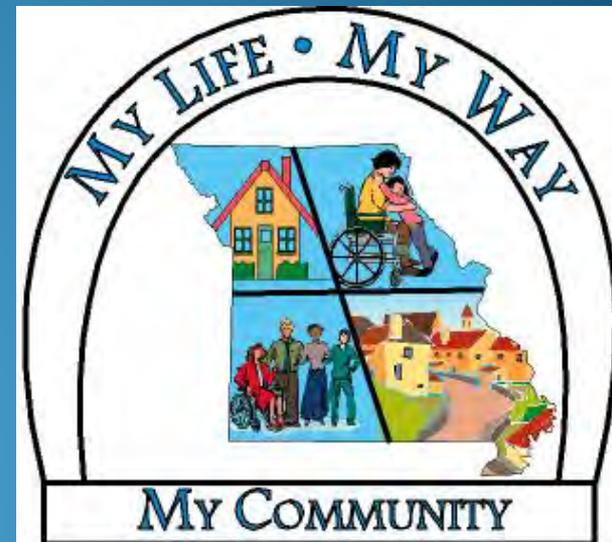


**MISSOURI'S MONEY FOLLOWS THE PERSON DEMONSTRATION
"MY LIFE, MY WAY, MY COMMUNITY"**

Department of Social Services
Department of Mental Health
Department of Health and Senior Services

Presentation to the
MO HealthNet Oversight Committee
January 29, 2013



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"MY LIFE, MY WAY, MY COMMUNITY"

Background Information - The Olmstead Decision

- Olmstead v. L.C. & E.W was a landmark case that was brought forth by two Georgia women, Lois Curtis & Elaine Wilson, with mental illness and developmental disabilities;
- Lois and Elaine lived in a Georgia state hospital but both requested to be allowed to move into the community.

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Lois & Elaine's Story

- Although the doctors at the hospital stated that they were capable of living on their own, the state refused to let them leave the hospital's care;
- After this refusal an attorney, Susan Jamieson, filed a lawsuit on the women's behalf against the state of Georgia;
- The lawsuit sought to have Georgia allow the two women to live in the community.



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Lois & Elaine's Case

- The state argued that Lois & Elaine were placed in state-run institutions in order to obtain services they needed;
- Lois & Elaine argued that they had the right to receive services from the state in a community-based setting under Title II of the ADA (Americans with Disabilities Act).

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Background Information - What is the Americans with Disabilities Act?

- The ADA was the world's first comprehensive civil rights law for people with disabilities
- The ADA was signed into law by George H.W. Bush in July of 1990.

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Background Information - Title II

- Under Title II of ADA public entities are required to provide their services “in the *most integrated setting appropriate* to meet the needs of qualified individuals with disabilities... that enables individuals with disabilities to interact with non-disabled persons to the fullest extent possible.”
- “Public entities” include any State or local government and any of its departments, agencies, or other instrumentalities.
- Under these guidelines, this is what Lois & Elaine and their lawyer were fighting to achieve.

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The Olmstead Decision

- The case went all the way to the U.S. Supreme Court;
- On June 22, 1999 the court ruled in favor of Lois & Elaine;
- The ruling agreed that it is indeed a violation of the ADA for states to discriminate against people with disabilities by providing services in institutions, when a community-based setting would be more appropriate.

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The Olmstead Decision

- The decision pertains to any person at any age who has a disability covered under the ADA;
- Mental illness, physical disability, developmental disability, substance abuse, etc;
- Institutionalizing a person with a disability, who wants to live in the community is considered discrimination.

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Overview

- Deficit Reduction (DRA) of 2005.
- Section 6071
- The Centers for Medicare and Medicaid Services (CMS) awarded a Money Follows the Person (MFP) Demonstration grant to Missouri in January, 2007
- Affordable Care Act, 2010, provides additional funding for MFP to help move Medicaid beneficiaries from institutions to the community



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OBJECTIVES

- Transition people who are elderly and/or disabled and currently reside in nursing facilities to Home and Community Based Services (HCBS)
- Transition people with developmental disabilities who are currently residing in Habilitation Centers, some with co-occurring diagnoses



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OBJECTIVES

- Eliminate barriers preventing eligible people from receiving HCBS services
- Increase access to Missouri Medicaid's HCBS
- Provide for continuous quality improvement in long-term care services

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Overview

Where we started

Missouri prior to Money Follows the Person:

- Person Centered Planning process through the Division of DD, Regional Office Staff
- Centers for Independent Living for Physically Disabled Population
- DSDS helped eligible people move out of NH by providing Medicaid Services and referring them to appropriate agencies

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Eligibility

Eligibility Criteria

- **Must have been in a nursing facility or state owned habilitation center at least 90 consecutive days**
- **Must be Medicaid eligible at the time of transition**
- **Must move into qualified housing**
- **Participant or guardian must sign participation agreement**

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Housing

- Qualified Housing
 - A **home** owned or leased by the individual or the individual's family member;
 - An **apartment** with an individual lease, with lockable access and egress, and which includes living, sleeping, bathing and cooking areas over which the individual or the individual's family have domain and control;
 - A residence, in a **community-based residential setting**, in which no more than four unrelated individuals reside.

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Identifying Candidates for Transition – MDS 3.0 and Section Q

- Section Q of MDS – “Are you interested in speaking with someone about the possibility of returning to the community?” The question must be asked of the resident upon admission, quarterly, and annually.
- This federal rule went into effect in October 2010 and was recently changed in April 2012.
- Other referrals come from Nursing Facility, Family, Advocacy Organization, Ombudsman, etc.

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Transitions

- From CY 2007 through CY 2012, we have been awarded \$26,275,983
- 659 transitions as of 12/31/2012
 - 148 Aged
 - 227 DD
 - 256 PD
 - 28 Dual DD/MI
- 143 pending transitions as of 1/16/2013
 - 34 Aged
 - 18 DD
 - 91 PD

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Consumer Supports

- Person Centered Plan: Will include back-up systems and supports
- Self-Direction: The person has to identify their back-up plan
- If back-up systems fail, call:
 - Regional Center
 - DSDS Central Registry Unit
 - 911



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Services

Medicaid Waivers:

- Independent Living Waiver: (PC, Specialized Equipment and Supplies, Environmental Accessibility, etc.)
- Aged and Disabled Waiver: (Homemaker, Chore , various forms of Respite, Meals, etc.)
- Community Support waiver: (Day Hab, OT,PT,ST, Behavior Therapy, Respite, Supported Employment, Support Broker, etc.)
- Comprehensive DD Waiver: (Res. Hab, Supported Living, Day Hab, Supported Employment, Support Broker, etc)
- Medically Fragile Adult Waiver: (PDN, Attendant Care, Specialized Medical Equip/Supplies)
- MO Children with Developmental Disabilities Waiver: (Developmental Hab. group/individ, Respite, Env. Accessibility Adaptations, etc.)
- AIDS Waiver: (PDN, Supplies, PC, Attendant Care)

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- Supplemental Services: Assistance with one time expenses, up to \$2,400, to set up a home in the community, approved by the Division of Senior and Disability Services for people transitioning out of nursing facilities
- State Plan Services:
 - Personal Care
 - Targeted Case Management
 - Adult Day Health Care
 - PACE program



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Transition Coordination

- Habilitation Centers:
 - DD Regional Office Staff – Person Centered Planning and transition coordination
- Nursing Facilities:
 - DSDS Regional Office Staff – Assessment and coordination
 - Contracted Centers for Independent Living and Area Agency on Aging – Arrange transition and one year follow-up

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Transition Coordination

Habilitation Center Referral Process:

- Referral by DMH through Web Based System
- Assessment will be completed by DMH Regional staff and Participation Agreement signed
- DMH Regional Office staff will arrange transition



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Transition Coordination

Nursing Facilities Referral Process:

- Nursing facility Section Q Web Based System referral
- Referral by DSDS staff to Web Based System for Direct MFP referral
- Assessment will be completed by DSDS Regional MFP Coordinators and Participation Agreement signed
- Contracted Centers for Independent Living (CIL) or Area Agency on Aging (AAA) arrange transition



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Transition Coordination

DSDS Regional MFP Coordinators:

- Region 1: Springfield & surrounding area: Melanie Foster 417-895-5789
- Region 2: Cape Girardeau & surrounding area: Tami Goldrick 573-290-5150
- Region 3: St. Louis city & St. Louis county: Albert Amadi 314-340-7495
- Region 4: Kansas City & surrounding area: Bill Spencer 816-889-2724
- Region 5: Columbia & surrounding area: Kim Reynolds 573-884-2678

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Quality Of Life Survey

Quality of Life Survey Must be Completed prior
to discharge

- Repeated at 1 year post transition
- Repeated at 2 year post transition

Very important part of the demonstration!



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State Evaluation

UMKC contracted to complete a State Evaluation that includes:

- Results of QOL Survey
- Death reasons
- Policy changes
 - Supportive Services
 - Demonstration Services
- Cost comparisons

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Aging and Disability Resource Center and MFP Partnership

ADRC/MFP

- Awarded Nursing Home and Diversion grant under the Affordable Care Act in September 2010
- \$400,000
- Funded under MFP grant
- 18 county region in the Northwest part of the state
- Contracted with UMKC to develop curriculum for MDS 3.0 for Nursing Homes, Individuals, Guardians, Families, Judicial System
- Contracted with 3 CILs to do the education and provide outreach
- Monitor the effect this has on accurate MDS administration

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Reporting

Reporting:

- CMS requires semi-annual reporting, quarterly financial reporting, monthly QOL reporting, some examples are:
- Must report if participant moves
- Must report if there is a back up system failure
- Must report re-institutionalization, including hospitalization
- Must report critical incidents

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Questions/Answers

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