



*Promoting Wellness and Recovery*

John R. Kasich, Governor  
Tracy J. Plouck, Director

**Transitioning Older Persons  
Diagnosed *with* Mental Illness *from*  
Nursing Facilities *to*  
Community Settings**

# Undisputed Aging Population

State Projections of Population Aged 60 and over: July 1, 2005 to 2030							
Number of Persons 60 and over							
State	Census 2000	Projection 2005	Projection 2010	Projection 2015	Projection 2020	Projection 2025	Projection 2030
US	45,797,200	49,712,714	56,922,418	65,551,441	75,487,837	84,652,165	91,129,331

The American Psychological Association notes “As many as 20% of older adults in the community and up to 37% in primary care settings suffer from depression.”

In 2005, nearly half of nursing home residents had dementia, and 20 % had other psychological diagnoses *(Houser et al., 2006)*

# Relationship Building

**Providing training & technical assistance**

**Delivering presentations as subject matter experts**



**Volunteering resources**



**Networking with internal & external stakeholders**

**Collaborating on projects**

**Having a seat at the table**



# Collaboration Across Agencies

- **State Medicaid & MFP Implementation Agency**
- **State Aging Authority**
- **Community Behavioral Health Authorities**
- **Long-Term Care Ombudsman**
- **Disability Rights Entities**
- **Nursing Facilities**
- **Hospital Associations**



# Ohio MFP- Transitioning Individuals from Institutional Settings to Community

**1<sup>st</sup> in  
the  
Nation**

*Individuals  
diagnosed  
with mental  
illness*

**2<sup>nd</sup> in  
the  
Nation**

*All  
disability  
types*

**6<sup>th</sup> in  
the  
Nation**

*Older  
adults*

# Balancing Incentives & Long-Term Care

## “No Wrong Door”

Screening occurs at all points of entry for individuals seeking long-term services

Acts as a diversionary tool

Informs care planning & service delivery processes



# Olmstead Initiatives

*All individuals have the right to live in the in the most integrated and least restrictive setting.*



Americans with Disabilities Act

# Taking Ownership



Completing  
comprehensive  
clinical  
assessments

Providing clinically  
appropriate, age &  
disability-specific  
service/support  
recommendations

Coordinating  
activities and  
coaching

# Person-Centered Discharge Planning & Individual Choice

*All individuals & legal guardians should be able participate in their own discharge planning process.*



# Meeting Needs Post-Transition



**Age & Disability-specific services & supports**

**Behavior Health (Mental Health and Alcohol & other Drug)**

**Medical Health**

**Individual Needs**

**MFP Enhanced Services/Supports**

**Recovery Requires a Community**

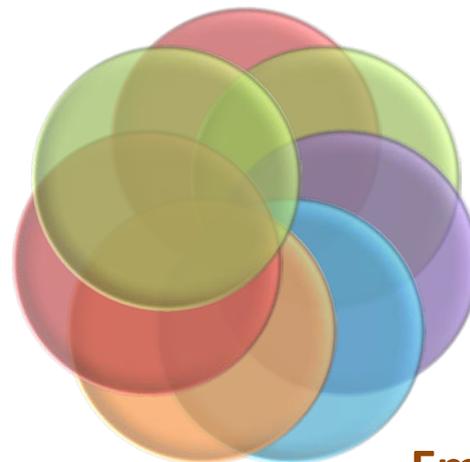
**Continuity of Care**

**Housing**

**Peer Support**

**Waiver Services**

**Employment & Community Involvement**



# Presenter Contact Information



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