



Who Will Care for Those That Can't Care for Themselves?

Governor Greiten's proposed budget that requires the elderly and disabled to meet a higher point count on the assessment tool will have significant human, financial and social consequences to the State of MO.

- ⇒ This change in policy will result in the elimination of home and community based services to over 16,000 elderly and disabled citizens or, 26% of the caseload
- ⇒ Increasing the point count from 21 to 27 will not save the state money but only shift the need to higher cost services (*example: will see an Increase in Emergency Room visits, hospital stays and hospital readmissions*)
- ⇒ It's not all about the money - Seniors have worked all their lives and deserve the right to live and receive care in the least restrictive setting
- ⇒ Most have no family support. Who will help them?

Real Life Stories:

Mr. A. has stage 3 chronic kidney disease and mental illness. Receives nurse visits to set-up medications and aide assistance to ensure compliance. Needs assistance with groceries/errands. Brother is in a nursing home; no other family or friends. Client does not drive.

Ms. B. has CHF, Osteoporosis and is obese. Totally depends on aide for groceries and household tasks as she is confined to a wheelchair; no children; only family is a nephew that lives out of state.

Ms. C. has Malignant Neoplasm Bone Cancer and Chronic Obstructive Pulmonary Disease. Receives weekly nurse visit to set-up medications.

Mr. D. is 85 with COPD. Lives 20+ miles from closest services down dirt road that at times makes it difficult to reach client. No family and lives in home with limited running water. No laundry in home. Receives assistance with laundry, shopping and meals. Refuses nursing home because of his love for his pets (his only family!).

Consequence Examples of Lost Services:

Medication Assistance

Example – complex medication needs – many elderly and disabled require multiple medications. Many need assistance in taking meds properly, even some require a lock box and need assistance taking as ordered by physician. Without this service, many will either not take meds appropriately, not take at all, or apt to overdose resulting in ER visits and hospitalizations or death.

Activities of Daily Living

Example - bathing – without assistance many elderly and disabled are a fall risk. A fall getting into the bath could result in a broken hip costing the Medicaid program an enormous expense (*surgery, hospital stay, rehab in the nursing home, decline in health resulting in meeting the 27 points and remaining in nursing home care*).

Nutrition

Example – nutrition is a key component in staying healthy. HCBS provides assistance with shopping, cooking and feeding. Without these services, many are not able to get to the grocery store, cook a nutritious meal or even remember to eat. Decline in health will be rapid and result in ER visits, hospital admissions and/or end up in nursing home sooner.

Hospitalization

Seniors ultimately cut from services will still need care to live independently. Ineligible for home and community based services or skilled facility based care people will be admitted to hospital care. Hospital dischargers will find themselves unable to place these people with services and therefore unable to discharge them from care. This creates unnecessary and significantly more costly care than where the person is allowed to remain on services in their own home, where they wanted to remain in the first place.



Please help to ensure assistance for our elderly and disabled to remain independent in THEIR own homes