

CT Money Follows the Person Report

February 2020

UConn Health, Center on Aging

Operating Agency: CT Department of Social Services Funder: Centers for Medicare and Medicaid Services

MFP Benchmarks

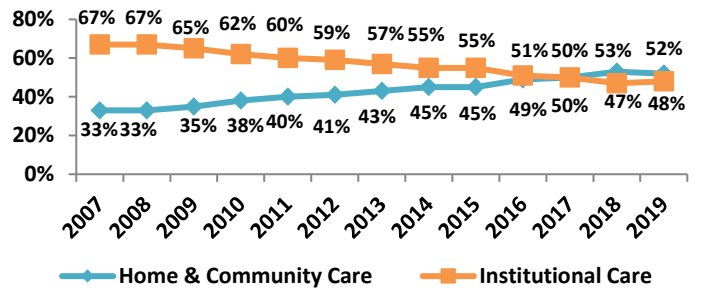
- 1) Transition 5200 people from qualified institutions to the community
- 2) Increase dollars to home and community based services
- 3) Increase hospital discharges to the community rather than to institutions
- 4) Increase probability of returning to the community during the six months following nursing home admission
- 5) Increase the percentage of long term care participants living in the community compared to an institution

Benchmark 1: Total Transitions = 5,964

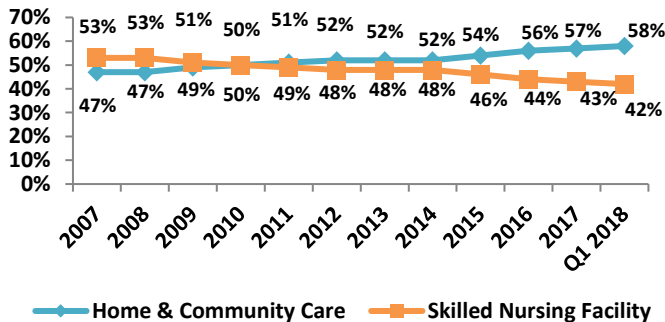
Demonstration = 5,576 (94%)

Non-demonstration = 388 (6%)

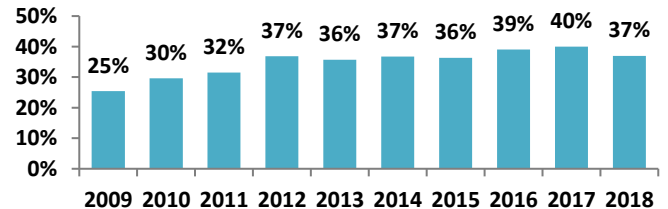
Benchmark 2 CT Medicaid Long-Term Care Expenditures



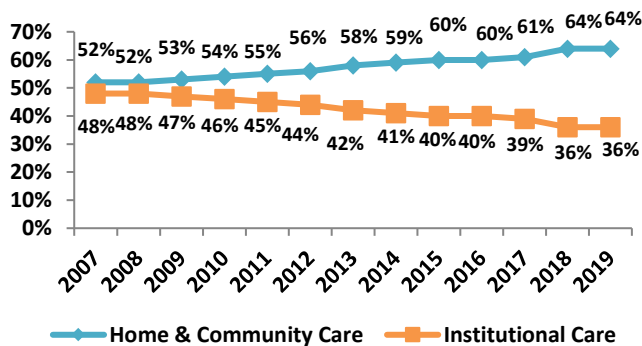
Benchmark 3 Percentage of Hospital Discharges to Home and Community Care vs. Skilled Nursing Facility



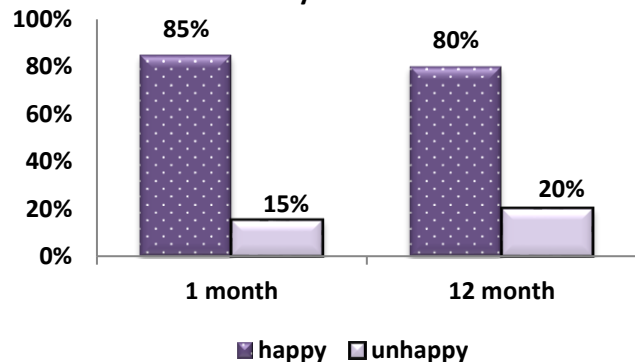
Benchmark 4 Percent of SNF admissions returning to the community within 6 months



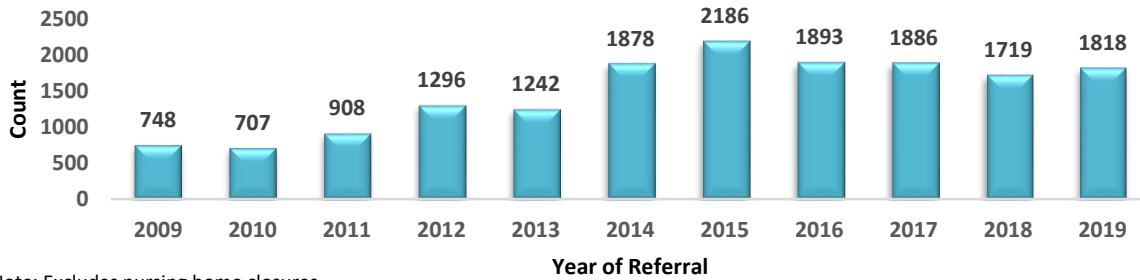
Benchmark 5: Percent Receiving LTSS in the Community vs. Institutions



Happy or unhappy with the way you live your life

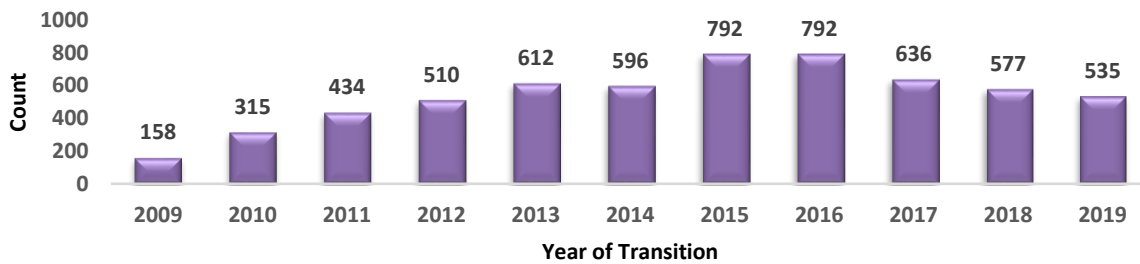


Total Number of Referrals Assigned to the Field by Year

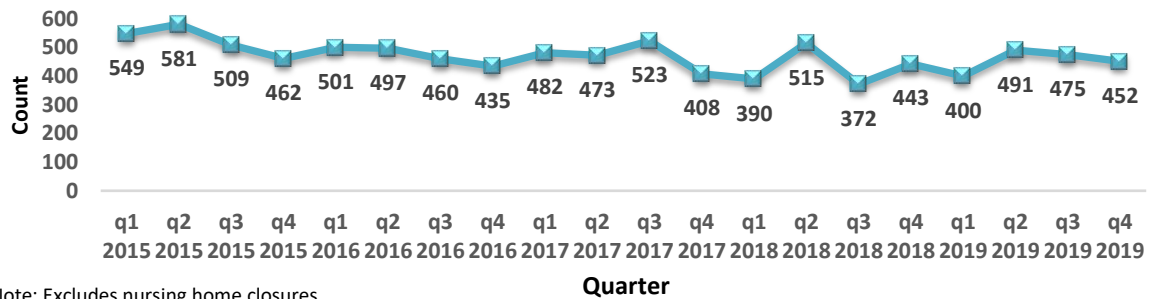


Note: Excludes nursing home closures

Total Number of Transitions by Year

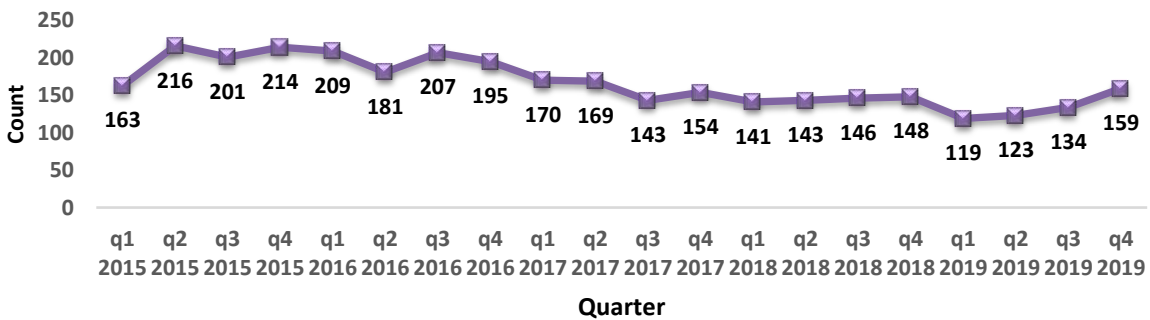


Referrals Assigned to the Field by Quarter

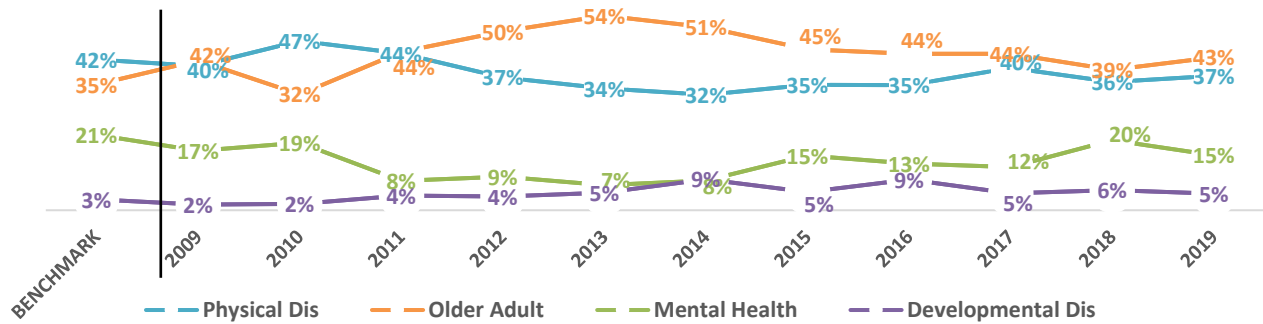


Note: Excludes nursing home closures

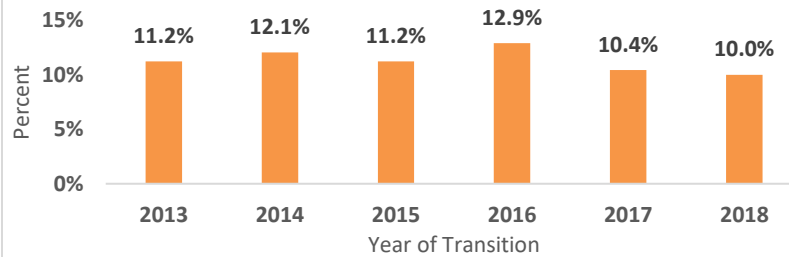
Number of Transitions by Quarter



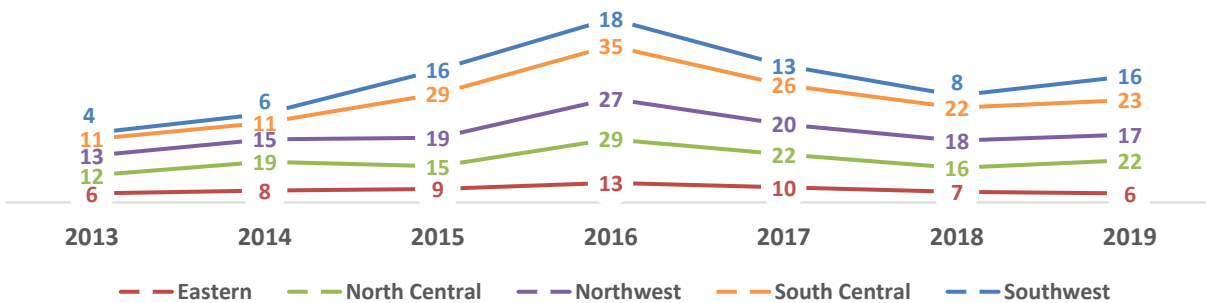
Target Population for Transitions by Year of Transition (Demonstration Only)



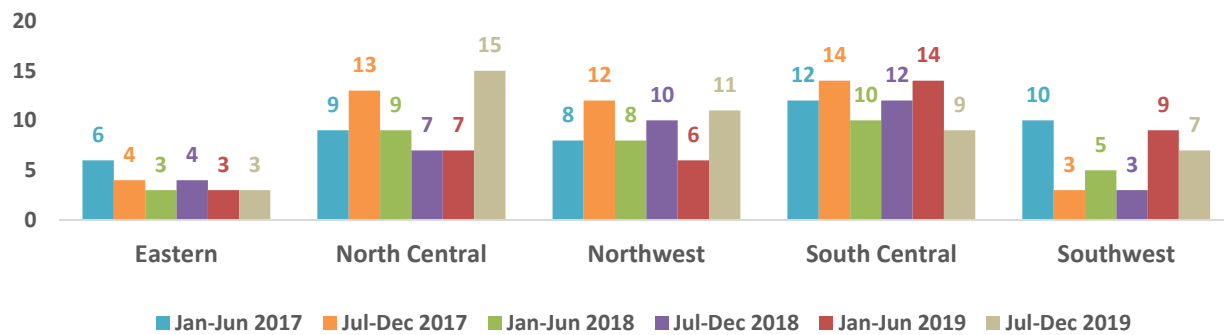
Participants Who Were in an Institution 12 Months after Transition Regardless of Length of Stay



Number of Participants with Home Modifications by Year Approved and Region

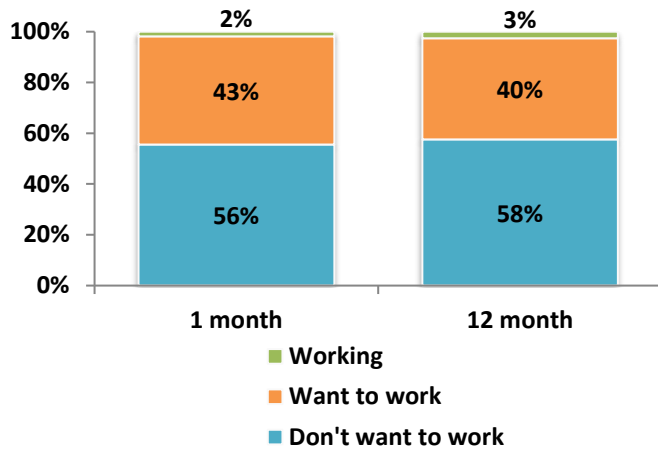


Number of Participants with Home Modifications per 6 Months

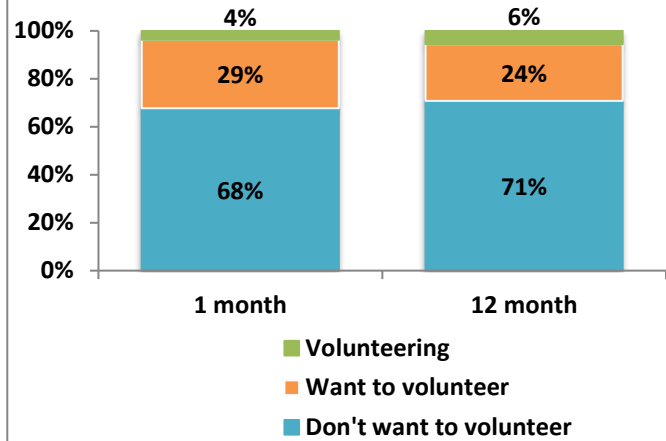


Participants who are Working and/or Volunteering (data 1/1/19-12/31/19)

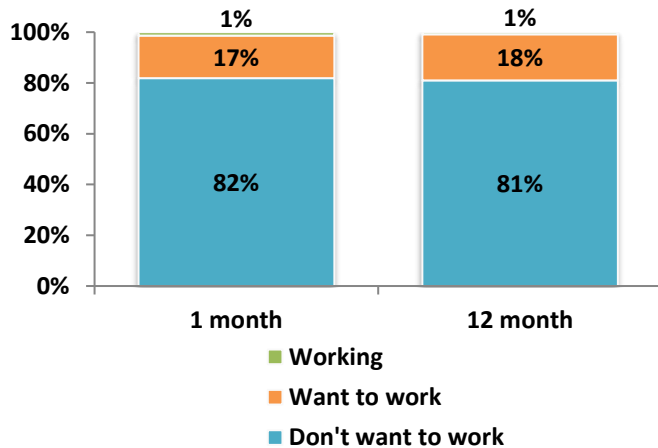
Participants under age 65 who are working and those who would like to work



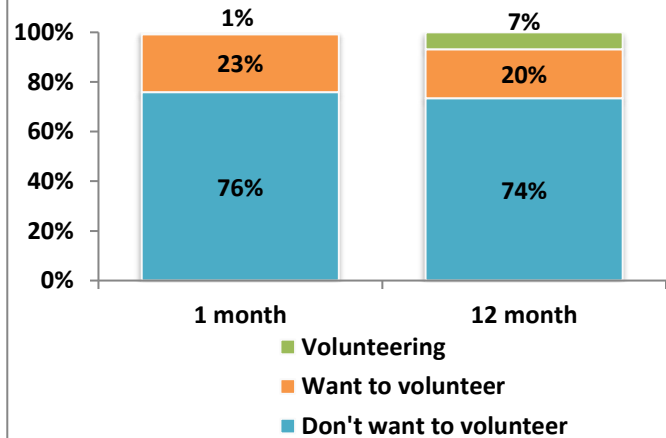
Participants under age 65 who are volunteering and those who would like to volunteer



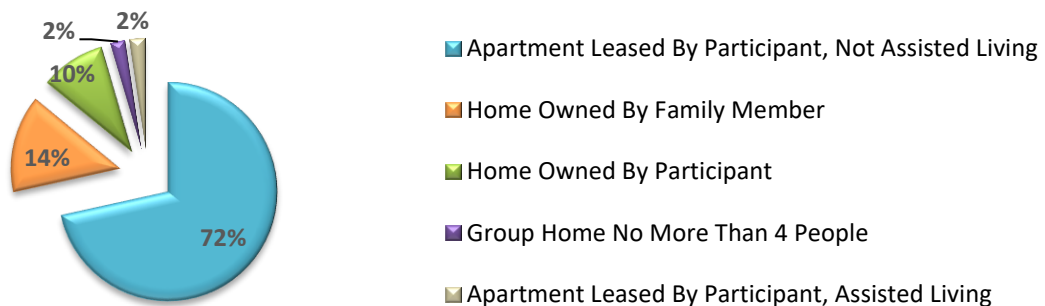
Participants 65 years and older who are working and those who would like to work



Participants 65 years and older who are volunteering and those who would like to volunteer



Qualified Residence Type for Transitioned Referrals: 12/4/08 to 12/31/19



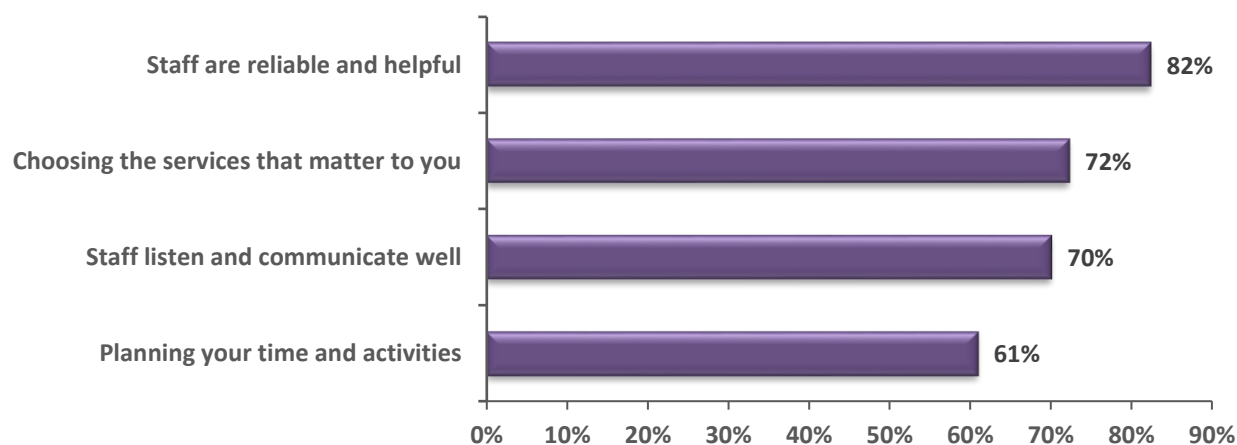
MFP Quality of Life Dashboard

Number of Quality of Life Interviews Completed from 1/1/19 - 12/31/19:

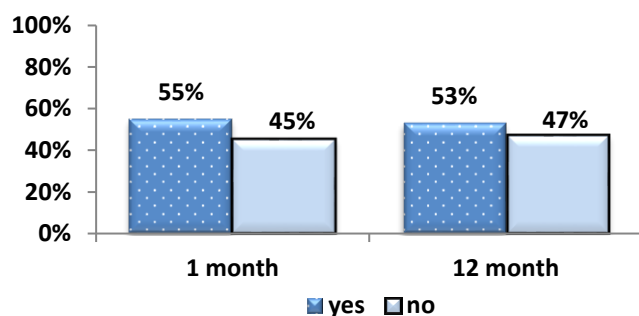
1 month interviews done 1 month after transition, **n=347**

12 month interviews done 12 months after transition, **n=377**

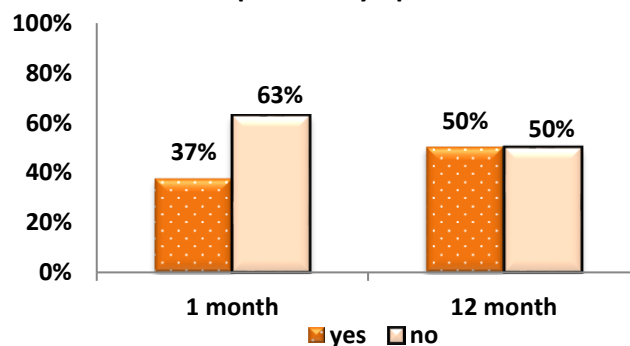
HCBS CAHPS Composite Measures: Percent with Highest Score (e.g. always, yes)



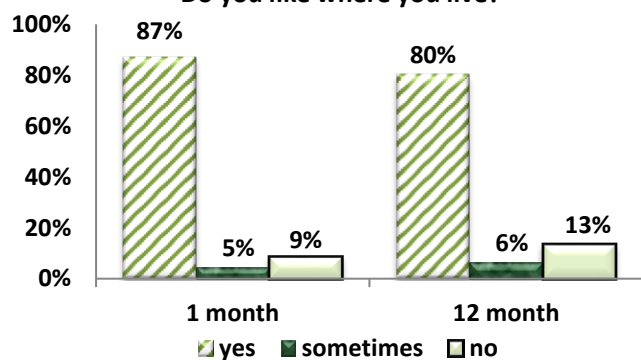
Did any unpaid family members or friends help you with things around the house?



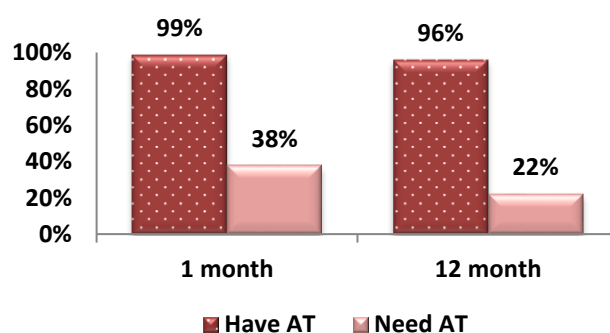
Depressive Symptoms*



Do you like where you live?

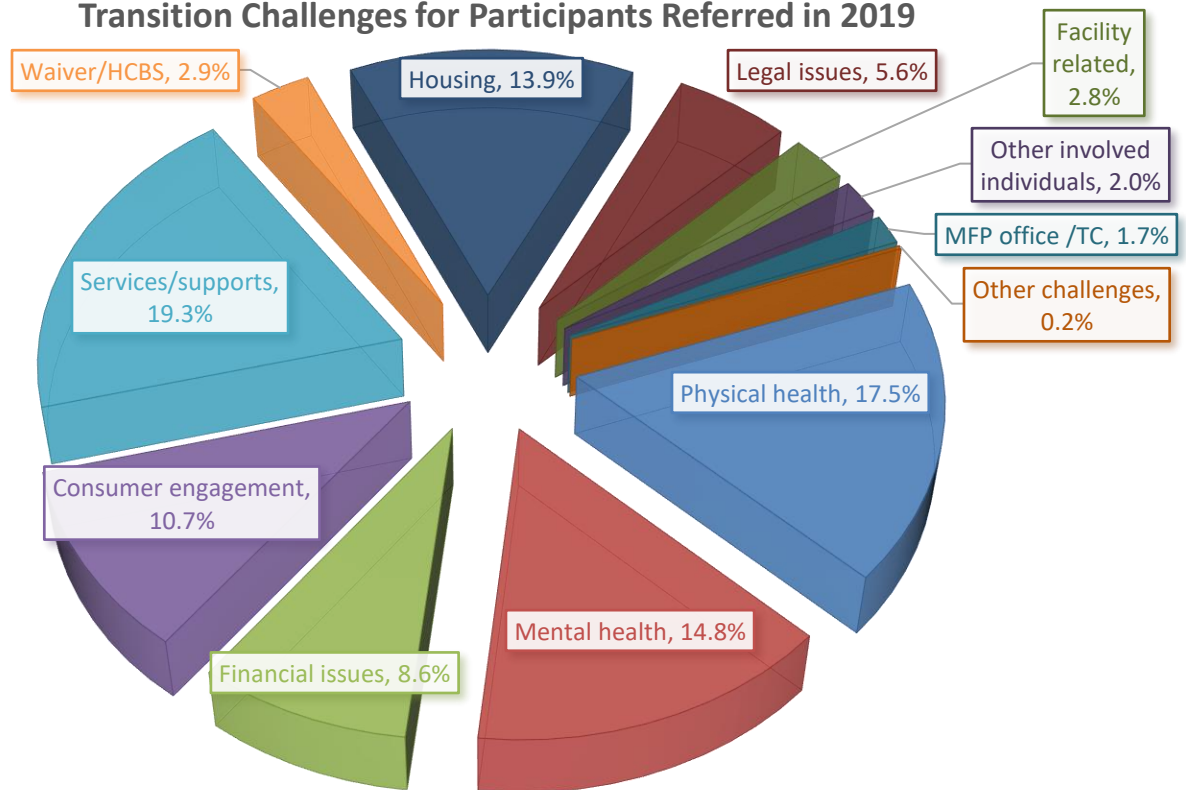


Have or Need Assistive Technology (AT)?

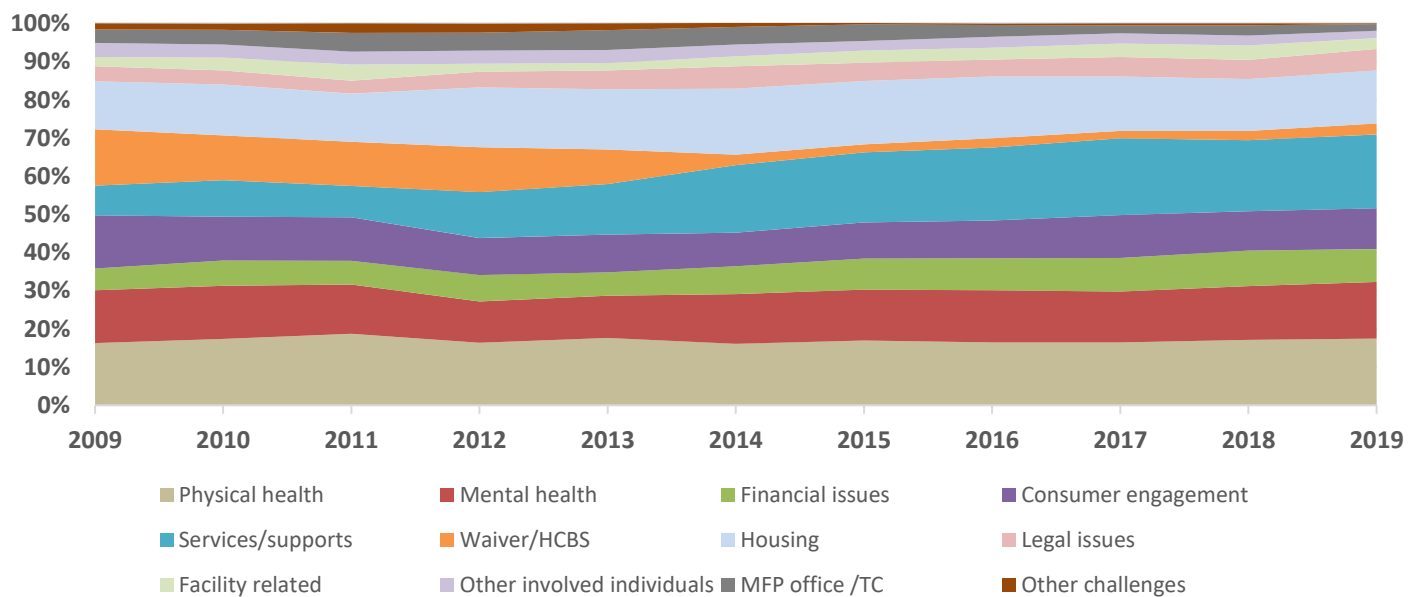


Challenges to Transition as Recorded by TCs and SCMs

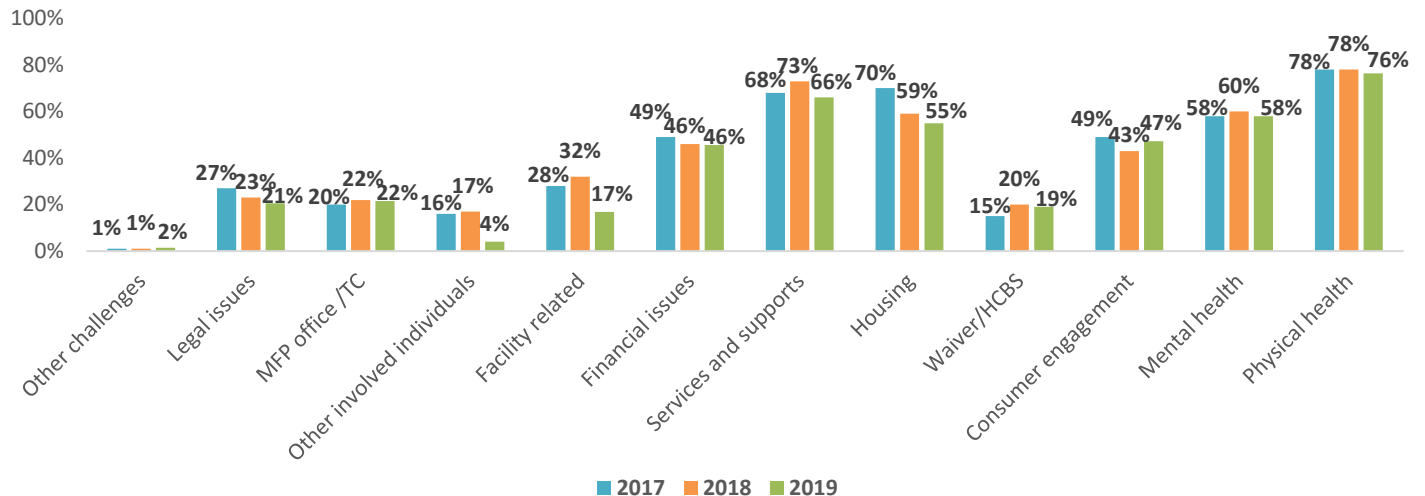
Transition Challenges for Participants Referred in 2019



Frequency of Transition Challenges by Year of Referral



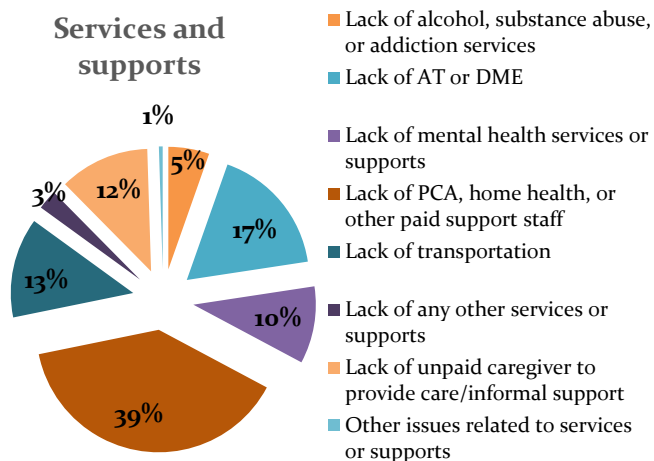
Participants with Each Challenge who Transitioned by Referral Year



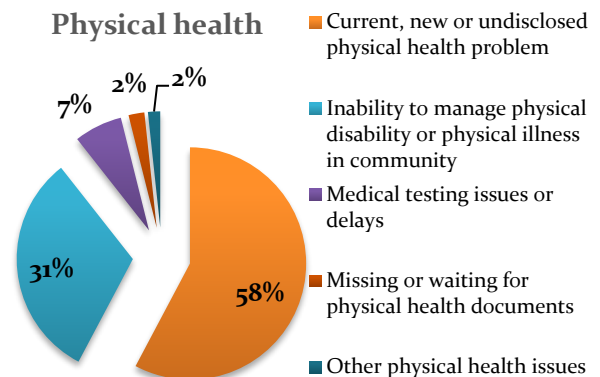
Types of Challenges for Referrals: 1/1/2019 - 12/31/2019

Below are the four most common challenge types for 2019

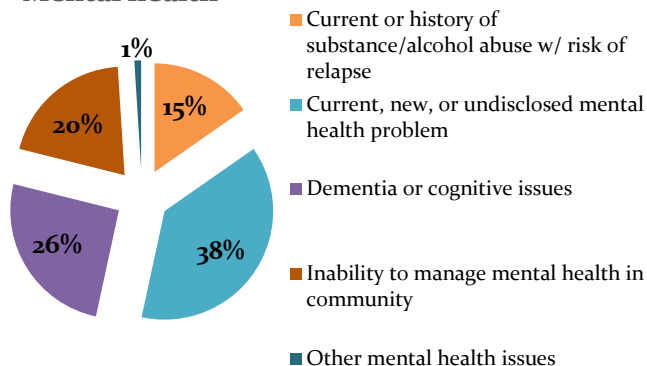
Services and supports



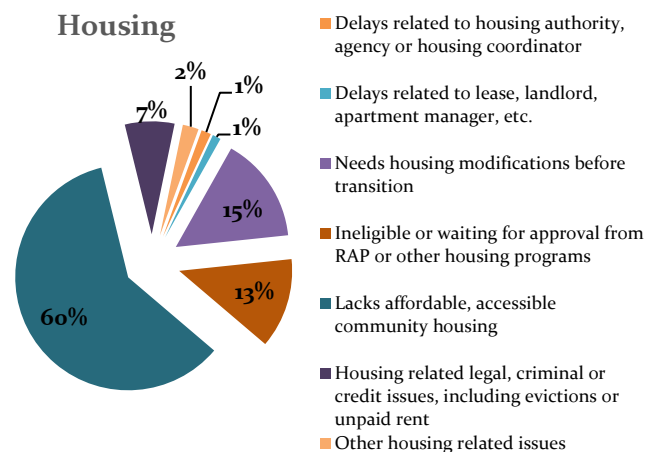
Physical health



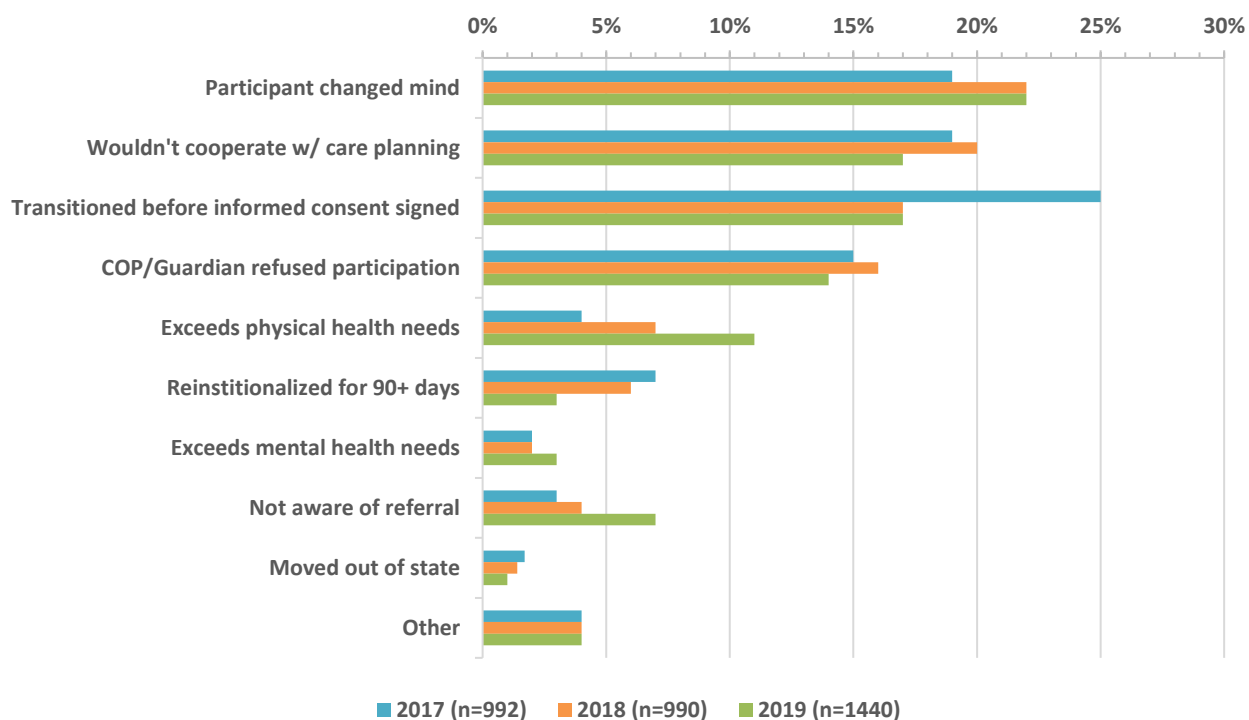
Mental health



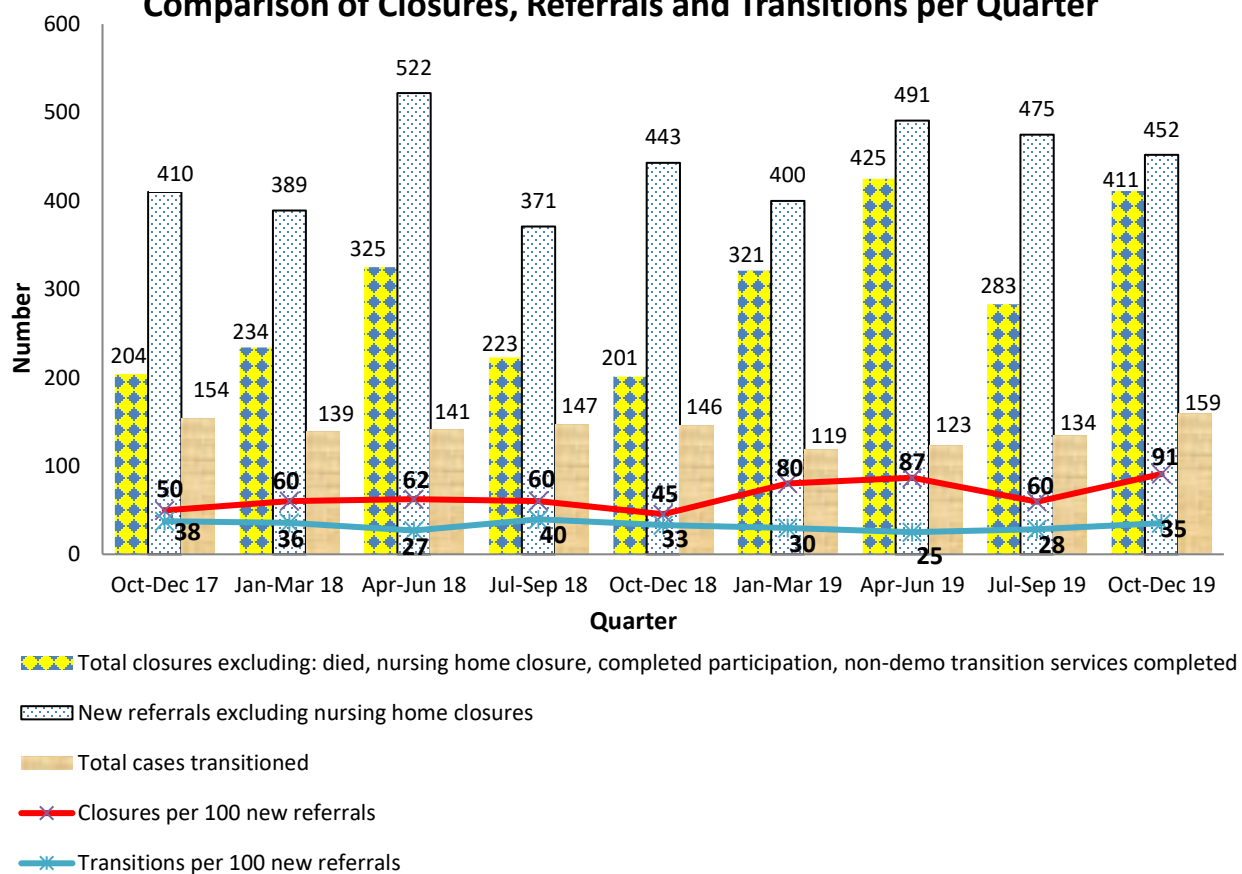
Housing



Frequency of Closure Reason by Year of Closure



Comparison of Closures, Referrals and Transitions per Quarter



Betty Lichtenstein's Story

Betty describes herself as an active, "never been a sitting around" type of person. After graduating from Western Connecticut State University, having a career in human resources, creating a home for her family and enjoying her hobbies, life took a downward turn. Complications from diabetes led to a stroke and a single leg amputation 8 years ago followed by two years living in a skilled nursing facility. While in the nursing facility, Betty experienced more than physical losses. Her mother and brother died and she could not attend the funerals due to lack of suitable transportation.

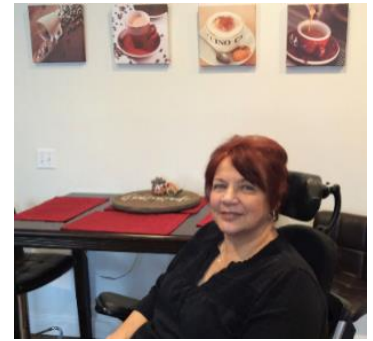


Photo credit: Christine Bailey

The rehabilitation department at the nursing facility suggested Money Follows the Person (MFP) to assist her in transitioning back into the community. Although excited, Betty was fearful and anxious, having to begin again. Betty just wanted a place that felt like home and had two requests when it came to finding housing: a place where she could garden and a place where her grandsons, "the light of her life," could visit freely.

Since 2014, Betty's MFP transition team (the housing coordinator, the transition coordinator and care manager) continues to work with her. The MFP housing coordinator was able to find Betty an end unit,



Photo credit: Betty Lichtenstein



Photo credit: Betty Lichtenstein which provided her with a bigger yard. Now, she looks out her bedroom window to a lovely bird feeder and raised garden beds, where she grows carrots and tomatoes. She enlists her grandsons to help and now they can visit her in an environment where they can play outside. The apartment is not only wheelchair accessible with wider doorways, and a roll-in shower, but the MFP team were instrumental in finding special medical equipment, like a Rifton transfer lift, assistive technology for her vision loss and environmental controls for greater independence to control the lights and fan.

Betty has adjusted well to "the new normal." She continues to stay active and involved in her community. Utilizing transportation provided by Ability Beyond, she is able to attend her grandsons' basketball and football games, concerts in town, and nearby shopping centers. Due to her central location and level of independence, she is also able to take herself downtown and to her alma mater, WCSU's campus to get some fresh air. Betty enjoys giving back to her community, crocheting for charities. Every year she donates 25-30 hats to homeless shelters and 10-20 infant hat and blanket sets to Birthright, an organization that helps single mothers. Betty continues on a path of self-improvement and staying positive in her life. She enjoys attending a free all-day retreat at a Buddhist Monastery in New York, which brings her comfort and strength. She also visited the family plots at the cemetery to find closure with her losses.



Photo credit: Betty Lichtenstein

Both Betty and the MFP team admit to having a rocky start, with lots of staff turnover. Betty's advice to others who have to hire their own Personal Care Assistants (PCAs) is to go by word of mouth and know someone who has worked with an aide and trusts them. Betty self manages PCAs for over 80 hours a week and has learned to juggle PCA and Independent Living Skills Training (ILST) worker hours within her budget. Over the past four months, Betty has undergone 4 surgeries, including a second leg amputation. "MFP has changed my life!" Having the aides in place after her surgeries allowed her to go back home where she received in-home and then outpatient services. "I don't see any reason I should ever have to go to a nursing home again."

MFP Demonstration Background

The Money Follows the Person Rebalancing Demonstration, created by Section 6071 of the Deficit Reduction Act (DRA) of 2005 (P.L. 109-171), supports States' efforts to "rebalance" their long-term support systems. The DRA reflects a growing consensus that long-term supports must be transformed from being institutionally-based and provider-driven to person-centered and consumer-controlled. The MFP Rebalancing Demonstration is a part of a comprehensive coordinated strategy to assist States, in collaboration with stakeholders, to make widespread changes to their long-term care support systems.

One of the major objectives of the Money Follows the Person Rebalancing Demonstration is "to increase the use of home and community based, rather than institutional, long-term care services." MFP supports grantee States to do this by offering an enhanced Federal Medical Assistance Percentage (FMAP) on demonstration services for individuals who have transitioned from qualified institutions to qualified residences. In addition to this enhanced match, MFP also offers states the flexibility to provide Supplemental Services that would not ordinarily be covered by the Medicaid program (e.g. home computers, cooking lessons, peer-to-peer mentoring, transportation, additional transition services, etc.) that will assist in successful transitions. States are then expected to reinvest the savings over the cost of institutional services to rebalance their long-term care services for older adults and people with disabilities to a community-based orientation.