

Community First MassHealth Initiatives and Programs

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Community First

- The Community First policy is the Patrick Administration's commitment to:
 - Advancing long term care options so that elders and people with disabilities have choices and can return to or remain at home and in their communities for as long as possible
 - Building on and expanding EOHHS and MassHealth home and community based services and choices
 - Working in concert with federal strategies and opportunities to rebalance the long term services and supports system

MassHealth Community First Options

- State Plan Community Long Term Services and Supports (LTSS)
- Managed Care options with LTSS
 - One Care
 - SCO and PACE
- Home and Community Based Services Waivers
- Money Follows the Person Demonstration
- Balancing Incentive Program

Focus today is on HCBS Waivers and the MFP Demonstration

HCBS Waivers

A 1915(c) waiver allows the State to waive certain requirements that otherwise apply to the Medicaid program. This gives States the flexibility to define:

- The target group of Medicaid beneficiaries to be served
- The maximum number of participants who may be served
- The services available to the target group; waiver services are always in addition to what is already available through the Medicaid State Plan.

Common Requirements of all HCBS Waivers

- Participants must be at a facility level of care (LOC); the specific LOC varies by waiver
- Participants must have an ongoing need for waiver services and receive waiver services at least once a month
- Participants must be able to be safely served in the community with available waiver and state plan services
- MassHealth is responsible for administration of all HCBS waivers, with one of the sister EOHHS agencies having day-to-day responsibility for oversight and operations

Waiver Services

- The services included in various waivers may differ and are designed to meet the particular needs of the population served in that waiver
- Waiver services complement the services available through the Medicaid state plan
- The waiver participant works with a case manager to develop his/her Individual Service Plan through a person-centered process
- Waiver services are ongoing – a participant can remain enrolled in the waiver as long as they remain both clinically and financially eligible for the waiver

Waiver Financial Eligibility

- HCBS Waiver participants must be eligible for MassHealth Standard, using the special financial eligibility rules for waiver participants.
- Financial eligibility rules for MassHealth adult waivers:
 - income \leq 300% SSI Federal Benefit Rate (currently = \$2,163 a month)
 - assets \leq \$2,000
- NOTE: If there is a spouse, the spouse's income and assets are not counted.

1915(c) Waivers

Massachusetts currently operates 10 Home and Community Based Services or 1915(c) Waivers, including:

- Frail Elder waiver
- DDS Intensive Supports waiver
- DDS Community Living waiver
- DDS Adult Supports waiver
- Autism Spectrum Disorder Waiver (for children through age 8)
- Traumatic Brain Injury waiver
- Acquired Brain Injury – Residential Habilitation waiver
- Acquired Brain Injury – Non-residential waiver
- Money Follows the Person – Residential Supports waiver
- Money Follows the Person– Community Living waiver

Money Follows the Person (MFP)

- Money Follows the Person Demonstration – CMS grant awarded in 2011
- MFP Demonstration goals:
 - To transition members from facility-based care to receiving LTSS in the community, and
 - To “rebalance” the Massachusetts service system – effectively moving Medicaid funding from facilities to home and community based settings
- 749 MFP Participants have transitioned to the community through June 2014

MFP in Massachusetts – Overview



MFP Transition Services & Supports



MFP Qualified Facilities

- Nursing Facilities
- Rehab & Chronic Hospitals
 - ICF-ID
- DPH Hospitals
 - Psychiatric Hospitals*

*with some exceptions



Qualified Residences

- Individual's/ Family's Home
- Individual's Leased Apartment
- Community Residential Setting (Max 4 Individuals)

MFP Demonstration Participants may access services in the community through the following:

- HCBS Waivers
 - MFP
 - ABI
 - Frail Elder
 - DDS; or
- One Care/SCO/PACE; or
- MassHealth State Plan services

MFP – other key features

The MFP Demonstration

- Targets wide population of adults, including mentally ill, elders, physically disabled, or intellectually disabled
- Requires that participants receive case management and have a 24 hour backup plan
- Allows MassHealth to address/focus on Housing needs
 - Supports provision of assistance to individuals to find and secure housing
 - Promotes interagency cooperation in development of new housing resources and/or identification of subsidized housing options
 - Can support transition with goods and services, first month's rent, etc.
- Provides enhanced FFP for specific services; received for 365 days post discharge for each member transitioned to community
- Requires cross agency effort – key EOHHS agencies as well as Department of Housing and Community Development
- Includes broad stakeholder involvement

Implementation Approach

- Contracted with 33 Transition Entities (ILCs and ASAPs) to:
 - conduct outreach to nursing homes and long-stay hospitals;
 - Identify potential MFP enrollees, support members to transition;
 - coordinate MFP demonstration services;
 - arrange housing search assistance, support housing application completion;
 - organize/purchase transitional assistance services
- Utilize Home and Community Based Services (HCBS) Waivers to serve most individuals who transition
- Utilize state plan LTSS and Demonstration Case Management for members who do not want/need waiver
- Provide Demonstration Services, including transitional assistance services, case management, orientation and mobility, and assistive technology

Community Programs Serving MFP Demonstration Participants

