Money Follows the Person Rebalancing Demonstration

HOME AGAIN

Bureau of Long Term Care & Behavioral Health Services
Introduction

- History & Background of Original Grant
- Advantages of Reinstating Grant
- Plans for Reinstatement
- Minimum Date Set (MDS) 3.0 Section Q
History & Background
Of Original Grant
History

- The Americans with Disabilities Act (ADA) of 1990
- The *Olmstead* decision of 1999
- President Obama announced the “Year of Community Living” in June 2009
- The Affordable Care Act (ACA) of 2010
Money Follows the Person
Rebalancing Demonstration

- MFP Program was authorized by Congress in Section 6071 of the Deficit Reduction Act of 2005 (DRA)
- To provide assistance to States to balance their long-term care system & help Medicaid enrollees transition
- Person centered & community based
Congress initially authorized $1.75 billion in Federal funds through FY 2011.

MFP program expanded through FY 2016 with additional $450 million.
Purpose of MFP

- Increase use of home and community based services (HCBS)
- Enable choice of long term care setting by consumer (Olmsted)
- Structure for transitioning out of NFs
- Ensure quality assurance and continuous improvement of HCBS
Advantages of Reinstating Grant
Advantages of Reinstating Grant

- Client satisfaction, most desired site of care
- Better outcomes
- Advocates are supportive
- Blend institutional populations with plan for rebalance back to community
Advantages of Reinstating Grant (Cont.)

- Cost neutral to agency/state
- Eventually save money if more people are in the community
- Allow providers of institutional services to diversify & provide community based services
Advantages of Reinstating Grant (Cont.)

- Facilitate and coordinate intent of MDS 3.0 Section Q
- Systematic way to track data for MDS Transitions
- 43 states are doing it
Incentives for States

- 100% federal administrative matching funds
- Higher federal rate for services for 365 days (85/15)
- Opportunity to develop pilot services for testing
- Determine Institutional Target groups
  - Nursing facilities
  - ICFs/MR
  - IMDs
  - PRTFs
Map of MFP States as of January 2011

South Carolina Department of Health & Human Services
Plans for Reinstatement
Target Populations

- NFs
- PRTFs
- IMD
- ICFs/MR

Increased target populations
Increased Target Populations

- NFs – Adults are aged & disabled
- PRTFs – Children with behavioral health problems
- IMD – Children & adults in mental health facilities
- ICFs/MR – Adults in DDSN facilities
Stakeholders

Lt. Governor's Office on Aging
- ADRC

Department of Mental Health
- PRTFs / IMD

Department of Disabilities and Special Needs
- ICFs / MR

The Housing Authority

Others
- NFs
Plans for Reinstatement

- Hire two staff - Program Coordinator II & Project Administrator
- Follow work plan for development and coordination with other stakeholders
- Start working with CMS staff for updates and reentry
MDS 3.0 Section Q
SECTION Q - Discharge to the Community

- Requires the question be asked - “Do you want to talk with someone about the possibility of returning to the community?”

- Prompts staff to follow through in a systematic manner to assure resident’s goals are addressed
States must designate one or more local contact agencies - LCAs

- Examples: CLTC, ADRCs, CILS, MHA

LCAs & NF staff have joint responsibility for collaboration & coordination related to discharge planning & transition
SECTION Q - Discharge to the Community (Cont.)

Resident Request

**Pay Source**

**Medicaid**
- Refer to Regional CLTC Office
- Meet NF Level of Care *and*
- 90 Days Stay

**Medicare**
- Refer to Home Health Agency
- Must Have Skilled Medical Need (PT, OT, ST)

**Private Pay**
- Refer to Aging and Disability Resource Center
- Does Not Meet NF Level of Care
References

- CMS, Money Follows the Person:
  http://www.cms.gov/CommunityServices/20_MFP.as
- CMS, MFP States As of January 2011:
  http://www.cms.gov/CommunityServices/Downloads/New_MFP_Applicants_States_DC.pdf
- CMS, FY2011 Money Follows the Person Solicitation
- CMS, FY2010 Money Follows the Person Planning Grant Solicitation:
Thank you