

# THE PARTNERSHIP FOR COMMUNITY INTEGRATION

Iowa's Money Follows the  
Person (MFP) Program

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# Iowa's MFP Personnel

## Required Personnel

- ▶ Project Director – *Lindsey Robertson*
- ▶ Data and Quality Analyst – *Shawn Gaulden*

## Medicaid Personnel

- ▶ LTSS Policy MFP SME – *Brooke Watson*
- ▶ Contract Manager – *Sara Gillen*
- ▶ Demonstration Authority Oversight Officer – *Ashley Bolsem*
- ▶ Budget Analyst – *Jason Buls*

## Transition Coordination Services Agency

- ▶ University of Iowa UCEDD

# MFP is...

- ▶ A tool for system transformation to be leveraged fully for leadership, strategic planning, and funding opportunities
- ▶ An institutional transition program
- ▶ An opportunity to integrate state operations, streamline policies and practices, and demonstrate new and innovative approaches to serving people at home

# Program Goals

- ▶ Increase the use of home and community-based services (HCBS) and reduce the use of institutionally-based services
- ▶ Eliminate barriers in State law, State Medicaid plans, and State budgets that restrict the use of Medicaid funds to let people get long-term care in the settings of their choice
- ▶ Strengthen the ability of Medicaid programs to provide HCBS to people who choose to transition out of institutions
- ▶ Put procedures in place to provide quality assurance and improvement of HCBS

# MFP is Nationwide

- ▶ 43 states and territories have MFP programs
  - Iowa is often a resource to other MFP programs
- ▶ Each MFP program is unique – no two operate the same way

# MFP in Iowa – State Strategy

- ▶ Part of the State's larger strategy to rebalance its systems of long-term support.
  - The driver for the strategy is the primary value the State of Iowa places on choice.

# MFP in Iowa – Beginnings

- ▶ Operational Protocol developed on the basis of recommendations from the Partners Group and its 5 subcommittees.
  - Over 70 participants in initial group.
  - A Partners Group continues to meet semiannually.
- ▶ Began operating in 2008.

# MFP in Iowa - Vision

Assist people in transitioning to independent settings in the community of their choice, where they will receive the enhanced services and supports they need to pursue their personal goals and to achieve a high quality of life.

# Philosophy

*People with disabilities of any age  
should have choices about how and  
where to get quality services.*

# Funding and Oversight Structure

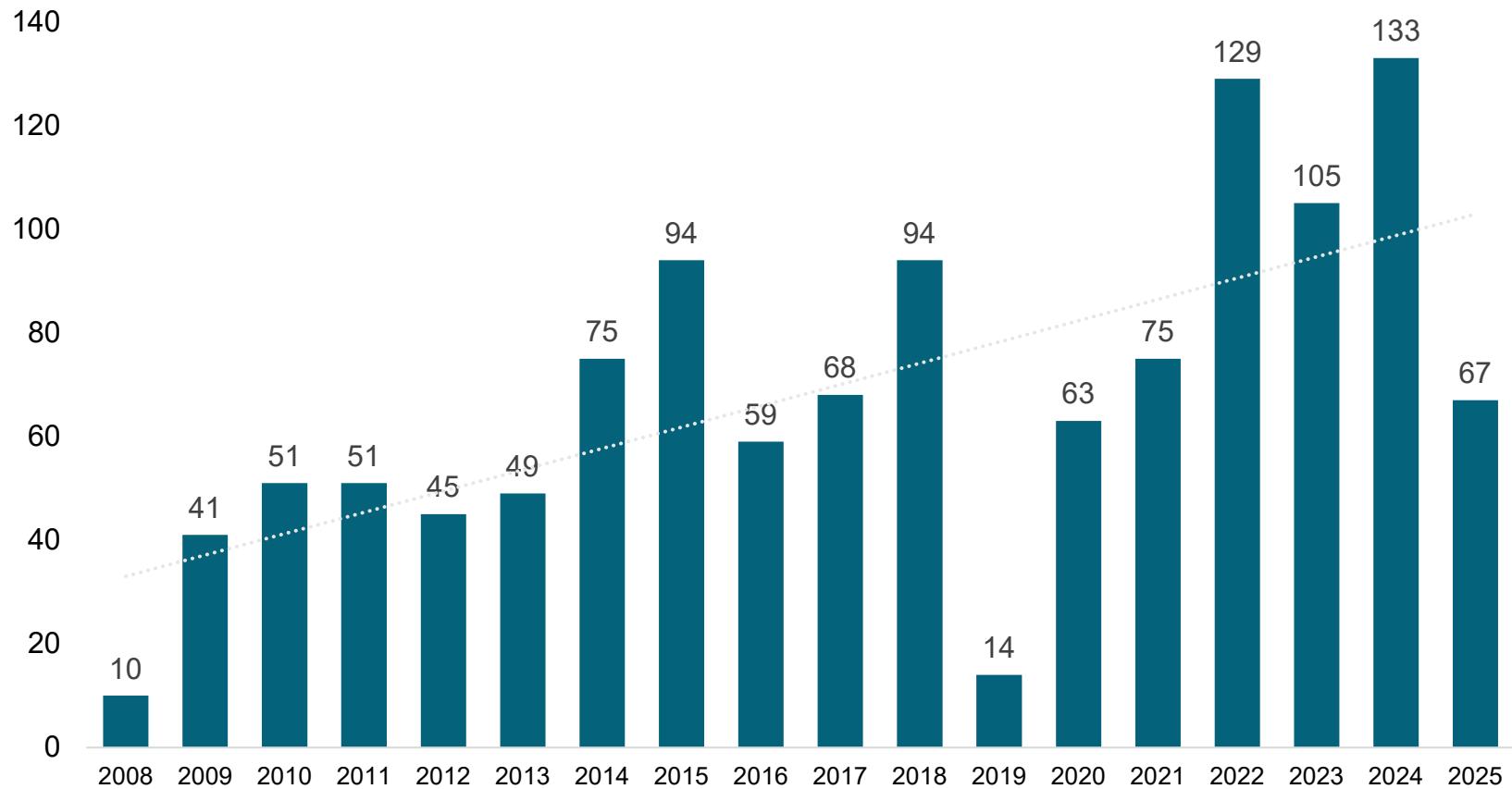
- ▶ When a person chooses to use MFP, their Home and Community Based Services (HCBS) are carved out of Managed Care.
- ▶ HCBS for MFP participants are funded Fee For Service
  - Carved out of Managed Care
- ▶ The QIO with Iowa Medicaid is the entity responsible for Quality Assurance oversight

# Program Success

- ▶ 99% remain in the community at the end of the MFP Demonstration Year
  - *As of the Semiannual Report to CMS for 01/01/2025-06/30/2025*
- ▶ #3 in the country for IDD transitions
  - Source: <https://clpc.ucsf.edu/publications/evidence-impact-money-follows-person-program> (July 2019)
- ▶ In 2022, Iowa was recognized as one of six Best Practice States identified by Mathematica in a report to Congress

# Transitions by Year

*As of April 28, 2025*





# What Does MFP Offer?

# Transition Coordination Services

- A person-centered process for individuals transitioning from a Qualifying Facility to a Qualified Residence in the home or community-based setting of their choice with the supports and services that meet their needs and preferences via:
  - Transition Planning Assistance
  - Transition Monitoring and Case Management
  - Conducting social marketing and outreach
  - Work with community providers to build capacity

# Behavioral Support Services (slide 1 of 2)

Supports MFP participants who have complex behavioral health needs to move to and/or maintain living in the community through:

- Functional behavioral assessment
- Behavioral Support Plans (BSPs)
  - Development
  - Training
  - Maintenance and revisions
- Data collection and monitoring

# Behavioral Support Services (slide 2 of 2)

To meet the needs of people with complex behaviors:

- Collaborative partnerships with other behavior support entities (i.e., PPSS, ITABS, etc.)
- Educational training to build the capacity of providers:
  - Positive Behavior Supports (PBS)
    - 1 day training
    - 2-day train-the-trainer training
  - Safety Care
  - Other training topics as requested that align with the scope of the role

# Employment Support Services

- ▶ Supports those interested in working to locate employment opportunities in their community of choice through
  - Vocational planning
  - Resume building
  - Data collection and monitoring
  - Employment support training
  - Connections with collaborative partners
- ▶ Outreach activities
- ▶ Provides technical assistance to partner agencies and organizations to build capacity

# Housing Support Services

- ▶ Supports MFP participants with:
  - locating housing
  - applying for rent and/or utility assistance
  - coordinating home modification projects
  - support to address challenges in maintaining living arrangements (related to housing-specific challenges)
- ▶ Outreach activities to overcome barriers
- ▶ Collaborative partnerships with other housing-related entities

# MFP Pillars & Buckets

## Qualified HCBS

- Adult day care (**ID, BI**)
- Career exploration (**BI**)
- Consumer choice option – CCO (**ID, BI**)
- Consumer-directed attendant care (**ID, BI**)
- Day habilitation (**ID**)
- Home and vehicle modifications (**ID, BI**)
- Home health aide (**ID**)
- Personal emergency response system (**BI**)
- Respite (**ID, BI**)
- Supported community living (**ID, BI**)
- Supported employment (**ID, BI**)
- Transportation (**ID, BI**)

## Demonstration Services

- Transition services coordination
- Facility staff participation in trial community visits
- Community provider participation in transition planning and preparation
- Assistive Technology not covered in ID or BI Waiver
  - e. g., computers, med. dispensing equipment
- Environmental modifications
  - e.g., for safety
- Initial household setup costs
- Nurse Delegation
- DME
- Clothing

## Supplemental Services

In  
Development

# Qualified HCBS

FMAP: 81.35%

- ▶ The Medicaid service package(s) that the state will make available to an MFP participant when they move to a community-based residence.
- ▶ Can be comprised of any Medicaid home and community-based state plan services and HCBS waiver program services.

# Providers

- MFP uses the same provider pool and pays the same established rates in most circumstances.

# Rates for Services

- ▶ Typically, MFP pays the Tier or other assigned rate
- ▶ MFP can pay an Enhanced Rate for services when the IDT agrees it is appropriate
  - The MCO Case Manager is part of the IDT and should be discussing this heightened rate with MCO leadership for awareness
    - Does not obligate the MCO to pay the higher rate
    - MCO must be in agreement it is appropriate for the needs and intends to evaluate the continuation past the MFP year.
- ▶ Typically, not more than 5% of people on MFP with Enhanced Rates

# What's Different About MFP?

## Enhanced Services Paid During the MFP Transition Year

### **DEMONSTRATION SERVICES**

- ▶ Transition Services Coordination
- ▶ Facility Staff Participation in Trial Community Visits
- ▶ Community provider participation in transition planning and preparation
- ▶ Assistive technology not covered in ID or BI Waiver
- ▶ Environmental modifications not covered in ID or BI Waiver
- ▶ Nurse delegation
- ▶ Initial household set up costs
- ▶ DME

# Demonstration Services

FMAP: 81.35%

## Qualified HCBS (federally)

- Services that could be provided, but are not currently provided, under the state's Medicaid program.

## Reasonable & Necessary

- Not available to the participant through other means and clearly specified in the participant's service plan.

## Not required to continue

- Not required to continue after the conclusion of the MFP Demonstration Year or for the participant at the end of the 365-day enrollment period.

# What's Different About MFP?

## Enhanced Services Paid During the MFP Transition Year

### **SUPPLEMENTAL SERVICES** (*pending CMS approval*)

- ▶ Rent Aid
- ▶ Utility Assistance
- ▶ Pantry Stocking
- ▶ Rental Deposit Assistance
- ▶ Clothing

# Supplemental Services (*in process*)

FMAP: 100%

## Short-Term

- ▶ Services to support an MFP participant's transition that are otherwise not allowable under the Medicaid program.

## Reasonable & Necessary

- ▶ Not available to the participant through other means and clearly specified in the participant's service plan.

## Not required to continue

- ▶ Not required to continue after the conclusion of the MFP Demonstration Year or for the participant at the end of the 365-day enrollment period.

# Accessing MFP

# Eligibility Criteria

- ▶ Medicaid eligible (with a disability determination)
- ▶ Meet criteria to qualify for eligibility and LOC for BI or ID Waiver
- ▶ Reside in a Qualifying Facility for at least **60** consecutive days
  - Intermediate Care Facility for individuals with Intellectual Disabilities (ICF/ID)
  - Nursing Facility (SNF or NF)
  - Psychiatric Medical Institutions for Children (PMIC)
  - Hospital (inpatient)

# Other MFP-Funded Work

Capacity Building and  
Rebalancing Initiatives

# Capacity Building Initiative

- ▶ Provider Prevention and Support Services (PPSS)

# Rebalancing Initiatives

- ▶ Increased HCBS Spending
- ▶ Iowa COMPASS
- ▶ Iowa's Technical Assistance and Behavior Supports (ITABS)
- ▶ Woodward Resource Center - Center of Excellence

# Authorizing Legislation

# Consolidated Appropriations Act of 2023

- Funds MFP through FFY27

## MFP Funding Availability



- Section 5114 of the Consolidated Appropriations Act, 2023 ([P.L. 117-328](#)) appropriated \$1.8 billion (\$1.7 billion after sequestration)
  - \$450 million per year (\$424.35 million after sequestration) for FY 2024-2027
  - Funds appropriated for each fiscal year are available for awarding to MFP grant recipients until the end of the following fiscal year
    - For instance, funds appropriated for FY 2027 must be awarded to MFP grant recipients by CMS by the end of FY 2028
- Funds awarded to MFP grant recipients are available for the fiscal year in which they are awarded plus four additional fiscal years

# Key Milestones



## **FY 2026**

- Final Report to Congress and the President due

## **FY 2027**

- Final year of appropriated funding

## **FY 2028**

- CMS awards any remaining funds from the FY 2027 appropriation
- MFP grant recipients may continue spending carryover funds (up to 4 years)
- Demonstration projects are closed out as funds are expended

## **FY 2029-2032**

- MFP grant recipients may continue spending carryover funds (up to 4 years)
- Demonstration projects are closed out as funds are expended

# Resources

# Additional Resources

- ▶ [MFP Brochure](#)
- ▶ [MFP Participant Manual](#)
- ▶ [MFP 101](#)



## Transition Planning Guide



## ► Transition Planning Guidebook

# Partners Meeting

- December 10<sup>th</sup> at Polk County River Place

# Thank You!

Lindsey Robertson

[lindsey-robertson@uiowa.edu](mailto:lindsey-robertson@uiowa.edu)

[lindsey.robertson@hhs.iowa.gov](mailto:lindsey.robertson@hhs.iowa.gov)

[mfpcentral@hhs.iowa.gov](mailto:mfpcentral@hhs.iowa.gov)



Health and  
Human Services

# Definitions & Acronyms

# Definitions (slide 1 of 2)

Term	Definition
Demonstration Year	<ul style="list-style-type: none"><li>• The 365 days of services and supports, beginning the day the individual discharges from a Qualifying Facility, paid by the Money Follows the Person program</li></ul>
Qualifying Facility	<ul style="list-style-type: none"><li>• ICF/IDs, Nursing Facilities, PMICs, and inpatient hospital settings</li></ul>

# Definitions (slide 2 of 2)

Term	Definition
Qualified Residence	<ul style="list-style-type: none"><li>As defined by section 6071(b)(6) of the DRA the term “qualified residence” means, “with respect to an eligible individual”:<ul style="list-style-type: none"><li>a home owned or leased by the individual or the individual's family member;</li><li>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; and</li><li>a residence, in a community-based residential setting, in which no more than 4 unrelated individuals reside.</li></ul></li></ul>

# Acronyms

Acronym	Details
FFS	Fee For Service
HCBS	Home and Community Based Services
ICF/ID	Intermediate Care Facility for People with Intellectual Disabilities
LTSS	Long Term Services and Supports
MCO	Managed Care Organization
NF	Nursing Facility
PMIC	Psychiatric Medical Institutes for Children
SNF	Skilled Nursing Facility