BUILDING THE NEXT GENERATION HCBS DELIVERY SYSTEM: BRAINSTORMING ABOUT FUTURE DIRECTIONS
Let’s Try Something Different

- Disregard (temporarily) bureaucratic, political constraints
- Imagine an HCBS delivery network that supports everyone (including private pay)
- Present a draft model delivery network
  - Model is theoretical
  - Not tied to any state or other funder
  - Meant to stimulate a conversation about a better system
Speakers

■ Presenter: Steven Lutzky, Ph.D. – HCBS Strategies

■ Discussants:
  – Damon Terzaghi – Senior Director of LTSS, NASUAD
  – Kari Benson - Director / Executive Director, Minnesota Department of Human Services, Aging and Adult Services Division / Minnesota Board on Aging
  – Bea Rector - Director, Home and Community Services Division, Washington State Department of Social and Health Services
Steven Lutzky - Who am I

- Consultant – HCBS Strategies & The Lewin Group
  - *Conducted onsite review of HCBS operations in more than \( \frac{1}{2} \) the states*
  - *Business Process Perspective*

- CMS Division Director – Real Choice Systems Change, Money Follows the Person, Aging and Disability Resource Centers

- Oversaw Medicaid funded LTSS for DC
What is Business Process Analysis

- A business process, aka a workflow, is a collection of linked tasks which result in an action, such as the delivery of a service or product to a client.

- Business process modeling graphically represents business processes or workflows to better understand what is working and what can be improved.
Why a Business Process Analysis Approach is Important

- Identify and address the dead ends!
- Identify all the processes that contribute to a problem
- Model impact of potential solutions on other processes
Origins of the Theoretical HCBS Delivery Network

“All happy families are alike; each unhappy family is unhappy in its own way” – Tolstoy, Anna Karenina

- Mission of improving systems for supporting people with disabilities
- Recognition that there were common elements necessary to have an optimal system
- Years of discussions with state officials and others building systems
Objectives – Increase Control and Reduce Costs

Allow Participants to Receive Support to Avoid Going into an Institution

Allow Participants to Spend Less By:
1. Only Paying for Workers When They Need Them
2. Sharing Workers
3. Hiring Self-Employed Workers

Help Participants:
- Be More Independent
- Achieve Personal Goals
- Have More Control Over Their Lives
- Feel Valued

Reduce Avoidable Hospitalizations and Emergency Room Visits

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Major Components of the Network

- Matching Participants and Workers
- Processes for Understanding Participants’ Needs and Preferences
- Technology to Enhance Health, Safety, & Well-Being

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Possible Person-Flow Approach: Support Coach

Mary’s mom, Jane, needs help

Telephone screen to obtain outline of needs and next step

Jane and Mary select a Support Coach

Support Coach conducts a tailored assessment of both Jane and Mary’s strengths, challenges, and preferences

Connection to workers

Installation, training on technology

Jane receives regular schedule help

Support Coach checks in, answers questions, problem solves

Technology, Mary, Jane, or Support Coach may call for additional help through app
Possible Person-Flow Approach: Primarily App Assisted

Mary’s mom, Jane, needs help
Mary and Jane conduct self-assessment
Self-assessment guides Jane and Mary in developing a Support Plan
Online Connection to workers
Installation, training on technology

Jane receives regular schedule help
Uses app to for questions, problem solving. Can obtain assistance from Support Coach as necessary
Technology, Mary, Jane, or may call for additional help through app
Understanding Participants’ Needs and Preferences – Existing efforts that can be used as building blocks

- Efforts to standardize assessment tools/items nationally
  - *interRAI*
  - *CMS sponsored Functional Assessment Standardized Items (FASI)*

- Comprehensive Person-Centered Assessment Process
  - *MnCHOICES*
  - *Colorado*

- Emerging Electronic Verification Systems (EVV) that collect additional information about potential issues
  - *Skin breakdown, urinary tract infections, etc.*
Processes for Understanding Participants’ Needs and Preferences

**Tiered Assessment Process**
1. Minimal
2. Basic
3. Comprehensive

**Domains**
- Goals
- Preferences
- Functioning
- Health
- Behavior
- Environment

**Assessment Options**
- Self-Assessment
- Social Worker
- Nurse
- Nurse/Social Worker

**Mechanism to collect information about provision of services from participant/representative**

**Have default tool, but ability to use tools required by certain payers (e.g., states, MCOs)**

**Mechanism to collect information from workers about participant (e.g., changes in health, etc.)**
Matching Participants and Workers

**Participants’ Challenges**
- Expense
- Need for a range of workers (Nurse, PCA, handyman, etc.)
- Help for only an hour or 2
- Help on short notice
- Complying with requirements of being an employer

**Workers’ Challenges**
- Finding enough work
- Low pay
- Burnout from only providing personal care
Matching Workers & Participants – Possible Models from the Gig Economy

https://www.enzymehealth.com/
High-Level Requirements for Matching Workers and Participants

**Types of Workers**
- Agency
- Self-Employed Workers
- Volunteers

**Tiers of Workers**
- Physicians
- Nurses
- CNAs
- Non-Credentialed personal care workers
- Chore workers/homemaker (cleaning)
- Handyman/Construction

Participants can have multiple workers and workers can support multiple participants (including supporting multiple people in close proximity at the same time).

Schedule workers in advance and locate workers on an ad hoc basis.

Brick and Mortar Facilities may be used to provide emergency back-up or a Day Program.

Fiscal Management Services for workers who are considered household employees.
The Role of Technology in LTSS Continues to Evolve

YOUR USER REQUIREMENTS INCLUDE FOUR HUNDRED FEATURES.

DO YOU REALIZE THAT NO HUMAN WOULD BE ABLE TO USE A PRODUCT WITH THAT LEVEL OF COMPLEXITY?

GOOD POINT. I’D BETTER ADD “EASY TO USE” TO THE LIST.

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# High-Level Design Requirements for Technology to Support Health, Safety, and Well-Being

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<thead>
<tr>
<th>Remote Monitoring</th>
<th>Medication Compliance</th>
<th>Assistive Technology</th>
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<td>- Technology</td>
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<td>- Communication Devices</td>
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<td>- Personal Emergency Response Systems</td>
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<td>- Motorized Wheel Chairs</td>
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<td>- Sensors</td>
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<td>- Wearable technology</td>
<td>- Videocalls with family, friends, other older adults and people with disabilities and volunteers</td>
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<td>- Scales</td>
<td>- Artificial Intelligence</td>
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<td>- Cameras (monitoring balance and gate, etc.)</td>
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Potential Revenue Sources

- Surcharges and Membership Fees on Transaction Matching Workers and Participants
- Contracts with MCOs, States and Others to Reduce Costs
- FFS Charges for Assessment, Support Plan Development, and Ongoing Care Management
- Monetization of Data
- Sales of Devices and Technology Maintenance Fees (e.g., remote monitoring fee)
LET’S BRAINSTORM
Discussants

- Damon Terzaghi – Senior Director of LTSS, NASUAD
- Kari Benson - Director / Executive Director, Minnesota Department of Human Services, Aging and Adult Services Division / Minnesota Board on Aging
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Discussion Topics

- What is useful in the draft model?
- What could be improved or enhanced?
- Potential extensions of the model
- Other Suggestions