



**Application for Home- and Community-Based Services Waivers
for Money Follows the Person (MFP)**

Community Living Waiver

MassHealth use only

Date application received:

____/____/____

MFP WAIVER INFORMATION • 1-855-499-5109 (TTY: 800-596-1746) • MFPINFO@UMASSMED.EDU

The Money Follows the Person Community Living (MFP-CL) Waiver is available through MassHealth for people who have been living in a nursing home or hospital for **at least 90 consecutive days**. The MFP-CL Waiver serves MassHealth members who do not need 24-hour services and support. The MFP-CL Waiver does **not** include residential support services. Participants will reside and receive waiver services in their own home or apartment or in the home of someone else.

Applicant name

Date of birth

Gender M F

Social security number

MassHealth ID number

Telephone number

Facility name

Date of admission

Facility address

Should we contact someone else about your application? Yes No

Contact name

Contact telephone number

Relationship

Contact address

You may choose an authorized representative to help you with some or all of the responsibilities of applying for, or getting, health benefits. You can do this by filling out a MassHealth Authorized Representative Designation Form (ARD). To request an ARD form, call MFP Waiver Information at 1-855-499-5109 (TTY: 1-800-596-1746 for people who are deaf, hard of hearing, or speech disabled).

The MFP-CL Waiver serves MassHealth members who have been living in a nursing home or hospital for at least 90 consecutive days.

By signing this application, I am stating that

- » I expect to be in the nursing home or hospital for 90 consecutive days or longer; and
- » I have a disability, or I am aged 65 or older.

Signature of Applicant or Authorized Representative

Date

Send your completed application to:

UMass MFP Waiver Unit
333 South Street
Shrewsbury, MA 01545

Staff at the MFP Waiver Unit will contact you when they have received your application to begin the application process.