



GEORGIA DEPARTMENT
OF COMMUNITY HEALTH

Money Follows the Person (MFP) Demonstration Project



Presentation to: ADRC Healthy Communities Summit

Presented by: Pam Johnson, Project Director



Date: June 19, 2015



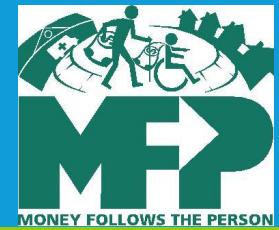
Mission

The Georgia Department of Community Health

We will provide Georgians with access to affordable, quality health care through effective planning, purchasing and oversight.

We are dedicated to A Healthy Georgia.

What is MFP?

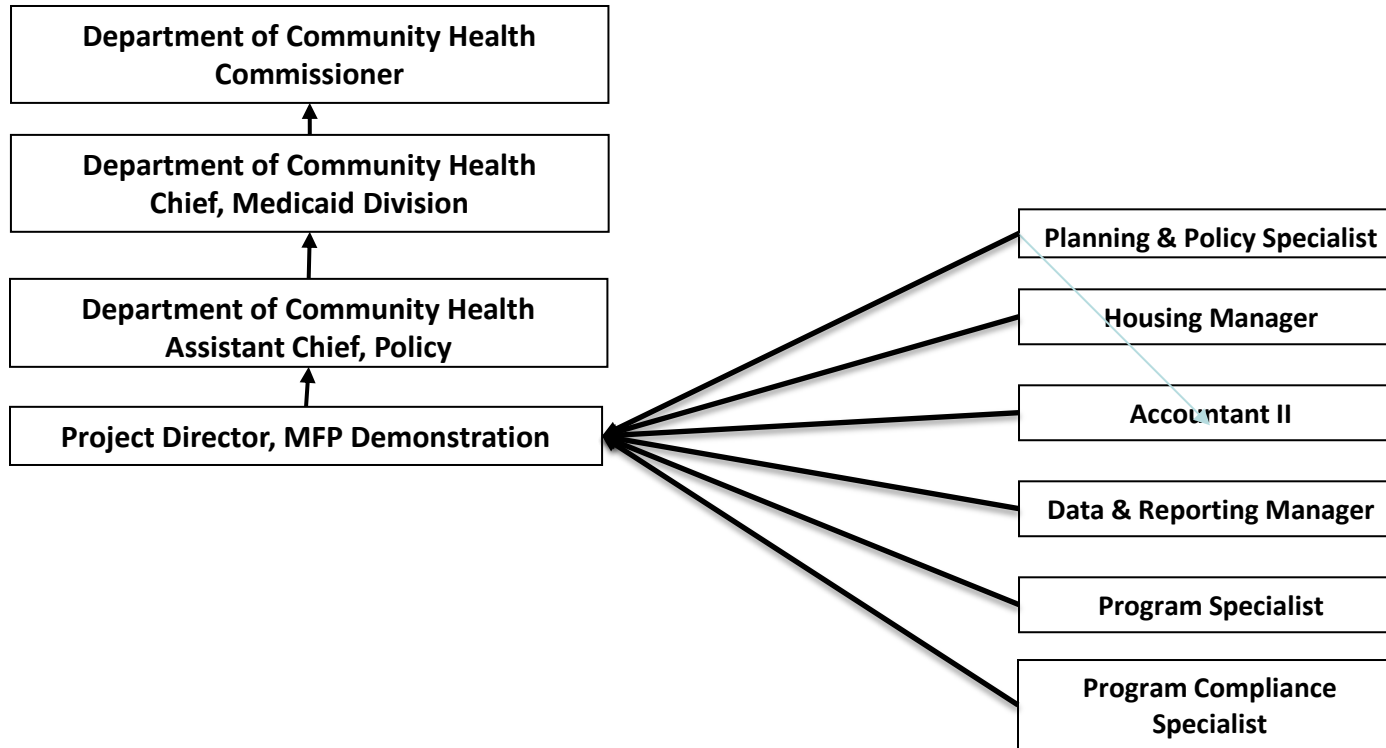


- A Rebalancing Demonstration Project funded by Centers for Medicare and Medicaid Services (CMS)
- Making Community Living a Reality for Residents in Long Term Care (LTC) Facilities
- Initiated through the 2005 Federal Deficit Reduction Act, amended through 2010 Affordable Care Act to continue through September 30, 2020

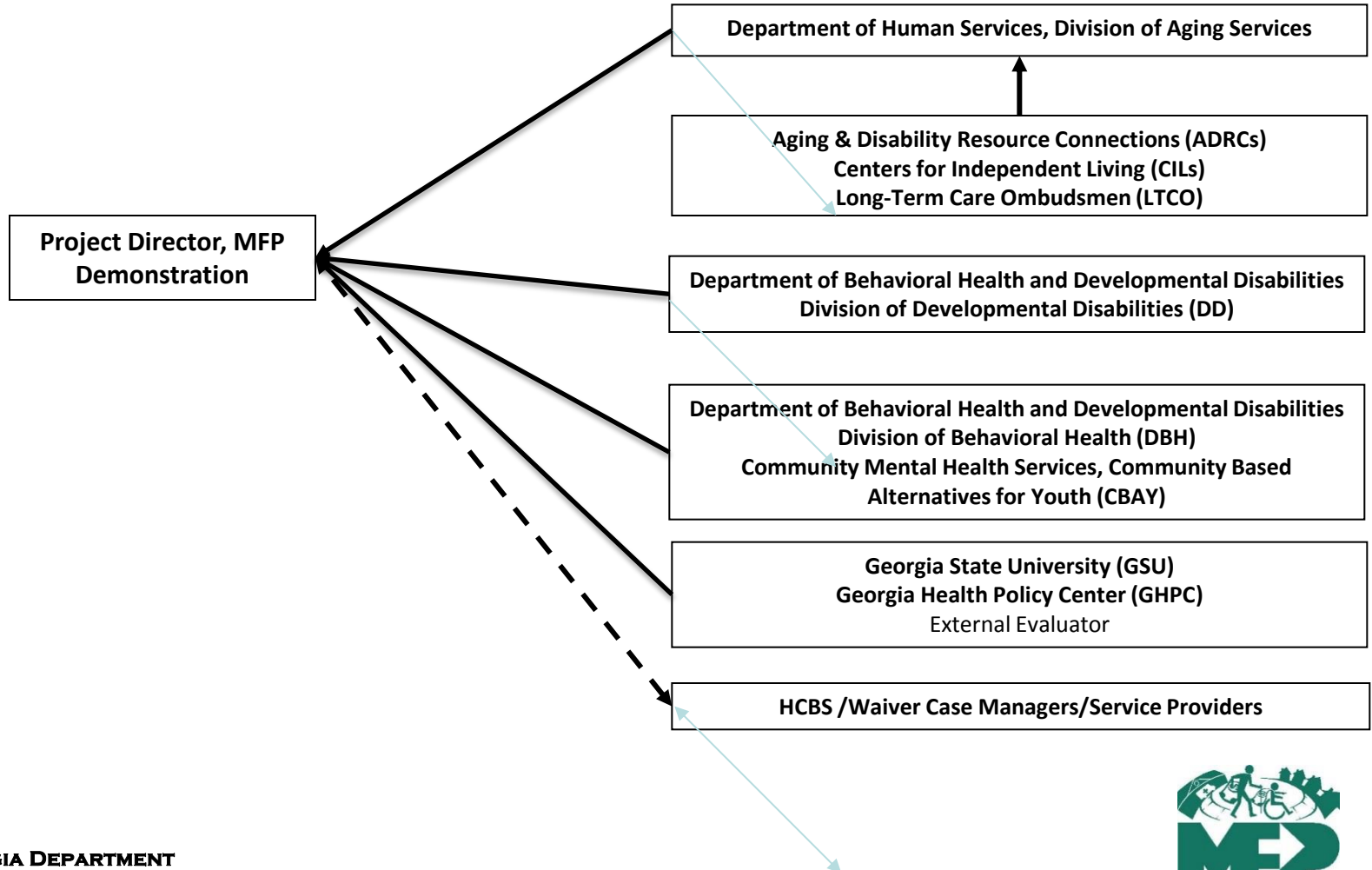
States participating in MFP: AL, AR, CA CO, CT, DE, GA, HI, IA, ID, IL, IN, KS, KY, LA, MA, MD, ME, MI, MN, MO, MS, MT, NC, ND, NE, NH, NJ, NV, NY, OH, OK, OR, PA, RI, SC, SD, TN, TX, VA, VT, WA, WI, WV and the District of Columbia



Current Medicaid/LTSS MFP Project Staff



Interagency Agreements & Contractors



Goals of MFP in Georgia



- Medicaid-eligible persons will receive increased HCBS Waiver Services in approved community settings
- Encourage self-direction of personal support services (PSS)
- Propose more flexibility in the use of Medicaid funds through Waivers and State Plan Services



MFP Target Populations Enter Waivers

- Aged (65+), Blind and Disabled participants can enter
 - Elderly and Disabled Waivers (CCSP/SOURCE)
- Adults ages of 21 - 64 with physical disabilities and/or TBI can enter the
 - Independent Care Waiver Program (ICWP)
- Adults and children with IDD can enter
 - NOW--New Options Waiver
 - COMP--Comprehensive Waiver
- Youth with Mental Illness can obtain community services through CBAY



Participant and Systems-Level Achievements



- MFP is successfully rebalancing HCBS long-term care Medicaid spending
- Developing strong agency partnerships
- Utilizing Person-Centered Planning

MFP Transitions and Expenditures YTD

Calendar Year	MFP Expenditures (excludes waiver \$)	Older Adults	Intellectual/ Development al Disabilities	Physical Disability/ TBI	Youth with Mental Illness	Totals
2008	\$ 38,035.71	2	20	1	0	23
2009	\$ 775,914.77	42	110	43	0	195
2010	\$ 1,204,830.60	63	88	94	0	245
2011	\$ 1,245,527.35	64	168	72	0	304
2012	\$ 2,095,133.75	153	126	119	0	470
2013	\$ 1,877,117.28	120	71	181	46	418
2014	\$ 2,567,527.67	89	3	150	75	317
2015YTD	\$732,358.11	14	1	37	13	65
2008 – 2015	\$10,536,445.24	547	587	697	134	2037

Notes:

1. Expenditures for CY2015 through 02/28/2015 for DAS; CY2015 through 05/31/2015 for CBay
2. Target Populations as of 05/31/2015
3. Expenditures are for OA, PD/TBI/ABI, DD and MH target populations.



LTSS Rebalancing Spending Process

Calendar Year	HCBS Expenditures with 440	Transition Expenditures (MFP)	Institutional Costs (COS 110 and 160)	Rebalancing %
Actual 2010	\$931,333,258.80	\$872,282.08	\$1,028,245,117.95	44%
Actual 2011	\$1,031,048,223.10	\$1,245,527.35	\$1,039,441,542.03	45%
Actual 2012	\$1,146,763,400.28	\$2,095,133.73	\$1,120,478,814.32	49%
Actual 2013	\$1,159,489,782.31	\$1,874,117.28	\$1,134,839,674.51	49%
Actual 2014	\$1,100,988,205	\$2,025,668.54	\$1,157,421,816.56	49%
Projected 2015	\$1,012,729,638	\$29,172,464	\$1,061,466,037	50%
Projected 2016	\$1,039,566,973	\$30,211,904	\$1,066,773,367	50%



Quality of Life Sustained by MFP



- Of the total transitioned (2032), a cumulative number of 1,609 actually completed 365 days in the community (79%)
- Higher levels of choice and control over waiver services has improved quality of life was reported by participants living in any setting outside of LTC institution.
 - Post transition participants indicated higher levels of personal “choices” in daily living activities:
 - 33% average increase in participants stating that they had a role in choosing the people paid to help them
 - Choosing when and what they eat, when they go to bed, watched television or talked on the phone
 - A year two increase was reported in the area of access to fun activities in the community and to friends and family



Developing the Framework and Planning for Sustainability in Georgia

“Hurdles discovered are similar to those in other Projects”



- Participants need assistance to create and connect to a “Circle of Support”
- Housing is a high concern due to lack of housing that is ‘affordable, accessible and integrated’
- Limited work opportunities and difficulty reconnecting to community activities due to lack of accessible transportation



Data Driven Conceptual Framework for the “Three Domains” of the Plan





Sustainability Plan (2018-2020)

- Georgia has set a goal to transition 400 persons per year
- The role of Transition Coordinator will be expanded by policies, protocols and practices that engage participants more during the year
- Georgia will provide training to Transition Coordinators including knowledge of Medicaid and Medicaid Waivers
- Case Management will be standardized across all waivers to increase quality of transitions
- Georgia will design and validate coursework for a training curriculum for Case Managers, designed to provide stable outcomes for participants
- Georgia will invest in the establishment of electronic health records which will include EHR information in the Georgia Health Information Network



Questions?



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<http://dch.georgia.gov/georgia-money-follows-person-ga-mfp>

