



Engaging Hard to Serve Populations and Innovative Services in Home and Community-Based Services



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Presentation Objectives

- Highlight recently approved services that promise innovation within home and community-based services (HCBS) including services related to:
 - Technology
 - Supporting self-advocacy and skills to enhance community participation
 - Supporting families/caregivers, and
 - Ensuring successful community transitions
- Explore innovations and opportunities through the Money Follows the Person (MFP) Demonstration Grant Program
- Provide information on effective strategies for innovative services development

Contextual Issues: Opportunities and Challenges in HCBS

- Workforce
- Ensuring ongoing compliance with HCBS settings requirements
- Supporting individuals with multiple, complex conditions and support needs
- Supporting individuals in the context of their families
- Ensuring smooth transitions and effective diversion strategies from institutional use

Home and Community-Based Services: Background

- Section 1915(c) of the Social Security Act permits a state to waive certain Medicaid requirements in order to furnish an array of home and community-based services that promote community living for certain Medicaid-eligible individuals and, thereby, avoid institutionalization.
- Waiver services complement and/or supplement the services that are available through the Medicaid State plan and other federal, state and local public programs, as well as the supports that families and communities provide to individuals.

HCBS Service Categories

There are four broad categories of services that states may include in Section 1915(c) HCBS waivers:

- Services that are specifically authorized or otherwise included in Section 1915(c) of the Act at Section 1915(c)(4)(b);
- Other services not specified in the statute, for which the state requests the authority to provide under the provisions of 42 CFR 440.180(b)(9);
- Extended state plan services;
- Supports for participant direction.

These same categories of services are also available for state election within the 1915(i) HCBS State Plan Option

HCBS Statutory Services

HCBS listed explicitly within 1915(c)(4)(B):

- Case Management services
- Homemaker/Home Health Aide services
- Personal Care services
- Adult Day Health services
- Habilitation services
- Respite Care, and

For individuals with chronic mental illness:

- Day Treatment or Other partial hospitalization services,
- Psychosocial rehabilitation services, and
- Clinic services (whether or not furnished in a facility)

HCBS

“Other” Services

Section 1915(c)(4)(b) of the statute notes that, in addition to the statutory services, HCBS waivers may include “such other services requested by the State as the Secretary may approve.”

42 CFR 440.180(b)(9) provides further guidance that a service may be included as long as it can be demonstrated that the service will be necessary to assist a waiver participant to avoid institutionalization and function in the community.

Many states have devised creative “other” services to further community integration for individuals requiring HCBS.

HCBS

Extended State Plan Services

- When a state wants to enhance the amount, duration or frequency of a state plan service (but otherwise the scope of the service is the same as the state plan service), the service is considered an “extended state plan” service.
- The amount to be reimbursed as waiver services is the amount incurred after any limits in state plan services are exhausted.
- When a service is covered under the waiver that is similar to but has a different scope and/or uses different types of providers than the service covered under the state plan, it is considered an “other” service, not an extended state plan service.
- Extended state plan services apply only to adults, as children should receive all medically-necessary state plan benefits under the EPSDT requirements.

HCBS

Supports for Participant Direction

- Participant direction of waiver services means that the individual has the authority to exercise decision making authority over some or all of her/his waiver services and accepts the responsibility for taking a direct role in managing them.
- When states offer opportunities for participant direction within HCBS, it is essential that key supports are made available to individuals to support their success.

- **Information and assistance to support waiver participants:**

These supports are made available to individuals to help them manage their waiver services. For example, assistance might be provided to help the individual locate workers who furnish direct supports or in crafting the service plan.

- **Financial Management Services:**

These services are furnished for two purposes: (a) to address federal, state and local employment tax, labor and workers' compensation insurance rules and other requirements that apply when the individual functions as the employer of workers and (b) to make financial transactions on behalf of the individual when he/she has budget authority.

HCBS Service Categories: Important Considerations for Innovation

- As states design service packages within an HCBS program, it is important to consider the entire constellation of services available to the target group to ensure that the HCBS program builds upon the state's existing Medicaid service array
- In addition to differentiation among the various service categories based on the amount, duration or scope of a service, many states consider innovations or variable approaches in provider qualifications or alternative service delivery modalities to achieve particular goals.

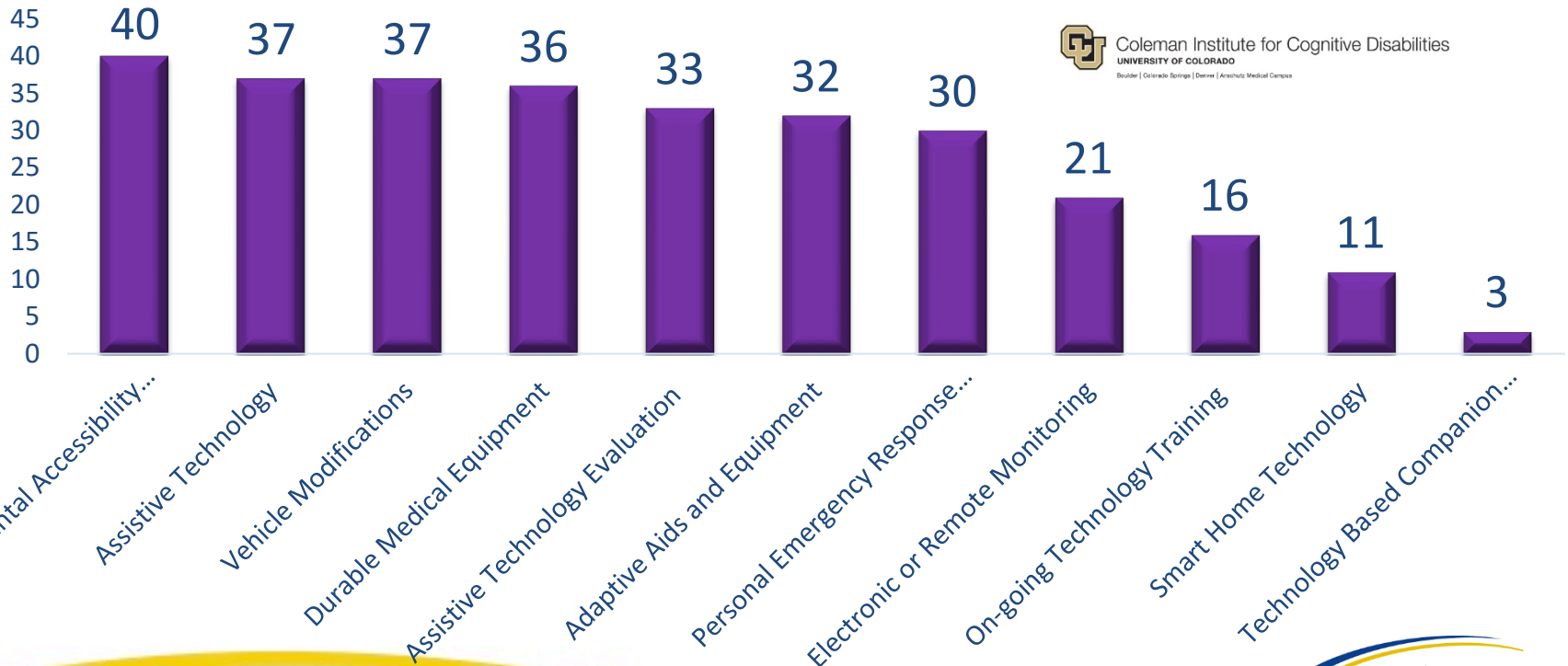
Technology in HCBS

State Service Innovations: Technology: Policy Considerations

- Privacy considerations
- Personal autonomy and choice regarding use of technology
- Equipment requirements – purchase, lease, maintenance, warranties
- Movement toward “Technology First” Initiatives – Ohio, for example
- Other efforts to integrate technology into service array – Pennsylvania

What Technology Services do States Utilize?

The Coleman Institute for Cognitive Disabilities at the University of Colorado conducted a survey of state I/DD agencies to determine what technology was in use for individuals with intellectual and developmental disabilities.



 Coleman Institute for Cognitive Disabilities
UNIVERSITY OF COLORADO
Boulder | Colorado Springs | Denver | Anschutz Medical Campus

State Service Innovations: Technology: Examples of Recently Approved Services (1 of 4)

Ohio Individual Options Waiver:

Remote Supports means the provision of supports by staff at a remote location who are engaged with the individual through technology/devices with the capability for live two-way communication. Equipment used to meet this requirement must include one or more of the following systems: motion sensing system, radio frequency identification, live video feed, live audio feed, GPS tracking, web-based monitoring system, or a device that otherwise meets the requirement for two-way communication. Individual interaction with the staff person may be scheduled, on-demand, or in response to an alert from a device in the remote support equipment system

State Service Innovations: Technology: Examples of Recently Approved Services (2 of 4)

Ohio Individual Options Waiver, continued

Remote Supports is the new title for the Remote Monitoring service effective 1/1/2019 in response to stakeholder feedback. The new title is more person-centered and was favored by stakeholders over "Remote Monitoring."

Limitations: Remote supports shall not be provided in a shared living or non-residential setting.

Excerpt OH0231.R04.09

State Service Innovations: Technology: Examples of Recently Approved Services (3 of 4)

Pennsylvania – Community Health Choices Waiver

TeleCare integrates social and healthcare services supported by innovative technologies to sustain and promote independence, quality of life and reduce the need for nursing home placement. By utilizing in-home technology, more options are available to assist and support individuals so that they can remain in their own homes and reduce the need for re-hospitalization. TeleCare services are specified by the service plan, as necessary to enable the participant to promote independence and to ensure the health, welfare and safety of the participant and are provided pursuant to consumer choice. TeleCare includes: 1) Health Status Measuring and Monitoring TeleCare Service, 2) Activity and Sensor Monitoring TeleCare Service, and 3) Medication Dispensing and Monitoring TeleCare Services.

Excerpt PA0386.R03.10

State Service Innovations: Technology: Examples of Recently Approved Services (4 of 4)

Many States also use the core service definitions for Assistive Technology and Individually-Directed Goods and Services to facilitate access to needed technology.

- These services often enable individuals to utilize off-the-shelf, extremely individualized solutions to address needs identified in their person-centered plans of care.
- States will often include limitations on the amounts expended for technology, allowing exceptions when required by extenuating needs or circumstances.

Supporting Self-Advocacy and Skills to Enhance Community Membership

State Service Innovations: Supporting Self-Advocacy and Skills to Enhance Community Membership: Policy Considerations

- States are redesigning services in order to enhance individuals' opportunities to engage in their communities.
- While the settings in which services are offered are a significant part of the equation in facilitating meaningful community engagement, individuals' own comfort level, familiarity and skills in self-advocacy are also essential.
- States are increasingly seeing opportunities to support individuals find their voice to express what is important to and important for themselves as a pivotal part of the HCBS landscape.

Courtesy SD DDD
Prepared by Dan Lusk

State Service Innovations: Supporting Self-Advocacy and Skills to Enhance Community Membership: Examples of Recently Approved Services (1 of 6)

Massachusetts Community Living Waiver 0826.R02

Peer support is designed to provide training, instruction and mentoring to participants about self-advocacy, participant direction, civic participation, leadership, benefits, and participation in the community. Peer support is designed to promote and assist the waiver participant's ability to participate in self-advocacy through either a peer mentor or through an individual/agency peer support facilitator. Peer support may be provided in 1) small groups or 2) peer support may involve one individual who is either a peer or an individual peer support facilitator providing support to a waiver participant...

Excerpt MA 0836.R02

State Service Innovations: Supporting Self-Advocacy and Skills to Enhance Community Membership: Examples of Recently Approved Services (2 of 6)

Massachusetts Community Living Waiver 0826.R02, Continued

Peer Support

The one to one peer support is instructional; it is not counseling. The service enhances the skills of the participant to function in the community and/or family home. Documentation in the participant's record demonstrates the benefit to the participant. This service may be provided in small groups or as a one-to-one support for the participant. Peer support is available to participants who reside in 24 licensed settings, in the family home, a home of their own or receive less than 24 hours of support per day. This service may be self-directed.

Excerpt MA 0836.R02

State Service Innovations: Supporting Self-Advocacy and Skills to Enhance Community Membership: Examples of Recently Approved Services (3 of 6)

Indiana 1915(i) – IN.18.007

Peer Support Services are face-to-face services that provide structured, scheduled activities that support socialization, recovery, self-advocacy, development of natural supports, and maintenance of community living skills.

Service Requirements include:

- *Peer Support Services must be identified in the IICP;*
- *Documentation must support how the service specifically benefits the identified recipient.*

Courtesy SD DDD
Prepared by Dan Lusk

State Service Innovations: Supporting Self-Advocacy and Skills to Enhance Community Membership: Examples of Recently Approved Services (4 of 6)

Indiana 1915(i) – IN.18.007

Services include the following components:

- *Assisting individuals with developing self-care plans and other formal mentoring activities aimed at increasing active participation in person-centered planning and delivery of individualized services;*
- *Assisting individuals in the development of psychiatric advanced directives;*
- *Supporting problem solving related to reintegration into the community; and*
- *Education and promotion of anti-stigma activities.*

IN 18-007 Oct 1, 2018

State Service Innovations: Supporting Self-Advocacy and Skills to Enhance Community Membership: Examples of Recently Approved Services (5 of 6)

District of Columbia 0307.R04 (excerpt)

"Wellness Services are direct services to people served through the waiver, based on need and specified in an approved Plan of Care.

- *Nutrition evaluation/consultation and*
- *Bereavement counseling.*

Wellness Services may be utilized to:

- *Assist in increasing the person's independence, participation, emotional well-being and productivity in their home, work and community;*
- *Provide training or therapy to a person and/or their natural and formal supports, necessary to either develop critical skills that may be self-managed by the person or maintained according to the person's needs;*
- *Perform assessments and/or re-assessments and recommendations;*
- *Provide consultative services and recommendations; and,*

DC 0307.R04

State Service Innovations: Supporting Self-Advocacy and Skills to Enhance Community Membership: Examples of Recently Approved Services (6 of 6)

District of Columbia 0307.R04

- *Provide necessary information to the person, family, caregivers, and/or team to assist in planning and implementing plans per the approved Plan of Care.*

The specific service delivered must be consistent with the scope of the license held by the professional. Service intensity, frequency, and duration will be determined by individual need. The services may be short-term, intermittent, or long-term, depending on the need. The team developing the plan of support makes determinations for service utilization.

The person may utilize one or more Wellness Services in the same day, but not at the same time. Limitations apply (including no more than 100 hours per year).

DC 0307.R04

Supporting Families and Caregivers

State Service Innovations: Supporting Families and Caregivers: Policy Considerations

- Families and informal caregivers provide vast amounts of support to individuals who are aging and individuals with disabilities in the United States.
- The AARP estimates that in 2013, about 40 million family caregivers provided 37 billion hours of care.
- In 2016, an estimated **1,228,700** people received long-term services and supports (LTSS) from state IDD agencies. 58% of those individuals live in the home of a family member.
- As states devise LTSS strategies, they must consider supporting individuals in the context of their family.

1. AARP Public Policy Institute; *Valuing the Invaluable, 2015 Update, July 2015*

2. Larson, S.A., Eschenbacher, H.J., Anderson, L.L., Taylor, B., Pettingell, S., Hewitt, A., Sowers, M., & Bourne, M.L. (2018). In-home and residential long-term supports and services for persons with intellectual or developmental disabilities: Status and trends through 2016. Minneapolis: University of Minnesota, Research and Training Center on Community Living, Institute on Community Integration.

State Service Innovations: Supporting Families and Caregivers: Examples of Recently Approved Services (1 of 10)

Maryland Family Support Waiver

Family and Peer Mentoring Supports *provide mentors who have shared experiences as the participant, family, or both participant and family and who provide support and guidance to the participant and his or her family members. Family and Peer mentors explain community services, programs, and strategies they have used to achieve goals. It fosters connections and relationships which builds the resilience of the participant and his or her family.*

Family and Peer Mentoring Supports services encourage participants and their family members to share their successful strategies and experiences in navigating a broad range of community resources beyond those offered through the waiver with other waiver participants and their families.

Excerpt MD1466.R00.00

State Service Innovations: Supporting Families and Caregivers: Examples of Recently Approved Services (2 of 10)

Family and Peer Mentoring Supports, Continued

Service Requirements:

Family and Peer Mentoring Supports are provided from an experienced peer mentor, parent or other family member to a peer, another parent or family caregiver who is the primary unpaid support to the participant.

Family and Peer Mentoring Supports include supports to siblings from others with shared experiences.

Family and Peer Mentoring Supports include facilitation of parent or family member "matches" and follow-up support to assure the matched relationship meets peer expectations.

Excerpt MD1466.R00.00

State Service Innovations: Supporting Families and Caregivers: Examples of Recently Approved Services (3 of 10)

Maryland Family Support Waiver

Family Caregiver Training and Empowerment services provide education and support to the family caregiver of a participant that preserves the family unit and increases confidence, stamina and empowerment to support the participant. Education and training activities are based on the family/caregiver's unique needs and are specifically identified in the Person-Centered Plan.

This service includes educational materials, training programs, workshops and conferences that help the family caregiver to:

- 1. Understand the disability of the person supported;*
- 2. Achieve greater competence and confidence in providing supports;*

Excerpt MD1466.R00.00

State Service Innovations: Supporting Families and Caregivers: Examples of Recently Approved Services (4 of 10)

Maryland Family Support Waiver, continued

Family Caregiver Training and Empowerment, continued

- 3. Develop and access community and other resources and supports;*
- 4. Develop or enhance key parenting strategies;*
- 5. Develop advocacy skills; and*
- 6. Support the person in developing self-advocacy skills.*

Family Caregiver Training and Empowerment is offered only for a family caregiver who is providing unpaid support, training, companionship, or supervision for a person participating in the waiver who is living in the family home and does not include the cost of travel, meals, or overnight lodging as per federal requirements.

Other limitations also apply

Excerpt MD1466.R00.00

State Service Innovations: Supporting Families and Caregivers: Examples of Recently Approved Services (5 of 10)

District of Columbia: Parenting Supports

Parenting Support assists people who are or will be parents in developing appropriate parenting skills. Parents will receive training that is individualized and focused on the health and welfare and developmental needs of their child, as well as building necessary parenting skills. Close coordination will be maintained with informal and other formal supports. This service is available to expectant parents, and parents with physical custody, visitation rights or parents who are pursuing reunification with their child.

This service may include training of individuals who provide unpaid support, training, companionship or supervision to persons served through the waiver to reinforce strategies provided to the person served.

Additional limitations and guidelines apply.

Excerpt DC0307.R04

State Service Innovations: Supporting Families and Caregivers: Examples of Recently Approved Services (6 of 10)

Minnesota Elderly Waiver 0025.R08.01

Family caregiver services provide training, education, coaching, and/or counseling for caregivers who provide direct and on-going services to a participant. This may include a parent, spouse, children, relatives, in-laws or other informal caregivers. This service does not provide training and counseling to people who are employed by or volunteer through an organization that is paid to care for the participant.

Excerpt MN 0025.R08.01

State Service Innovations: Supporting Families and Caregivers: Examples of Recently Approved Services (7 of 10)

Minnesota Elderly Waiver R025.R08.01, continued

Family caregiver services, continued

Training and education:

Training and education includes individual or group instruction sessions about treatment regimens, disease management, direct care skills, and the use of equipment and technology to maintain the health and safety of the participant. It may also include education about caregiver roles, family dynamics, self-care skills and dealing with difficult behaviors, and other areas as specified in the support plan to improve health and well-being of the caregiver and care provided for the participant. Training and Education service pays for the costs of training or conference registration fees for family caregivers.

Excerpt MN 0025.R08.01

State Service Innovations: Supporting Families and Caregivers: Examples of Recently Approved Services (8 of 10)

Minnesota Elderly Waiver R025.R08.01, continued

Family caregiver services, continued

Coaching and counseling with assessment:

Coaching includes an individualized person-centered service intended to equip the caregiver with knowledge, skills and tools to become a stronger caregiver capable of self-directed care. Coaching includes an assessment of the caregiver's needs and strengths, development of a support plan with goals for the caregiver, skills development, (i.e., self-care skills, techniques for managing difficult behaviors), problem solving (i.e., family dynamics or family meetings, developing an informal support network), coaching, and ongoing support to reach established goals. Caregiver consultants are trained in memory care support (e.g, Advanced Dementia Capability Training and REACH (Resources for Enhancing Alzheimer's Caregivers Health) Community.

Excerpt MN 0025.R08.01

State Service Innovations: Supporting Families and Caregivers: Examples of Recently Approved Services (9 of 10)

Minnesota Elderly Waiver R025.R08.01, continued

Family caregiver services, continued

Counseling offers professional consultation and assessment to assist caregivers in making decisions and solving problems related to their caregiving role. Counseling includes identification of the caregiver's needs and preferences, development of an individualized approach and plans, family counseling, conflict resolution, and problem solving or guidance directly related to providing care to the participant.

Excerpt MN 0025.R08.01

State Service Innovations: Supporting Families and Caregivers: Examples of Recently Approved Services (10 of 10)

Minnesota Elderly Waiver R025.R08.01

Family caregiver services, continued

Family Memory Care (FMC):

Family Memory Care is a coaching counseling service for family or informal caregivers living with [or] supporting a family member or friend with dementia. FMC includes assessment, education, plan development, coaching on strategies for coping with changes in personality and behavior, and finding resources. To participate in FMC, ...the primary caregiver [and the individual] attends two individual sessions and up to four family sessions with the FMC Consultant...

Excerpt MN 0025.R08.01

Services to Ensure Successful Community Transitions

State Service Innovations: Institutional Transition and Diversion Strategies: Considerations

Policy

Many states utilize the CMS core service definition to ensure that individuals returning to the community have both the case management supports needed and the items necessary to establish a community residence:

Community Transitions Services are non-recurring set-up expenses for individuals who are transitioning from an institutional or another provider-operated living arrangement to a living arrangement in a private residence where the person is directly responsible for his or her own living expenses.

CMS Technical Guide 3.6

State Service Innovations: Institutional Transition and Diversion Strategies: Examples of Recently Approved Services (1 of 4)

Core Service Definition – Transition Services, continued

Allowable expenses are those necessary to enable a person to establish a basic household that do not constitute room and board and may include: (a) security deposits that are required to obtain a lease on an apartment or home; (b) essential household furnishings and moving expense required to occupy and use a community domicile, including furniture, window coverings, food preparation items, and bed/bath linens; (c) set-up fees or deposits for utility or service access, including telephone, electricity, heating and water; (d) services necessary for the individual's health and safety such as pest eradication and one-time cleaning prior to occupancy; (e) moving expenses; (f) necessary home accessibility adaptations; and, (g) activities to assess need, arrange for and procure needed resources.

CMS Technical Guide 3.6

State Service Innovations: Institutional Transition and Diversion Strategies: Examples of Recently Approved Services (2 of 4)

Core Service Definition – Transition Services, continued

Community Transition Services are furnished only to the extent that they are reasonable and necessary as determined through the service plan development process, clearly identified in the service plan and the person is unable to meet such expense or when the services cannot be obtained from other sources. Community Transition Services do not include monthly rental or mortgage expense; food, regular utility charges; and/or household appliances or items that are intended for purely diversional/recreational purposes.

CMS Technical Guide 3.6

State Service Innovations: Institutional Transition and Diversion Strategies: Examples of Recently Approved Services (3 of 4)

NY Nursing Home Transition and Diversion Waiver Community Integration Counseling Services (CIC)

Community Integration Counseling Services (CIC) is an individually designed service intended to assist waiver participants who are experiencing significant problems in managing the emotional difficulties inherent in adjusting to a significant disability and/or living in the community. It is a counseling service provided to the waiver participant who is coping with altered abilities and skills, a revision of long term expectations, or changes in roles in relation to significant others. This service is primarily provided in the provider's office or the waiver participant's home.

Excerpt NY0444.R02

State Service Innovations: Institutional Transition and Diversion Strategies: Examples of Recently Approved Services (4 of 4)

NY Nursing Home Transition and Diversion Waiver Community Integration Counseling Services (CIC)

The service is designed for individuals experiencing significant problems in managing the emotional difficulties inherent in adjusting to a significant disability and living in the community. The efficacy of a treatment must be reviewed if successful intervention and significant progress has not occurred within two (2) years. At that time, alternative methods require consideration or continued services must be documented as a medical necessity. A transition plan will be implemented prior to the termination of services. Services may be extended in extraordinary cases with sufficient medical justification and upon review and approval of the RRDC.

Additional parameters and limitations apply.

Excerpt NY0444.R02

Money Follows the Person (MFP) Overview

The Money Follows the Person (MFP) Rebalancing Demonstration Grant assists states in **rebalancing** their Medicaid long-term care systems.

As of December 2018, states have self-reported that over **93,000** people with chronic conditions and disabilities have transitioned from institutions back into the community.

There are currently forty-three states and the District of Columbia participating in the MFP demonstration.

Money Follows the Person (MFP) Background

MFP was established through the Deficit Reduction Act of 2005 and was extended and expanded through the Affordable Care Act of 2010.

The Medicaid Extenders Act of 2019, the Medicaid Services Investment and Accountability Act of 2019 and the Sustaining Excellence in Medicaid Act of 2019 also included short-term funding extensions for the demonstration.

The total amount of funding for the program is approximately \$4 billion.

There is interest in Congress to continue the demonstration through a five year re-authorization of the program and appropriation of additional funding.

Money Follows the Person (MFP) Goals

The four main goals of MFP are to:

- Increase the use of home and community-based services (HCBS) and reduce the use of institutionally-based services;
- Eliminate barriers in state law, state Medicaid plans, and state budgets that restrict the use of Medicaid funds to let people get long-term care in the settings of their choice;
- Strengthen the ability of Medicaid programs to provide HCBS to people who choose to transition out of institutions; and
- Put procedures in place to provide quality assurance and improvement of HCBS.

Money Follows the Person (MFP) Innovations: Service Categories

The MFP demonstration was designed to allow states to promote innovation through the development of demonstration and supplemental services. The services available to MFP participants may be grouped into three categories according to how they are funded and defined by statute:

- **Qualified HCBS** - Services that Medicaid beneficiaries may receive regardless of whether they are or are not an MFP participant, and the services must be already available through either a waiver program or the state plan.
- **Demonstration HCBS** are allowable Medicaid services that are not currently included in the state's array of approved HCBS (i.e., they are not qualified services), and tend to be short-term services needed to assist individuals in adjusting to community living.
- **Supplemental services** are not typically reimbursable by Medicaid programs but facilitate a smooth transition.

Money Follows the Person (MFP) Innovations: Pre-Transition Service Examples

- **Consumer Choice Guides (Washington)** – Guides work exclusively with participants determined to have high needs by the transition coordinators and require additional planning supports.
- **Behavioral Health Transition Coordinators (Ohio)** - Specialists are assigned to MFP participants already linked to the behavioral health system, ensuring continuity of care and increasing the likelihood that participants will remain connected to the behavioral health community after their transition.
- **Residential and Personal Care Trials (Georgia)** - Participants have the opportunity to make trial visits to new community residences and to use personal care services on a trial basis before they make the transition.
- **Housing Counseling (Wisconsin)** - Housing counseling provides education and links participants to available housing-related resources.

Money Follows the Person (MFP) Innovations: Post-Transition Service Examples

- **Social Work/Counseling (Ohio)** - Services are provided as necessary to MFP participants, their guardian, caregiver, or families to maintain a stable and supportive environment for the individual.
- **Transitional Crisis Support (Mississippi)** - In-person crisis supports and services are available around-the-clock to individuals in the transition process to address behavioral health needs as participants adjust to their new environment.

Money Follows the Person (MFP) Innovations: Long-Term Service Examples

- **Team Behavioral Consultation (Nebraska)** - Staff are organized into highly specialized teams with behavioral and psychological expertise to provide on-site consultation when participants experience difficulties in their residential or work setting that arise from problematic behavior.
- **Community Ombudsman Program (Georgia)** - Specially trained representatives assist participants with advocacy strategies to help empower MFP participants to raise and resolve complaints related to their community-based services and supports.

Money Follows the Person (MFP) Innovations: Service Examples

Services offered in multiple states:

- **Housing Locator Assistance** - Support to help participants find affordable and accessible housing
- **Home Modifications** - Physical modifications to adapt a home to meet the needs of a person with a disability, including assistive technology or structural changes
- **General Technology** - Assistive technology or health and safety technology installation, maintenance, and training
- **Peer Counseling and Facilitation** - Connects MFP participants with peers who can encourage self-advocacy and independence

Key Strategies for Innovative Service Design

- Meaningful and ongoing stakeholder engagement – heavy emphasis on engaging with individuals with disabilities and their families
- Cross-Agency Collaboration
- Early engagement and partnership with CMS
- Defining success and measuring quality

Where to Find Help

- CMS Website:

<https://www.medicaid.gov/medicaid/hcbs/guidance/index.html>

- Engage with the Regional and Central Office staff

- Request TA:

<http://www.hcbs-ta.org/form/request-technical-assistance>

- For additional information:

<http://www.hcbs-ta.org>

For More Information

Innovations in Home and Community-Based Services: Highlights from a Review of Services Available to Money Follows the Person Participants

MFP Field Report by Victoria Peebles and Matthew Kehn of Mathematica Policy Research

(<https://www.medicare.gov/medicaid/ltss/downloads/mfp-field-reports-2014.pdf>)

Questions?