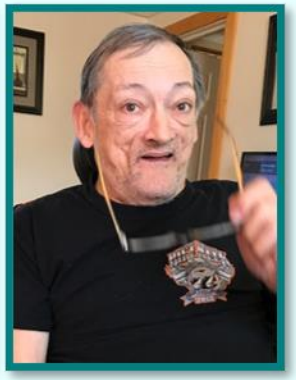
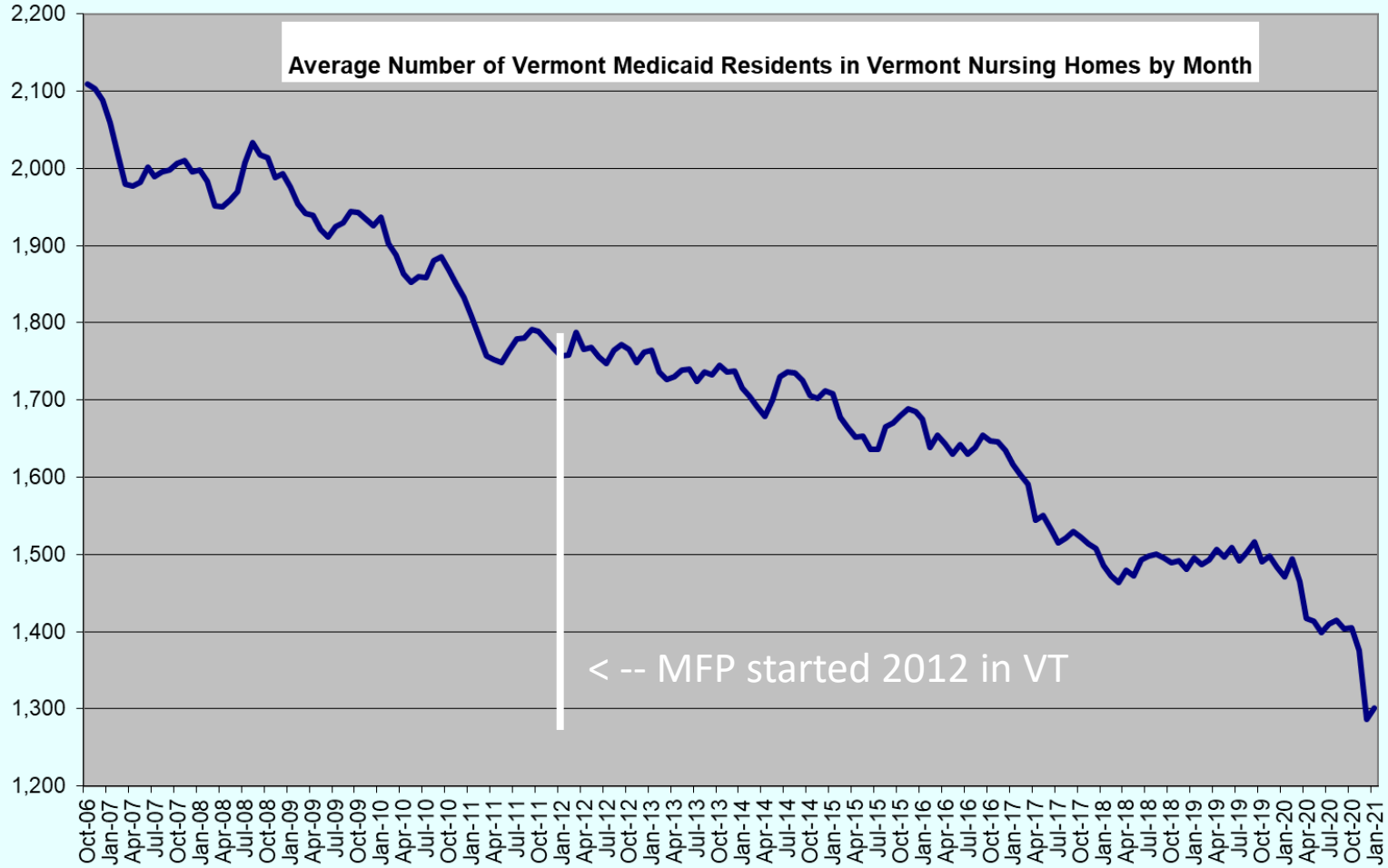
Money Follows the Person



Today's Agenda

- ❑ MFP Grant Re-authorization
  - ✓ Grant re-authorized through December 2024
  - ✓ Relaxed eligibility requirements (50% more participants will qualify)
  - ✓ Community Transition Services
- ❑ Update on MFP Supplemental Grant Application Timeline
- ❑ Initiatives Being Considered by CMS for Vermont's Supplemental Grant
  - ✓ Brain Injury Supports
  - ✓ Direct Service Workforce Development and Retention
  - ✓ Expansion of Volunteer Programs
  - ✓ Falls Prevention and Mobility
  - ✓ Holistic Social & Mental Health Supports
  - ✓ Independent Living and Home Modifications
  - ✓ Use of Assistive Technology (AT)

Decrease Reliance on Institutional Services



Average Medicaid NH Residents

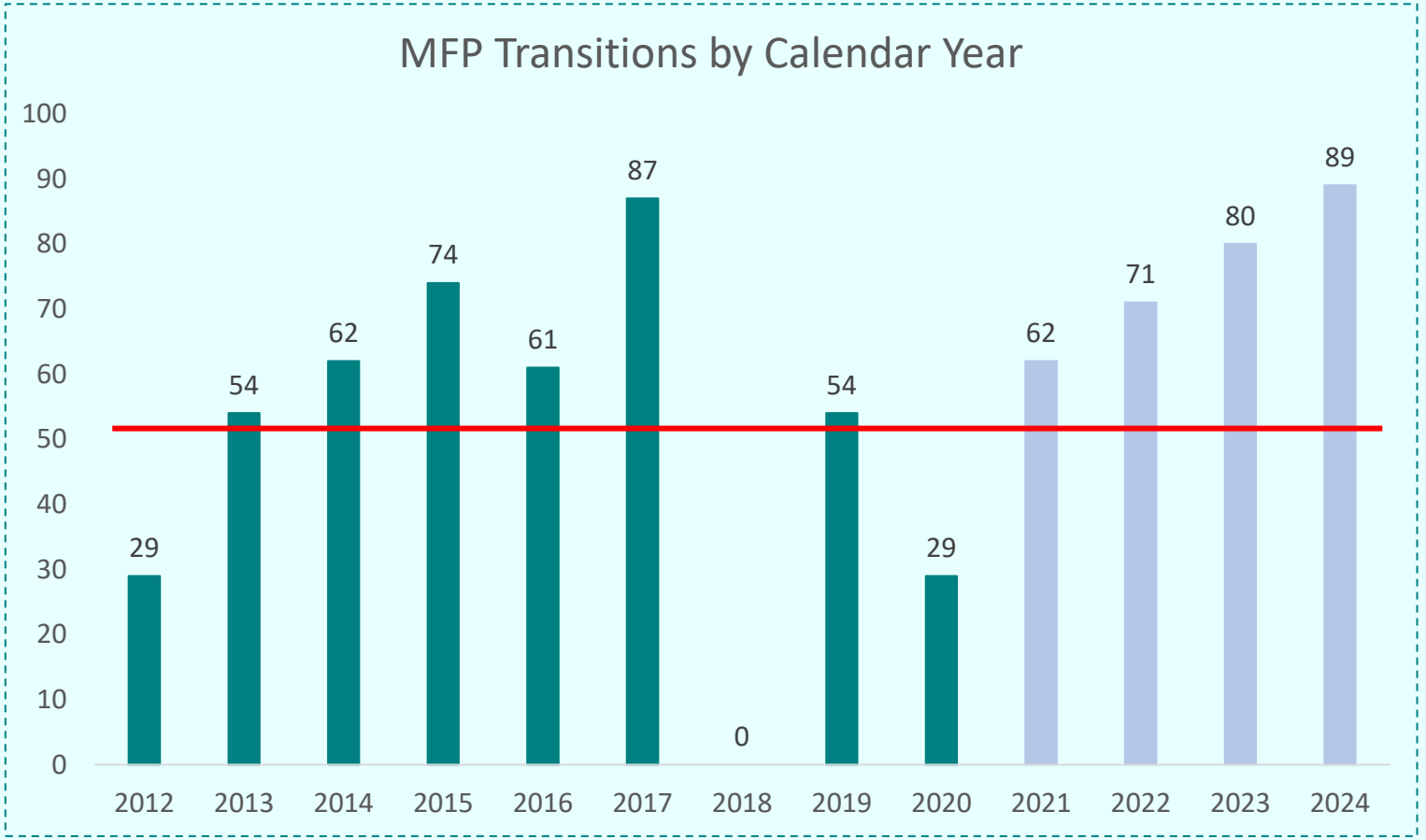
October 2006	=	2,109
January 2021	=	1,301

-38% Change During this Period

Reducing reliance on institutional services has long been a focus at DAIL

MFP Transition History

479
Total Transitions



CY21 Transition Goal	**53**
Actual Transitions	29
Transitions In process	20
Transitioned/In Progress	49

We are currently projected to surpass our transition goal for CY2021

MFP De-enrollment Reasons

De-Enrollment Reasons	% of Total
Graduated *	60%
SNF Re-Admission (> 90 days)	18%
Deceased	15%
Other (Loss of Housing, LTC Medicaid etc.)	7%

* - MFP Graduation is defined as someone that stay on the program for 365 days after their transition date

Re-admission Reasons

Acute stay followed by Long-term Rehab

Deterioration in Cognitive Functioning

Deterioration in Health

Deterioration in Mental Health

Loss of Housing

Loss of Personal Care Giver

By request of participant or guardian

Lack of sufficient community services

National MFP SNF Re-Admission Rate is about 8%

Transformation of our Community Transition System

Institutional Based Services

It Takes a Village

Home Based Services

Community Transition & Support Initiatives

- ✓ Lower SNF re-admission rates by enhanced discharge planning and home-based supports
- ✓ Enhanced home-based services to create a more holistic person-centered based system

Community Transition Medicaid Services

The goal of this initiative is to transform the current MFP grant operations into sustainably funded community-based services

- **The Pre-Transition service** will provide funding for enhanced discharge planning, options counseling and person-centered planning. There will be a focus on assembling a well-trained community transition team focused on the individual's abilities and care needs.
- **The Post-Transition service** will provide funding for services needed for a successful transition day and the post-transition follow-up required to ensure a successful and sustainable community transition. There will be a focus on the first 90 days of the transition including training and support in the home.
- **The Transition Funds service** will provide funding for to help remove identified barriers to transitioning and remaining on Home and Community Based Services.

This initiative is part of our Sustainability Plan - The Supplemental Grant makes it possible for more comprehensive solutions.

MFP Supplemental Funding Grant

DAIL may apply for an additional $5M from CMS through the MFP Demonstration Grant. These funds can be used for:

- ❑ Planning and capacity building efforts to accelerate LTSS system **transformation**
- ❑ **Expanding HCBS capacities** (direct service workforce, caregiver / provider training, new HCBS services, SNF diversion strategies and payment reform)

MFP Supplemental Grant Milestones

- ❑ Grant Application Submitted (May 14, 2021)
- ❑ CMS Grant Approval (June 30, 2021)
- ❑ Grants / Contracts Development and approvals (September 30, 2021)
- ❑ Initiative Projected Start Dates (January 2022)
- ❑ All Grant Initiatives Completed (June 30, 2025)
- ❑ All Grant Funds Reconciled (September 30, 2025)

Brain Injury Supports

Over 20% of Vermont's Lon-term Care waiver population has been diagnosed with a brain injury. We will partner with the Brain Injury Association of VT to create a training program for direct care workers so they can better support their CFC participants and unpaid caregivers.

- ❑ Screening & Referral Tool to identified people with undiagnosed Brain Injury
- ❑ Implement Neuro Resource Facilitation (NRF) – a personalized intervention that promotes access between individuals with a Brain Injury, their support network and community supports / services

Direct Service Workforce Development

We will partner with DAIL's Division of Vocational Rehabilitation to develop programs designed to increase the number of trained direct service workers.

- **Scholarships / Expenses –** we plan to provide funds for tuition scholarships and payment for education related expenses to increase the number of trained PCA/LNA direct service workers in Vermont.
- **Criminal Record Expungement –** an identified barrier to employment as a direct service worker is having a criminal record for non-violent crimes. The goal would be to assist an individual with the expungement process when appropriate.
- **Mentorship Programs –** direct service work is a challenging yet rewarding career path especially for those new to the work force. We plan to implement a mentorship program for these workers navigate the first year in this workforce.

Expansion of Volunteer Programs

The Direct Service Workforce shortage continues to have a negative impact on the availability of caregivers. The burden of care is being transferred to a person's unpaid caregivers. We will be working with a sample of Agencies to expand their Volunteer Programs to provide unpaid caregivers needed support.

- **Increase the Number of Volunteers –** In an effort to reduce unpaid caregiver fatigue and burnout, we plan to increase the number of volunteers available to a service area.

- **Enhance the services provided by volunteers -** We will be looking at breath of services currently provided by volunteers. The plan is to sustain the needed services and develop new services to meet our populations changing needs.

  - ✓ Provide Wellness Visits for homebound participants
  - ✓ Technological support for telehealth usage
  - ✓ Community connections to reduce Social Isolation

Falls Prevention & Improved Mobility

We will partner with the Falls Free Vermont Coalition and the Brain Injury Association of VT to raise falls risk awareness and to reduce falls in Vermont.

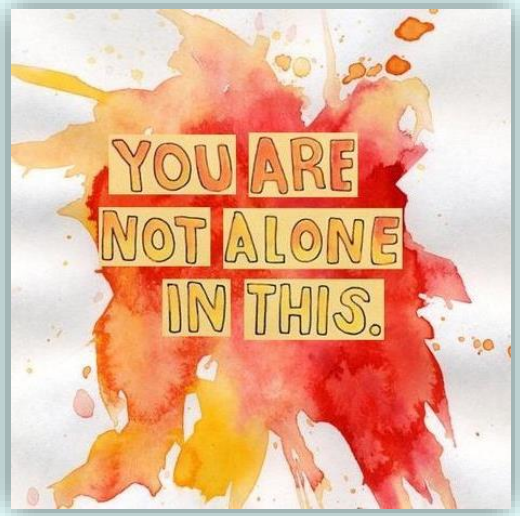
- ❑ **Referral Network –** It is our intention to implement and sustain a statewide falls screening/assessment, intervention and referral network.
- ❑ **CAPABLE Program Pilots –** We plan to pilot CAPABLE – an evidence-based program shown to decrease falls risk, improve safe mobility and to increase functional independence.
- ❑ **Falls Risk Assessments for CFC Participants –** We plan to perform a falls risk assessment for all CFC participants that were admitted to a Skilled Nursing Facility due to a fall prior to returning home.
- ❑ **Use of Assistive Technology (AT) –** We will partner with DAIL's Assistive Technology Division to implement technological strategies to decrease falls and promote independent community living.

Brain Injury Association of Vermont

Falls Free Vermont Coalition

Holistic Social & Mental Health Supports

Many of Vermont's long-term care waiver participants have complex medical and psychosocial care needs, putting them at a higher risk of a SNF admission. These higher acuity cases place additional pressures on caregivers and the community system of care. We will partner with a sample of our Designated Agencies to develop support services during transitions:



- ❑ Direct Supports for Unpaid Care Givers
- ❑ Education and Training about the value of self care
- ❑ Access to Mental Health Supports
- ❑ Substance Use Treatment Screening and Programs
- ❑ Reducing Social Isolation and Loneliness

Independent Living & Home Modifications

The Vermont Center for Independent Living has been a long-time resource for CFC Participants. Without the work of their dedicated Peer Advocate Counselors many Vermonters would not be able to live independently in the community. We will be partnering with them to:

VCIL
Vermont Center for Independent Living

- ❑ Provide Additional Peer Advocacy Support
- ❑ Work with DAIL's Division of Assistive Technology to identify sustainable funding to cover environmental assessments
- ❑ Provide Funding for Home Modifications
- ❑ Develop training modules to change the way we look at the caregiver profession and the supports they need to be successful. This work will build on the program developed by the Independent Living Partners in Japan.

Use of Assistive Technology (AT)

We will partner with DAIL's Division of Assistive Technology to develop programs that uses technology to promote better health, safety, community inclusion and independence.

- ❑ Most of the initiatives discussed today could be enhanced using Assistive Technology. This partnership is critical to ensure suitable use of AT for the following Initiatives:

  - ✓ Falls Prevention & Mobility
  - ✓ Training Programs for Caregivers
  - ✓ AT Traveling Library to educate Providers' staff and Volunteers on AT's benefits and use
  - ✓ Support of Independent Living and Home Modifications
  - ✓ Access to Online Social & Mental Health Supports for Participants and Caregivers

Overview of Initiatives

Questions

Comments

Feedback Welcomed: Angela Smith-Dieng (Angela.Smith-Dieng@vermont.gov) Matt Corjay (Matthew.Corjay@vermont.gov)