

# Money Follows the Person Demonstration Expansion

**MFP Consultative Group Kick Off Meeting** 

November 15, 2022 Brown Auditorium 1:00-2:30pm

# Agenda

1:00	We	lcome, Agend	la Review 8	& Introd	luctions
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1:30 Overview of MFP, MFP Expansion Opportunity Consultative Group

1:45 Current Activities and High Level Timeline

2:00 Discussion and Questions:

Who else needs to be included?

**Next Steps** 



# Introductions Name Organization



# House Keeping

- Money Follows the Person
   Website and Email Address will
   be created in the coming weeks.
- Questions can be directed to Wendi Aultman, Bureau Chief, Bureau of Elderly and Adult Services
- Thank You!
- Meeting Place Logistics



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# MONEY FOLLOWS THE PERSON (MFP) BEAS TEAM



### Wendi Aultman

Interim Project Director

### **TBD Administrator IV**

MFP Project Director

### **TBD Business Systems Analyst 1**

MFP Data and Quality Analyst

# **UNH Center on Aging and Community Living (CACL)**

Project and Technical Support, Consumer Experience Survey.

### **TBD-Competitively Bid Contractor**

System Assessment and Gaps Analysis



### MFP Demonstration General Information

The Money Follows the Person (MFP) Demonstration supports state strategies to rebalance LTSS systems from institutional to community-based care.

The <b>goals of the demonstration</b> are to:
☐ Increase the use of home and community-based services (HCBS) and reduce the use of institutional services;
□Eliminate barriers in state law, state Medicaid plans, and state budgets that restrict the use of Medicaid funds to enable Medicaid-eligible individuals to receive support for appropriate and necessary long-term services and supports in the settings of their choice;
☐Strengthen the ability of Medicaid programs to provide HCBS to people who choose to transition out of institutions; and
☐Put procedures in place to provide quality assurance and improve HCBS.

## **MFP Quick Facts**

- ☐ Currently 36 grantees including the District of Columbia +
  - ☐5 new states NHⓒ, KS, IL, American Samoa and Puerto Rico=41 states and territories.
- □+107,000 Transitions as of 2020
- ☐ Total funding to date: \$ 4,617,000,000
- ☐ MFP provides strong evidence that beneficiaries' quality of life improves and the improvement is sustainable when they transition to community-based LTSS (2017 Report to Congress)



# MFP Demonstration Expansion New Opportunity for Funding General Information

☐ Make funds available for a 16-month Planning Phase, during which award recipients will work with stakeholders to design and develop ar MFP Demonstration and Demonstration application that support the states' unique LTSS system reform goals.	1
☐ Opportunity to implement capacity building initiatives during and after the end of the Planning Phase.	er
☐ Funding available for planning and capacity building for an amount up to \$5 million per state.	р
☐ Funding will be available to states for the year in which it was awarde and four additional years.	ed

# MFP Demonstration Expansion General Information

During the Planning Phase, award recipients can design and implement capacity building activities to further the MFP Demonstration.

Examples of <u>capacity building activities</u> include (but, are not limited to):

- □ Assessing HCBS system capacity and determining the extent to which additional providers and/or services might be needed, including self-directed services and providers that serve communities of color and other underrepresented populations; □ Assessing racial and ethnic or other disparities in the state's HCBS system and developing strategies to address them;
- ☐ Assessing institutional capacity and determining the extent to which the state could reduce this capacity;
- ☐ Caregiver and transition coach training and education; and
- ☐ Building Medicaid and housing partnerships.



# Money Follows the Person (MFP) Demonstration





https://youtu.be/LdnfirADt6Y



# New Hampshire MFP Demonstration Expansion Overview

# Didn't we already do MFP? What happened?

- Previously, NH's participation in MFP focused on moving people with disabilities from institutional to home and community settings. (3 HCBS 1915c Waivers)
- In 2007, the Community Passport Program (CPP) was established with MFP funding.
- CPP supported the transition of over 300 individuals between 2007 and 2015.
- By March 2016, DHHS created programs to deliver transitional services like CPP; and from April 2016-March 2017, sustained non-transitional program functions and incorporated CPP transitional functions into other programs, waiver services, and initiatives.
- From 2017 until the MFP program closed in 2019, DHHS worked with the Centers for Medicare & Medicaid (CMS) to allocate the remaining MFP administrative funds for NH's sustainability plan and LTSS System improvements.

# What are some things that are different?

- BEAS proposes a target population of older adults and adults with chronic health conditions eligible for the CFI Waiver Program. CFI serves adults ages 65+ and/or adults ages 18-64 with a disability.
- BEAS will also provide transitions to HCBS for targeted residents of NH's Glencliff Home. The MFP Demonstration will include a specific pilot focused on transitioning a cohort of Glencliff residents.
- Regional NF/CFI differences indicate that the MFP approach must address the unique challenges that make CFI a less viable option for residents of certain rural counties and diversities and invest in building capacity for solutions.
- DHHS Personnel, 2 FTE
- NCI-AD Consumer Experience Survey
- Conduct Studies and Analyze: Capacity, gaps, trends, inventory and implementation of capacity building initiatives can go beyond planning phase.

# New Hampshire MFP Demonstration Expansion Overview after the Planning Phase.

- BEAS, with support of this team, will create a draft MFP Operational Protocol that incorporates all required sections, including Organization and Administration, Target Population, Transition Benchmarks, Participant Recruitment and Enrollment, Targeted Outreach to Underserved Populations, Informed Consent and Guardianship, Outreach /Marketing/Education, Stakeholder Involvement, Benefits and Services, Consumer Supports, Self-Direction, Quality Measurement/ Assurance/Monitoring, Housing, Continuity of Care Post Transition, and Budget Projections.
- The Operational Protocol will address:
  - Plan for using funds to advance state rebalancing strategies
  - Strategy for identifying and enrolling participants, including partnering with and training transition coordination and housing support providers.
  - Collaboration with other providers to ensure services are delivered in a person-centered, coordinated fashion and leverage cross-agency collaboration with state and local housing agencies, community-based organizations, social service agencies, aging and disability networks, and HCBS beneficiaries.
  - Incorporate potential equity, legal and policy barriers, and mitigation strategies.



# New Hampshire MFP Consultative Group

- DPHS, Bureau of Population Health
- Division of Economic and Housing Stability
- DHHS, Medicaid Care Management
- ServiceLink
- NH Hospital Association
- Cheshire, Strafford, and Hillsborough County Government
- NH Association of Residential Care Homes
- Easter Seals NH
- Brain Injury Association

- Home Care Hospice and Palliative Care Alliance of NH
- Granite VNA
- NH Alliance for Healthy Aging
- AARP NH
- Granite State Independent Living
- Southern NH Services
- NH Health Care Association
- DHHS Leadership



# New Hampshire MFP Consultative Group

Consultative Group members will leverage resources at the state and community level, provide advice to the Project Director, offer input to assist with a decision-making process, serve as an essential link to the community, and report progress to relevant organizations.

- 1. Charter to clarify roles and responsibilities, decision –making processes, expectations for meetings, process for communication and distributing materials in advance.
- 2. While the MFP Consultative Group will provide input during the planning phase and on the proposed demonstration design, BEAS envisions this group will continue to meet for the duration of the grant period.



# Timeline\*

Objective #1: Months 1-3

**Objective #2 Months 4-16 Monthly Meetings with Consultative Group** 

9/2022

10/2022

11/2022

12/2022

1/2023

**Planning Phase Start** Date

- Fiscal and G & C Approval
- **2 FT Positions approved Procurement Requests filed**
- **Consultative Group Invite**

Consultative Group

**Kick-off** 

- Contract with UNH Finalized
- **RFP-Gaps Analysis released**
- **Consultative Group**

**Approval of UNH Contract Hire 2 FT Staff** 

### Objective #3-5: Months 6-13

- Conduct an 8-month HCBS system assessment and gap analysis.
- **Institutional Capacity Assessment.**
- Procure technical assistance experts to build NH's capacity for MFP implementation.
- Readiness and Implementation of National Core Indicator-Aging and Disability **Experience Survey (at least once between 2023-2026)**

Objective #6: Months 14-16

**Develop an Operational Protocol** 





# Questions and Discussion Thank you!