An approach to providing person centered institutional transition services through multi-agency cooperation
Georgia’s MFP Plan

The Georgia Department of Community Health implemented Money Follows the Person on September 1, 2008. Through partnerships with the Department of Human Services, the Department of Behavioral Health and Developmental Disabilities, the Department of Community Affairs, and other state and local agencies and organizations, DCH seeks to transition 2,142 individuals from institutional setting to the community.
Georgia’s MFP Plan

Under the agreement with DHS/DAS, Options Counselors and Transition Coordinators working from the 12 regional Aging and Disability Resource Centers (ADRCs) facilitate transitions. These interagency agreements increase capacity and leverage the resources and expertise of multiple agencies.
The Role of Georgia’s ADRC’s

- ADRCs are the designated state referral source for MDS Section Q referrals – the section that allows individuals living in nursing facilities to express interest in learning more about living outside a nursing facility. Options Counselors work with MDSQ referrals and assist individuals with information and referral to MFP.

- Each ADRC may choose to operate these services within the ADRC, or contract those services out with another qualified organization.
Walton Options and the CSRA ADRC

History:

Walton Options began its relationship with the Central Savannah River Area Agency on Aging in 1996. At this time, a partnership known as Operation Independence was formed – funds from the AAA were granted to Walton Options to provide Home Modifications to seniors with disabilities in order to keep them living independently in their homes and communities. This project still exists today.
Walton Options and the ADRC Connection

- In 2006, Walton Options was chosen to serve on the newly formed CSRA ADRC Advisory Council.
- In 2007, Walton Options was asked to also serve on the fledgling State of Georgia ADRC Advisory Council, due to the longstanding and cooperative local relationship with the CRSR ADRC.
- The presence on these two councils allowed the CIL perspective of personal choice and independence to be reinforced with agencies less familiar with these terms and more prone to medical models.
Walton Options and the ADRC Connection

In 2008 Walton Options and the CSRA ADRC made a joint presentation at the International Conference on Aging, Disability and Independence on the Collaboration between CIL’s and ADRC’s.

The cooperative efforts between Walton Options and the ADRC fostered additional opportunities for program growth and funding that are in line with our CIL philosophy and provide additional opportunities for independence and life quality enhancements to our consumers.
Walton Options and the ADRC Connection

In 2012, Walton Options responded to and was awarded a grant from the ADRC to manage both the MFP program and the Options Counseling Program in the CSRA. With the funds we:

- Hired two full time Transition Coordinators
- Hired one full time Options Counselor
- Maintained one staff member at 50% FTE to manage the program
- Maintained one staff member at 25% FTE to handle financial services
The Interagency Transition Team

- In order to provide the best services possible, to solve problems with any transitions and to ward off future issues, a monthly meeting is held to discuss all current transitions (1-365 days) and any future transitions that may be coming up.

- We believe that for our program, these meetings are extremely valuable and necessary, as they enable all persons connected to transitions to meet face to face and discuss problems and successes and bring a true community approach to problem solving.
The Interagency Transition Team

The transition team consists of the following:

- MFP / ADRC Supervisor
- MFP/CIL Program Manager
- CIL Accountant (responsible for MFP billing)
- Transition Coordinators
- Options Counselor
- Ombudsmen
- CCSP/ICWP Waiver Services Provider
MFP Qualifiers

- Live in an inpatient facility (i.e. nursing home, hospital or intermediate care facility) for at least 90 consecutive days (short-term rehabilitative stays don’t count)
- Be a Medicaid beneficiary for at least one day prior to transition
- Meet institutional level of care
- Move into a qualified residence (home, apartment or group setting)
What MFP Can Provide

- Peer Support,
- Trial visits to the community with Personal Support Services,
- Household furnishings,
- Household goods and supplies (including one-time purchase of groceries),
- Moving expenses,
- Utility deposits,
- Security deposits,
- Transition supports (a case-by-case, catch-all category includes assistance with obtaining documents and locating roommates),
- Transportation (in addition to non-emergency medical transportation),
- Skilled out-of-home respite,
- Caregiver training,
- Ombudsman visits,
- Equipment and Supplies (DME and Assistive Technology not covered by Medicaid),
- Vehicle Adaptations, and
- Environmental Modifications.
MFP Processes within the CIL

- Referral for services is made by individuals, family members, nursing home staff and ombudsmen, typically.
- The Options Counselor visits the individual to outline their options both under MFP, or, if they do not qualify, then as an opportunity for a NHT through normal CIL channels.
- Once qualified, the person desiring to transition is assigned to a TC, who will work with the individual to manage the transition.
MFP Processes within the CIL

A view from the Transition Coordinator:

- Dawn Gould has served as a TC for 3 1/2 years. She worked first as a TC for the ADRC before moving over to Walton Options when the contract was given over to the CIL to manage.
Advantages of CIL Management

Increase Resources:

- Faster access to home modifications
- More access to peer support services
- Ability to utilize CIL services such as durable medical equipment program; assistive technology assessment; supports for ITP meetings and communications; advocacy support
- Ability to insure that transitions are following a person centered process
Challenges to CIL Program Management

- Fronting the funds for a transition services
- Waiting on reimbursements
- General fiscal management of the program
- Answering to several agencies (MFP, DAS, ADRC)
- Always being diligent that the transition is truly person centered, even when other agencies may not be following that philosophy the way we see it.
Contact Information

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