

**FISCAL NOTE
PRIVATE COST**

- I. Department Title:** Department of Health and Senior Services
Division Title: Division of Senior and Disability Services
Chapter Title: Certification

Rule Number and Name:	19 CSR 30-81.030
Type of Rulemaking:	Proposed Amendment

II. SUMMARY OF FISCAL IMPACT

Estimate of the number of entities by class which would likely be affected by the adoption of the proposed rule.	Classification by types of the business entities which would likely be affected.	Estimate in the aggregate as to the cost of compliance with the rule by the effected entities.
128 out of 514 total entities	Medicaid Certified Nursing Facilities	FY-18 \$18,063,234 FY-19 \$18,063,234
1,566	In-Home Service Providers, Consumer Directed Service Providers, Adult Day Care facilities, and residential care facilities/assisted living facilities, some of which are small businesses	FY-18 \$46,147,475 FY-19 \$85,195,339
1,694 total	Medicaid Providers	FY-18 \$64,210,709 FY-19 \$103,258,573 and annually thereafter,

III. WORKSHEET

See attached spreadsheet.

IV. ASSUMPTIONS

Medicaid Certified Nursing Facilities

- The average Medicaid per diem rate to Nursing Facilities is \$127.06 per day per resident or \$3,811.08 per 30 day month.
- DHSS in consultation with DSS, MO HealthNet Division, assume that any residents currently in a nursing home with a LOC of 21 will remain in the nursing home.
- The average number of residents admitted to a nursing home with a LOC of 21 in FY15 and FY16 was 390.
- This estimate does not take into account the possibility that facilities may admit and care for private pay residents in Medicaid certified beds thus decreasing the financial impact.

- DHSS estimates only minimal financial impact on individual persons because Medicaid clients admitted to nursing facilities are required to apply all of their personal income, except for \$50 personal spending allowance, toward the cost of their care.

Home and Community Based Services

- Assumes that one twelfth of the 21 point LOC participants will be reassessed each month in year one of implementation and no longer be eligible for services.
- Assumes that a participant who is currently a 21 point LOC participant will still be a 21 LOC participant at the time of their reassessment, therefore, the estimate provided is the maximum estimated cost.
- Calculation is based on current units of service authorized for approximately 7,974 participants with a LOC of 21 and assumes a utilization rate of 76% of authorized units based on historical trends.