

Road Trippin' Through the Hoosier State and the Importance of Stakeholder Engagement



**2023 Home and Community-Based Services Conference** 

# Agenda



#### Overview

Stakeholder Activities



#### State perspective

• Stakeholder strategies and feedback



#### Consumer engagement

• Lessons learned





## Introductions

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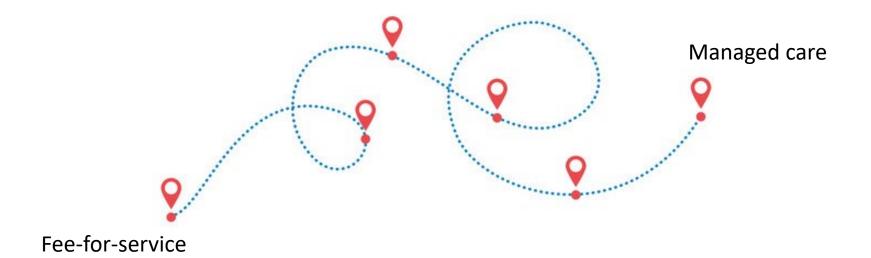
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# Stakeholder Engagement in Indiana: An Overview

# Changes in Indiana





# Stakeholder Engagement

#### **Key considerations**



**Building trust** 



Mitigating roadblocks



**Timeframes** 



Accountability for all



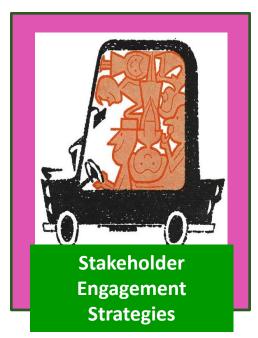
#### Stakeholder Activities - Overview

Virtual	
2021	Listening sessions with consumers and caregivers
2021	Older Hoosiers and Caregivers Advisory Group
2022 (summer)	Business acumen sessions for HCBS providers
2022 (fall/winter)	MLTSS provider education sessions
2023	Roundtables: HCBS providers and MCEs

#### Stakeholder Activities - Overview

In-Person	
2022	<ul> <li>Community conversations - Consumer outreach</li> <li>North</li> <li>South</li> <li>Indianapolis</li> </ul>
2023	Roundtables: HCBS Provider and MCEs  • North  • South  • Indianapolis
2023	Roundtables: Area Agency on Aging, Independent Case Management agencies and MCEs  North  South Indianapolis







# **Indiana Experience**



#### Why Reform Indiana's LTSS System?

From 2010 to 2030 the proportion of Hoosiers over 65 will grow from 13% to 20%. Indiana's disjointed system must be reformed to meet growing demand and to ensure Choice, drive Quality and manage Cost.

#### Choice: Hoosiers want to age at home



- 75% of people over 50 prefer to age in their own home but only 45% of Hoosiers who qualify for Medicaid are aging at home\*
- The risk of contracting COVID and impact of potential isolation drives an even increased desire to avoid institutional settings

#### **Cost: Developing long-term sustainability**



- Indiana has about 2% of the U.S. population, but over 3% of nursing facilities
- LTSS members are 4% of Medicaid enrollment, yet 28% of spend only ~ 19% of LTSS spend goes to home and community-based services (HCBS)
- For next ten years, population projections show 28% increase in Hoosiers age 65+ and 45% increase in Hoosiers age 75+

#### **Quality: Hoosiers deserve the best care**



- AARP's LTSS Scorecard ranked Indiana 44th in the nation
- LTSS is uncoordinated and lacks cultural competency
- Payment for LTSS services is poorly linked to quality measures and not linked to outcomes



<sup>\*</sup>Accurate as of January 2020

#### LTSS Reform & Indiana Pathways for Aging

Overall Objective: 75% of new LTSS members will live and receive services in a home and community-based setting



- Faster eligibility
- Move to Indiana Pathways for Aging
- Pay for outcomes, not transactions
- Integrate LTSS data systems
- Support the growth, retention and training of the HCBS direct service workforce
- Create Home Health Roadmap
- Integrate HCBS waivers



### Pathways for Aging Goals

	Person-Centered Services and Supports
1	Develop service plans and deliver services in a manner that is person-centered, participant-driven, holistic, involves caregivers, and addresses SDOH.
	Ensuring Smooth Transitions
2	Ensure continuity of care and seamless experiences for participants as they transition into the MLTSS program or among providers, settings, or coverage types.
3	Access to Services (Participant Choice)
	Assure timely access to appropriate services and supports to enable participants to live in their setting of choice and promote their well-being and quality of life.



#### Stakeholder Engagement Overview



#### Stakeholder Engagement Overview

#### Who are our "stakeholders"?

Aging Hoosiers receiving Medicaid, their families and caregivers; organizations representing aging individuals and individuals with disabilities; providers; trade organizations; and other interested parties

- 2+ years of surveying and community conversations
- Indiana Pathways for Aging Scope of Work
  - Years' worth of feedback from stakeholders
  - Model contract language from other states
  - National subject matter expertise
  - Federally mandated requirements
- Stakeholders reviewed excerpts from the Pathways SoW; care management manual; MCE reporting manual
- Ongoing updates on readiness review

600+

Meetings with stakeholders

92%

of stakeholder considerations fully or partially incorporated into Pathways Scope of Work

10

Peer-state programs reviewed in detail





#### Purpose of Pathways Codesign

- Stakeholder engagement continues to be an essential part of the larger LTSS reform effort in Indiana with over 600 meetings held to date
- The Pathways codesign workgroup is the first stakeholder group FSSA convened at the end of 2020 when the reform project began
- The purpose of gathering this group of stakeholders was to inform the design, development, and implementation of the Indiana Pathways for Aging program.
   There have been four phases of the engagement.
- Our engagement promotes buy-in and support for the reform effort and ensures organizations are prepared to have a successful transition to Pathways
- Codesign Workgroup Goals:
  - Share information and keep key parties up-to-date
  - Receive feedback, answer questions, and dispel confusion or myths
  - Build support for the program
  - Assist stakeholders in navigating change



# Additional Project Component – Supporting Our Providers & Area Agencies on Aging Through Transition

#### 2022 Engagement

FSSA and ADvancing States hosted
 30 business acumen trainings for HCBS providers

#### 2023 Engagement

- FSSA and ADvancing States hosted roundtable sessions across Indiana to facilitate networking opportunities between HCBS providers and Pathways MCEs and AAA/ICMs and Pathways MCEs
- 20 HCBS provider roundtables with Pathways MCEs
- 5 AAA/ICM roundtables with Pathways MCEs

More information can be found at www.advancingstates.org/inform-indiana





#### Engaging Providers through Social Media

FSSA created the Facebook page "Indiana"

FSSA is here for the deep work. When the

HCBS Provider Community" as a brave space to ensure providers are seen, heard and valued.





#### TOP 10 Engagement Lessons Learned

- 1. Building trust with providers before big systems changes.
- 2. Wherever older adults are, go there.
- 3. Don't wait until the last minute to advertise about engagement events.
- 4. Survey providers about event times before deciding.
- 5. Give members and providers information to take with them.
- 6. Identify each county's trusted partners to socialize engagement activities.
- 7. Bring incentives!
- 8. Start with the end in mind.
- 9. Engagement is the first MLTSS plan.
- 10. Showing transparency





# Reaching the Hard to Reach

Pictured: FSSA and ADvancing States meeting with consumers at PACE Fort Wayne



#### **Lessons Learned**

- Lead time is key
- Engage trusted community partners
- Meet folks where they are
- Use plain language



# **Trusted Community Partners**

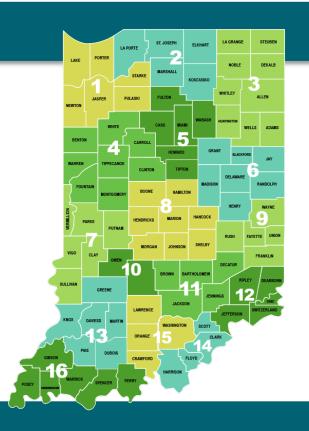
- Community Health Workers (CHWs)
- Community-based Organizations (CBOs)
- Churches/Faith-based Organizations (FBOs)
- AAAs and Providers



#### **Meeting People Where They Are**

#### Examples

- Housing: Indianapolis Medicaid-dense senior complexes
- Trusted Providers: PACE Northeast Indiana
- CHWs: La Casa de Amistad South Bend
- Radio, social media





**Q & A** 





# Thank you!





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