

Rebalancing Workgroup MFP and BIP  
December 2, 2014  
12-2 PM  
DHMH, room L-3

**MFP Updates**

1. Staffing Updates

- i. Khadija Ali is our new Quality and Compliance Specialist. She started Monday, and will be joined by a second specialist on December 10<sup>th</sup>. As you will recall the primary purpose of this position is to develop and apply medical assistance policies and regulations for the Money Follows the Person (MFP) Demonstration related to participant eligibility and reportable events. MFP Quality and Compliance Specialists verify eligibility, make recommendations for enrollment and disenrollment of participants, and provide consultation to participants, providers, and supports planners in issues related to policy and regulations for the programs. Specialists will also perform audits of eligibility related time frames and resolve problems related to enrollment. Specialists monitor utilization and compliance with program rules to ensure compliance with federal rules and regulations.
- b. DDA Community Placement Specialist position, located at the Holly Center in Salisbury. Interviews were held in November and we hope to have the official offer letter this week and anticipate a December 24<sup>th</sup> start date.
  - i. This position functions as one of two of community placement specialists for the Department of Health and Mental Hygiene's Money Follows the Person (MFP) Demonstration Project. The main purposes of the position are to work with identified individuals in State Residential Centers and nursing facilities to assist in their transition to community-based services through the Money Follows the Person Demonstration Grant and to monitor Peer Mentoring grant activities. This position has been vacant since April and we are looking forward to having a permanent presence on the Eastern Shore.
- c. The Housing Director position was posted for three weeks, the job announcement closed on 11/13/14. We are waiting for HR to review the applications and provide us with the list of qualified applicants. Jennifer has been doing this job and her new one until the position is filled. We used to have five housing specialists because housing was not part of case management. Now housing is a responsibility of the Supports Planning Agencies. Jennifer has been training the Supports Planning Agencies.
- d. BIP Coordinator-Tiffani Nibbs resigned effective 11/26/14. Rebecca Oliver will be assisting with a number of the BIP duties for the foreseeable future. Rebecca

is our MAP Specialist and she is familiar with the MAP site development efforts, level one screen, and screening the registry.

2. Flex Funds (\$700.00)

We have been having conversations with SPAs and AAAs about the barriers to transition and taking action to resolve these barriers.

- a. Groceries- Flex funds are start up costs. Participants should not spend all \$700 on groceries. \$700 worth of groceries is not a start up; it is a couple month's worth.
- b. Guidance for SP for the purchase of Birth Certificates. Birth certificates will be allowed to be purchased with flex funds. We are in the process of working this out with our fiscal intermediary, PPL. Purchasing the birth certificate must be on the plan of service. Birth certificates cannot be expedited. The SPA will get the check from PPL and must match the check to the application. We are determining how to get the checks to the SPA to be used with the application. We will make sure that NFs know that the SPA can assist the individual to get their birth certificate. This is only for individuals who are MFP eligible and moving to a house or apartment.

3. MFP Consent Form and MFP Questionnaire in LTSS.

- a. We have noticed that many SPAs are not faxing MFP Consent Forms to Onika as they should be. Please fax them to Onika's attention at 410-333-5333 when you start working with individuals. If LTSS shows the person as MFP eligible, please contact Onika or Jennifer to make sure that the Consent Form is on file. We still want the original mailed, but please fax as well to get to us quicker.
- b. Upload a scanned copy of the consent form to the client attachment page.
- c. Once you have a consent form, please make sure you complete the MFP Questionnaire in the LTSS tracking system. Please also remember to complete it again when the individual transitions to the community because we need to know the setting. There must be 4 or fewer people in an ALF for it to be a MFP qualifying residence. Contact Onika at [onika.constant@maryland.gov](mailto:onika.constant@maryland.gov) for a list of approved ALFs.

4. Housing Updates

**Housing and Urban Development (HUD) Award of Section 811 PRA Demonstration:**

- In February 2013, Maryland was awarded the Section 811 Project Rental Assistance (PRA) Demonstration Funds. The funds will be used to operate the Section 811 PRA program that will serve 150 individuals with disabilities. The target population for Maryland's Section 811 PRA Demonstration is non-elderly adults with disabilities (between the ages of 18 and under 62) with income at or below 30% area median income who are Medicaid recipients.
- The 150 units will be funded for an initial 5 years and evenly distributed between the Washington, D.C. and Baltimore Metropolitan Statistical Areas. The Washington, DC area consists of Calvert, Charles, Frederick, Montgomery, and Prince George's

County. The Baltimore area consists of Baltimore City, Baltimore County, Anne Arundel, Carroll, Harford, Howard, and Queen Anne's Counties. 70% of the units will be 1 bedroom and 30% will be 2 bedrooms.

- The priority populations are (in the following order): 1. Institutionalized Medicaid Recipients 2. Households at Risk of Institutionalization Due to Current Housing Situation 3. Developmental Disabilities Administration-Community Pathways Waiver Participants Moving from Group Homes/Alternative Living Units to independent renting and Mental Hygiene Administration Residential Rehabilitation Program participants moving to independent renting, and 4. Homeless persons who are Medicaid recipients, prioritized in HEARTH ACT definition order (HEARTH ACT of 2009)
- The signed Cooperative Agreement between HUD and DHCD was received on October 31, 2014.
- On February 19, 2014, DHCD announced 14 affordable rental housing projects (\$19.6 million). Of the 14 housing projects awarded, 58 of these units will be used as Section 811 PRA units. The 58 units will be located in:
  - a. Frederick City (Sinclair Way – 11 units)
  - b. Harford County (Riverwoods at Tollgate- 13 units)
  - c. Baltimore County (Hopewell Point-11 units)
  - d. Prince George's County (Bladensburg Commons- 15 units)
  - e. Anne Arundel County (Berger Square- 8 units)

It is projected the construction of these units will begin in 2015 and the units will be available for occupancy in 2016. Awardees are selected through a competitive application round and awards will be announced in December.

**2014 Notice of Funding Availability (NOFA) for Section 811 PRA:**

- The announcement was posted on March 4, 2014 (Funding Opportunity Number FR-5700-N-28). During this round, PRA has an estimated total program funding of \$120 million, which they expect to award 12-18 awardees. Under this NOFA, HUD anticipates that individual grants awarded will range from \$2 million to \$12 million. HUD is seeking to support state housing and health and human services/Medicaid agency collaborations that have or will result in increased access to affordable (new/existing) permanent supportive housing units with access to appropriate services. HUD is accepting 1 application per state, which must include an Inter- Agency Partnership Agreement between the State housing finance agency and Medicaid.
- Maryland DHCD, DHMH, and MDOD applied and submitted our application on May 14, 2014 for funds to continue increasing access to affordable permanent supportive housing units in Maryland. We applied for an additional 150 units within a budget of \$ 9.8 million.

- 75% of the units will be distributed between the Baltimore and Washington, DC metropolitan statistical area and 25% will be distributed to Allegany, Caroline, Cecil, Dorchester, Garrett, Kent, St. Mary's, Talbot, Washington, and Worcester Counties
- 50% of the units will be 1 bedrooms and 50% will be 2 bedrooms

### **MPAH Updates:**

- The Social Serve web-based registry system for the Section 811 PRA demonstration went live on November 17, 2014. Currently there are 453 applicants on the registry.
  - Supports Planning Agencies and AAAs in the Baltimore/Washington MSA received a memo from the Community Options Administration Division regarding Section 811 PRA Training. Trainings were held from September 30<sup>th</sup> through October 30, 2014. Overall over 121 individuals were trained from organizations such as Foundations Care Management, Interfaith Works, Montgomery Co. AAA, BACIL, IMAGE Center, BHA, Catholic Charities, The Coordinating Center, and Independence Now.
  - If there are supports planners/case managers who do not have an account the Social Serve System, please set one up as soon as possible  
<https://www.socialserve.com/Enter/MD/>.

### **MFP Bridge Subsidy:**

- MDOD has been given the task of implementing the MFP Bridge Subsidy. MFP Bridge Subsidy will be available for MFP eligible individuals transitioning on the TBI waiver and those transitioning from nursing facilities or state residential centers. An MOU is being drafted between DHCD, MDOD, and DHMH. MFP Bridge Subsidy will be offered throughout Maryland and for MFP eligible individuals from age 18 and up. We are hoping to implement this program during the month of February 2015

### **Weinberg Units (income 15 -30% of AMI):**

- a. Participants are occupying units in Dorchester County (Foxtail Crossing II)
- b. Participants are occupying units in Montgomery County (Takoma Park)
- c. Wicomico County (Rivers Edge) will have 3 units available in 2015
- d. Somerset County (The Reserves at Somerset Commons) will have 2 units available 2016
- e. Harford County (Winston's Choice) will have 2 units available 2016

### **Housing 101**

The MFP Housing staff provided Housing 101 training to 135 individuals within the AAAs

and the Supports Planning Agencies within the Baltimore Washington MSA. All of the Supports Planning Agencies and AAAs will have the opportunity to schedule a training session. We targeted the Baltimore/Washington MSA because of the roll out of Section 811. Trainings began on September 26 and ended on November 24, 2014. The following agencies received training:

- a. Foundations Care Management 9/26/14 (15 individuals)
- b. Beatrice Loving Heart 10/1/14 (20 individuals)
- c. Montgomery County 10/15/14 (20 individuals)
- d. Baltimore City 10/22/14 (21 individuals)
- e. Prince George's County 11/5/14 (13 individuals)
- f. Anne Arundel County 11/6/14 (15 individuals)
- g. Carroll County 11/12/14 (12 individuals)
- h. Howard County 11/13/14 (10 individuals)
- i. MMARS 11/24/14 (9 individuals)

### **Housing Technical Assistance**

Michelle and Jennifer are available for technical assistance.

### **5. Sustainability Plan**

- a. MFP grantees must submit a sustainability plan for grant activities that will occur in the final years of the program to CMS through grant solutions for review and approval no later than April 30, 2015. Next year we must request funding for all of the out years. It is the last year that we can request funding.
- b. The plan must provide a detailed description of how the grantee will sustain necessary staffing, transition activity, services, demonstration programs, and structural changes initiated under the MFP Demonstration including budgets for each year and documentation to support funding requests in the budgets. The grantee must identify any services, structural changes or demo projects initiated under the grant that will not be continued after the grant period and the reason for discontinuing the activity. The plan must also include a timeline for any changes. Plans must include responses to the mandatory activities listed below and should consider including the optional list of activities as part of the final plan:
  - i. Mandatory Plan Activities
    1. Continue to improve and sustain MFP transition activities including out-year projections for transitions through December 31, 2017 and services through December 31, 2018;
    2. Indicate if the state is planning to continue to provide transition services and identify and budget for the cost to transition from the grantee's current MFP program into a new or existing 1915(c) or other Medicaid authority for the participants interested in transitioning to the community after the last day of service funding;
    3. Account for how the remainder of all rebalancing funds will be utilized prior to the end of the grant period, including new projects and updates on existing projects;

4. Engage external stakeholders in the development of the final sustainability planning process;
5. Include funds necessary to continue the submission of all MFP grant and programmatic reporting requirements as listed in the MFP Timeline.

We need to decide if we want to continue Flex Funding and Peer Mentoring after the MFP period

- We need more data on peer mentoring and its effects

CMS requires MFP staffing for reporting until 2021

The currently projected end date is December 31 2017 for the last transition and services end December 31 2018, though states are allowed to request an additional year of transitions through December 31, 2019. We plan to request to continue transitions through December 31 2018 and services end December 31 2019.

More information will be sent out about the sustainability plan before the next meeting

## 6. Transitions

- a. After the October meeting, Hilltop ran a report to determine the status of all applicants and the last step they had completed:
  - i. Application submitted, assessment requested, assessment completed, plan of service submitted, etc.
  - ii. Amy Logsdon, our MFP Policy Analyst has been reviewing applicant records (about 300) to determine where intervention is needed. We have been contacting the health departments and supports planning agencies for immediate follow up when a transition appears to be jeopardy.
    1. Majority of pending are individuals that have an advisory ATP, the greatest concerns are those that had been:
      - a. Referred for an interRAI assessment and are waiting beyond the expected time frame
      - b. Assessed by AERS, but the Supports Planner had not submitted a Plan of Service, includes POS in progress for months, but not completed
      - c. Individuals that were denied by EDD because of missing documentation
  - iii. We have documented the necessary next steps and will be sending out emails this week to the supports planning supervisors for follow up.
  - iv. The Community Options Administration Division has assigned SPA liaisons to support the SPAs and provide weekly on-site assistance to each of the SPAs. MDoA is assigned to the AAAs.

The liaisons are as follows:

**TCC** April Wiley [aprilm.ostrowski@maryland.gov](mailto:aprilm.ostrowski@maryland.gov)

**Beatrice** Cheraine Christian [cheraine.christian@maryland.gov](mailto:cheraine.christian@maryland.gov)

**MMARS** Jason Higgins [jason.higgins@maryland.gov](mailto:jason.higgins@maryland.gov)

**BACIL** Jason Higgins [jason.higgins@maryland.gov](mailto:jason.higgins@maryland.gov)

**Foundations** Kristina Williams [kristina.williams@maryland.gov](mailto:kristina.williams@maryland.gov)

- v. MFP staff will work closely with the SPA liaisons and the Plan of Service Review Division to help troubleshoot issues for MFP applicants.
- b. We will be training our Quality and Compliance Specialists throughout the month of December for ongoing support, oversight, and follow up throughout the transition process.

Note on transition number categories: due to combining the Living at Home Waiver and Waiver for Older Adults, we need to report Community Options transition data based on ages to comply with CMS requirements. This doesn't include BI or DDA transitions.

### **BIP Updates**

#### 7. Level One Screen

- a. We worked with the Department of Aging to provide a policy overview webinar and two in-person tracking system trainings in September
- b. We subsequently held another policy overview webinar and 4 in-person tracking system trainings in October
- c. Individuals that attended the in-person trainings received training materials and a policies and procedures manual
- d. We did a soft launch of the screen on 10/20/14
- e. We've held two follow up webinars with the MAPs to review both technical and policy issues
- f. There have been 248 requests for screens since the soft launch on 10/20/14-there have been requests in all jurisdictions, except for Upper Shore Aging (Kent, Talbot, and Caroline Counties) and Worcester County.

#### **Registry Screening**

- g. Schaefer Center will begin preparations to screen individuals on the registry.
- h. There is a draft letter to individuals on the registry so they understand why it's important and how it affects their place on the registry. We will be asking for input from partners on the language used. We know that it must be written in clear language that can be easily understood. The letter will be posted on the internet when it is finalized.

Q: Can you post the Level One Screen?

A: I don't think so, we will have to check. The concern is that people may be coached and will alter responses to change their priority category.

Q. What are the appeal rights if an individual doesn't agree with the screen results?

A. There are no appeal rights with the screen, but the individual can request to re-do the screen at any point.

Q. Will individuals receive a letter indicating that they have been added to the registry and will it include the results from the screen?

A. We will consider developing a letter to be sent after completing the screen.

8. MAP Sustainability

- a. MAP sites just completed a two week time study to gather updated information about the amount of time staff spends on Medicaid-related activities.
- b. Our plan is to submit the federal financial participation (FFP) cost allocation plan request to CMS by the end of this month. FFP is the name of the federal Medicaid match.
  - i. Activities included as Medicaid-related activities in the request are: Outreach/program education; facilitating applications; referral, coordination, and/or monitoring of services; training and program administration; MAP options counseling; level one screen; and general administration
- c. Only state and local dollars can be matched based on the percentage of time spent on the Medicaid eligible activities. The MAP sites have been working to redistribute funding so that they can maximize the potential match.

**Questions and comments**

Comment: People with mental health and cognitive impairment may have issues with answering the Level One Screen Questions, especially related to behavioral health. The Mental Health Association of Maryland wants to see BH questions. Is tracking done to measure the needs?

Response: We previously shared the BH-related questions; we can follow up with you. At this time we aren't currently tracking the responses to any particular question.

Q: Is Community First Choice an HMO?

A: No, it's a state plan program that provides many of the services that used to be provided under the Living at Home Waiver and the Waiver for Older Adults.

Q. Can people in assisted living facilities receive CFC services?

A. No, people in assisted living facilities cannot receive CFC services because CMS doesn't consider assisted living facilities to meet the definition of a community setting and CFC can only be provided in community settings.

Link to our website with information related to CFC and Community Options Waiver:

<https://mmcp.dhmdh.maryland.gov/longtermcare/SitePages/Community%20First%20Choice.aspx>

**\*\*\*\*\*Next Meeting is scheduled for February 3, 2015 from 12-2 in room L-3\*\*\*\*\***