



2019 Legislative Priorities

1

ADEQUATELY FUND SERVICES FOR PEOPLE WITH INTELLECTUAL AND DEVELOPMENTAL DISABILITIES (IDD)

- Allocate \$76.5 million in GR in DMH Budget, Section 10.410
- Funding would secure pay increases for the workforce that provides essential services to 7,500 Missourians with IDD receiving residential supports

2

ENSURE ALL MISSOURIANS HAVE THE OPPORTUNITY TO WORK IN A COMPETITIVE, INTEGRATED SETTING AS THE FIRST AND PREFERRED CHOICE.

- Support both Vocational Rehabilitation and DMH-DD Employment Programs
- Establish legislation enforcing Missouri's Employment First status

3

OPPOSE MANAGED CARE FOR LONG TERM SERVICES AND SUPPORTS (LTSS) THAT ADVERSELY IMPACTS SERVICE DELIVERY

- Oppose Managed Care that jeopardizes provider rates
- Oppose Managed Care that doesn't comply with HCBS
- Oppose Managed Care that limits access and/or necessary support services



A Crisis for People with IDD in Missouri



800

Providers serve people with IDD (DMH)

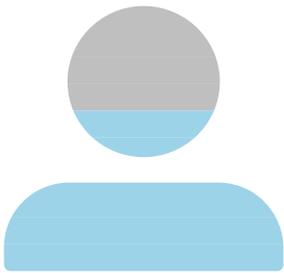
15,000 Direct Support Professionals provide critical support services to people with IDD so they can live and work in their communities.



25,000

Missourians with IDD receive services (DMH)

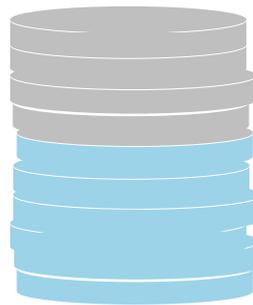
25,000 Missourians with IDD live and work in their communities because of the staff who support them. Fully-funding reimbursement rates would impact 7,500 receiving residential supports.



60%

Direct Support Staff (DSP) Turnover

60% turnover disrupts and endangers people with IDD who depend on DSPs to live and work in the community.



40%

Provider rates are 40% underfunded

An FY17 Mercer actuarial study indicates provider rates are currently underfunded by 40%. As a result, DSP wages suffer.



25%

DSPs live in poverty



25%

25% of DSP positions are vacant, leaving people with IDD without critical services



64%

DSP pay is 64% of the US median.



52%

DSPs receive some sort of public assistance

You can help stabilize the workforce that serves 7,500 Missourians with intellectual and developmental disabilities by fully funding the \$76.5 million general revenue in the FY20 budget.

What is a Direct Support Professional?

What is a **Direct Support Professional?**



A Direct Support Professional (DSP) **supports individuals with intellectual and developmental disabilities** so they can **successfully live and work** in their communities.

DSPs in Missouri



15,000 Missourians work as **DSPs**. Starting wages for DSPs average **\$9.71 per hour**

Typical DSP Job Duties



Medical Supports



Skills Coaching

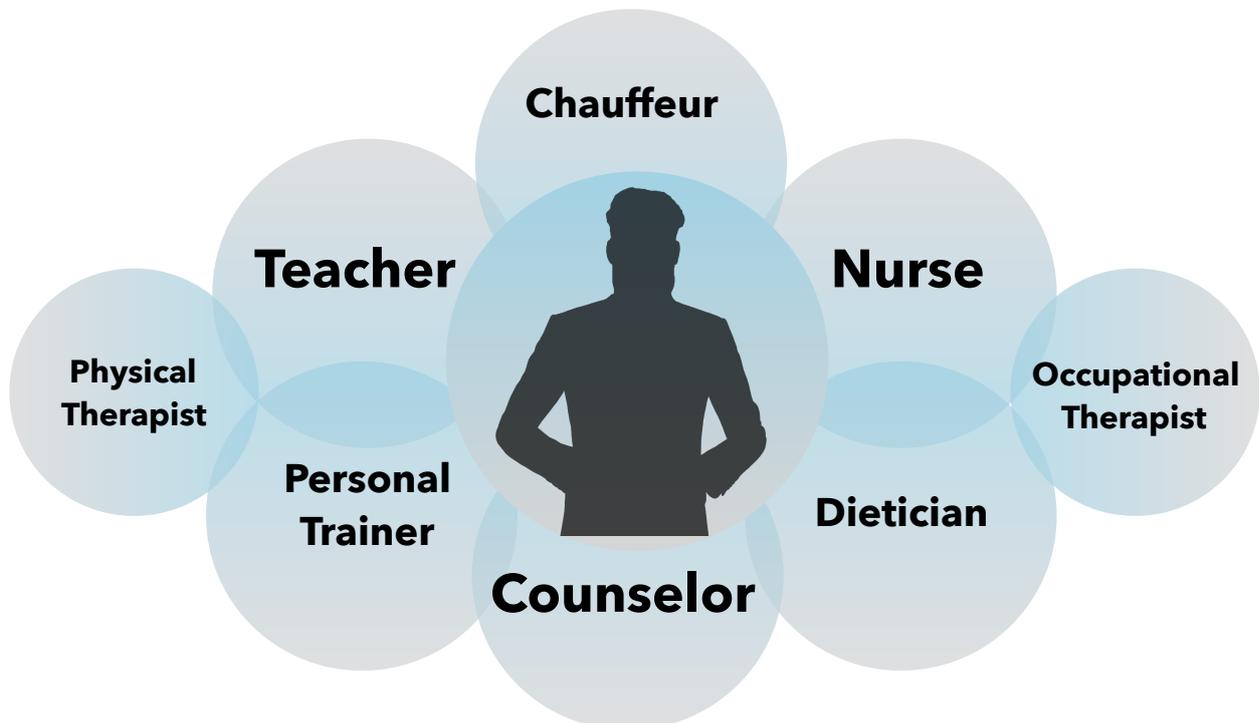


Crisis Intervention & Prevention



Behavioral Supports

DSP Scope of Practice **Analogy**





Direct Support Professionals in Missouri

52% on Public Assistance



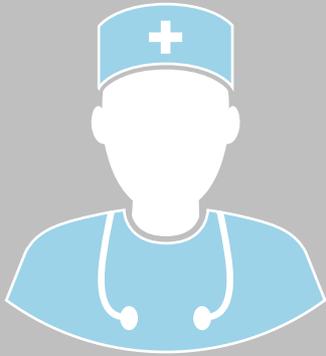
52%

32% Receive Food Stamps

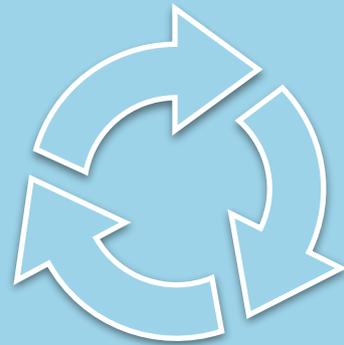


32%

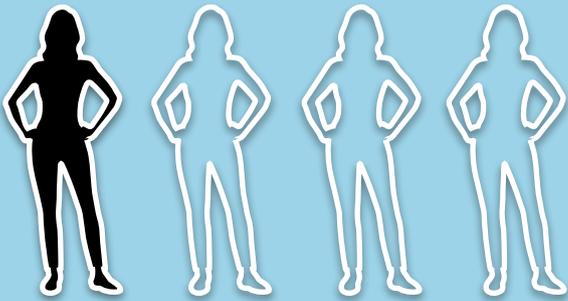
31% of DSPs use Medicaid



60% Turnover Rate in MO



1 in every 4 DSPs Lives in Poverty

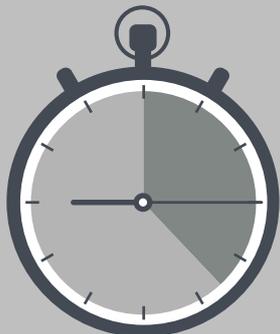


Starting DSP Pay is only 64% of US Median Pay



\$9.71

38% of DSPs in MO leave within their first year



DSP Job Vacancy Rate in MO is 25%

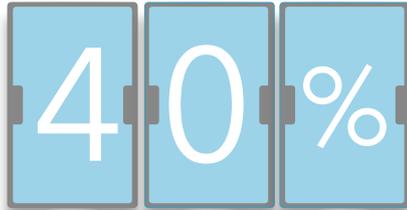




Facing the DSP Workforce Crisis

Compete for Employees

Higher pay and improved benefits will allow providers to compete. IDD providers cannot adequately staff the needs of clients because unemployment is at an all-time low and the workforce demand for employees is incredible. Provider position vacancy rate is 25%, which leads to excessive overtime and puts services for people with IDD at risk.



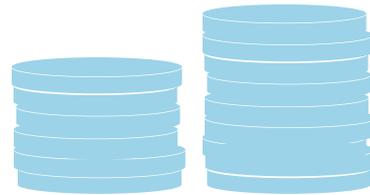
Fully-fund Provider Rates

IDD providers are unable to fill vacant staff positions because DSP wages aren't competitive. Providers' ability to pay competitive wages is hindered by reimbursement rates that are up to 40% below market.



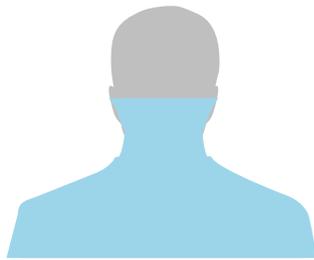
Better DSP Pay

Fully-funding reimbursement rates enables providers to increase wages and benefits to attract additional applicants, higher caliber employees, and to better compete in the workforce.



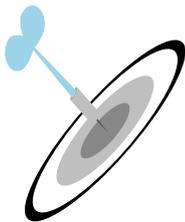
Reduce DSP Turnover

Better pay leads to lower turnover rates. Missouri's DSP turnover is 60%, one of the highest rates in the nation, and 14% higher than the national average. High turnover directly impacts the quality of services provided to people with IDD.



Improve Quality

Fully-funding providers would increase the quality of services delivered to Missourians with IDD.



#NoMOdspCrisis

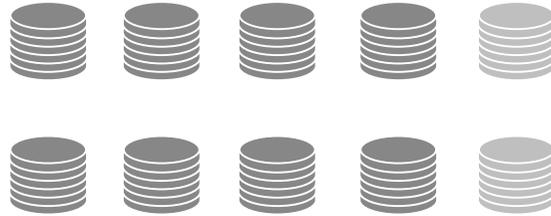
www.marf.cc



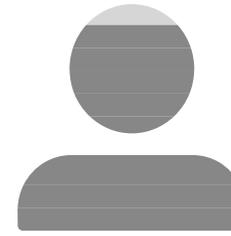
EMPLOYMENT FIRST MISSOURI

80%

In FY17, 5,173 people (VR) with disabilities got a job making at least minimum wage. With an 80% federal match, this is a cost-effective investment.



Increasing Vocational Rehabilitation funding will allow more Missourians with disabilities to become gainfully employed.



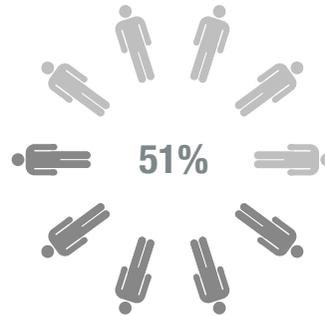
90% of Missourians with developmental disabilities are unemployed

1

Fully Fund Vocational Rehabilitation

2

Support Medicaid-funded employment through DMH-DD



51% of Missourians with IDD want a job but are currently unemployed

“Make Missouri an Employment First state so all Missourians have the opportunity to work in a competitive, integrated setting as the first and preferred choice wherein they can earn money, pay taxes and reduce reliance on public assistance.”

3

Establish Employment First Legislation

77%

77% of people with IDD who need support to work are not currently given the opportunity to receive services.

95% of Missourians with disabilities receiving Social Security cash benefits do not work.

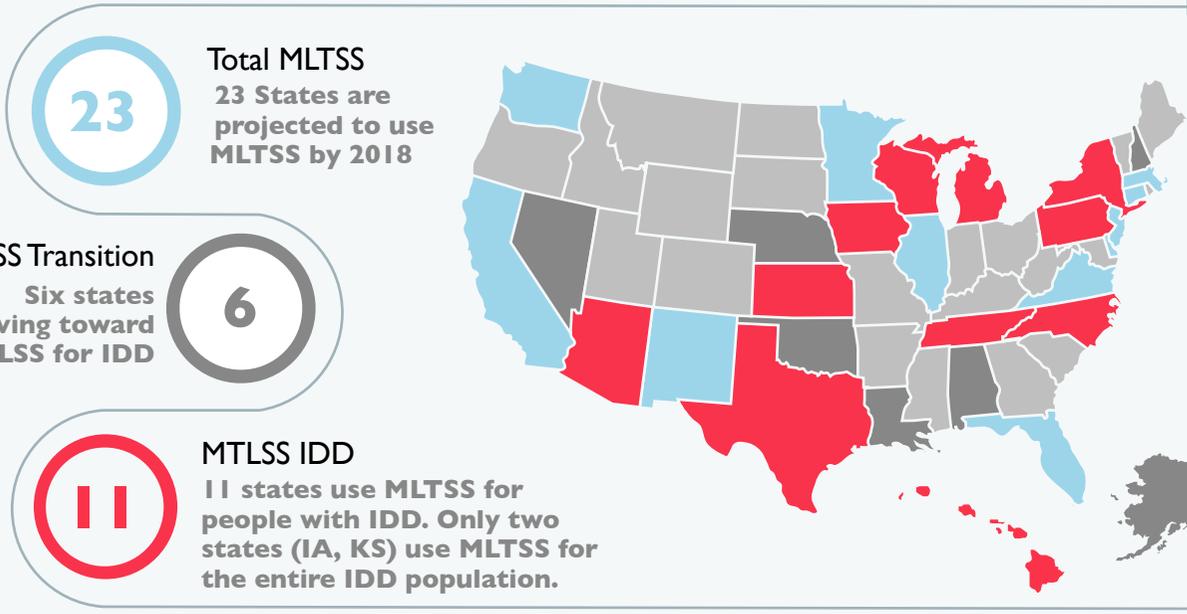
95%





Trends in Managed Care for Long Term Service and Supports

Important Facts about Current MLTSS Programs



If Missouri attempts to expand Managed Care to LTSS, any proposed program must :

- ✓ Allow individuals a choice of provider
- ✓ Improve access to appropriate services
- ✓ Provide positive, measurable outcomes
- ✓ Include an independent appeal process for adverse actions impacting individuals
- ✓ Pay actuarially sound contract provider reimbursement rates
- ✓ Include open enrollment for qualified service providers
- ✓ Provide timely payments that meets/exceeds current MO payment cycles
- ✓ Provide a single party payor if multiple MCOs are used
- ✓ Be conflict free
- ✓ Promote a fiscally sound and healthy community provider network
- ✓ Publish an annual report by December 31st for previous FY expenditures
- ✓ Comply with the Home and Community Based Services final rule



Current models DO NOT save money



Access to appropriate services is limited, reduced, or eliminated



Service authorizations are delayed, impacting services that allow the individual to be successful in the community



Provider payments are delayed by MCO, which puts the provider network at risk



Waiting lists for services in states that use MLTSS



Infographic References

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