

## FACTSHEET

### Division of Community Systems Transformation

## Money Follows the Person Rebalancing Demonstration (MFP)

### Project Overview:

The MFP Rebalancing Demonstration Program is designed to assist States with balancing their long-term care systems and help Medicaid enrollees transition from institutions to the community. The MFP Demonstration Program reflects a growing consensus that long-term supports must be transformed from being institutionally based and provider-driven to “person-centered” consumer directed and community-based. Identified objectives for the program are to:

- 1) Increase the use of HCBS and reduce the use of institutionally-based services;
- 2) Eliminate barriers and mechanisms in State law, State Medicaid plans, or State budgets that prevent or restrict the flexible use of Medicaid funds to enable Medicaid-eligible individuals to receive long-term care in the settings of their choice;
- 3) Strengthen the ability of Medicaid programs to assure continued provision of HCBS to those individuals who choose to transition from institutions; and,
- 4) Ensure that procedures are in place to provide quality assurance and continuous quality improvement of HCBS.

### Background:

The MFP Rebalancing Demonstration Program was authorized by Congress in Section 6071 of the Deficit Reduction Act (DRA) of 2005 and \$1.75 billion in Federal funds through fiscal year (FY) 2011.

Section 2403 of the Affordable Care Act provides an opportunity for those States that are presently participating in the program to continue building and strengthening their MFP Demonstration Programs and for additional States to participate. The law amends section 6071 of the DRA to make the following changes:

- 1) Extends the MFP Demonstration Program through September 30, 2016, and appropriates an additional \$450 million for each FY 2012-2016, totaling an additional \$2.25 billion. Any remaining MFP appropriation at the end of each fiscal year carries over to subsequent fiscal years and is available to make grant awards to current and new grantees until FY 2016. Grant awards shall be made available to the State for the FY in which the award was received and for additional FYs. As such, any unused portion of a State grant award made in 2016 would be available to the State until 2020.

Under the Affordable Care Act, individuals that reside in an institution for more than 90 consecutive days are now eligible to participate in the demonstration. However, one exception applies in the expanded definition of eligibility: days that an individual has resided in the institution for the sole purpose of receiving short-term rehabilitation

services that are reimbursed under Medicare are excluded and will not be counted toward the 90-day required period.

- 2) Additional funding is provided through 2016 for the National MFP Evaluation. The Affordable Care Act extends the DRA provision that a maximum of \$1.1 million per year shall be available for research and evaluation purposes and is part of the \$2.25 billion total noted above.

Total Funding for MFP Demonstration Grants: **\$4 billion**

### **Project Status:**

Currently, forty-three States and the District of Columbia have received awards to implement MFP Demonstration Programs. Through December 2010, it is estimated that over 12,000 individuals have returned to the community from participation in the MFP Demonstration Program. States participating in the MFP Demonstration are Arkansas, California, Colorado, Connecticut, Delaware, District of Columbia, Florida, Georgia, Hawaii, Idaho, Illinois, Indiana, Iowa, Kansas, Kentucky, Louisiana, Maine, Maryland, Massachusetts, Michigan, Minnesota, Mississippi, Missouri, Nebraska, Nevada, New Hampshire, New Jersey, New Mexico, New York, North Carolina, North Dakota, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, Tennessee, Texas, Vermont, Virginia, Washington, West Virginia and Wisconsin.

### **Technical Assistance:**

New Editions Consulting is the national contractor responsible for providing programmatic expertise in long-term care supports and services and quality management technical assistance to the MFP grantees. This contract also provides a mechanism for feedback to CMS and other entities contracting with CMS, for the purposes of research and/or technical assistance regarding the operational feasibility of the MFP program and in ensuring support for State initiatives toward system transformation and toward achieving a balanced infrastructure for long-term care.

### **Evaluation:**

The MFP evaluation includes ongoing assessment of MFP States' implementation progress and outputs and the quality of care and quality of life outcomes of MFP participants. The analysis focus is to evaluate the implementation, impact, and outcomes of the MFP program. The original contract was awarded in early 2007 and has been modified 3 times expanding its scope and level of effort. The contract modifications added the 2008 and 2011 MFP Grantees States to evaluation activities and incorporated DCST data measurement and analysis activities. Contract reports include:

- Reports from the Field: Targeted topic papers on critical MFP issues-3-4 per year;
- Summaries of the Grantee Web based report: every 6 months;
- State specific Data reports; and
- Adhoc CMS data and analysis reports, about one per quarter.

Please see the CMS.gov website for more information and downloads of the evaluation reports: [http://www.cms.gov/CommunityServices/20\\_MFP.asp#TopOfPage](http://www.cms.gov/CommunityServices/20_MFP.asp#TopOfPage)