

DEPARTMENT OF HEALTH & HUMAN SERVICES  
Centers for Medicare & Medicaid Services  
7500 Security Boulevard, Mail Stop 00-00-00  
Baltimore, Maryland 21244-1850



Division of Community Systems Transformation

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May 29, 2015

Cynthia Beane  
Interim Commissioner  
West Virginia Dept. of Health and Human Resources  
Bureau for Medical Services  
350 Capitol Street – Room 251  
Charleston, WV 25301-3706

Subject: Money Follows the Person (MFP) Sustainability Plan

Dear Ms. Beane:

I am pleased to inform you that your Money Follows the Person (MFP) Sustainability Plan has been accepted. Please proceed with formulating the 2016 final supplemental budget request to include this plan. An accepted copy of the plan is included with this letter.

Please note that official approval of the plan and budget through September 30, 2020 will be issued by the CMS Office of Acquisition and Grants Management pending review of the final supplemental budget request submitted on October 1, 2015.

Thank you for your dedicated efforts in implementing this Demonstration Program. We remain steadfast in our commitment to provide you with the technical assistance and support to accomplish the goals and objectives of the grant. If you have any questions, please do not hesitate to contact your CMS project officer.

Sincerely,

A handwritten signature in black ink that reads "Michael R. Smith". The signature is written in a cursive style with a large, prominent initial "M".

Michael R. Smith,  
Acting Director,  
Division of Community Systems Transformation

Enclosure

cc: Marcus Canady, MFP Project Director  
Nicole Nicholson, CMS Project Officer  
Geoffrey Ntosi, CMS Grants Management Specialist  
Ernest McKenney, Technical Assistance



STATE OF WEST VIRGINIA  
DEPARTMENT OF HEALTH AND HUMAN RESOURCES

Earl Ray Tomblin  
Governor

Bureau for Medical Services  
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350 Capitol Street – Room 251  
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Karen L. Bowling  
Cabinet Secretary

April 28, 2015

Nicole Nicholson, Federal Project Officer  
Centers for Medicare and Medicaid Services  
7500 Security Boulevard  
Mail Stop S2-16-16  
Baltimore, Maryland 21244

Dear Ms. Nicholson:

The leadership team of the Bureau for Medical Services (BMS) has worked with the Take Me Home program staff throughout the process of developing the West Virginia Money Follows the Person (MFP) Sustainability Plan. The BMS is committed to a Long-Term Services and Supports delivery system that provides quality services, and is responsive to individual choice and preference. I support the initiatives and strategies proposed in the Plan, and believe they will move us closer to this goal.

If you have any questions regarding West Virginia's Sustainability Plan, please contact Marcus Canaday, the MFP Director at (304) 356-4847 or via e-mail at [Marcus.Canaday@WV.gov](mailto:Marcus.Canaday@WV.gov).

Best Regards,

A handwritten signature in cursive script that reads "Cynthia Beane".

Cynthia Beane, MSW, LCSW  
Interim Commissioner

CB/MC/ko

**MFP SUSTAINABILITY PLAN**  
**Take Me Home, West Virginia**  
**April 30, 2015**

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## **MANDATORY ELEMENTS**

### **Executive Summary**

The West Virginia Bureau for Medical Services (BMS) plans to add key transition services demonstrated by the Take Me Home, West Virginia (TMH) program to its Aged and Disabled Waiver (ADW) and Traumatic Brain Injury (TBI) Waiver programs beginning in January 2018. As with the demonstration, these transition services will target individuals with physical disabilities, traumatic brain injuries and older adults. Waiver transition services, which help address many obstacles faced by individuals transitioning from facility-based living to the community, will include:

1. **Transition Coordination:** Transition Coordinators will work one-on-one with eligible Waiver members to assess their needs for transition services; develop individualized Transition Plans, and; facilitate the delivery of needed services and supports.
2. **Community Transition Support:** Community Transition Support will include non-recurring expenses necessary to support individual's transitioning from a long-term care facility to their own home in the community. Community Transition Support services will be provided only to the extent that they are reasonable and necessary as determined through the Transition Plan development process.

West Virginia plans to implement several strategies to enhance its home and community-based service delivery system prior to the conclusion of its Money Follows the Person Demonstration as outlined in the Optional Elements section of this Plan. Some of the areas addressed by the initiatives include:

1. Online case management;
2. Direct service workforce development;
3. Access to services;
4. Telehealth;
5. Person-centered planning;
6. Quality, and;
7. Housing.

## Stakeholder Involvement

Interested stakeholders have played a significant role in the development of the West Virginia MFP Sustainability Plan. An overview of the Sustainability Planning process was presented to the TMH Advisory Council and initial input solicited in December 2014. Two additional meetings were held with the Advisory Council in early 2015 to review drafts of the Plan and solicit additional input.

The Advisory Council provided significant input, particularly in the design of transition activities post-MFP. There was, for example, extensive conversation regarding eligibility criteria for the Waiver service to be implemented beginning in January 2018. During an initial meeting to solicit input into the Plan development, some Council members suggested that a 60 day stay in a LTC facility should be established as part of eligibility while others believed that this criterion should be 90 days. Based on discussions with its Technical Assistance Liaison, TMH staff concluded that a 90 day eligibility criterion was most appropriate. This recommendation was presented to and accepted by the TMH Advisory Council.

Another specific suggestion presented by the TMH Advisory Council was to include Peer Support Service (PSS) as a Waiver transition service. After considering the recommendation and consulting with the Technical Assistance Liaison, it was decided to include this service in the Sustainability Plan noting that implementation of the service was contingent on a comprehensive review of the service prior to Waiver implementation in January 2018

TMH staff also met with each of the following stakeholder groups to solicit input and review Plan drafts:

1. The Ombudsman Advisory Council;
2. The Statewide Independent Living Council;
3. The ADRC Advisory Council;
4. The Olmstead Advisory Council;
5. The Aged & Disabled Waiver Advisory Council;
6. The Traumatic Brain Injury Advisory Council, and;
7. The Fair Shake Network.

The input received throughout this process regarding the Optional Elements section of the draft Sustainability Plan was generally very favorable. There were no specific recommendations received to include additional strategies in the Optional Elements section. Nor were there any recommendations to exclude any specific initiatives included in the draft Plan. The common theme when discussing the Optional Elements section of the Plan was to support and encourage state efforts to focus on initiatives that would result in LTSS changes toward a more balanced system.

The Plan was also posted on the BMS and TMH websites on April 3, 2015, for a 14 day comment period. The TMH Office received just one written comment on the draft Sustainability Plan. The commenter asked that we consider including direct-service supports for home trial visits prior to transitioning to the community. This suggestion was sent to the TMH Project Officer and Technical Assistance Liaison for review. TMH staff was advised that this would not be appropriate under the 1915(c) definition of the Community Transition Service. This was shared directly with the commenter.

The following table details the stakeholders represented in the multiple advisory councils:

<b>Stakeholder Involvement</b>				
<b>Stakeholder Groups</b>	<b>Consumers / Families</b>	<b>Advocates</b>	<b>Providers</b>	<b>Other Professionals</b>
Take Me Home Advisory Council	5	6	1	18
Aged & Disabled Waiver Advisory Council	5	-	10	-
Traumatic Brain Injury Advisory Council	-	4	3	4
Statewide Independent Living Council	16	8	-	5
Ombudsman Advisory Council	2	13	4	7
Olmstead Advisory Council	8	13	3	8
ADRC Advisory Council	1	7	2	8
Fair Shake Network	17	2	-	4
<b>Total</b>	<b>54</b>	<b>53</b>	<b>23</b>	<b>54</b>

**Plan for continuing to support moving persons out of institutions**

The state of West Virginia will continue to actively support moving persons out of institutions following the conclusion of its Money Follows the Person (MFP) demonstration program – Take Me Home, West Virginia (TMH). It is anticipated that transitions through TMH will end as of December 31, 2017 and that transitions supported through the state’s 1915(c) home and community-based Waiver programs will begin January 1, 2018. This will ensure that there is no gap in transition supports for individuals needing these services to return to the community. Note: There will likely be active MFP participants who have not transitioned to the

community as of December 30, 2017. TMH staff will work with the BMS Office of Home and Community-Based services to develop procedures allowing these participants access to Waiver transition services.

As with the demonstration, the transition initiative anticipated as part of West Virginia's home and community-based service delivery system will target individuals with physical disabilities, Traumatic Brain Injuries and older adults who:

1. Have resided in a nursing facility or hospital for at least 90 consecutive days;
2. Qualify for services and supports through either the Medicaid Aged and Disabled Waiver (ADW) or Traumatic Brain Injury (TBI) Waiver program, and;
3. Require Waiver transition services to safely and successfully transition from facility-based care to their own homes in the community.

#### Waiver Transition Services

Individuals wishing to transition from long-term care facilities to the community often face numerous obstacles including a lack of funds for rent and utility deposits, lack of basic household items and furniture, limited community supports, and no one to help develop comprehensive plans to transition home. The Waiver transition services will help address many of these barriers by providing a number of supports to promote successful and safe transitions to the community. The Waiver transition services are outlined below:

1. **Transition Coordination:** Transition Coordinators will work one-on-one with eligible Waiver members to assess their needs for transition services; develop individualized Transition Plans, and; facilitate the delivery of needed services and supports.
2. **Community Transition Support:** Community Transition Support will include non-recurring expenses necessary to support individual's transition from a long-term care facility to their own home in the community. Community Transition Support services will

be provided only to the extent that they are reasonable and necessary as determined through the Transition Plan development process. Allowable expenses may include but are not necessarily limited to:

- a. Security deposits that are required to obtain a lease on an apartment or home;
- b. Essential household furnishings, including furniture, window coverings, food preparation items, and bed/bath linens, etc.;
- c. Set-up fees or deposits for utility or service access, including telephone, electricity, heating and water;
- d. Services necessary for the individual's health and safety such as pest eradication and one-time cleaning prior to occupancy;
- e. Assistive Technology and equipment necessary to promote health and safety or enhance independence;
- f. Moving expenses, and;
- g. Necessary home accessibility adaptations.

Note: PSS may also be made available to Waiver members. However, because it is just now being implemented as a TMH demonstration service, a final decision will not be made until we've had the opportunity to evaluate it fully.

Once the necessary amendments to the Aged and Disabled Waiver (ADW) and Traumatic Brain Injury (TBI) Waiver have been approved by the Centers for Medicare and Medicaid Services (CMS), Chapters of the West Virginia Medicaid Provider Manual will need to be revised to reflect policies and procedures related to the delivery of transition services. Take Me Home, West Virginia (TMH) staff will work with Medicaid's Office of Home and Community-Based Services and staff of the Waiver Operating Agencies to draft the new policies and procedures and submit them for internal review and approval. TMH staff will initiate this process in April 2017 to ensure that approval is obtained by October 2017. Potential ADW and TBI Waiver providers must then be trained on the service delivery requirements prior to the implementation of the transition services planned for January 2018. TMH staff will work collaboratively with BMS's Office of Home and Community-Based Services and Operating

Agency staff to schedule and conduct at least 8 regional meetings between October and the end of December 2017 to present the new policies and procedures to Waiver provider agency staff. It is anticipated that the new policy will also incorporate the Risk Analysis and Mitigation Planning process currently being used by TMH.

The West Virginia MMIS will need to be modified to collect and accurately report data for the CMS 64 and CMS 372 reports post-MFP. Modifications will be necessary to:

1. Incorporate the new Waiver transition service codes and reporting logic beginning in January 2018, and;
2. Modify MFP-related service codes and reporting logic.

#### **Administrative Functions**

It is anticipated that the following general administrative functions will be necessary to support Waiver transition activities:

1. Policy Oversight and Long-Term Services and Supports (LTSS) System Advocacy;
2. Technical Assistance and support for transition activities;
3. Technical Assistance and systems advocacy for housing-related issues;
4. Marketing and outreach, and;
5. Data management.

Some of these functions, such as policy oversight and LTSS advocacy, will be assumed within the existing Medicaid organizational structure. It is anticipated that two (2) positions will need to be added. A Transition Manager will be necessary to provide technical assistance and support to Transition Coordinators and other key members of the transition team for transition activities. The addition of a Housing Coordinator will be important to future transition activities by providing support for 1) Individual transitions, and, 2) Advocacy for systems change in the housing industry. It is anticipated that at least three months activity and funds will be necessary

for a staff member to meet the submission of the MFP grant and programmatic reporting requirements following the conclusion of the grant period (September 30, 2020) at an estimated cost of \$25,000.

A Fiscal Management Service to support transition activities is another essential administrative function. This function will be necessary to qualify providers of the Community Transition Support service, process payment of invoices, and enforce expenditure limits.

#### **Demonstration Services**

*Attachment A* provides information about TMH demonstration services and the state's decision to retain or delete the service post-MFP.

#### **Administrative Staffing**

*Attachment B* contains information about the current staffing of TMH and the state's plan for staffing transition activities post-MFP.

#### **Plan for Using Rebalancing Funds**

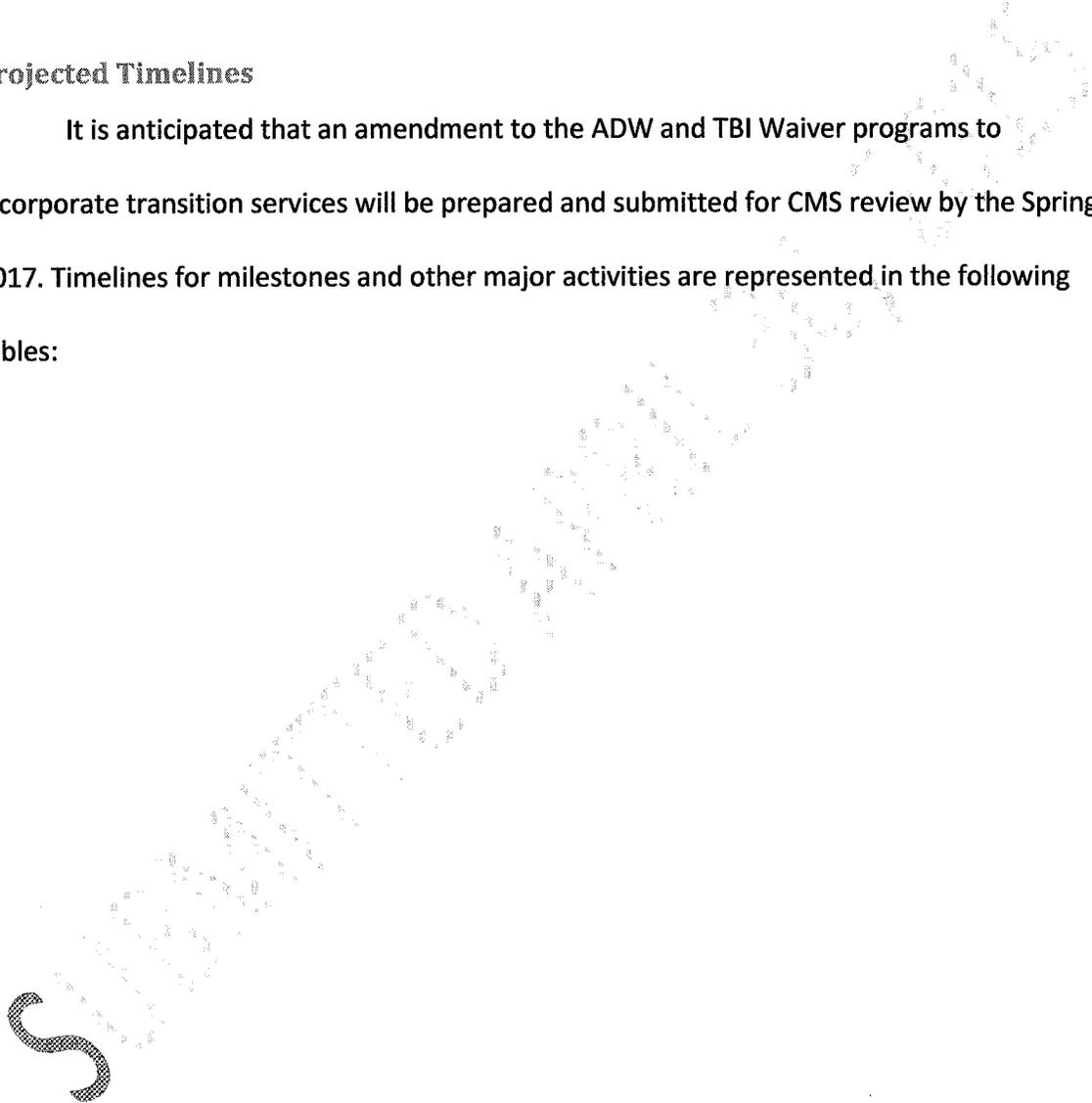
Over the last year, The Bureau for Medical Services (BMS) has been actively assembling data about the current LTSS environment and informally discussing LTSS reform options. BMS is now ready to engage additional resources to lead and increase internal planning, research, and analysis activities which will result in the development of a Strategic Plan to reform West Virginia's LTSS system. While no Rebalancing funds have been expended to date, MFP rebalancing funds will be used to support this important multi-phase initiative.

It is likely that several recommendations included in the LTSS Strategic Plan will require funding. West Virginia plans to use Rebalancing dollars to implement these initiatives. If any

rebalancing dollars are available after the development of the Strategic Plan and implementation of specific LTSS reform initiatives, these funds will be used to fund additional slots in the ADW Program. Individuals accessing these slots will continue to be supported post-MFP.

### Projected Timelines

It is anticipated that an amendment to the ADW and TBI Waiver programs to incorporate transition services will be prepared and submitted for CMS review by the Spring of 2017. Timelines for milestones and other major activities are represented in the following tables:



<b>Mandatory Elements Timeline</b>						
<b>Milestones and Major Activities</b>	<b>2015</b>	<b>2016</b>	<b>2017</b>	<b>2018</b>	<b>2019</b>	<b>2020</b>
Long-Term Services and Supports Work Group	June – December 2015					
Implementation of Targeted LTSS Work Group Recommendations (Rebalancing Funds)		January 2016	Continue Implementation of LTSS Recommendations	Continue Implementation of LTSS Recommendations	Continue Implementation of LTSS Recommendations	September 30, 2020
Waiver Amendments Request			April 2017 Submission			
Waiver Policy Development			April – October 2017			
Anticipated Waiver Amendments Approval			July 1, 2017			
Modify MMIS			July - December 2017			
Projected Last Date for TMH Referrals			September 30, 2017			
Provider Training			October - December 2017			
Projected Last Date for TMH Transitions			December 31, 2017			
Implementation of Transition Service in Waivers				January 1, 2018		
Conversion of Staff to Alternate Funding						October 1, 2020

Optional Elements Timeline					
Milestones and Major Activities	2017	2018	2019	2020	Post-MFP
Housing Registry (12)	<p>April – June 2017 Development of Specifications and Requirements</p> <p>July – December 2017 State Purchasing Process Phase</p>	<p>January – March 2018 Continue State Purchasing Phase</p> <p>March 2018 Procurement</p> <p>April – December 2018 Development, Testing and Training Phase</p>	<p>January – March 2019 Continue Development, Testing and Training Phase</p> <p>April 2019 Implementation</p>		Our intent is to identify an entity to assume responsibility for the ongoing maintenance and support of the housing registry post-MFP.
Online Waiver Case Management System (5)	<p>April – June 2017 Development of Specifications and Requirements</p> <p>July – December 2017 State Purchasing Process Phase</p>	<p>January – March 2018 Continue State Purchasing Phase</p> <p>March 2018 Procurement</p> <p>April – December 2018 Development and Testing Phase</p>	<p>January – March 2019 Continue Development and Testing</p> <p>April 2019 Implementation</p>		BMS will provide ongoing support of the Online CM System post-MFP.
Telehealth Demo (3)	<p>July – December 2017 Planning &amp; Pilot Design</p>	<p>January 2018 Pilot Implementation Phase</p>	<p>Continue Pilot Implementation</p>	<p>January – June 2020 Evaluation and Reporting Phase</p>	<p>This initiative is intended to be a demonstration pilot. BMS's decision to incorporate Telehealth as a waiver service will depend on the demonstrated results of the</p>

					initiative.
No Wrong Door Strategies (4)	July – December 2017 TMH Advisory Council and ADRC Advisory Council Review of NWD Strategic Plan and Identification of Priority Initiatives	January – June 2018 Submit Recommendations to CMS for Priority NWD Strategies to be Supported With Approved Sustainability Funds  July – December 2018 Initiate Implementation of Recommended NWD Priority Strategies.	Continue Implementation of Recommended NWD Priority Strategies	April – September 2020 Review and Determination of Next Steps for Continuing Strategy Implementation.	
Integrate HCBS Quality Management Systems (16)		January 2018 Hire Quality Management Specialist  January – June 2018 Quality Workplan Development Phase  July – December 2018 Workplan Implementation	Continue Quality Workplan Review, Update and Implementation	January – September 2020 Quality Workplan Review, Update and Implementation	
Ongoing TA Support for Waiver Transition		January – December 2018 Ongoing TA	Continue Ongoing TA for Waiver Transition	January – September 2020 Continue	BMS and its operating agencies will be responsible for ongoing training

Activity (1)		support for Waiver Transition Activity	Activity	Ongoing TA Support for Waiver Transition Activity	and technical assistance support post-MFP.
Direct Workforce Certification Training Through PEL (8)		January - December 2018 Promotion of PEL's Certification Training Program and Sponsorships for PEL Certification Training and	Continue Promotion of Certification Program and Sponsorship of Trainees	January – September 2020 Continue Promotion of Certification Program and Sponsorship of Trainees	MFP promotion and sponsorship of trainees for this program are time limited. PEL will continue ongoing support and operations of the training certification post-MFP.
PC Self Direction (2)		April – June 2018 Self-Direction Design Phase  July – September 2018 Development of Payroll System and Web Portal Requirements and Specifications  October – December 2018 State Purchasing Phase	January – June 2019 Continue State Purchasing Phase  June 2019 Procurement  July– December 2019 Payroll and Portal Development and Testing Phase	January 2020 Program Implementation	BMS will be responsible for the ongoing support and operations of the Personal Care program self-direction option post-MFP
Person-Centered Planning Information		July – December 2018 Planning and Material	January – December 2019 Implementation of		The Information campaigns are time limited. The materials developed through this

Campaign (6)		Development Phase	Information Campaigns Phase		Initiative will be maintained on the BMS as well as the ADRC Resource Library websites post-MFP.
Promote Positive Image of DSW (10)		July – December 2018 Planning and Material Development Phase	January – December 2019 Implementation Of Marketing and Information Campaign Phase		The information campaign is time limited. The materials developed through this initiative will be maintained on the BMS as well as the ADRC resource library websites.
Promote Effective Supervisory Practices DSWs (11)		July – December 2018 Planning and Material Development Phase	January – December 2019 Implementation of Information and Training Phase		The information campaign is time limited. The materials developed through this initiative will be maintained on the BMS as well as the ADRC resource library websites.
Housing Resources for Transition Support Teams (15)		July – December 2018 Planning and Resource Development Phase	January – December 2019 Information Dissemination Phase		The information campaign is time limited. The BMS housing coordinator will be responsible for the ongoing support of this initiative post-MFP. The materials developed through this initiative will be maintained on the BMS as well as the ADRC resource library websites.
“How to be a Good Tenant” –			January – June 2019 Material	January – June 2020 Continue to	The information campaigns are time limited. The BMS

<p>Information and Training Design (13)</p>			<p>Development and Training Design Phase</p> <p>July – December 2019 Market the Training Design</p>	<p>Market Training</p>	<p>housing coordinator will be responsible for the ongoing support of this initiative post-MFP. The materials developed through this initiative will be maintained on the BMS as well as the ADRC resource library websites.</p>
<p>Resources for Housing Industry to Enhance Awareness of Disability Issues (14)</p>			<p>January – June 2019 Resource Development Phase</p> <p>July – December 2019 Information Awareness Campaign Phase</p>	<p>January – September 2020 Continue Information Campaign Phase</p>	<p>The information campaign is time limited. The BMS housing coordinator will be responsible for the ongoing support of this initiative post-MFP. The materials developed through this initiative will be maintained on the BMS as well as the ADRC resource library websites.</p>
<p>Realistic Job Preview Videos (9)</p>			<p>April – June 2019 Planning and Design Phase</p> <p>July – September 2019 Video Production Phase</p> <p>October – December 2019 Dissemination Phase</p>	<p>January – September 2020 Continue Dissemination Phase</p>	<p>The production and dissemination of the RJP videos is time limited. The videos developed through this initiative will be maintained on the BMS as well as the ADRC Resource Library websites post-MFP.</p>

Employment Toolkit (7)			April – September 2019 Planning and Development Phase  October – December 2019 Implementation of Information Campaigns	January – September 2020 Continue Implementation of Information Campaign	The information campaign is time limited. The materials developed through this initiative will be maintained on the BMS as well as the ADRC Resource Library websites post-MFP.
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Note: The numbers in parentheses correspond to the numbered initiatives listed in the Optional Elements Section of this Plan.

### Estimated Budget Summary

MFP Sustainability Plan Estimated Multi-Year Budget						
Grantee Name: West Virginia - Take Me Home, WV - DHHR/BMS			Award Number: 1LICMS330830-01-05			
Estimated Federal Budget						
6. Object Class Categories	(1) CY 2016	(2) CY 2017	(3) CY 2018	(4) CY 2019	(5) CY 2020	(6) Total
a. Personnel	75,089	77,403	79,787	82,243	63,579	\$378,100
b. Fringe Benefits	27,486	28,333	29,206	30,105	23,273	\$138,404
c. Travel	6,163	6,163	6,163	6,163	5,031	\$29,683
d. Equipment	\$0	\$0	\$0	\$0	\$0	\$0
e. Supplies	\$10,500	\$10,500	\$8,400	\$8,400	\$6,300	\$44,100
f. Contractual	\$974,632	\$1,061,894	\$2,427,969	\$2,460,281	\$1,091,312	\$8,016,088
g. Construction	\$0	\$0	\$0	\$0	\$0	\$0
h. Services	\$4,866,551	\$4,998,602	\$1,688,078	\$85,148	\$0	\$11,638,379
i. Total Direct Charges (sum of 6a-6h)	\$5,960,420	\$6,182,896	\$4,239,603	\$2,672,340	\$1,189,495	\$20,244,754
j. Indirect Charges	\$33,956	\$36,669	\$76,546	\$77,616	\$35,685	\$260,471
k. Total Federal Budget (sum of 6i-6j)	\$5,994,377	\$6,219,565	\$4,316,149	\$2,749,956	\$1,225,180	\$20,505,226

### OPTIONAL ELEMENTS

#### Home and Community-Based Services

1. Develop and implement a comprehensive training and technical assistance program for Waiver provider agencies and nursing facility staff regarding the transition process.

Following the initial Training of ADW and TBI Waiver providers, TMH plans to sponsor monthly information calls beginning in January 2018 allowing provider agencies to address questions and concerns directly with Medicaid and Operating Agency staff. This strategy has been utilized in the past when new programs and services have been introduced and has proved very effective. We will be requesting funding for 2018 under the contractual budget category to support these information calls. TMH staff, primarily the Assistant Director, Transition Manager and Housing Coordinator, will continue to provide one-on-one technical assistance and support to Transition Coordinators and other partners of the transition process including Long-Term Care facility staff and advocates. Funding for travel and overnight accommodations to support these activities will be requested under the contractual budget category for 2018, 2019 and 2020. The Bureau for Medical Services (BMS) Office of Home and Community-Based Services and its Operating Agencies will be responsible for ongoing provider training and technical assistance post-MFP.

2. Design and implement self-direction into the State Plan Personal Care Program.

Self-direction is an important goal for many individuals receiving long-term services and supports and is currently an option in all three of West Virginia's 1915(c) Waiver programs. West Virginia plans to explore strategies and design a program for including self-direction in the State Plan Personal Care program. We will seek support through the MFP Technical Assistance network to assist in the development of a design for the State Plan Personal Care Self-Directed program. We will be requesting funding in 2018 under the contractual budget category to support stakeholder involvement in the

planning and design of the self-direction model. We will also be requesting funding in 2019 under the contractual budget category for the development and implementation of a payroll system and web portal necessary to support self-directing members and their employees. Once implemented, the operations and related costs will be the responsibility of BMS and its operating agencies.

3. Design and implement a project to demonstrate the effectiveness and efficiency of telehealth in the delivery of home and community-based services in hard to serve or underserved areas of West Virginia.

Numerous studies have indicated that home telehealth can provide more effective monitoring, reduce hospitalizations and emergency room visits, improve daily living skills, increase home care providers efficiencies and reduce costs. West Virginia is requesting funding to develop and implement a pilot telehealth demonstration project to evaluate the use of remote monitoring and home-video-visits in its three (3) 1915(c) Waiver programs.

Funding is being requested in 2017 to support a technical assistance consultant and a project design team consisting of subject matter experts and other stakeholders who can inform the initiative. The design group, which will meet at least 10 times between July and December 2017, will identify research questions, project scope and project methodology. Some of the research questions that will be considered include:

- 1) How is the participant's satisfaction with home and community-based services impacted?
- 2) Is there an impact on the rate of Nursing Facility placement?
- 3) Is there an impact on the number of hospital days and costs?
- 4) Is there an impact on the number of emergency room visits and costs?

Once completed, the pilot design, including scope, methodology, evaluation and budget will be submitted to CMS for review. Funding is being requested in 2018 through 2020 under the contractual budget category for ongoing support of the technical assistance consultant and to implement and evaluate the pilot.

4. Enhance access to West Virginia's long-term services and supports system.

The Administration for Community Living (ACL) may or may not fund the implementation of the strategic plan currently being developed with the No Wrong Door Planning Grant awarded West Virginia in September 2014. The 3-year strategic plan and budget is due to ACL by September 30, 2015. We will be requesting that funds be earmarked for 2018, 2019, and 2020 under the contractual budget category to implement specific initiatives of the strategic plan if Federal funds are not otherwise available. Some anticipated elements of the strategic plan for which these funds may be used include:

- 1) Establish formal linkages with the key entities likely to refer individuals for community LTSS (critical access points), including nursing homes, information and referral entities, acute care systems, and Veterans Administration (VA) medical centers.
- 2) Integrate principles of person-centered counseling in NWD system, including the implementation of standardized training for NWD system staff, to promote uniform experiences for consumers.
- 3) Streamline access to community LTSS:
  - i. Train NWD person-centered counselors to help prepare applications for publicly funded community LTSS,
  - ii. Develop electronic records that track consumer-level data; integrate medical information and information on community LTSS; and minimize the likelihood that individuals will need to tell their story repeatedly,
- 4) Establish measures and tools to document and improve the operation, capacity, performance, and outcomes of the NWD system.

If Federal funds are not otherwise available to implement specific elements of the No Wrong Door Strategic Plan, recommendations for specific initiatives to be supported with approved Sustainability funds will be sought from both the TMH Advisory Council as well as the ADRC Advisory Council and submitted to CMS for review.

#### Person centered planning and service delivery

5. Implement an online Waiver Case Management tool that supports person-centered planning principles and practice and is linked to medical eligibility and quality data infrastructure.

We will be requesting funding to support the procurement and implementation of an online Waiver Case Management System that:

- 1) Supports principles of person-centered planning;
- 2) Provides a warehouse of data that supports and enhances the state's home and community-based services Quality Improvement System, and;
- 3) Results in a more effective and efficient service delivery system.

The one-time service cost, which would include implementation and training, will be requested for 2018 under the contractual budget category. One year of annual costs, which would include licenses, hosting, maintenance, upgrades, and disaster recovery, will be requested in 2019 into 2020 under the contractual budget category. BMS will be responsible for annual expenses thereafter.

6. Develop and implement an information campaign about CMS's expectations for Person-Centered Planning and settings rule requirements 1915(i) using varied methods including meetings, workshops, webinars and other media that target populations such as individuals receiving HCBS, families and friends, guardians, LTSS critical access point staff and HCBS providers.

The Centers for Medicare and Medicaid Services (CMS) has issued rules specifying that service planning for participants in Medicaid Waivers must be developed

through a person-centered planning process that addresses needs in a manner that reflects individual preferences and goals. CMS 2249-F and CMS 2296-F require that the person-centered planning process be directed by the individual with long-term support needs and may include representatives whom the individual has freely chosen to contribute to the process. The rule describes the minimum requirements for person-centered plans developed through this process, including that the process results in a person-centered plan with individually identified goals and preferences.

We will be requesting funding for the development (beginning in July 2018) and implementation of three distinct information campaigns (beginning January 2019) about CMS's expectations for Person-Centered Planning and settings rule requirements that target:

- 1) Individuals receiving HCBS, their families and advocates;
- 2) HCBS Waiver and State Plan Personal Care providers, and;
- 3) LTSS critical access point staff.

West Virginia intends to collaborate with the National Resource Center for Participant-Directed Services (NRCPDS) for this initiative. The NRCPDS collaboration will include material development as well as technical assistance for the design and implementation of the three information campaigns. Materials will include those adopted specifically for person-centered planning strategies for older adults and people with disabilities. We will be requesting funding to support the collaboration with the NRCPDS for this initiative beginning in July 2018 under the contractual budget category. We will be requesting funding for the implementation of the 3 information campaigns

beginning in January 2019 (through September 2020) in the contractual budget category. We will also be requesting funding for 2019 and 2020 under the contractual budget category to provide stipends for HCBS provider staff to support their participation in the training. The informational materials will be made available to all interested parties via the online resource database maintained by the West Virginia Aging and Disability Network post-MFP.

### **Implement or improve employment supports for people with disabilities**

7. Develop and implement information campaigns to assist individuals with disabilities, their families and service providers in understanding the benefits of employment, funding resources, job opportunities and organizations that can assist them.

Employment is a critical component in community living. Employment provides individuals with the means to improve their financial stability, contribute to their community, and interact socially with others. We will be requesting funding for 2019 under the contractual budget category to develop “Employment Toolkits” and dissemination campaigns targeting people with disabilities as well as HCBS providers. Beginning in April 2019, TMH staff will work in collaboration with the MFP Technical Assistance Contractor and state stakeholders to develop the Toolkits and information campaigns.

Some of the information in the Toolkit targeting people with disabilities and their families will include:

- 1) Benefits of employment;
- 2) Overview of available services and supports;
- 3) Sample interview questions;
- 4) Benefits counseling, and;
- 5) Examples of successful employment outcomes.

Some information in the Toolkit targeting HCBS providers will include:

- 1) Person-centered methods for identifying individual knowledge, skills and abilities; job interests; transferable skill sets, work history and job training/preparation needs;
- 2) Instruction for assessing employment interests and skills, and;
- 3) Methods for identifying needs for accommodations, community companions, job support coaches, etc. to support beneficiaries in their transition to work.

Funds will be requested in 2019 and 2020 under the contractual budget category to produce print materials and implement the campaigns. The information will be made available to HCBS providers and other interested entities via the online resource database maintained by the West Virginia Aging and Disability Network post-MFP.

#### **Increase the DSW supply and quality**

The Bureau of Labor Statistics projected demand for health care support to grow 28.1 percent between 2012 and 2022. The direct service industry competes for available workers with other industries that offer better wages, better benefits and better working conditions. West Virginia proposes the following initiatives to enhance the supply and quality of the available home and community-based services direct-care workforce.

8. Support further development of the training and certification program developed via the West Virginia Partnership for Elder Living (PEL).

The West Virginia PEL has been in a collaborative relationship with the West Virginia Department of Education's office for Health Science Education in the Career and Technical area and has included a broad base of stakeholder involvement including HCBS providers, Medicaid and Bureau of Senior Services policy staff, advocates and others. The focus of this collaboration has been the development of a 100 hour training

program for high school students that leads to a certificate in Direct Care. Those with this certificate are the best trained direct-care workers in the state.

The program is now poised to move into adult education. TMH can play an important role in supporting the further development of this program by:

- 1) Promoting the availability of the certification training program among job training, placement, HCBS provider agencies, and;
- 2) Sponsoring 40 trainees per year to participate in the certification training.

We will be requesting funding to promote the availability of the PEL certification training program and to provide sponsorships for qualified candidates. We will be requesting funding for 2018, 2019, and 2020 under the contractual budget category for costs of advertising and trainee sponsorships. PEL will continue responsibility for ongoing support and operations of the training certification program post-MFP.

9. Develop and distribute realistic job preview videos for use by HCBS providers.

Realistic Job Previews (RJPs) can be very effective in assisting organizations in the recruitment and retention of employees. One of the risks organizations face in recruiting staff is the mismatch between pre-employment expectations on the part of a prospective employee and the reality of working life inside the organization. This “reality shock” can lead to high rates of staff turnover, particularly in the direct-care field. By presenting both positive and negative aspects of the job prior to employment, HCBS direct-care provider agencies can minimize the gap between applicant expectations and job realities, thus reducing turnover and improving employee satisfaction.

TMH plans to develop two (2) Realistic Job Preview videos. One will target direct-service jobs supporting individuals with intellectual and developmental disabilities while the second will preview direct-care jobs supporting older adults and individuals with physical disabilities. We intend to seek support from the MFP Technical Assistance Contractors beginning in April 2019 to assist in the development and implementation of the project. We will be requesting funding for 2019 under the contractual budget category to support 6 meetings over a three (3) month period beginning in April 2019 to ensure stakeholder involvement in the design of the project. We are requesting funding to cover costs to produce the video beginning in July 2019 and distribution of the videos in 2019 through 2020. We will also be requesting funding to purchase a DVD replicator to facilitate broad dissemination of the video. The video will be made available to HCBS providers and other interested entities via BMS website and the online resource database maintained by the West Virginia Aging and Disability Network post-MFP.

10. Establish a marketing and awareness campaign to inform West Virginians of the contributions of the Direct-Service Workforce (DSW).

West Virginia intends to develop a marketing and awareness campaign to promote a positive image of the direct-care service profession featuring a video that can be used at high school career days, job fairs, employment agencies, technical colleges and college placement offices, etc. We intend to seek support from the MFP Technical Assistance Contractors to assist in the development and implementation of this campaign. We will be requesting funding for 2018 under the contractual budget category to support stakeholder involvement in the project design as well as for costs to

produce the video. We will also be requesting funding for 2018 and 2019 under the contractual budget category to produce and distribute print campaign materials. The video and informational materials will be made available to HCBS providers and other interested entities via the online resource database maintained by the West Virginia Aging and Disability Network post-MFP.

**11. Promote effective supervisory practices in the direct-service field.**

The importance of supervisors to the retention of direct care workers cannot be overstated. Research shows that one of the most significant factors indicated by direct-care workers as important to job satisfaction is effective working relationships, especially with their supervisors. We intend to seek support from the MFP Technical Assistance Contractors to assist in the development and implementation of information materials including a training video that can be distributed to HCBS provider agencies. Specifically, we will be requesting funding for 2018 under the contractual budget category to support stakeholder involvement in the development of the video, costs to produce the video and costs to develop print materials. The video and information materials will be made available to HCBS providers and other interested entities via the online resource database maintained by the West Virginia Aging and Disability Network post-MFP.

**State's efforts to develop an adequate supply of accessible, affordable housing**

**12. Develop an Online Housing Registry.**

West Virginia intends to create and promote an online statewide housing registry that allows landlords, property owners, and property managers to identify the

type of housing they have available at their various properties, whether they be single-family scattered site structures or a multi-unit complex. Beginning in April 2017, TMH will involve housing stakeholders in the development of the registry's specifications and requirements through its Housing Committee. It is anticipated that the project will be bid in July 2017 with a projected bid selection by April 2018. Development and testing will follow until implementation of the resource in April 2019. We will be requesting funding for 2018, 2019, and 2020 under the contractual budget category.

West Virginia intends to identify an entity to assume responsibility for the registry post-MFP. TMH has had preliminary discussions with the Housing Development Fund who has expressed an interest in the project and agrees that the project would benefit the housing market, developers, builders, landlords, as well as tenants. TMH will continue its efforts to identify a partner to assume responsibility post-MFP.

13. Develop informational materials and a training program on "How to be a Good Tenant".

According to our housing stakeholders, informational materials and training on "How to be a Good Tenant" could lead to more landlords being willing to accept Housing Choice Vouchers and other rental subsidies. TMH plans to collaborate with MFP Technical Assistance Contractors and stakeholder groups across the state to develop the informational materials and design a training program. The materials and training design will then be marketed to public housing authorities across the state and other housing agencies that can provide the training to tenants who receive subsidies. The materials would also need to be marketed to landlords as a benefit to encourage that a preference be provided for anyone who has undergone the training program. We will be

requesting funding under the contractual budget category to develop the resource materials and training design to begin in January 2019. We will also be requesting funds under the contractual budget category to market the training beginning in July 2019.

The resources will be housed on the BMS, ADRC and other websites post-MFP.

14. Develop resources for housing providers, developers, builders, etc. to further their understanding of the needs of persons with disabilities and those leaving a facility who wish to remain in the home as long as possible.

TMH plans to collect, compile and develop materials to describe the complex needs of individuals with chronic health conditions and those transitioning from a long-term care facility. Concepts such as Housing First and Universal Design will be developed in order to expand developer and builder knowledge of modifications to structure and policy that can increase access. Housing Committee members and other housing stakeholders will be involved in the collection and development of these materials. We will be requesting funding for 2019 under the contractual budget category to develop the materials. We will also be requesting funding under the contractual budget category to support activities of the Housing Coordinator to disseminate this information through local and state trade shows and related events attended by builders, developers and other housing providers. The resources will be housed on the BMS, ADRC and other websites post-MFP.

15. Develop a comprehensive housing training program and materials for individuals assisting in the transition process.

There is a knowledge and understanding gap that exists between housing providers and social service providers. TMH will work to address this lack of knowledge

of housing related issues faced by individuals transitioning from facilities, their families and other support staff by developing and disseminating information resources. These resources will provide essential information about how to navigate the complex world of locating rental housing, applying for subsidies, and understanding housing rights and responsibilities. We will be requesting funding for 2018 under the contractual budget category to develop and produce these resources beginning July 2018. We will be requesting funding for 2019 under the contractual budget category to disseminate the materials beginning in January 2019. We will also be requesting funding under the contractual budget category to support activities of the Housing Coordinator to provide outreach, education and dissemination of resource materials to various social service entities including, but not limited to, LTC facility and HCBS staff. The resources will be housed on the BMS, ADRC and other websites post-MFP.

#### **State efforts to support state of the art quality improvement systems for HCBS**

16. Develop and implement an integrated Quality Improvement System for the state's Waiver and State Plan Personal Care programs consistent with the National Quality Strategy and Six Measure Domains.

West Virginia currently has separate and distinct Quality Improvement Systems (QIS) for each of its 1915(c) Waivers and State Plan Personal Care Programs. We will be requesting funding for a Quality Management Specialist position for 2018, 2019 and 2020 in the contractual budget category. The Quality Management Specialist will work with staff of BMS's Office of Home and Community-Based services, its Operating Agencies and the 3 Quality Improvement Advisory Councils to integrate these disparate systems into a more cohesive, efficient and effective structure. The activities of the

Quality Specialist will be driven by a comprehensive Quality Improvement System Workplan develop with representative stakeholders and policy staff from BMS and each of the Waiver Operating Agencies. It is anticipated that the Quality Management Specialist will also be responsible for overseeing the implementation of the online Waiver Case Management System, which will serve as the cornerstone of the QIS.

Additionally, the Quality Management Specialist will be asked to identify and implement initiatives that look at LTSS across facility-based and HCBS settings. For example, the development of quality measures that can evaluate quality and long term outcomes across settings will be explored. The responsibility for the ongoing QIS will be assumed by BMS and its Operating Agencies post-MFP.

**ATTACHMENT A - TMH DEMONSTRATION SERVICES**



TRANSITION NAVIGATION  
Take Me Home, West Virginia

Demonstration Service

Service Definition	Target Population	Will the Service be Continued Post MFP?	Will the Service Definition be Revised?	Under Which Medicaid Authority will the Service be Provided?	Timeframe for Amendment ?	Comments
<p>Transition Navigators:</p> <ul style="list-style-type: none"> <li>• Work one-on-one with Take Me Home participants;</li> <li>• Assess participant's needs for services and supports;</li> <li>• Develop individualized Transition Plans;</li> <li>• Facilitate the delivery of needed services and supports, and;</li> <li>• Support each participant for one year after their transition to the community.</li> </ul>	<p>Older Adults, People with Physical Disabilities and People with TBI</p>	<p>Yes</p>	<p>Yes</p>	<p>1915(c)</p>	<p>Spring 2017</p>	<p>The Transition Coordination service to be implemented in the ADW and TBI Waiver programs will essentially be the same service as the current Transition Navigation demonstration service. However, the service will not be provided for 365 days post-transition.</p>



COMMUNITY TRANSITION SERVICE

Take Me Home, West Virginia

Demonstration Service

Service Definition	Target Population	Will the Service be Continued Post MFP?	Will the Service Definition be Revised?	Under Which Medicaid Authority Will the Service be Provided?	Timeframe for Amendment?	Comments
<p>Community Transition Services are one-time services needed for the transition from a facility-based setting into a community based setting. These services may include moving expenses, security and utility deposits, essential and basic household furnishings, initial food supplies, and home accessibility modifications necessary to improve independence and promote safety.</p>	<p>Older Adults, People with Physical Disabilities and People with TBI</p>	<p>Yes</p>	<p>Yes</p>	<p>1915(c)</p>	<p>Spring 2017</p>	<p>The Waiver Community Transition Support service will be defined to ensure as much flexibility as possible for participants to purchase other goods and services not otherwise available (such as assistive technology) to help promote a safe and successful transition to the community.</p>

TMH GOODS and SERVICES  
Take Me Home, West Virginia

Demonstration Service

Service Definition	Target Population	Will the Service be Continued Post MFP?	Will the Service Definition be Revised?	Under Which Medicaid Authority Will the Service be Provided?	Timeframe for Amendment ?	Comments
<p>Goods and Services are equipment, services or supplies not otherwise provided through the Medicaid State Plan that address an identified need in the Take Me Home participant's Transition Plan. These goods and services can provide a wide range of support, including the purchase of assistive technology and home modifications that can significantly enhance the opportunity for Take Me Home participants to live independently in the community.</p>	<p>Older Adults, People with Physical Disabilities and People with TBI</p>	<p>Yes</p>	<p>Yes</p>	<p>1915(c)</p>	<p>Spring 2017</p>	<p>Goods and Services will not be continued as a discrete Waiver transition service. However, the definition of Community Transition Support will be revised to allow for as much flexibility as possible in providing items currently purchased under the demonstration Goods and Services category.</p>

EXTENDED DIRECT-CARE – HANDS ON

Take Me Home, West Virginia

Demonstration Service

Service Definition	Target Population	Will the Service be Continued Post MFP?	Will the Service Definition be Revised?	Under Which Medicaid Authority will the Service be Provided?	Timeframe for Amendment ?	Comments
<p>This service provides Take Me Home participants the opportunity to “extend” the usual service limits for certain Medicaid Waiver and State Plan services for which they are eligible. This may include, for example, more direct-care service per month than is currently available through the Medicaid home and community-based Waiver programs.</p>	<p>Older Adults, People with Physical Disabilities and People with TBI</p>	<p>No</p>	<p>NA</p>	<p>NA</p>	<p>NA</p>	<p>West Virginia has decided not to continue this demonstration service post-MFP. The decision is based on 1) limited utilization in the demonstration program, and 2) budget constraints.</p>



EXTENDED DIRECT-CARE – PRE-TRANSITION CASE MANAGEMENT

Take Me Home, West Virginia

Demonstration Service

Service Definition	Target Population	Will the Service be Continued Post MFP?	Will the Service Definition be Revised?	Under Which Medicaid Authority will the Service be Provided?	Timeframe for Amendment?	Comments
<p>Waiver Case Managers play an integral role in the transition process by ensuring that Waiver services are in place day one of the participant's transition to the community. CMs can:</p> <ul style="list-style-type: none"> <li>• Participate in the transition planning process;</li> <li>• Conduct the appropriate Waiver Member Assessment;</li> <li>• Complete the required Waiver Service Plan;</li> <li>• Facilitate the completion of the ADW RN Assessment and Plan of Care;</li> <li>• Establish or verify financial eligibility for Medicaid;</li> <li>• Enroll the TMH participant in the Waiver.</li> </ul>	<p>Older Adults, People with Physical Disabilities and People with TBI</p>	<p>No</p>	<p>NA</p>	<p>NA</p>	<p>NA</p>	<p>West Virginia has decided not to continue this demonstration service post-MFP. It is anticipated that all pre-transition assessment and planning functions can be conducted or coordinated by the Transition Coordinator.</p>

EXTENDED DIRECT-CARE – PRE-TRANSITION RN ASSESSMENT

Take Me Home, West Virginia

Demonstration Service

Service Definition	Target Population	Will the Service be Continued Post MFP?	Will the Service Definition be Revised?	Under Which Medicaid Authority will the Service be Provided?	Timeframe for Amendment?	Comments
<p>To ensure that Aged and Disabled Waiver and/or Personal Care services are in place the first day the participant returns home, the ADW and/or PC direct-care provider agency must conduct an RN Assessment and develop a Plan of Care. It is the responsibility of the ADW Case Manager and State Plan Personal Care RN (if applicable) to ensure that the assessment is completed and the Plan of Care developed.</p>	<p>Older Adults, People with Physical Disabilities and People with TBI</p>	<p>No</p>	<p>NA</p>	<p>NA</p>	<p>NA</p>	<p>West Virginia has decided not to continue this demonstration service post-MFP. It is anticipated that nursing and other assessments conducted as part of nursing facility care planning can be used to develop initial Plans of Care for home and community-based services.</p>

EXTENDED DIRECT-CARE – PEER SUPPORT SERVICE (PSS)

Take Me Home, West Virginia

Demonstration Service

Service Definition	Target Population	Will the Service be Continued Post MFP?	Will the Service Definition be Revised?	Under Which Medicaid Authority will the Service be Provided?	Timeframe for Amendment?	Comments
<p>PSS is a community-based service for adults age eighteen (18) and older who have a mental illness or a substance abuse disorder. PSS provides activities that promote recovery, self-determination, self-advocacy, and enhancement of community living skills. PSS is an individualized, recovery-focused service, based on a relationship of mutuality that allows the individual an opportunity to learn to manage his or her own recovery.</p>	<p>Older Adults, People with Physical Disabilities and People with TBI</p>	<p>Yes</p>	<p>Yes</p>	<p>1915(c)</p>	<p>Spring 2017</p>	<p>PSS is just now being implemented as part of the Take Me Home demonstration program. A final decision as to whether it will be continued as a Waiver transition service will be made after the state has had the opportunity to evaluate it fully.</p>



**ATTACHMENT B - ADMINISTRATIVE STAFFING**

The image shows a large, faint, and illegible table or chart, possibly representing administrative staffing data. The content is oriented vertically and is too light to read. It appears to be a list of names or identifiers arranged in a column, with some faint markings that could be initials or numbers. The overall appearance is that of a very low-contrast scan of a document page.

**DIRECTOR**

**TAKE ME HOME, WEST VIRGINIA**

**Job Description**

Reporting to the Deputy Commissioner for Policy, this individual serves as the principal contact for the grant and has overall responsibility for project planning and management in conformance with the terms of the grant. Principal duties include:

1. Oversee curriculum development, training, and ongoing support for transition service Navigators.
2. Maintain broad stakeholder involvement and collaborative relationships with key partners
3. Oversee targeting and recruitment of participants
4. Direct day to day project operations
5. Monitor achievement of project goals and coordinate with departmental staff in maintaining IT and QA systems, and
6. Contract Compliance

FTEs	Continued post-MFP?	If not, why?	If continued, funding source?	MFP funding ends?	Comments
1	No	Budget constraints	NA	September 2020	The MFP Director position will not be continued post-MFP. Duties of LTSS systems advocacy and oversight of transition activities post-MFP will be assumed by BMS leadership including the Deputy Commissioner for Policy, the Director of the Office of Facility-Based Services and the Director of the Office of Home and Community Based Services.

**ASSISTANT DIRECTOR**

**TAKE ME HOME, WEST VIRGINIA**

Job Description

Principal duties of the Take Me Home Assistant Director include:

1. Provide supervision to Transition Manager
2. Process Intakes for program eligibility determination
3. Provide and Develop Technical Assistance to various partners
4. Monitor and Track participant HCBS eligibility status and NH Level of Care
5. Monitor and Track 24 Hour Emergency Backup Plan utilization
6. Monitor and Track participant re-institutionalizations
7. Provide technical assistance to HCBS Providers
8. Review and process Transition Plans
9. Quality Committee Lead
10. Develop program guidelines and procedures
11. Authorize demonstration services in the Molina system

FTEs	Continued post-MFP?	If not, why?	If continued, funding source?	MFP funding ends?	Comments
1 	Yes	NA	Medicaid Administrative Funds	September 2020	Many functions of the Assistant Director position will be combined with the Transition Manager position post-MFP to ensure appropriate technical assistance and support of Transition Coordinators.

## HOUSING COORDINATOR

### TAKE ME HOME, WEST VIRGINIA

#### Job Description

Reporting to the Director for the Take Me Home Program, the Housing Coordinator has responsibility for program issues related to housing:

Principal duties include:

1. Management of Implementation Activities.
2. Coordinates the development of policies, procedures and/or rules: works with HUD- funded housing authorities and other resources throughout West Virginia and secures affordable and accessible public housing.
3. Resolves housing related problems among consumers, creates procedures, goals and objectives for individuals transitioning from nursing homes into the community through the Take Me Home Program.
4. Conducts studies of housing issues (e.g., affordability, accessibility, analyses collected data).
5. Recommends corrective action plans and/or implements solutions; reviews monitors and interprets state, local, and federal regulations, (i.e. zoning codes, building codes, laws, policies and plans pertaining to housing for adults with disabilities (e.g.) funding program, fair housing.
6. Ensures that the housing committee meets regularly as scheduled and that appropriate minutes are taken and stakeholder's concern and questions are addressed.

FTEs	Continued post-MFP?	If not, why?	If continued, funding source?	MFP funding ends?	Comments
1	Yes	NA	To Be Determined	September 2020	We anticipate continuing the Housing Coordinator position post-MFP and await a final decision from CMS regarding the use of Medicaid Administrative Funds to support this function.

**DATA/FINANCE ANALYST**

**TAKE ME HOME, WEST VIRGINIA**

Job Description

The Finance/Data Analyst reports to the Take Me Home Director. Principal duties include:

1. Manage all Take Me Home accounting and financial reporting requirements.
2. Interpret/translate program reporting needs into data elements.
3. Assist the Director in meeting all required internal, state and federal reporting, tracking and data management, including management of MFP benchmarks and data integrity.
4. Complete required MFP financial and Program reports as needed.
5. Design and implement management information systems related to long-term care services and the MFP grant.
6. Support the activities of the Take Me Home Quality Improvement System.
7. Perform other Take Me Home duties as assigned.

FTEs	Continued post-MFP?	If not, why?	If continued, funding source?	MFP funding ends?	Comments
1	No	Budget constraints	NA	September 2020	West Virginia does not plan to continue a Finance/Data Analyst position specifically to support transition activity post-MFP. Functions such as MDS “data mining” and quality management support will be absorbed within the existing BMS organizational framework.

**TRANSITION MANAGER**

**TAKE ME HOME, WEST VIRGINIA**

Job Description

The Transition Manager is responsible for the day to day technical assistance and support of Transition Navigators. Principal duties include:

1. One-on-one support of Transition Navigators.
2. Support the Quality Committee to identify system issues/barriers to successful transitions and develop recommendations for Program and/or systems change.
3. Monitor Transition Navigator compliance with established Program processes and procedures.
4. Support in establishing Program eligibility, authorizing demonstration services, processing required forms, etc.
5. Serve as a liaison and Promote relationships between Transition Navigators and key partners of the transition process.
6. Support the activities of the Take Me Home Advisory Council.

FTEs	Continued post-MFP?	If not, why?	If continued, funding source?	MFP funding ends?	Comments
1 	Yes	NA	Medicaid Administrative Funds	September 2020	Functions of the Transition Manager position will be combined with many Assistant Director functions to ensure appropriate technical assistance and support of Transition Coordinators post-MFP.

**ADMINISTRATIVE ASSISTANT**  
**TAKE ME HOME, WEST VIRGINIA**

Job Description

The administrative assistant serves as supportive staff for the Take Me Home- MFP Program. Principal duties include:

1. Maintaining office co-ordination: maintaining co-ordination and link between the department/person and the rest of the office.
2. Arranging meetings and other gatherings.
3. Creating and maintaining office documents such as invoices, reports, etc.
4. Accompanying staff to conferences and meetings: administrative assistant should accompany the employer to meetings and conferences both outside and inside of the office. They are then required to make an account of the happenings and improvements.
5. Overall office keeping: administrative assistant has to maintain the inflow and outflow of goods (food, paper, pens, pencils, notepads etc.), arrange for repair and maintenance of office equipment, receive, store and maintain inventory of office supplies and equipment, and send, receive and sort mail and other packages.
6. Making travel arrangements.
7. Interaction with stakeholder and applicants of the MFP Programs.
8. Maintaining confidentiality in all aspects on the programs dealings and working.

FTEs	Continued post-MFP?	If not, why?	If continued, funding source?	MFP funding ends?	Comments
1	No	Budget constraints	NA	September 2020	Administrative Assistant functions necessary to support transition activities post-MFP will be absorbed within the existing BMS organizational structure.