
Money Follows the Person: Progress, Challenges, and Future Prospects

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Presentation to the Long Term Care Discussion Group

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Acknowledgements and Disclaimer

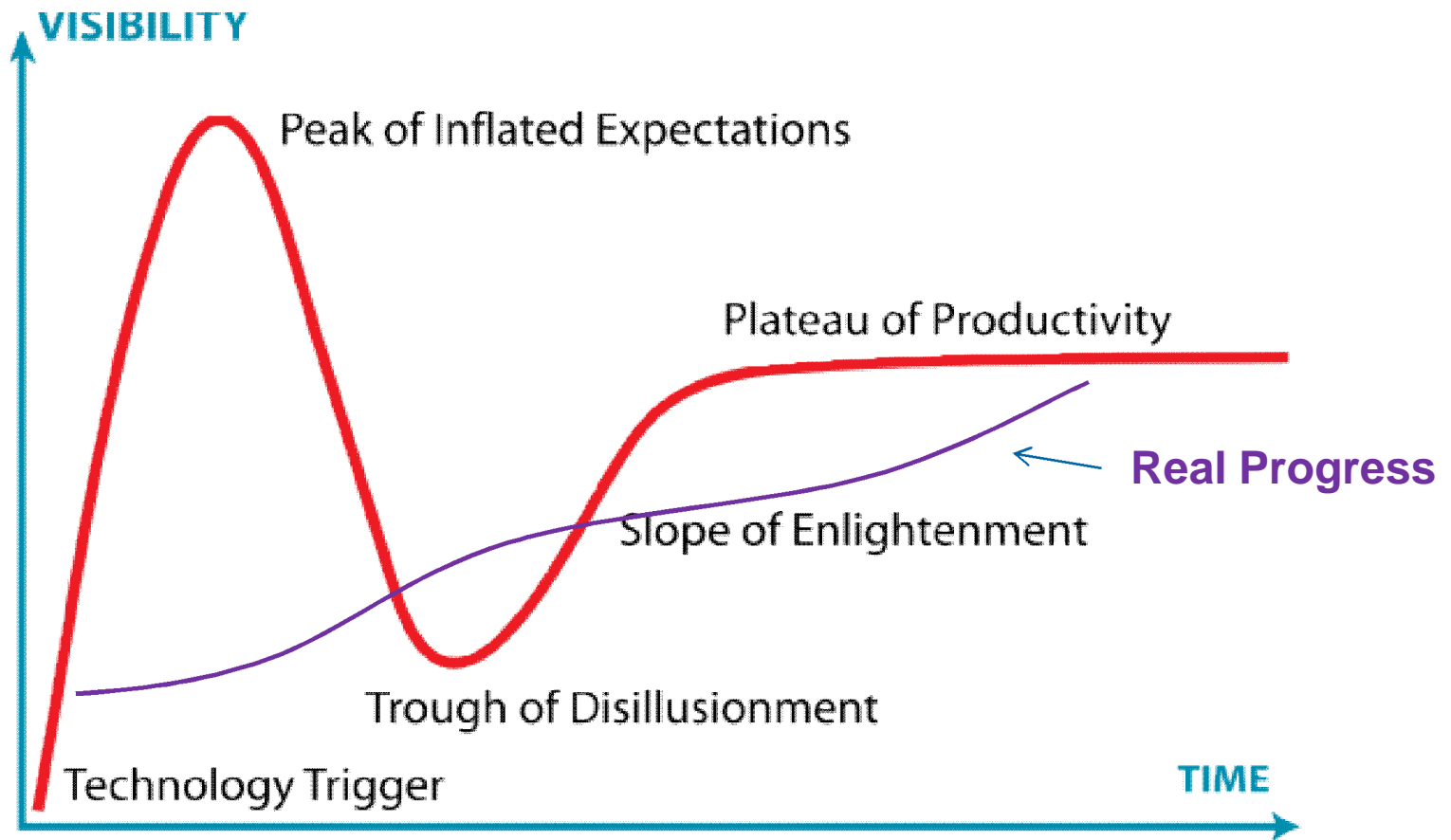
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- **State MFP Project Directors**
 - Past, present and future!

- **Any of the opinions expressed are that of the author and should not be attributed to either CMS or Mathematica**

MFP Progress in relation to the Hype Cycle



Adapted from Gartner Group, and thanks to Jeff Schiff, M.D.

Overview

- **Context, Aims & Overview of the MFP Program**
- **Early Results**
 - Transitions
 - Quality of Life
 - Outcomes of First Year in the Community
- **Challenges to Implementation**
- **MFP in the Future**



MFP Context:

History of Federal initiatives to support state LTC rebalancing and HCBS development

- Medicaid HCBS waivers and policy changes
- New Freedom Initiative
- Deficit Reduction Act of 2005
- Affordable Care Act of 2010 – *extended MFP to 2016*

Principal Aims of MFP

Reduce reliance on institutional care

Develop community-based LTC opportunities

Enable people with disabilities to participate fully in their communities

MFP Demonstration Grants Awarded

- **Number of grant awards**
 - 44 grantees (43 states + District of Columbia)
 - 17 - January 2007; 14 - May 2007; 13 - February 2011

- **Amount of grant awards**
 - State grant awards in 2007: \$1.44 billion for 5 years
 - 2010 ACA extended MFP to 2016 and authorized \$2.25 billion more; \$4 billion total MFP funding
 - Wide range in state awards: \$5 million to \$142 million

- **Each state is implementing two programs**
 - Transition program
 - Rebalancing program



Transition Program (1)

■ Eligibility Requirements

- **Medicaid beneficiaries in institutional care for at least 90 days (6 months prior to March 2010)**
 - Days covered by Medicare do not count toward this requirement
 - Institutions include nursing homes, hospitals, intermediate care facilities for the mentally retarded, psychiatric facilities

■ Other Requirements

- **Transition to “qualified” residence** (home, apartment, or group home with 4 or fewer people, assisted living facilities under certain circumstances)
- **Quality assurance and 24-hour backup**

Transition Program (2)

- **MFP Services**

- Eligible for 365 days
- Qualified HCBS
- Demonstration HCBS
- Supplemental Services

- **Continuity of services**

- Qualified HCBS continues after MFP eligibility ends based on beneficiary eligibility



Rebalancing Program

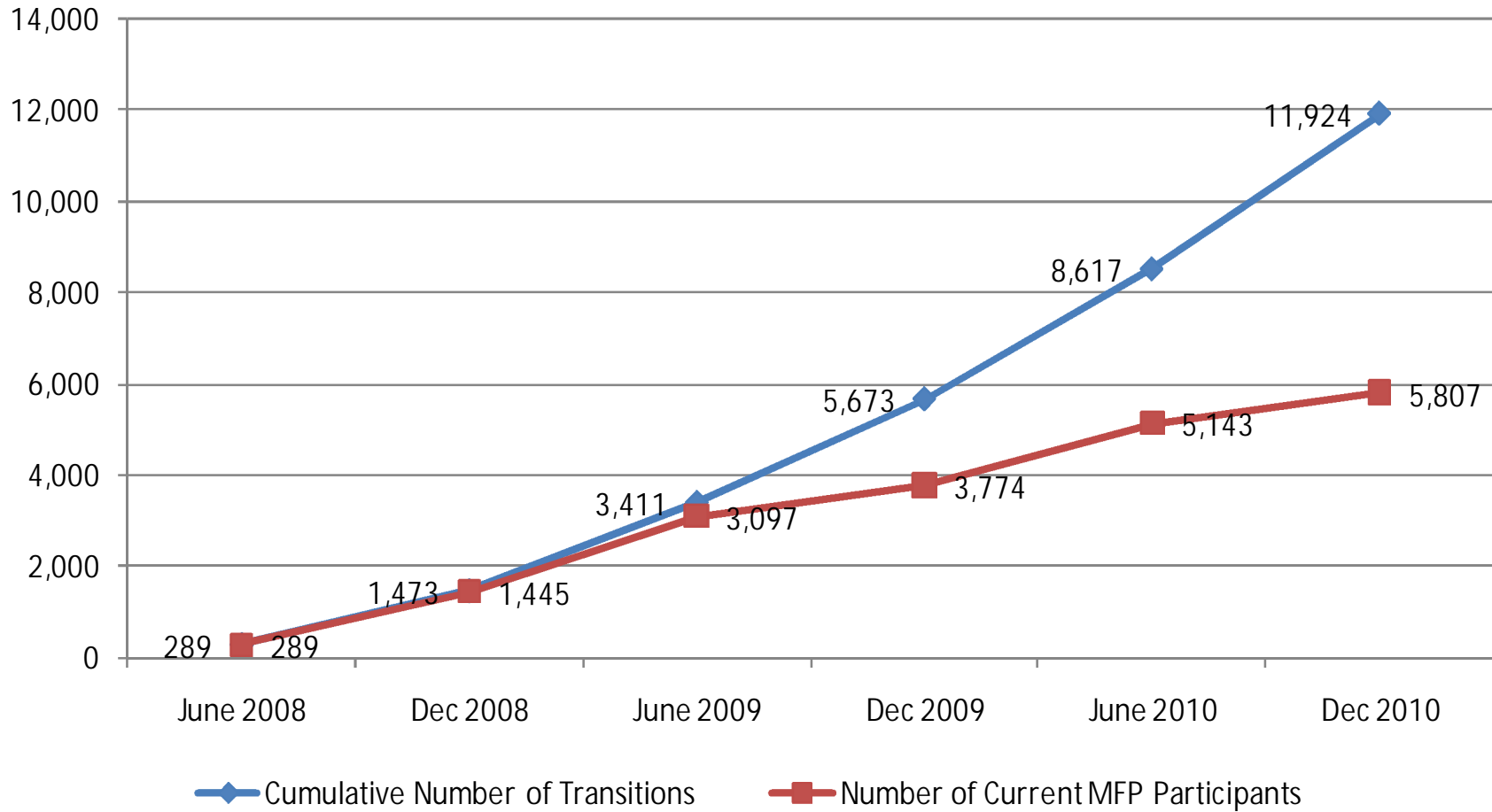
- **Enhanced federal matching funds**
 - Qualified HCBS
 - Demonstration HCBS

- **States must reinvest “rebalancing funds” (net revenue from enhanced matching rate) in long-term care system reforms, for example to:**
 - Expand HCBS to Medicaid beneficiaries
 - Build HCBS infrastructure

EARLY RESULTS



MFP Transitions, January 2008 to December 2010

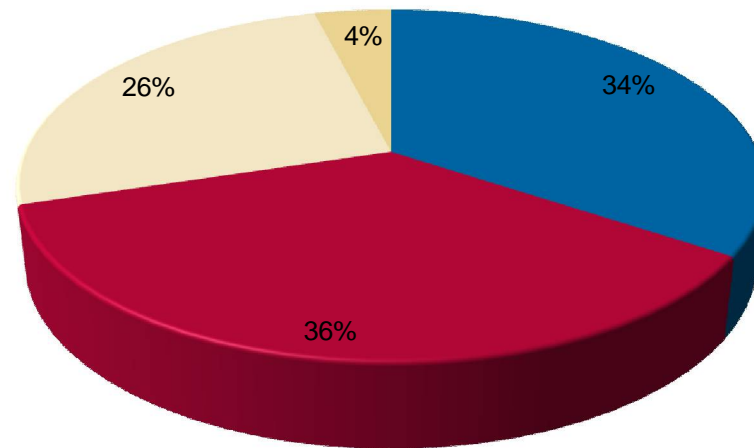


Source: Mathematica analysis of State MFP Grantee Semi-Annual Progress Reports



MFP Populations Transitioned, 2008-2010

Individuals under age 65 with physical disabilities (most formerly nursing home residents) are the largest group of MFP participants



- Elderly
- People under age 65 with physical disabilities
- People with intellectual disabilities
- People with serious mental illness and others

Source: Mathematica analysis of State MFP Grantee Web-based Progress Reports, June 2008 - December 2010

Age and Gender Distribution of MFP Participants, June 2010

64 percent are working age adults

33 percent are older adults

51 percent are men; 49 percent are women (not shown)

Age Distribution	Number	Percentage
Total	7,729	100.0
< 21	278	3.6
21-44	1,543	20.0
45-64	3,380	43.7
65+	2,514	32.5
Unknown	14	0.2

Source: Mathematica analysis of State MFP Program Participation Data Files, Lipson and Williams, January 2011

MFP Participants' Community Living Arrangements

- About a quarter of MFP participants each moved to homes, apartments, and group homes
- About 9 percent moved to assisted living facilities
- *Nearly 15 percent unknown*

Type of Qualified Housing	Total	Elderly	PD	ID	Other	Unknown
Home	26.5	47.7	32.4	3.0	7.3	12.9
Apartment	24.2	18.9	34.0	10.6	6.8	29.7
Assisted living	8.8	14.1	10.4	5.0	4.2	3.1
Group home	26.0	8.4	8.9	75.0	7.8	16.7
Unknown	14.5	11.0	14.2	6.4	74.0	37.6

Source: Mathematica analysis of State MFP Program Participation Data Files, Lipson and Williams, January 2011

Improvements in Quality of Life, by Target Population

	TOTAL	Aged NH Residents	Physically Disabled NH Residents	ICF-MR Residents	Other/ Unknown
Global Satisfaction	++	++	++	+	++
Living Satisfaction	++++	++++	+++++	++	+++++
Community Integration	+	++	+	+	+
Unmet personal care needs	+	+	+	--	+
Respect and Dignity	++	++	++	+	++
Mood Status	--	+	--	--	+
N	803	138	217	228	220

+ indicates improvement of 10 - 19 percentage points
 ++ indicates improvement of 20-29 percentage points
 +++ indicates improvement of 30-39 percentage points

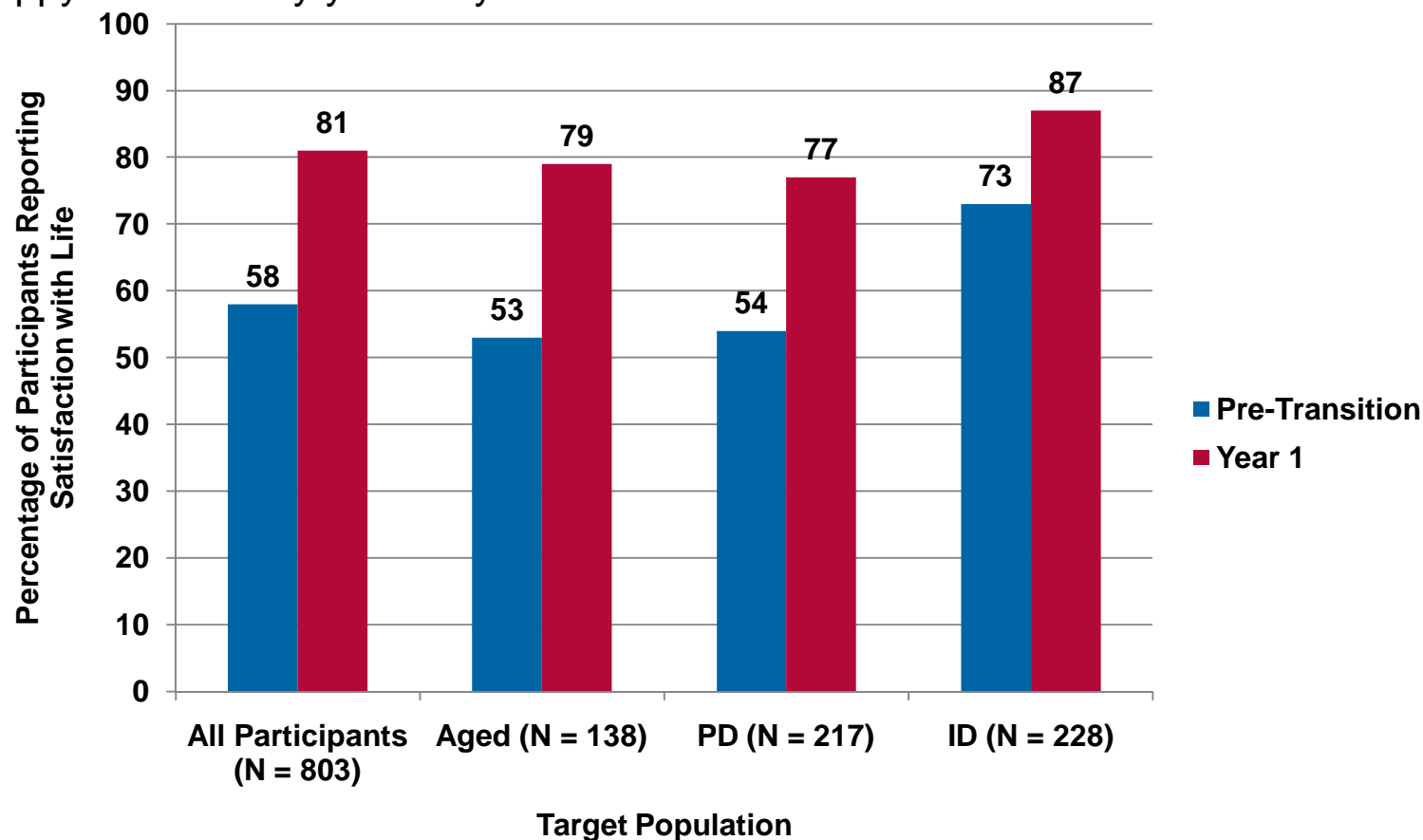
++++ indicates improvement of 40-49 percentage points
 +++++ indicates improvement of more than 50 percentage points

Source: Mathematica analysis of MFP-QoL survey and Program Participation data files submitted through November 2010, includes MFP enrollees through December 2009 and 1-year follow-up surveys through September 2010, Simon and Hodges, 2011.



Percentage of MFP Participants Reporting Satisfaction with Life, Pre- and Post-Transition

“Taking everything into consideration, during the past week, have you been happy or unhappy with the way you live your life?”



Source: Mathematica analysis of MFP-Quality of Life survey and Program Participation data files submitted through November 2010, representing transitions through December 2009 and 1-year follow-up surveys through September 2010, Simon and Hodges, 2011.



Challenges to Program Implementation

- **State budget cuts**
- **Scarce affordable and accessible housing**
 - Insufficient housing vouchers, although HUD vouchers awarded in 2011 will help
- **Limited availability of HCBS**
 - Supply of providers
 - Amount, scope, and duration of services
 - Supply of specific services or direct care workers
- **Risk management, and quality assurance and remediation**

Putting MFP in Perspective and Future Developments



MFP Gaining Momentum

- **Nearly all 30 initial grantees have overcome problems with initial start-up**
- **Collaborative efforts by state and federal MFP officials removed some barriers to transition and added resources to fill gaps in services and state administrative capacity**
- **12,000 cumulative transitions at end of 2010**
 - Twice as many as end of 2009



12,000 MFP Transitions in Comparison . . .

■ Drop in the bucket?

- 1.2 percent of total eligible at baseline in 2007
- 1 percent of Medicaid HCBS Waiver Participants in 2007

■ Barely passing grade?

- Half (50%) of aggregate state goal by end of 2010, based on June 2008 goals

■ Strong performance?

- “Plateau of productivity” replacing “inflated expectations”
- Many states are targeting MFP beneficiaries with high needs

■ Extraordinary?

- Current MFP participants (5,800) - 5 times more than current residents in Greenhouse units



MFP Risks and Limitations

- **Jumping the queue?**
 - In states with long waiting lists to enroll in HCBS waivers, MFP may lead people to enter institutions for 90 days to obtain HCBS
- **Hindering upstream rebalancing strategies?**
 - MFP may undermine efforts to divert people from institutions
- **Picking low-hanging fruit?**
 - Some states may be enrolling individuals in MFP who might have left institutions without assistance

MFP in 2011 and Beyond

- **MFP enrollment will continue to rise in 2011:**
 - Continuing increases in transitions in many states; some (e.g. CT) planning significant growth
 - More referrals to MFP due to implementation of new MDS Section Q questions
 - Some new grantees will begin operations
- **Total MFP transitions over 10-years of MFP (2007-2016) could be nearly 70,000**
- **More MFP participants = more Federal funds for States to reinvest in LTC rebalancing initiatives**

Upcoming Evaluation Reports

- **2010 Annual Report**
- **Semi-annual Overview of Grantee Progress**
- **Topic Papers**
 - Outcomes after first year in the community
 - Determinants of progress
 - Description of MFP HCBS services and use
 - Level of need of MFP participants before leaving a nursing home (MDS analysis)



For More Information

- **CMS and Mathematica websites:**

- http://www.cms.gov/CommunityServices/20_MFP.asp
- <http://www.mathematica-mpr.com/health/moneyfollowsperson.asp>

- **Mathematica contacts:**

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Questions and Discussion