



The Partnership for Community Integration

*Help for ICF/ID and Nursing Facility Residents
Who Want More Independence and Choice*

Before you start reading this booklet, here's something you should know that will make it easier to understand. The booklet has many terms and program names which are explained in the glossary section beginning on page 13. These terms and names are in **bold-faced type** in the booklet.

INTRODUCTION

You may already know something about The Partnership for Community Integration program. This program is also called **MONEY FOLLOWS THE PERSON**, or "**MFP**." That's what we'll call it throughout this booklet.

***MONEY FOLLOWS THE PERSON** is the program that helps **ICF/ID** or **nursing facility** residents in Iowa to move into their own home or apartment . . . in the community of their choice.*

Right now, you live in an **ICF/ID** or **nursing facility**. Or, maybe you are a family member, friend or legal representative of someone who does. And perhaps you are ready to take advantage of the choice **MFP** offers—of living more independently out in the community instead of at the **ICF/ID** or **nursing facility**. **MFP**, which is funded by dollars from the U.S. government and the state of Iowa, is run by **Iowa Medicaid**, with the help of many partners.

People with disabilities, family members, advocates, **ICF/ID** or **nursing facility** and community providers, and several state agencies all helped to design this program. Now, they are watching to see how well it works for the people who are taking part. That way, they can keep improving the program. You or your family member are part of an option that offers people more independence, more choices, and the services they need to be successful in their own home or apartment—in the community of their choice.

This booklet is for you if . . .

- You are an **ICF/ID** or **nursing facility** resident who is eligible to take part in the **MFP** program—and you are actively planning to move out of your **ICF/ID** or **nursing facility** and into your own home or apartment.
- OR you are the family member, guardian or legal representative of an **ICF/ID** or **nursing facility** resident who is planning such a move.
- OR you have been chosen by an **ICF/ID** or **nursing facility** resident to serve as his or her **Independent Support Broker** under the “**Consumer Choices Option**.” Turn to page 6 of this brochure to learn more about the **Consumer Choices Option**.
- OR you are a member of the participant’s **Transition Planning Team**, or a friend or relative of someone participating in the **MFP** program and you are interested in supporting his or her full participation in the community.

If you are involved in planning the move for yourself or someone else, you may have received the brochure called *Moving Out into the Community: Helpful Information for ICF/ID & Nursing Facility Residents and Their Families*. It contains important information about consumer rights and responsibilities under **MFP**. And it talks about the risks that people take on when they live more independently. A **Transition Specialist** has been answering your questions and now you are ready to think about how you can take advantage of all the new opportunities you have.

The handbook that you are reading now provides information about the choices you can make: where to live, with whom, how to pay the rent, the services you want to use, and how you spend your time.

MFP participants who want the greatest flexibility in choosing their services, and want to have responsibility for managing them, can explore the **Consumer Choices Option**. All participants will receive the help of an **Independent Support Broker** and a **Financial Management Services** provider to carry out new responsibilities.

More information is available from your **Transition Specialist** and from the booklet called *Medicaid Home- and Community-Based Services Consumer Choices Option: Customizing Services for Iowans with Disabilities and Older Iowans*. You can get a copy of that booklet online at: <http://dhs.iowa.gov/ime/members/medicaid-a-to-z/consumer-choices-option>.

Just click on the “Medicaid Home and Community-Based Services CCO Brochure.” The brochure is free.

Table of Contents

Chapter 1	YOUR DECISION TO MOVE AND WHAT IT MEANS TO YOU
Chapter 2	YOUR PLANNING TEAM
Chapter 3	THE PLANNING PROCESS
Chapter 4	CHOOSING SERVICES
Chapter 5	THE CONSUMER CHOICES OPTION
Chapter 6	FINDING THE RIGHT PLACE TO LIVE
Chapter 7	THE COUNTDOWN TO MOVING DAY
Chapter 8	THE “DEMONSTRATION YEAR”
Chapter 9	RIGHTS, RESPONSIBILITIES, AND RISKS
Chapter 10	LEAVING THE MFP PROGRAM
Appendix A	SERVICES FOR IOWA’S MONEY FOLLOWS THE PERSON PROJECT
	GLOSSARY OF TERMS

CHAPTER 1: YOUR DECISION TO MOVE AND WHAT IT MEANS TO YOU

The decision to move out of the **ICF/ID** or **nursing facility** and into a house or apartment is a big one. It's the first step in building a new life for yourself. The supports and services you need in your daily activities, for staying healthy, and for work and recreation, will still be there—but now you will choose who provides them.

You will choose the community where you live (if you haven't already), and the house or apartment that will be your home. Your **Transition Specialist** and your planning team (**Interdisciplinary Development Team**) will discuss with you whether you want to have roommates. If you do, your team can probably help you find them. You and your team will talk about how you want to spend your time during the day—at a job or doing something as a volunteer.

This is a time for you to think about *how* you want to live your life. You'll want to talk that over with your family, friends, and other people you trust. Under the **Money Follows the Person**, or **MFP**, program, the person who is in control of these decisions is *you*. Tell your planning team what *you* like—and what you don't like. If you are not happy about something, say so. You are encouraged to think about trying new things, and to ask for help if you need it. Being more independent also means that you will be taking responsibility for your decisions. We'll talk about this in Chapter 9.

This booklet also describes the extra services for people who decide to move out of **ICFs/ID** or **nursing facilities**. For example, you will have help with moving expenses. . . with setting up a household . . . with fixing up the house to make it accessible. You'll even be able to “try out” your new place in an overnight stay. There are funding caps on these kinds of services—but you or your family can pay for more of them if you choose.

It is important for you to work closely with your **Transition Specialist** and your planning team to think about everything you will need—to make sure it is planned for, and that there is enough money available to pay for it. (Please note: **Medicaid** does not pay for room and board once you move to your own place.) How much you can afford to pay will affect the type of housing you choose. You'll read all about this in Chapter 6.

You also may want to have more control over your budget for some of your services. This is called “self-direction,” and you can read about that in Chapter 5. **Consumer Choices Option**.



CHAPTER 2: YOUR PLANNING TEAM

O.K., now you are ready to put together the planning team that will help you plan your transition to a new place in a new community. Your **Transition Specialist** can give you good ideas, but *it's up to you to decide who is on your team.*

Your team will probably include:

- Family, friends, and any people you trust.
- People from the **ICF/ID** or **nursing facility** who know you well.
- Your **Transition Specialist**.
- Your **Independent Support Broker**, if you are going to participate in the **Community Choices Option**.

Your **Transition Specialist** knows the community where you want to move, and will help you get to know service providers there. You are the one who decides who will be providing services to you, and you can talk this over with your team and the **Transition Specialist**, of course. It might be a good idea to have one or more of those service providers on your planning team. And if you will be getting **Supported Community Living** services, it might be especially important to have that provider on your team too. He or she will be responsible for making sure you have the personal supports you need in your new home. That might even include having a staff person live at your place with you!

Remember, it is *your choice* who you pick for your planning team. As you get new ideas, you can invite additional members to join your team. But think about this: It might be hard to plan and run meetings if your group gets too big. If you decide that you no longer want someone on your team, say so. That is also your choice.



Chapter 3: The Planning Process

You and your planning team will develop a **Transition Plan** that covers everything you need in order to be safe and healthy and to live your life the way you have planned.

Your plan includes supports and services related to activities of daily living . . . medical and dental services . . . the supports you need for employment or volunteer activities . . . transportation . . . and social and religious activities of your choice. This can also include mental health services—even emergency services if you need them.

The **ICF/ID** or **nursing facility** staff has provided your planning team with the records related to your health and to the services you have used there. But since you will be living in your own place, there may be things you will need that you take for granted right now at the **ICF/ID** or **nursing facility**. Here are some examples:

- Do you use a wheelchair? How big is it? How does that affect your housing needs?
- Do you have a sensory disability (vision or hearing)? What kind of supports or accommodations will you require?
- Do you need to be able to get to medical specialists? Do you take medications? Can your team help plan your transition so you have what you need at all times?

- Will you need transportation in order to work or do other outside activities? What kind of transportation?
- Do you need personal assistance available on a 24-hour basis? If you can manage by yourself much of the time, what do you need in order to get help immediately if you need it?
- When you get upset, do you need people there right away to help you calm down and get things under control?
- What will you need in order to enjoy your new situation and keep from being lonely?

These are just some examples. Your **Transition Specialist** and your planning team will help you imagine everything you might need to be satisfied with your move.

Chapter 4: Choosing Services

Once you and your team have listed all of your needs, you will start choosing the services to meet those needs. Some services will have to be there right away when you move in. Some are important but they just have to be there within 60 days. Your **Transition Plan** will say which is which.

There is another important way your services are planned. Under **MFP**, it is expected that participants will need extra services and supports to make the move from an **ICF/ID** or **nursing facility**, get settled in their own place, and get used to their new activities and living situation. It is also expected that you won't need these services and supports for longer than a year. Your first year in your own place is called your **Demonstration Year**.



It starts on the day you move out of the **ICF/ID** or **nursing facility** and ends exactly one year later. The extra services that you may need in the first year are called **Demonstration Services** and **Supplemental Services**.

Examples of **Demonstration and Supplemental Services** are found in the chart in **Appendix A** toward the end of this booklet. As you can see, several of the **Demonstration Services** are intended to make sure there's a smooth transition from the **ICF/ID** or **nursing facility** to your community living situation. Under **MFP**, the **ICF/ID** or **nursing facility** staff and community providers can work together to make sure the community staff are ready to provide you with the services you need. This can include training of provider staff. Funding is also available to make sure your new home or apartment is accessible and meets your needs.

There are some services that you expect to need *for a long time—maybe even for your whole life*. Many people with disabilities have been living successfully in the community because they can get these services thanks to money from the state of Iowa. These services will be available both during your **Demonstration Year** and after . . . for as long as you need them.

The **Iowa Department of Human Services (DHS)** is working with the Iowa Legislature to try to add some mental health services to the program that can help people who are participating in **MFP**.

It is not certain that the services will be added. So, your team will work on finding ways to make sure you get everything you need in case the services are not added.

Your **Transition Specialist** can help you review the information available about the provider agencies where you want to move. Providers often have websites, and will be listed in the phone book. You can also choose the staff people who will be living with you or providing your services. At the end of your **Demonstration Year**, you can choose the **Community Case Manager** who will take over from a **Transition Specialist**.

Note: There are some things that **MFP** cannot pay for, but they might be paid for by other programs.



Chapter 5: The Consumer Choices Option

The **Consumer Choices Option** is for people who want more control over a part of the budget for their services and supports.

Typically, **Medicaid** members with disabilities pick from among certified “Medicaid providers” for their services. Iowans in **MFP** who use the **Consumer Choices Option** can *hire their own employees* for some things, and they can plan and use their funds to get things that are important to them. This is why the **Consumer Choices Option** is called “self-direction.”

Your **Transition Specialist** and your planning team can help you decide whether the **Consumer Choices Option** is right for you.

People who use self-direction have *three tools* to help them make decisions and build the life they want.

- First, they have an *individual budget* that can (if the person chooses) cover their personal care needs . . . the supports to help them live and work in the community . . . and goods and services they need, but might not be able to get under regular **Medicaid**.
- Second, an **Independent Support Broker (ISB)** provides information to the individual taking part in **MFP**—and helps them develop their budget. The **ISB** also helps them get the supports they need, and makes sure the plan and budget are working well. You choose your **ISB**.

- Third, a **Financial Management Service (FMS)**—a bank or credit union—keeps the money from your budget in a special account, and pays for what you purchase, in line with your individual service plan and budget. The **FMS** works for you and makes sure that federal and state laws, such as payroll taxes, are followed.

It is your choice whether to use the **Consumer Choices Option** when you move out of the **ICF/ID** or **nursing facility**. If you decide you want to stop using it, you can stop at any time, and your **Transition Specialist** or **Community-Based Case Manager** will help you switch to the usual way of planning for your services.

If you want to learn more about self-direction, your **Transition Specialist** can give you and your family the information you need.

You can also find out more at:

<http://dhs.iowa.gov/ime/members/medicaid-a-to-z/consumer-choices-option>.

Chapter 6: Finding the Right Place to Live

By this time, you've made an important discovery: There's a lot to think about as you choose a place to live. Do you want to live with roommates? Do you need a support worker 24 hours a day? If the answers are yes, you will need a bigger house or apartment than if you lived alone.

MFP has some important rules about where participants can live. The rules help make sure people have dignity, privacy, and as much independence as possible.

The three kinds of **Qualified Residences** are:

1. A home that you or a family member owns or leases;
2. An apartment that you lease, as an individual—with lockable doors, and with living, sleeping, bathing, and cooking areas for you to use as you wish;
3. A community-based home in which no more than four unrelated people live.

There are many ways to go about finding a place you like and that you can afford. You and your family can look around in the community where you want to move. Your **Transition Specialist** may have ideas. Or the Iowa Finance Authority website, www.HousingInIowa.org, will help you, your family, and the **Transition Specialist**.

If you are going to need **Supported Community Living (SCL)** services, the **SCL** provider may already have some places for you to look at. The important thing is that you must have the right to choose; the final decision is up to you.

MFP funds can be used to pay for an apartment's security deposit, as well as other one-time expenses such as cleaning, and hooking up the telephone and utilities. You have not had to pay for rent, food, heat or electricity while living in the **ICF/ID** or **nursing facility**, but if you move into a home or an apartment, you will probably have to figure out how you will afford all of this. Having roommates to share the costs helps. You and your future roommates need to agree on how you will share the rent, grocery costs, and the heat, electricity, and water bills.

The Services Chart in Appendix A shows that you can get your new home fixed up to be accessible. You might need a ramp or a wider bathroom doorway, for example, if you use a wheelchair.

Soon it will be time for you to move into your new place. But first, you and your planning team might want to talk about whether it would be a good idea to stay there overnight . . . to try it out. That way, you can make sure you (and your roommates) will be comfortable there. You might see some things that need to be changed. And if you like it there, you will feel very good when moving day comes.

Chapter 7: The Countdown to Moving Day

The **Transition Plan** that you and your planning team developed must cover a lot of details—every single thing that is needed for you to move safely, and to have all the services you need in place when you need them.

Here are some things that will happen, leading up to your move:

- You will meet all the direct service workers you have chosen, if you haven't already.
- You will probably visit the places where you will work or volunteer. The service providers who will take care of your supports after you move may spend time at the **ICF/ID** or **nursing facility**, getting to know you better.
- Someone from **Iowa Medicaid** will ask you to answer questions on a survey about living in the **ICF/ID** or **nursing facility**. And there will be another survey later, about how you like living in your own place. The federal government wants to know how well the **MFP** program is working out.
- Your **Transition Specialist** will go over your moving plan with you and your family (or guardian or legal representative). If you all decide that it is a good idea for you to move into your new place, you or they will sign a paper agreeing to it.
- Your new home or apartment will be fixed up, if necessary, so that it is accessible to you.

Also, the **Transition Specialist** will help you and your family buy the furniture and kitchen and bathroom supplies that you will need. If you are going to have roommates, this could be something you will enjoy doing together.

An **ICF/ID** or **nursing facility** staff person may come with you on an overnight visit to your new place, or they may visit you after you move.

- You may get a new doctor and dentist, or other special healthcare provider. When you move you will have the prescription drugs you need, and your prescriptions will be transferred to a pharmacy near your new home.
- If you will be working in the community for the first time in your life, you may need some new clothes. **MFP** can pay for this.
- If you are using the **Consumer Choices Option**, you will be enrolled with the **Financial Management Services**, which will help you manage your individual budget. Your **Transition Specialist** and your **Independent Support Broker** will help you line up the services you will be self-directing after your move.

Your **Transition Plan** spells out what services have to be there for you the day you move in. It is the **Transition Specialist's** job to make sure that happens.

Chapter 8: The “Demonstration Year”

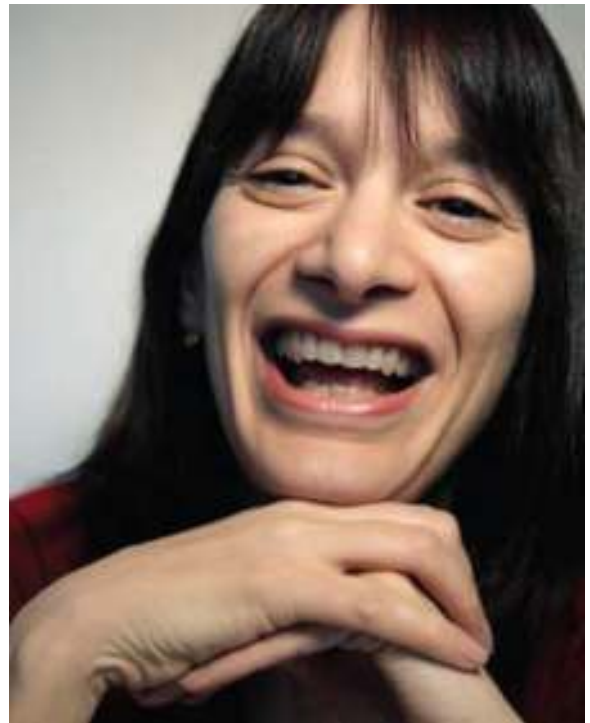
Here you are in your own place! You and your roommates may be having fun, but there will probably be things you need to get used to. Although it's best to give everything some time to work out, remember this: You *never* lose your right to choose who will provide you with your services, including the people who help you every day.

Your **Transition Specialist** will be meeting with you *within two days* after you move in. Then, you will meet again at least *every month for the next year*—and maybe more if he or she thinks it is necessary to make sure things are going well.

If you are not happy about something, tell your **Transition Specialist**. You and the **Transition Specialist** may decide that your **Transition Plan** needs to be changed in some way. You might need another service, or more hours of service, or you may want to change service providers.

You have the option to use a service called **Personal Emergency Response System (PERS)**, sometimes called a “lifeline.” People usually wear the **PERS** around their neck. They push the button in an emergency if they're alone—to get help if they've fallen, if they're lost, if their service worker hasn't shown up, or if they have any other serious trouble. This can be an important part of your emergency backup plan. Your plan spells out what your service providers must do in emergencies. You and your family (or guardian or legal representative) should get to know this plan.

One of the most important things you and your team planned for before you left the **ICF/ID** or **nursing facility** was how you would spend your time during the day. If you did not have a job or a chance to volunteer lined up before you moved, it will be important for you and the service provider and the **Transition Specialist** to work together to find one now. Work, volunteering, and taking part in things that you enjoy in your new community will help you make friends and be happy with your new situation.



Chapter 9: Rights, Responsibilities, and Risks

You know that it is your choice whether to participate in the **MFP** program. *Once you move to your own place, you have a right to stop participating in the program at any time.* If that happens, you can apply to return to an **ICF/ID** or **nursing facility**.

However, there may not be an opening for you right away, so you would have to be put on a waiting list. **ICF/IDs** or **nursing facilities** cannot afford to hold a place open for people who leave, just in case they want to come back.

Another choice besides going back to the **ICF/ID** or **nursing facility** is to work with our **Transition Specialist** to solve any problems that have come up. You have a right to expect that your health and safety will be protected in the community . . . that all the services in your **Transition Plan** will be available to you when you need them . . . and that they will be of high quality. You have a right to be treated with respect, and to participate fully in decisions about your life and about your services and supports.

With this right comes your responsibility to tell people what you want. **MONEY FOLLOWS THE PERSON** is funded with **Medicaid** dollars, and you have all the rights that any other **Medicaid** member has. Your **Transition Specialist** is the first person to contact if you have complaints or problems. If that doesn't work out the way you want, you can also call the **Iowa Medicaid** Member Services toll-free telephone number: 1-800-338-8366.

When you move to the community, you will also be given the phone number of the local

office of the **Iowa Department of Human Services (DHS)**. You can call that number if you have complaints or problems. You should keep both of these numbers handy where you can find them easily.

You have a right to feel safe with the people who provide your supports and services. If anyone hurts you in any way, whether it is physical, or in the way they talk to you, or if they make you feel bad on purpose, your provider is required to report this to the state, and to take steps right away to make sure it doesn't happen again.

The state also wants to know if you are hurt by accident, or if someone who is supposed to provide services to you doesn't show up. Your **Transition Specialist** certainly wants to know too, and usually this would be the first person you talk to if you have a problem. When you move to the community, you will also be given a card with the number to call if you ever stop feeling safe: 1-800-362-2178. This is the number of the state office that looks into "abuse and neglect"—situations where people are being treated badly or not getting the help they need. If you think you are in an emergency situation though, you should *call 911 to get help right away*. Don't hesitate. You should never be afraid to make this call just because of what someone might think.

No one can ever be completely safe—wherever they are. Accidents, or worries, or times of being afraid are part of everyone's life. As an **MFP** participant, you are reaching for more independence, and the satisfaction of trying new things—working to solve problems and start new relationships. Rights and responsibilities may not come without risks, but they can bring dignity and self-respect.

Chapter 10: Leaving the MFP Program

At the end of your first year (your “**Demonstration Year**”) in your new place, you will no longer be a participant in the **MONEY FOLLOWS THE PERSON** program. But you will probably not notice anything different, *except for this*: Your **Transition Specialist** will no longer be in charge of making sure you are getting what you need. That job will be given to a **Community-Based Case Manager**. Your services will probably come through the county disability system. If you are using the **Consumer Choices Option**, you can keep the same **Independent Support Broker**.

At the end of the first year, your **Transition Specialist** and your **Community-Based Case Manager** will work together to make sure you continue to have the services you need in order to live in the community. A month or two before the end of your **Demonstration Year**, you will meet the **Community-Based Case Manager** who has been referred to you. (You have a right to choose your **Community-Based Case Manager**.) He or she will do a complete review of what you need and discuss with you how well your service plan is meeting those needs. This will happen every year.

At about the same time, you will be asked to sit down and answer some questions about whether you like your living situation, your services and supports, and the way you spend your time. You can ask a family

member or friend to help you answer the questions. If you say what you think, it will help the state of Iowa and the federal government learn about how well **MFP** is working and whether anything needs to be changed.

Iowa Medicaid monitors all of the programs and services connected with **MFP** to make sure people are getting what they want and need. Their Quality Assurance specialists work together with your providers and your case manager to make sure you are getting the support you need and to make your dreams a reality.



**Appendix A:
Services for Iowa's
Money Follows the Person Project**

Qualified HCB Program Services	HCB Demonstration Services	Supplemental Services
<ul style="list-style-type: none"> • Adult Day Care • Consumer-Directed Attendant Care • Day Habilitation • Consumer Choices Option • Home Health Aide • Home/Vehicle Modifications • Interim Medical Monitoring • Nursing • Personal Emergency Response System (“lifeline”) • Prevocational Services • Respite Services • Supported Community Living • Supported Employment • Transportation <p>Permanent services to be added:</p> <ul style="list-style-type: none"> • Mental Health Outreach • Behavioral Programming • Crisis Intervention Services 	<ul style="list-style-type: none"> • Transition Services Coordination • ICF/ID and nursing facility staff participation in trial overnights in the new community setting • Community service provider participation in transition planning and preparation • Assistive technology not covered in MR Waiver (such as computers and medication dispensing equipment) • Environmental modifications needed for safety • Nurse delegation (training by a nurse of the consumer or care provider in various tasks that would ordinarily be done by the nurse) 	<ul style="list-style-type: none"> • Initial household setup costs (furniture, housewares, etc.) • Durable Medical Equipment • Clothing

GLOSSARY OF TERMS

Community Case Manager — This is someone that will help the consumer coordinate all services after the demonstration year has ended.

Consumer Choices Option (CCO) — This is an option available to anyone participating in MONEY FOLLOWS THE PERSON in Iowa. CCO gives people more flexibility and control over the budget for some of their services.

Demonstration Services — One of three kinds of services available to people participating in MONEY FOLLOWS THE PERSON. Demonstration Services are extra services people might need in order to move successfully into their own place. They are available for the first year of their participating in the program. (See Appendix A.)

Demonstration Year — A MONEY FOLLOWS THE PERSON participant's first 365 days after he or she moves into the community.

Financial Management Services (FMS) — The FMS is a bank or credit union that receives the funds for a CCO participant's service budget, makes payments on behalf of the participant, and helps to keep track of the funds.

Home- and Community-Based Services (HCBS) — Home- and community-based services are available to people participating in MONEY FOLLOWS THE PERSON, to help them live as independently as possible in their own homes and communities.

Independent Support Broker (ISB) — Someone chosen by CCO participants to help them develop their individual budget and to identify and obtain the services they need.

Interdisciplinary Development Team (IDT) — A group of people chosen by a MONEY FOLLOWS THE PERSON participant, with the help of the Transition Specialist, who knows the participant well and can help him or her develop a Transition Plan that addresses all service and support needs for successful community living.

Intermediate Care Facility for People with an Intellectual Disability (ICF/ID) — A residential facility certified under federal law that provides active treatment to people with intellectual disabilities and related conditions. MONEY FOLLOWS THE PERSON participants must have lived in an ICF/ID for at least three months to qualify for the program.

Iowa COMPASS — A free, statewide information and referral service for people with disabilities, their families, and service providers. The toll-free number to call for help is 1-800-779-2001. Anyone can also search the database of programs and services by going to www.iowacompass.org.

Iowa Department of Human Services (DHS) — The department responsible for overseeing a large number of programs serving groups such as people with low income and people with disabilities. Iowa Medicaid Enterprise is a Division within DHS.

Iowa Medicaid — The state agency, within DHS, that oversees Iowa's Medicaid program, which is funded by the federal government with matching funding from the state and counties. IME is responsible for running the MONEY FOLLOWS THE PERSON program.

Medicaid — Federal funds under Title XIX of the Social Security Act that provide healthcare coverage for such groups as low-income families, the elderly, and people with disabilities. MONEY FOLLOWS THE PERSON is funded with Medicaid dollars.

Money Follows the Person (MFP) — A five-year program established by Congress to help states move people out of ICFs/ID, nursing homes, and other institutions, and into their own homes, with extra services and supports to help make sure the move is successful.

Nursing Facility — A residential facility that provides 24-hour care for individuals who need skilled or nursing care. Medicaid helps with the cost of the care. MONEY FOLLOWS THE PERSON participants must live in the nursing facility for at least three months to be eligible.

Personal Emergency Response System (PERS) — Sometimes called a “lifeline,” a PERS is a small device that can be carried by a MONEY FOLLOWS THE PERSON participant throughout the day and used to call for help in emergencies.

Qualified Residence — A home or apartment that meets the standards required by the MONEY FOLLOWS THE PERSON program. It must be either (a) a home that the participant or a family member owns or leases; (b) an apartment that the participant leases, as an individual—with lockable doors, and with living, sleeping, bathing, and cooking areas that the participant uses as he or she wishes; (c) a community-based home in which no more than four unrelated people live.

Qualified Home- and Community-Based (HCB) Services — Services available under MONEY FOLLOWS THE PERSON that help a participant live successfully in the community and that are expected to be needed for a long time. At the end of the Demonstration Year, the participant begins to get these services from other providers. (See Appendix A.)

State Plan Services — Medicaid services available to meet the healthcare needs of anyone eligible for Medicaid. Some State Plan Services provide the kind of long-term supports that MONEY FOLLOWS THE PERSON participants may need to live successfully in the community. (See Appendix A.)

Supplemental Services — One-time services available to participants to help them move successfully to their own place. (See Appendix A.)

Supported Community Living — Services provided in the home and community according to a person’s needs identified in the Transition Plan. These include personal and home skills training, individual advocacy services, community skills training, personal and environmental support services, transportation, and treatment services.

Transition — A carefully planned move by a MONEY FOLLOWS THE PERSON participant from an ICF/ID or nursing facility to a qualified residence in a community of his or her choosing.

Transition Planning — The formal process in which the participant chooses a place to live, sets personal goals for community living, and chooses the services he or she will need to pursue those goals, with the help of the Transition Specialist and the planning team. The team helps develop a plan that will support the individual and ensure his or her health and safety.

Transition Specialist — Someone who provides information about MONEY FOLLOWS THE PERSON to ICF/ID and nursing facility residents and their families, who helps a participant develop a Transition Plan, and who also helps in coordinating all the services needed for the move to the community and for the Demonstration Year.



<http://dhs.iowa.gov/ime/members/medicaid-a-to-z/mfp>