CT Money Follows the Person Report

May 2020

UConn Health, Center on Aging

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

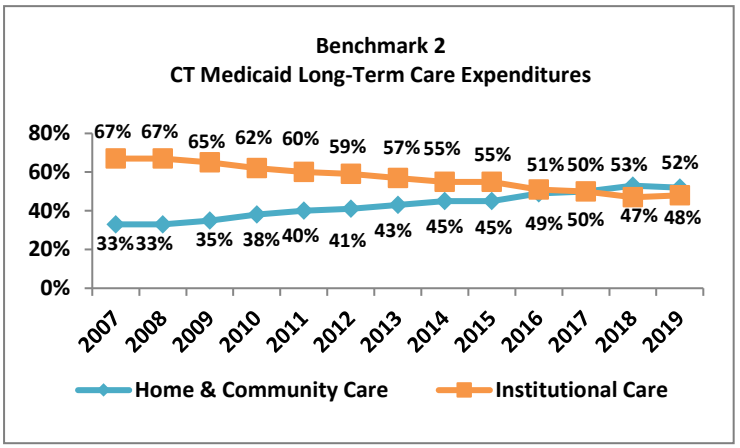
MFP Benchmarks

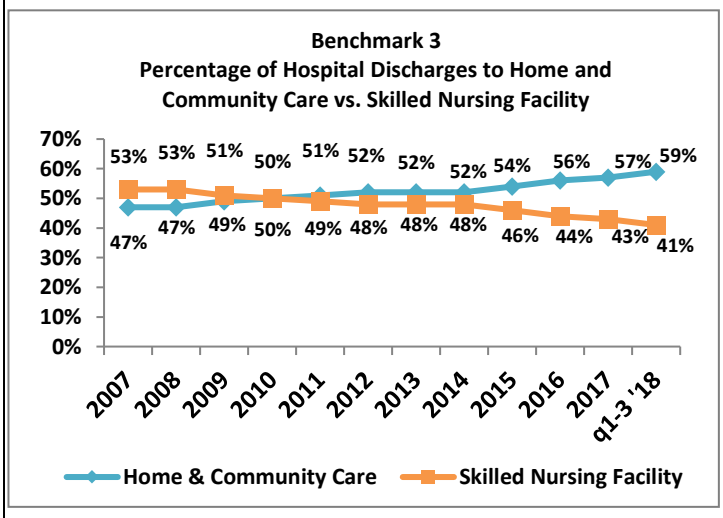
1) Transition 5200 people from qualified institutions to the community
2) Increase dollars to home and community based services
3) Increase hospital discharges to the community rather than to institutions
4) Increase probability of returning to the community during the six months following nursing home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

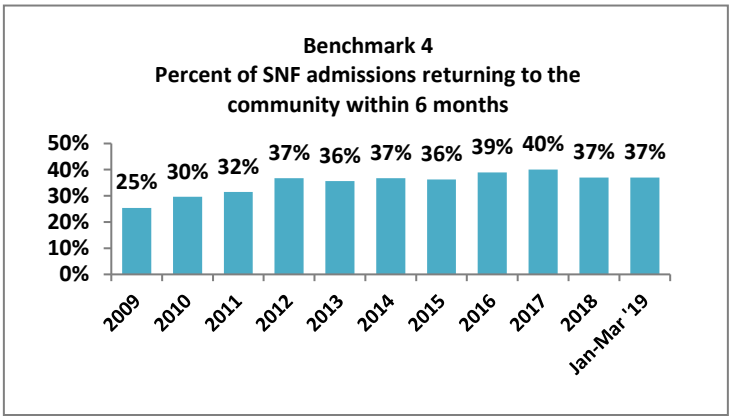
Benchmark 1: Total Transitions = 6,118

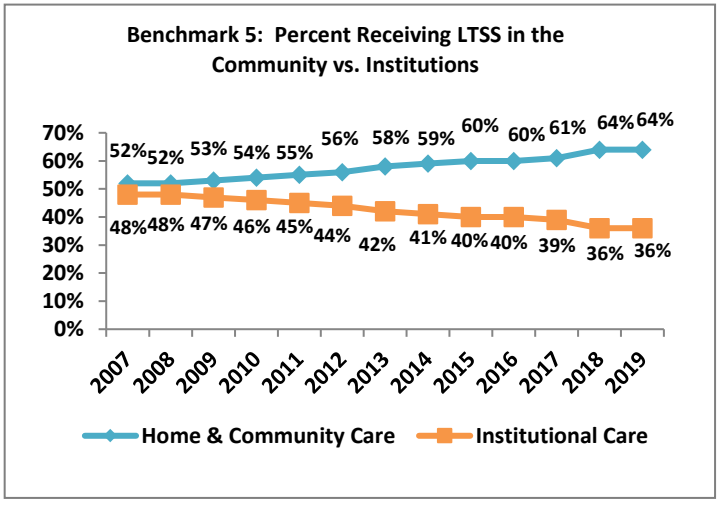
Demonstration = 5,721 (94%)

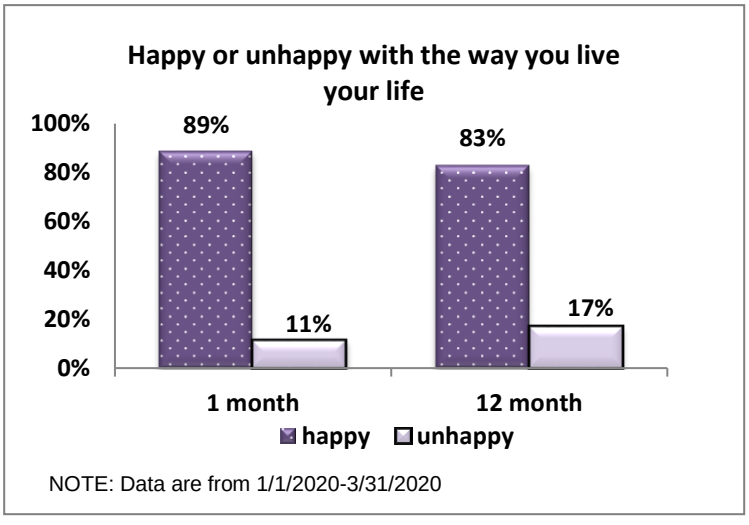
Non-demonstration = 397 (6%)



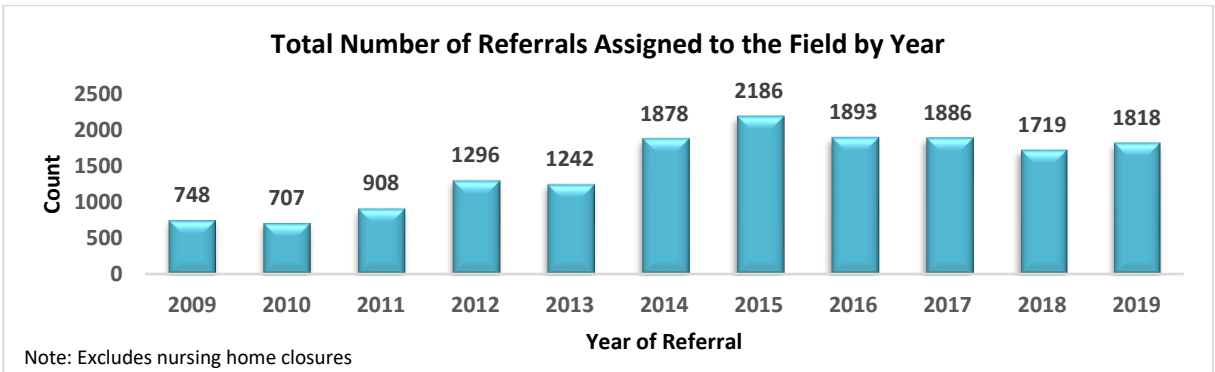




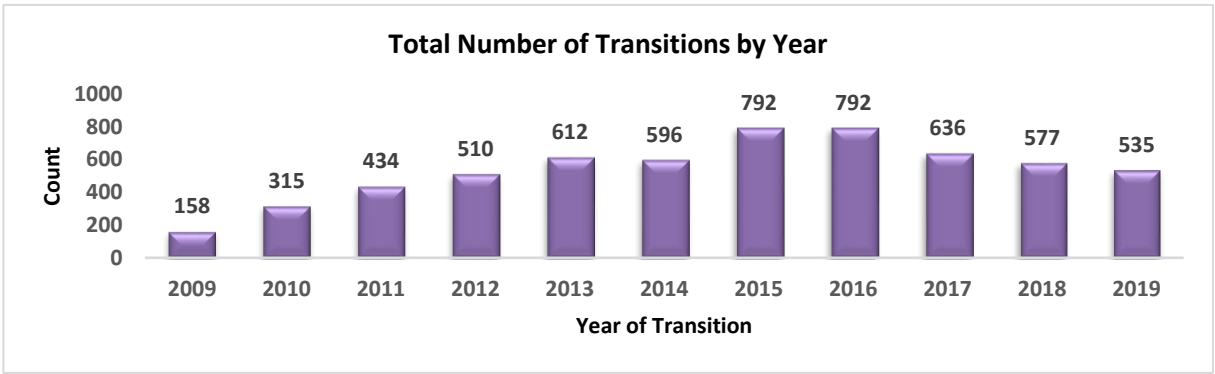


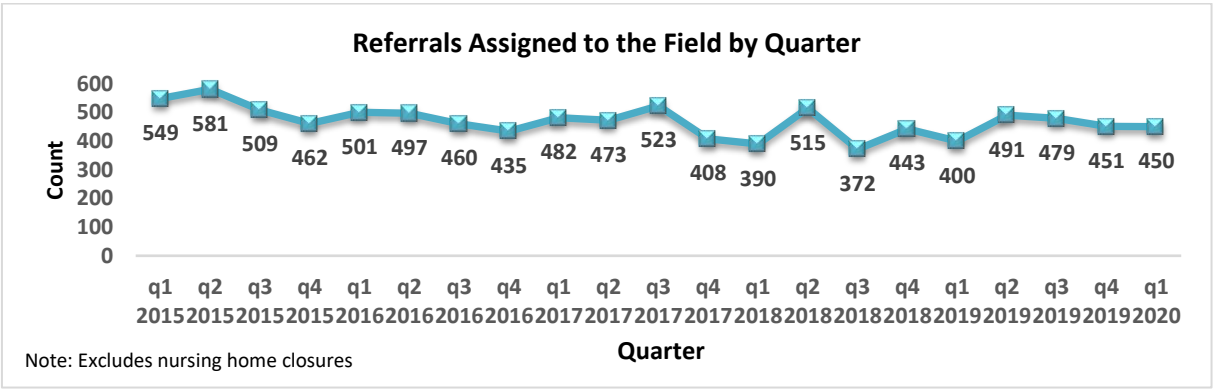


NOTE: Data are from 1/1/2020-3/31/2020



Note: Excludes nursing home closures





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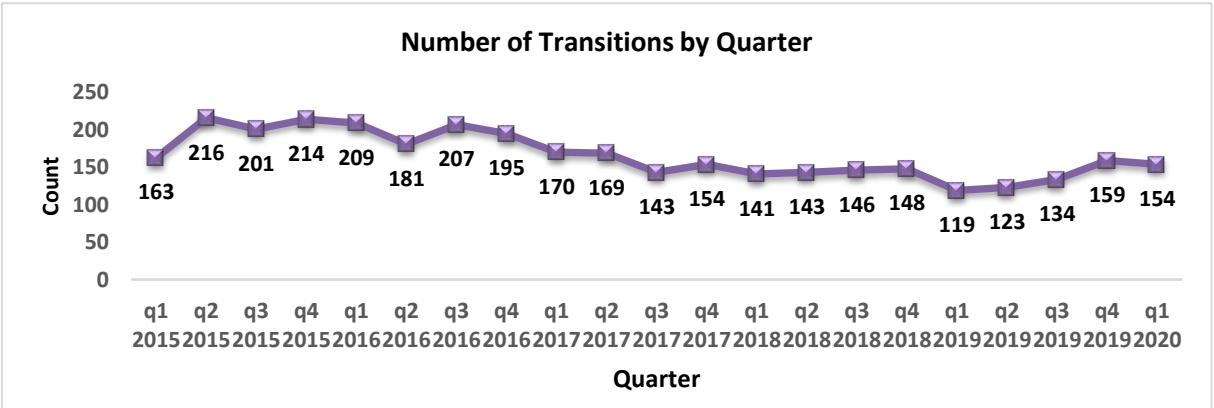
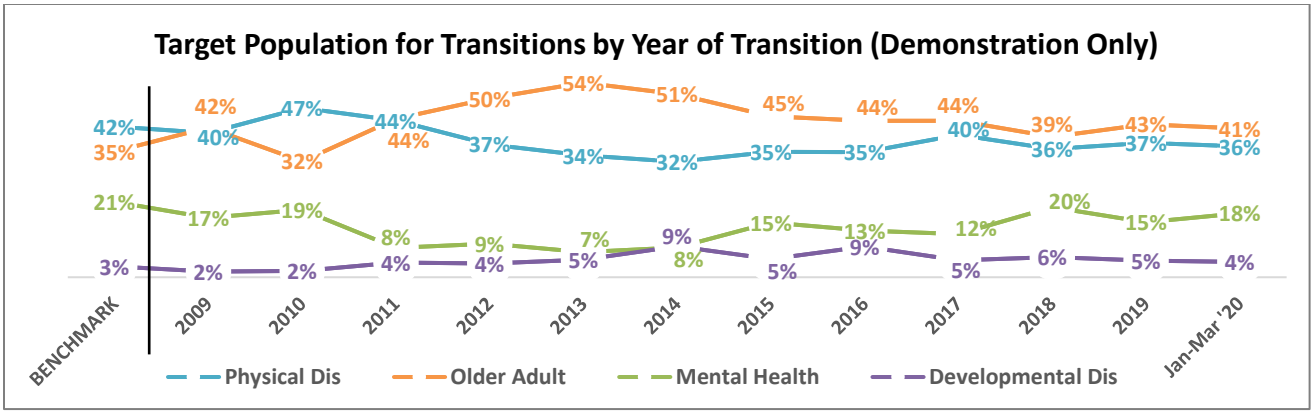
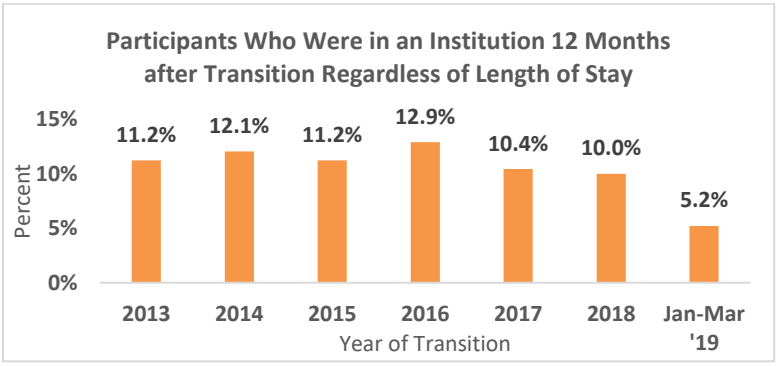
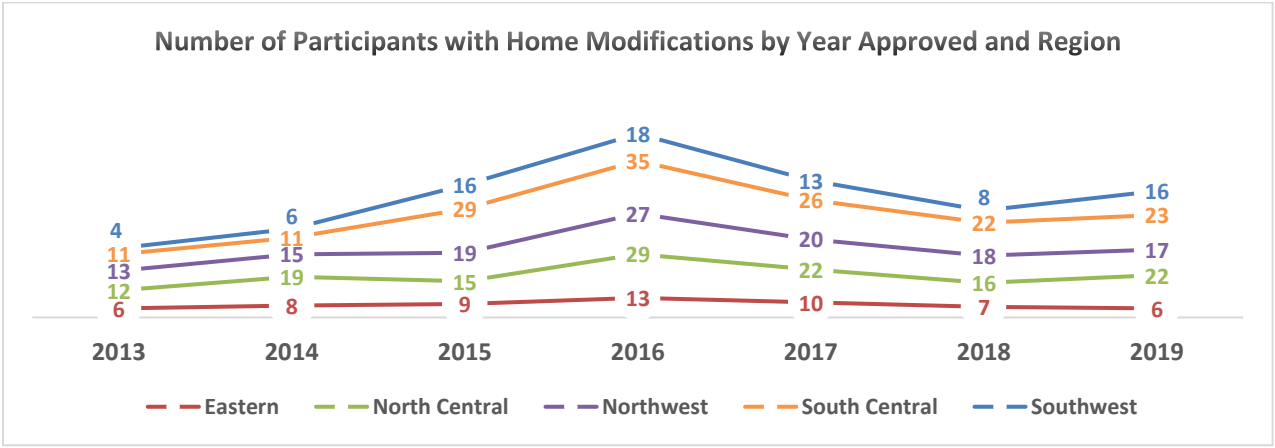
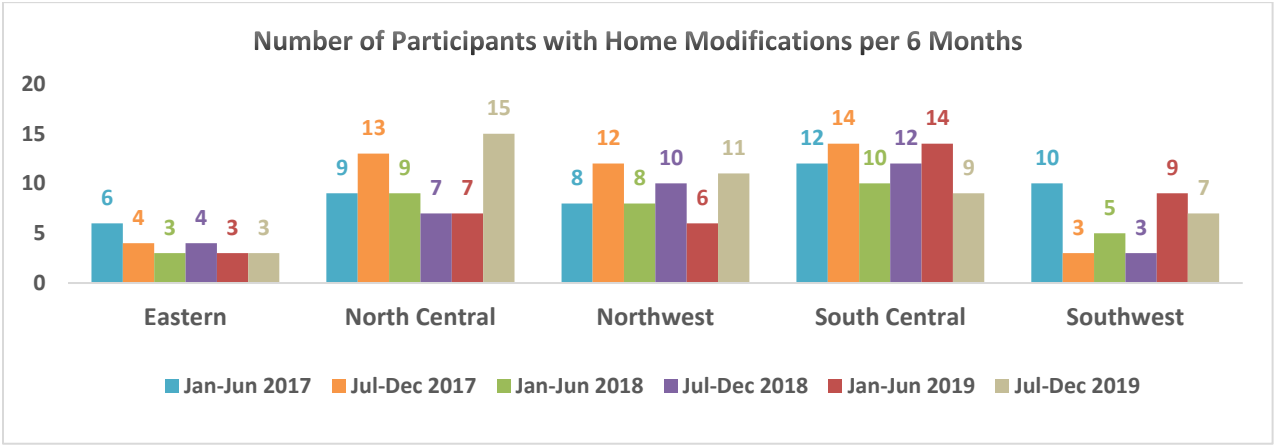


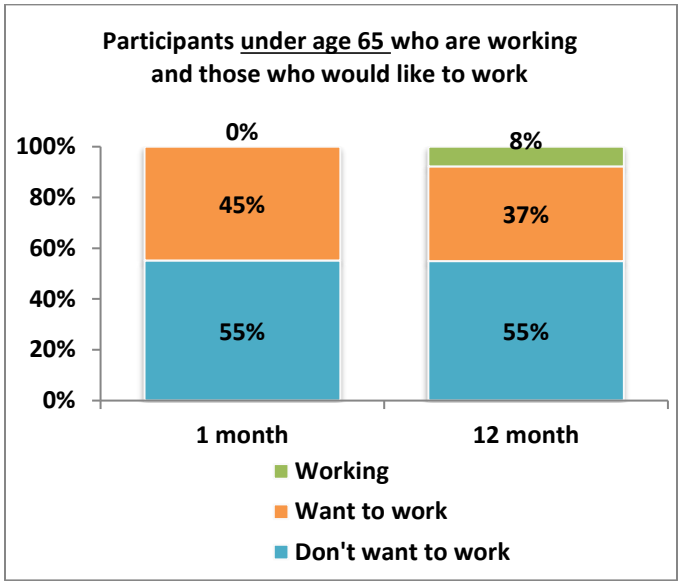

Target Population for Transitions by Year of Transition (Demonstration Only)
BENCHMARK
2009
2010
2011
2012
2013
2014
2015
2016
2017
2018
2019
Jan-Mar '20
Physical Dis
Older Adult
Mental Health
Developmental Dis

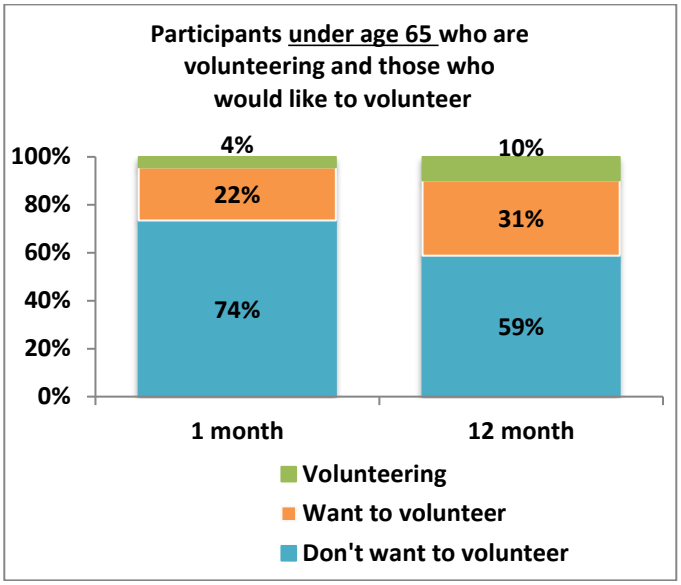

Participants Who Were in an Institution 12 Months after Transition Regardless of Length of Stay
Percent
15%
10%
5%
0%
11.2%
12.1%
11.2%
12.9%
10.4%
10.0%
5.2%
2013
2014
2015
2016
2017
2018
Jan-Mar '19
Year of Transition

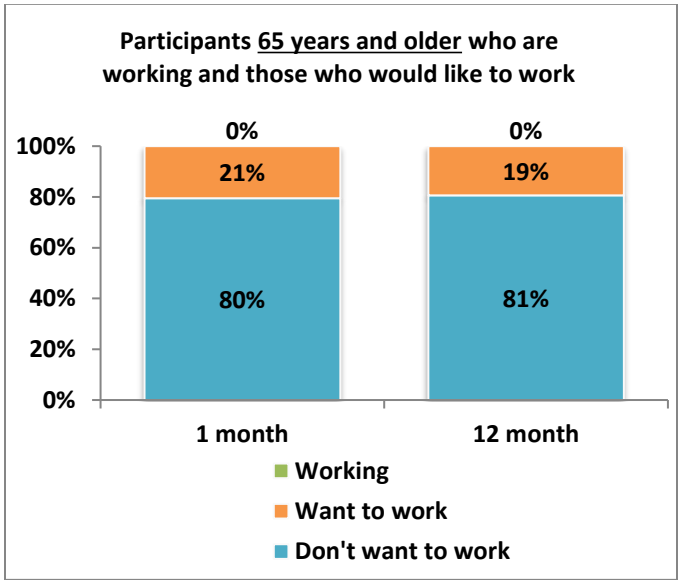

Number of Participants with Home Modifications by Year Approved and Region
2013
2014
2015
2016
2017
2018
2019
Eastern
North Central
Northwest
South Central
Southwest

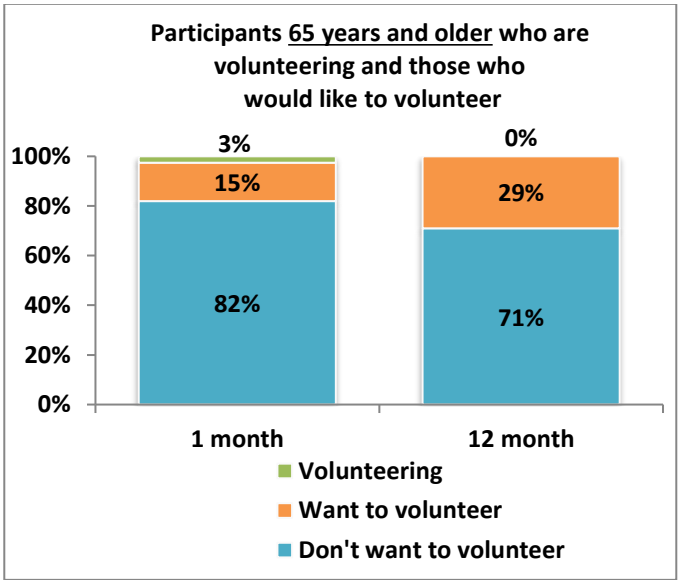

Number of Participants with Home Modifications per 6 Months
Eastern
North Central
Northwest
South Central
Southwest
Jan-Jun 2017
Jul-Dec 2017
Jan-Jun 2018
Jul-Dec 2018
Jan-Jun 2019
Jul-Dec 2019

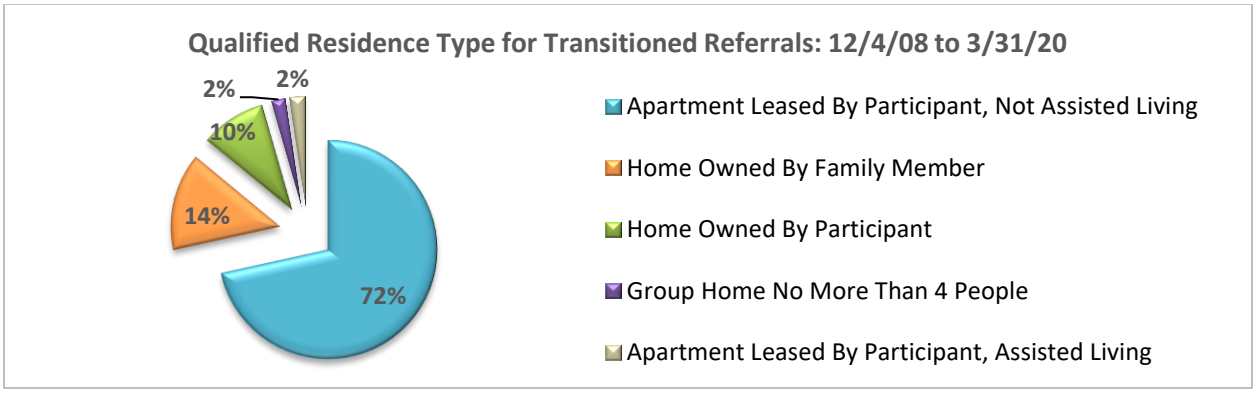
Participants who are Working and/or Volunteering (data 1/1/20-3/31/20)









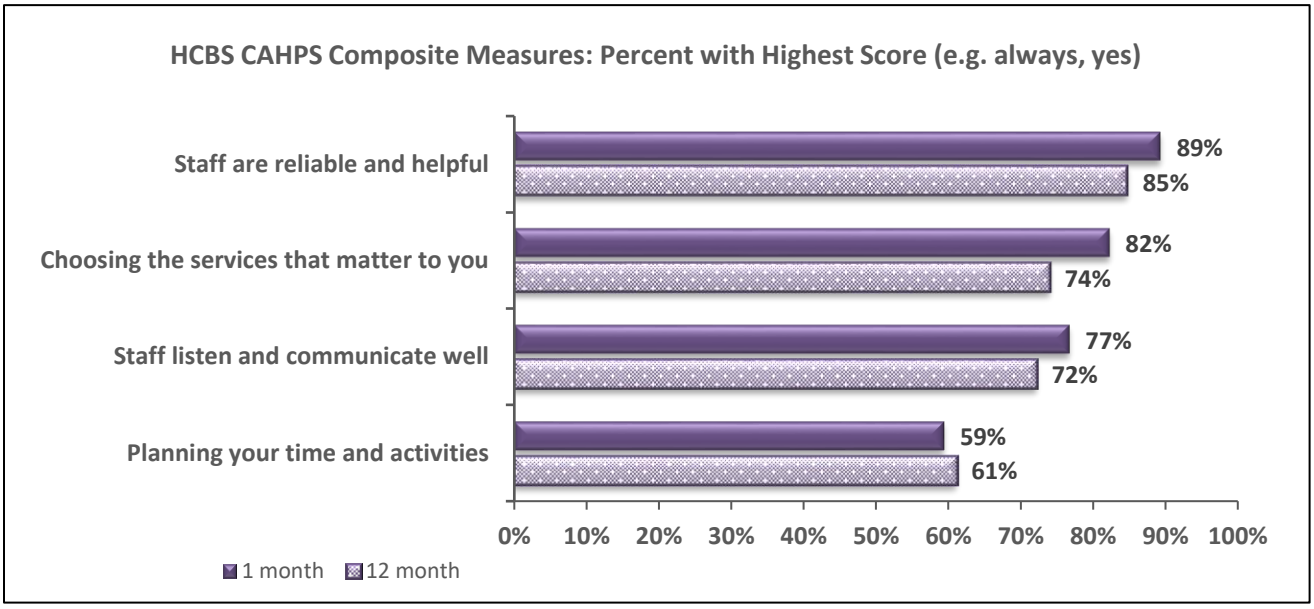


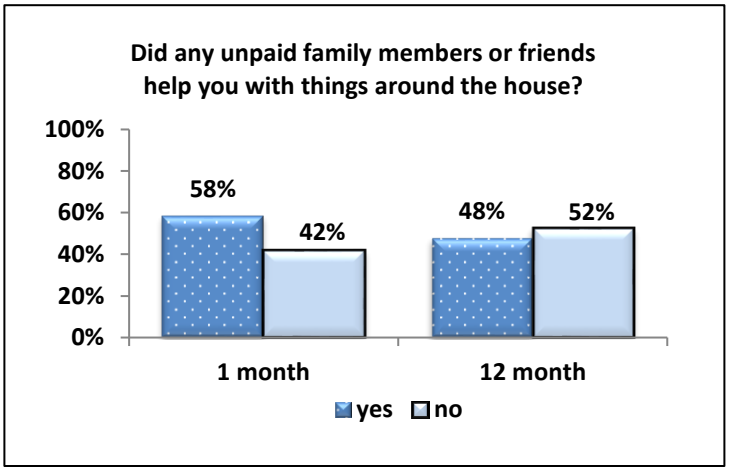
MFP Quality of Life Dashboard

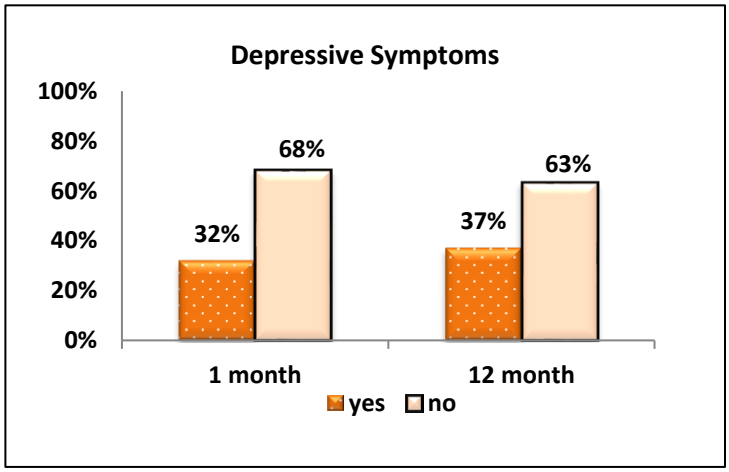
Number of Quality of Life Interviews Completed from 1/1/20 - 3/31/20

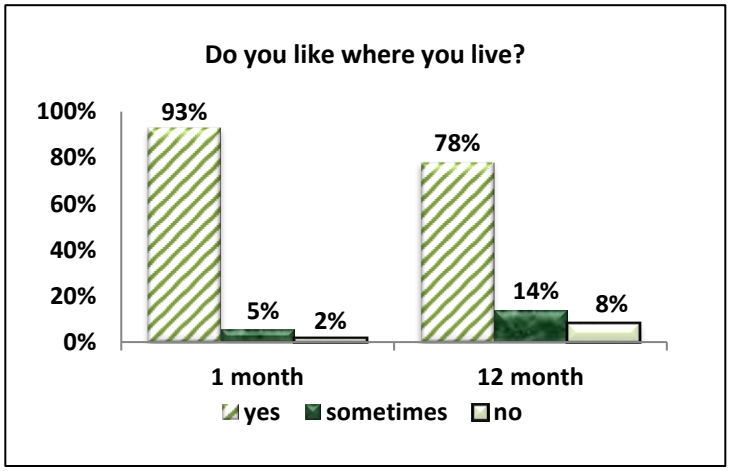
1 month interviews done 1 month after transition, **n=115**

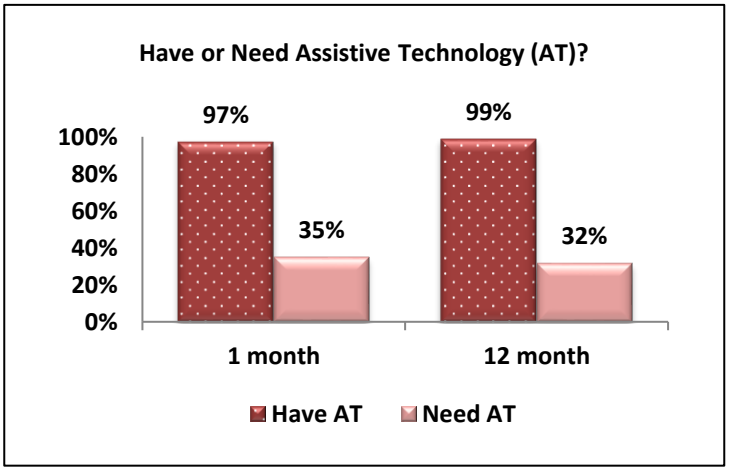
12 month interviews done 12 months after transition, **n=87**





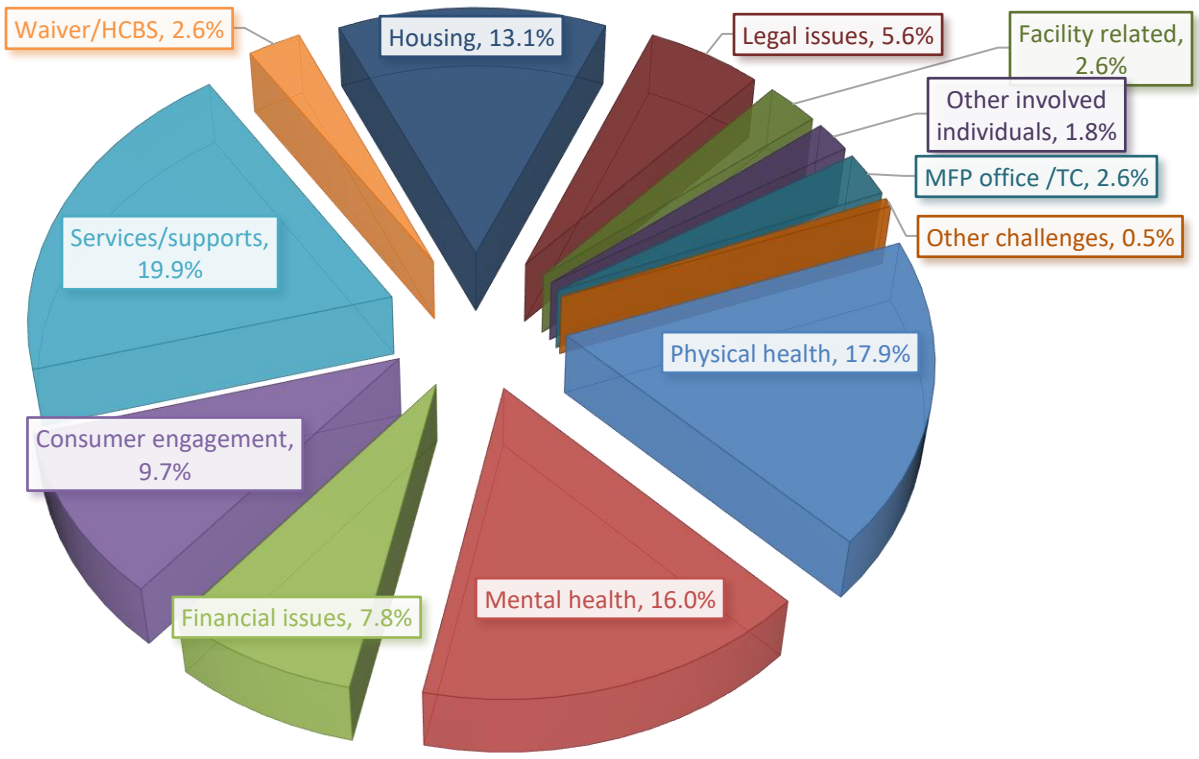




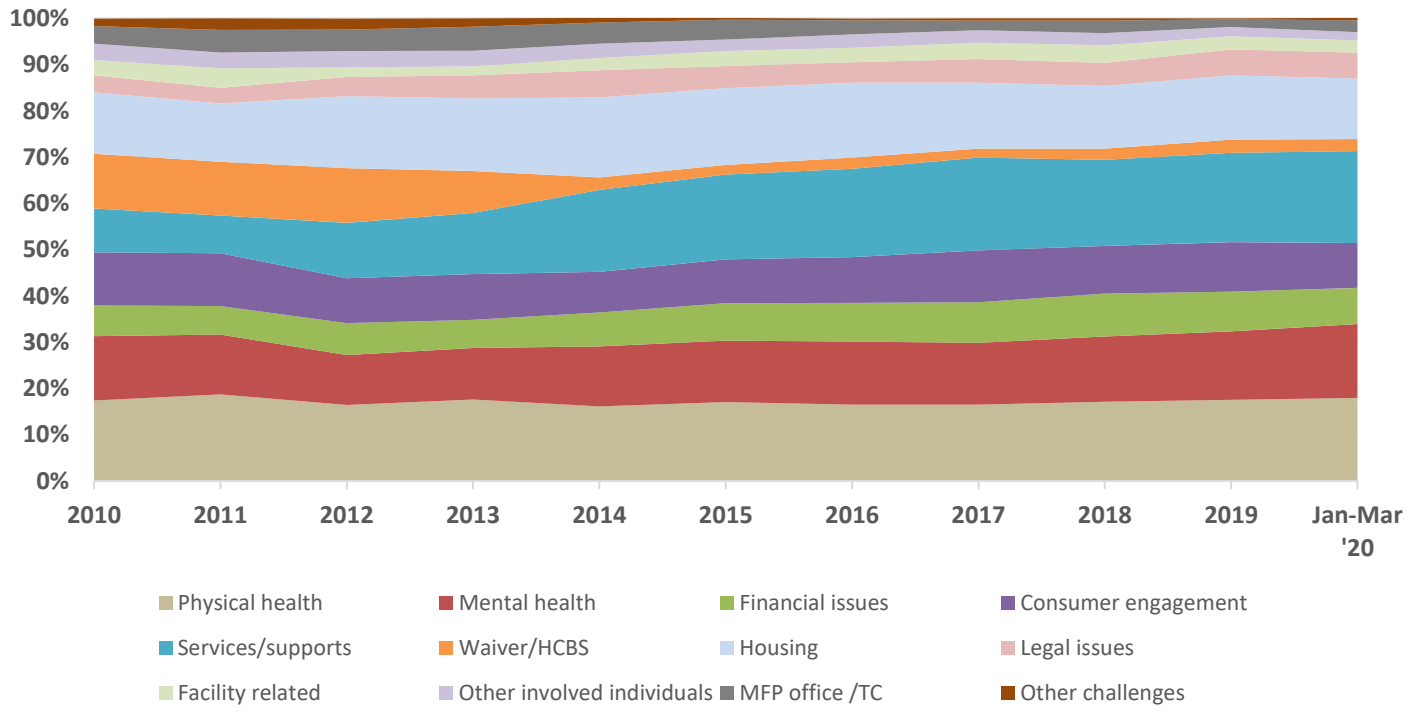


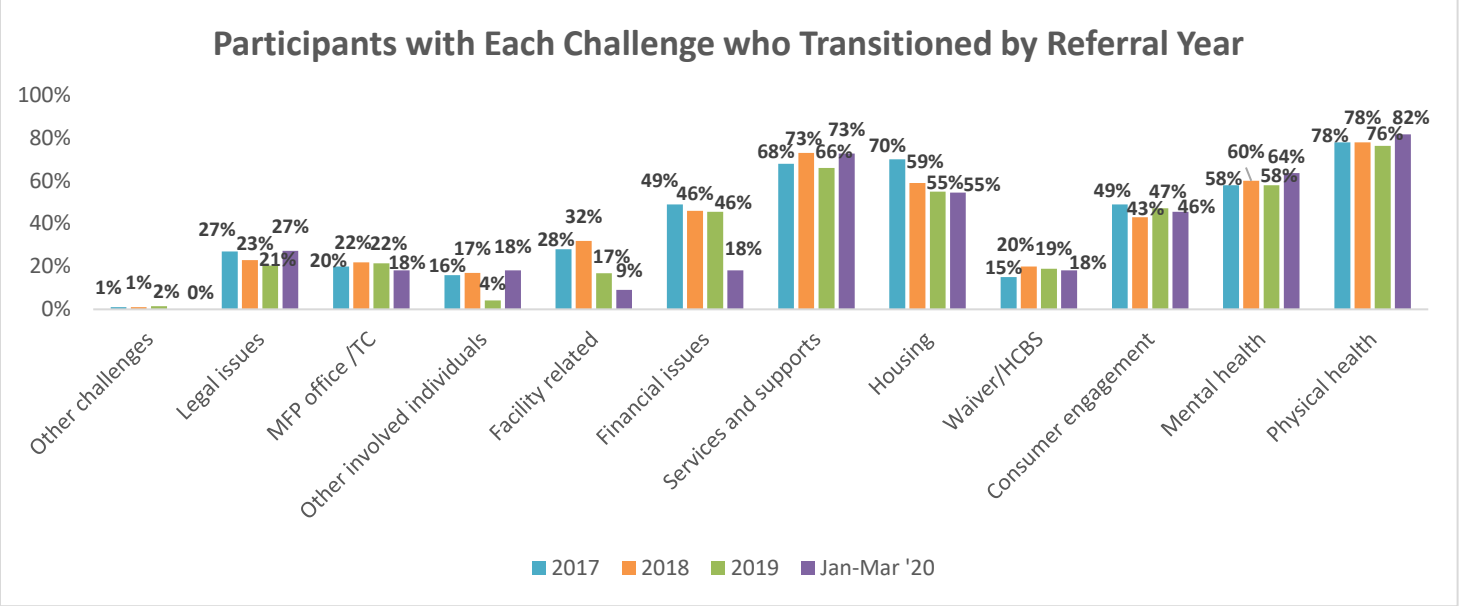
Challenges to Transition as Recorded by TCs and SCMs

Transition Challenges for Participants Referred Jan-Mar 2020



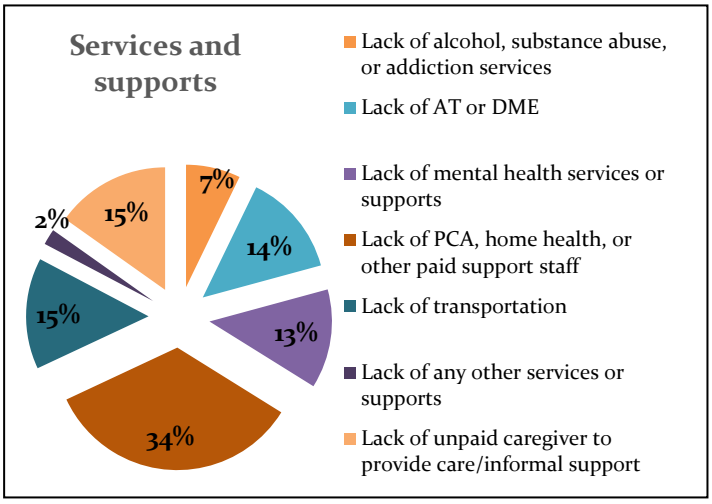
Frequency of Transition Challenges by Year of Referral

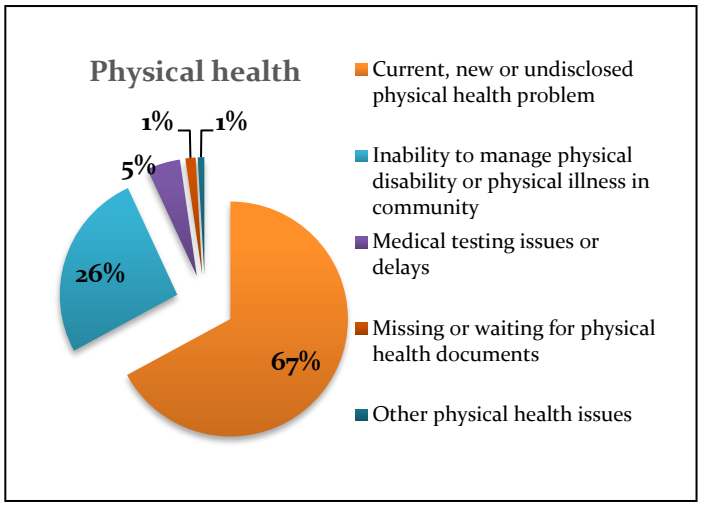


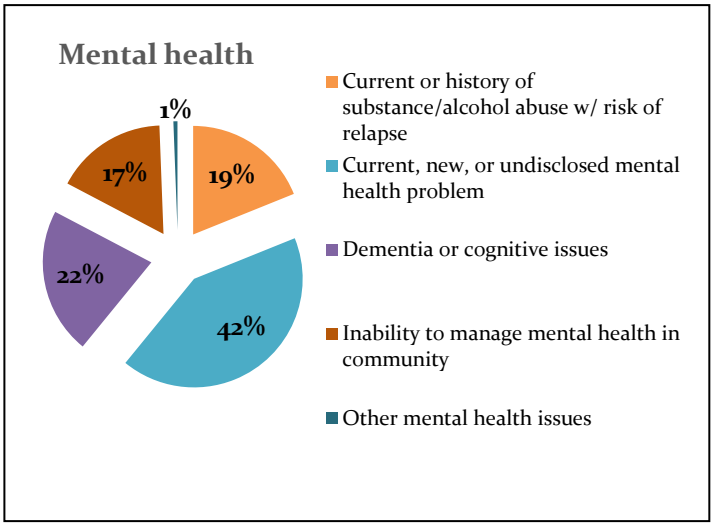


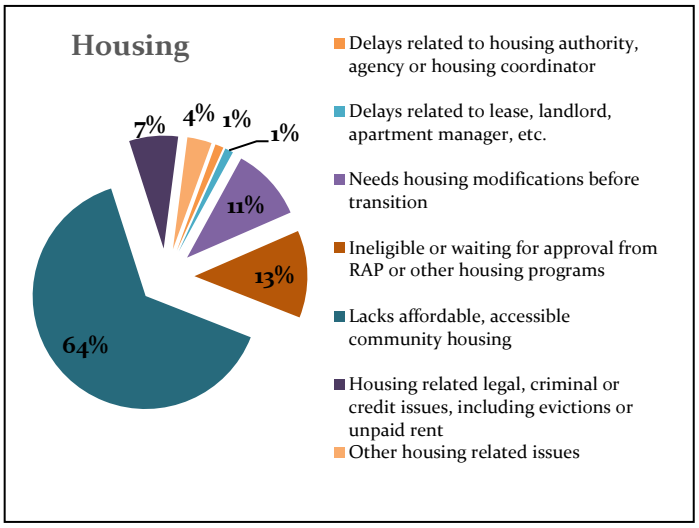
Types of Challenges for Referrals: 1/1/2020 - 3/31/2020

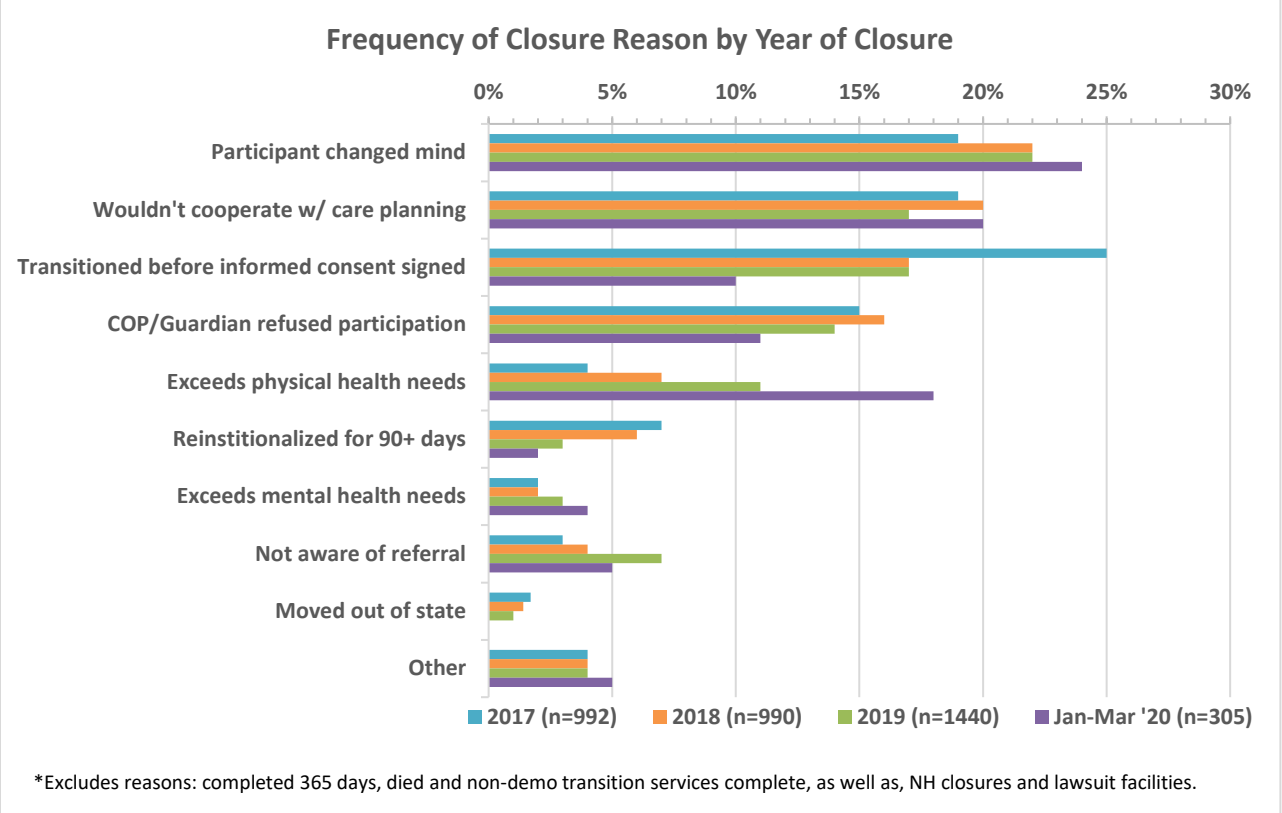
Below are the four most common challenge types for Q1 2020



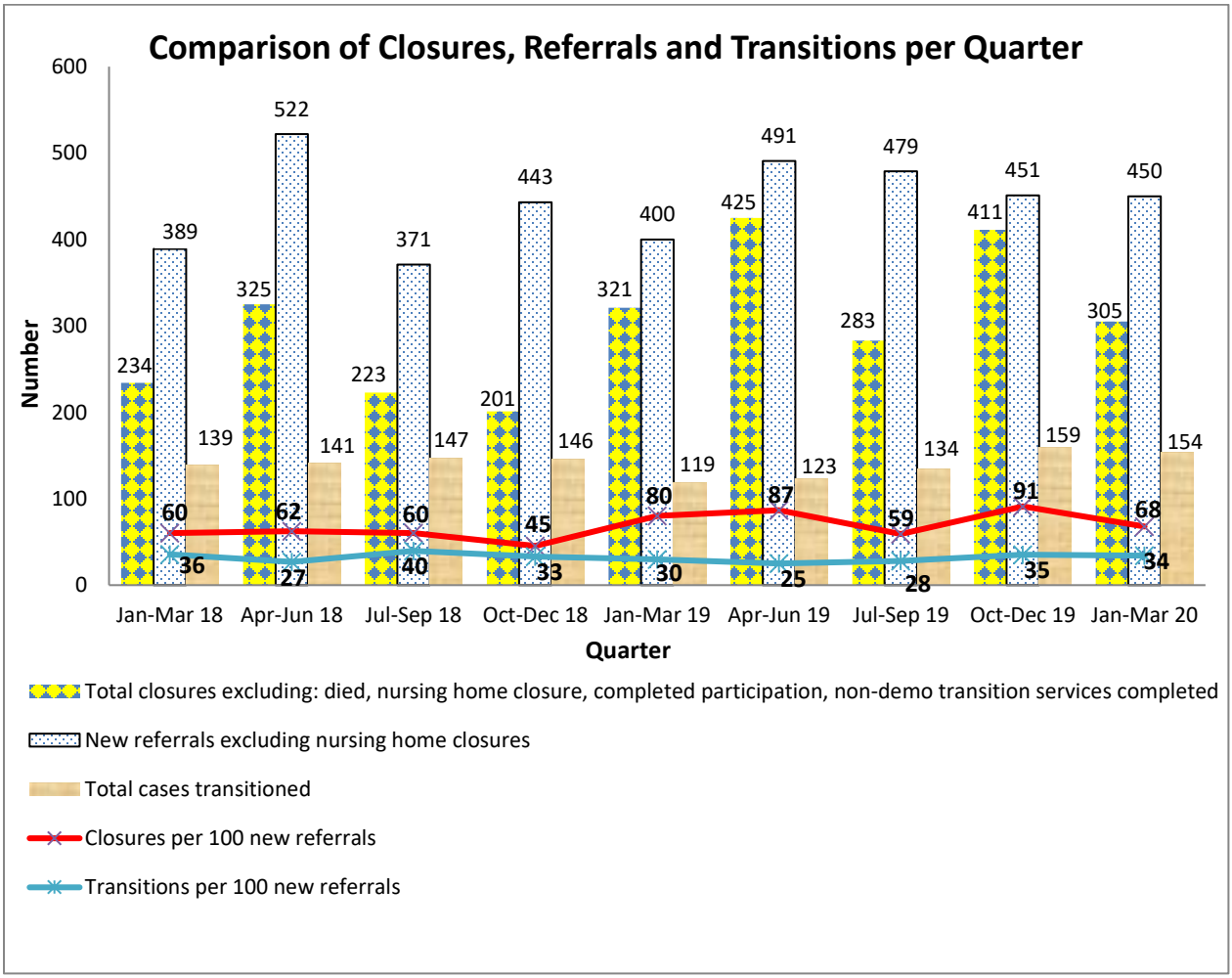








*Excludes reasons: completed 365 days, died and non-demo transition services complete, as well as, NH closures and lawsuit facilities.



Jenny and Christopher's Story

Photo Credit: Family photo taken on school field trip at aquarium

Jenny Aguirre, mother of Christopher Aguirre-Castillo, speaks on behalf of her son who is non-verbal. Christopher, now age fifteen, was born with chromosomal disorders which include developmental, physical, and intellectual disabilities, along with seizures and other difficulties. Jenny immigrated to Bridgeport, CT from Ecuador before Christopher was born. Like many challenges immigrants face when becoming familiar with a new country, Jenny was initially unaware of the community services available to people with disabilities. For many years, Jenny, who also has a disability, cared for her son with her brother's help. It wasn't until 5 years ago that Christopher's teacher encouraged Jenny to contact the Department of Developmental Services (DDS), where he received assistance from a social worker.

Christopher had surgery in January of 2019 at the Hospital for Special Care to improve his impaired developmental motor skills. The outcome of the surgery was not what they expected. Jenny stayed with her son for four weeks at the hospital before she had to return to work. He was put in a cast for six weeks after surgery and he received physical therapy following his cast removal. Since Christopher was unable to climb the stairs in his family's second floor home, and he remained in a weakened state, his health care providers did not discharge him. Weeks turned into months and Jenny noticed that her son was depressed, based on his loss of appetite and consequent weight loss. In March, during their lowest moment, the DDS social worker told Jenny about the Money Follows the Person (MFP) program, and thought it would be beneficial for Christopher.

Jenny considers MFP a blessing for her son. The care manager and transition coordinator met with Jenny several times to discuss Christopher's case. It took months to receive approval on housing but as soon as Jenny received it, she and her brother found a first floor apartment appropriate for Christopher. The necessary accommodations followed and the ramp was the last home modification made before Christopher could transition to their new home.

On August 19th, Christopher transitioned to his family's new apartment. With support from his loving family, Christopher adapted to new physical challenges post-surgery along with a new environment. Christopher received personal care assistance along with occupational and physical therapy at home, which provided him with a boost to succeed in the community. Wonderful events followed: Jenny fiercely advocated for her son to transfer to a specialized school which he now attends. He also began receiving aqua-therapy, currently on hold due to the pandemic, and is awaiting the arrival of his new customized wheelchair and car lift.

Since Christopher's transition, his family is very proud of the achievements he has made. He loves listening to music; he plays guitar and piano. Jenny excitedly shared that he plays the piano at their church. He is learning American Sign Language and uses it to express his needs along with raising his hand when he needs assistance. He is even using a walker at school!

It is undeniable, MFP made it possible for this wonderful young man to find success and hope. It also provided Jenny the tools to further advocate for her son. In Jenny's words, "I do not know where I or my son would be if it hadn't been for the MFP program. I couldn't fathom it!" Now Christopher Aguirre-Castillo is on the road to success!

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.