

# Money Follows the Person Rebalancing Demonstration



# Purpose of this presentation

- ◆ **Provide a basis for discussion by:**
  - **Describing the intent of Money Follows the Person and Rebalancing**
  - **Describing the current long-term care environment**
  - **Describing proposed elements of this demonstration**
- ◆ **Identify opportunities for continued involvement in this process**

# What is Money Follows the Person (MFP)?

- ◆ MFP has historically been defined as “a system of flexible financing for long-term services and supports that enable available funds to move with the individual to the most appropriate and preferred setting as the individual’s needs and preferences change.”

# MFP increases Home and Community Based Choices for Long-Term Care

- ◆ .... this initiative will assist States in their efforts to reduce their reliance on institutional care while developing community-based long-term care opportunities, enabling the elderly and people with disabilities to fully participate in their communities.  
(CMS)

# MFP Overview

- ◆ **Transition services to relocate people from institutions to the community**
- ◆ **Increasing the number of people served in the community relative to those served in institutions**
- ◆ **Home and Community Based Services that reflect choice and self-direction**
- ◆ **Mechanisms for flexible financing**
- ◆ **Quality Assurance**

# Why Pursue MFP?

- ◆ People served by home and community based services (HCBS) report higher consumer satisfaction and quality of life
- ◆ Medicaid HCBS long term care expenditures for people transitioned are approximately half of the Medicaid expenses incurred while in the nursing home.

# Current Long-Term Care Support System

- ◆ **Institutional Care Settings**
- ◆ **Medicaid State Plan Options**
- ◆ **Medicaid Home and Community Based Service Waivers**
- ◆ **Community Level Supports**

# Institutional Care Settings

- ◆ **Nursing facilities**
- ◆ **Chronic care facilities**
- ◆ **Intermediate care facilities**
- ◆ **Institutions for Mental Disease**

# Medicaid State Plan Options

- ◆ Home health services
- ◆ Rehab option for psychiatric rehabilitation services
- ◆ Durable Medical Equipment

# Medicaid HCBS Waivers

- ◆ Personal Care Assistance (PCA)
- ◆ Acquired Brain Injury (ABI)
- ◆ Connecticut Home Care Program for Elders (CHPE)
- ◆ Katie Beckett (Model Waiver)
- ◆ DMR Individual and Family Supports
- ◆ DMR Comprehensive Waiver

# Community Level Long Term Care System

- ◆ Municipal
- ◆ Non-profit
- ◆ Informal Caregivers
- ◆ Volunteers

# Ancillary Services and Supports in the Current Long-Term Care

- ◆ Community based housing options
  - Assisted Living
  - Continuing Care Retirement Communities
  - Congregate Housing
  - Residential Care Facilities
  - Group Homes
  - Family home
- ◆ Supportive services
  - Food Stamps
  - Energy assistance

# Recent legislation

- ◆ **Expansion of HCBS options for additional populations**
- ◆ **Approval of Money Follows the Person pilot**
- ◆ **Expansion of supportive housing options**

# Rebalancing in Connecticut

- ◆ 1991 Moratorium on expansion of new nursing facility beds
- ◆ Increased demand for HCBS
- ◆ Long-Term Care Planning Committee
- ◆ Nursing Facility Transition System
- ◆ Closure of 2500 nursing facility beds over the past 7 years

# Funding Mechanisms for Long-Term Care

- ◆ Medicaid
- ◆ State funds
- ◆ Private payments
- ◆ Partnership for Long-Term Care
- ◆ Older Americans Act
- ◆ Social Service Block Grants
- ◆ Rehabilitation Act



# Institutional Diversion and Nursing Facility Transition Programs

- ◆ **DSS Alternate Care Unit**  
preadmission screen for all persons prior to entrance to nursing facility
- ◆ **Nursing Facility Transition Program**  
since 2001 with 6 full time staff
- ◆ **Diversion of income for rental assistance upon discharge**



# Gaps to address in demonstration

- ◆ Affordable, accessible housing
- ◆ Increased capacity for transition system
- ◆ Information on HCBS options for conservators and attorneys
- ◆ Integration of assistive technology
- ◆ Waiver of state plan amendment based on functional need
- ◆ Coordinated HCBS quality management strategy
- ◆ Funding strategies

# Legislation required for Implementation

## ◆ 2007

- Continuation of comprehensive Medicaid funding to address caps;
- Amend Money Follows the Person legislation to include 700 people over 5 years;

## ◆ 2009

- State must commit to a new waiver or State Plan amendment to continue services that are not already covered in the existing long term care system.

# Stakeholder input

- ◆ Assure principles of independent living and self-determination;
- ◆ Address fragmentation and gaps by designing services based on function limitation, cross disability;
- ◆ Give people a choice about their services and control over who provides care;
- ◆ Provide more help with housing search

# Proposed Demonstration Design

- ◆ 5 additional transition coordinators at Area Agencies on Aging in addition to the 5 existing coordinators at Independent Living Centers; 2 Housing Specialists
- ◆ Flexible Financing;
- ◆ Support services to promote self-direction;
- ◆ Quality Management Strategy;
- ◆ Collaboration between all stakeholders

# Population to be Served

- ◆ **Anyone Medicaid eligible who has been living in one of the following sites for at least 6 months:**
  - **Nursing Facility**
  - **Chronic Care Facility**
  - **Intermediate Care Facility**
  - **Institutions for Mental Diseases as allowed under the state plan**

# Qualified Residences

- ◆ Home owned or leased by the individual or their family
- ◆ Apartment with lease including assisted living
- ◆ Residence in a community-based residential setting, in which no more than 4 unrelated individuals reside



# Services and Supports to Address Gaps

- ◆ Based on functional need
- ◆ Individual budgets where the person selects from broad menu of services and supports
- ◆ Maximize self-direction with Cash and Counseling
- ◆ Services menu includes:
  - 24 hour live-in
  - Personal Manager



# Expected transitions per Year

◆ 2007	100
◆ 2008	150
◆ 2009	150
◆ 2010	150
◆ 2011	150
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	700

# Selection of Participants for Money Follows the Person

- ◆ Inform nursing facility administrators and social workers about the demonstration;
- ◆ Continue existing method of 1:1 outreach in nursing facilities;
- ◆ Utilize preadmission screening data to identify those likely to be institutionalized over 6 months;
- ◆ Continue on a first come -first serve basis

# Quality Management Strategy

- ◆ **Assure needs of persons in nursing facilities as census drops;**
- ◆ **Assure quality HCBS in community with demonstration;**
- ◆ **Create and implement a quality management strategy across agencies and waivers.**

# Stakeholder Participation

- ◆ **MFP Demonstration will have 2 phases:**
  - Pre-implementation
  - Implementation
- ◆ **Multiple opportunities for stakeholder participation over the 5 year demonstration**

# Pre-implementation

- ◆ **Begins upon award  
(January 1, 2007)**
- ◆ **3 to 12 month period designed to:**
  - **Formally engage all stakeholders**
  - **Finalize demonstration design**
  - **Plan for necessary operational changes  
in community-based long term care  
services**

# Implementation Phase

- ◆ **Plan needs to be approved by the federal government**
- ◆ **Additional Medicaid dollars will be available to Connecticut for those transitioned**

# Steering Committee

## ◆ Governing Steering Committee

- Open monthly meetings;
- 51% of the committee is comprised of consumers, family members, older people;
- 49% of the committee is comprised of nursing facility administrators, state agency representatives, advocates, providers;
- Collaboratively design, develop, implement, and evaluate Money Follows the Person Rebalancing Demonstration.

# Stakeholder input to Date

- ◆ August 4, September 20, October 6: Meetings with Steering Committee on the design on the proposal;
- ◆ October 25: Statewide stakeholder input on jointly developed design;
- ◆ January 2008: Workgroups established on operating protocol design, housing, evaluation, implementation.

# Contact information

- ◆ Additional information available at:  
[www.ct.gov/dss](http://www.ct.gov/dss)

Click on “Money Follows the Person” link

- ◆ Answers to questions at the hearing will be posted within 48 hours
- ◆ Questions and Correspondence may be sent to [MFP@ct.gov](mailto:MFP@ct.gov)