



FACT SHEET FOR PROFESSIONALS

Information for administrators, discharge planners, case managers, and others who assist individuals moving to the community from an institution or nursing home

What is MFP?

Money Follows the Person (MFP) is a federal demonstration project that assists individuals with transitions from institutions and help states strengthen and improve community based systems of long-term care for low-income seniors and individuals with disabilities. MFP does this by giving states an enhanced federal reimbursement for the cost of services provided to individuals who enroll on a [Medicaid Waiver program](#) when they move to the community.

Who is eligible for MFP services?

New Jersey residents who are eligible for MFP:

- Have spent a minimum of three months (90 consecutive days) in a nursing facility, requiring long term care services, or a developmental center;
- Meet both the clinical and financial eligibility requirements for [Medicaid](#) for at least one (1) day prior to transition from the nursing facility or developmental center; and
- Transition to one of three CMS defined community residence types:
 - A home owned or leased by the individual or the individual's family member;
 - 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.
 - A residence, in a community-based residential setting, in which no more than four (4) unrelated individuals reside.
- Provide Informed Consent to participate in MFP;
- Are subject to the limitations and requirements of the Medicaid Waiver Program in which they enroll.

Who is NOT eligible for MFP services?

Individuals who are NOT eligible for MFP services are those who:

- Only require New Jersey Medicaid State Plan Services;
- Are assessed as appropriate for the New Jersey Medicaid Hospice Benefit;
- Are chronically mentally ill; or
- Are Eligible for the Medically Needy section of the New Jersey Medicaid program.

What is Medicaid, and what is a Medicaid Waiver?

Medicaid is a federal/state partnership created in 1965 to provide government funded health insurance for certain groups of low-income people, including people with disabilities. Medicaid pays for healthcare services such as doctor visits, prescriptions and hospital services. In addition, Medicaid also can provide more specialized services to people with chronic health conditions or disabilities. These are called “long term services and supports,” and they can include skilled nursing, personal care assistance, day programs, case management and supported employment.

When it began, Medicaid only paid for long-term care provided in nursing homes and large institutions, like developmental centers for people with developmental disabilities. In 1981, however, Medicaid created Home and Community-Based Services waivers, which allowed states to waive, or set aside, some of the rules for regular Medicaid. Most importantly, states were permitted to use Medicaid Waiver programs to help pay for long-term care services in the community. This helps individuals avoid institutionalization or move back into the community from an institution. It also helps support states’ efforts to build community-based systems of long-term care.

MFP works in conjunction with four of the five Medicaid Waiver programs that New Jersey administers. Individuals who meet the criteria for enrolling on one of these four Waivers also may be eligible for participation in MFP.

The four Waivers are:

- ***Community Care Waiver (CCW)***
- ***Community Resources for Persons with Disabilities (CRPD) Waiver***
- ***Global Options for Long-Term Care (GO)***
- ***Traumatic Brain Injury (TBI) Waiver***

What services are provided through the Medicaid Waiver programs?

Services are specific to the waiver you will utilize. When an individual enrolls on a Waiver, an interdisciplinary team that includes the individual, family members and/or their guardians, social workers, discharge planners and others will meet to decide what services the individual will need. The team then develops an individualized plan of care for the individual. Care (case) management services are always a part of that plan.

How long does MFP last for the individual?

Individuals eligible for a Waiver are able to enroll in MFP for a total of 365 days, or a period of one-year, after leaving an institution. This time does not have to be consecutive, so individuals who have moved to the community may return to an institution, if necessary, without forfeiting their ability to enroll again in MFP at a later date. However, individuals are only eligible to participate in MFP for a total of 365 days in their lifetime. This means, for example, if an individual is enrolled in MFP for 100 days before returning to an institution, he or she will have 265 days remaining once they return to the community. However, the satisfaction surveys will be conducted over a two-year period.

What changes when MFP ends?

Nothing changes for the individual. Individuals enroll in MFP and a Medicaid Waiver program at the same time. Their enrollment on the Waiver continues after their MFP participation ends, so all their services will remain in place. The only difference is that the state's federal reimbursement for providing those services will drop back to match the amount of reimbursement provided for non-MFP participants who are enrolled on the Waiver.

Does MFP require co-pays?

No. There are no co-pays in MFP.

How do I apply for MFP?

- **Developmental Center** residents and/or their guardians interested in moving to the community and receiving long-term support services should speak with a social worker at the developmental center.
- **Nursing facility** residents interested in moving to the community and receiving long-term support services should ask the social worker at the nursing facility to contact the appropriate regional office of Community Choice Options (CCO) at the state Division of Aging and Community Services to arrange for a visit from a Community Choice Counselor. The Regional offices are:
 - *Northern Regional Office*
Serving: Bergen, Essex, Hudson, Morris, Passaic, Sussex & Warren counties
973-648-4691
 - *Central Regional Office*
Serving: Hunterdon, Middlesex, Monmouth, Ocean, Somerset & Union counties
732-777-4650
 - *Southern Regional Office*
Serving: Atlantic, Burlington, Camden, Cape May, Cumberland, Gloucester, Mercer & Salem counties
609-704-6050

For additional information contact:

MFP Project Director: Joe Bongiovanni - (609) 631-6392, joe.bongiovanni@dhs.state.nj.us