<u>**OPERATIONS MEMORANDUM**</u> **# 08-06-04**
Medicaid

SUBJECT: Money Follows the Person (MFP)
              Demonstration Project

TO: Executive Directors

FROM: Joanne Glover
              Director
              Bureau of Operations

<u>PURPOSE</u>

To provide an overview of the MFP demonstration project as well as the policy and procedure for authorization of Medical Assistance to identify those individuals participating in the MFP demonstration project. This policy is effective July 1, 2008.

<u>BACKGROUND</u>

Over the past several years, the Pennsylvania Department of Public Welfare's Office of Income Maintenance (OIM) and Office of Long Term Living (OLTL) have been working together to transition more individuals from Long Term Care (LTC) facilities to community-based settings. MFP is a federally-funded demonstration project, scheduled to run from July 1, 2008 through September 30, 2011, which will help states fund this initiative. MFP will provide enhanced federal funding of certain qualified services provided to individuals who transition back to the community under a Home and Community-Based Services (HCBS) Program. This program will have no effect on the type of services received under an HCBS Program, only how the services under an HCBS Program are billed. Individuals will not see any changes in the level of benefits and services they would have received in moving to a home and community setting before introduction of the MFP program. Providers will not see a change in how they provide services or how they bill for services. For billing purposes, MFP will be tracked in the Client Information System (CIS) through the addition of designated facility codes.

<u>DISCUSSION</u>

To qualify for the MFP program, an individual must currently be residing in an LTC facility, be eligible for HCBS in one of the six waivers mentioned below, and consent to take part in the MFP program. If eligible for the MFP program, a revised HCBS Eligibility/Ineligibility/Change Form (PA 1768) will be completed that provides the

MFP facility code as well as the appropriate HCBS waiver code and date services are to begin. The County Assistance Office (CAO) will authorize eligibility for an HCBS program according to current procedures and will enter the MFP facility code to ensure enhanced federal funding. An individual is eligible to take part in the MFP program for a maximum of 365 days while he/she is residing in the community. CIS will track the number of days the individual is eligible for the MFP program. After 365 days, eligibility for the program will end and CIS will automatically enter the discharge code 13. Discharge code 13 designates when eligibility for the MFP program ends. Entering of the discharge code 13 has no affect on the individual's continued eligibility for the appropriate HCBS Program. CIS will not allow the MFP facility code to be entered for more than 365 days.

When the caseworker closes the HCBS Waiver Program budget or deletes an individual with an MFP facility code, CIS will automatically enter the budget eligibility end date for the MFP program. Should an individual leave the MFP program and later return to an MFP eligible HCBS Waiver Program, CIS will take into consideration previous days used when determining the end date for MFP program eligibility.

NOTE: In order to be sure that individuals do not lose excess days of MFP eligibility, the CAO must process budget closures and individual deletes on a timely basis.

Enhanced federal funding is available for individuals receiving services in the following six HCBS Waiver Programs:

- PDA Waiver (38)
- Attendant Care Waiver (40)
- Independence Waiver (42)
- COMMCARE Waiver (59)
- Consolidated Waiver (77)
- OBRA Waiver (79)

The Program Office will complete the PA 1768, checking one of the MFP facility codes listed below for all MFP eligible individuals. The Program Offices include the Pennsylvania Department of Aging (PDA), OLTL, the Office of Mental Health and Substance Abuse Services (OMHSAS) and the Office of Developmental Programs (ODP). The PDA is responsible for the PDA Waiver. OLTL is the program office responsible for the Attendant Care, Independence, COMMCARE, and OBRA Waivers. ODP is responsible for the Consolidated Waiver.

In order to indicate enhanced federal funding, the correct MFP facility code must be entered.

- MFP participant living in a Domiciliary Care Home (16).
- MFP participant living in his/her own residence (17).
- MFP participant living with a family member (18).
- MFP participant living in another group setting with less than five people (19).

Program Office Procedures/Responsibilities Regarding the MFP Program

1. **Identify** an individual who is determined eligible for MFP.

2. **Explain** the MFP program to an individual in the process of transitioning from the LTC facility.

3. **Obtain** the signature on a consent form of an individual determined eligible for and interested in the MFP Program. The signed consent form verifies that the individual is medically eligible for MFP and willing to participate in the MFP Program.

4. **Notify** the CAO of an individual's eligibility for MFP through the completion of the PA 1768 (Attachment One).

CAO Procedures/Responsibilities to Authorize with the MFP Facility Code

1. **Review** the PA 1768 to verify that the individual has been identified as eligible for one of the HCBS Waiver Programs (waiver code indicated), and the MFP facility placement code.

2. **Authorize** an individual who is transitioning from an LTC facility to the community using the appropriate HCBS Waiver Program and facility placement codes according to the following steps:

   A. For an applicant currently open in an LTC category:

   - Access CAINDA through maintenance mode and enter a "Y" for "waiver code."

   - Enter the HCBS waiver code and begin date on CAMWAI.

   - Enter the end date and discharge code for the individual's previous institutionalization and an "N" to "explore LTC" on CAIFAC.

   - Enter the MFP placement code, MFP begin date, and an "N" to "explore LTC" on CAIFAC.

NOTE: The appropriate waiver category will open effective the processing date with both the HCBS waiver and MFP placement codes entered.

- Access CCISEL through clerical transactions to end date the 902Z TPL.

B. For an applicant currently open in an SSI category:

- Access CAINDA through maintenance mode and enter a "Y" for "waiver code."

- Enter the HCBS waiver code and begin date on CAMWAI.

- Enter the end date and discharge code for the individual's previous residence in an LTC facility and an "N" to "explore LTC" on the first line on CAIFAC.

- Enter the MFP placement code, MFP begin date, and an "N" to "explore LTC" on the second line on CAIFAC.

NOTE: The SSI category will remain open with both the waiver and MFP placement codes entered.

- Access CCISEL through clerical transactions to end date the 902Z TPL.

NOTE: The MFP begin date must be equal to or greater than the HCBS Waiver Program begin date.

NOTE: Do NOT enter an MFP indicator end date and discharge code unless a PA 1768 was provided showing that the individual left the MFP program. The end date and discharge code 13 will pre-populate with the date the individual's 365-day time limit will expire after transmitting off of the CAIFAC screen.

3. **Send** the appropriate notice of eligibility/ineligibility for the HCBS Waiver Program to all those listed below by entering the correct information on CAPROV:

- The waiver applicant and his/her representative.

- The local Program Office (name and address provided on the completed 1768).

CAO Procedures/Responsibilities When Closing an MFP Budget and/or Ending an MFP Facility Code

1. **Review** the PA 1768 for verification of termination of the MFP program and/or HCBS services.

   A. Individual remains eligible for waiver services but chooses to leave the MFP program:

      - Access CAINDA through maintenance mode and enter a "Y" for "facility placement code."

      - Enter the end date on CAIFAC with the appropriate discharge code and date of discharge.

      NOTE: Discharge code 13 is only used by the system for discharge due to expiration of the 365-day time limit.

      NOTE: No notice is generated or needed when an individual leaves the MFP program because there is no change in benefits or services.

   B. Individual is admitted to an LTC facility.

      - Access CAINDA through maintenance mode and enter a 'Y' for 'facility placement code'.

      - Enter the end date on CAMWAI with the appropriate discharge code and date of discharge.

      - Enter the end date on CAIFAC with the appropriate discharge code and date of discharge.

      - Close the waiver record and open LTC facility services according to current policy.

   C. Expiration of MFP time limit is reached for individuals currently open with MFP code 17, 18, or 19. Individual remains eligible for HCBS.

      - The end date and discharge code 13 were pre-populated by the system.

- No further action is required by the CAO.

D. Expiration of MFP time limit is reached for individuals currently open with MFP code 16 (residing in Domiciliary Care (DC) Home).

- A system-generated alert is set for 30 days before the time limit is reached for all MFP cases eligible with facility code 16.

- Once the alert is received, the CAO must review to determine if the individual intends to remain in the DC Home.

- If the individual intends to remain in the DC Home, the worker must change the facility code back to 75.

  Reminder: Due to system edits, action cannot be taken more than seven days in advance.

- If the individual does not intend to remain in the DC Home, the address needs to be updated in the system.

NOTE: If the non-SSI Medical Assistance budget in which an MFP individual participates is closed or the MFP individual is deleted from a record, and an MFP end date is not entered, the system will change the MFP end date to the budget eligibility end date. This system enhancement will ensure that no more MFP days than necessary are counted towards the individual's total days used.

NOTE: If the closure of an SSI budget results in the opening of a non-SSI Medical Assistance budget, the system will not end date the MFP facility code. In order not to use more days of MFP eligibility than necessary, the MFP facility code must be end dated as of the date of discharge.

Attachment One: Modified Form PA 1768

The attached PA 1768 will be used by the Program Offices to verify MFP eligibility. MFP codes were added to the Eligibility/Program Assessment Information portion of the PA 1768. CAOs should review all PA 1768s for verification of MFP eligibility as well as HCBS eligibility.

CAO Training

Staff Development has designed an e-learning module which is scheduled to be available beginning June 15, 2008. The module is posted "In the Spotlight" on the OIM Staff Development web page.

Completion of this module will be required to ensure that CAO staff is familiar with the program. Income Maintenance Caseworkers who work with applicants and recipients who need LTC benefits are required to complete the e-learning module on or before July 11, 2008. The e-learning module must be completed prior to enrolling an individual in the MFP program.

CAO management staff should monitor completion of the module at the Training Registration Inquiries link listed below and found on the OIM Staff Development home page in the Admin Resources drop-down menu.

http://164.156.53.247/Training%20Registration/Training%20Inquiries.asp

NEXT STEPS

1. Review this Operations Memorandum with appropriate staff.

2. Direct any questions to your Area Manager.

3. Retain this Operations Memorandum until further notice.

Attachment