

ACL Track: The Juggling Act – State Roles in Managing Opportunities & Risks with Value-Based Care

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Panel Introductions

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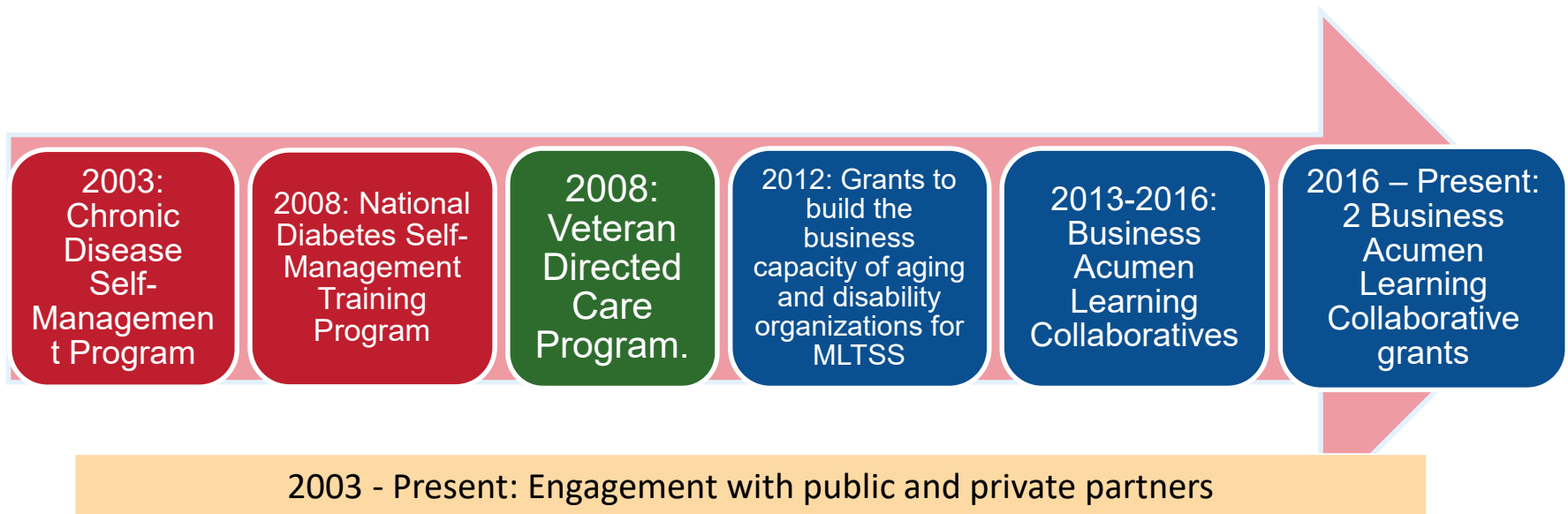
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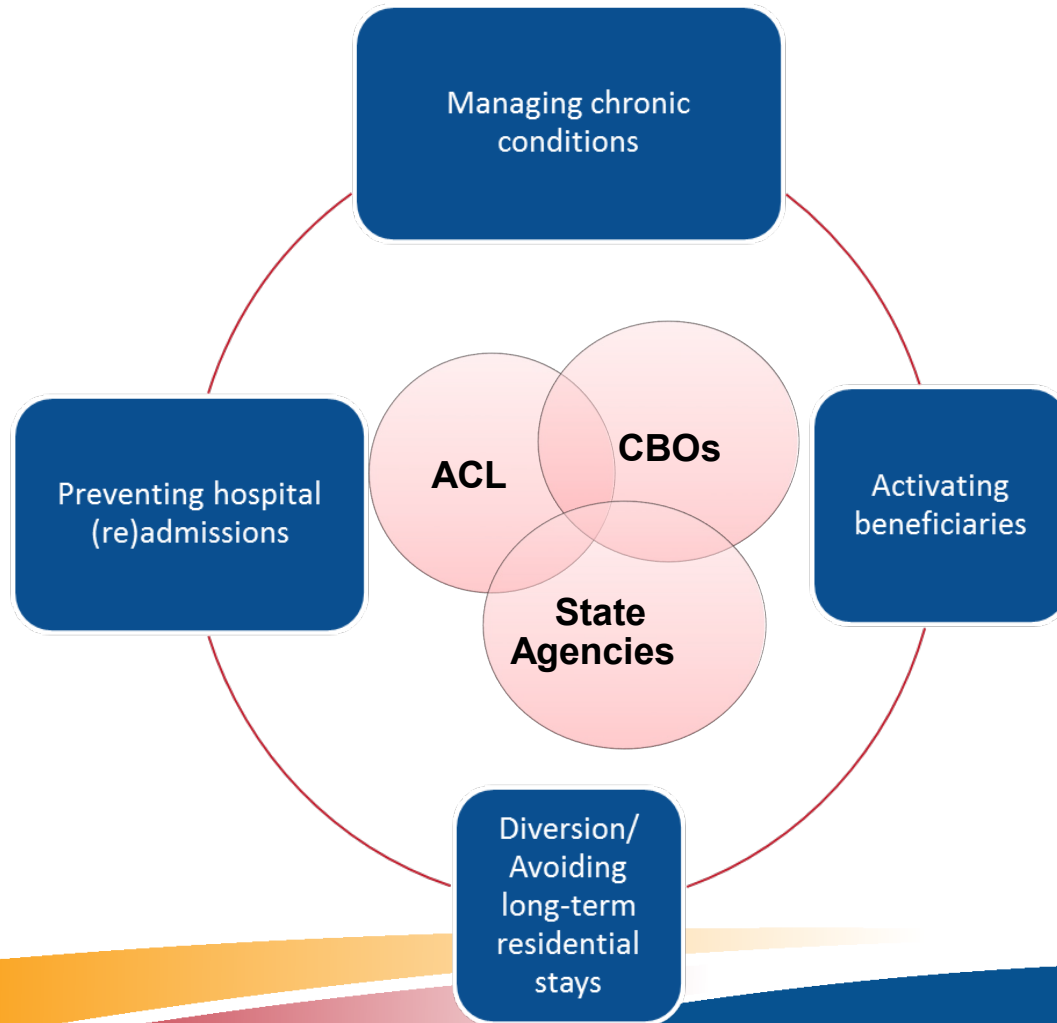
Agenda

- Background on Business Acumen
- Roles of State Entities
- Conflict/Risk Management of SHIPs
- Use of Technology
- Network Development

Strengthening the Aging and Disability Network “Business Acumen”



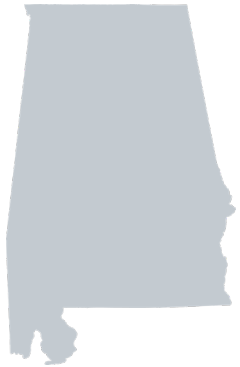
The Critical Role of the Aging and Disability Network in Delivery System Transformation





Question:

What are various roles states can play in CBO business acumen development?



Quick Facts Alabama

State Population: 4.8 Million

Average Monthly Eligible: 1.02 Million

Percentage of population on Medicaid 21%

Annual Budget: \$6.5B

2017 Data

All Human Services Agencies are separate and Cabinet level:

Alabama Medicaid Agency

Alabama Department of Senior Services-operates 3 HCBS Waivers

Alabama Department of Rehabilitation Services-operates 1 HCBS Waiver

Alabama Department of Mental Health-operates 2 HCBS Waivers

Alabama Department of Human Resources

Alabama Department of Public Health

6 HCBS Waiver Programs 1915c

4-Nursing Facility Level of Care-10,800 slots

2-ICF Level of Care-7,000 Slots

1915j-3,000 Participants

1915b PCCME-23,000 Participants (LTSS)

13 Area Agencies on Aging provide Case Management for 3 HCBS Waivers

All 13 have received NCQA Accreditation for LTSS Case Management

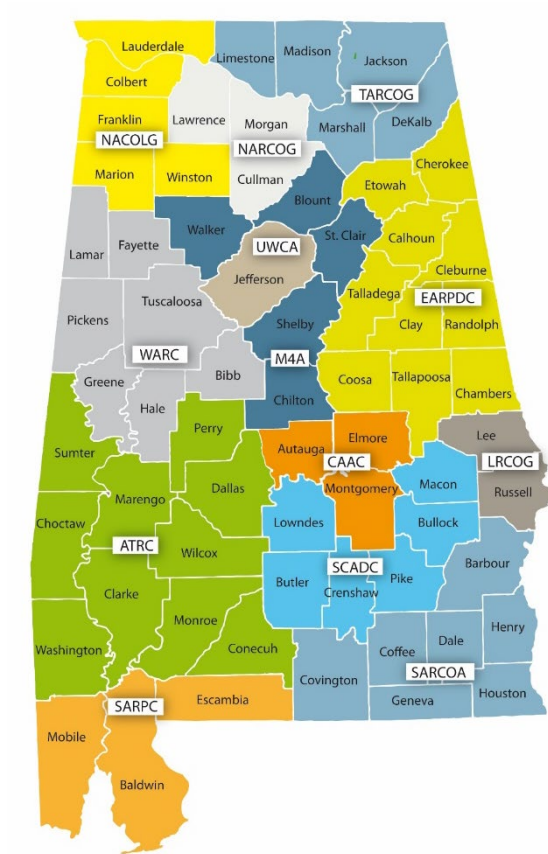
All HCBS Case Managers, ADRC Staff, Some DSP staff are certified in Person Centered Thinking (over 500 people)

6 Statewide Certified PCT Trainers

13 AAAs

Alike but different

- 3 Independents
- 9 Planning Commissions
- 1 United Way
- Staffs: 25-80
- Waiver Slots: 261 - 1,205
- Case Mgt Costs vary 100%



Why NCQA Accreditation?

Technology

Data requirements
New Assessments
New Care Plan
Predictive Modeling
Risk Stratification
Medication Review

Case Management

Person-Centered Care Planning
Care Transitions
Expanded Assessments

Staffing

ICN requires "Care team led by nurse and social worker"
Licensed Social Workers
RN's

Documentation

Everything must be documented.
Policies and Procedures, Processes, etc

Survey

Periodic surveys will become part of the new norm

Statewide LTSS Case Management Accreditation

Advantages to AAA Network

- Consistency in network
- Shared responsibilities
- Shared costs
- Greater knowledge
- Larger resource pool
- Health Plans recognize NCQA

Questions?

Ginger Wettingfeld

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EXPLORING CONFLICTS OF INTEREST



SHIP Statute states:


- Grantees must “provide assurances that staff members (including volunteer staff members) of the health insurance information, counseling, and assistance program have no conflict of interest in providing the counseling”




VRPM Policy 3.35 Conflict of Interest (Required)

No person who has a conflict of interest in connection with the work they will do at the SMP/SHIP, whether personal, philosophical, or financial may serve as a volunteer. Volunteers do not promote any personal or business interest while undertaking their SMP/SHIP assignment.

One example of persons with an inherent conflict of interest is anyone who receives compensation for enrolling beneficiaries in a specific insurance plan or plans.



What this means

- A conflict of interest is an interest that prevents, or could prevent, a person (or organization) from performing some task objectively.
 - SMP/SHIP team members must be neutral, objective, unbiased.
 - Conflicts can be actual or simply the appearance of conflict.
 - A conflict might exist for the organization, team member, a family member, or a business interest.
- 



Question:

How can states support conflict/risk management when managing SHIPs with a network of AAAs that are contracting with health plans?

Connecticut



“CHOICES” is CT’s State Health Insurance Program (SHIP)

- CT is town based, not county based
- Contracts with all 5 Area Agencies on Aging (AAA) for CHOICES
- All 5 AAAs collaborate with 5 Centers for Independent Living (CIL) & 1 additional agency to form Aging and Disability Resource Centers (ADRC)
- ADRC staff are SHIP & AIRS certified & PCT NWD trained
- ADRC is under the umbrella of CHOICES (CT Statute)

Centers for Independent Living (CIL)

- 5 in CT
- 5 core services for persons with disabilities:
 - Information & referral
 - Independent Living Skills Training
 - Peer Counseling
 - Individual & Systems Advocacy
 - Facilitate transitions out of institutions or youth to secondary education
- <http://ctsilc.org/independent-living-centers/>





CENTERS FOR INDEPENDENT LIVING MAKE COMMUNITY LIVING POSSIBLE

WHAT IS COMMUNITY LIVING?

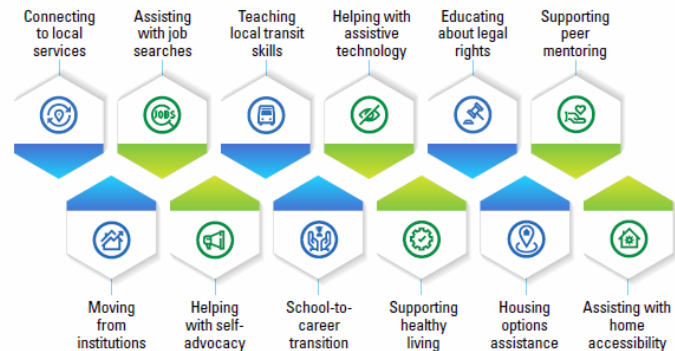
People with disabilities and older adults have the same opportunities as everyone else to:

- Choose for themselves where to live
- Earn a living
- Lead the lives they want
- Make decisions about their lives

WHY COMMUNITY LIVING?

-  People prefer it
-  It usually costs less
-  It's a legal right
-  Everyone benefits when everyone can contribute

HOW DO INDEPENDENT LIVING PROGRAMS HELP?



CT ADRC

- Receive different funding sources to support ADRC NWD work: Medicaid, Older American Act funds, MIPPA, Grants
- Statewide ADRC Coordinator: previous SHIP Director, SHIP Certified, PCT Certified trainer and past assister for the Health Insurance Exchange
- All 5 AAAs administer the Veterans Directed Care (VDC) Program – a direct contractual relationship with the VA
- 5 AAAs are piloting a new expanded business relationship between the VA CT Healthcare System and the AAAs with funding from ACL's NWD Business Case grant

Examples

- Develop firewalls within agencies
 - One side of the house focus on Federal grant funded programs (OAA, SHIP, SMP, etc.), and the other side focus on Plan contract work.
 - Staff would not work on both funding streams
- Develop consortiums
 - Plan contracts would be held by third party
 - All referrals and reimbursements are managed by the this entity
 - CBOs maintain a level of distance from Plan's
 - Can be set up so that the CBO doesn't know the payment source of each referral

Workgroup Opportunity

If you're interested in helping us gather and synthesize best practices to support policy development

-or-

You're willing to share details about your state's experience with safeguarding against this type of conflict, email:

Marissa Whitehouse

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USE OF TECHNOLOGY FOR STREAMLINED ACCESS

Importance of Streamlined Access

- Streamlined access includes ***all the processes and requirements*** associated with conducting formal assessments and/or determining an individual's eligibility that are required by state administered programs that provide LTSS to NWD System populations.
- Individuals are assessed once via a common or standardized data collection method that captures a core set of individual level data relevant for determining the range of necessary LTSS. Therefore, ***individuals are only asked to tell their story once.***

Improving Technology to Increase Business Acumen

- Investments in technology supports how collaborative strategic planning is being done to integrate aging and disability services into health care payment and delivery in the state
- Ideally - one connected system that supports the management and delivery of LTSS
- ACL is collaborating with CMS and ONC to develop guidance and resources on financing Medicaid data systems including how this applies to the aging and disability network CBOs



Question:

How are states using technology to streamline access to services?

VIRGINIA
No Wrong Door
ACCESS. OPTIONS. ANSWERS.

Statewide

Streamlined Access

Resource Database

A public-private partnership with **VirginiaNavigator** links individuals and families with 27,000+ programs, services, and resources.

Outside of Medicaid Agency

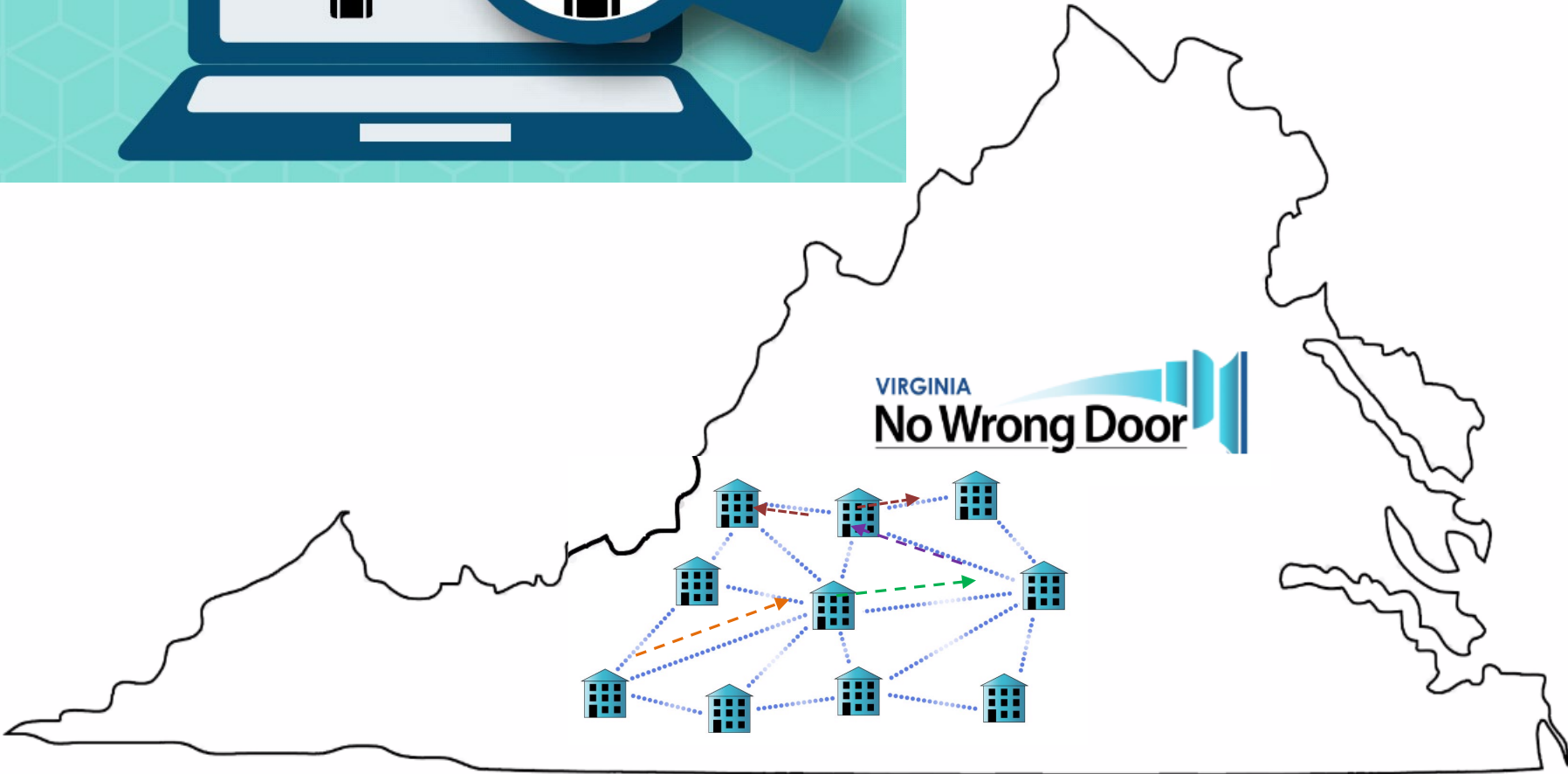
Virginia Department for Aging and Rehabilitative Services acts as the statewide convener and lead of Virginia No Wrong Door.

Person-Centered Standards

Statewide options counseling standards establish an approach to services that respects the right of individuals to control and make choices about their own lives.

Regional Advisory Groups

Each regional No Wrong Door network is governed by local residents and stakeholders.



Communities



No Wrong Door is a combination of technology and processes to serve more people, more effectively.

Senior Connections,
The Capital Area Agency on Aging

VIRGINIA
No Wrong Door
ACCESS. OPTIONS. ANSWERS.

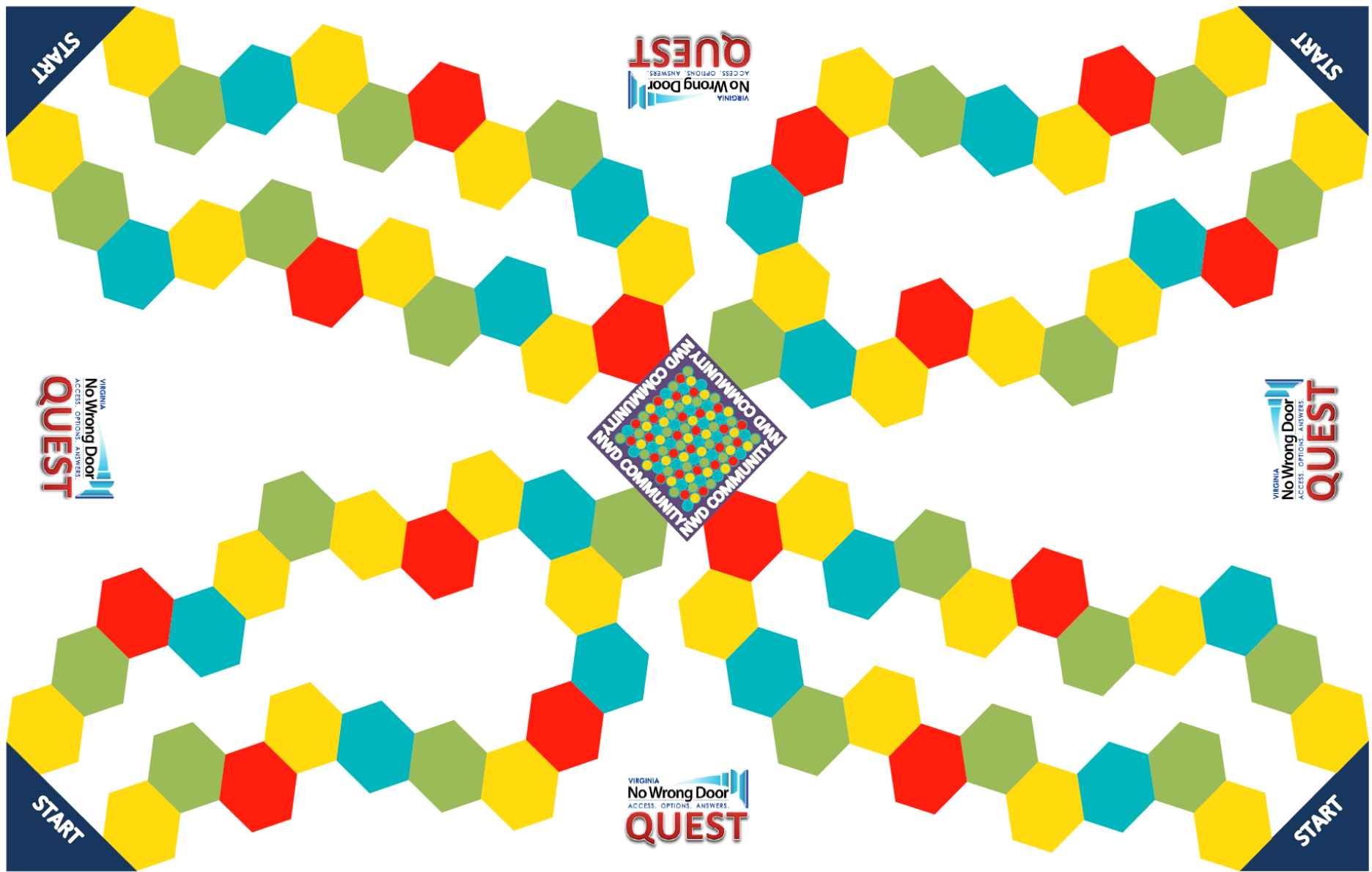


Developing the
Community-Based
Organization
Network

- ✓ § 51.5-135. of the Code of Virginia designates area agencies on aging the local leads
- ✓ 220 certified NWD partner organizations across the state
- ✓ NWD website promotes best practices
- ✓ Commitment to seeding local innovation
- ✓ Statewide workforce capacity to provide person-centered services
- ✓ Integration of evidence into practice: social isolation, SDoH, ageism, trauma-informed



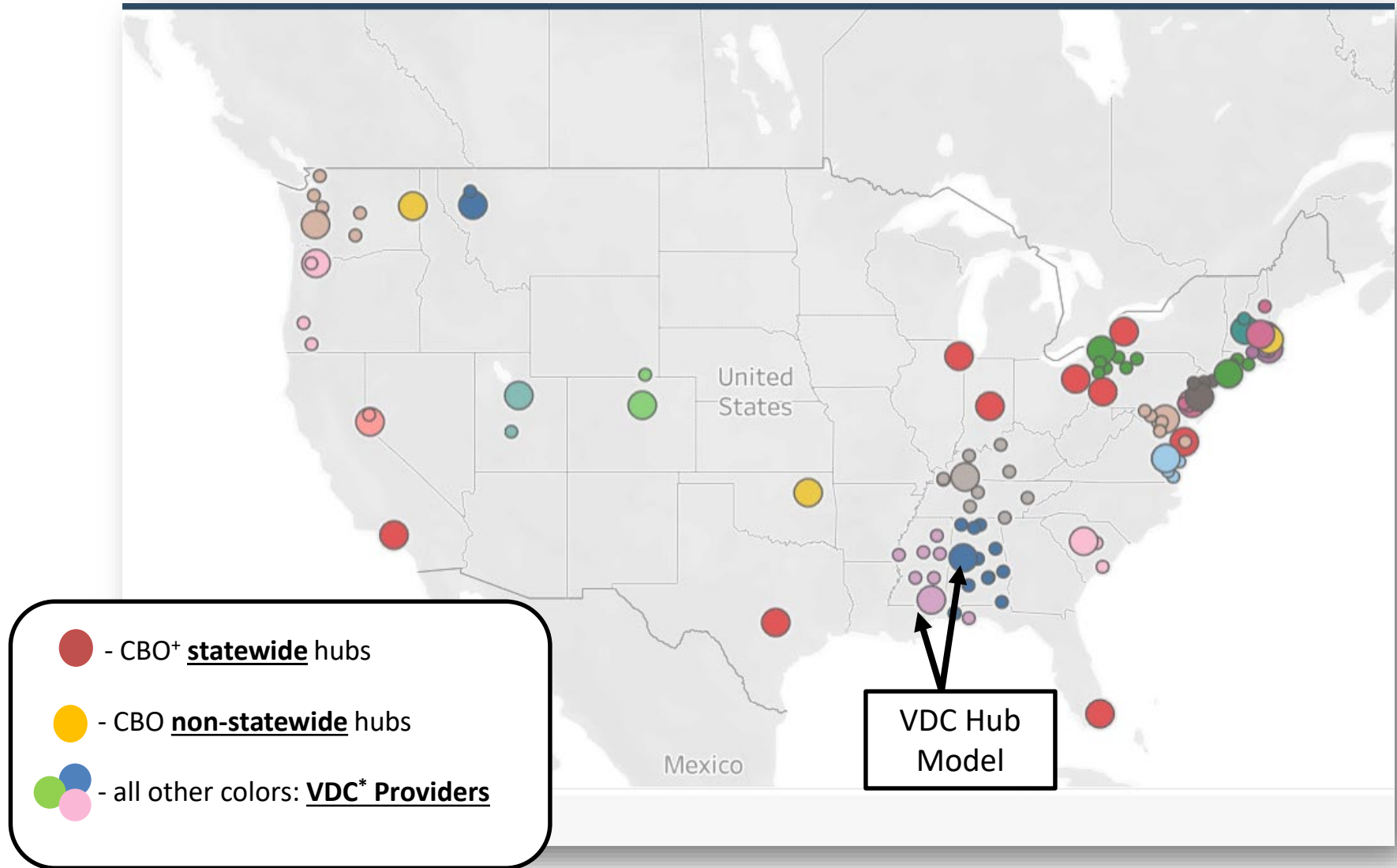




NETWORK DEVELOPMENT



National Network Development



+ CBO = Community Based Organization

* VDC = Veteran Directed Care Program



Question:

How can states and CBOs develop networks with the integration of care for more centrally focused contracts and partnerships with health care providers and payers?

What we've learned

- Aging and disability organizations add value to health care providers and payers in delivery system reform -- they represent critical eyes & ears in the home, and supports that can keep people living in the community
- These partnerships involve culture change – both for aging and disability organizations and health care providers/payers
 - Language
 - Technology
 - Buy-in at all levels

Resources

<https://www.acl.gov/node/571>

<https://www.aginganddisabilitybusinessinstitute.org>

<http://www.hcbsbusinessacumen.org>

<https://www.shiptacenter.org/>

Questions?