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**MONEY FOLLOWS THE PERSON**  
**REISSUED 12/17/18 – CHANGE NO. 11-18**

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**I. INTRODUCTION**

Money Follows the Person (MFP) is a state project for individuals that are authorized in the Community Alternative Program (CAP), Innovations, Traumatic Brain Injury (TBI) or Program of All-Inclusive Care for the Elderly (PACE) who:

**A. Have lived in a hospital, skilled nursing facility or an immediate care facility for people with intellectual disabilities (ICF/IID) at least three months, AND**

**B. Choose to move to a “qualified residence”:**

1. A participant’s own home or apartment,
2. A family member’s home or apartment, OR
3. A group home with four or fewer people (only available in NC under the Innovations waiver)

Money Follows the person is time-limited for a period of 365 days.

**II. REQUESTING MFP SERVICES**

An individual requesting MFP services must submit an application to the [MFP State Project Regional Transition Coordinator](#).

When the applicant/beneficiary (a/b) requests MFP services and the:

**A. Individual is currently not Medicaid eligible**

1. A Medicaid application must be submitted
2. Determine Medicaid eligibility under CAP, Innovations or PACE as appropriate

**B. Individual is currently Medicaid eligible**

1. Process as a change in circumstances
2. Evaluate the change for eligibility under CAP, Innovations or PACE

**C. The Regional MFP Transition Coordinator coordinates and collaborates with the local agency during the Medicaid/MFP eligibility determination process.**

**D. DMA determines MFP eligibility and enters the “MF” indicator.**

### **III. CHANGES IN SITUATION**

#### **A. County Transfers**

1. A MFP beneficiary, who moves from one county to another, remains MFP eligible
2. A PACE/MFP beneficiary who moves to another county may no longer be PACE and MFP eligible
  - a. When the new county is serviced by PACE, the beneficiary remains eligible for MFP services
  - b. When the new county is not serviced by a PACE entity
    - (1) Evaluate for CAP eligibility in the new county
    - (2) If found eligible for CAP, MFP eligibility may resume
3. A TBI/MFP beneficiary who moves to another county may no longer be TBI and MFP eligible
  - a. When the new county is serviced by Alliance Behavioral Health, the beneficiary remains eligible for MFP services
  - b. When the new county is not serviced by Alliance Behavioral Health
    - (1) Evaluate for other Medicaid programs
    - (2) Remove the beneficiary from the TBI program

#### **B. Terminations**

1. MFP participation terminates automatically after 365 days
2. MFP participation may terminate before 365 days for any of the following reasons:
  - a. Beneficiary returns to a facility for longer than 30 days and not for short-term respite as authorized by relevant waiver

- b. Beneficiary transitions to a residence that does not qualify for MFP
  - c. Beneficiary is disenrolled in CAP DA, PACE or Innovations program
  - d. Beneficiary chooses to disenroll
  - e. Beneficiary's enrollment is terminated by the MFP State Project
3. DMA removes the "MF" indicator upon MFP services being terminated.