

HOME AND COMMUNITY-BASED WAIVER PROGRAM REPORT

(FY2008 Appropriation Bill - Public Act 123 of 2007)

August 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

Progress on Medicaid Home and Community-Based Services Program FY 2008 Third Quarter Report

The table below identifies the requisite information for each MI Choice Waiver agency for the third quarter of Fiscal Year 2008. Financial Status Reports from the MI Choice Waiver agencies indicate that \$85 million has been expended through the first three quarters of the fiscal year. This is 69% of the \$123 million appropriated for the year. All expenditures are cost settled at the conclusion of the fiscal year.

Demand for home and community-based services remains high. The number of persons served by the MI Choice waiver rose by roughly 800 persons during the period to a level of 8,856. Services covered nearly 1.9 million participant days. In comparison, nursing facilities were paid \$683 million to provide 5.8 million days of service to roughly 33,000 individuals.

An additional 70 persons transitioned from nursing facilities to the MI Choice Waiver during the third quarter. In all, a total of 290 persons have been moved this fiscal year. The geographical distribution of transitions, however, has not been even. The top one-third of waiver agencies have accounted for fully two-thirds of the completed transitions. This is largely due to the differential in experience that agencies have in providing transition services. The 35,000 total days of home services provided to the transitioned participants translates into a net savings of \$3.8 million dollars off the cost of providing the same number of days in a nursing facility.

Despite the increase in the number of persons served by the MI Choice waiver, the number of persons waiting for those services also rose 11% during the third quarter to a level topping 4,000. The transition effort itself might be partially to blame for the burgeoning MI Choice wait list. The process of identifying potential transition participants has served to inform many who are choosing to seek out home and community-based services for themselves. In some instances, persons might be placed temporarily on the wait list while details of their transition are worked out. Awaiting adequate housing or clarifying Medicaid eligibility could be examples of obstacles leading to such a delay.

Michigan Department of Community Health
 Medical Services Administration

Boilerplate Report 1689 (2)
 FY 2008 - Third Quarter

Region	Waiver Program	FY 2008 Allocation	FY 2008 Expenditures	Number Served	Participant Days	Cost per Day	Persons Transitioned YTD	Days Transitioned YTD	Calculated Savings	Wait List
1A	Detroit-Wayne LTCC									1,032
	Detroit AAA	12,846,622	7,961,906	872	194,199	41.00	20	2,612	295,548.98	
1B	AAA 1-B	15,074,748	10,167,208	942	207,506	49.00	23	3,472	365,087.66	789
	MORC	4,481,897	2,932,191	315	76,667	38.25	8	1,440	166,900.82	296
1C	Senior Alliance	3,033,659	2,157,234	300	56,198	38.39	9	966	111,826.90	335
	The Information Center	2,997,875	2,123,860	213	40,946	51.87	18	2,939	300,599.06	91
2	Region 2 Area Agency on Aging	5,109,440	3,898,032	435	94,964	41.05	17	1,900	214,893.19	132
3	Southwest Michigan LTCC									530
	Burnham Brook Center	8,233,240	6,254,215	628	143,761	43.50	7	399	44,147.31	
	Senior Services	3,186,822	2,272,867	241	46,299	49.09	20	2,063	216,734.84	
4	Region IV AAA	5,898,571	4,304,389	509	105,730	40.71	10	1,187	134,650.92	
5	Valley AAA	3,894,042	2,681,344	281	63,842	42.00	1	151	16,934.57	193
6	Tri-County Office on Aging	7,940,393	5,948,544	500	108,951	54.60	19	3,292	327,721.26	89
7	Region VII AAA	5,581,473	4,030,901	486	95,936	42.02	4	490	54,944.97	10
	A & D Home Health Care	5,300,227	3,938,259	418	85,857	45.87	45	4,896	530,134.81	163
8	West Michigan LTCC									231
	AAA of Western Michigan	7,584,924	5,036,718	563	115,615	43.56	28	3,064	338,831.14	
	Home Health Services, Inc.	7,727,277	3,346,603	302	67,593	49.51	4	196	20,509.06	
14	Senior Resources	6,110,632	4,189,443	509	107,674	38.91	5	488	56,237.40	
9	NEMSCA	3,099,953	2,325,628	253	53,675	43.33	14	1,524	168,891.50	45
	Northern Michigan Regional Health System	2,085,083	1,511,418	140	29,516	51.21	5	569	58,574.23	12
10	AAA of Northwest Michigan	3,030,604	1,819,815	222	36,543	49.80	7	817	85,253.84	51
	Northern Lakes Community Mental Health Authority	2,441,574	1,955,406	162	39,020	50.11	4	463	48,168.78	43
11	Upper Peninsula LTCC									
	Upper Peninsula AAA	7,397,949	5,633,808	565	108,886	51.74	22	2,467	252,642.33	48
	Total	123,057,005	84,489,789	8,856	1,879,378		290	35,395	3,809,233.57	4,090
	Nursing Facilities	1,554,146,800	683,198,445	33,124	5,849,537					