STATE OF MARYLAND
DHMH
Maryland Department of Health and Mental Hygiene
201 W. Preston Street • Baltimore, Maryland 21201
Martin O'Malley, Governor – Anthony G. Brown, Lt. Governor – John M. Colmers, Secretary

DEC 2 8 2009

The Honorable Ulysses Currie
Chairman
Senate Budget and Taxation Committee
3 West Miller Senate Office Bldg.
Annapolis, MD 21401-1991

The Honorable Norman H. Conway
Chairman
House Appropriations Committee
131 Lowe House Office Bldg.
Annapolis, MD 21401-1991

The Honorable Thomas M. Middleton
Chairman
Senate Finance Committee
3 East Miller Senate Office Bldg.
Annapolis, MD 21401-1991

The Honorable Peter A. Hammen
Chairman
House Health and Government
Operations Committee
161 Lowe House Office Bldg.
Annapolis, MD 21401-1991

RE: SB 302/HB 325 (Ch. 542/543 of the Acts of 2007) and HG § 15-144 – Department of Health and Mental Hygiene – Money Follows the Person Grant – Report

Dear Chairmen Currie, Middleton, Conway and Hammen:

The Department of Health and Mental Hygiene ("the Department) is required by SB 302/HB 325 (Ch. 542 and 543 of the Acts of 2007) to report annually on the status of the Money Follows the Person (MFP) Grant. The first report, submitted in January 2009, outlined the Department's initial efforts in implementing the activities related to the MFP Grant. It included: an update on communications with the Centers for Medicare and Medicaid Services (CMS) related to the grant, information on funding received from CMS under the grant, the number of individuals moved out of institutions under the grant, by the type of institution, and any plans or policies developed by the Department to move individuals out of institutional settings. The following is an update of the Department's MFP Grant activities through November 2009.

The Department received formal approval of the State's Money Follows the Person (MFP) Operational Protocol on March 6, 2008 with an effective date of February 6, 2008. The total grant award through calendar year 2009 is $14,593,935. The majority of MFP grant award funds are provided to support an enhanced federal match (75% FFP) for home and community-based services for MFP program enrollees. The enhanced match leads to "savings" over the service costs that the State would have incurred without the enhanced federal match. The MFP Grant obligates the State to spend the "savings" toward meeting the federally established, State-directed goals of the MFP demonstration. The activities funded with the savings include: peer outreach; program education; application assistance; enhanced transitional case management for nursing facility residents; additional services under home-and community-based waivers; peer

and family mentoring; the expansion of the Maryland Access Point initiative; development of a statewide resource website; resource coordination and provider incentives to serve individuals with brain injury; and provider training.

The MFP program staff within DHMH regularly communicate with the State's MFP Project Officer at CMS. The Department amended the MFP Operational Protocol in 2009 to reflect changes in operational details and rebalancing initiatives as described below. All proposed changes to the Operational Protocol were communicated to the State's MFP Project Officer and to the MFP Stakeholder Advisory Group. The MFP Stakeholder Advisory Group which is composed of State staff, consumers, and advocates has met monthly since 2008 and moved to quarterly meetings in August 2009.

The first MFP participant moved to a community residence on March 18, 2008. Since then, 326 individuals have transitioned to the community from nursing facilities, 117 individuals have moved from State Residential Centers, primarily Rosewood, and seven (7) individuals have moved from chronic hospitals, through the end of October 2009.

After receiving approval from CMS, the Department has worked to implement the plans laid out in the approved Operational Protocol. The MFP Grant brought with it significant reporting requirements that required changes to the MMIS system, modifications to several Medicaid waiver tracking systems, and the development of an MFP web-based tracking system. The Department has added services to the Living at Home and Older Adults waivers in order to improve the package of services available to those transitioning out of nursing facilities.

Through the MFP demonstration, the Department has also convened a Behavioral Health Workgroup with stakeholders from the Department of Aging, the Department of Disabilities, the Mental Hygiene Administration (MHA), community provider agencies, and advocate groups to identify policy and program changes that will better serve individuals with brain injury, dementia, Alzheimer's disease, mental illness, and other related behavioral health disabilities. This workgroup has generated recommendations that are being evaluated for implementation in the Older Adults and Living at Home waiver advisory committees, the TBI Advisory Board, and the Aging in Place Taskforce of MHA's Transformation Grant. Recommendations include the addition of services to the existing waivers and enhanced provider training in behavioral health supports.

In an effort to increase transitions to community-based services, the Department has enhanced the implementation the existing Money Follows the Individual policy to extend beyond nursing facilities. Originally a Department policy, it was formalized in legislation as the Money Follows the Individual Act of 2003 and the Money Follows the Individual Accountability Act of 2004. The policy allows nursing facility residents covered by Medicaid to apply for waiver services regardless of caps on enrollment. The new policy permits any Medicaid eligible individual residing in any institution to apply for waiver services. In practice, this means residents of State Psychiatric Hospitals and chronic hospitals may now apply for and enroll in waivers that are closed. To enroll in a waiver the applicant must meet all waiver-specific requirements including level of care.

The MFP demonstration also provided support in the closure of the Rosewood Center. The demonstration funded three additional transition staff at the Developmental Disabilities Administration, enhanced Resource Coordination and Essential Lifestyle Planning, and created peer mentoring services for residents and family mentoring services for supporters of the residents.

Several other efforts for nursing facility residents were implemented in 2009, including peer outreach, program education, application assistance, and enhanced transitional case management which includes housing assistance. Peer outreach was initiated in the Southern Maryland region which includes Montgomery, Prince George's, Calvert, Charles, and St. Mary's counties. In this region the contractors have contacted over 1,100 nursing facility residents about the option to receive services in the community of which 800 opted to receive detailed program education. These efforts have resulted in 142 applications for home and community-based waiver programs to date. Contracts to provide outreach to the rest of the State were awarded in December 2009 and outreach will begin statewide in January 2010. DHMH has also established an agreement with the Maryland Department of Aging and its local Area Agencies on Aging to provide program education and application assistance to all nursing facility residents referred through peer outreach or directly from facilities. Older Adult waiver applicants began receiving enhanced transitional case management under the same agreement on July 1, 2009.

The MFP demonstration has offered a variety of training to transitional case managers in an effort to improve the transition process. Two full-day training sessions on affordable and accessible housing were hosted in November 2009 and eight additional days of housing training are planned for 2010. Person-centered planning and community resource training sessions are planned for the spring of 2010 as well.

Funding was also provided to the Maryland Department of Aging to further their efforts to develop the website for the Maryland Access Point (MAP). This funding and increased collaboration between Departments has fostered positive relationships with MAP partners and increased the availability of information about community services and supports.

Thank you for your consideration of this information. If you have questions or concerns, please contact Shawn Cain, Assistant Director of Governmental Affairs, at (410) 767-6509.

Sincerely,

John M. Colmers
Secretary

cc: John Folkemer
Susan Tucker
Mark Leeds
Tricia Roddy
Shawn Cain