

**LONG-TERM CARE INFORMATION FORUM
FEBRUARY 11, 2008
AGENDA**

- 9:00 WELCOME AND INTRODUCTIONS
Michael J. Head, Director OLTCSS
- 9:05 - LTC Initiatives Updates
10:20 * Medicaid Infrastructure Grant
Joe Longcor, Project Manager
* Self-Determination in Long-Term Care
Tari Muñoz, Project Coordinator
* Long-Term Care Connections
Nora Barkey, Project Coordinator
* MI Choice Waiver Expansion
James Schwartz, Director
Administrative Support and Contract
Development Section, Medical Services
Administration
- 10:20 Fiscal Year 2009 Long-Term Care Budget
10:50 Michael J. Head
- 10:50 - BREAK
11:00
- 11:00 - Nursing Facility Transition Services
12:00 Michael J. Head
Ellen Speckman-Randall, Nursing Facility
Transition Project Director

**LONG-TERM CARE INFORMATION FORUM
FEBRUARY 11, 2008
INDEX OF DOCUMENTS**

LTC Initiatives Updates

Medicaid Infrastructure Grant

Self-Determination in Long-Term Care

Long-Term Care Connections

MI Choice Waiver Expansion

Fiscal Year 2009 Long-Term Care Budget

Nursing Facility Transition Services

Michigan's Medicaid Infrastructure Grant (MIG Project)

A competitive employment grant for people with disabilities from
the Centers for Medicare & Medicaid Services
(CMS)

with funding provided to the Michigan Department
of Community Health (MDCH) Office of Long-Term
Care Supports and Services (OLTCSS)

Michigan MIG Overview

- MIG Mission: “Removing barriers to increase the competitive employment of persons with disabilities.”
 - MIG projects are authorized under Section 203 of the Ticket to Work and Work Incentives Improvement Act (TWWIIA) of 1999.
 - January 2005...CMS awarded MDCH/OLTCSS \$500,000 with repetitive annual continuation requests available through December 2010 for up to \$750,000 annually. No State or local matching funds are required.

MIG Overview Continued...

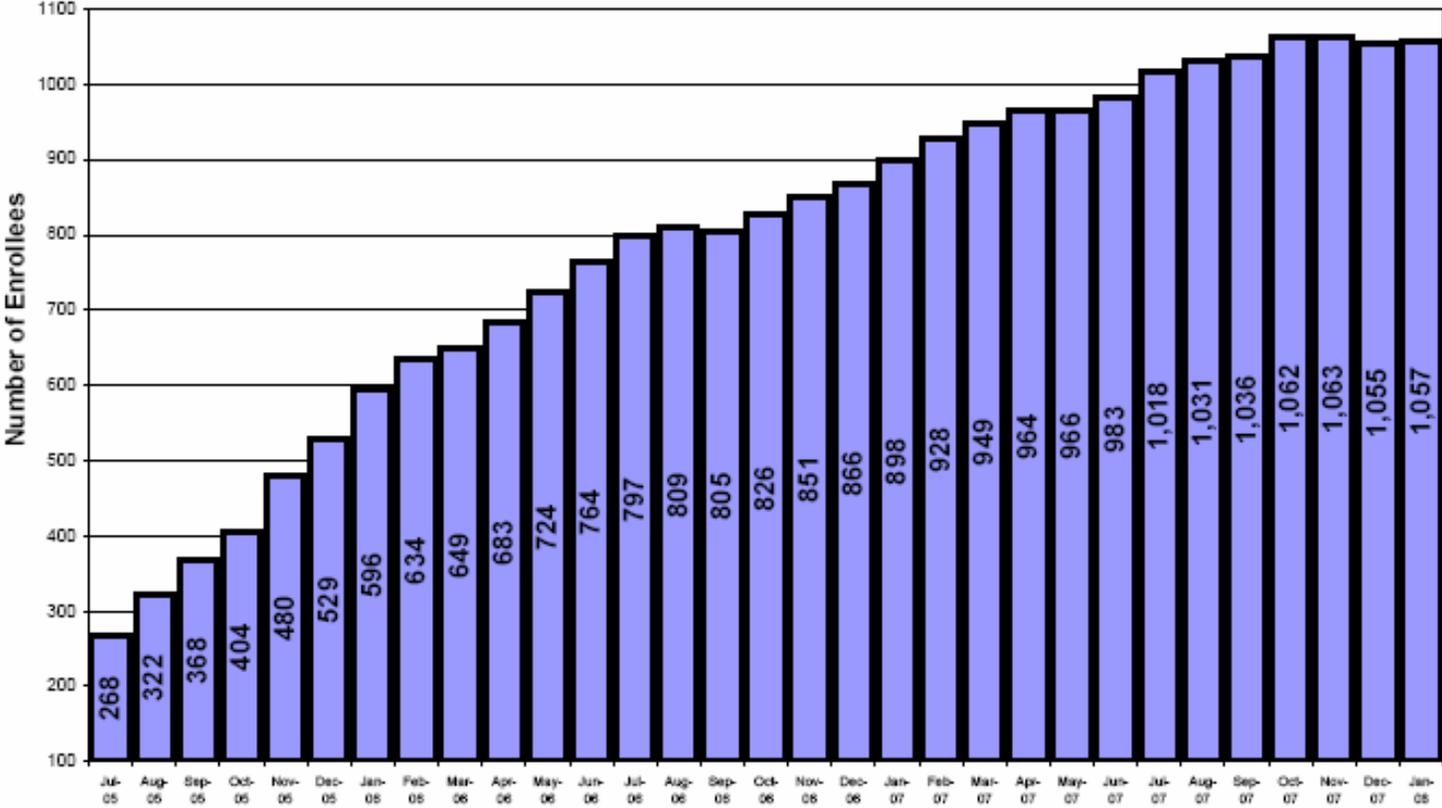
- Ongoing and Growing partnerships:
 - Individuals with disabilities, statewide advocacy organizations, Mi Job Coalition, Consumer Task Force, MRS, MCB/Division of Deaf & Hard of Hearing, DHS, SSA, MI Business Leadership Network, Local Community Mental Health Agencies, Veterans Administration & more.
- 2008 Michigan MIG award is \$712,000.00
- 40 MIG projects nationally totaling over \$41,000,000.00



MIG's Relationship to MI Freedom to Work/Medicaid Buy-in (FTW)

- July 2003 – Public Act No. 32/Enrolled Senate Bill No. 22
 - Cited as the “Michigan freedom to work for individuals with disabilities law.”
 - Championed by collaboration of advocates and agency partners.
 - FTW (Medicaid buy-in) led to applying for and receiving MIG.
- Key benefits to individuals:
 - Qualified FTW individuals remain Medicaid eligible even with unlimited income (*SGA still applies), have no limit on retirement savings, \$75,000 in other savings, & no spend down.
- Increases in FTW enrollment increase the potential for a larger MIG award to address more barriers to work.
 - MIG award may be up to 10% of the total Medicaid service costs for FTW participants.

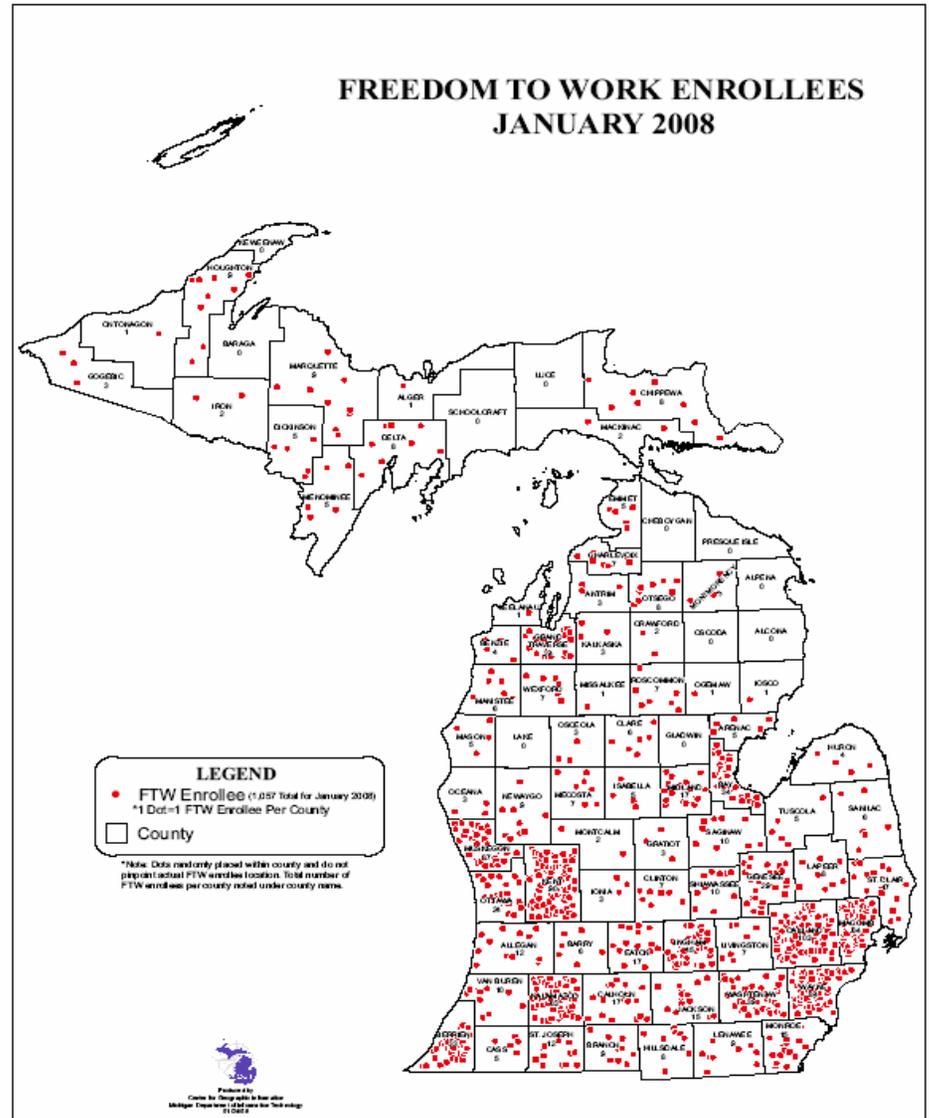
Michigan FTW Enrollees January 2008



FTW/MBI Participants

- Lead County Enrollment

- Oakland 103
- Kent 90
- Wayne 84
- Macomb 64
- Kalamazoo 62
- Ingham 45
- Washtenaw 39
- Muskegon 37
- Bay 34
- Berrien 33



FTW/MBI National Comparison

FTW Cost/Benefit Analysis
presented legislature - 2007

- Michigan Perspective
 - Over 90% of FTW/MBI enrollees have Medicare as primary insurance
 - Other demographics:
 - Average Age is 46.7
 - 62% women
 - 38% men
 - Of people that knew they were enrolled:
 - Monthly Earnings increased by \$88.03 (Annual increase of \$1056.36)
 - Monthly work hours increased by 12

Mathematica Report

- National Perspective
 - Over 70% of all MBI enrollees have Medicare as primary insurance
 - Other demographics:
 - Age of Participants-
 - 45% 21 to 44
 - 53% 45 to 64
 - Annual median earnings increased by \$2,582 (the average pre-enrollment earnings were \$4,844)

Successes

- Personal Care Services in the Workplace
 - Medical Services Administration Bulletin # 07-58
 - Subject: Home Help Services in the Workplace
 - Effective: December 1, 2007
 - **Personal care services may now be provided for the specific purpose of enabling a beneficiary to be employed.**
- MI Choice and Freedom to Work (FTW) Program
 - MI Choice Operation's Advisory Letter #19
 - Effective: February 2, 2007
 - **The July 1, 2006, MI Choice waiver amendment contains a provision that permits a MI Choice HCBSED waiver participant to also be concurrently enrolled in MDCH's FTW**

Successes

- “Supported Self-Employment 101” - A Handbook for Getting Started
 - Over 500 copies distributed to CMHs, VR, the Arc, Cils, MARO, and others
 - Now on the MIG CD
- Outreach Efforts focused on Work (9/05-12/07):
 - Total number of individuals met with – 11,500+
 - 6000 Professionals
 - 4100 Community members
 - 321 Agencies
 - FTW DVD - Over 400 copies distributed
 - MIG Resource CD
 - All major outreach materials available

Leading MIG Policy Challenges

- FTW
 - Unintended Unearned Income (DAC, Vets check, COLA, etc.)
 - Aging Out at 65
 - People becoming ineligible due to policy interpretation
 - Improving FTW eligibility
- Social Security Administration
 - Removing Substantial Gainful Activity (SGA) from the SSDI work requirement

MIG Current Initiatives

- Meeting with selected CMHs in Detroit/Wayne, Lifeways (Jackson/Hillsdale), Kalamazoo, Oakland, and Network 180 (Kent)
 - Recharging Supported Employment to increase employment outcomes
 - Reviewing and addressing policy barriers
 - Possible small MIG pilot funding for local initiatives

www.mibln.org

Disability Employment - Michigan Business Leadership Network - Microsoft Internet Explorer

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 Business Leadership Network
Michigan

Business Leadership Network
USBLN
DISABILITY AT WORK

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About MIBLN
News and Announcements
Chapters

The mission is to create a resource center that provides for the dynamic exchange of knowledge among public and private businesses, community leaders, as well as job seekers, employees and consumers with disabilities.

VISION

The vision is a business-led organization that serves as a resource center for employers who seek to understand, utilize, and benefit from the valuable resources that people with disabilities represent in both the consumer and labor markets.

Background

MIBLN Login

Username

Password

Login

Corporate Partners:




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www.db101.org

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Site Search GO

disability benefits 101

working with a disability in California

Esta página en español

Home | About | News | Glossary | Feedback | Forums | Benefits Planners | Newsletter | Site Map

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DB101 Close-Ups

- Benefits at 18

Calculators

- All Calculators
- Benefits to Work
- Job to Job
- School and Work
- Medi-Cal for the Working Disabled
- PASS

Life Situations

- Newly Diagnosed
- Youth & Disability
- Workforce Re-Entry
- Sudden Onset

Income Support

- State Disability Insurance (SDI)
- Social Security Disability Programs
- Short Term

"Will I be better off...?"

You'll Have More Money

Income/Expenses You'll Be Better

In this scenario, it is available cash over the

Your income may change to month. Looking at in 'More About Your In help you plan ahead.

Plan ahead with our Benefits Planning Calculators.

Features	First-Time User?	News
DB101 Benefits Calculators DB101 has benefits calculators for a number of different life	First-Time User Survey Help us improve the site by letting us know what you already	Fact Sheet: Augmenting Workplace Personal Assistance Services (PAS) through the use of Assistive

<http://www.disabilitybenefits101.org/planning/index.aspx>

Start | Novell GroupWise - ... | Mail From: Joe Long... | Mail From: Joe Long... | Mail From: Joe Long... | Disability Benefit... | 11:57 AM



Project SEARCH

Project Search Overview

Find a Service Alphabetically Project SEARCH

Overview

- ▶ Employment Program
- ▶ High School Transition Program
- ▶ Transition Clinic
- ▶ Health Care Training Program
- ▶ Program Replication and Dissemination Collaboration
- In the News
- Related Links
- Project SEARCH Supporters
- Awards and Recognition
- Contact Us
- ▶ Faculty and Staff

Mission

In 1995 the American College of Healthcare Executives [adopted a policy statement](#) that reads, in part, "...healthcare executives must take the lead in their organizations to increase employment opportunities for qualified persons with disabilities and to advocate on behalf of their employment to other organizations in their communities."

With this statement as a guiding principle, Project SEARCH serves people with disabilities through innovative workforce and career development. Through this process we educate employers about the potential of this underutilized workforce while meeting their human resource needs.

Project SEARCH provides employment and education opportunities for individuals with significant disabilities. The program is dedicated to workforce development that benefits the individual, community and workplace.

Project SEARCH Programs

Winner of the
2004 Secretary of
Labor's New
Freedom
Initiative Award



Project SEARCH was awarded the [2004 New Freedom Initiative award from the Department of Labor](#). This award recognizes businesses and people that have

- ▶ Clinical Studies
- ▶ Directions
- ▶ eCards
- ▶ Events
- ▶ Find a Health Professional / Researcher
- ▶ Jobs
- ▶ Newsroom
- ▶ Research

Quick Links For

- ▶ Families
- ▶ Health Care Professionals
- ▶ Researchers

Donate to Cincinnati Children's

As a not-for-profit hospital, we depend on your support. ▶

MIG Contact Information

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1st Floor
Townsend
- Lansing, MI 48913
- Ph: (517)241-1730
Fx: (517)241-2345
Ttd: (517)335-9295
longcorj@michigan.gov

Self Determination in Long Term Care, an option for MI Choice Participants

Long Term Care Forum,
February 11, 2008

SELF DETERMINATION IN LONG TERM CARE

- For MI Choice Participants
- Allows choice & control through the use individual budgets and hiring workers
- Three year grant from the Robert Wood Johnson Foundation

- *Tari Muñiz, Project Coordinator*
- *517.335.5671 munizt@michigan.gov*

Pioneering

- Four Area Agencies on Aging/Waiver Agents
- Burnham Brook
- DAAA
- Tri-County Office on Aging
- UPCAP



Foundation

- Training on Person Centered Planning
- Training on Self Determination options
- Develop Participant Education Materials
- Develop Technical Advisories
- Draft Policy & Practice Guidelines
- Develop Quality Indicators

Services

- Chore
- Personal Care
- Respite
- Home making
- Non-medical transportation
- Environmental adaptation
- Private Duty Nursing
- Community Living Supports
- Goods and Services
- Fiscal Intermediary

Fiscal Intermediary

- Neutral third party
- Contracts with Waiver Agent
- Readiness Review Process
- Responsible for paying expenses on behalf of participant
- Included employment costs

Statewide

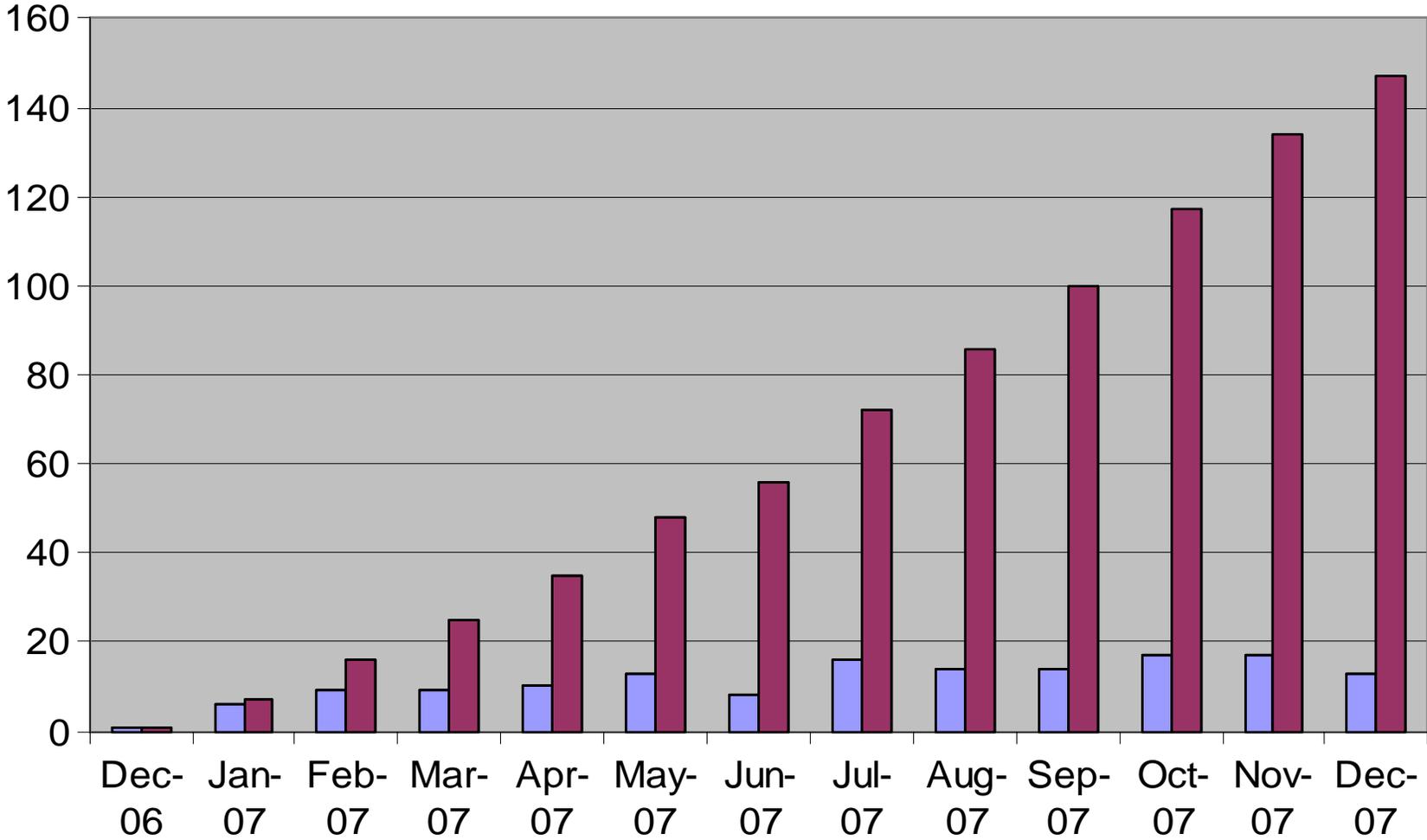
- Training remaining waiver agents
- Person Centered Planning
- Self Determination
- 3 Waiver Agents beyond the Pioneers are now enrolling
- All will be trained by the end of March

JoAnn



Self-Determination in LTC Enrollment

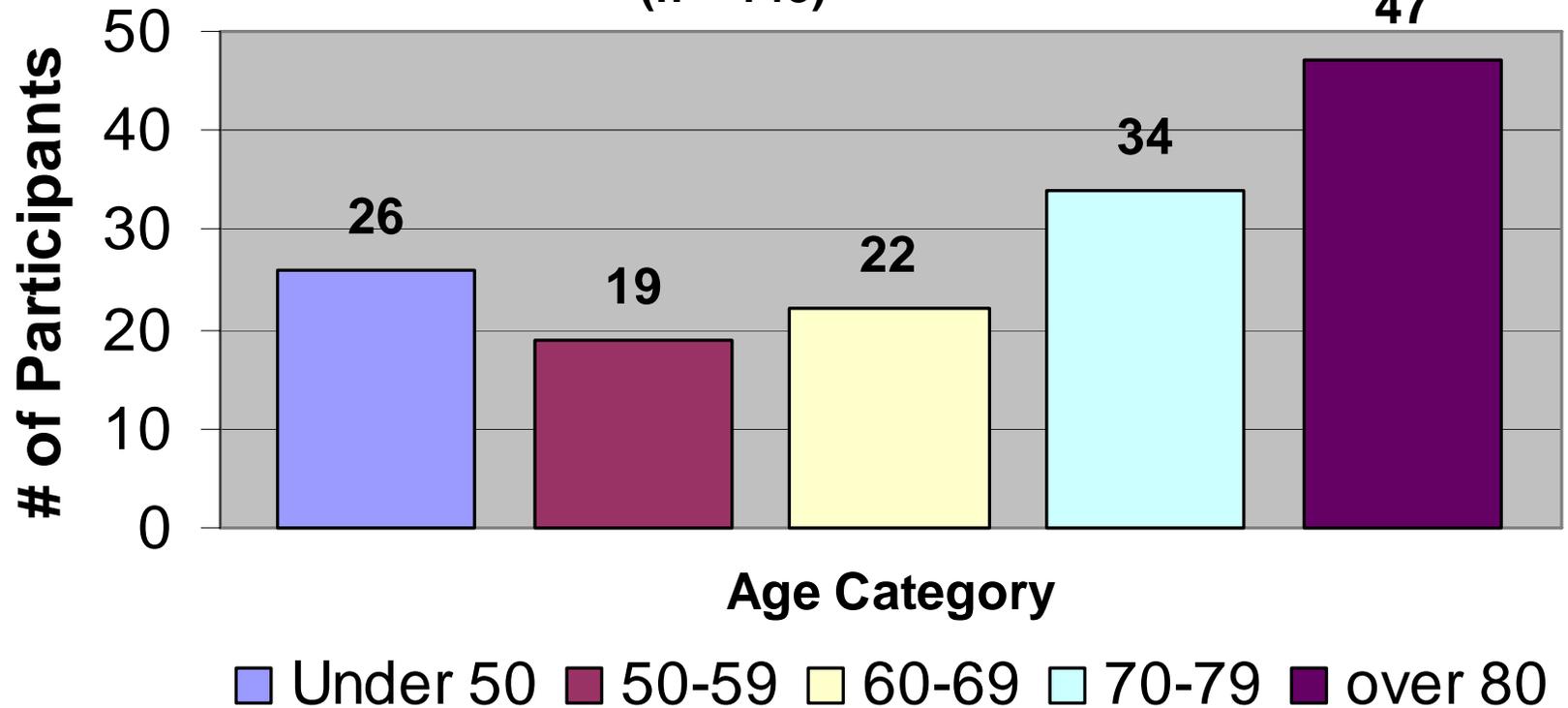
(n = 147)



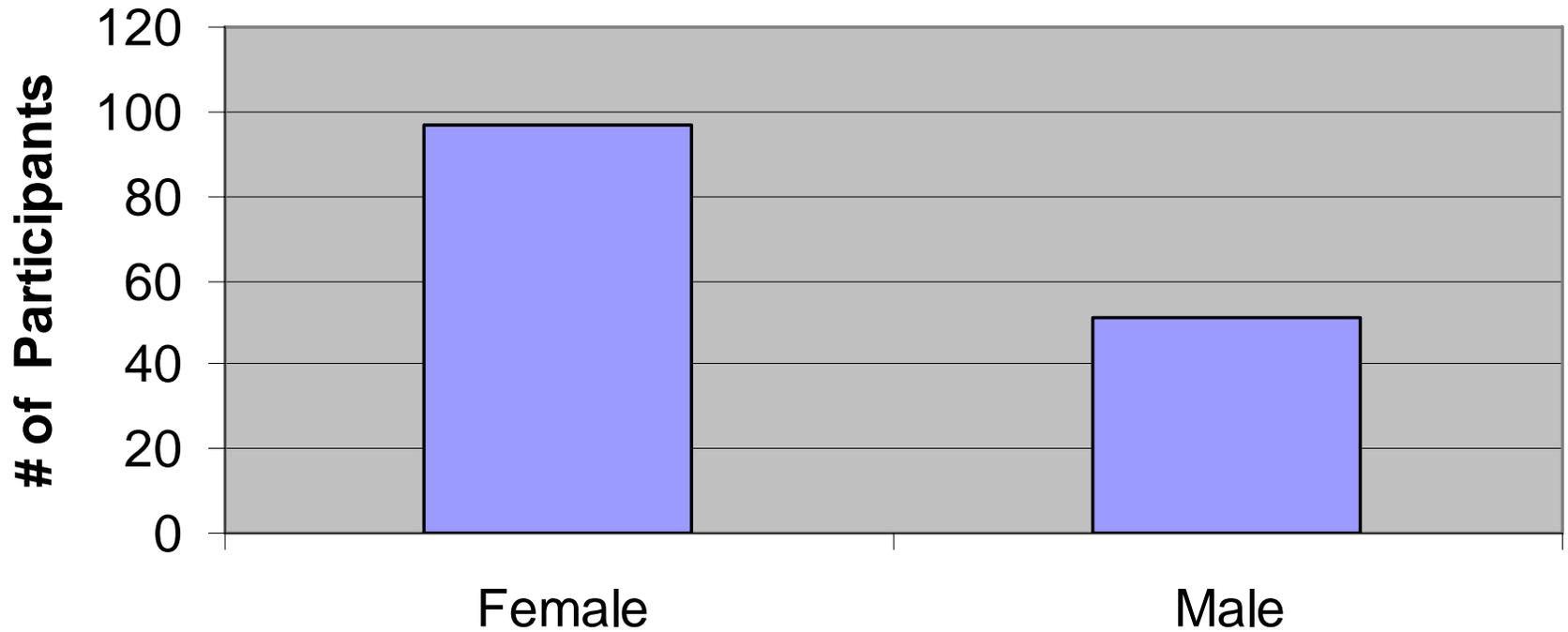
Monthly Enrollment Total Enrollment

Age Distribution of Participants

(n = 148)

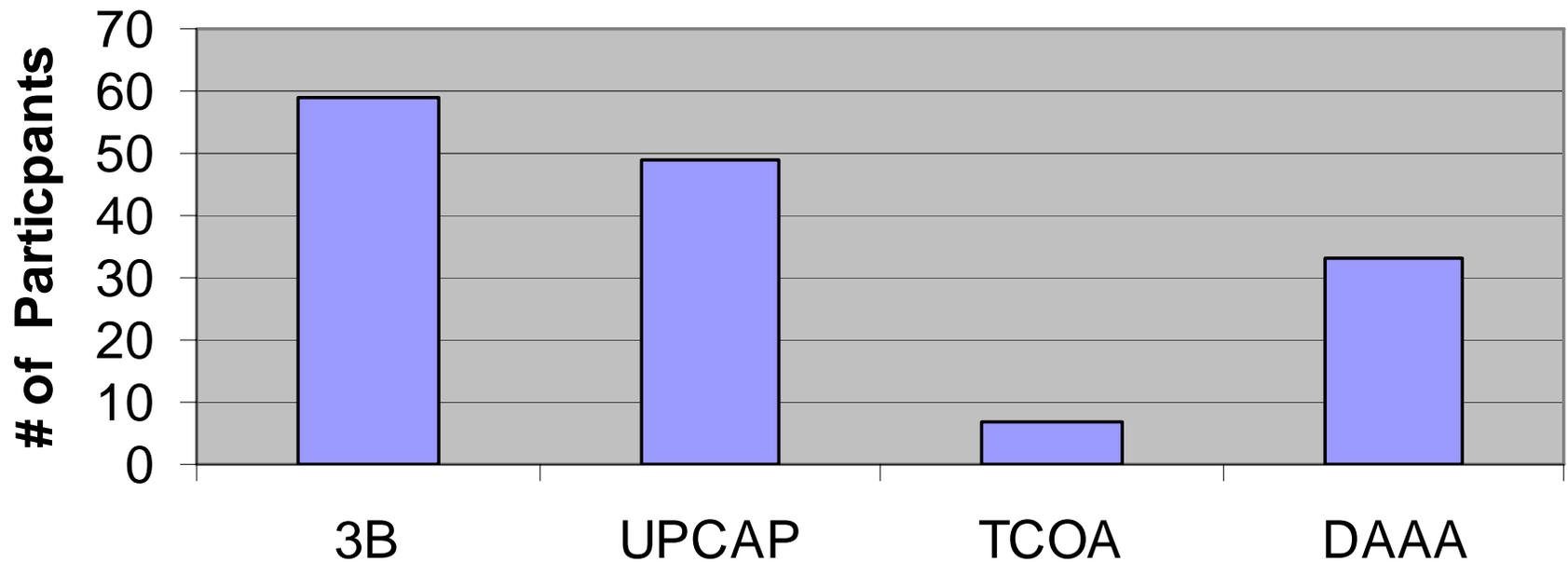


Recipients by Gender



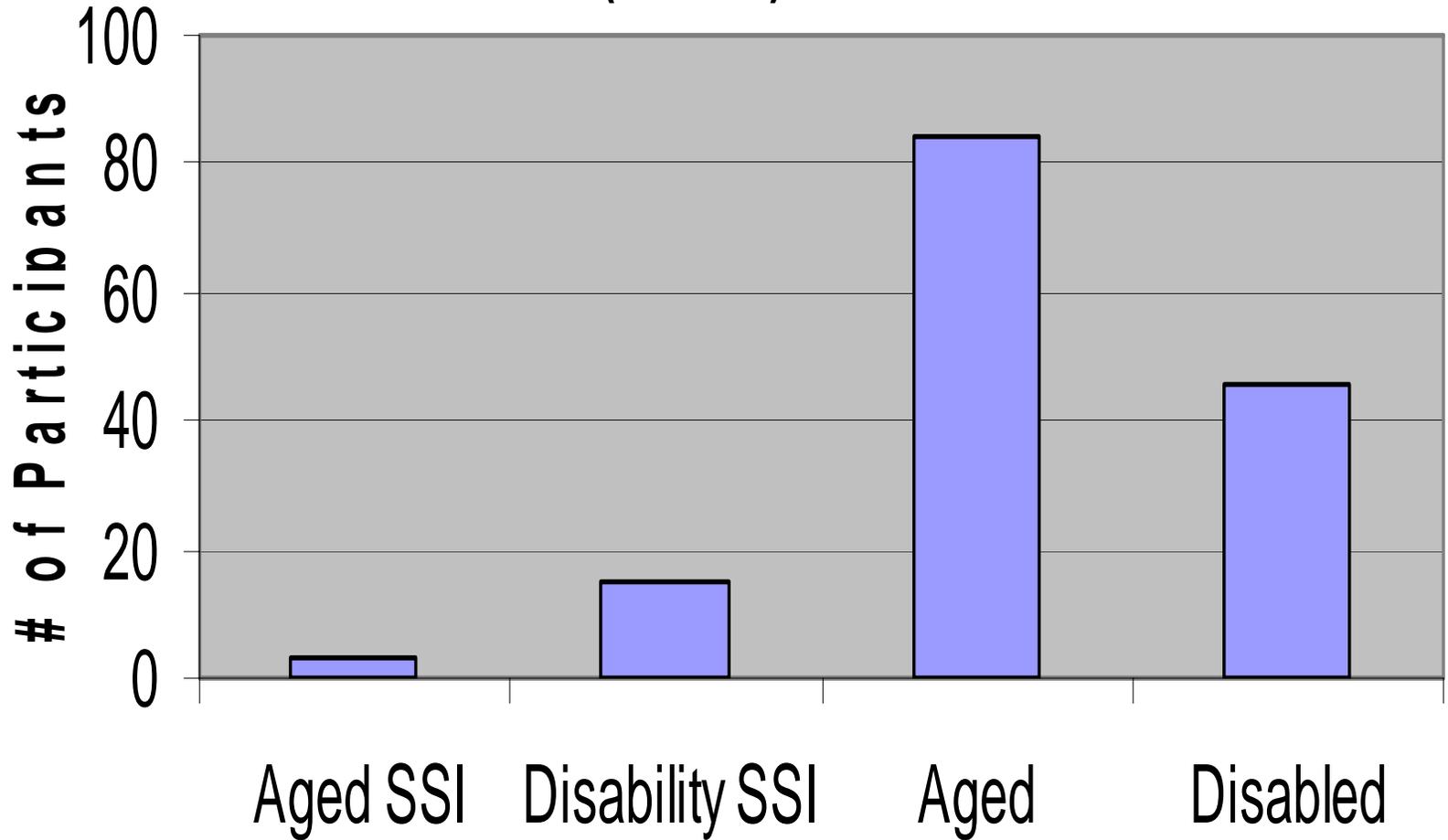
Number of Participants in Each Site

(n = 147)



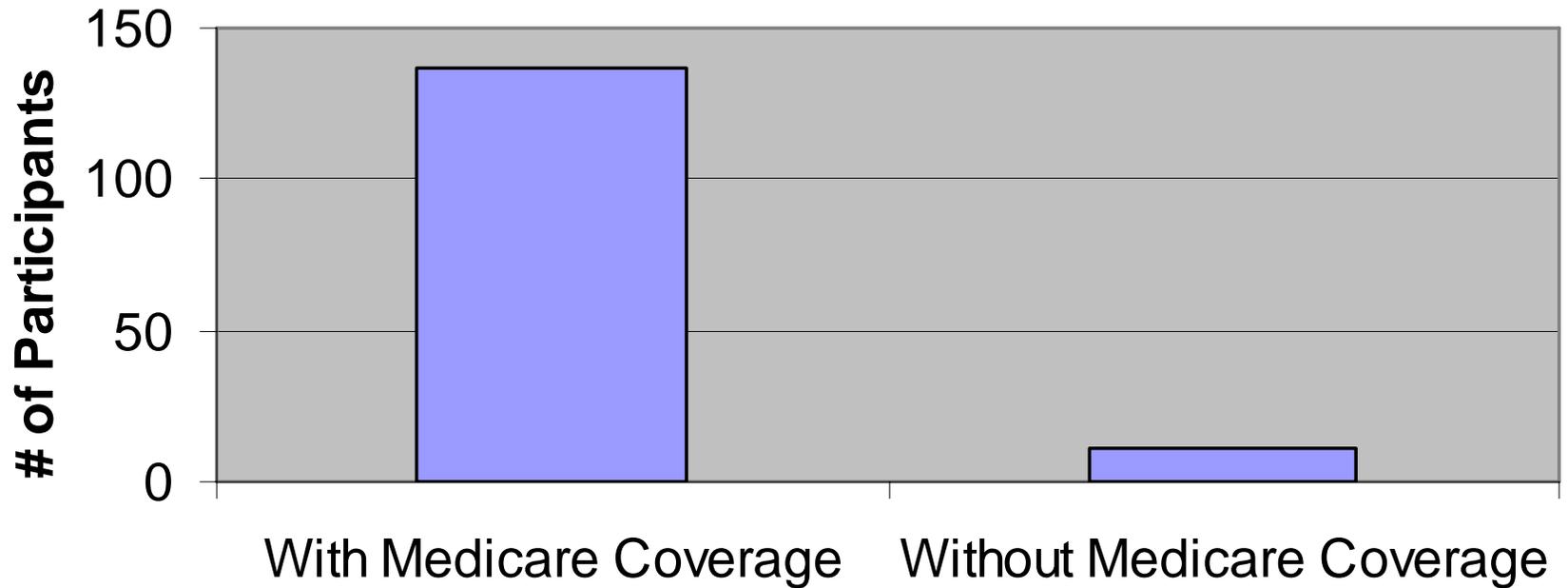
Program Eligibility Type

(n = 147)

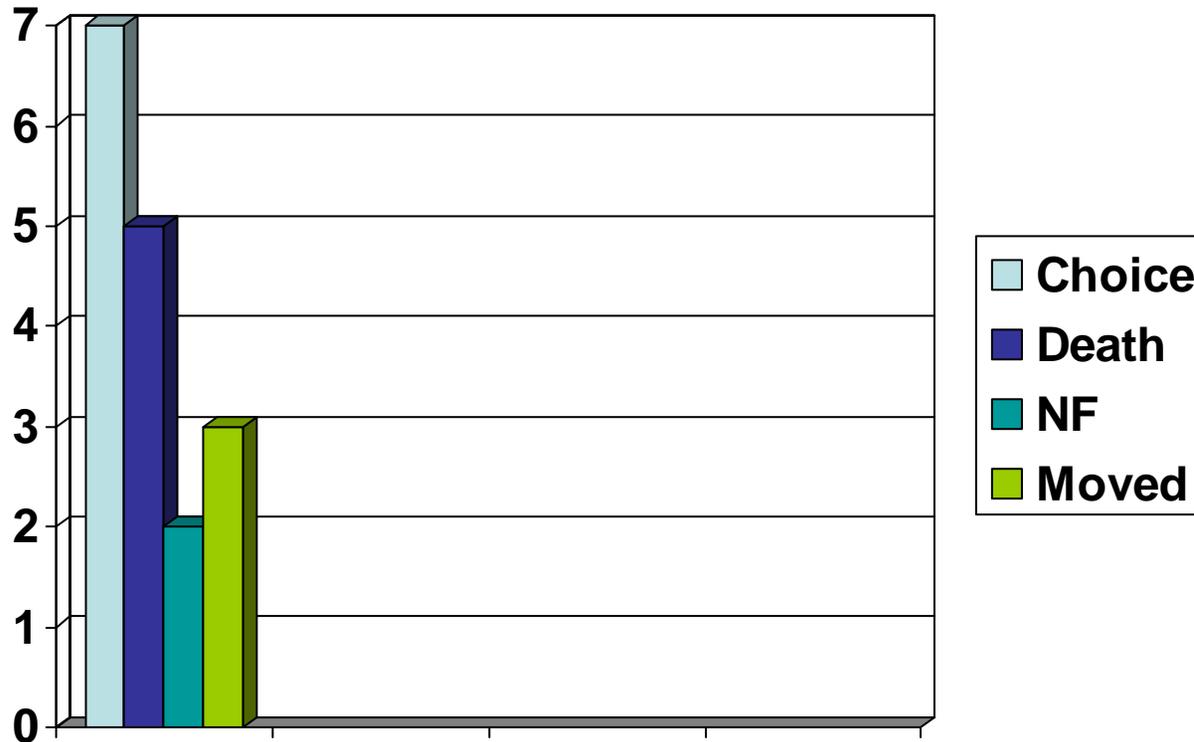


Medicare Eligibility

(n = 147)



Dis-enrollments



For More Information

- Tari Muñiz, Project Coordinator
- 517.335.5671
- munizt@michigan.gov

Michigan's Long-Term Care Connections

Office of Long Term Care
Supports and Services
Long Term Care Issues Forum
February 11, 2008

Michigan's Long Term Care Connection



Long-Term Care
Connection

Informed Choice

Streamlined Access

Consumer Control

So Far....

Governor's Long-Term Care Task Force: [May 2005](#)

Governor's Executive Order 2005-14: [June 2005](#)

Legislative Appropriation to create four demonstration projects resulting in contracts: [July 2006](#)

Information and Assistance: start up [October 2006 to January 2007](#)

PA 634: signed [January 2007](#)

Options Counseling: start up [January to April 2007](#)

Level of Care Determinations: [November 2007](#)

MIS system: Service Point/Bowman Systems: on going development

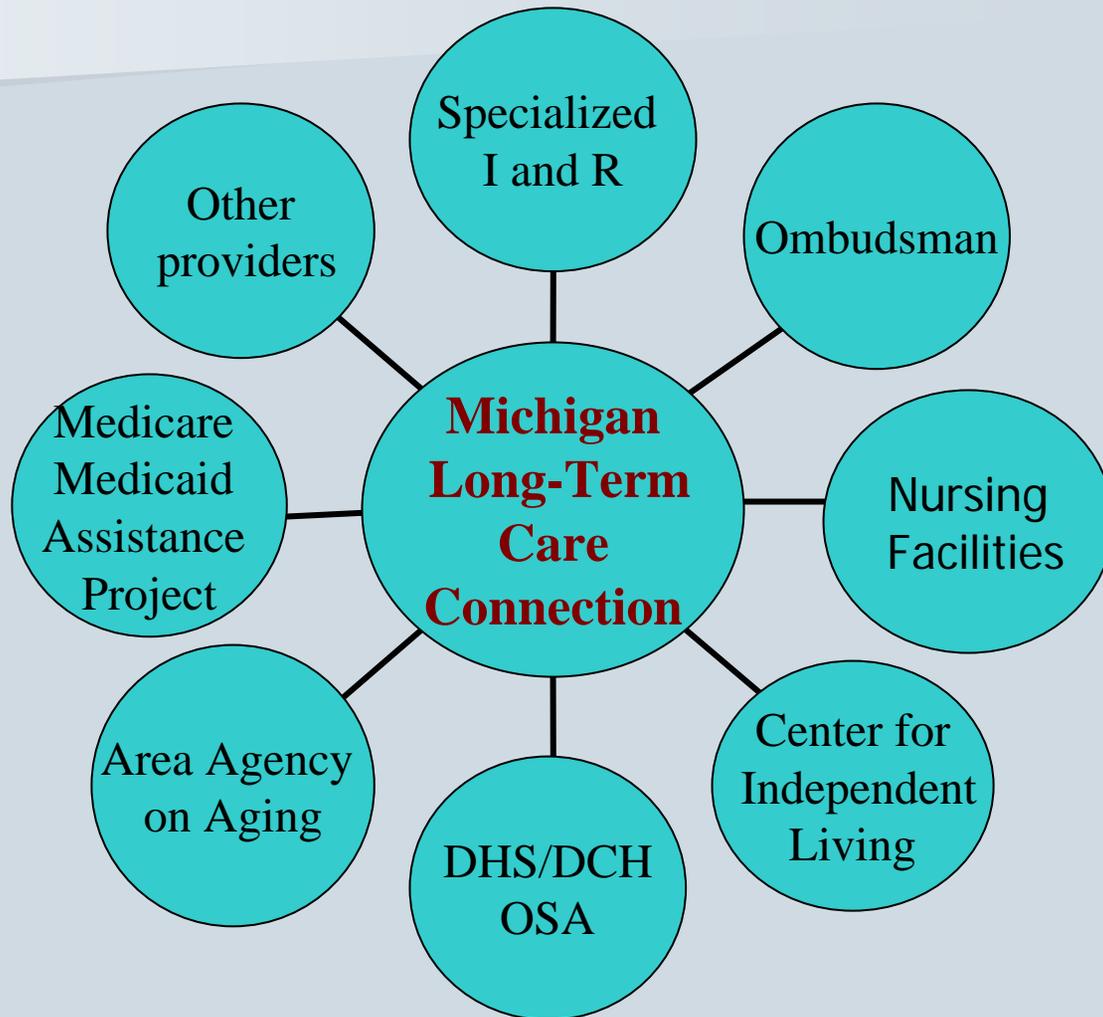
Public Act 634

The director of the department of community health shall designate and maintain locally or regionally based single point of entry agencies for long-term care that shall serve as visible and effective access points for individuals seeking long-term care and that shall promote consumer choice and quality in long-term care options.

Public Act 634

- Assess consumers' eligibility for all Medicaid long-term care programs
- Assist consumers in obtaining a financial determination of eligibility
- Assist consumers in developing their long-term care support plans through a person-centered planning process

The HUB



What do LTCC's do?

- Provide
 - *comprehensive information and assistance*
 - *options counseling*
 - *benefits counseling*
 - *transition assistance*
- Conduct and Coordinate
 - *functional eligibility determination*
 - *assist with financial eligibility application*
 - *create a plan using person centered approach*

Comparison to national

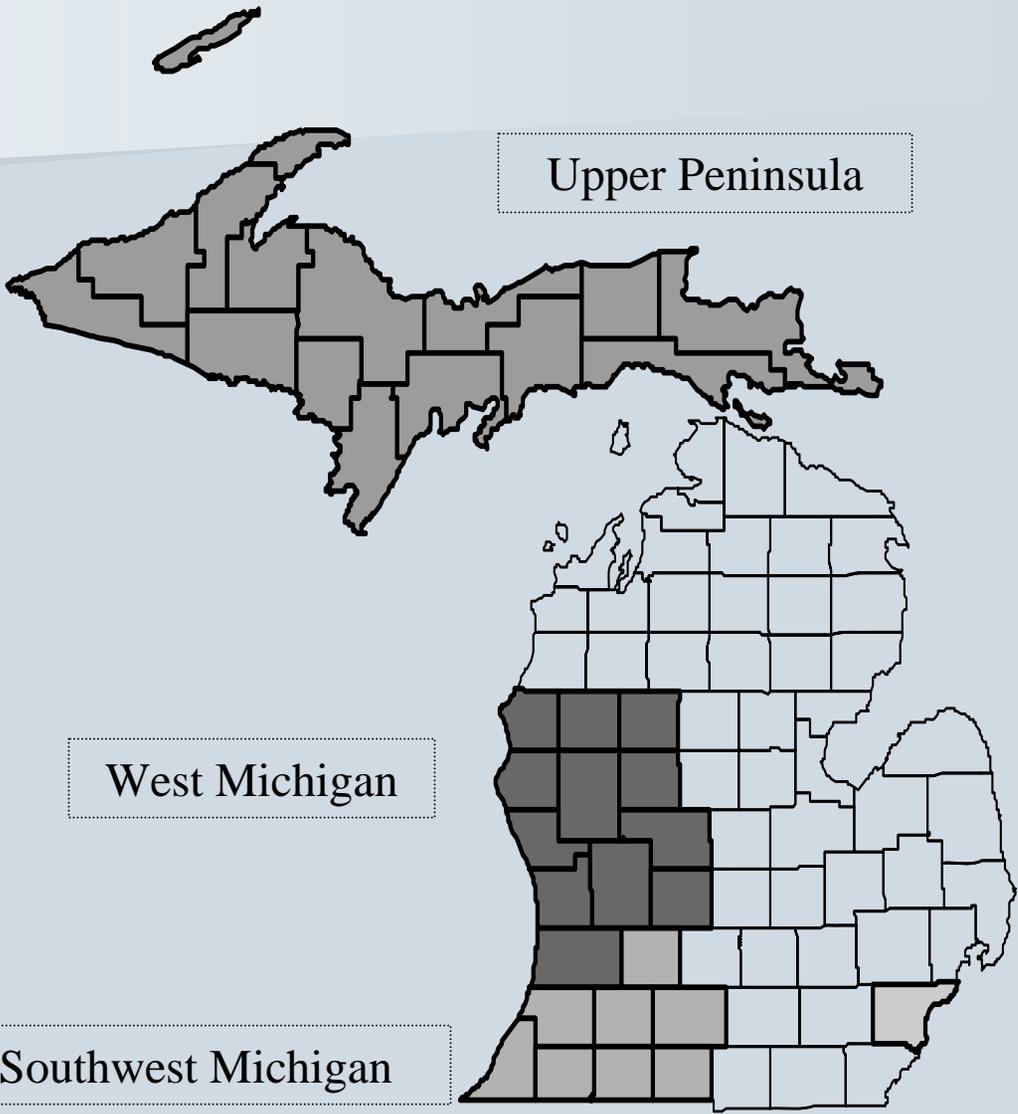
■ National

- 147 ADRC's servicing 28% of population
- ½ referred by critical pathway entities
- Half of the states have legislation
- 11 have state wide coverage
- 54% conduct LOCD
- 32% require AIRS Certification

■ Michigan

- 4 regional sites servicing 52% of population
- 53% referred by critical pathways
- Michigan PA 634
- Michigan serving 37 of 83 counties
- Michigan sites conduct LOCD's
- Michigan requires AIRS certification

SPE Regions



Upper Peninsula

West Michigan

Southwest Michigan

Detroit/Wayne
County

Four Demonstration Sites

■ Detroit

- Cities of Detroit, Grosse Pointe (GP), GP Farms, GP Park, GP Shores, GP Woods, Hamtramck, Harper Woods, Highland Park

■ Southwest Michigan

- Barry, Berrien, Branch, Calhoun, Cass, Kalamazoo, St. Joseph, and Van Buren counties

■ Western Michigan

- Allegan, Ionia, Kent, Lake, Mason, Mecosta, Montcalm, Muskegon, Newaygo, Oceana, Osceola and Ottawa counties

■ Upper Peninsula

- Alger, Baraga, Chippewa, Delta, Dickinson, Gogebic, Houghton, Iron, Keweenaw, Luce, Mackinac, Marquette, Menominee, Ontonagon, and Schoolcraft counties

LTCC Activities: January to September 2007

Service	SW	Detroit	UP	WM	Total
Info & Assistance	7,660	6,051	1,828	3,706	19,245
Community Education Participants	3,847	14,574	496	567	19,484
Options Counseling Cases	478	912	362	390	2142

LTCC Activities: October thru December 2007

Service	SW	Detroit	UP	WM	Total
Info & Assistance	2196	1652	675	1021	4897
Community Education Participants	346	495	303	81	1225
Options Counseling Cases	564	1743	727	604	3638

LTCC Activities

October thru December 2007

Service	SW	Detroit	UP	WM	Total
Resource Date Base	700	173	666	2,002	3,541
Transitions	17	26	6	18	67
Level of Care Determinations	454	492	485	548	1979
Partnership Agreements (NF/Waiver/Hos)	25/39	38/38 1/1	26/32 1/1 3/16	39/61 3/3	75% 100%

Michigan's Long-Term Care Connections

1-866-642-4582

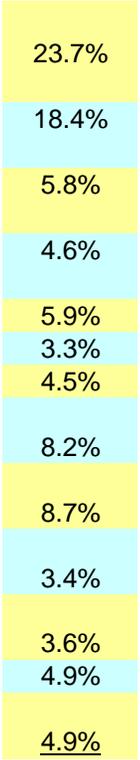
Nora Barkey, Project Coordinator
barkeyn@michigan.gov

MI CHOICE HCBS ED ALLOCATION OF \$5000000.

Agents	FY2005 Contract Amount	Groupers	% of contract amount by grouper	Regional allocation by formula	Individual Agent's Allocation of \$5,000,000.
1A	\$9,850,734.25	1	70.6%	\$1,182,871	\$835,429.54
1C	\$1,796,908.00	1	12.9%	\$1,182,871	\$152,393.72
22	\$2,299,851.00	1	16.5%	\$1,182,871	\$195,047.74
1B	\$11,723,413.75	2	75.8%	\$920,831	\$698,279.13
23	\$3,736,425.00	2	24.2%	\$920,831	\$222,551.87
BB3*	\$4,230,148.96	3	63.1%	\$289,683	\$182,671.23
26	\$2,478,090.00	3	36.9%	\$289,683	\$107,011.77
BB4*	\$2,939,595.04	4	34.9%	\$228,048	\$79,523.52
4	\$5,490,223.00	4	65.1%	\$228,048	\$148,524.48
5	\$3,389,519.00	5	100.0%	\$294,562	\$294,562.00
2	\$3,980,931.00	6	100.0%	\$166,987	\$166,987.00
6	\$6,594,167.94	7	100.0%	\$226,786	\$226,786.00
7	\$4,935,610.00	8	57.8%	\$409,848	\$237,078.43
27	\$3,596,798.00	8	42.2%	\$409,848	\$172,769.57
8	\$6,036,065.00	9	60.1%	\$436,185	\$262,343.13
HHS8*	\$3,999,802.90	9	39.9%	\$436,185	\$173,841.87
9	\$2,516,973.00	10	60.8%	\$171,614	\$104,291.46
29	\$1,624,764.00	10	39.2%	\$171,614	\$67,322.54
10	\$2,471,217.00	11	52.6%	\$179,125	\$94,245.97
30	\$2,225,607.00	11	47.4%	\$179,125	\$84,879.03
11	\$6,409,696.00	12	100.0%	\$246,627	\$246,627.00
14	\$5,342,380.51	13	68.5%	\$246,833	\$169,193.91
HHS14*	<u>\$2,451,492.10</u>	13	31.5%	\$246,833	<u>\$77,639.09</u>
\$100,120,412.45					\$5,000,000.00

* FY2002
cont amts

% of Total Allocation



100.0%



DEPARTMENT OF COMMUNITY HEALTH
**OFFICE OF LONG-TERM
CARE SUPPORTS & SERVICES**
Overview of the LTC Portion of the
FY 09 Executive Budget

Long Term Care Forum
February 11, 2008

1



LTC Budget Policy

- FY 08 LTC appropriation is nearly \$2.0 billion
- MDCH has sought to apply principles from LTC Task Force and federal guidance
 - Support consumer choice options
 - Money Follows the Person models
 - Assist with nursing facility transition when that is consumer's choice
- FY 09 offers no opportunity to expand overall long-term care spending with GF revenue
- Michigan's FFP match rate from CMS has increased to 60%

2



FY 09 Executive Recommendation

- Supports redirection of resources based upon projected savings during the fiscal year
- Unified LTC appropriation allows flexibility to reinvest projected savings on a real-time basis
- Supports “rebalancing” by allowing expansions in certain community options that are offset by displacement in NF care

3

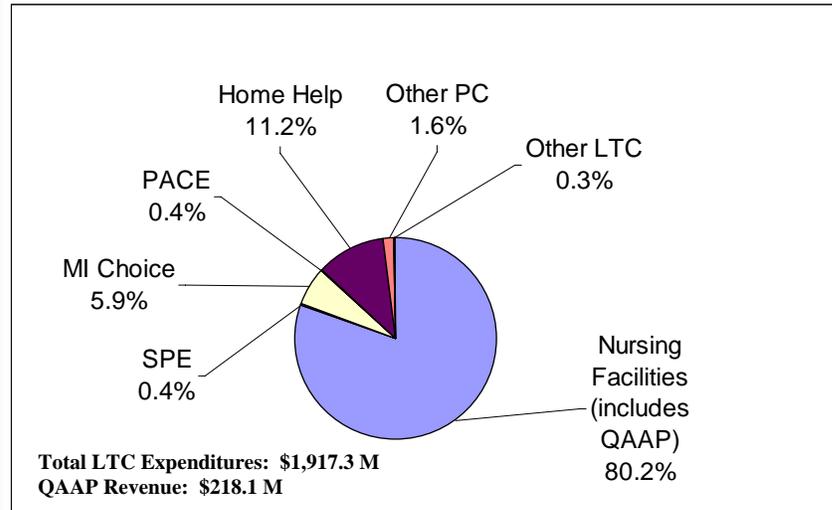


Intended Outcomes

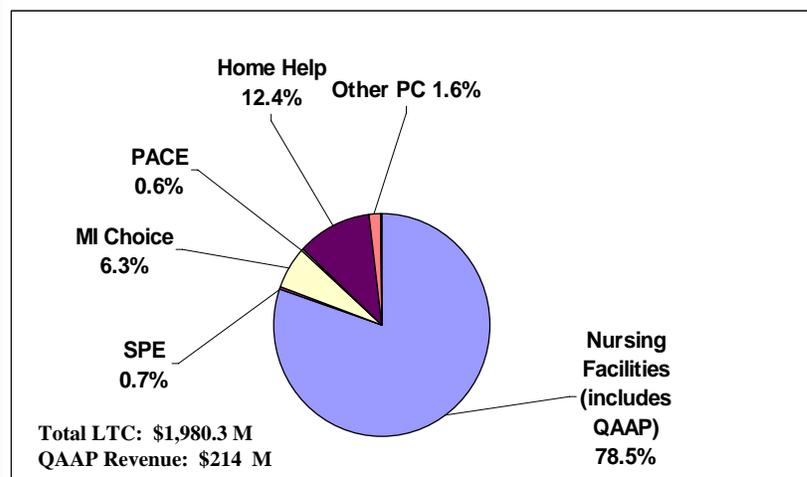
- Consumer choices may be better met through presentation of more care options
- Consumers maintain desired quality of life by being able to chose better option for them
- The LTC system is more responsive to a broader range of consumer needs
- Best “fit” through SPE options counseling and brokering of services
- Care options are cost-effective
- Capacity in all settings is more sufficient
- Budget neutrality is maintained in very tight economic times

4

FY 2007 LTC Expenditures



FY 2008 LTC Appropriation



6



Proposed Budget - Elements

- FY 09 proposed Executive Budget reinvests \$32.4 million gross NF savings into community based options
- Allows funds for services:
 - Expand PACE
 - Develop affordable assisted living
 - Develop specialized residential care.
 - Expand funds for MI Choice wait list.
 - Assure payment for transitions from NFs made under CMS Money Follows the Person grant

7



PACE

- An increase of \$5.4 million is recommended for the Program for All-Inclusive Care for the Elderly (PACE) to provide fully integrated and managed long term and primary health care
- PACE will be expanded in Muskegon and Calhoun counties for a total of four PACE programs
- Serve an additional 215 consumers who are elders with both Medicaid and Medicare coverage

8



Affordable Assisted Living Initiative

- MSHDA initiated project to address population who can utilize assisted living but who may not be able to afford it in the typical market
- Settings are subsidized housing
- Assistance in financing to the developer due to tax credits
- Affordable to the consumer
- Allows individuals to “age in place” by infusing Medicaid waiver program services if they should deteriorate and require assistance
- Settings may also be utilized for NF transitions⁹



Affordable Assisted Living - Budget

- Includes \$2.6 million to support home & community-based waiver services for ~100 individuals in Affordable Assisted Living
- AAL expected to be unlicensed but to provide for a range of needs including those who might require 24 hour companionship and support
- A new HCBS waiver would allow services to be targeted exclusively for these settings

10



Specialized Residential Care

- The budget includes \$14.1 million for 430 Specialized Residential Care (SRC) slots.
- These would be specialized services provided in AFCs (and/or HFAs) for consumers who required supervised, 24 hour support, beyond basic care
- Adds an option to the Home & Community-Based service array that most other states already have in place
- The program would be developed in SPE areas, likely by initiating a separate waiver under 1915 (c) program.

11



MI Choice Wait List

- Includes \$10 million gross to address a portion of the MI Choice wait list
- Wayne County Wait list:
 - Approximately $\frac{1}{2}$ of the 3,300 on the wait list meet the nursing facility LOC for NF
 - Of that group, on a statewide basis, almost $\frac{1}{4}$ of those on waitlist die or move to NF care while on waiting list.
- MI Choice Waitlist would allow ~485 individuals to be served in MI Choice
 - One-half in SPE areas
 - One-half in non-SPE areas

12



Source of Projected Savings

- LOC determination activity conducted through SPEs is trending at a lower approval level
 - For NFs, one-half of projected savings due to declining NF care is \$5.8 million
- PACE population displacement results in a savings of \$10.4 million
- Savings from FY 08 & FY 09 transitions of NF residents who do not require community LTC services (other than a small proportion of Home Help) are projected at \$15.9 million

13



FY 09 Money Follows the Person CMS Grant

- Transition services for “long-stayers” i.e. those with 6 months of continuous NF residence
- MFP grant supports MI Choice waiver services so transfer \$7.5 million gross to Waiver
- Projected reduction in NF services
- Anticipated based on NF transition trends to date and enhanced NF transition Pathway

14



Limit NF Variable Cost Component

- Limits the NF rate increases as past rate increases exceeded inflation.
- Holds variable cost increase closer to the market basket, for savings of (\$31.3) million gross.

15

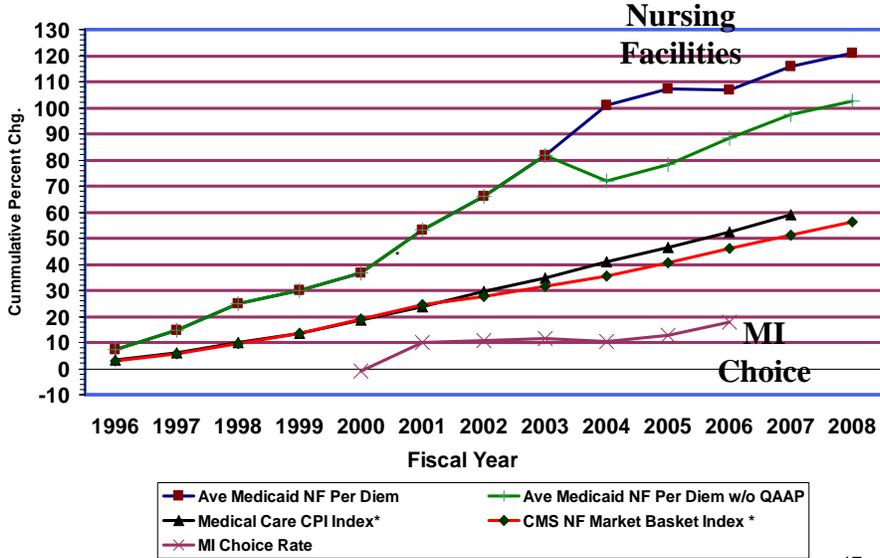


NF Rates Up More than Inflation

- Chart shows the cumulative rate increases for NF LOC providers since FY 96.
- NF received an estimated cumulative rate increase of over 121% with QAAP included – over twice the rate of the CMS Global Insight Index thru FY 08.

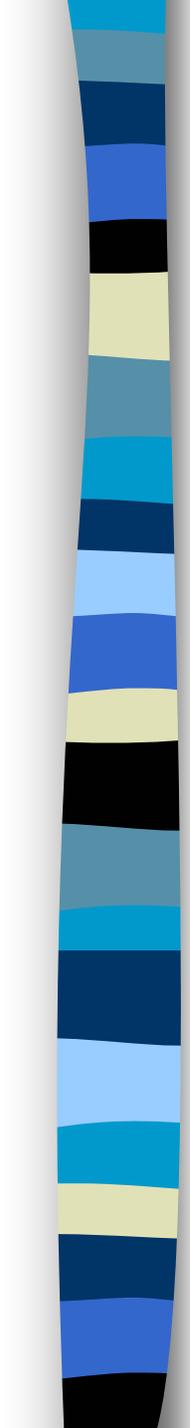
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**Change in Nursing Facility & MI Choice Average Rates Vs.
CMS NF Market Basket Index and Medical Care CPI
FY 96 – FY 08**



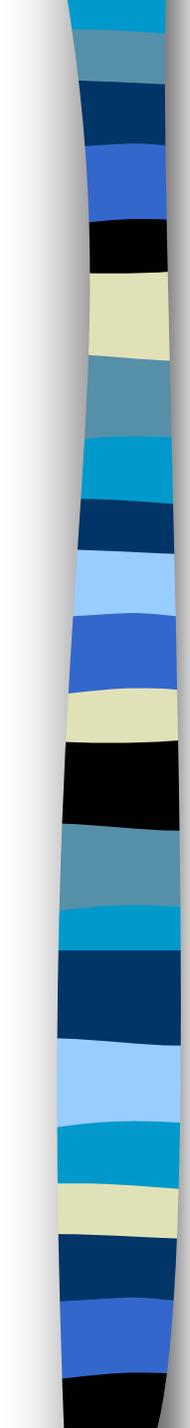
1995 as Base Year

* Source: Global Insight Health Care Cost Review



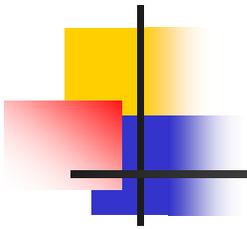
DEPARTMENT OF COMMUNITY HEALTH
**OFFICE OF LONG-TERM
CARE SUPPORTS & SERVICES**
Overview of the LTC Portion of the
FY 09 Executive Budget

Long Term Care Forum
February 11, 2008



LTC Budget Policy

- FY 08 LTC appropriation is nearly \$2.0 billion
- MDCH has sought to apply principles from LTC Task Force and federal guidance
 - Support consumer choice options
 - Money Follows the Person models
 - Assist with nursing facility transition when that is consumer's choice
- FY 09 offers no opportunity to expand overall long-term care spending with GF revenue
- Michigan's FFP match rate from CMS has increased to 60%

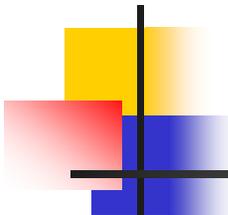


NURSING FACILITY TRANSITIONS

Update on Money Follows the Person Initiative

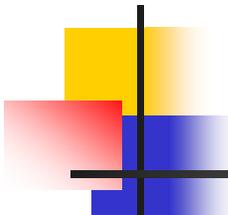
Long-Term Care Issues Forum

February 11, 2008



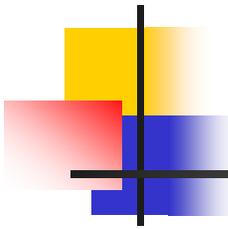
Deficit Reduction Act, Money Follows the Person Goals:

- Increase the use of home and community-based services rather than institutional care.
- Eliminate barriers in policy and funding to enable individuals to receive services in the setting of their choice.
- Increase the state's ability to assure home and community-based services for individuals who transition from institutions.
- Ensure provision of quality assurance and continuous quality improvement in services.



Michigan's MFP program will:

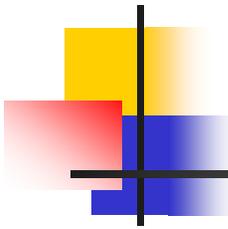
- Support transition services for Medicaid nursing facility residents who express the desire to move to a home & community setting.
- Provide for transition costs to a home & community setting of the individual's choice, based upon a person-centered planning process.
- Assure needed services and supports through the Medicaid program, based upon functional and financial eligibility.
- Support the Olmstead Supreme Court ruling.



Basic Principles of Money Follow the Person:

Everyone has the right to:

- Receive services in the most independent setting.
- Know their options for services & supports.
- Make informed decisions about options & risks.
- Control their own life.
- Have membership in a community.
- Receive high quality services as needed.



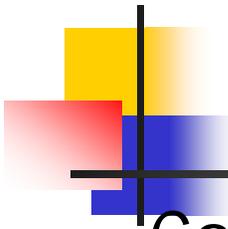
Components of the System

- **Long Term Care Connections** – Upper Peninsula, West Michigan, Southwest Michigan & Detroit/Wayne County – cover 36 counties
- **MI Choice Waiver Agents** – 21 Waiver Agents cover the entire state
- **Centers for Independent Living** – 15 CILs cover most of the state

MFP Operational Protocol

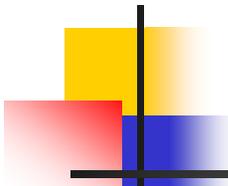
Requirements:

- Case study
- Benchmarks – at least five
- Recruitment & enrollment plan
- Informed consent & guardianship provisions
- Outreach/marketing/education plan
- Description of stakeholder involvement
- Benefits and services available
- Opportunities for self-direction



Operational Protocol continued

- Consumer supports
 - 24/7 backup
 - Consumer access to services
 - Continuity of care post transition
- Plan for assuring supply of housing
- Organization & administration
- Quality management system
- Evaluation & reporting



NF Transition Outcomes

■ MI Choice Waiver Program

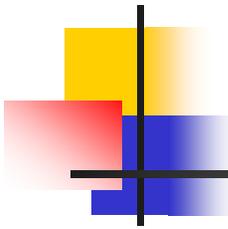
- Nursing facility resident enrolls in the MI Choice waiver program upon transition.

■ Other Community

- Nursing facility resident does not enroll in MI Choice upon transition, but may utilize Adult Home Help, Adult Foster Care, Assisted Living, or other community-based programs upon transition.

■ Not/Not Yet Transitioned

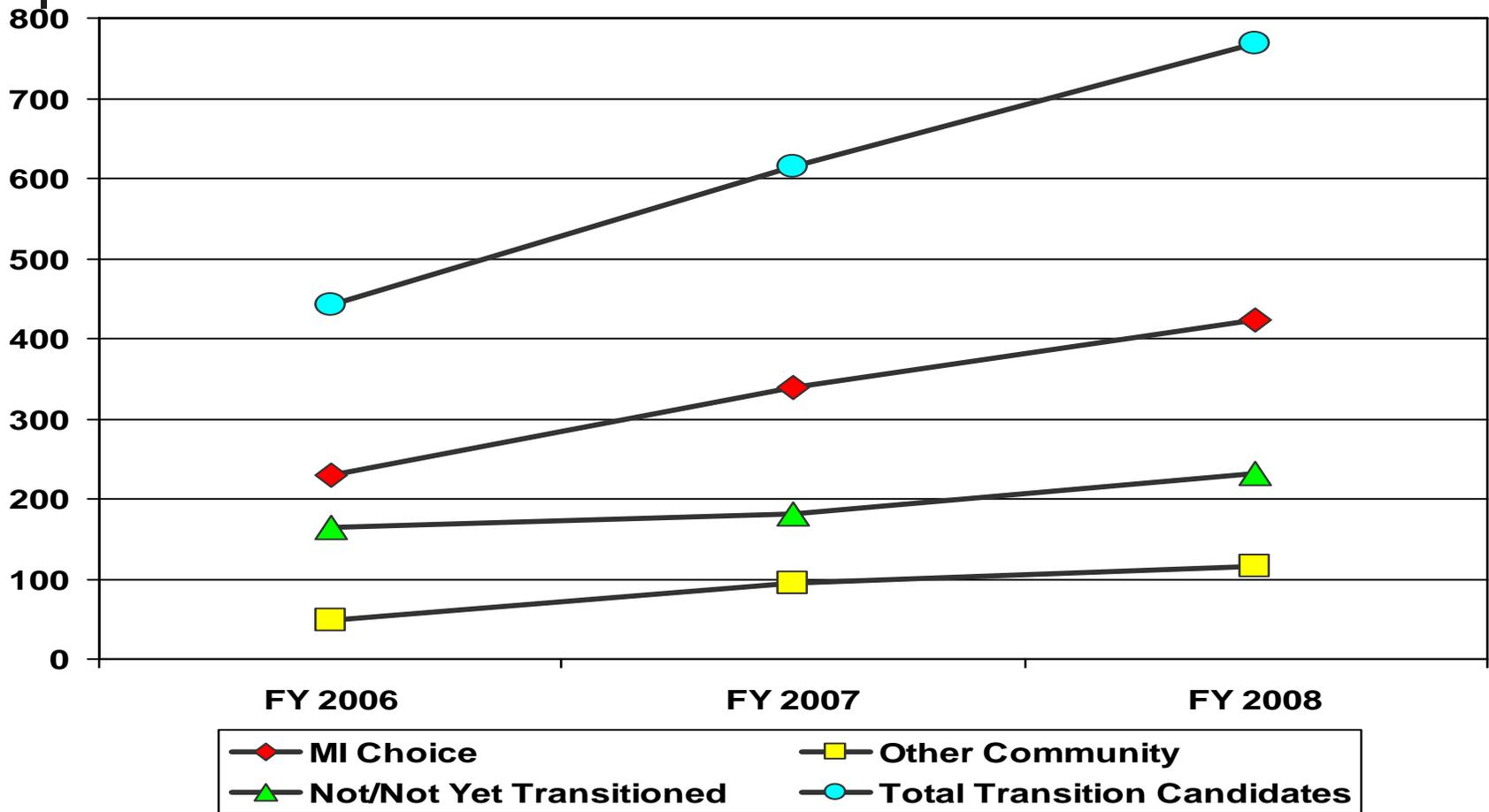
- Nursing facility resident assessed by a transition agent, but has not transitioned to the community. Some of these candidates are still in the planning process.



NF Transition Categories

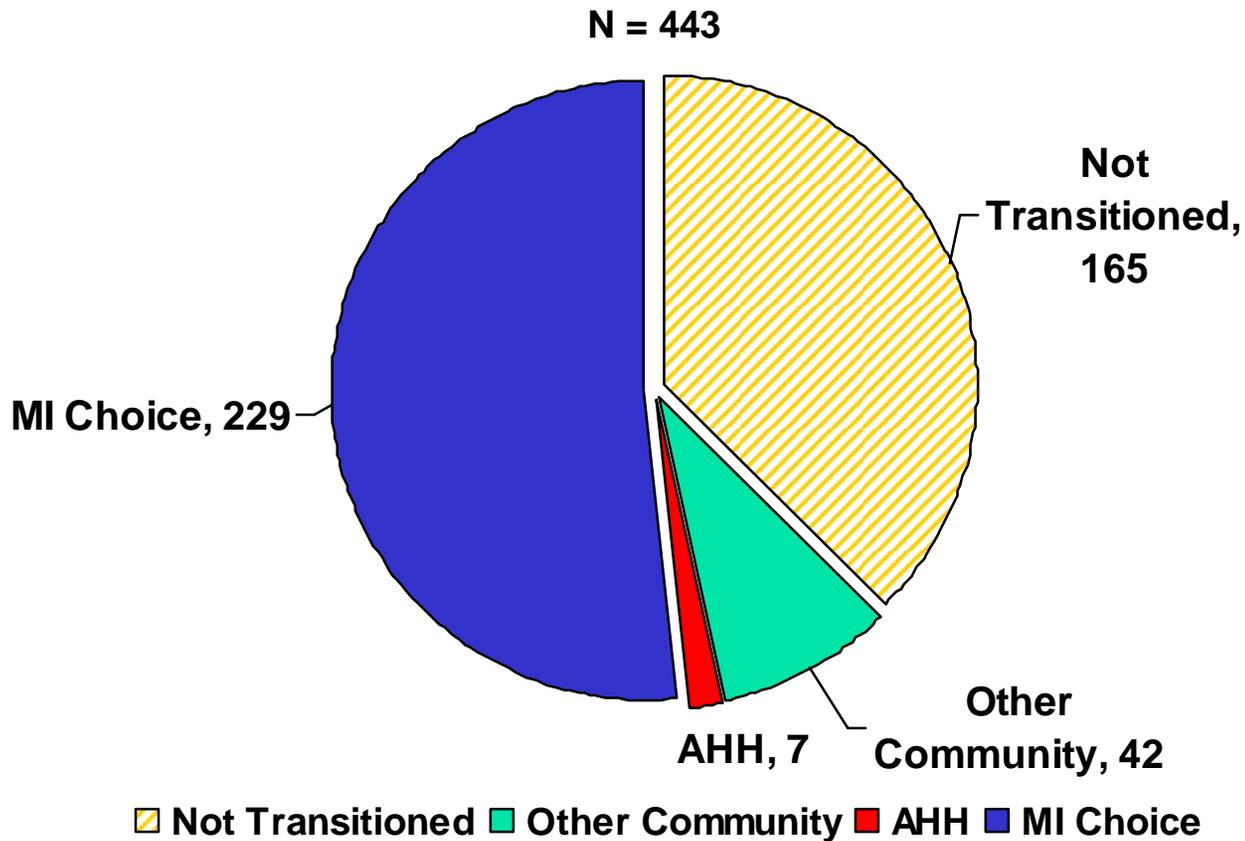
- More than 6 Months
 - Nursing facility resident that has resided in the facility (including hospitalizations) for at least six months.
- Less than 6 Months
 - Nursing facility resident that has resided in a nursing facility for less than six months.
- Diversion
 - Persons who do not reside in a nursing facility, but are at high risk of nursing facility placement without MI Choice services, and for whom MSA has approved additional MI Choice slot funding.

FY '06, '07 & '08 NF Transition Candidates

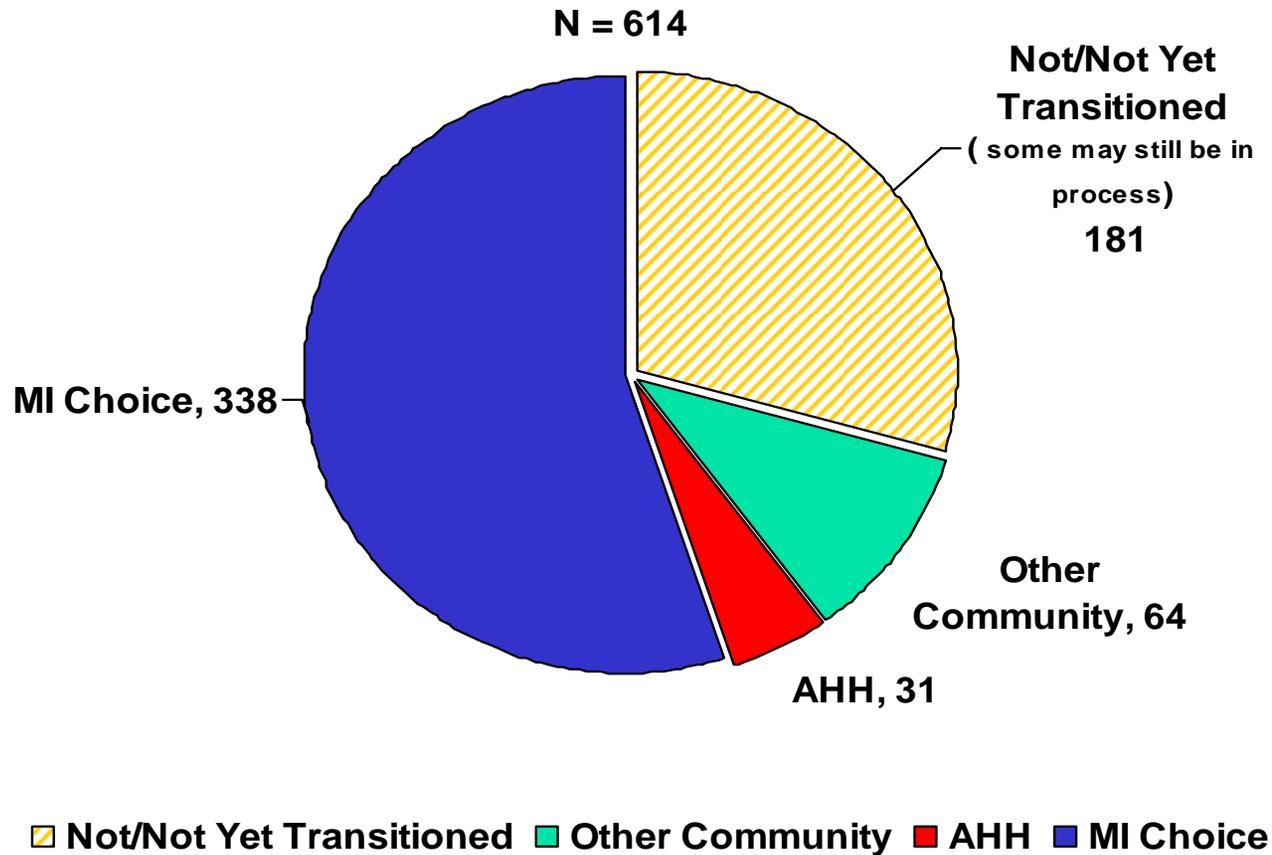


* FY 2008 Amounts are projected using current activity and previous years experience

FY 2006 NF Transition Candidates

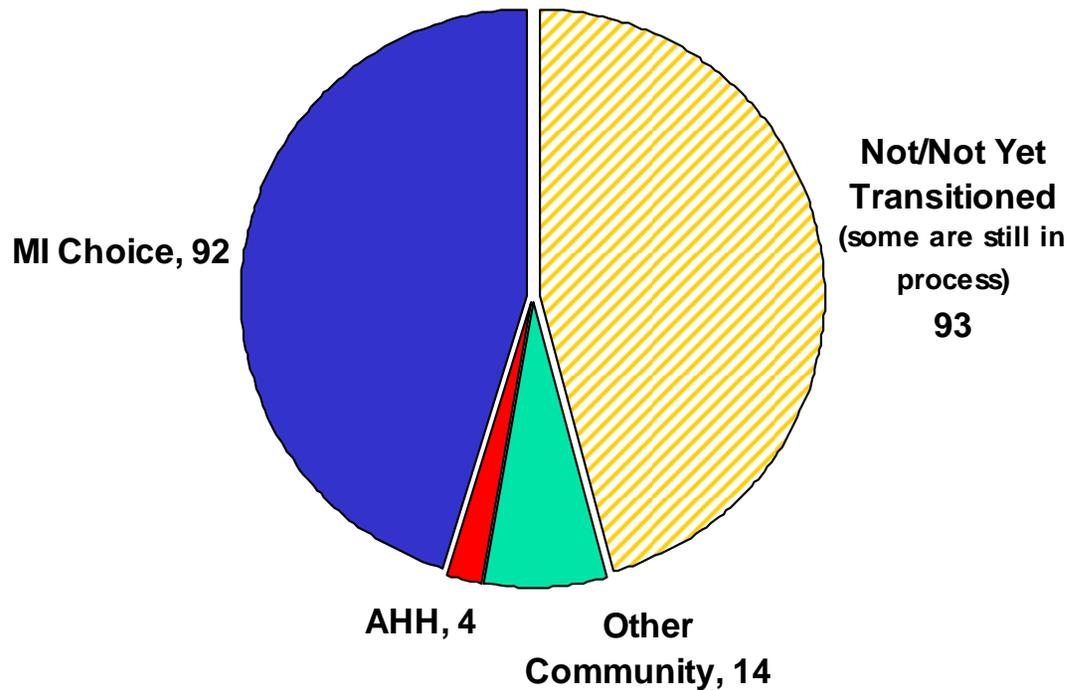


FY 2007 NF Transition Candidates



FY 2008 NF Transition Candidates

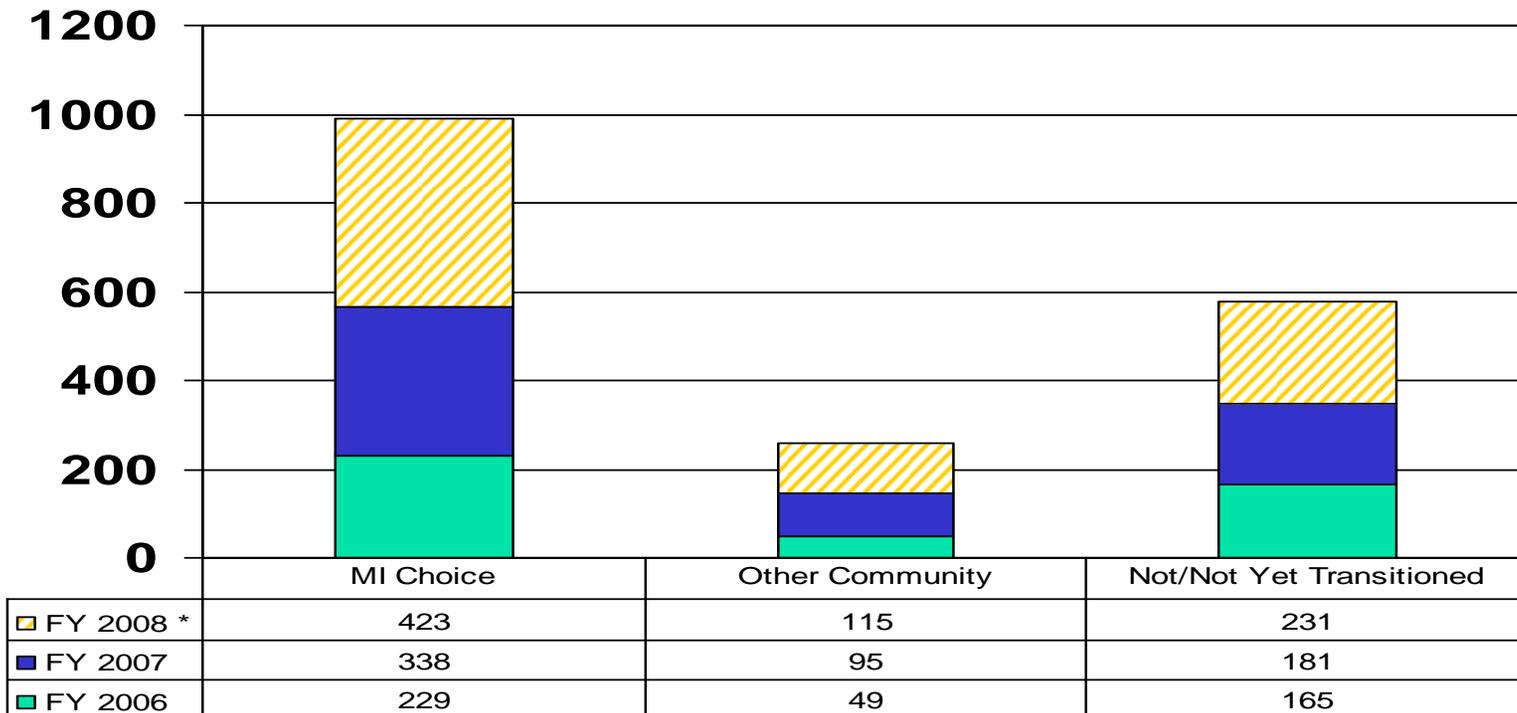
N = 203 (Actual October 2007 - January 2008)



■ Not/Not Yet Transitioned ■ Other Community ■ AHH ■ MI Choice

FY '06, '07, '08 NF Transition Candidates by Program Type

N = 1,826

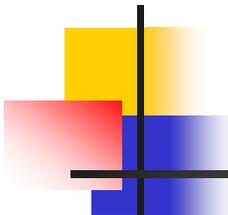


* = Projected for full year based on four months of data

15% of "Other Community" placements in FY 2006 did not utilize Medicaid community LTC services.

15% of "Other Community" placements in FY 2007 did not utilize Medicaid community LTC services.

13% of "Other Community" placements in FY 2008 (to date) have not utilized Medicaid community LTC services.

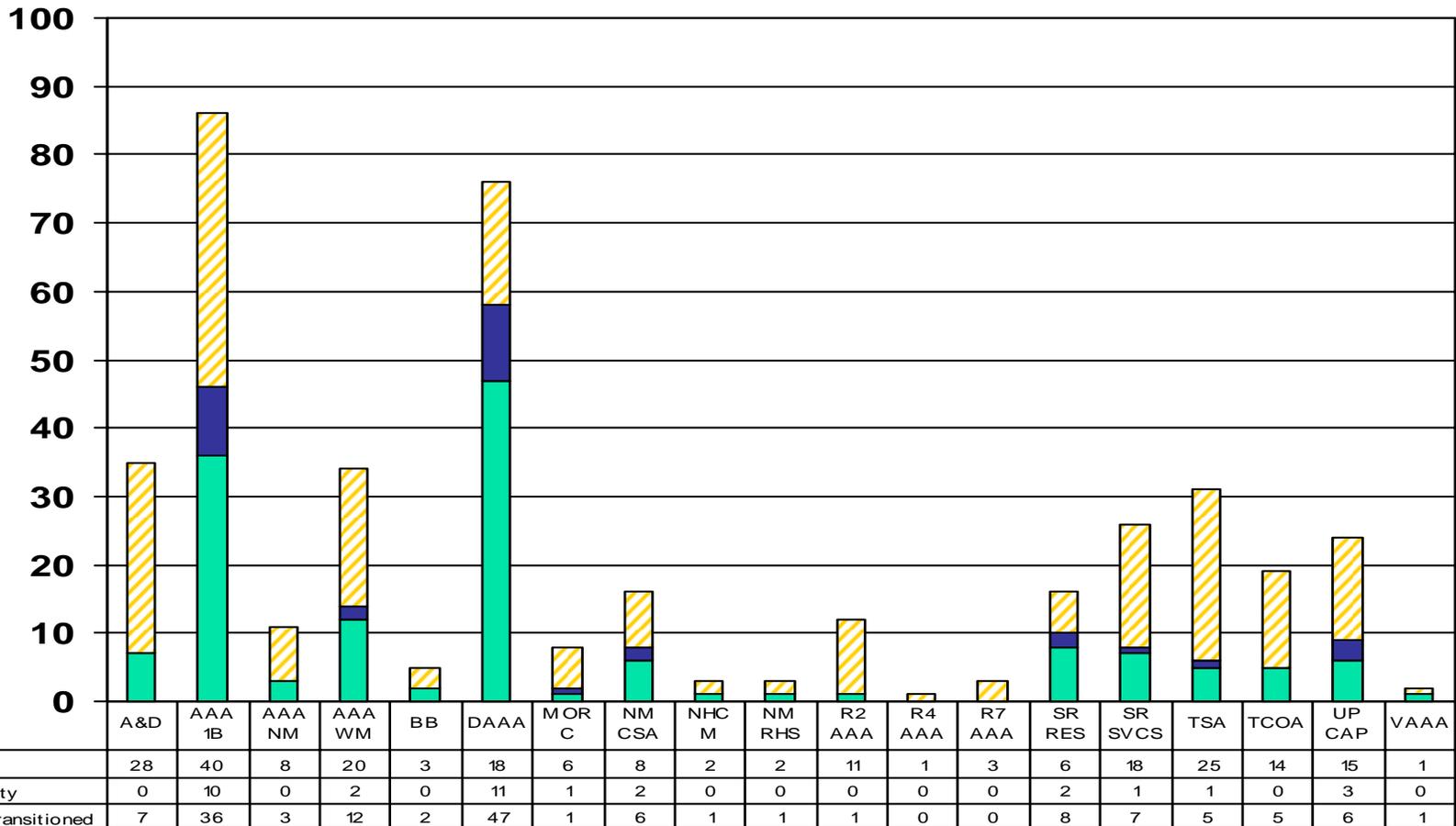


Waiver Agent Codes

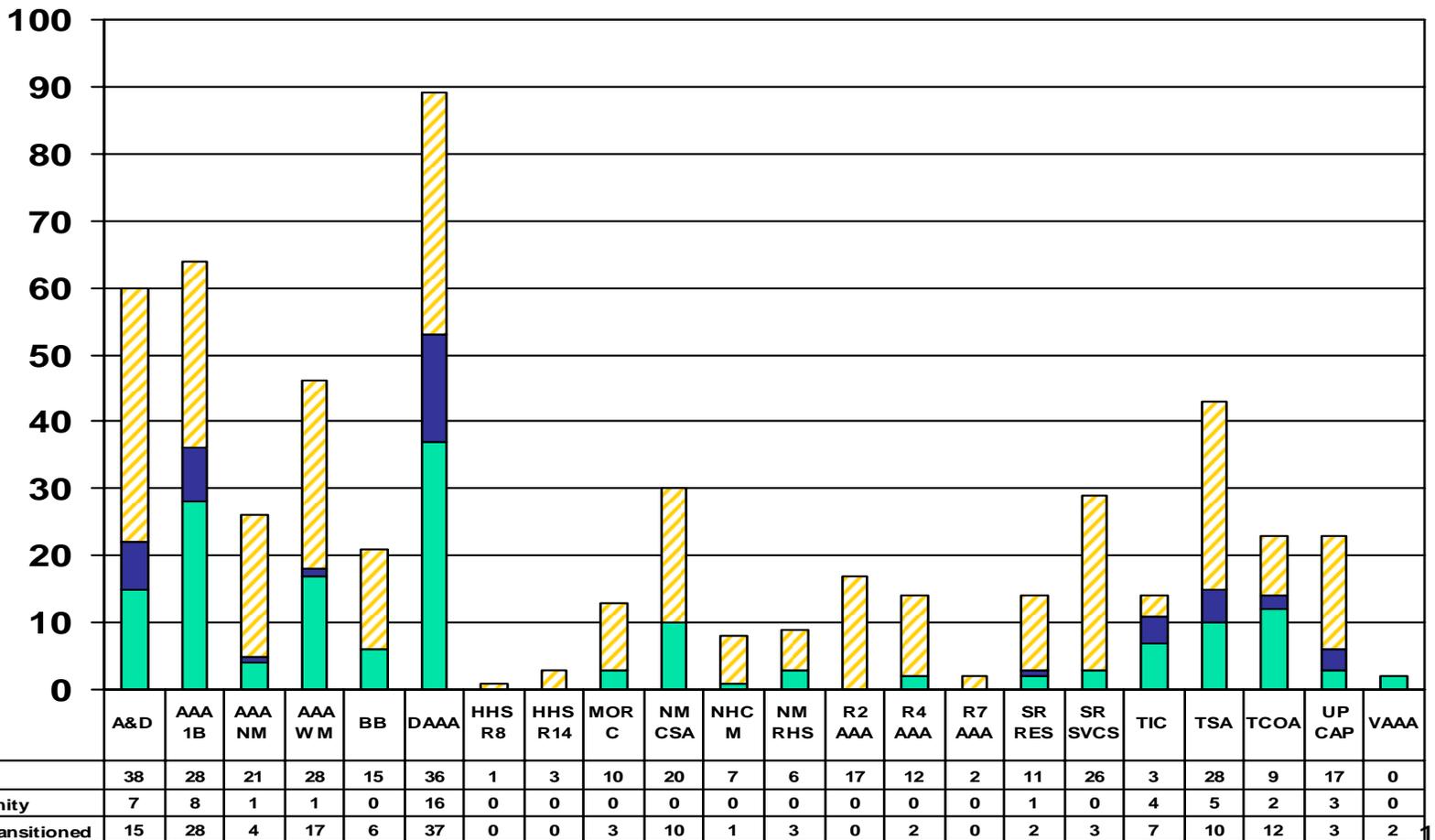
- **A&D** – A & D Home Health Care, Inc., Saginaw, MI
- **AAA1B** – Area Agency on Aging 1B, Southfield, MI
- **AAANM** – Area Agency on Aging of Northwest Michigan, Traverse City, MI
- **AAAWM** – Area Agency on Aging of Western MI, Grand Rapids, MI
- **BB** – Region 3B AAA @ Burnham Brook Center, Battle Creek
- **DAAA** – Detroit Area Agency on Aging, Detroit, MI
- **HHS R8** – Health Options, Grand Rapids, MI
- **HHS R14** – Health Options, Grand Rapids, MI
- **MORC** – Macomb Oakland Regional Center, Clinton Township, MI
- **NMCSA** – Northeast MI Community Service Agency, Inc., Alpena, MI
- **NHCM** – Northern Lakes Community Mental Health, Traverse City, MI
- **NMRHS** – Northern Michigan Regional Health System, Petoskey, MI
- **R2 AAA** – Region 2 Area Agency on Aging, Brooklyn, MI
- **R4 AAA** – Region 4 Area Agency on Aging, St. Joseph, MI
- **R7 AAA** – Region VII Area Agency on Aging, Bay City, MI
- **SRRES** – Senior Resources, Muskegon Heights, MI
- **SRSVCS** – Senior Services of Kalamazoo, Kalamazoo, MI
- **TIC** – The Information Center, Taylor, MI
- **TSA** – The Senior Alliance (AAA), Wayne, MI
- **TCOA** – Tri-County Office on Aging, Lansing, MI
- **UPCAP** – Upper Peninsula Area Agency on Aging, Escanaba, MI
- **VAAA** – Valley Area Agency on Aging, Flint, MI

FY 2006 NF Transition

Candidates by Waiver Agent

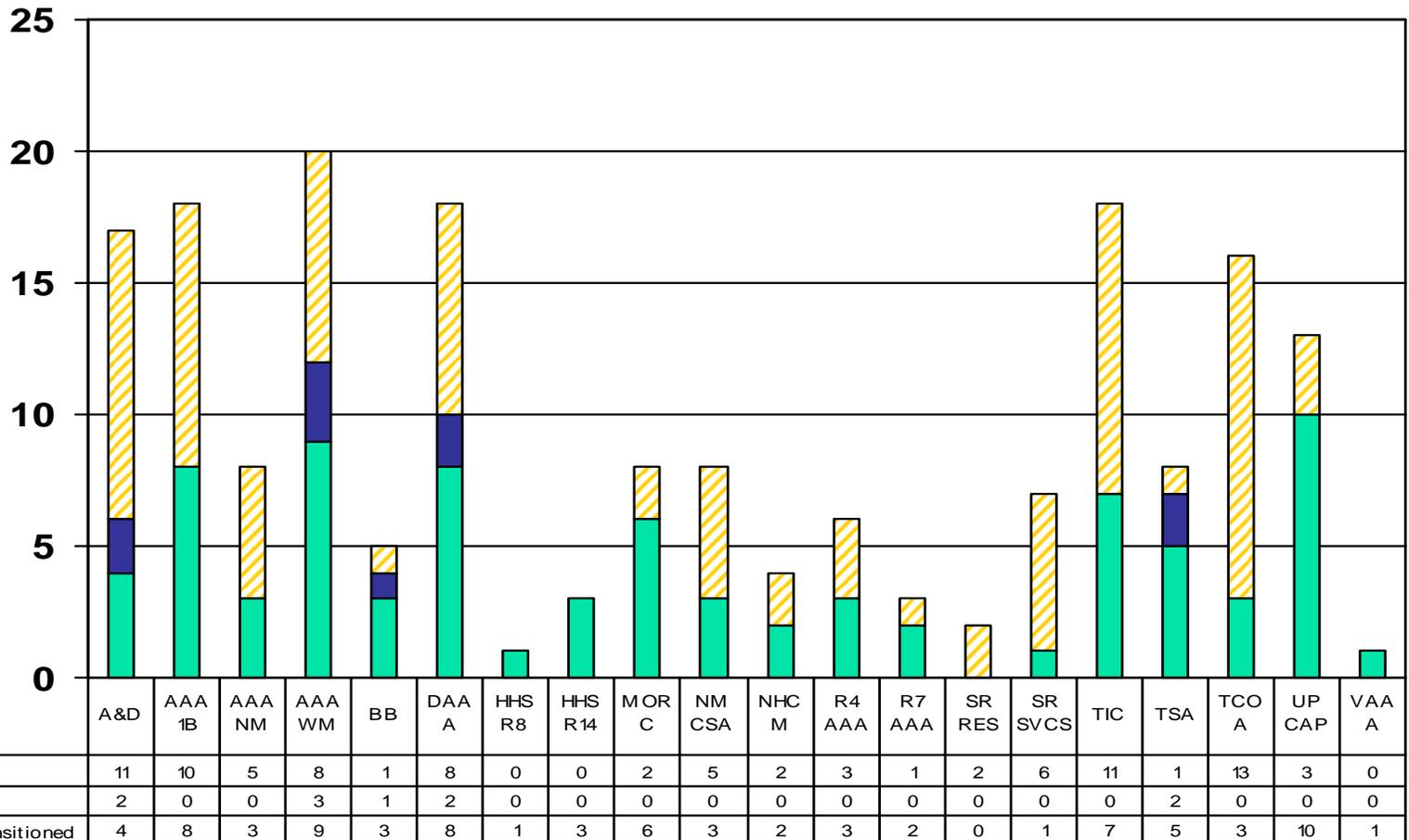


FY 2007 NFT Transition Candidates by Waiver Agent

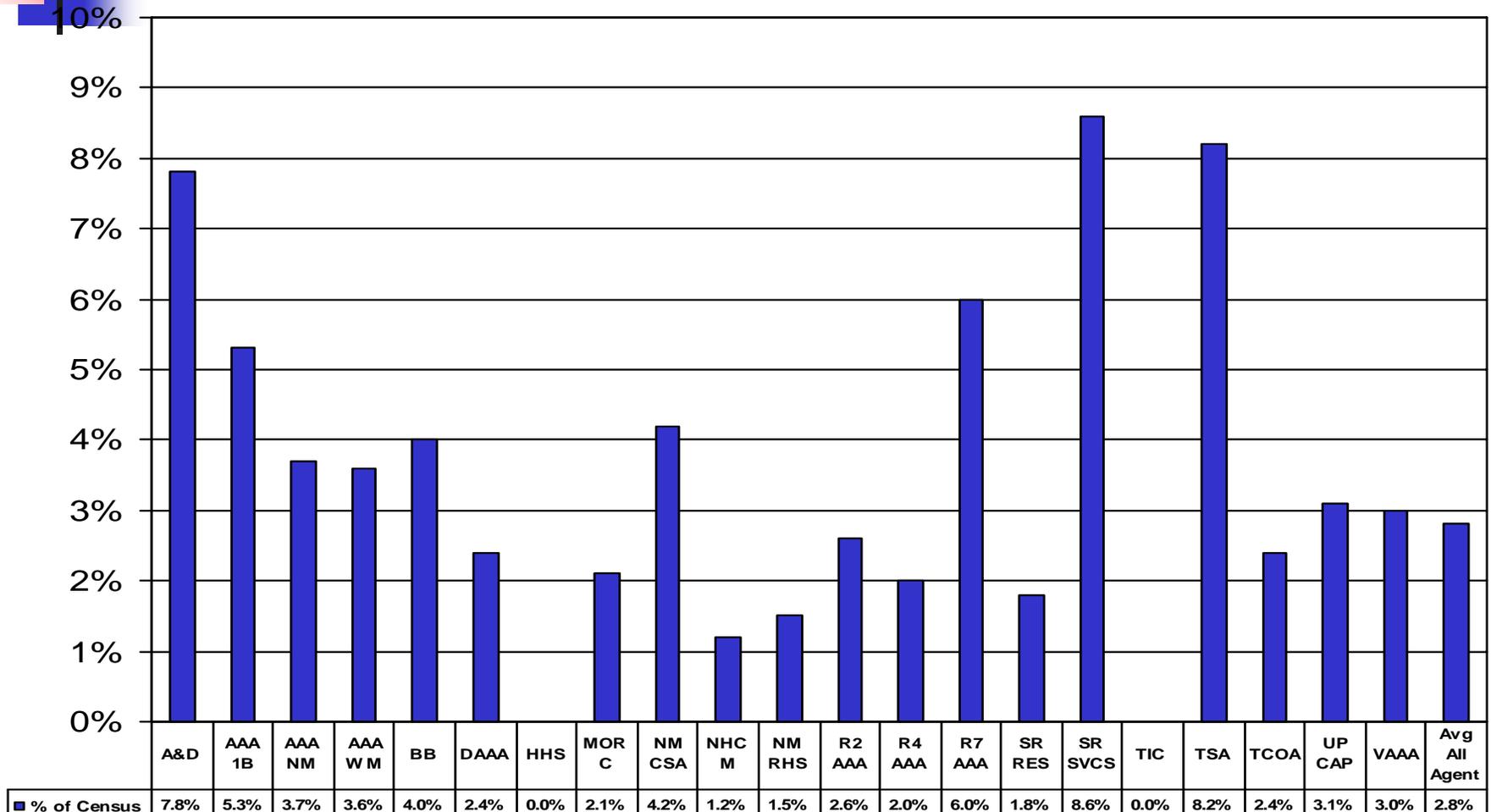


FY 2008 NFT Transitions by Waiver Agent

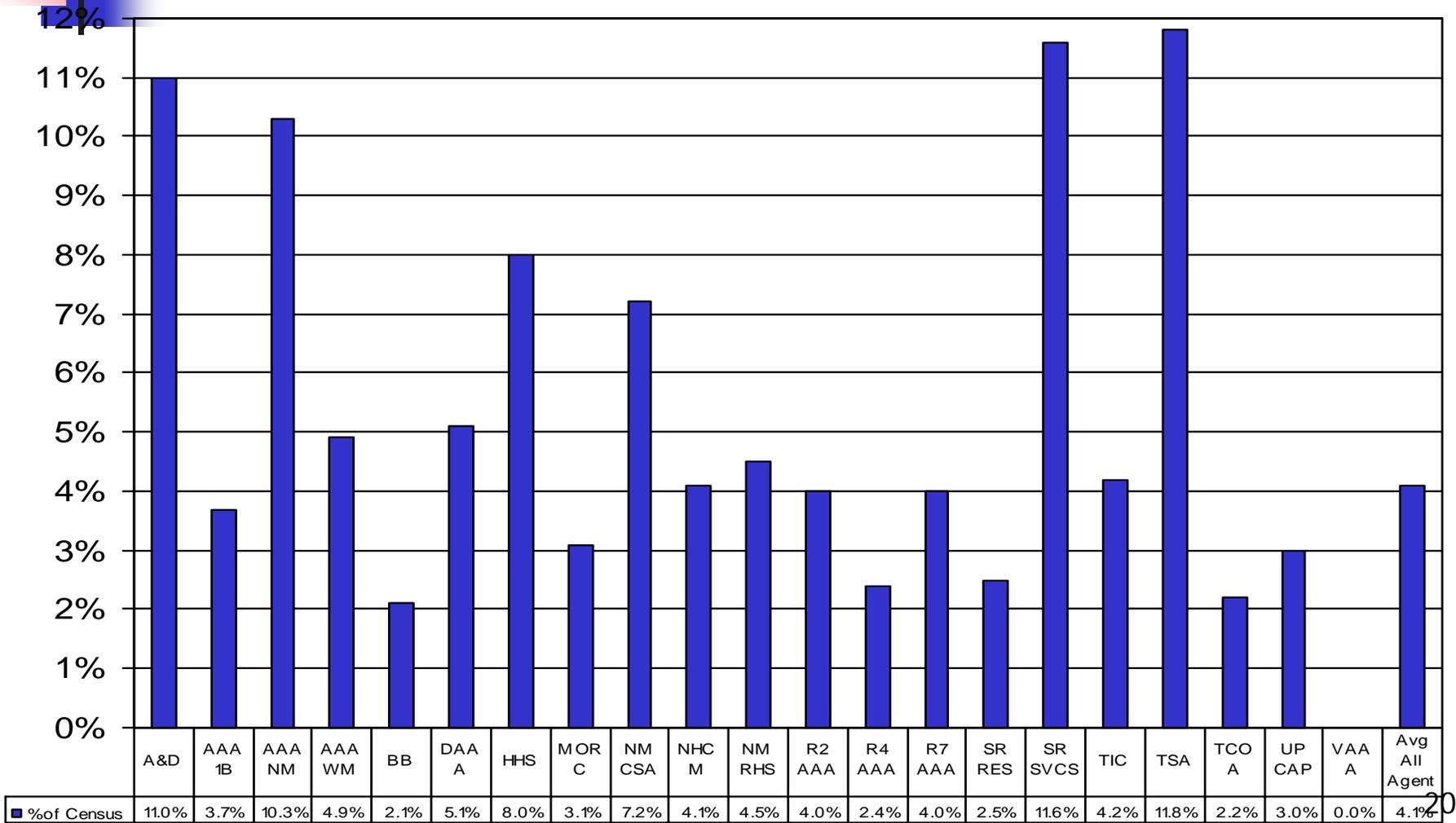
(Actual October 2007 - January 2008)

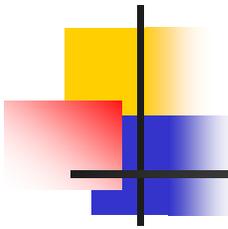


FY 2006 NFTs as a Percent of Census by Waiver Agent



FY 2007 NFTs as a Percent of Census by Waiver Agent





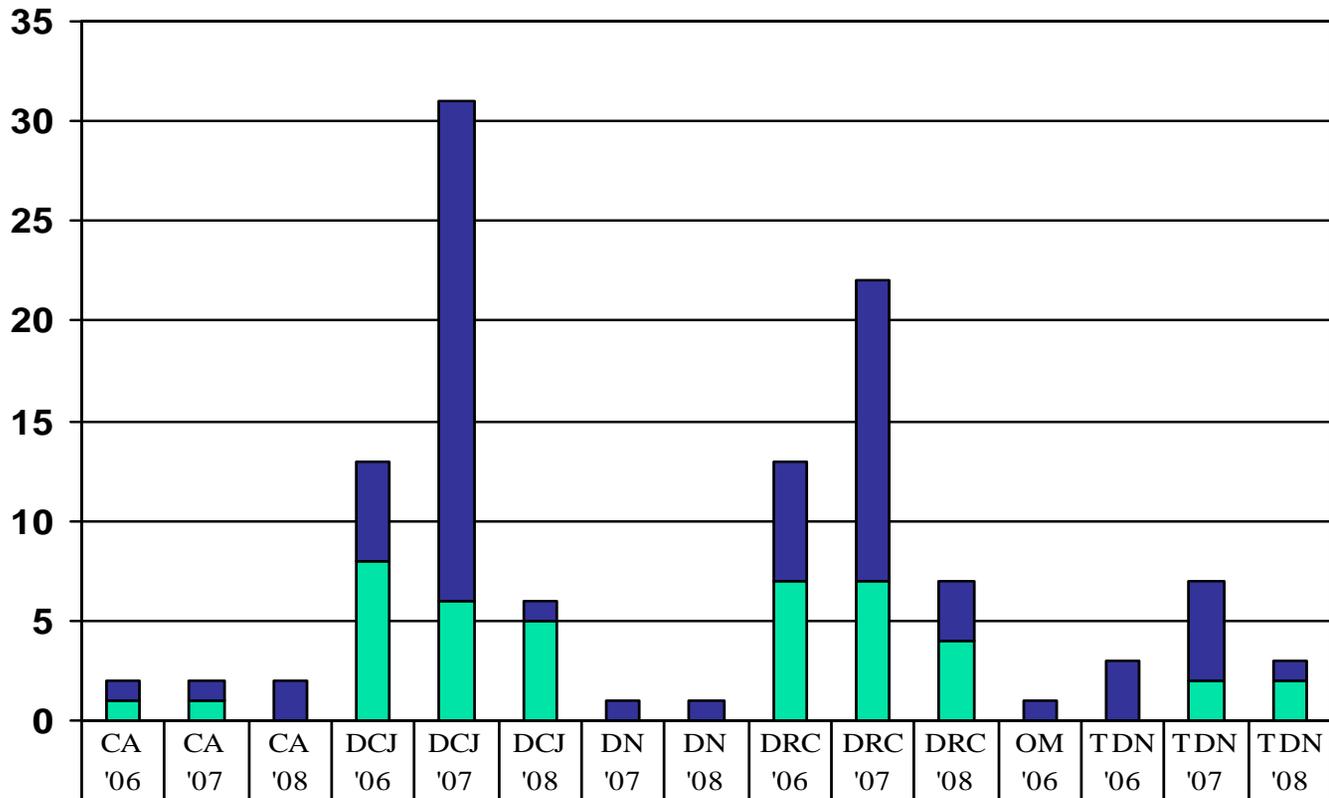
Centers for Independent Living (CIL) Codes

- CA – Capital Area CIL, Lansing
- DCJ – disABILITY Connections, Jackson
- DN – DN/Michigan, Midland
- DRC – Disability Resource Center, Kalamazoo
- OM – DN/Oakland & Macomb
- TDN – The Disability Network, Flint

Fiscal Year '06, '07, '08

Transitions by CIL

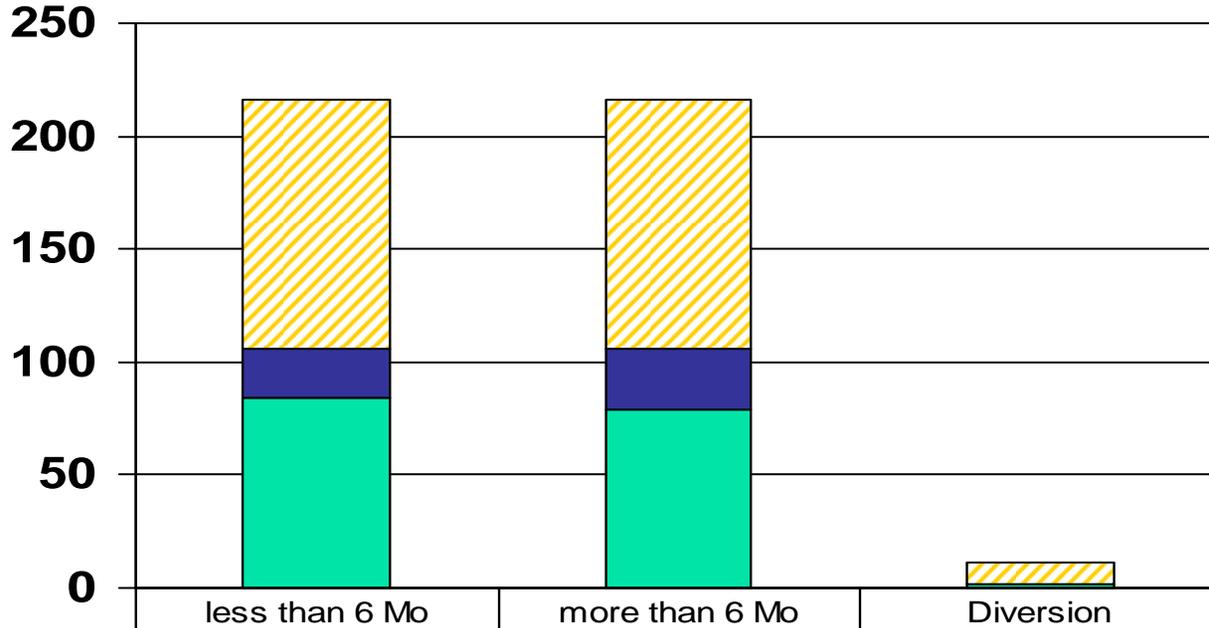
(FY 08 is Actual October 2007 - January 2008)



■ Other Community	1	1	2	5	25	1	1	1	6	15	3	1	3	5	1
■ Not/Not Yet Transitioned	1	1	0	8	6	5	0	0	7	7	4	0	0	2	2

FY '06 NF Transition by Type

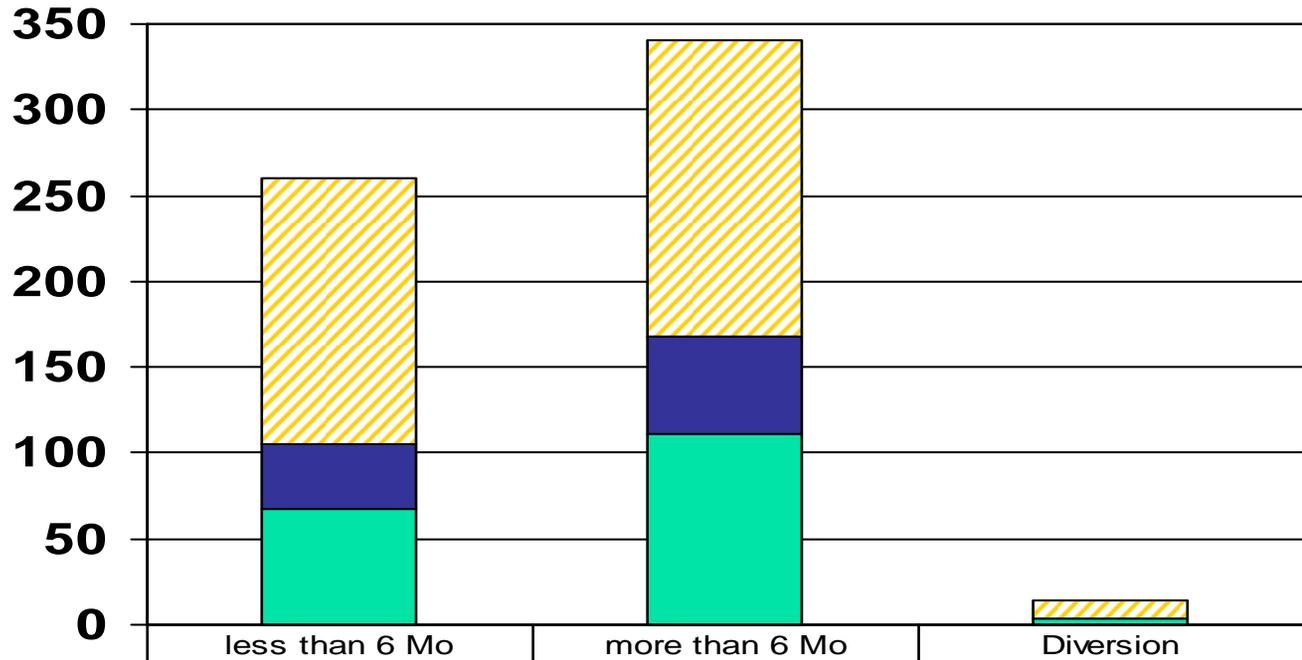
N = 443



MI Choice	110	110	9
Other Community	22	27	0
Not Transitioned	84	79	2

FY '07 NF Transition by Type

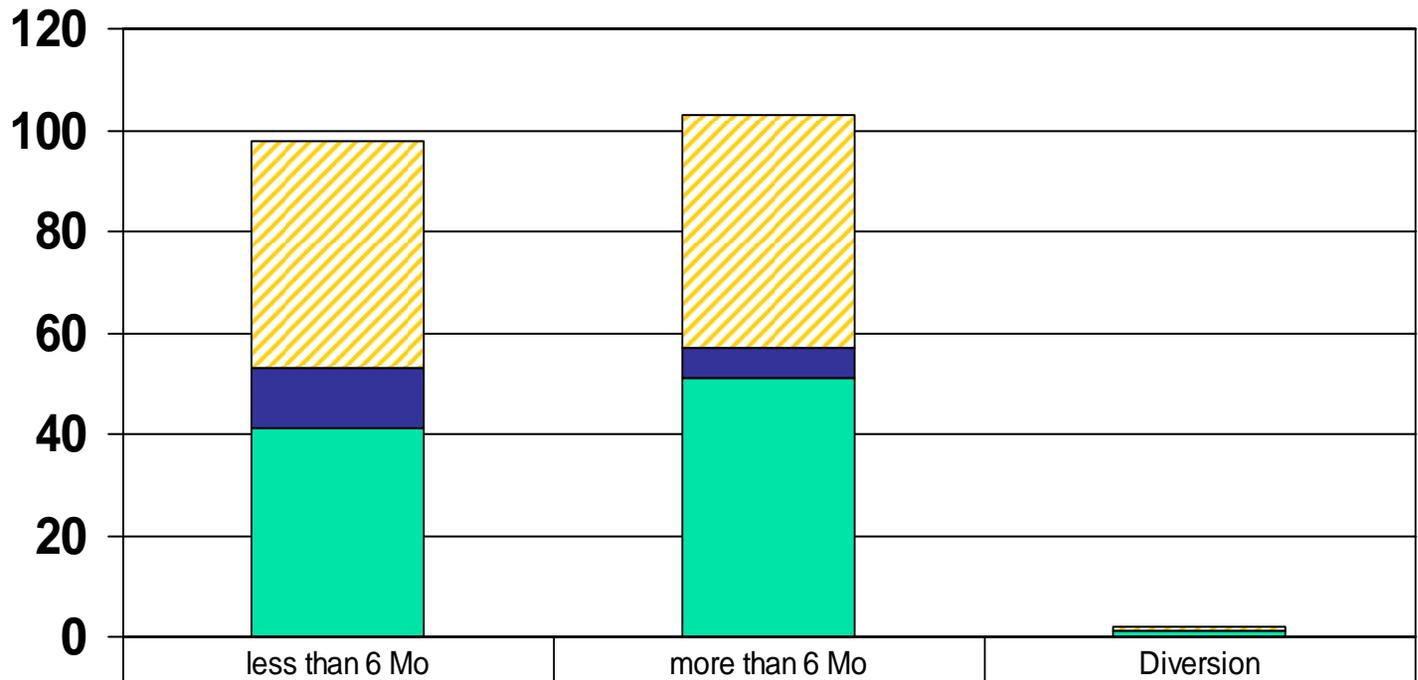
N = 614



MI Choice	155	172	11
Other Community	38	57	0
Not/Not Yet Transitioned	67	111	3

FY '08 NF Transition by Type

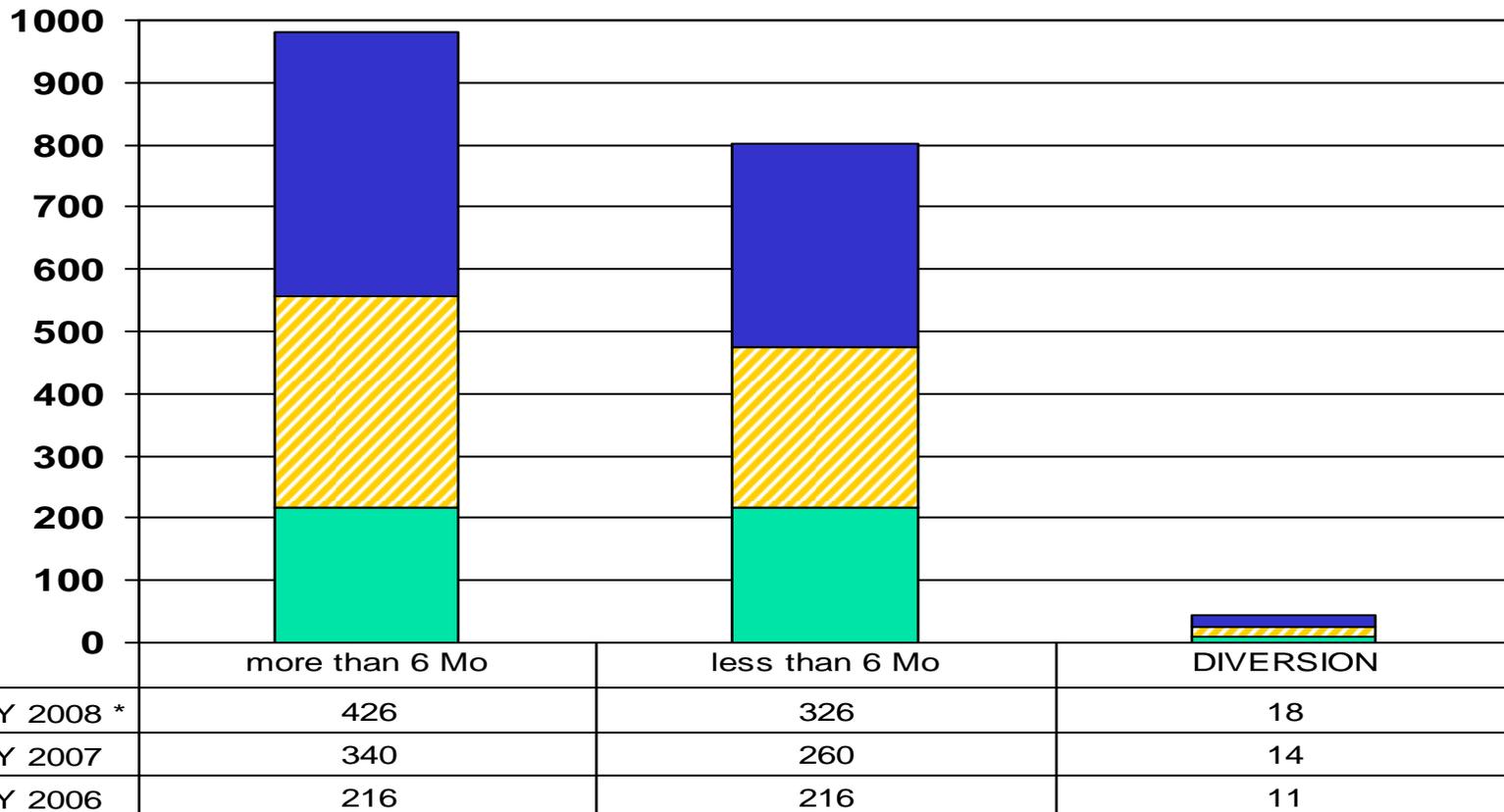
N = 203 (Actual October 2007 - January 2008)



MI Choice	45	46	1
Other Community	12	6	0
Not/Not Yet Transitioned	41	51	1

FY '06, '07, '08 NFTs by Type

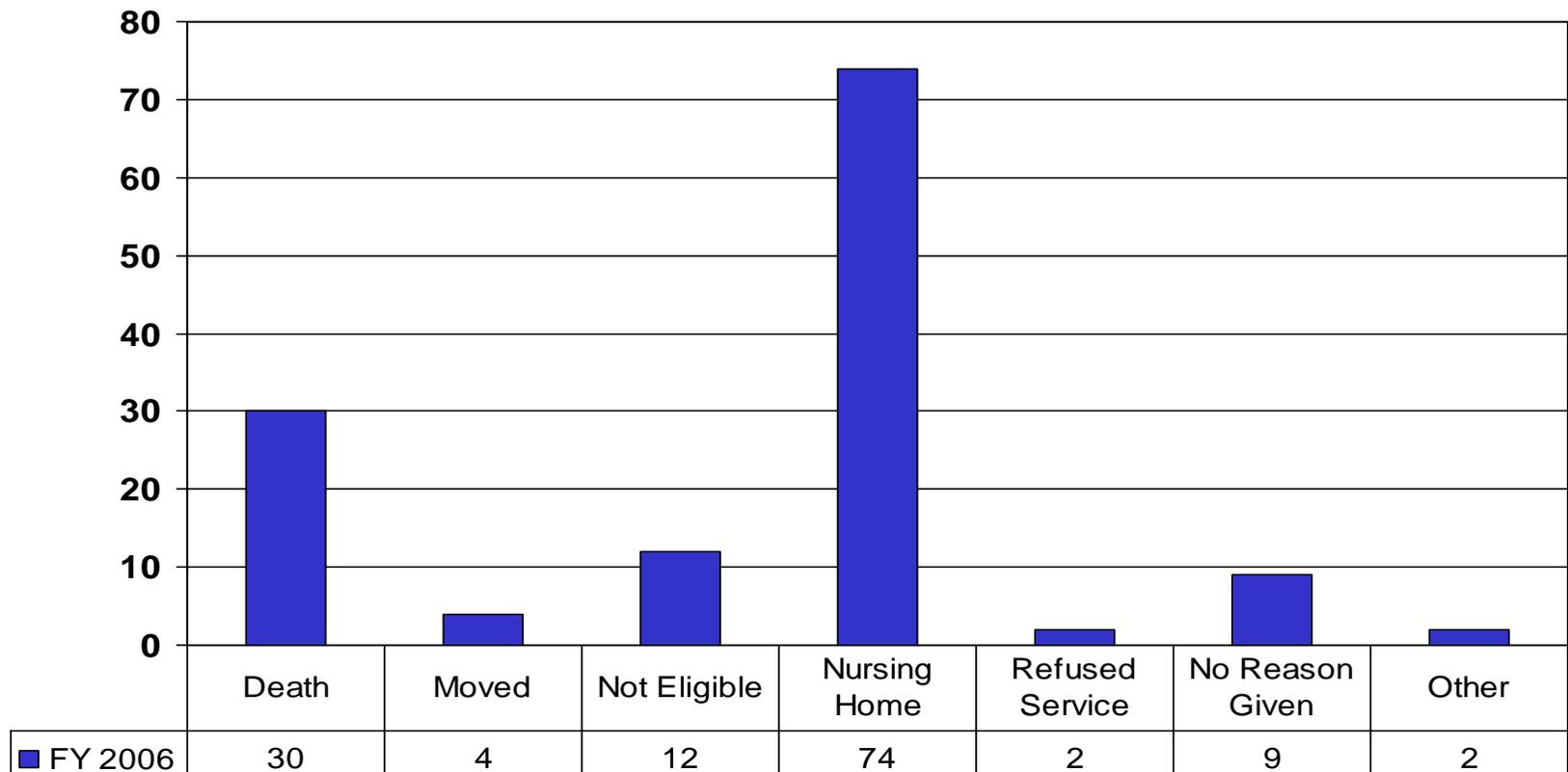
N = 1,826



* = Projected for full year based on four months of data

FY '06 Transitionees Who Left MI Choice Waiver

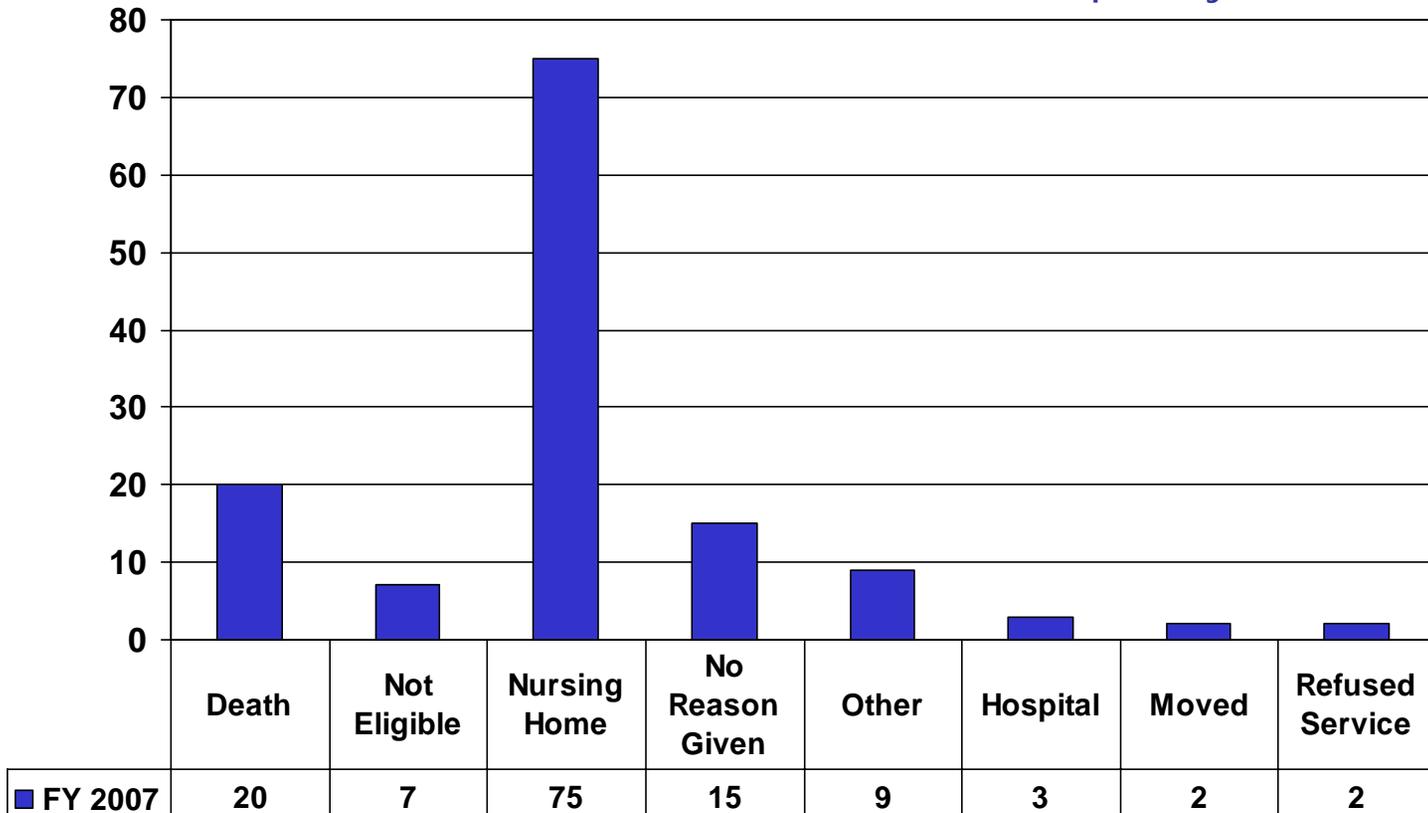
N = 229 into MI Choice; 133 subsequently exited



34 of these individuals returned to the waiver.

FY 2007 Transitionees Who Left MI Choice Waiver

N = 338 into MI Choice; 133 subsequently exited



36 of these individuals returned to the waiver.

FY 2008 Transitionees Who Left MI Choice Waiver

N = 92 into MI Choice; 11 subsequently exited
(Actual October 2007 - January 2008)

