

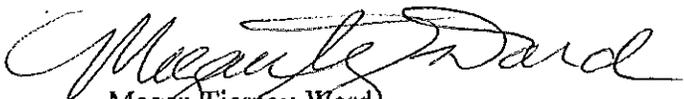
Department of Disabilities, Aging and Independent Living
Commissioner's Office
103 South Main Street, Weeks 2
Waterbury, VT 05671-1601
Voice: (802) 871-3069
FAX: (802) 871-3052

Jeff Clopein
Project Officer
Center for Medicaid and CHIP Services (CMCS)
Phone: 410-786-7252
jeffrey.clopein@cms.hlis.gov

To Whom It May Concern:

We the undersigned acknowledge that it is our intention to support the implementation of the enclosed Money Follows the Person (MFP) Sustainability Plan through Federal Fiscal Year 2020. This plan aligns conceptually with our long-term goals and objectives for enhancing Vermont's long-term services and supports, home and community-based initiatives. Our support of this sustainability plan is with the understanding that this document should be considered a working document. Vermont's MFP team and CMS will work closely to refine the contents of the plan to the final submission in the fall of 2015.

Thank you for your consideration of this sustainability plan,



Megan Tierney-Ward
Director, Adult Services Division

Susan Wehry Digitally signed by Susan Wehry
Date: 2015.04.27 15:03:10 -04'00'

Susan Wehry, MD
Commissioner, Department of Disabilities, Aging and Independent Living



Steven Costantino
Commissioner, Department of Vermont Health Access

I. Executive Summary

The Department of Disabilities, Aging and Independent Living (DAIL), Adult Services Division (ASD) has been operating the Money Follows the Person (MFP) grant since 2012 to help Vermonters living in nursing facilities overcome barriers to moving to their preferred community-based setting. Since 2012, MFP and its partners have helped 162 people transition to the community while 60 people completed a full 365 days of living in a community setting. In September 2013, with the help of the MFP grant, Choices for Care (CFC) implemented a new service called Adult Family Care (AFC). It is a wonderful new option that provides long-term services and supports in private homes around the state. Additionally, the MFP enhanced federal match for CFC community-based services has helped fund growth in Vermont's long-term services and supports system, such as increased wages for self-directed independent direct support workers in July 2014.

Through the MFP grant work, Vermont has learned that there are some very important factors to helping Vermonters transition from a nursing facility back to the community. Some lessons learned include:

- A high percentage of Vermonters (about 25%) who transition home return to a hospital or nursing facility for a period of 90 days or longer
- 45% of all people in MFP who expressed a desire to transition to a community setting were NOT able to transition back to the community due to insurmountable barriers (primarily housing)

Vermont's successes, lessons learned and stakeholder feedback support the MFP plan to request federal funding to:

- Continue the MFP staffing and demonstration services through 2020
- Continue MFP transitions through 2018 with enhanced FMAP for eligible Choices for Care services through 2019
- Develop a plan to incorporate the work of MFP Transition Coordinators within the current CFC provider network or a new identified CFC service beyond 2020
- Create:
 - An improved discharge planning/Section Q process for people who wish to transition back to the community
 - Sustainable training resources for family and paid caregivers
 - One-time additional funding for costly home modifications

Vermont also plans to engage in efforts to improve the lives of people by:

- Incorporating elements of MFP Transition Funds into the CFC program beyond 2020
- Enhancing the person-centered planning process for all transitions
- Improving Vermont's re-institutional rate
- Expanding housing opportunities including improved access to Adult Family Care
- Requesting Vermont legislative approval to convert 4 limited MFP grant positions into permanent positions beyond 2020

This document describes Vermont's sustainability plan in a format prescribed by the Centers for Medicare and Medicaid Services (CMS).

II. Stakeholder Involvement

Process - The Sustainability Plan has been characterized by CMS as an ongoing process. As such, stakeholders are essential partners throughout the project and beyond. Stakeholder feedback regarding the sustainability of Vermont's home and community-based service system (which includes MFP) has come in many forms.

1. October 2013: DAIL published its first annual legislative report on "The Adequacy of the CFC Provider System". The report described the current Choices for Care (CFC) system of care, ways in which DAIL assures quality and receives stakeholder feedback and opportunities for CFC "reinvestments". <http://ddas.vt.gov/ddas-publications/publications-cfc/cfc-legislative-reports/choices-for-care-system-adequacy-report-2013>
 - a. October 2014: DAIL published its second annual legislative report on "The Adequacy of the CFC Provider System". <http://ddas.vt.gov/ddas-publications/publications-cfc/cfc-legislative-reports/choices-for-care-system-adequacy-reports-2014> The report includes:
 - b. VT Long-Term Care Consumer Satisfaction Survey summary (Jan 2014)
 - c. Choices for Care Independent Evaluation summary (May 2014)
 - d. Choices for Care Policy Briefs summaries
 - i. Alzheimer's Disease and Related Disorders (2013)
 - ii. Non-Medical Providers (2013)
 - e. Choices for Care Utilization Data
 - f. MFP Experiences and Data
 - g. Choices for Care Stakeholder Survey results (August 2014)

Conclusions that indicate a need for more residential/housing options, increased staffing for home-based services and improved options for people with cognitive and behavioral health needs

2. February 2015: University of Massachusetts Medical School (UMMS) Policy Brief: “Factors Leading to Nursing Facility Readmission”. <http://ddas.vermont.gov/ddas-publications/publications-cfc/evaluation-reports-consumer-surveys/umass-policy-brief-factors-leading-to-nursing-facility-readmission-march-2015> . The policy brief included literature research and Vermont stakeholder interviews with recommendations including improved person-centered assessment and discharge planning process, and access to home community-based services.
3. March 2015: ASD Division Director and MFP Project Director attended DAIL Advisory Board to introduce new MFP Project Director, present MFP status update, present MFP sustainability plan concepts and receive recommendations. Stakeholders provided feedback around the need to improve access to services, discharge planning process, better assessments and person-centered planning.
4. April 2015: ASD Division Director and MFP Project Director met with Developmental Disabilities Services Executive Directors re: Adult Family Care and MFP. Recommendations included improved transitional fund usage, and access to housing options such as Adult Family Care (i.e. a better method assessing a person’s needs prior to the matching process and a tier rate evaluation).
5. April 2015: Money Follows the Person Stakeholder Input Survey distributed to the stakeholders in the table below:

Stakeholder Group	Survey Invitations	Completed Surveys	Response Rate
AFC Homes	14	0	0%
AAA	18	7	39%
HHA	19	7	37%
Transitions II	2	1	50%
DAIL Advisory Board	45	12	27%
Total	98	27	28%

Stakeholder Survey Highlights:

The primary factors preventing consumers from returning to a home and community based setting were lack of supports, housing and their medical condition. The stakeholders agreed that having at least \$2,500 available to aid in the transition process was important and offered many suggestions on optimizing the current policy. It was agreed that the AFC Home option adds value to the community but would like to see program improvements related to payment schedules, increasing the pool of home providers and some streamlining of current processes. The majority of respondents agreed that increased training for direct caregivers was important to the success of consumers remaining in the community. Isolation was a concern as a factor that would help improve a person's quality of life once they have returned to the community. Programs or services that encourage activities that reduce a consumer's feeling of isolation were identified as important to long term success in the community.

6. April 2015: Letter from ASD Division Director and MFP Project Director to CFC case management agencies and nursing facilities providing an MFP mid-project status update and an invitation to schedule regional "meet and greet" sessions starting May 2015.
7. Ongoing Stakeholder Group Meetings:
 - a. Monthly Adult Family Care stakeholder conference call
 - b. Quarterly Case Management Supervisors Meeting
 - c. Quarterly Ombudsman Program Meeting
 - d. Bi-monthly Home Health Executive Directors Meeting
 - e. Monthly Area Agency Executive Directors Meeting

Summary of Stakeholders

Vermont's primary stakeholders for the Department of Disabilities, Aging and Independent Living (DAIL) and the Money Follows the Person grant include:

- The DAIL Advisory Board
- Program Participants
- Nursing Facilities
- Area Agencies on Aging
- Home Health Agencies
- Adult Family Care Authorized Agencies
- Aging & Disability Resource Connections (ADRC)
- Vermont Long-Term Care Ombudsman Program

The Department also works closely with Adult Day Providers, licensed Residential Care Homes, hospitals and other internal stakeholders such as the Department of Vermont Health Access, Department for Children and Families and Department of Mental Health.

III. Vermont's Plan for Continuing to support moving persons out of institutions

Vermont's Choices for Care (CFC) 1115 waiver program was designed to provide people with a choice to receive their long-term services and supports in the setting that they prefer. Since the implementation of CFC in 2005, the percentage of Vermonters receiving home-and community-based services (versus nursing facility) has risen from approximately thirty (30) percent to over fifty (50) percent. With the support of MFP through 2020, Vermont will continue to actively support moving people out of institutions into their chosen community-based setting. Details of the current MFP activities that will be continued are detailed in sections 4, 5 and 6 of this document. In Vermont, the MFP program supports both the elderly and the physically disabled adult populations. There is no plan to change supports provided to these populations going forward.

Vermonters who express an interest in leaving an institution shall continue to be referred to the Local Aging & Disabilities Resource Connections (ADRC) for Person-Center Options

Counseling. People who meet the MFP eligibility standards will continue to be referred to one of four regional MFP Transition Coordinators for assistance during the discharge planning process. The MFP Transition Coordinator will continue to work closely with the person, their CFC case manager, facility discharge planner and family supports to identify the needs for everything a person needs to assure a successful transition including (but not limited to) housing, furnishings, home-based services, backup plan, social opportunities, medical supplies, durable medical equipment, medical appointments and MFP Transition Funds. Once the person-centered plan has been developed, critical home-based services and medical supplies/devices have been secured, a discharge date is scheduled. After the successful transition, the CFC case manager will continue to provide the lead role for monthly monitoring, reassessments, and person-centered planning. The MFP Transition Coordinator will continue to monitor the individual's plan and complete Quality of Life surveys for the next 365 days. Critical incidents will continue to be reported to the MFP team by applicable CFC providers and reviewed on a weekly basis to evaluate issues and provide technical assistance to providers in order to reduce the risk of re-institutionalization or harm to the person.

IV. Demonstration Services and services funded by MFP Administrative funds included in the state's Operational Protocol and delivered to MFP participants

Transition Funds – Vermont will continue to offer a one-time transition assistance payment of \$2,500 per person as an MFP demonstration service. MFP Transition Funds will continue to be reimbursed at an enhanced federal rate for services provided through 2018. (*See Estimated Budget Summary*) MFP enrollees are eligible to receive these transition funds to help remove identified barriers to transitioning and remaining in the community on home and community-based services (HCBS). The MFP team will be conducting a study of items purchased by the grant to determine the correlation between the items purchased and a whether the person was

successful in remaining in the community. The study will provide the state’s senior leadership a recommendation on a sustainable dollar amount to be incorporated into the current CFC home-based Assistive Devices/Home Modification service beyond 2019.

V. Administrative (not service) Staff Positions funded by MFP Administrative funds.

Vermont currently has 7.5 full-time equivalent MFP positions that will continue to be 100% federally funded through 2020. Vermont’s goal is to initiate a budget request and legislative process in 2018 to convert 4 (four) MFP limited positions into 4 (four) full-time positions by 2020. The positions will be dedicated to quality management, assuring continued quality of the person-centered discharge/transition process, CFC home-based services such as Adult Family Care and critical incident management. Approval of new positions is subject to the state of Vermont’s budget at the time of the request and legislative approval.

#1 Position Title: Project Director (1FTE)
Main functions through 2020: The Project Director is responsible for leading the design, development, implementation, and plans for sustaining the CMS MFP demonstration.
Reports to: Adult Services Division Director
Plan after 2020: In 2018 will initiate a request to convert a total of 4 MFP limited positions into full-time permanent state position for the purpose described above.
<p>Duties:</p> <ul style="list-style-type: none"> • Hire personnel for program implementation • Responsible for overall quality and management of MFP program • Oversees budget and ensure financial accountability • Supervise program delivery • Recognize and solve potential problems and evaluate program effectiveness • Ensure operating procedures meet program goals • Provide program content expertise • Facilitate MFP Steering Committee Meetings • Facilitate ad-hoc workgroups and forums • Address capacity issues as they arise • Perform quality functions • Network with local, state and national agencies for future program development as required • To perform this job successfully, an individual must be able to perform each duty

satisfactorily

- The requirements listed below are representative of the knowledge, skill, and/or ability required
- Excellent supervisory, organizational and training skills
- Experience in program development and implementation
- Experience in coordinating activities, evaluating data, and establishing priorities
- Excellent communication and presentation skills
- Ability to analyze problems and make well-reasoned, sound decisions
- Related grant experience

#2 Position Title: Administrative Assistant (.5 FTE)

Main functions through 2020: The Administrative Assistant provides administrative support to the Money Follows the Person (MFP) Project Director and workgroups.

Reports to: Project Director

Plan after 2020: In 2018 will initiate a request to convert a total of 4 MFP limited positions into full-time permanent state position for the purpose described above.

Duties:

- Assist the Project Director to administratively organize the new MFP grant information, space, staff and files
- Assist the Project Director with coordinating the hiring process for potential new employees
- Perform all MFP administrative office tasks such as answering the phone, photo copying, faxing, filing and processing incoming and outgoing mail
- Arranging meetings and trainings by scheduling dates, finding space and disseminating necessary information to participants
- Provide administrative support to the Project Director by creating meeting and workgroup agendas, taking minutes and disseminating information
- Perform word processing on documents and reports as requested
- Processing and disseminating program information and reports as needed
- Organize and process MFP sub-recipient grants as needed
- Organize and submit staff time-sheets and expense sheets for the Project Director
- Send email communications on behalf of the Project Director to staff, stakeholders, community partners and workgroups as needed
- Assist the Project Director with travel requests and arrangements as needed
- Perform other administrative tasks as requested by the Project Director
- To perform this job successfully, an individual must be able to perform each duty satisfactorily
- The requirements listed below are representative of the knowledge, skill, and/or ability required
- Typing skills
- Microsoft Word, Excel and Outlook experience

<ul style="list-style-type: none"> • Ability to operate copy and fax machines • Good telephone communication skills • Good organizational skills • Good interpersonal skills
#3 Position Title: Senior Planner (1 FTE)
Main functions through 2020: The Senior Planner directs the management information systems plan, data analysis and other reporting needs for the Money Follows the Person (MFP) demonstration grant.
Reports to: Project Director
Plan after 2020: In 2018 will initiate a request to convert a total of 4 MFP limited positions into full-time permanent state position for the purpose described above.
Duties: <ul style="list-style-type: none"> • Design and implement management information systems related to long-term care services and the MFP grant • Assist the Program Director in managing all required internal, state and federal reporting, tracking and data management, including management of MFP benchmarks and data integrity. • Interpret/translate program reporting needs into data elements • Complete required MFP reports as needed • Assist MFP Quality Management Specialists to manage program tracking systems • Assist in identifying MFP website needs and developing a plan for updating the Department's website • To perform this job successfully, an individual must be able to perform each duty satisfactorily. The requirements listed below are representative of the knowledge, skill, and/or ability required. • Considerable knowledge of management information systems • Considerable knowledge of the principles and practices of program planning • Ability to conceptualize methods for the development of automated systems to manage and integrate large amounts of data • Ability to analyze complex problems and to develop and implement effective solutions • Ability to prepare detailed technical reports • Knowledge and understanding of the theories and practices of data analysis • Considerable knowledge of databases, data collection and creating data reports • Ability to work independently and set priorities among competing demands • Ability to understand, interpret and apply state and federal regulations • Ability to establish and maintain effective working relationships including the ability to interact respectfully and professionally with a wide variety of people • Ability to express ideas and present information clearly and concisely in oral and written form • Ability to prepare detailed analyses of problem situations and implement practical and attainable solutions • Ability to use Microsoft Word, Excel and Outlook and other database applications
#4 Position Title: Quality & Program Specialist (1 FTE)
Main functions through 2020: The Quality and Program Specialist assists in the development, implementation and oversight of all quality management activities for the Money Follows the Person (MFP) demonstration grant.
Reports to: Project Director
Plan after 2020: In 2018 will initiate a request to convert a total of 4 MFP limited positions into full-time permanent state position for the purpose described above.
Duties: <ul style="list-style-type: none"> • Oversee the 24/7 back-up system for the MFP grant

- Oversee critical incident reporting system and respond to critical incidents as directed by the OP for MFP
- Oversee risk mitigation programs
- Perform all required quality management and program utilization review activities.
- Assist with independent evaluation as necessary
- Assist in writing/updating the MFP Operational Protocol as needed
- Assist in analyzing data related to the MFP grant
- Oversee certification and licensure reviews of clinical staff and housing as needed
- Assist the Project Director and Data Analyst with MFP financial and performance reporting as needed
- Provide ongoing monitoring of all MFP program activities. Knowledge and understanding of the theories and practices of quality management
- Ability to work independently and set priorities among competing demands
- Considerable knowledge of principles and practices of disability issues and independent living as applied in home- and community-based service programs
- Considerable knowledge of aging issues and long-term care services in home- and community-based settings
- Considerable knowledge of state and federal rules and regulations relating to disability and elder issues and programs
- Working knowledge of Medicaid services that provide supportive services to elders and people with disabilities
- Ability to establish and maintain effective working relationships including the ability to interact respectfully and professionally with a wide variety of people including families, providers, other human service and housing organizations
- Ability to express ideas clearly and concisely in oral and written form
- Ability to present information and policy to the public and solicit the public's opinions
- Ability to prepare detailed analyses of problem situations and implement practical and attainable solutions.
- Ability to use Microsoft Word, Excel and Outlook and other database applications.

#4 Position Title: Transition Coordinator (4 FTE)

Main functions through 2020: Transition Coordinators provides MFP education and screening to people who are in nursing facilities and interested in transitioning to the community. They work closely with the discharge planning team during pre-transition coordination of services and follow the person into the community to provide monitoring and technical assistance for up to 365 days.

Reports to: Project Director

Plan after 2020: In 2018 will initiate a request to convert a total of 4 MFP limited positions into full-time permanent state position for the purpose described above.

Duties:

- Making visits to nursing facilities across the state to screen and identify individuals eligible for the MFP demonstration
- Responding to MFP referrals from nursing facilities, residents (self-referrals), families, guardians and others; undertaking comprehensive transition planning for all eligible MFP participants
- Performing transition assessments (including a comprehensive risk assessment);
- Developing individualized plans of care in collaboration with the participant and the participant's assigned case manager
- Collaborating with the participant's case manager and Community Development Specialist (described below) to arrange and coordinate services pre-transition
- Performing discharge planning functions in coordination with the nursing facility; and

carrying out post-transition follow-up calls and visits as necessary to ensure implementation of the plan-of-care and to identify any unmet needs that could pose a risk of re-institutionalization

VI. Plan for Utilization of Rebalancing Funds

Vermont manages the Choices for Care (CFC) long-term services and supports budget as a whole for all settings: home-based, Adult Family Care, Enhanced Residential Care and Nursing Facility. The MFP enhanced federal match is included in the CFC home-based and Adult Family Care service options. Each year, Vermont further shifts the balance towards community-based settings which generally cost less to provide. Therefore, when the total CFC year-end expenditures are less than the total CFC legislative budget for that year, the Agency of Human Services (AHS) follows a legislative protocol to “reinvest” those dollars back into long-term services and supports. Each year in accordance with **2013 Vermont Acts and Resolves No. 50, Sec. E.308(c)** the Department of Disabilities, Aging and Independent Living (DAIL) submits an annual legislative report assessing “The Adequacy of the CFC Provider System”. The report includes stakeholder feedback and data which provides AHS and the Vermont legislature with information needed to give input and make decisions on the CFC reinvestment plan. The October 2014 report can be found at: <http://ddas.vermont.gov/ddas-publications/publications-cfc/publications-cfc-default-page>

Vermont will continue to follow the state’s budget and legislative protocol to reinvest Choices for Care savings, which include MFP rebalancing funds. The protocol can be found in the **2013 Vermont Acts and Resolves No. 50, Sec. E.308(c)** at:

<http://www.leg.state.vt.us/docs/2014/Acts/ACT050.pdf>

Since the implementation of the MFP grant, the following enhancements have been made to Vermont’s home and community-based services system.

State Fiscal Year 2013:

- \$.30/hr wage increase for all consumer/surrogate directed employees
- Reversed a 2009 2% rate reduction for all Choices for Care home and community-based services and Day Health Rehabilitation services for certified Adult Day providers
- \$164,453 to 3 of Vermont's 5 Area Agencies on Aging to help maintain community services for people over 60

State Fiscal Year 2014:

- \$170,000 emergency reinvestment to offset the impact of sequestration on Older Americans Act Congregate Nutrition Services (Title IIIC1,) and Home-Delivered Nutrition Services (Title IIIC2)
- \$40,000 to reduce nutrition risk among older adults at high nutritional and social risk who receive home delivered meals
- \$380,000 Area Agency on Aging nutrition services
- \$101,010 SASH/Housing & Supportive Services
- \$3.0 million to increase access to CFC Moderate Needs Services (preventative) and created a Flexible Funds Option
- Increased rates for all CFC providers including wages for consumer and surrogate directed employees by 2.75%

State Fiscal Year 2015:

- Increased wages for all consumer and surrogate directed employees to a new minimum of \$10.80/hour or by 2% (whichever was greater)

VII. Timeline for Activities Planned in Sections 4, 5 & 6

Vermont's Sustainability Plan Timeline																	
	CY2016			CY2017			CY2018			CY2019			CY2020				
	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4	Q1	Q2	Q3		
MFP Grant Transitions	Last Transition on or before December 31, 2018 (Reimbursed at MFP Enhanced FMAP Rate)																
Continued Transition Support													Continued Transition Support - Transition Service Provided by Network of Providers				
MFP Transition Funds	Reimbursed at MFP Enhanced FMAP Rate																
Transition Funds Added to CFC Assistive Devices/ Home Modification Service													Reimbursed at Traditional FMAP Rate				
Grant and Program Reporting	MFP Senior Planning Position Responsible for Reporting																
Conversion of 7.5 limited full-time equivalent MFP positions to 4 full-time state positions.							Budgeting and Legislative Approval Process for conversion of positions										
Projected Last Date an MFP Referral Accepted 06/30/18							X										
Other Project Milestones																	
Description								Start Date								Completion Date	
Create an improved Section Q/Aging & Disability Resource Connections (ADRC) process for people who wish to transition back to the community.								July 1, 2017								September 30, 2020	
Create a sustainable training process for family and paid caregivers.								January 1, 2018								September 30, 2020	
Offer one-time additional funding to pay for costly home modifications in MFP eligible settings.								January 1, 2018								September 30, 2020	

VIII. Estimated Budget Summary

The table below represents Vermont's estimated budget summary in the template provided.

Vermont MFP Sustainability Plan Estimated Multi-Year Budget

Grantee Name:	State of Vermont		Award Number:		11LCMS330824		
Estimated Federal Budget	(1) CY 2016	(2) CY 2017	(3) CY 2018	(4) CY 2019	(5) CY 2020	(6) Total	State Share
6. Object Class Categories							
a. Personnel (100% Federal)	\$397,473	\$417,347	\$438,214	\$460,125	\$483,131	\$2,196,290	\$0
b. Fringe Benefits (100% Federal)	\$216,394	\$227,214	\$238,574	\$250,503	\$263,028	\$1,195,713	\$0
c. Travel (100% Federal)	\$36,109	\$37,914	\$39,810	\$41,801	\$43,891	\$199,525	\$0
d. Equipment (100% Federal)	\$0	\$0	\$0	\$0	\$0	\$0	\$0
e. Supplies (100% Federal)	\$14,450	\$15,173	\$15,931	\$16,728	\$17,564	\$79,845	\$0
f. Contractual (100% Federal)	\$22,000	\$72,000	\$122,000	\$122,000	\$14,000	\$352,000	\$0
g. Construction (100% Federal)	\$0	\$0	\$0	\$0	\$0	\$0	\$0
h. Services (76.95 Federal / 23.05% State)	\$2,332,605	\$2,485,656	\$2,690,460	\$1,345,230	\$0	\$8,853,951	\$2,040,836
i. Total Direct Charges (sum of 6a-6h)	\$3,019,031	\$3,255,303	\$3,544,990	\$2,236,386	\$821,614	\$12,877,325	\$2,040,836
j. Indirect Charges (100% Federal)	\$34,321	\$38,482	\$42,726	\$44,558	\$41,081	\$201,169	\$0
k. Total Federal Budget (sum of 6i-6j)	\$3,053,352	\$3,293,786	\$3,587,716	\$2,280,944	\$862,695	\$13,078,493	\$2,040,836

All figures were compiled by MFP Project Director and reviewed by the DAIL Business Office

Administration CAP Projections for CY2016 and CY2017

	CY2016	CY2017	Total
ADMIN % - Formula	\$672,426	\$755,647	\$1,428,074
=ADMIN/(ADMIN+Expenditures)	\$2,332,605	\$2,485,656	\$4,818,261
ADMIN %	22%	23%	23%

State Share Comparison

	CY2016	CY2017	CY2018	CY2019	Total State Share
State Share of Services if Claimed AS Choices for Care	\$ 1,257,274	\$ 1,339,769	\$ 1,450,158	\$ 725,078.97	\$ 4,772,280
State Share of Services if Claimed AS MFP	\$ 537,665.45	\$ 572,943.71	\$ 620,151.03	\$ 310,075.52	\$ 2,040,836
Projected State Share Savings Difference	\$ (719,609)	\$ (766,825)	\$ (830,007)	\$ (415,003)	\$ (2,731,444)

State Share Savings
/ Rebalancing Dollars

Enhanced FMAP	Regular FMAP	FMAP Difference
0.7695	0.5390	0.2305