MA-3262

MONEY FOLLOWS THE PERSON

REVISED 02/16/22 – CHANGE NO. 02-22

Current Change Notice: 02-22

- Removed MA-3262.II.D., DMA determines MFP eligibility and enters the "MF" indicator
- Removed MA-3262.III.B.3., DMA removes the "NF" indicator upon MFP services being terminated

I. INTRODUCTION

Money Follows the Person (MFP) is a state project for individuals that are authorized in the Community Alternative Program (CAP), Innovations, Traumatic Brain Injury (TBI) or Program of All-Inclusive Care for the Elderly (PACE) who:

- A. Have lived in a hospital, skilled nursing facility or an immediate care facility for people with intellectual disabilities (ICF/IID) at least three months, AND
- B. Choose to move to a "qualified residence":
 - 1. A participant's own home or apartment,
 - 2. A family member's home or apartment, OR
 - 3. A group home with four or fewer people (only available in NC under the Innovations waiver)

Money Follows the person is time-limited for a period of 365 days.

II. REQUESTING MFP SERVICES

An individual requesting MFP services must submit an application to the MFP Statee Project Regional Transition Coordinator.

When the applicant/beneficiary (a/b) requests MFP services and the:

A. Individual is currently not Medicaid eligible

- 1. A Medicaid application must be submitted
- 2. Determine Medicaid eligibility under CAP, Innovations or PACE as appropriate

B. Individual is currently Medicaid eligible

- 1. Process as a change in circumstances
- 2. Evaluate the change for eligibility under CAP, Innovations or PACE.
- C. The Regional MFP Transition Coordinator coordinates and collaborates with the local agency during the Medicaid/MFP eligibility determination process.

III. CHANGES IN SITUATION

A. County Transfers

- 1. A MFP beneficiary, who moves from one county to another, remains MFP eligible
- 2. A PACE/MFP beneficiary who moves to another county may no longer be PACE and MFP eligible
 - a. When the new county is serviced by PACE, the beneficiary remains eligible for MFP services
 - b. When the new county is not serviced by a PACE entity
 - (1) Evaluate for CAP eligibility in the new county
 - (2) If found eligible for CAP, MFP eligibility may resume
- 3. A TBI/MFP beneficiary who moves to another county may no longer be TBI and MFP eligible
 - a. When the new county is serviced by Alliance Behavioral Health, the beneficiary remains eligible for MFP services
 - b. When the new county is not serviced by Alliance Behavioral Health
 - (1) Evaluate for other Medicaid programs
 - (2) Remove the beneficiary from the TBI program

B. Terminations

- 1. MFP participation terminates automatically after 365 days
- 2. MFP participation may terminate before 365 days for any of the following reasons:
 - a. Beneficiary returns to a facility for longer than 30 days and not for short-term respite as authorized by relevant waiver

- b. Beneficiary transitions to a residence that does not qualify for MFP
- c. Beneficiary is disenrolled from CAP DA, PACE or Innovations program
- d. Beneficiary chooses to disenroll
- e. Beneficiary's enrollment is terminated by the MFP State Project