

FUNDING BASICS OVERVIEW

Standard Means Test

Caring for and treating people with mental illness, developmental disabilities, and those with substance abuse problems is expensive. In Missouri, such care can cost hundreds of dollars per day. Many families cannot bear the cost for this care and treatment alone. The Missouri Department of Mental Health is here to help.

Through its many programs, the Missouri Department of Mental Health provides assistance to thousands of people. Many resources must be tapped to help recover costs incurred. The Department, however, makes every effort to provide quality services to its individuals while keeping costs as low as possible. For example, third party benefits are applied to offset costs first. Those benefits can come from private or public health insurance policies, or from Medicare or MO HealthNet.

If those payments are insufficient, an individual or their family is asked to contribute a portion of the cost based on the family's ability to pay for care given to an individual. Those charges are determined using a table that considers family size and income. The Standard Means Test is administered by each individual facility. It is applied uniformly throughout the state and is reviewed annually. Missouri law requires the Department to charge for the services it provides and to take certain steps to recover its costs. The charges to an individual or their family, however, are kept to a minimum so that services will be affordable to all. Missouri law also requires the state to recover costs from a deceased individual's estate.

Contracted Service Providers

The State of Missouri, through its 11 Regional Offices procures service contracts for the Division of Developmental Disabilities (DD). The Division of DD uses agencies and individuals that have a contract with the State to provide services to individuals who are developmentally disabled. Agencies and individuals that meet contract provisions established by the Office of Administration can apply to be contracted service providers of habilitative and ancillary services through the Regional Office. Contracted service providers for people with developmental disabilities are expected to not only abide by the contract established with the Office of Administration specific to their service expertise, but to embrace the Division's Quality Standards.

Purchase of Services (POS)

“POS” stands for Purchase of Services. Every fiscal year, Regional Offices are allotted a sum of money to be used to purchase various services/supports for individuals. Many different programs funnel their money through the POS funding channel including, but not limited to Waiver, Autism Project, Waiver Placement, Family Directed Supports, and First Steps. Services that the Division procures through its POS contracts include, but are not limited to, evaluations, attendant services, early intervention, respite care, therapies, transportation, and medical/dental.

Choices for Families (CFF)

The purpose of this program is to prevent or delay out-of-home placement or to facilitate the reunion of families whose members are already in out-of-home placement. It empowers families as the primary decision makers by providing funds for their use in planning and obtaining needed items and services from providers and vendors of their choice. CFF can be used for virtually any family support service that meets the guidelines, including but not limited to the following: environmental adaptations, respite, special clothing, transportation, and special dietary supplements.

Utilization Review (UR)

The purpose of the Utilization Review Process is to ensure quality services are fair and consistent statewide, that the plan reflects the individual’s needs, that levels of service are defined and documented within the Individual Service Plan (ISP) outcomes, that the plan meets all local, state, and federal requirements, and to ensure accountability of public funds.

An individual’s ISP/budget is forwarded to the UR Committee after the plan meeting. The UR Committee uses a checklist to ensure that the necessary documentation in the ISP and budget is available to support the service need. The checklist is divided into four categories: Planning, Financial, Missouri Values, and Residential. The committee also uses a Prioritization of Need form to assist in scoring requests for new or additional services. This tool has six categories: Emergency, Health and Safety, Family Support, Daily Living Supports, Inclusion and/or Recreational Supports, and Long Term Planning. The UR score for a needed service is used to determine priority on waiting lists.

Autism Projects

In 1990, a group of parents came together with a common challenge. They had children with autism who needed specialized services provided locally. Those parents approached the Department of Mental Health and the Missouri General Assembly to secure funding for the first

five autism projects in Missouri. By 1994, those five projects made autism services available throughout the state. All were developed by parents and other family members and are monitored by parent advisory committees. While the Central, Southeast, and Southwest projects selected the Judevine Center for Autism, the Northwest and East projects selected similar models using a variety of providers. The projects provide a variety of services including advocacy training, parent/caregiver/staff training, behavior management training and supports, crisis intervention and therapies, and public education and information dissemination.