

DEMOGRAPHICS

- Total U.S. Census population 290,286,350 in 2004.
- 18% or 51.2 million people in the U.S. are individuals with disabilities.
- 12% or 32.5 million people in the U.S. are severely disabled.
- 1.58% or 4.618 million people in the U.S. have MR/DD.
- 0.78% or 2.308 million people in the U.S. have MR only.

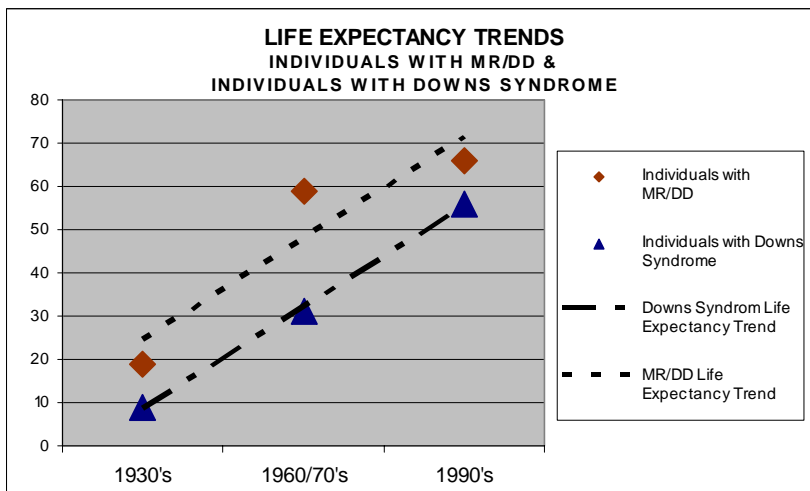
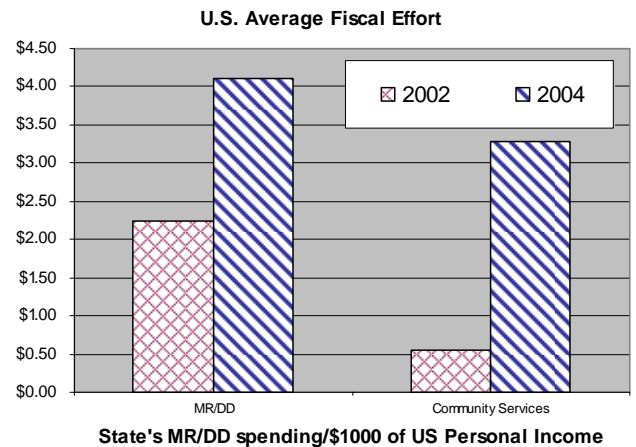
TN total population: 5,835,713.

TN has approximately 92,204 people with MR/DD and 45,519 people with MR (based on 2004 U.S. prevalence rates).

People with MR/DD supported in TN FY05:
 4,836 persons in HCBS waiver,
 1,330 persons in ICFs/MR, and
 895 persons in nursing homes.

MR/DD TRENDS – UNITED STATES

- A total of 545,429 people received services from either HCBS waiver or ICFs/MR, a 12.4% average annual increase ('92 - '05).
- 443,608 (81%) of the people were served by HCBS waiver (an increase from the 16.4% in HCBS in 1987) and 101,821 in ICFs/MR.
- 411,215 people lived in residential settings; 291,142 (71%) in settings of 6 or fewer.
- 101,143 people lived in homes they owned or leased, a 5.6% decrease from FY04.
- 35,386 people lived in family/foster care, a decrease of 11.2% from FY04.
- 73,828 on waiting lists (41 states) for residential services.



- In 2004, 641,000 individuals with developmental disabilities were over the age of 60.
- In 2030, 1,242,800 individuals with developmental disabilities will be over the age of 60.
- 35% of people with MR/DD live with caregivers between ages of 40-60.
- 25% live with caregivers over the age of 60.

MEDICAID FUNDING FACTS

TN HCBS Waiver Expenditures (FY05):

HCBS Waiver (5 waivers):
\$390,041,715
MR/DD (2 waivers):
\$380,075,322
Aging/Disabled (3 waivers):
\$9,966,393
Physically disabled (0 waivers)
Additional waivers (0 waivers)

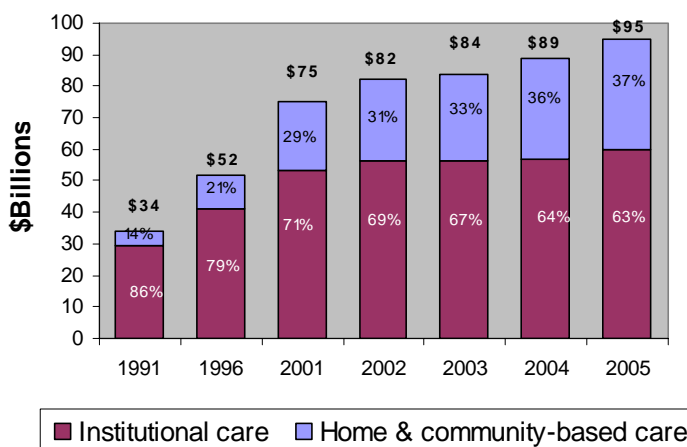
Tennessee

- Medicaid enrollees 1,651,500 residents (28% of population) in FY03.
- Blind or disabled enrollees 284,500 in FY03.
- Total Medicaid spending \$7.5 billion in FY05.
- Nursing home care accounted for 62% of long term care spending in FY04.
- Home/personal care accounted for 24% of long term care spending in FY04.
- TN was 30th in fiscal efforts in FY04 for services for individuals with MR/DD, up from 31st in 2002.
- 83 ICFs/MR, 3 state serving 662 people and 80 private serving 668. ICF/MR spending is \$158.3 million for public ICFs/MR and \$131.1 million for private, for total of \$289.4 million (FY05).
- Waiting List: 1,491 on waiting list as of FY05.

United States

- All Long Term Care (personal care, home health, HCBS waiver, nursing home, ICF/MR) spending increased 3.8% to \$94.5 billion (expected to increase by 5% after final adjustments) in FY05.
- All Community Based LTC services (HCBS waivers, personal care, home health services) spending increased by 6.1% to \$35.2 billion in FY05.
- MR/DD spending increased 5.7% to \$38.55 billion (FY02 - FY04).
- HCBS waiver spending increased 5.4% to \$22.7 billion (FY05).
- HCBS MR/DD spending increased 5.3% to 17.2 billion, an average of \$38,679 per person (FY05).
- ICF/MR spending increased 0.6% to \$12.1 billion; \$7.5 billion in public and \$4.6 in private settings, an average of \$117,600 per person in FY05.

Growth in Medicaid Long-Term Care Services Expenditures, 1991-2005



WORK FORCE & FAMILY CAREGIVERS – UNITED STATES

- \$8.86/hr average pay for direct support professionals (majority are women supporting families) yielding an annual income of \$18,054 - below poverty level of \$19,350 for a family of 4.
- Number of people needing Personal Assistance Services (PAS) is expected to double from 2000 to 2050 (13 million to 27 million).
- 55.3% PAS pay increase, \$5.41/hour to \$8.40/hour for '89 - '04; nursing home aide pay increased 79% and food workers 85.5% for same period.
- "Unpaid care" by a relative or friend valued at \$257 billion per year, twice amount on paid care.
- 1 of 6 people in the U.S. (50 million) provides care for a chronically ill, aged or disabled friend or relative without public funds.

TN: 560,462 family caregivers provide 600 million hours of care = 5.3 billion dollars (03).

Medicaid Services Are Critical For Our Future

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