

## **EMPOWER Care Act Gets Individuals with Disabilities & Seniors Back Home**

### **Background**

First authorized by President Bush in 2005, with strong bipartisan support, Money Follows the person (MFP) funding helps individuals with disabilities and seniors who want to move out of nursing homes and back in their communities. MFP has assisted more than 88,000 individuals voluntarily move into a setting of their choice, and has helped 44 states improve access to community-based long term services and supports, also known as “home and community-based services” (HCBS).

### **Time is Running Out: Short-term MFP funding to Help People Transition Ends in September** and is

- likely to run out even sooner! Congress passed \$112 million stop-gap funding through the end of March for the program in January 2019, we anticipate those funds will run out before the end of the fiscal year, September 2019 in many states.

### **MFP Enhances Opportunities to Live Independently and Age with Dignity**

- Medicaid requires states to provide care in nursing homes, but HCBS is optional. MFP incentivizes investment in HCBS by providing federal funding for transitional services for individuals who wish to leave a nursing home or other institution. Thanks to MFP, over 88,000 seniors and people with chronic conditions and disabilities and have transitioned back into the community.

### **MFP Rebalancing Demonstration is a Success Story that Improves Quality of Life**

- At the end of 2015, nearly all states had an MFP demonstration. In a 2017 evaluation, the Centers for Medicare and Medicaid Services (CMS) found strong evidence that beneficiaries’ quality of life improves when they transition from institutional long-term care to HCBS. MFP participants experienced increases across all seven quality-of-life domains measured, and the improvements were largely sustained after two years.

### **States Save with Money Follows the Person**

- Providing long term care in the home costs less than institutional care. Average monthly expenses for MFP participants declined by almost 25 percent in the first year after transitioning from a nursing home to HCBS. CMS also found that MFP participants are less likely to be readmitted to institutional care than other beneficiaries who transition but do not participate in the program.

### **The EMPOWER Care Act Makes Improvements to the MFP Program**

The EMPOWER Care Act improves MFP by reducing how long someone must be in a nursing home before becoming eligible to transition -- from 90 days to 60. (The longer someone remains in a nursing home, the harder it can be for them to transition out.) The bill also enhances the reporting and accountability of MFP funding and requires the federal government to identify and share the most effective state strategies for transitioning beneficiaries from institutional to qualified community settings, including how such strategies vary for different types of beneficiaries.

### **REQUEST TO POLICYMAKERS**

Support the Empower Care Act – a bipartisan bill introduced in the Senate (S. 548) by Senators Rob Portman (R-OH) and Maria Cantwell (D-WA) and in the House (H.R. 1342) by Representatives Brett Guthrie (R-KY 2<sup>nd</sup>) and Debbie Dingell (D-MI 12<sup>th</sup>). We urge Congress to support people with disabilities and pass the Empower Care Act before funding runs out in September.