

PROJECT ABSTRACT

NJ agencies that oversee LTC have coordinated with State leaders to make improvements in HCBS, including: (1) expanding options for self-direction, (2) reorganizing agencies to better support the LTC system, (3) using RCSC grants to improve infrastructure, (4) involving consumers, family and advocates in the planning process, and (5) passing legislation that sets public policy for rebalancing long-term care programs and development of Global Budgeting processes. The 2006 System Transformation Grant will help NJ build (1) a “One-Stop” access system, (2) build IT infrastructure and (3) institute a global budget/ funding process for “Money Follows the Person.” Under a State Management Team that includes a consumer at the highest level of decision-making, NJ agencies will partner to plan and implement an MFP Program Demonstration for elderly or younger disabled individuals who meet the NF level of care and individuals who meet the ICF/MR level of care who choose to participate. Advocate panels will involve consumers, advocates and providers to participate in Quality Management efforts.

With a total budget of \$39,799,227 NJ's partner agencies Goals will: (1) pilot an innovative support coordination model to assist elderly and/or disabled individuals and families to choose and self-direct services, (2) explore ways to eliminate barriers due to service definitions, eligibility criteria or “rules” the State can change, (3) improve access for individuals from all cultural and disability groups, (4) expand transition services to aid in finding housing and services to improve quality of life and (5) use consumer/family feedback and QM data to continuously improve quality in HCB services. Outcomes will include (a) number of individuals who remain in the community (b) more diverse array of providers, (c) high levels of satisfaction with service planning models, transition services and access (d) IT applications that collect and aggregate data for CQI efforts for the MFP demonstration and the HCBS waivers and (e) Global Budgeting methodology that will allow movement of funds to support HCBS.