



GEORGIA DEPARTMENT
OF COMMUNITY HEALTH

MFP Planning & Policy Update



Presentation to: MFP Steering Committee/Stakeholder Meeting

Presented by: RL Grubbs



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Mission

The Georgia Department of Community Health

We will provide Georgians with access to affordable, quality health care through effective planning, purchasing and oversight.

We are dedicated to A Healthy Georgia.

Four Major Project Tasks



- Planning & Policy
 - Operational Protocol (OP) Ver. 1.6 revisions – submitted to CMS 7/13/2015
 - Policy & Procedures Manual (PPM) – updates in process
 - Project Forms and Letters Updated – released 6/1/2015
 - Project Sustainability Plan (PSP) – submitted 4/30/2015
- Project Communications
 - Steering Committee Meetings / Stakeholder Forums
 - Evaluation Advisory Team / Training & Employment Team
 - Sustainability Planning Workgroups – proposed
- Training & Employment
 - develop and deliver strategic, competency-based training plan, materials
 - Strategic Employment Initiative – collaboration with State Workforce Board
- Project Management (PM) – Charter, Project Plans, Requirements, Procurement, Risk



Policy – Operational Protocol (OP)



- Last OP Revision was February 2013 (Ver. 1.5)
 - Collection of requirements and change orders – Complete
 - CMS Process for OP Amendments
 - 1) Submission for review, 2) make required changes, 3) Resubmit
 - 1st submission – September 22, 2014
 - 2nd resubmit for review– December 15, 2014
 - 3rd resubmit for review – March 16, 2015
 - 4th resubmit for review– May 5, 2015
 - 5th resubmit for review– July 13, 2015
 - Prepare & Publish Final OP Version 1.6 - ???
 - Revised Forms and Letters released effective June 1, 2015

Current Forms and Letters (as of June 1, 2015) (Slide 1 of 5)

- Appendix B: MFP Services and Rate Table
 - Returned to Maximum Costs Per Service (Caps)
 - Returned to Total Pre-Discharge Max Cap of \$10,244
 - Returned to Total Post-Discharge Max Cap of \$26,420
- MFP ITP - Added text to Identify Service and Budget
 - Identify MFP Services that will contribute to barrier removal/goals/plan and complete:
 - MFP Service: _____; Budget Calculations: _____
 - MFP Service: _____; Budget Calculations: _____
 - Provide justification for MFP Services (Include in Part A): _____
 - ITP Q6, Q7, Q10 and Q11: (Refer to Screening Q36/DON-R)
 - Screening Establishes Eligibility/Need for MFP Service
 - ITP Establishes Goals Based on Person-Centered Planning

Current Forms and Letters (Slide 2 of 5)



- Authorization for MFP Transition Services
 - Added statement regarding individual service caps that cannot be exceeded
- Quote Form for MFP Transition Services
 - Removed SMS and added New Footnotes
 - 1. If the owner/landlord is not the MFP participant, a notarized document must be obtained from the owner/landlord giving permission for environmental modifications and home inspections. The notarized document must state that the owner/landlord gives the participant the right to live in the modified housing/unit for an extended period of time (i.e. the end of the lease or when the participants moves out, whichever comes first) after the modifications are complete. Further, the owner/landlord must allow the participant to live in the housing/unit before and after the home inspections are conducted.
 - 2. For vehicle adaptations, a notarized document must be obtained giving the owner's permission. It must include a statement giving the participant use of the vehicle.



Current Forms and Letters

(Slide 3 of 5)



- Request for Additional MFP Transition Service
 - Added Text
 - Complete this form - 1) if the initial budget for the transition service(s) was inadequate AND the service funding cap has not been reached, and/or 2) the transition service was not initially identified during transition service planning (i.e., after discharge to the community, the need for the additional transition service(s) listed below became apparent).
 - *When additional transition services are identified after discharge to the community, the planning document (ITP/ISP) must be updated to reflect these changes.
 - **Initial Amount Authorized plus ***Additional Amount Authorized together cannot exceed individual MFP service caps; see Appendix B: MFP Services and Rate Table.

Current Forms and Letters (Slide 4 of 5)



- MFP Sentinel Event Reporting Form
 - Added several new events that must be tracked per CMS
 - ***Hospitalization: Admit Date: _____ ,
 - ***Death,
 - ***Death due to abuse, neglect, or exploitation,
 - ***Death due to a breakdown in the 24/7 back-up system,
 - ***NOTE: These sentinel events also require the submission of the *MFP Participant Status Change Form* .

Current Forms and Letters

(Slide 5 of 5)



- MFP Participant (Enrollment) Status Change Form
 - Added - Original Date of Transition/Discharge (mm/dd/yyyy):
 - Under Reinstitutionalization, Added:
 - Admission Date: _____ and Discharge Date: _____
 - Separated Footnotes –
 1. When a MFP participant is readmitted (**reinstitutionalized**) into an inpatient facility for a period of 30 days or less, the participant remains enrolled in MFP. The reinstitutionalization must be reported with the admission and discharge dates. A reason must be provided for the reinstitutionalization.
 2. When a MFP participant is readmitted into an inpatient facility for a period of time greater than 30 days (31 days or more), the participant is considered **suspended** from MFP. During the suspension, MFP field personnel are required to continue monthly contact with the participant and report the participant's status. The suspended participant will be reactivated or re-enrolled prior to the completion of the MFP period of participation, back into MFP without re-establishing the 90-day institutional requirement.
 3. Upon discharge from the inpatient facility, the MFP participant **resumes their period** of participation for any remaining days up to the maximum of 365 days. No inpatient days are counted toward the total of the 365 days of MFP. MFP field personnel revise the ITP prior to discharge back into the community.
 4. When an MFP participant is suspended for 6 months or longer, the participant must be re-evaluated like a 'new' participant.



Project Sustainability Plan (PSP) – 7 Proposed Workgroups

- Transition Case Management (TCM)
- Transition Peer Support
- Transition Setup and Move-In
 - Security & Utility Deposits, Household Furnishings, Household Goods & Supplies, Moving Expenses, and Transition Support Services
- Transition Caregiver Outreach & Education
- Transition Adaptive Technology, Related Services & Supplies
- Transition Environmental Mods & Home Inspections
- Transition Supported Employment Evaluations



Project Sustainability Plan (SPS) – Proposed Workgroup Tasks

- Workgroups Discuss and Recommend -
 - Scope of Services (who, when, where, how, what is included and what is not included in service)
 - Provider Qualifications and Responsibilities (who can deliver the service and how it is delivered)
 - Submission Requirements for Providers Seeking Enrollment (general conditions of provider participation, staffing, management, records, reporting, assurances, expansion and termination procedures, etc.)
 - Provider Training and Continuing Professional Development Requirements



Questions? Contact Info



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