

RESTORE the 60% CAP to 100% in CONSUMER DIRECTED SERVICES PROGRAM

The Consumer Directed Services (CDS) program helps seniors and people with disabilities maintain independent in their own homes and have control over their care through hiring and training their own personal care attendants. Personal care attendants help with daily living tasks such as dressing, bathing, toileting, meal preparation, and housekeeping.

- In 2017, the cost cap for CDS was reduced from 100% of the average monthly cost of nursing home care to 60% resulting in consumers having to make tough decisions related to their care:
 - The highest need consumers have gone from 6 hours of care per day to 4 hours of care per day.
 - **REDUCED** nutritional meal time prep = dietary issues and microwave meals
 - **REDUCED** bathing = 2 baths per week
 - **REDUCED** bowel and toileting program = increased risk of infection
 - **REDUCED** transferring/repositioning supports = increased risk of bed sores and infection
- Consumers with reduced services due to the 60% cap have had to supplement care through other programs/waivers or go without the care altogether:
 - **ADVANCED PERSONAL CARE is INCLUDED under CDS** at the CDS rate of \$3.94/unit. However, because of the 60% CAP high need consumers are being forced to get their Advanced Personal Care from In-Home which is at 100% CAP and at \$5.61/unit (*more costly to the state*)
 - Waivers are a more expensive way of providing the same service as CDS.
 - **Aged Blind & Disabled Waiver** is ONLY AVAILABLE to those ABOVE AGE 63 and is paid at 100% CAP and at \$4.53/unit. (MO has 26,932 waiver slots of which 14,259 are filled.)
 - **Independent Living Waiver** is CURRENTLY NOT AN OPTION. MO has 600 waiver slots all of which are FULL. As of 2-19 there were 160 on the waiting list. (Prior to the 60% CAP there were approximately 400 open slots.)
- **Less care leads to an INCREASED risk of hospitalization.** According to the *Healthcare Cost & Utilization Project (HCUP) 2017*, in 2014 the **average hospital cost per stay was \$8,900.00 for Medicaid payers.**
- According to DSDS the 60% CAP cost savings per person, per month is \$443.43 X 12 months = \$5,321.16. This Savings is cancelled out by just ONE hospitalization at \$8,900.00.
- Does capping home and community based services make Missouri vulnerable to an Olmsted lawsuit if someone needs to go into a nursing home or other institution in order to receive the care they need as opposed to receiving it at home?



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