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1. Executive Summary

Louisiana is creating a sustainable system that supports community options as a first choice for individuals needing long term care services. The State will be implementing a Managed Long Term Supports and Services (MLTSS) delivery system for the elders and adults with adult on-set disabilities population in 2015, and the Intellectual and Developmental Disabilities (I/DD) population in 2016. This delivery system will allow the State to continue to advance and preserve systems that support transitions among settings and services, in addition to supporting quality assurance improvement systems.

With the implementation of a managed care system, the Office of Aging and Adult Services (OAAS) will be adding an Assessor Training Module. This training will allow OAAS administrative staff to train the contracted assessor’s staff on how to conduct appropriate MDS-HC assessments on all potential MFP participants. OAAS will also be contracting with the Center of Healthcare Strategies (CHCS) and other entities to provide training to all OAAS staff, managed care staff and providers. Trainings will focus on how MLTSS operates and the monitoring of contracts to ensure benchmarks and outcomes are met. OAAS will provide incentives to the MCO for hard to house individuals as a mechanism for the MCOs to learn about and become involved in efforts to create adequate safe, affordable and accessible housing for individuals with disabilities.
2. Stakeholder Involvement

The role of various stakeholders is to provide input from the perspective of the roles they have in helping in the transition of individuals from institutions back to the community. Stakeholders were selected based on previous interactions with Medicaid, the Office for Citizens with Developmental Disabilities (OCDD), and the Office of Aging and Adult Services (OAAS). These advocates and providers have been involved in real choice system changes for many years and were chosen for their knowledge and understanding of the participants in their community and service system. The Stakeholder meeting will be held on March 13, 2015.

The below chart provides counts of the various stakeholder groups included:

<table>
<thead>
<tr>
<th>Provider Groups</th>
<th>76</th>
</tr>
</thead>
<tbody>
<tr>
<td>Family</td>
<td>5</td>
</tr>
<tr>
<td>Advocacy Groups</td>
<td>65</td>
</tr>
<tr>
<td>State Support</td>
<td>61</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>207</strong></td>
</tr>
</tbody>
</table>


3. State’s Plan for Continuing Support of Moving Persons out of Institutions

The state will continue to actively support moving persons with intellectual and developmental disabilities (I/DD) out of institutions after the ending of the Money Follows the Person (MFP) Rebalancing Demonstration (Demo).

The state is projected to implement a comprehensive managed long-term supports and services program for the I/DD population in 2016. This program will include the full lifespan, birth through end of life, consistent with the target group of the MFP Demo, and will incorporate both a transition expectation and a full array of Home and Community Based Services (HCBS) available for both transition and diversion. The transition protocols developed and tested by the MFP Demo will be transferred to operational expectation of the managed care plans operating the I/DD MLTSS system as a standing expectation. Transition responsibilities will not be tied exclusively to the MFP Demo, but rather to an overall system design and expectation. The managed care plans will be heavily supported by the OCDD central office staff, inclusive of staff retained from the MFP Demo post demo end, to develop capacity to successfully implement and sustain the transition system. The OCDD central office will also utilize rigorous performance review processes to ensure appropriate implementation of identification, planning, and sustainability of transitions ongoing.

Populations targeted will be all persons with an OCDD statement of approval or who are in the state’s Early Intervention program and who are Medicaid eligible. These are the eligibility criteria for the state’s proposed MLTSS system.

Institutions targeted include public and private Intermediate Care Facilities for Persons with Developmental Disabilities (ICFs/DD), nursing facilities, psychiatric facilities serving persons under age 22, and acute care hospitals.

The state will continue some MFP activities. This information is provided in Sections 4 and 5.

OCDD will retain the two transition coordinators under MFP Demo funding for 365 days after the final transition date (staff ending December 31, 2018). These staff positions are integral in providing the support for persons to complete the demo period and are key in capacity building with I/DD managed care plans. These positions will be transferred to OCDD Medicaid administrative positions, supporting the I/DD MLTSS program. Also on December 31, 2018, OCDD will discontinue one additional MFP Demo funded administrative position. OCDD will maintain two MFP Demo administrative staff positions through the close of the program in 2020. These staff will ensure that reporting and submission requirements of the program are met, inclusive of quality of life surveys, program monitoring, and reporting to both CMS and stakeholders. Upon the close of the program, these staff will be transferred to OCDD Medicaid administrative positions, supporting respectively quality and provider credentialing in the I/DD MLTSS program.

The state will continue to actively support transitioning elders and adults with adult on-set disabilities from nursing facility institutions after the ending of the MFP Rebalancing Demonstration.
The state is projected to implement a comprehensive managed long-term supports and services program for the Elder and Physically Disabled (E/PD) population. This program will serve all dually eligible recipients residing in both nursing facilities and in the community. This program is consistent with the target populations currently defined in Louisiana’s MFP demonstration and will include the expectations and full array of HCBS available for both transition and active diversion, which are both current MFP goals of the state. The transition protocols developed and tested by the MFP Demo will be transferred to operationalize expectations of the managed care plans operating the E/PD MLTSS system and will be a consistent, standard expectation of their performance measure. Transition responsibilities will not be tied exclusively to the MFP Demo prior to the end of the demo, but rather to an overall system design and expectation. The managed care plans will be heavily supported by the OAAS central office staff, inclusive of staff retained from the MFP Demo post demo end, to develop capacity to successfully implement and sustain the transition system. The OAAS central office will also utilize rigorous performance review processes to ensure appropriate implementation of identification, planning, and sustainability of transitions ongoing.

Populations targeted under the demonstration will continue to be all persons who are currently residing in Louisiana nursing facilities for at least ninety days and have an interest in returning back to the community. For the purpose of diversion, OAAS will continue to offer priority waivers to persons who are currently residing in nursing facilities and who are deemed to meet nursing facility level of care based on the MDS-HC (minimum data set-home care) and who are not in nursing facilities for a therapeutic/rehabilitative stay only. All must meet financial eligibility for Medicaid LTS as well. These are the eligibility criteria for the state’s proposed MLTSS system.

Institutions targeted include all public and private nursing facilities.

OAAS will retain 8 field transition coordinators under the MFP Demo funding for 365 days after the transition to MLTSS (staff ending September 30, 2016). These staff members play an integral role in providing the support to the MCO(s) for persons to enroll and complete the demo period for the first year of the state’s transition to managed care. After this period, the MCO will be responsible for all transition activities related to enrollment and transition to the community. OAAS will continue, through the MFP demonstration, the following positions: MFP program manager for OAAS, two transition program managers, a data specialist, a quality manager, and two housing coordinators (7 positions).

The OAAS MFP program manager will continue to work with the State’s MFP director to ensure all demonstration activities are adhered to and reported in a timely manner. The position will also oversee all the MFP OAAS positions and MFP demo funded activities for OAAS. This position will be discontinued on December 31, 2019.

The OAAS data specialist position will continue to monitor all transitions by both the transition coordinators up until the period of September 30, 2016 and through the MCO(s) through the period of December 31, 2019. Upon termination of the position and demo, OAAS will monitor all activities related to transitions through structured reporting mechanisms.
The two transition managers, who currently function in supervisory roles over field staff and monitor transition activities in the field, will continue to work to ensure that the MCO(s) are enrolling and transitioning participants and that OAAS is meeting its annual MFP benchmarks. One transition manager will be responsible for assisting and providing technical support to the Northern part of the state and one will be domiciled and responsible for the Southern part of the state through December 31, 2019.

The two housing coordination positions will continue to support the state’s Permanent Supportive housing and 811 housing initiatives. The MFP PSH Housing position will be discontinued as of December 31, 2019. The 811 housing coordinator under MFP will continue on through the demonstration and will switched to Medicaid Administrative funding as of January 1, 2020 to maintain the position.

The quality monitor position will continue to work with the data manager specialist and the MCO(s) to ensure the required MFP data elements and quality of life surveys are being completed accurately by the state, both providing technical support to the MCO(s) serving that portion of the state.

The state’s budget request includes projection of the funds necessary to carry out this staffing phase down.

4. Demonstration Services

See Attachment 1
### 5. Administrative Staff Positions Funded by MFP

<table>
<thead>
<tr>
<th>Job Function/Title</th>
<th>FTE</th>
<th>FTE Funded Post MFP</th>
</tr>
</thead>
<tbody>
<tr>
<td>OAAS MFP Program Manager</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>OAAS Intake/Data manager specialist</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>OAAS MFP Housing Coordinator/Quality of Life Coordinator</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>OAAS MFP Quality Monitor</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>OAAS Transition Coordinator Region 1</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>OAAS Transition Coordinator Region 2</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>OAAS Transition Coordinator Region 3</td>
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<td>0</td>
</tr>
<tr>
<td>OAAS Transition Coordinator/Transition manager supervisor Region 4</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>OAAS Transition Coordinator Region 5</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>OAAS Transition Coordinator Region 6</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>OAAS Transition Coordinator Region 7</td>
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<tr>
<td>OAAS Transition Coordinator Region 8</td>
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</tr>
<tr>
<td>OAAS Transition Coordinator Region 9</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Transition Manager Supervisor</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>MFP 811 Housing Coordinator</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>OCDD MFP Program Manager</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>OCDD Transition/Quality Management (QM) Coordinator for Children and Adults in Nursing Homes (Program Monitor)</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>OCDD Transition/Quality Management (QM) Coordinator for Persons Living in ICFs/DD</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Direct Support Training and Transition Supports Coordinator</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Data Management and Analysis Coordinator</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Medicaid MFP Project Director</td>
<td>1</td>
<td>0</td>
</tr>
</tbody>
</table>

**OAAS Transition Coordinators for Physically Disabled/Elder populations residing in Nursing Facilities (8 positions ending September 30, 2016)**

a. Serve as Office of Aging and Adults Services Transition Coordinators for transition initiatives related to home and community-based services waivers administered by OAAS for the populations of physically disabled and elders residing in Nursing Homes.

Duties of field transition Coordination staff include:

* Hand delivering initial waiver offers to residents referred by nursing home ombudsman/section Q/ self-referral process into MFP (work to transition process to MCO by Sept. 30, 2016)
* Assist Care managers once OAAS transitions to MLTSS with:
o Plan of Care (POC) development
o Face to Face discharge planning with MCO care manager, Nursing Facility staff and participant.
• Assist with searching for housing (train the MCO care manager on this activity).
• Assist with housing applications (obtaining and completing) and assist MCO care manager on this activity.
• Assist with Risk Mitigation Assessment (train MCO on carrying out this activity).
• Assist with Assessment (train MCO on carrying out this activity).
• Obtain documents needed for housing assistance and placement (train MCO care managers on this activity).
• Schedule transportation and accompany participants to view housing, if necessary (train MCO on this activity).
• Schedule transportation and accompany participants to medical appointment, if necessary (train MCO on this activity).
• Assist with accessing My Place Louisiana funding opportunities for those supports otherwise not covered by Medicaid, but required to transition successfully to the community. (train MCO on this activity).
• Provide technical assistance when needed to MCO.

b. FTE – 8

c. These positions are funded under MFP as a 100% administrative service and will continue until 365 days past the transition to managed care and the takeover of these duties by MCO staff. These positions are anticipated to end September 30, 2016, as OAAS is scheduled to move to a managed long term care system October 1, 2015.

d. This position will remain full time under the MFP Demo until September 30, 2016.

e. None

OAAS populations are moving to managed care October 1, 2015 and position responsibilities will be included in MCO performance contract. OAAS Transition Manager – (2 positions, one for the Northern and one for the Southern part of the state)
OAAS Transition Manager – (2 positions, one for the Northern and one for the Southern part of the state)

a. Serve as Office of Aging and Adult Services Transition/QM Program Manager Supervisors for MFP field coordination positions related to home and community-based service waivers administered by OAAS. Duties of the positions include interaction with persons currently residing in nursing facilities, and all current program referral sources, and management and supervision of MFP field transition staff. Once OAAS transitions to managed long term care, these positions will be responsible for tracking and monitoring and trending referrals to the MCO from current referrals sources, as well as monitoring and tracking transition trends. Duties will also include continued technical assistance to the MCO to achieve annual MFP benchmarks.

Essential duties of these positions include:

- Implementation of MFP program design, policies, and procedures as outlined in the Operation Protocol (OP).
- On-going supervision of MFP field staff until September 30, 2016 which includes: weekly monitoring of activity logs, weekly monitoring and reporting of transitions in designated regions, conducting at a minimum annual trainings with staff, and providing program updates at regular staff meetings with field staff.
- Data mining and compilation of reports related to transition numbers for all OAAS state reporting requirements.
- Review of all check requests received for compliance and adherence to CMS federal guidelines for use of supports funded through the demonstration.
- Coordination with DHH fiscal for all check disbursements for supports needed and covered through MFP.
- Recording and copying of all checks mailed to vendors on behalf of MFP participants for record retention purposes.

b. FTE – 2

c. This position was funded under MFP as a 100% administrative service and will continue until 365 days past the final transition date (projected end December 31, 2019).

d. These positions will remain full time under the MFP Demo until December 31, 2019.

e. Both positions will transfer to Medicaid Administration on January 1, 2020 and will support implementation and monitoring of the PD/Elder MLTSS program’s transition requirements.

f. This position will remain full time under the MFP Demo until the end of the final demo period.

g. None
OAAS MFP intake and data management coordinator:

a. OAAS currently utilizes a number of different databases that are sometimes housed by contract agencies. These agencies contain some or most of the information required for demonstration reporting and quality management tracking. These databases are cumbersome to use and will require the coordination of the Intake and Data Collection Coordinator working with the contract agencies to obtain needed information for monthly and quarterly query. The current systems in place do not have the capability to produce reports specific to demonstration participants, leaving demonstration staff to query for each participant. The OAAS Intake and Data Collection Coordinator will assist in programming needed reporting and/or flagging participants in the above mentioned databases. The position will require data mining and coordinating with established OAAS contracting agencies along with Medicaid to retrieve needed data from multiple systems. Once OAAS moves to managed care, the position will work with the MCO to ensure all necessary data is transferred over and access to data mining for timely reports is in place to meet program objectives.

The Intake and Data Collection Coordinator will work under the supervision of the OAAS My Place Program Manager. This position will work with the OAAS My Place Program Manager and staff in data mining information from databases to produce demonstration reports. Reports must be constructed so staff can immediately seek information by individuals, restricted dates, providers, or other limits at any time and from remote locations.

Data collection, preparation, submission and management

- Maintains records; prepares reports and correspondence relative to grant and grant-funded contracts.
- Creates and maintains all databases needed for project management and reporting to CMS Grant Officer.
- Ensures timely entry of data into CMS web-based reporting system and timely completion of annual and semi-annual reports to grantor.
- Compiles data/information provided by project staff, consultants, and/or partners into prescribed reporting formats. May when necessary develop templates and forms for reporting of project status, findings, and/or outcomes.
- Researches resources and referral information. Collaborate with program office(s) personnel to gain knowledge regarding policies, programs and programmatic resources.

b. FTE – 1

c. This position was funded under MFP as a 100% admin service and will continue until 365 days past the final transition date (projected to end December 31, 2018).

d. This position will remain full time under the demo until December 31, 2018

e. None
The OAAS Housing Coordinator will act under the supervision of the OAAS MFP Program Manager for the MFP Rebalancing Demonstration. In OAAS program areas, the OAAS Housing Coordinator will be responsible for statewide coordination, facilitation, and monitoring of demonstration participant transition per guidelines established in the demonstration Operational Protocol. As needed, this responsibility extends to directly assisting OAAS Regional Office, enrolled support coordination agencies, and providers in the process of transition (direct service). Other responsibilities relative to the Operational Protocol include providing training, disseminating information, coordinating regional and statewide information/resource listings, providing technical assistance, and facilitating resolution of individual housing issues at the state program office level. The OAAS Housing Coordinator will participate in policy development and planning at the state office level in order to complete longitudinal planning to maintain or enhance community capacity to support demonstration transition targets. This will include combining state and local initiatives and resources to support demonstration participants to transition into safe and affordable housing. The OAAS Housing Coordinator may also participate in policy development and planning that involves multiple administrative units within the Department of Health and Hospitals and across multiple state agencies. The OAAS Housing Coordinator will provide support to the MCO(s) beginning September 30, 2015 and provide continued support to the care managers throughout the demonstration (December 31, 2019). This position is also acting as the MFP Quality of Life coordinator since September 2013, when the state was unable to secure an outside contractor to continue conducting the QoL’s. This position will continue to monitor the QoL process through the MCO once the MCO takes over the QoL responsibilities.

b. FTE – 1

c. This position was funded under MFP as a 100% administration service and will continue until 365 days prior to demonstration ending (December 31, 2019).

d. This position will not transfer to Medicaid Administration on January 1, 2019.

e. This position will remain full time under the MFP Demo until the end of the final demo period

f. None.
MFP 811 Housing Coordinator

a. The 811 Project Coordinator will serve as the Single Point of Entry into the 811 housing program for the Office of Aging and Adult Services, Office for Citizens with Developmental Disabilities and Office of Behavioral Health. Those persons transitioning from institutional settings will be given a preference point on their application. The position will work in close coordination with the MFP program to solicit applications for available housing units. This individual will work with transition coordinators and service providers to facilitate a smooth transition from institutions to community living. Once the state moves to managed care the 811 coordinator will work closely with the MCO and care managers to ensure timely receipt and processing of all 811 applications. Because the housing subsidy is project based, this removes the burden from the applicant and MFP program in locating a unit. The Project Coordinator will be responsible for matching applicants to appropriate units, offering up to 3 choices when available.

In addition to serving as the outreach coordinator and single point of entry, the Project Coordinator will also serve as a liaison between tenants, landlords and providers to ensure tenancy is maintained. The Coordinator will also be responsible for addressing any quality of service issues/concerns and monitoring PSH providers to ensure services are delivered in a manner that will result in maintaining tenancies.

b. FTE-1

c. This position was funded under MFP 100% admin service and will continue until 365 days past the final transition date or (December 31. 2019).

d. This position will transfer to Medicaid Administration on January 1, 2020 and will support implementation and monitoring of the PD/Elder MLTSS program’s transition requirements

e. This position will remain full time under the MFP Demo until the end of the final demo period

f. None.
OCDD Program Manager

a. Not moving to State Funding

b. FTE – 0 after MFP funding ends

c. This position was funded under MFP as a 100% administrative service and will continue until 365 days past the final transition date (projected to end December 31, 2018).

d. This position will not transfer to Medicaid Administration on January 1, 2019.

e. This position will remain full time under the MFP Demo until the end of the final demo period.

f. None

OCDD Transition/Quality Management (QM) Coordinator for Children and Adults in Nursing Homes

a. Serve as Office for Citizens with Developmental Disabilities (OCDD) Transition/QM Coordinator for transition initiatives related to home and community-based services waivers administered by OCDD for children and adults in Nursing Homes. The duties include interaction with children (age 18 and under) and their families transitioning from nursing homes or acute-care hospitals and adults (above the age of 18) who are transitioning from nursing homes. The needs of this group as well as institutional issues and service package requirements are significantly different from that of adults using ICF/DD services.

The Transition/QM Coordinator-Nursing Homes Target Group will conduct statewide recruitment, move coordination, and follow-up of children and adults participating in the MFP Rebalancing Demonstration per the approved Operation Protocol (OP). In OCDD program areas, the OCDD Transition/Quality Management Coordinator-Nursing Homes Target Group will be responsible for cross-regional coordination, facilitation, and monitoring of demonstration participant transition per guidelines established in the demonstration OP.

In addition, the OCDD Transition/Quality Management Coordinator-Nursing Homes Target Group will work with transition initiatives in statewide waiver programs. Duties include: providing training, disseminating information, coordinating regional and statewide information/resource listings, providing technical assistance, tracking specific data elements, and facilitating resolution of individual transition/placement issues at the state program office level. Responsibilities may extend to directly assisting OCDD Local Governmental Entities staff, enrolled support coordination agencies, and providers in the process of transition (direct service).

The OCDD Transition/Quality Management Coordinator-Nursing Homes Target Group will participate in policy development and planning at the state office level in order to complete longitudinal planning to maintain or enhance community capacity to support transition initiatives statewide. This will include combining state and local initiatives and resources to support service participants to transition into the community. The OCDD Transition/QM Coordinator-Nursing Homes Target Group may also participate in
statewide policy development and planning that involves multiple administrative units within the Department of Health and Hospitals and across multiple state agencies.

b. FTE – 1

c. This position was funded under MFP as a 100% administrative service and will continue until 365 days past the final transition date (projected end December 31, 2018).

d. This position will transfer to Medicaid Administration on January 1, 2019 and will support implementation and monitoring of the I/DD MLTSS program’s transition requirements.

e. This position will remain full time under the MFP Demo until the end of the final demonstration period.

f. None

**OCDD Transition/Quality Management (QM) Coordinator for Persons Living in ICFs/DD**

a. Serve as Office for Citizens with Developmental Disabilities (OCDD) Transition/QM Coordinator for Persons Living in public and private ICFs/DD for transition initiatives related to home and community-based services waivers administered by OCDD. The duties include interaction with persons using ICF/DD services in public and private settings. The needs of this group as well as institutional issues and service package requirements are significantly different from that of children transitioning from nursing homes or acute care hospitals, the second targeted group for transition coordination.

The Transition/Quality Management Coordinator-ICFs/DD Target Group will conduct statewide recruitment, move coordination, and follow-up of adults living in ICFs/DD for participation in the MFP Rebalancing Demonstration per the approved Operational Protocol. In OCDD program areas, the OCDD Transition/QM Coordinator-ICFs/DD Target Group will be responsible for cross-regional coordination, facilitation, and monitoring of demonstration participant transition per guidelines established in the demonstration Operational Protocol. In addition, the OCDD Transition/QM Coordinator-ICFs/DD Target Group will work with transition initiatives in statewide waiver programs. Duties include: providing training, disseminating information, coordinating regional and statewide information/resource listings, providing technical assistance, tracking specific data elements, and facilitating resolution of individual transition/placement issues at the state program office level. Responsibilities may extend to directly assisting Human Services District and Authority staff, enrolled support coordination agencies, and providers in the process of transition (direct service).

The OCDD Transition/QM Coordinator-ICFs/DD Target Group will participate in policy development and planning at the state office level in order to complete longitudinal planning to maintain or enhance community capacity to support transition initiatives statewide. This will include combining state and local initiatives and resources to support service participants to transition. The OCDD Transition/QM Coordinator-ICFs/DD Target Group may also participate in statewide policy development and planning that involves multiple administrative units within the Department of Health and Hospitals and across multiple state agencies.
b. FTE – 1

c. This position was funded under MFP as a 100% administrative service and will continue until 365 days past the final transition date (projected end December 31, 2018).

d. This position will transfer to Medicaid Administration on January 1, 2019 and will support implementation and monitoring of the I/DD MLTSS program’s transition requirements.

e. This position will remain full time under the MFP Demo until the end of the final demonstration period.

f. None

**OCDD Direct Support Training and Transition Supports Coordinator**

a. The Direct Support Training and Transition Supports Coordinator will oversee the development of statewide training programs for Direct Service Workers (DSWs), providers, and families. The two trainings are Positive Behavior Supports and Medical/Nursing/Physical Supports which are offered to DSWs of Supports Intensity Scale (SIS) Levels 4, 5, and 6 of MFP participants moving to a community setting. The trainings have been developed by OCDD professionals and have been successfully used for the past two years. The Direct Support Training and Transition Supports Coordinator receive requests for training and schedule the training in collaboration with the OCDD trainers and the participating providers. The trainings are designed to provide DSWs with skills to better support and react to the behavioral and medical needs of the people with whom they are working. The Direct Support Training and Transition Supports Coordinator will oversee this program as it becomes a part of the OCDD Managed Care Organization.

The Direct Support Training and Transition Supports Coordinator is responsible for developing and implementing statewide publicity for trainings, for developing and maintaining a statewide training calendar for each training, and for regularly reporting to OCDD staff on the progress of the statewide trainings. In addition, the Direct Support Training and Transition Supports Coordinator will be responsible for enacting an ongoing quality management strategy to enhance effectiveness of the statewide training programs in accordance with objectives established by the OCDD and included in the MCO contract for implementation. Direct Support Training and Transition Supports Coordinator will oversee completing Quality of Life (QoL) surveys and working with the OCDD Data Management and Analysis Coordinator to enter QoL data into appropriate spreadsheets and sending them to either the MFP Demo Program Manager in Medicaid or to Mathematica (software program). This Coordinator will be responsible for maintaining programmatic information for reporting in semi-annual reporting for the program and will coordinate demonstration stakeholder engagement as required.

The Direct Support Training and Transition Supports Coordinator will also oversee/monitor transition supports as this program becomes a part of the OCDD Managed Care Organization.

In addition, the OCDD Direct Support Training and Transition Supports Coordinator will work with transition initiatives in statewide waiver programs. Responsibilities may extend to directly assisting
Human Services District and Authority staff, enrolled support coordination agencies, and providers in the process of transition (direct service).

b. FTE – 1

c. This position was funded under MFP as a 100% administrative service and will continue until the close of the demonstration program in 2020.

d. This position will transfer to Medicaid Administration following the close of the Demonstration program in 2020 and will support implementation and monitoring of the I/DD MLTSS program’s provider credentialing and training requirements. This position will remain full time under the MFP Demo until the close of the Demonstration.

e. No reduction of this position will occur.

f. None

**OCDD Data Management and Analysis Coordinator**

a. OCDD requires a quality assurance (QA) position for assistance with the following administrative functions:
   - Entry of data and maintenance of reports on status of OCDD waiver enrollees.
   - Entry of monthly quality management tracking on individual forms and completing reports for the Department of Health and Hospital, OCDD Executive Management, and information for public dissemination.
   - Regular monthly and/or emergency database queries on OCDD participants for QA data (multiple databases).
   - Entry of quarterly aggregate quality management information on aggregate reports.
   - Entry, management and analysis of survey responses and database queries.

Many of the analysis duties have been the responsibility of the MFP Program Manager and will need to be completed by the Data Management and Analysis Coordinator when the MFP Program Manager position terminates.

Once information has been entered, the Data Management and Analysis Coordinator will perform QA checks to ensure accuracy and functionality of reports. The Data Management and Analysis Coordinator will participate in designing functional reports that reflect OCDD reporting and management needs.

In addition, the OCDD Data Management and Analysis Coordinator will work with transition initiatives in statewide waiver programs. Duties include providing training and disseminating information, coordinating regional and statewide information/resource listings, providing technical assistance, tracking specific data elements and facilitating resolution of individual transition/placement issues at the state program office level.
b. FTE – 1

c. This position was funded under MFP as a 100% administrative service and will continue until the close of the demonstration program in 2020.

d. This position will transfer to Medicaid Administration following the close of the Demonstration program in 2020 and will support implementation and monitoring of the I/DD MLTSS program’s performance indicators and monitoring program relative to transition and diversion.

e. This position will remain full time under the MFP Demo until the close of the demonstration.

f. None

6. State’s Plan for utilizing all the Rebalancing Funds by September 30, 2020

The State is committed to and has worked over the last decade to improve the balance of its long-term care supports and services system for the purpose of improving health care quality, controlling costs, and enhancing the quality of life for Louisiana citizens. In efforts to accomplish this goal, the State offers a diverse and flexible array of cost-effective services to achieve quality outcomes and serve as many individuals as possible within available budgetary resources. The Money Follows the Person Program has supported the State in achieving this goal. Louisiana has been awarded over $26M through the MFP grant to support rebalancing long term supports and services so that individuals have a choice of where they live and receive services. Since beginning transitions through the grant, the State has transitioned over 1000 participants out of institutions back into the community from 2009 through 2014. The funds have allowed the state to strengthen its Medicaid programs and increase waiver slots for the developmental disabilities population and the aging and adult population. The State has steadily decreased institutional spending and increased home and community based services spending since implementation of the MFP program.

Louisiana has received $7.2M in rebalancing funds through December 2014. Rebalancing funds have been used to support the state in rebalancing long-term supports and services by increasing access to a variety of state plan home and community based services such as Early and Periodic Screening Diagnosis, and Treatment (EPSDT) Personal Care services, Long Term Personal Care services (LT-PCS), Durable Medical Equipment (DME) for adults and children, and Program of All-Inclusive Care for the Elderly (PACE) services. From 2009 through 2014, the State has been able to increase access and offer services to over 2,000 additional participants through utilization of rebalancing funds. All services above are critical in achieving a balanced system and aiding individuals to thrive in community based settings.

Future rebalancing funds will be used to continue to serve an increased number of participants by offering a diverse array of state plan services some of which are included above in addition to funding services that will continue after MFP grant funds are no longer available. The state will also use funds to support waiver slots that have been offered by way of the MFP grant.
Louisiana will continue its rebalancing efforts beyond September 2020. In October 2015, the Office of Aging and Adult will transition into a managed care delivery system followed by the Office of Citizens with Developmental Disabilities in January 2016. The State intends to develop a managed care model to improve overall health outcomes and quality of life through the coordination of care and address barriers inherent in ongoing efforts to rebalance services and supports. In turn, this would establish financial predictability and sustainability for the Medicaid program. Care coordination will cover all populations, including those in facilities, with an emphasis on transition management between facilities and the community. Rate structures will be designed in a way to incentivize rebalancing. The transition from a fee for service model of service delivery to a managed care model will allow for expansion of services through further efficiencies of current money through improved utilization management, as well as provision of non-typical or innovative, supports that may reduce overall reliance on paid services over time. Louisiana views the transition to MLTSS as an opportunity to serve more people in a sustainable manner. By 2020, the savings generated will be reinvested into the system for further rebalancing. Other sources of funding may include Community Development Block Grant (CDBG) funding for Permanent Supportive Housing (PSH), Federal Medical Assistance Percentage (FMAP) and enhanced Federal Medical Assistance Percentage (eFMAP) Medicaid Services Funding, and the potential for other grant opportunities or partnerships that present locally and nationally.

7. Timeline for activities planned in 4, 5, and 6.

See Attachments 1 and 2
## 8. Estimated Budget Summary

### Sample MFP Sustainability Plan Estimated Multi-Year Budget

<table>
<thead>
<tr>
<th>Object Class Categories</th>
<th>(1) CY 2016</th>
<th>(2) CY 2017</th>
<th>(3) CY 2018</th>
<th>(4) CY 2019</th>
<th>(5) CY 2020</th>
<th>(6) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Personnel</td>
<td>$1,233,298</td>
<td>$876,377</td>
<td>$779,610</td>
<td>$566,839</td>
<td>$626,500</td>
<td>$4,082,624</td>
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<tr>
<td>b. Fringe Benefits</td>
<td>$538,335</td>
<td>$382,539</td>
<td>$368,068</td>
<td>$247,425</td>
<td>$257,322</td>
<td>$1,793,689</td>
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<tr>
<td>c. Travel</td>
<td>$37,113</td>
<td>$13,596</td>
<td>$13,596</td>
<td>$3,000</td>
<td>$3,000</td>
<td>$70,305</td>
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<tr>
<td>d. Equipment</td>
<td>$3,500</td>
<td>$3,500</td>
<td>$3,500</td>
<td>$0</td>
<td>$200</td>
<td>$10,700</td>
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<tr>
<td>e. Supplies</td>
<td>$18,607</td>
<td>$18,607</td>
<td>$18,607</td>
<td>$16,107</td>
<td>$16,107</td>
<td>$88,035</td>
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<tr>
<td>f. Contractual</td>
<td>$15,000</td>
<td>$15,000</td>
<td>$15,000</td>
<td>$0</td>
<td>$0</td>
<td>$45,00</td>
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<tr>
<td>g. Other</td>
<td>$89,400</td>
<td>$89,400</td>
<td>$89,400</td>
<td>$35,760</td>
<td>$35,760</td>
<td>$339,720</td>
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<tr>
<td>h. Services</td>
<td>$9,280,319</td>
<td>$9,280,319</td>
<td>$9,280,319</td>
<td>$9,280,319</td>
<td>$9,280,319</td>
<td>$46,401,595</td>
</tr>
<tr>
<td>i. Total Direct Charges (sum of 6a-6h)</td>
<td>$11,215,572</td>
<td>$10,679,338</td>
<td>$10,568,100</td>
<td>$10,149,450</td>
<td>$10,219,208</td>
<td>$52,831,668</td>
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<tr>
<td>j. Indirect Charges</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
<td>$0</td>
</tr>
<tr>
<td>k. Total Federal Budget (sum of 6i-6j)</td>
<td>$11,215,572</td>
<td>$10,679,338</td>
<td>$10,568,100</td>
<td>$10,149,450</td>
<td>$10,219,208</td>
<td>$52,831,668</td>
</tr>
</tbody>
</table>