



MONEY FOLLOWS THE PERSON

PROVIDING A PATHWAY FOR VERMONTERS TO LIVE IN THE COMMUNITY OF THEIR CHOICE



TODAY'S OBJECTIVES

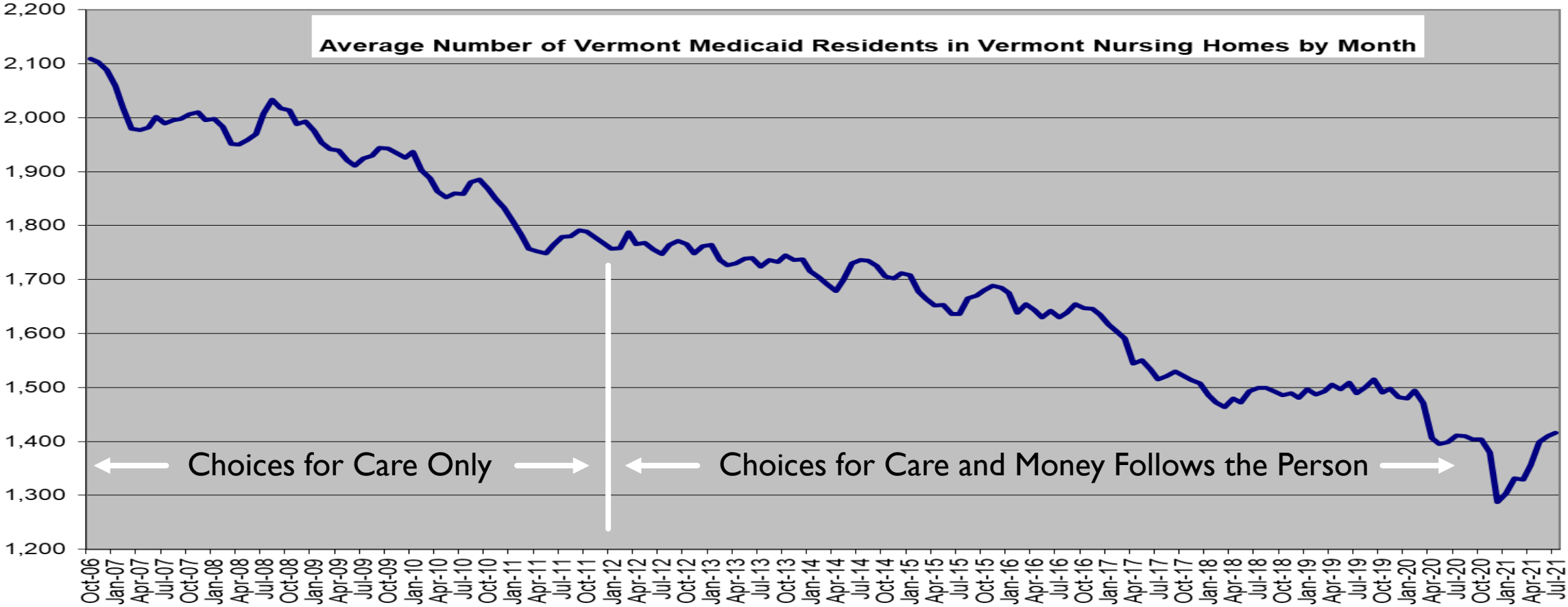
- What is Money Follows the Person (MFP)
 - The Demonstration Grant
 - Center for Medicaid and Medicare Services (CMS) goals
 - MFP Eligibility and the Transition Process
- MFP Supplemental Grant
 - Timeline and Stakeholder Engagement
 - Initiatives
 - Process for Awarding Initiative Contracts
- Questions / Feedback

MONEY FOLLOWS THE PERSON (MFP) DEMONSTRATION GRANT

*FOCUSED ON TRANSITIONS &
CREATING SUPPORTING STRUCTURE
* A LIMITED DURATION GRANT
* SLATED TO END SEPTEMBER 2025

- **CMS Demonstration Grant Goals:**
 - **Increase the use of HCBS** and reduce the use of institutionally based services
 - **Eliminate barriers** that restrict the use of Medicaid funds to enable LTSS Medicaid-eligible individuals to receive services in the settings of their choice
 - **Strengthen** the ability of **Medicaid programs** to provide HCBS to people who choose to transition out of institutions
 - Put procedures in place to provide **quality assurance** and improve HCBS

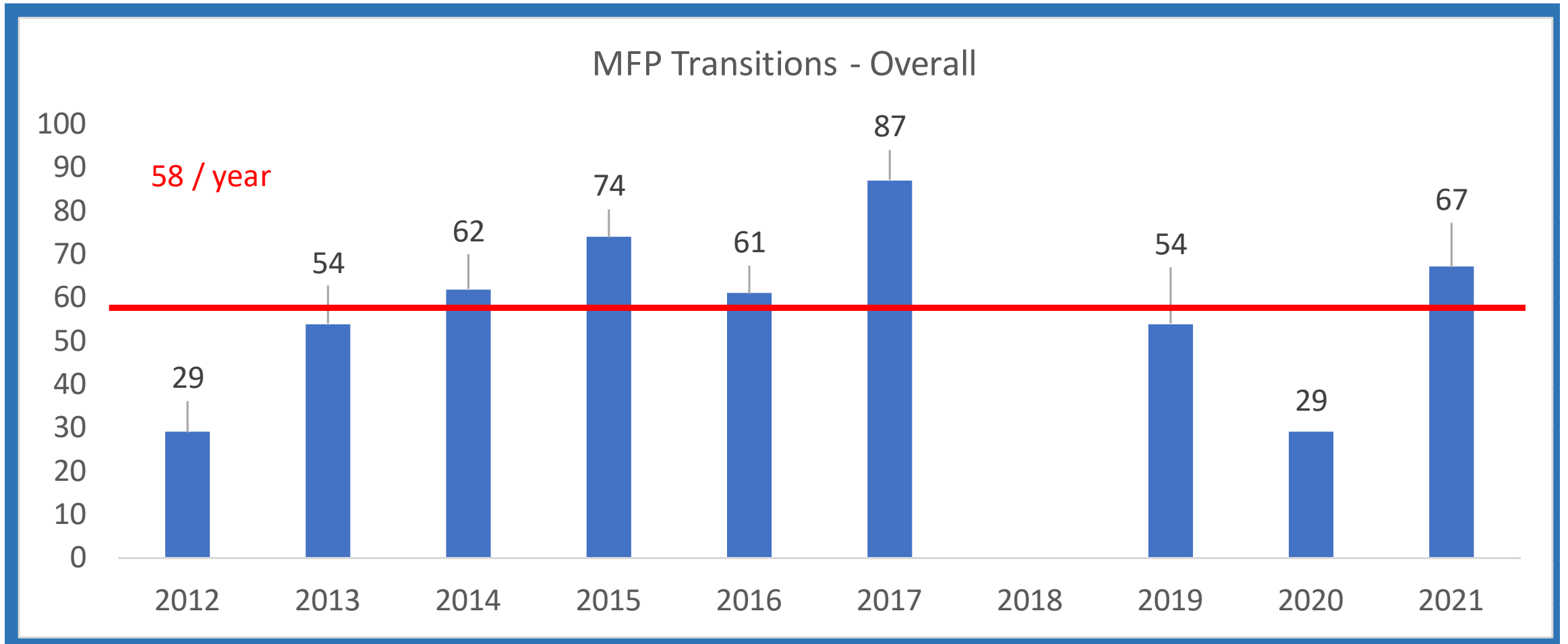
DECREASE RELIANCE ON INSTITUTIONAL SERVICES



THE MFP PROGRAM

- To **Enroll** in MFP a person must:
 - Have spent a total of 60 days in a skilled nursing facility (SNF)
 - Be a Vermont resident
 - Be eligible for Choices for Care
 - Express a desire to live in a community-based setting
 - Be receiving Vermont Long-term Care Medicaid when transitioning from the SNF
- **Benefits** During MFP Enrollment
 - Choices For Care Medicaid Waiver services (due to CFC enrollment)
 - \$2,500 in transition funds to assist with items and services not typically covered by Medicaid
 - MFP Transition Coordinator Services – Discharge Planning, Transition Support and Sustaining
Community Living

MFP TRANSITION HISTORY



MFP DE-ENROLLMENT / READMISSION

De-enrollment Reasons	% of total
Graduated*	60%
SNF readmission > 90 days	18%
Deceased	15%
Other (loss of housing, LTC Medicaid, etc.)	7%

*MFP graduation is defined as someone who stays 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 SNF readmission rate is about 8%

MFP SUPPLEMENTAL GRANT

DAIL has received an additional \$5M from CMS through the MFP Supplemental Grant. These funds can be used for:

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

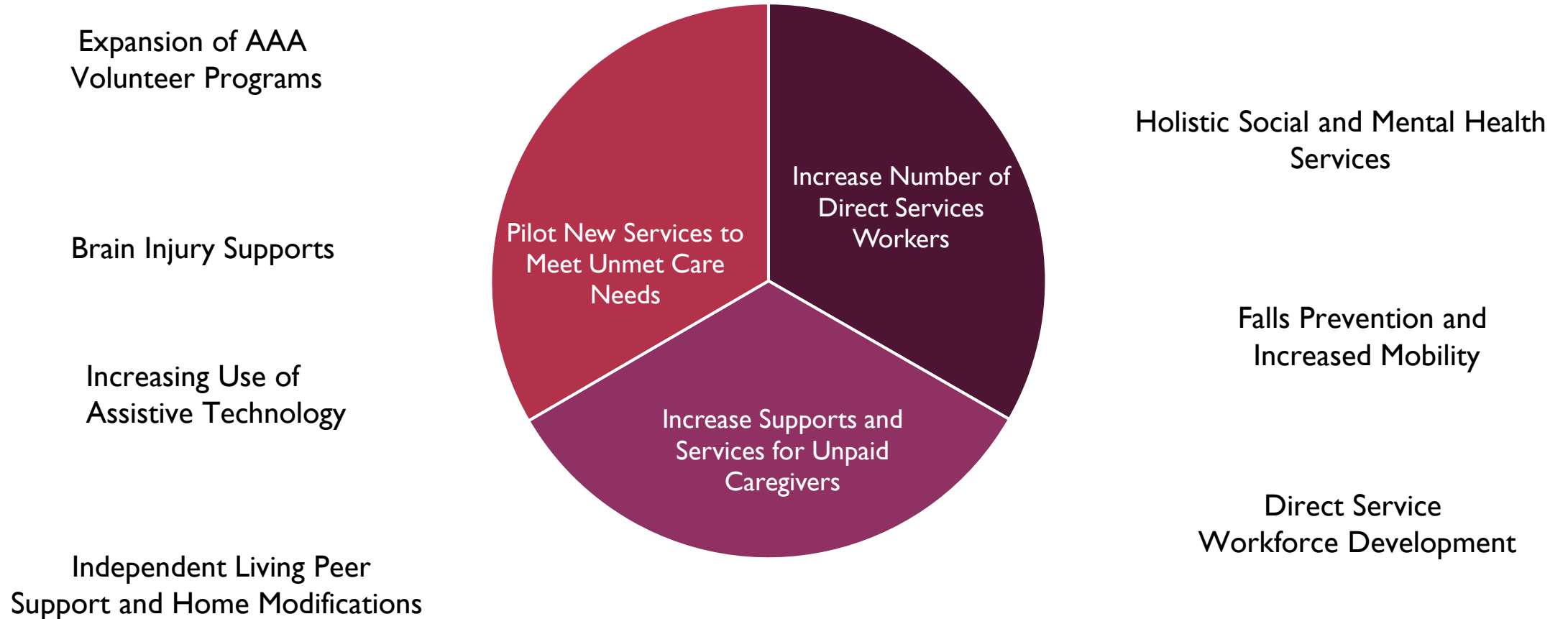


MFP SUPPLEMENTAL GRANT TIMELINE

- Internal and External Stakeholder Engagement Ongoing since September 2020
- DAIL Advisory Board Feedback December 10, 2020
- DAIL Approval on Use of Supplemental Funds December 18, 2020
- Supplemental CMS Grant Application Deadline June 30, 2021
- Notice of Grant Award August 25, 2021
- Funds Subcontracted/ Managed/ Initiatives Updated January 2022 through June 2025
- All Supplemental Grant Funds Spent and Project Ended September 2025

WHAT IS THE BIG PICTURE?

Supplemental Grant Initiative Themes



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 for existing workers to increase the number of highly trained PCA/LNA direct service workers in Vermont. We also believe this work will support the concept of a “career ladder” in the direct service workforce
- ❖ **Mentorship Programs** – direct service work is a challenging yet rewarding career, especially for those new to this workforce. We will implement a mentorship program using seasoned employees as mentors to help these new workers navigate their first year in the workforce

INCREASING USE OF ASSISTIVE TECHNOLOGY (AT)

We will partner with DAIL's Assistive Technology Program to enhance and develop programs that use assistive technology to promote better health, safety, community inclusion, and independence

- Most of the initiatives discussed today could be enhanced by using AT. By supporting the AT Program with an additional staff member focused on the MFP activities we can promote suitable use of AT for the following initiatives:
 - Falls Prevention and Mobility
 - Supporting paid and unpaid caregivers
 - Support of Independent Living and Home Modifications
 - Access to Social and Mental Health Supports for Participants and Caregivers
 - Supporting individuals with Brain Injury

EXPANSION OF VOLUNTEER SERVICES AND SUPPORTS

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

- ❑ **Increase the Number of Volunteers** – In an effort to reduce unpaid caregiver fatigue and burnout, we will provide funding to increase the number of volunteers available in a service area.
- ❑ **Enhance the Services Provided by Volunteers** – We will look at the breadth of services currently provided by volunteers. The intention is to sustain the both the needed services and to develop new services to meet the populations changing needs. This could include activities such as:
 - Providing wellness visits for homebound participants
 - Simple technology support for telehealth usage and communication
 - Community connections to reduce social isolation



BRAIN INJURY SUPPORTS

Over 20% of Vermont's Long-term Care Waiver population has been diagnosed with a brain injury. What is not known is the number of participants who have an undiagnosed brain injury. Stakeholders identified this as an unmet need. We will provide funding to create a training program for direct care workers to give them the knowledge and skills to better support Choices for Care participants and their unpaid caregivers through:

- ❖ Use of a **Screening and Referral Tool** to identify people with undiagnosed Brain Injury
- ❖ Implementing **Neuro Resource Facilitation (NRF)** – a personalized intervention that promotes access among and between individuals with a brain injury, their support network, and community supports/services

HOLISTIC SOCIAL AND 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 SNF admission/readmission. These higher acuity cases place additional pressures on caregivers and the community system of care. Using an "Elder Care Clinician-like" model, we will partner with community mental health providers to develop support services both during and post transition from a skilled nursing facility. Services being considered include:

- Direct Supports for Unpaid Caregivers
- 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 THROUGH PEER SUPPORT & HOME MODIFICATIONS

Money Follows the Person will seek to partner with an existing organization with a history of providing both peer support and administering home modification programs. Peer advocate counselors are critical to many Vermonters being able to live independently in the community. Home modifications are the bridge between Vermont's inaccessible housing stock and the daily living needs of older Vermonters and adults with disabilities. We will provide funding to support:

- Additional Peer Advocacy Support
- Working Collaboratively with DAIL's Assistive Technology Program to identify and advocate for sustainable funding to cover environmental assessments
- Additional Home Modification Grants
- Development of training modules to change the way we look at the caregiver professions and the supports caregivers need to be successful in their work. This work will build on elements for the program developed by the Independent Living Partners in Japan.

FALLS PREVENTION & IMPROVED MOBILITY

Falls that occur in a community-based setting are a key factor in admission/readmission to a Skilled Nursing Facility. We will partner with the Fall Free Vermont Coalition and the CAPABLE program at Johns Hopkins University 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 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 Program to implement technological and environmental strategies to decrease falls and promote independent community living.

PROCESS FOR AWARDING INITIATIVE FUNDING

What Happens Now?

- MFP will partner with DAIL's Division of Vocational Rehabilitations and Assistive Technology Program through an Intradepartmental Memorandum of Understanding to begin the Direct Service Workforce and Assistive Technology initiatives.
- Other initiatives will require undertaking a formal Request for Proposal (RFP) Process to solicit bids and award contracts.
- The RFP's for the Holistic Social and Mental Health Supports and the Expansion of Volunteer Services have been posted on the Vermont Business Registry and bids will be due by November 12, 2021.
- The RFP's for the remaining initiatives are in the drafting process and we hope to have all of them posted by January 2022.

VERMONT IS A COMMUNITY

We could not have gotten this far without the input of the many Vermont stakeholders who participated in this process. Your ideas, concerns, and advice were critical to the strength of our grant proposal, and we look forward continuing to work with advocates, organizations and the community at large as we move forward with the work of MFP and the Supplemental Grant.



THANK YOU!

WRAP-UP

Questions/ Feedback?

Please feel free to contact the MFP staff at:

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