

Missouri Department of Health and Senior Services

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INFO 01-25-01

January 1, 2025

MEMORANDUM FOR AGENCY-MODEL HOME AND COIMMUNITY BASED SERVICES PROVIDERS

Melanie Highland

FROM: Melanie Highland, Director

Division of Senior and Disability Services

SUBJECT: Consumer Directed Services Operational Survey

This memorandum serves to notify Home and Community Based Services (HCBS) Consumer Directed providers of the launch of the Consumer Directed Services (CDS) Operational Survey. The survey will be open from January 2, 2025 through February 28, 2025. This survey will collect statistics on vital direct care workforce information and administrative functions and their associated costs. These metrics will help inform future programmatic and policy initiatives, as well as payment methodologies.

In order to be eligible, the provider must have been actively providing CDS from July 1, 2024 through December 31, 2024. This survey is <u>only</u> for HCBS providers that provide CDS services. Agency-model, Residential Care Facility/Assisted Living Facilities, and Adult Day Care facilities <u>are not</u> included in this survey.

The survey links have been distributed via e-mail to eligible CDS providers. Invitations were sent to the business e-mail address on file with Missouri Medicaid Audit and Compliance (MMAC). Please check for an email sent from DSDS.Surveys@health.mo.gov. Providers who do not receive an invite, but believe they should have, should notify DSDS via e-mail at DSDS.Surveys@health.mo.gov. Providers who receive more than one invite should only complete the survey one time on behalf of your entire CDS agency (legal entity). Providers who are dually enrolled as an agency model or ADC provider must be able to isolate and report on only CDS data to participate in the survey.

The survey is comprehensive, and it is recommended agencies open and begin reviewing the survey right away to ensure all necessary information is available for reporting. Accurate reporting is essential to informing future HCBS fiscal and programmatic changes. Providers should not submit the survey if they are unable to accurately answer all questions.

DSDS will issue a one-time value based payment of \$2,000 to eligible providers that complete the survey fully and accurately. This payment will be issued in Spring 2025 following data validation reviews. A future memo will be sent notifying providers of the exact payment date.

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Survey payment is tied to the Medicaid ID number you enter during the survey. Medicaid numbers are 9 digits and begin with 26, 28, 29, or 85. If you do not know your Medicaid ID number, please call Provider Communications at 573-751-2896 and they will be able to assist you. You must enter an accurate Medicaid number to receive payment.

Questions regarding this memorandum should be directed to DSDS via e-mail at <u>DSDS.Surveys@health.mo.gov</u>.

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