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Leadership, innovation, collaboration
for state Aging and Disability agencies

Indiana Business Acumen Training: Data Collection
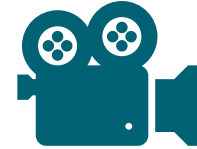
May 31, 2022

Quick Housekeeping

Everyone is muted

Use the "raise hand" button to speak

Chat it up!

We are recording

Closed captioning

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Agenda

- Introductions
- **Why** collect data?
- **What** kind of data is needed?
  - Research and information from Managed Care Entities (MCE)
- **How** can the data be used?
  - Stabilize your organization
  - Develop a value proposition
- Health Information Technology
  - Health Information Technology Grid
- Success stories

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Welcome & Introductions

Introductions

April Young,

- Senior Director of Business Acumen, ADvancing States

Camille Dobson,

- Deputy Executive Director, ADvancing States

Marisa Scala-Foley,

- Director, Aging and Disability Business Institute, USAging

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HCBS Business Acumen Center

The HCBS Business Acumen Center provides training, technical assistance and consulting to CBOs that want to cement their role in an evolving delivery system and the payers who want to maximize their reach by utilizing the organizations with the strongest social footprint in the field.

http://www.advancingstates.org/initiatives/hcbs-business-acumen-center

Aging and Disability Business Institute

To successfully build and strengthen partnerships between community-based organizations (CBOs) and the health care system so older adults and people with disabilities will have access to services and supports that will enable them to live with dignity and independence in their homes and communities as long as possible. The Business Institute supports aging and disability CBOs in effectively contracting with health care payers and providers through training, technical assistance, readiness tools, information gathering, and more.

www.aginganddisabilitybusinessinstitute.org

Why collect data?

Why collect data?

Data collection is the process of gathering and measuring information on targeted variables in an established, systematic fashion, which then enables one to answer relevant questions and evaluate outcomes

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Why collect data?

- Identify and understand what is going on in your business

- Monitor progress towards your goals

- Articulate your business case

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Why collect data?

- Outside of the business case:
  - Demonstrating value to the CBO's community, city or state
  - Understanding how your services impact clients
  - Tracking outcomes and progress on CBO (and funder's/payer's) goals
  - Measuring quality and performance

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Why collect data?

- MCEs will want to contract with CBOs that offer the most effective and efficient services.

  – Finishing that thought: CBOs contracting with MCEs will most likely have increased referrals

- What kind of data are you collecting to support your CBO's business case?

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What kind of data is needed?
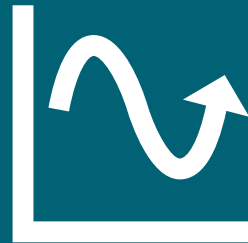
FSSA Quality Priorities – A Recap

- 3 Program Quality Goals

- Developing a Quality Management and Improvement Program

- MCE Quality Management and Improvement Committee

- MCE annual surveys of members and providers

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Prioritizing Data Collection – What should we collect?

- Why collect data?
- How will data impact your business?
- What kind of data will help you make business decisions?
- What are MCEs looking for?
- How can your CBO make the data work for your organization?

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Data & Managed Care Entities

- MCEs will get a lot of data from claims but not everything

- Potential data that your CBO could be asked for:
  - Time between service request date and service initiation
    - This is a key measure of network adequacy and access
  - Summary utilization data by member, region, etc
    - MCEs will be asked to submit some type of utilization data to FSSA

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Data & Managed Care Entities

- Potential data that your CBO could be asked for:
    - Staff training activities
        - Workforce development is key FSSA goal and will likely require MCEs to undertake their own efforts.
        - Provider data will be critical
    - Quality reporting data
        - Exact parameters will depend on performance measures imposed by the state and/or MCE internal quality monitoring metrics

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How can data be used?

How Can Data Be Used?

- Better management

- Quality improvement and problem solving

- Communication with staff and board members

- Value proposition to payers and providers

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Improve Business Management

- Use data to enhance your business
  - Finances
  - Human resource metrics
  - Operations
  - Strategy and decision making
- Clearly communicate to staff why data is collected and for what purpose

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Communicating about Your Data

Who	How
General public/potential clients	Websites, social media
The people you serve	Websites, social media
Board members	Board meetings
Contractors	Check-in meetings, Level setting expectations
Potential partners (MCEs!)	Informational interviews, one-on-one meetings
State agencies	Public meetings
Provider associations	Task force workgroups, meetings/opportunities to share best practices
Staff members	Team meetings; staff reviews; recruiting materials

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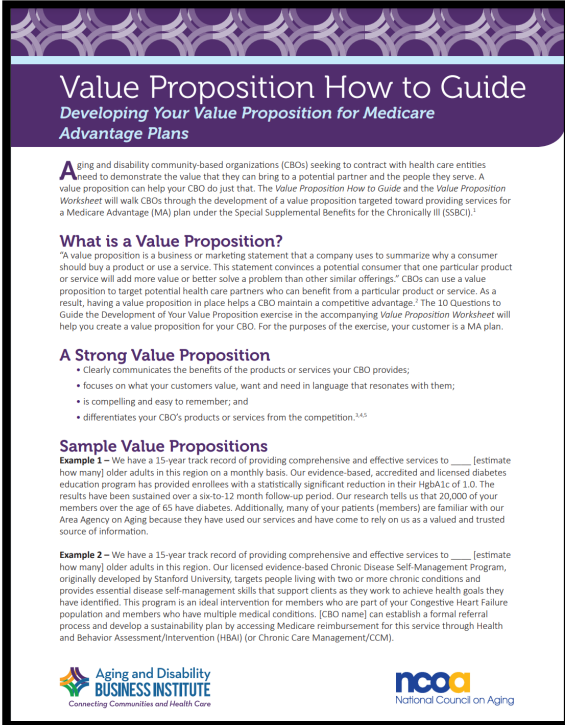
Value Propositions

- How your service
  - improves an outcome,
  - quantifies the value,
  - solves a payer's problem, and
  - differentiates your organization from others.

- Articulate your CBO's value in business terms

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Value Propositions Resource

- From the Aging and Disability Business Institute
- Walks through how to develop a value proposition and provides examples
- 10 question worksheet also included
- Written with Medicare Advantage plans in mind but works for other payers as well

https://www.aginganddisabilitybusinessinstitute.org/adbi-resource/value-proposition-how-to-guide-and-worksheet/

Articulate Your Business Case

- Use BOTH qualitative and quantitative data
- "We help X with Y by doing Z."
- Customize your business case depending on which partner or potential payer you are communicating with

Resource: https://www.aginganddisabilitybusinessinstitute.org/assessment-tools/building-the-business-case/

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Using Data to Demonstrate Outcomes

Table 3: Use Data to Demonstrate Outcomes

Potential Payer Needs or Outcomes	CBO Service	Impact of the Service to the Payer	What is the Evidence?	Where is the Data?
Consumer satisfaction				
Consumer engagement				
Community integration				
Employment placements				
Improved length of employment				
Improved health				
Reduced hospitalizations or nursing facility stays				
Reduced emergency room visits				
Reduced health and safety incidents				
Cost savings				
Improved ability to keep				

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Health Information Technology

Health Information Technology Grid

- Health information technology systems

- Research!
  - Find a system to fit your CBO

- Research & Decision Framework

Source: Aging and Disability Business Institute https://www.aginganddisabilitybusinessinstitute.org/adbi-resource/health-information-technology-grid/

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Health Information Technology Grid

	A	B	C	D	E	F	G	H	I
1									
2	Software / Vendor / Product	Description	Has modules for DSMP, CDSMP, MNT, CCM, TCM	Willing to build modules not yet built	Able to capture billing codes for sending to 3rd party biller	Able to integrate to local RHIO/HIE and with other platforms	Cloud-based which allows entire network to utilize	No or low cost entry	Unlimited users
3									
4									
5									
6									
7									
8									
9									

Source: Aging and Disability Business Institute https://www.aginganddisabilitybusinessinstitute.org/adbi-resource/health-information-technology-grid/

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HIT Grid in use

Platform: / Attributes:	A	B	C	D	E	F
Demo Yes/ No If Yes, Date(s)	Y: 11/2019	Y: several times 2018, 2019	Y: 8/2019	9/2018	11/2019	No
Has modules for Programs we need	X	✓	Yes: 2 programs NO 4 programs	X	Yes: 1 programs NO 5 programs	Under Development
Willing to build modules not yet built; cost?	✓	✓	✓	High Cost	High Cost	✓
Able to capture billing codes for sending to 3rd party biller.	✓	✓	They do the billing.	X	They do the billing.	Under Development
Able to integrate to local RHIO and with other platforms	✓ Additional Cost	✓	✓	✓	✓	✓
Cloud-based	✓	✓	✓	✓	✓	Unsure
Low Entry Cost; Fee Structure	✓	✓	✓	X	X	Unsure
Training	✓	✓	✓	✓	✓	Unsure
Unlimited users	✓	✓	✓	✓	✓	✓
Reimbursed based on a percentage after billing.	negotiable	✓	✓	X	X	Unsure
Has meaningful use, HITECH, HIPAA and all certifications	✓	✓	✓	✓	✓	✓
Aggregated Outcome Report Generation	✓	✓	✓	Unsure	X	✓
User Friendly	✓	✓	Fair- formatted for physician use	X	X	Unsure
Communication	Fair- Improving	Poor	Poor	Good	Fair	Good
Comments Plus Minus Unsure	Currently building platforms for various programs; Time	After 12+ mo. of talks & no contract we moved on 2/2019	Used 4 mo. Found new system due to poor communication.	In use by network AAA partners; High costs, not ready to bill nor user friendly	Required to use through contract; high cost to use outside of contract; non-user friendly	Spoke w them 8/2019; still building system

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SUCCESS!
Data Collection Success Stories

Aging & Disability Business Institute Partnership Profile

- CICOA provides care management as part of a multi-disciplinary team; utilizing real-time data through the IN Health Information Exchange (IHIE)

- Uses medical information for non-medical interventions

- CICOA reduced fall rates for individuals at high risk from 25% to 5%

Partnership Profile
How CICOA Aging & In-Home Solutions Uses Data to Activate Services Faster and Deliver Value in Health Care Partnerships

CICOA Aging & In-Home Solutions (CICOA), an Indiana-based Area Agency on Aging, is turning a unique data connection with the Indiana Health Information Exchange into an opportunity to partner with health care entities to provide faster interventions and deliver personalized health-related services to high-risk individuals. For example, when CICOA quickly intervenes in the care of individuals who are at risk for falls, an area of great interest to their health care partners, they experience a reduction in fall rate to 5 percent from 25 percent. The result: happier, healthier community members and satisfied health care partners.

We have all heard the phrase 'knowledge is power.' But, how do we build knowledge in the first place? Knowledge is developed from a blend of available data and the wisdom of experience. CICOA Aging & In-Home Solutions (CICOA), a nonprofit Area Agency on Aging (AAA) focused on providing older adults, people with disabilities, and family caregivers with information, advocacy and support services, such as care management, nutrition services, and transportation, understands this well. CICOA has purposefully sought out and made use of data systems and sources to build greater internal knowledge about the effectiveness of non-medical interventions on health and health care outcomes. CICOA then turns this knowledge into greater power to partner with health care providers who are in the pursuit of better health outcomes for their clients.

connection with these individuals, often before they

Source: Partnership Profile **from the Aging and Disability Business Institute** https://2yjszzobx7o304u1b45x6bsd-wpengine.netdna-ssl.com/wp-content/uploads/2019/01/Partnership-Profile-CICOA-508.pdf

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HCBS Business Acumen Center Spotlight

- MO identified the need for CBOs to communicate the value of the outcomes of their services to MCEs
- Began collecting data that was already required by other sources
- Recognized that data was not really what they needed
- Participated in visioning exercises to break down larger goals into smaller projects
- Put actionable plans in place

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Business Acumen Learning Collaborative Spotlight

Missouri: Use Data to Drive Decisions

Business Acumen Learning Collaborative Spotlight

Missouri: Use Data to Drive Decisions

In 2016, the Administration for Community Living (ACL) sought to expand the readiness of community-based aging and disability organizations (CBO) for contracting with integrated care entities, and prepare state and community-based aging and disability organizations to be active stakeholders and partners in the development and implementation of integrated care systems. In response to this request and with funding from ACL, ADvancing States in partnership with national aging and disability organizations[1] convened the Business Acumen Learning Collaborative throughout 2017 – 2019 as one element in this important work.

After a national search, five state teams (Maryland, Missouri, New Hampshire, New York and Texas) were selected to represent the Business Acumen Learning Collaborative. Each state team included representatives from state agencies, community-based organizations (CBO[2]) serving persons with disabilities, integrated healthcare entities and other organizations. Throughout their time together, each team worked together to develop and implement business-related strategies to state-specific challenges to integrating long term services and supports (LTSS) and healthcare services, with the ultimate goal to develop the business acumen of disability-CBOs in their state. In addition to their state-specific work and cross-state sharing, the Business Acumen Learning Collaborative informed the development of the HCBS Business Acumen Toolkit which can be found at: http://www.hcbsbusinessacumen.org/toolkit.html.

Key Lessons Learned:

1. Address work piece by piece.
2. Use available data.
3. Start where you can.

Background:

This spotlight highlights the efforts of Missouri's team to enable community-based organizations (CBOs) to be competitive in a managed care environment.

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Take Action!

Next Steps

- Determine which measures your organization is best suited to support.

- Evaluate how your organization currently captures information on these measures and where you might need to build your capacity.

- Determine the data collection systems you (and your partners) need to have in place to effectively capture and use the information.

- Identify who needs to be involved and how they will be educated on the capture and use of the data.

- Implement and test the data collection system.

- Adjust as needed.

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Questions & Discussion

Next Session:

3:00 -4:00 pm eastern
Tuesday, June 14, 2022

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