**An Examination of Community Integration and Quality of Life in Money Follows the Person Participants**

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**BACKGROUND**

For more than four decades, the provision of long-term services and supports by Medicaid has relied heavily on institutional settings. The Centers for Medicare and Medicaid Services’ Money Follows the Person (MFP) demonstration program seeks to reverse the imbalance of care between institutional and community-based settings by providing supportive services that assist people in moving out of inpatient facilities and returning to their homes and communities. The Georgia Department of Community Health (DCH) began enrolling participants in the program in September of 2008. Since that time, the program has transitioned over 2,000 individuals out of institutional facilities in Georgia. Since 2009 the Georgia Health Policy Center, in partnership with the DCH, has been responsible for the evaluation of the state’s program. Part of the evaluation has included conducting and analyzing surveys with program participants one and two years after transitioning to the community.

**RESEARCH OBJECTIVE**

This study examines the relationship between community integration and quality of life measured through global life satisfaction (an individual’s general feeling of happiness at a particular time) for individuals that transitioned out of institutional settings into the community. Data were analyzed from the MFP Quality of Life (QoL) survey developed by Mathematica Policy Research (Sloan & Irvin, 2007). The study includes 204 MFP program participants that completed a pre-transition survey, a year-one survey, and a year-two survey.

**POPULATION STUDIED**

The study includes 204 MFP program participants that completed a pre-transition survey, a year-one survey, and a year-two survey between January 2009 and July 2016. The sample size included a slightly higher percentage of male participants (54%) than female participants (46%). Participants ranged in age from 21 to 88 with the average age being 54 years old. Participants represented three target populations: individuals with a physical disability (43%), individuals with a developmental disability (45%), and older adults aged 65 and older (12%). Information on race and ethnicity was not collected for the purposes of this study.

**STUDY DESIGN**

A multivariate regression was conducted to estimate the relationship between community integration using the community integration index and global life satisfaction. Matched QoL surveys from a longitudinal panel of MFP program participants’ were analyzed. MFP program participants are interviewed three times: prior to leaving an institution (baseline), 12 months after leaving an institution (year-one follow-up) and 24 months after leaving an institution (year-two follow-up).

**PRINCIPAL FINDINGS**

The community integration index is the only variable included in this analysis that is a significant predictor of global life satisfaction across all three time points. Age and target population were significant predictors of global life satisfaction at baseline.

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**CONCLUSIONS AND IMPLICATIONS FOR POLICY AND PRACTICE**

Community Integration is a significant predictor in global life satisfaction for individuals transitioning out of nursing homes. It is important to ensure that opportunities exist for individuals to connect or reconnect with individuals and activities in their communities upon transition. Common barriers to community integration that can be addressed through policy and practice are transportation, lack of assistive technology, health issues, and a lack of awareness of opportunities for engagement such as volunteer activities and community events.

**RESEARCH FUNDER**

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**FOOTNOTES**
