

### Current vs. Future Comparison: A Snapshot

Topic	Until 12/31/2018	1/1/2019 and forward
MFP Name	NC Money Follows the Person (NC MFP) Demonstration Project	NC MFP will work with Stakeholders and a communications contractor to develop a new name
Roundtable Events	4 times per year with one in the east, one in the west, and two in Raleigh	Projected for three Roundtable Events in 2019 with locations to be determined
NC Community Transitions Institute	May – August Application-based and manager support / commitment required	No Changes
Lunch and Learn Webinars	2 <sup>nd</sup> Monday of every month from 12:00 – 1:30	2 <sup>nd</sup> Monday of every month from 12:00 – 1:00
Local Contact Agency (LCA) Function	MFP funded with contracted agencies	NC Medicaid is evaluating an efficient, streamlined method to meet the needs of individuals needing or utilizing LTSS
MDS Q Referrals	Referrals are submitted through the MDS-Q toll-free line (1-866-271-4894) and routed to Local Contact Agencies (LCA) to follow-up with individuals at the facilities.	NC Medicaid is evaluating an efficient, streamlined method to meet the needs of individuals needing or utilizing LTSS through the MDS-Q contact process.
Transition Coordination Function	MFP funded with contracted agencies	No Change
Minimum time in a facility before becoming MFP eligible	90 days (excluding Medicare Part A Rehab) (See <a href="#">Operational Protocol</a> Page 12 for more details)	No Change
Qualifying Facilities	Qualified facilities include acute care facilities; nursing facilities; Intermediate Care Facilities for Individuals with Intellectual / Developmental Disabilities (ICF/IID), or Psychiatric Residential Treatment Facilities (PRTF). For specific conditions	No change

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	regarding the facilities please see our <a href="#">Operational Protocol</a> on Page 12 and 13.	
Qualifying Residences	<p>A home owned or leased by the individual or the individual's family member;</p> <p>An apartment with an individual lease, with lockable access and egress, and which includes living, sleeping, bathing, and cooking areas over which the individual or the individual's family has domain and control; and</p> <p>A residence, in a community-based residential setting, in which no more than 4 unrelated individuals reside.</p> <p>(See <a href="#">Operational Protocol</a> Page 13 for details)</p>	No change
Level of Care Requirements	<p>Must meet Level of Care requirements for the HCBS program or service in which the individual will transition.</p> <p>(See <a href="#">Operational Protocol</a> on page 25 and 28 for details)</p>	No change
Application form	September 2015 Revised Edition	November 2018 Revised Edition
Application process	Anyone can submit	No change
Targeted and Key Housing	Priority Access for MFP participants	No change
CAP/DA Waiver	Priority Access for MFP participants	No change
Innovations Waiver	Priority Access for MFP participants	No change
<p>MFP Demonstration Services</p> <ul style="list-style-type: none"> <li>• TYSR/SCCB</li> <li>• Over-and-above</li> <li>• Pre-Transition Case Management</li> <li>• Transition Coordination</li> </ul>	<p>For specific details on each of the Demonstration Services see the MFP <a href="#">Operational Protocol</a> on pages 29-33.</p>	No change

## MFP Frequently Asked Questions (\*)

### Participant Benefits

**Demonstration Services:** For more specific details please refer to the [Operational Protocol](#) on pages 29-33.

- **Start-Up Funds (Transition Year Stability Resources/TYSR and Staff and Clinical Capacity Building/SCCB)**
  1. Will “Start-Up funds” (TYSR/SCCB) still be available?  
Yes. For any transition between now and through 2019 the beneficiary will be able to access up to \$3,000 in TYSR/SCCB Start-Up funds.
  2. Will the qualifying items for TYSR/SCCB change or be expanded?  
No. Qualifying items will not change.
- **Supplemental Environmental Support Service (a.k.a. “over-and-above”)**
  3. Will there be exceptions made to the “over-and-above” service?  
No. Over-and-above demonstration services will not change.
- **Pre-Transition Case Management**
  4. Will there be changes made to the pre-transition case management demonstration services process?  
No. Pre-Transition Case Management demonstration services will not change.
- **Transition Coordination Services**
  5. Will there be changes made to the transition coordination services?  
No. Transition Coordination demonstration services will not change.

### **Housing**

6. Will MFP applicants still get priority access to Targeted and Key housing?  
Yes. There are currently three specific populations that receive priority access to Targeted and Key housing units. These are: Transition to Community Living Initiative (TCLI) participants, MFP beneficiaries, and the homeless population. MFP will continue to be a priority population for access to Targeted and Key Housing programs.
7. Will there be a clarification as to who becomes first/second/third in the list of priority slots?  
The priority in Targeted and Key Housing units will remain the same. MFP participants are 2<sup>nd</sup> in the list for priority access to Targeted and Key units behind the TCLI participants. Apartment units that are fully accessible are based on need instead of waiting list.

## **Waivers and State Plan: Community Alternatives Plan for Disabled Adults (CAP-DA), Innovations, and Program of All Inclusive Care for the Elderly (PACE)**

8. Will MFP applicants still get priority access to CAP, Innovations, and PACE?  
Yes. In order for MFP applicants to transition to the community, the beneficiary will have priority access to an Innovations waiver, CAP-DA waiver, or PACE services.
9. Will there be any additional priority slots allocated for MFP Participants?  
No. At this time MFP will keep the same number of available slots.
10. When will the new Innovations Waiver year start?  
The Innovations Waiver amendment is currently in the comments period. The new waiver year will start once the approval process is completed.

### **Participant Eligibility and Application Process**

11. Will the MFP application process change?  
No. The application process will not change. An application will still need to be submitted to the MFP office which will be reviewed for eligibility.
12. Will the MFP application form change?  
Yes. The application form will be updated. An updated application will be available in November 2018. The current application will continue to be accepted for any applicant who applies between November 1 and December 31, 2018, however, we request that any new applications be on the updated form. Any applications received after January 1, 2019 must be on the updated application form.
13. Will the eligibility criteria change?  
No. The eligibility criteria for the program will not change. If CMS makes any changes to the program, MFP will notify our partners of any eligibility criteria changes.
14. Will the “qualifying facility” requirements change (e.g., Alternative Family Living arrangements/AFL, Adult Care Homes/ACH)  
No. The qualifying facilities will not change. For specifics regarding what is considered a “qualifying facility” please see the [Operational Protocol](#) on pages 12-13.
15. Will the “qualifying residence” requirements change?  
No. The qualifying residences will not change. For specifics regarding what is considered a “qualifying residence” please see the [Operational Protocol](#) on page 13.

16. Will there be a change in the number of days a beneficiary is required to stay in a facility before becoming eligible for MFP?

No. The number of days a beneficiary is required to stay in a facility before becoming eligible for the program will not change. If CMS makes any changes to the program, MFP will notify our partners.

### Operations

17. Will MFP still be in existence after December 31, 2018?

Yes. MFP will still be in existence and will continue to support transition coordination activity in NC until the services are incorporated into the Waivers or State Plan Services, or the services are incorporated into the broader Medicaid Managed Care programs.

18. Is MFP changing the name of the program?

Yes. Currently we're using "MFP 2.0" as our placeholder name. A RFP will be released in fall 2018 to identify a communications and marketing vendor. The selected vendor will review our current branding and make recommendations for a new name, based on feedback from our stakeholders. The new name should be announced in 2019.

19. Will the MFP Roundtable meetings continue?

Yes. The MFP Roundtable meetings will continue. The MFP Roundtable continues to be a vital part of the transitions process with collaborative communications, studies in successful transitions, and improving the service delivery system for NC citizens with disabilities.

20. Will MFP continue to offer professional development opportunities?

Yes. MFP will continue to offer a range of professional development opportunities, including the NC Community Transitions Institute. As North Carolina Medicaid transformation continues, professional development opportunities provided by MFP will be offered to ensure that consistent training is made available to all professional involved in the transitions process.

21. Will the MDS hotline still be utilized?

Yes. The MDS hotline (1-866-271-4894) will still be utilized.

22. Will MFP continue to fund the Local Contact Agency (LCA) function?

No. NC Medicaid is evaluating an efficient, streamlined method to meet the needs of individuals needing or utilizing LTSS.

23. Who will be funding MDS and LCA functions?

Medicaid through the work of the LTSS unit will fund the LCA function and the MDS hotline will be managed by the Medicaid LTSS unit.

24. Who will be performing the transition coordination function?



MFP will continue to partner with our contracted entities to perform the transition coordination function.

25. Will transition coordination functions be folded into waiver revisions?

The MFP Demonstration Project was intended to be a time limited program. The functions of the MFP Project were to be demonstrated to be effective and cost-saving. After more than 1,000 transitions using MFP, the services have proven to be cost saving to the Medicaid program. MFP has worked closely with DHHS leadership and waiver managers to incorporate services and supports developed under MFP into the Innovations waiver, CAP-DA waiver, and PACE services. For the next several years, MFP will continue to provide transition coordination services until they are incorporated into the Waivers or State Plan Services, or into the broader Medicaid Managed Care services.