

HOME AND COMMUNITY-BASED WAIVER PROGRAM REPORT

(FY2008 Appropriation Bill - Public Act 123 of 2007)

May 1, 2008

Section 1689: (1) Priority in enrolling additional persons in the Medicaid home- and community-based services waiver program shall be given to those who are currently residing in nursing homes or who are eligible to be admitted to a nursing home if they are not provided home- and community-based services. The department shall use screening and assessment procedures to assure that no additional Medicaid eligible persons are admitted to nursing homes who would be more appropriately served by the Medicaid home- and community-based services waiver program. (2) Within 30 days of the end of each fiscal quarter, the department shall provide a report to the senate and house appropriations subcommittees on community health and the senate and house fiscal agencies that details existing and future allocations for the home- and community-based services waiver program by regions as well as the associated expenditures. The report shall include information regarding the net cost savings from moving individuals from a nursing home to the home- and community-based services waiver program, the number of individuals transitioned from nursing homes to the home- and community-based services waiver program, the number of individuals on waiting lists by region for the program, and the amount of funds transferred during the fiscal quarter. The report shall also include the number of Medicaid individuals served and the number of days of care for the home- and community-based services waiver program and in nursing homes. (3) The department shall develop a system to collect and analyze information regarding individuals on the home- and community-based services waiver waiting list to identify the community supports they receive, including, but not limited to, adult home help, food stamps, and housing assistance services and to determine the extent to which these community supports help individuals remain in their home and avoid entry into a nursing home. The department shall provide a progress report on implementation to the senate and house appropriations subcommittees on community health and the senate and house fiscal agencies by June 1, 2008.

*Michigan Department
of Community Health*



Jennifer M. Granholm, Governor
Janet Olszewski, Director

**MICHIGAN DEPARTMENT OF COMMUNITY HEALTH
FY 2007 BOILERPLATE REPORTING REQUIREMENT**

**Progress on Medicaid Home and Community-Based Services Program
FY 2008 Second Quarter Report
Section 1689(2)**

The table below identifies the requisite information for each MI Choice Waiver agency for the second quarter of Fiscal Year 2008. Total spending for the fiscal year to date is \$55.5 million, or roughly 45% of the total budget allocation. It is important to note that expenditure data is gleaned from the Financial Status Report and represent prospective reimbursements. Actual expenditure levels are determined during the cost settlement process conducted at the conclusion of the fiscal year.

Through the first two quarters of the fiscal year, 8,084 persons have received services through the MI Choice waiver. This is an increase of 651 participants over the previous period; however that does not take into account the number of participants no longer receiving service for whatever reason. The 1.2 million participant days through the end of the quarter reflects an average length of stay of 153 days. Nursing facilities served 29,250 persons for a total of 3.9 million days through the end of March.

MDCH continues to increase the rate at which persons are being transitioned from nursing homes to home- and community-based services in the waiver. 109 persons were transitioned between January and March to bring to total during the fiscal year to 222. This translates into a total of nearly 17,000 days that participants have been covered by the waiver this fiscal year. By serving these people in a home or homelike setting, the state has saved \$1.8 million compared to the same number of participant days at the average daily rate for nursing facilities.

There are 3,677 persons on the wait list for the MI Choice program. This is virtually static from the previous quarter. In most instances, the size of the wait list is a fraction of the number being served in the waiver. The exception is in Region 1 in the southeastern corner of the state. The wait list equals or exceeds the number of persons enrolled in the waiver. This anomaly is certainly due, in part, to the difficulty of obtaining adequate housing for potential participants. The close proximity of several waiver agencies in that region might also skew the statistics. It is common practice for persons seeking waiver services in that area to place their names on a number of wait lists to enhance their chances of obtaining an available slot.

Region	Waiver Program	FY 2008 Allocation	FY 2008 Expenditures	Number Served	Participant Days	Cost per Day	Persons	Days	Calculated Savings	Wait List
							Transitioned YTD	Transitioned YTD		
1A	Detroit-Wayne LTCC									1,069
	Detroit AAA	12,846,622	5,132,024	794	127,291	40.32	19	1,332	151,672.46	
1B	AAA 1-B	15,074,748	6,734,944	885	140,520	47.93	14	1,619	172,029.69	667
	MORC	4,481,897	1,909,952	290	47,755	39.99	7	808	92,266.06	250
1C	Senior Alliance	3,033,659	1,388,494	250	36,597	37.94	6	392	45,568.18	531
	The Information Center	2,997,875	1,351,896	202	24,952	54.18	15	1,571	157,108.83	71
2	Region 2 Area Agency on Aging	5,109,440	2,551,489	410	62,447	40.86	14	726	82,275.40	149
3	Southwest Michigan LTCC									252
	Burnham Brook Center	8,233,240	4,173,648	609	97,172	42.95	3	87	9,677.39	
	Senior Services	3,186,822	1,499,277	194	30,375	49.36	14	1,116	116,986.44	
4	Region IV AAA	5,898,571	2,805,177	455	69,525	40.35	8	533	60,675.51	
5	Valley AAA	3,894,042	1,757,908	269	43,771	40.16	1	62	7,069.49	143
6	Tri-County Office on Aging	7,940,393	3,845,800	444	71,698	53.64	18	1,963	197,372.97	84
7	Region VII AAA	5,581,473	2,670,806	432	64,097	41.67	3	188	21,153.25	22
	A & D Home Health Care	5,300,227	2,524,839	384	56,395	44.77	35	2,144	234,585.45	102
8	West Michigan LTCC									179
	AAA of Western Michigan	7,584,924	3,301,030	505	75,928	43.48	17	1,226	135,730.07	
	Home Health Services, Inc.	7,727,277	2,454,879	286	45,368	54.11	2	58	5,804.36	
14	Senior Resources	6,110,632	2,745,322	462	70,354	39.02	3	188	21,650.82	
9	NEMSCA	3,099,953	1,445,311	233	35,651	40.54	14	876	99,552.96	18
	Northern Michigan Regional Health System	2,085,083	1,000,233	130	19,630	50.95	4	232	23,949.63	10
10	AAA of Northwest Michigan	3,030,604	1,165,661	200	22,946	50.80	8	435	44,972.60	47
	Northern Lakes Community Mental Health Authority	2,441,574	1,309,631	158	26,260	49.87	4	283	29,520.80	24
11	Upper Peninsula LTCC									59
	Upper Peninsula AAA	7,397,949	3,734,228	492	72,667	51.39	13	1,115	114,618.94	
Total		123,057,005	55,502,548	8,084	1,241,399		222	16,954	1,824,241.29	3,677
Nursing Facilities		1,554,146,800	456,306,959.45	29,250	3,903,835					