Navigating Long Term Services & Supports through Missouri’s State Departments

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Melanie Highland
Director of the Division of Senior and Disability Services
A Customer Journey through LTSS

- Identify the current landscape of state-supported long term services and supports (LTSS) across state government
- Learn how to navigate commonly utilized paths to access care or identify solutions
- Learn what the state and its partners are doing to streamline the process for those seeking LTSS
What Are Long-Term Services and Supports (LTSS)?

- Care provided in the home, in community-based settings, or in facilities

- Care for older adults and people with disabilities who need support because of age; physical, cognitive, developmental, or chronic health conditions; or other functional limitations that restrict their abilities to care for themselves

- A wide range of services to help people live more independently by assisting with personal and healthcare needs and activities of daily living, such as:
  - Eating
  - Bathing
  - Managing medication
  - Grooming
  - Walking
  - Getting up and down from a seated position
  - Toileting
  - Cooking
  - Driving
  - Dressing
  - Managing money
What LTSS is not

**Acute Care**
- Health services provided for the prevention, diagnosis, or treatment of a medical condition
- Performed by licensed health care providers in a clinical setting, such as a doctor’s office or a hospital

**Post Acute Care**
- Short-term health services typically provided after a hospitalization to assist an individual with recovery from injury or illness and return to as normal a condition as possible
- Settings include long-term care hospitals, inpatient rehabilitation facilities, skilled nursing facilities, and home health agencies

In contrast, LTSS provides assistance in maintaining or improving an optimal level of physical functioning and quality of life.
State Department Organization of LTSS

Governor

- Department of Health & Senior Services
- Department of Elementary & Secondary Education
- Department of Social Services
- Department of Mental Health
Remaining Department Organization of LTSS

- Department of Elementary & Secondary Education
  - Office of Adult Learning and Rehabilitation Services
    - Centers for Independent Living Oversight
- Department of Social Services
  - MO HealthNet Division
  - Family Support Division
    - Medicaid Program
    - Medicaid financial eligibility determination
- Department of Mental Health
  - Division of Developmental Disabilities
    - Case Management
    - Medicaid HCBS
      - Community Support Services
      - Employment Supports
      - Residential Care Services
      - Day Habilitation
A Customer Journey through LTSS

Home
- Customer Service Contact Center (Intake) gathers information
- Enter Referral online or call toll free #
- View information about HCBS
- Need services for Dad
- Visit Website

In-Home Services
- Personal Care services provided by Provider Agency
- Provider Change: contacts PCCP Team
- Field Assessor contacts dad or legal guardian
- Conducts Home Visit & completes assessment
- Generates order for the field
- Develops care plan for unmet needs; Services authorized
- Receives Personal Care Services in RCF above what they would provide; Special Diet

RCF/ALF
- Field Assessor contacts dad or legal guardian
- Knows about an RCF/ALF; enters RCF
- Contacts AAA for additional resources
- Dad experiencing loneliness
- Dad has stroke and is hospitalized
- Dad discharged to nursing facility
- Daughter calls Ombudsman
- Dad told daughter not getting showers regular
- Ombudsman talks with Dad to confirm concern

Nursing Facility
- Ombudsman talks to SNF and they recently updated shower schedule. Dad got left off schedule. He is added to schedule.

Home
- Dad wishes to return home & contacts SMH Program
- Dad goes home through SMH Program; Daughter is an informal support. SMH Specialist completes assessment, authorizes care plan for unmet needs and follows case for 365 days.
- Ombudsman follows up a week later and dad is satisfied with outcome.
Informed Decisions on Skilled Nursing Facility Placement

Licensed by Division of Regulation & Licensure (DRL) in the Department of Health & Senior Services

Important Considerations:
• Can the facility meet my or my loved one's needs?
• Does it have a current state license?
• Does it accept Medicare and/or Medicaid?
• Is the facility clean and odor free?
• Is there an ombudsman who visits regularly?
• Talk to residents and family members.

Contact your local Area Agency or Aging or MO Long-Term Care Ombudsman Program at 1-800-309-3282 for a complete listing of questions to ask.
When to call:
• Information and assistance (i.e. connecting to resources)
• In-home service
• Transportation
• Senior legal assistance
• Nutrition (both home-delivered and congregate meals)
• Disease prevention and health promotion programs
• Family caregiver support
• Long-term care ombudsman services

Missouri Senior Resource Line

1-800-235-5503
Enter zip code upon prompt
Supporting caregivers of people with Alzheimer's disease and related dementias through education, respite, and assistive technology.

**Eligibility**
- The care receiver's residence must be in Missouri
- The caregiver must live in the same home as the care receiver for respite and relief services (persons residing in long-term care communities are not eligible)
- The care receiver must have a diagnosis of probable Alzheimer's disease or a related dementia

**Services**

**Customized Caregiver Training**
- Trained staff make a free, confidential, in-home assessment, provide caregiver education, and link caregivers to needed community resources.

**Customized Caregiver Relief**
- Reimbursement is provided to caregivers for expenses related to the use of respite care services and/or the purchase of products and services required to care for the individual with dementia

**Customized Assistive Technology**
- Loan of devices and provision of training and supportive services for assistive technology to monitor and protect persons with dementia who have been assessed and deemed capable of remaining at home alone safely if provided additional support

For more information:
Bureau of Senior Programs
573.526.4542
MIPPA

Medicare Improvement for Patients and Providers Act

MIPPA provides federal grants to states to support targeted outreach and education to eligible Medicare beneficiaries who may be eligible to save money on their healthcare costs.

Medicare Savings Programs

Medicare beneficiaries who meet certain income and resource requirements can get assistance in paying Medicare Part A and Part B premiums, coinsurance, or deductibles through one of four savings programs. Each of the programs has different qualifications and different benefits.

Medicare Part D Low-Income Subsidy (LIS)/Extra Help

LIS/Extra Help lowers Medicare Part D costs, including out-of-pocket costs for premiums, deductibles, and prescription drugs. Beneficiaries must meet certain income and resource eligibility requirements.
Current Efforts to Streamline Services

1) No Wrong Door Governance Grant
   • Partnering with UMKC-IHD to develop customer journey mapping (actual experience and compare to ideal state) and increase coordination among leadership of all LTSS-involved state departments

2) Missouri’s Master Plan on Aging
   • Ten year roadmap spanning core areas needed to support healthy aging across government agencies

3) HCBS “What to Expect” Communication

4) Role of any team member (state or community partner) who answers the phone
   • Must build more comprehensive understanding of their shared role in helping the consumer navigate this complex web of resources
QUESTIONS?

Melanie.highland@health.mo.gov
573.526.3626
Health.Mo.Gov