BUSINESS ACUMEN
WHAT WE KNOW AND WHERE WE’RE GOING

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Business Acumen for Disability Organizations Grant

- 3 years
  - October 1, 2016 – September 30, 2019

- Funded by the Administration for Community Living

- Goal/Vision:
  - Build the capacity of disability community organizations to contract with integrated care and other health sector entities
  - Improve the ability of disability networks to act as active stakeholders in the development and implementation of integrated systems within their state
Capacity-Building: Build the capacity of community-based disability organizations (CBOs) to contract with integrated care and other health sector entities,

Foster Collaborative Relationships: Connect payers, providers and states to establish well-functioning integrated care systems,

Stakeholder Engagement: Improve the ability of disability networks to act as active stakeholders in the development and implementation of integrated systems within their state.
The Disability Network

If you’ve seen one...

you’ve seen one.

- Disability community organizations vary in:
  - Structure
  - Focus
  - Knowledge of MLTSS and business capacity
Growth of MLTSS

States using MLTSS doubled between 2004 and 2012, growing from 8 to 16 states.

Since FFY 2012, managed care expenditures have grown 182% (to 18% of all LTSS expenditures).

As of July 2017, 22 states had MLTSS programs with 5 states considering an MLTSS program.

Sources: CMS Whitepaper – The Growth of Managed Long-Term Services and Supports Programs: A 2012 Update, July 2012; Truven Health Analytics, June 2017; GAO Report – Medicaid Managed Care: Improved Oversight Needed of Payment Rates for Long-Term Services and Supports, January 2017; NASUAD 2017
Current MLTSS program (regional **)
Duals demonstration program only
MLTSS in active development
MLTSS under consideration

Source: NASUAD survey; CMS data
Local organizations that offer community living services and supports to advance the health, well-being, independence, and community participation of older adults and people with disabilities and may include:

- Aging and Disability Resource Centers
- Behavioral health organizations,
- Centers for Independent Living,
- Developmental disability organizations,
- Protection and Advocacy Agencies,
- University Centers for Excellence in Developmental Disabilities Education, Research & Service
- Faith-based organizations,
- Area Agencies on Aging,
- Aging services organizations,
- Native American tribal organizations,
- Nutrition program providers, and
- Other local service providers for persons with disabilities and/or older adults
CBOs in MLTSS

- CBOs have formed the backbone of the LTSS system for the last thirty years and are well-suited to provide key support services
- Understanding and seeking a balanced payor mix
- Opportunity to reinvent and reset expectations

Partnering with States and Payers:
- Contract for services
- Demonstrate value and quality
- Offer choice and self-determination
- Provide outreach and education
What is Business Acumen?

Keenness and quickness in dealing with and understanding a business situation in a manner that is likely to lead to a good outcome.
Why Business Acumen Matters
Disability Business Acumen Grant: Business Acumen for Integrated Care

Effective Leadership

Adequate Delivery Infrastructure

Business Planning & Financial Sustainability

Partnerships

Centralized, Coordinated Logistical Processes

Quality Assurance

Managing Chronic Conditions

Activating Beneficiaries

Avoiding Long-Term Residential Stays

Preventing Hospital (Re)Admission
Business Acumen Grant Partners

Funded by:

[Logos of various organizations]
Disability Network Business Acumen Grant: Key Activities

- Develop baseline knowledge of current community-based organizations
- Provide broad-based training and technical assistance for disability networks to build their capacity
- Convene and provide targeted technical assistance utilizing a learning collaborative model
- Engage integrated care organizations, managed care plans, and other health care entities regarding the needs of consumers and the roles of CBOs
Accomplishments to Date

- Launched the Disability Network Business Acumen Resource Center website
- Conducted an environmental scan and needs assessment survey to determine the business acumen needs of disability community-based organizations across the country
- Established a monthly webinar series (5 webinars archived)
- Designing a toolkit to guide community-based organizations increase their business acumen
- As of Sunday, commenced the 2017 Learning Collaborative!
Environmental Scan and Needs Assessment Survey – Building a Strong Foundation

Community Based Organizations, Managed Care Organizations and States

What’s important? Where can we help?
Purpose: To determine the business acumen needs of disability community-based organizations across the country

Gathered feedback from Disability CBOs, State Agencies, and Integrated Care Entities

Asked about...
- CBO Familiarity with Integrated Care Terminology
- Experience with Integrated Care
- Organization’s Current Capabilities
Types of CBOs who responded (primarily non-profit)
Where People are Served
Are all CBOs the same?
Where People are Served

Aging Services Organizations, ADRC’s and AAA’s

Centers for Independent Living

Developmental Disability Organizations
Impact of MLTSS Transition

“Floor rates have limited the number of referrals we can accept”

“Harder to get services authorized”

“Reduction of the multiple services we were approved to provide in the waiver”

“We are on the verge of closing. Have already shut two services”

“Cautious to grow because of the unknown”
Impact of MLTSS Transition

Aging Services Organizations

Centers for Independent Living

Developmental Disability Organizations
Contracting Efforts

Aging Services Organizations

Centers for Independent Living

Developmental Disability Organizations
Contracting Efforts

Aging Services Organizations

50.00% Didn’t have any data to substantiate value
50.00% Perception that we didn’t add value to partner
57.10% Other, please describe:
14.30% No interest on the part of these providers
28.60% Perception that we didn’t add value to partner

Centers for Independent Living

Developmental Disability Organizations

24
What MLTSS health plans tell us ...

- They seek partnerships with CBOs to...
  - Offer a local approach that fosters community integration and quality of life
  - Enable people with disabilities to remain connected to their community
  - Provide high quality that promotes health and social outcomes that can be demonstrated through data
To engage in these partnerships with MCOs, they need support...

- To articulate their value proposition
- To know who to connect with
- How to market their services
- How to price their services
- How to meet contract expectations
Ways in which health plans and CBOs can work together

<table>
<thead>
<tr>
<th>Partner</th>
<th>Activities</th>
<th>Goal Achieved</th>
</tr>
</thead>
<tbody>
<tr>
<td>Centers for Independent Living</td>
<td>Peer support, Home Modifications</td>
<td>Transitions, Keeping consumers in the home</td>
</tr>
<tr>
<td>Community Rehabilitation Providers, local businesses</td>
<td>Vocational programming</td>
<td>Quality of life, Integrated in Community, Community Living</td>
</tr>
<tr>
<td>Area Agencies on Aging</td>
<td>Falls Prevention and Caregiver Support Programs</td>
<td>Reducing hospitalizations and caregiver burnout</td>
</tr>
<tr>
<td>Home Care</td>
<td>Enhanced communication processes — early identification of needs/issues</td>
<td>Decreased hospitalization, increased PCP visits</td>
</tr>
<tr>
<td>Technology</td>
<td>Remote monitoring (e.g. motion, contact, bed, and toilet sensors) and analytic services</td>
<td>Reducing avoidable, costly transitions in care</td>
</tr>
<tr>
<td>Personal Emergency Response Systems</td>
<td>24/7 communication for emergent and non-emergent needs</td>
<td>Promotes safety and independence, Keeping members in their home</td>
</tr>
</tbody>
</table>
But...

If health plans want to work with CBOs and CBOs want to work with health plans – why doesn’t it always work?
What skills and expertise are most important when modernizing the delivery of care and services:

<table>
<thead>
<tr>
<th>Community Based Organizations</th>
<th>Managed Care Organizations</th>
<th>States</th>
</tr>
</thead>
<tbody>
<tr>
<td>Analytical, Data-Driven Decision-Making</td>
<td>Consumer Engagement</td>
<td>Communication Skills</td>
</tr>
<tr>
<td>Consumer Satisfaction</td>
<td>Consumer Satisfaction</td>
<td>Articulating your Value</td>
</tr>
<tr>
<td>Consumer Engagement</td>
<td>Innovative Thinking</td>
<td>Building Essential Infrastructure Support</td>
</tr>
<tr>
<td>Understanding Customer Needs</td>
<td>Managing Risk in a Managed Care Environment</td>
<td>Consumer Engagement</td>
</tr>
<tr>
<td>Articulating your Value</td>
<td>Measures (e.g. outcomes, consumer satisfaction)</td>
<td>Consumer Satisfaction</td>
</tr>
</tbody>
</table>
Opportunities for Skill Development/Enhancement in CBOs

What skills and expertise are most important and how strong are you in those skills:

<table>
<thead>
<tr>
<th>Skill</th>
<th>Importance 5 - Very Important (%)</th>
<th>Demonstrated Capabilities 5 - Very Strong (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Analytical, Data-Driven Decision-Making</td>
<td>87</td>
<td>10.8</td>
</tr>
<tr>
<td>Consumer Satisfaction</td>
<td>82.1</td>
<td>52.2</td>
</tr>
<tr>
<td>Consumer Engagement</td>
<td>73.2</td>
<td>42.5</td>
</tr>
<tr>
<td>Understanding Customer Needs</td>
<td>72.9</td>
<td>48.1</td>
</tr>
<tr>
<td>Articulating your Value</td>
<td>65.3</td>
<td>18.8</td>
</tr>
</tbody>
</table>
Opportunities for Skill Development/Enhancement in CBOs

What skills and expertise are community based organizations the least strong in:

<table>
<thead>
<tr>
<th>Skill Area</th>
<th>Importance 5 - Very Important (%)</th>
<th>Demonstrated Capabilities 5 - Very Strong (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Evaluating Competition</td>
<td>24.1</td>
<td>4.9</td>
</tr>
<tr>
<td>Effective Sales Techniques</td>
<td>29.4</td>
<td>5.9</td>
</tr>
<tr>
<td>Developing Information Technology Systems</td>
<td>45.5</td>
<td>7.6</td>
</tr>
<tr>
<td>Understanding and Articulating Return on Investment</td>
<td>38.8</td>
<td>7.6</td>
</tr>
<tr>
<td>Pricing and Rate Determination</td>
<td>46.6</td>
<td>8.3</td>
</tr>
</tbody>
</table>
Perception of Strength vs. Importance

Where is there the greatest spread between what is important, yet community based organizations report the need for increased capability:

<table>
<thead>
<tr>
<th>Category</th>
<th>Importance 5 - Very Important (%)</th>
<th>Demonstrated Capabilities 5 - Very Strong (%)</th>
<th>Standard Deviation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Analytical, Data-Driven Decision-Making</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Articulating your Value</td>
<td>65.3</td>
<td>18.8</td>
<td>32.88</td>
</tr>
<tr>
<td>Building Essential Infrastructure Support</td>
<td>56.1</td>
<td>13</td>
<td>30.48</td>
</tr>
<tr>
<td>Developing Quality and Performance Management Systems</td>
<td>51.1</td>
<td>8.6</td>
<td>30.05</td>
</tr>
<tr>
<td>Making the Business Case for your Services</td>
<td>51.1</td>
<td>10.9</td>
<td>28.43</td>
</tr>
</tbody>
</table>
## Perception of Strength vs. Importance: By Type of CBO

<table>
<thead>
<tr>
<th>Category</th>
<th>Aging Organizations</th>
<th>Centers for Independent Living</th>
<th>Developmental Disability Organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Articulating your Value</td>
<td></td>
<td>3</td>
<td>1</td>
</tr>
<tr>
<td>Using Data to Generate Reports</td>
<td>3</td>
<td></td>
<td>3</td>
</tr>
<tr>
<td>Cost Savings</td>
<td>1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Understanding and Articulating Return on Investment</td>
<td>2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Making the Business Case for your Services</td>
<td></td>
<td>4</td>
<td></td>
</tr>
<tr>
<td>Relationship Building and Maintenance</td>
<td></td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>Building Essential Infrastructure Support</td>
<td></td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>Building Enthusiasm for Change</td>
<td></td>
<td>5</td>
<td></td>
</tr>
<tr>
<td>Building Effective Teams</td>
<td></td>
<td></td>
<td>2</td>
</tr>
<tr>
<td>Communication Skills</td>
<td></td>
<td>4</td>
<td></td>
</tr>
<tr>
<td>Measures (e.g. outcomes, consumer satisfaction)</td>
<td></td>
<td>5</td>
<td></td>
</tr>
<tr>
<td>Consumer Satisfaction</td>
<td></td>
<td></td>
<td>4</td>
</tr>
<tr>
<td>Analytical, Data-Driven Decision-Making</td>
<td></td>
<td>5</td>
<td></td>
</tr>
</tbody>
</table>
Listen, Learn and Disseminate

Environmental Scan and Needs Assessment

- Resources
- Learning Collaborative
- Technical Assistance
Disability Network Business Acumen Resource Center website

  - Learning Collaborative
  - Webinars
  - Disability Network Business Acumen Environmental Scan and Needs Assessment Survey
  - Partner Organizations
Monthly Webinar Series

- 4th Wednesday of every month from 12:30P – 1:30P eastern

- Topics to date:
  - Business Acumen 101: Modernizing Your Community Based Business in a Changing Environment
  - Managed Care – Understanding the Changing Environment
  - Perspectives and Language – Business, Health/Medical, LTSS, Disabilities/Aging
  - Are they buying what you're selling - An inside look at what health plans need from community based organizations
  - From Mission to Fruition: Developing your relationships with payers
Business Acumen Toolkit

- Stakeholder Engagement
- Developing and Sustaining Relationships and Partnerships
- Negotiating and Contracting
- Pricing Services
- Articulating Your Business Case
- Successful Organizational and Culture Change While Maintaining Your Mission
Helping states, CBOs, and plans to:

- Listen, learn, and engage on creating successful pathways to integrated care/support;
- Leverage their respective experience and expertise;
- Implement best practices, evidenced based practices and outcome based practices for shared goals; and
- Remain focused on supporting people with disabilities to have quality lives.
Preparing CBOs for Success

- **Think big**: Exploring options beyond the current constraints and regulations

- Find out what is important to the MCO (health plan, ACO etc..) Ask questions and listen, while keeping their goals in mind.

- Define their goal and detail plans for reaching them, including scalability.

- Use data to tell their story. What do you bring to the table that the MCO wants or needs, or that can demonstrate improved quality of life and efficient use of resources.
Disability Network Business Acumen Learning Collaborative

- 5 States: MD, MO, NH, NY, TX
- Key Themes / Alignment in Identified Themes:
  - Identify strengths, gaps, and opportunities to increase CBO capacity to implement sustainable business practices to work closely with integrated health entities to meet the growing needs of the people they serve, including those with significant medical and/or behavioral health needs.
  - Promoting disability provider organizations to be successful in building & implementing integrated care systems with an eye to both building specialized “home grown” disability MCOs and to meeting MCO needs; ensuring these emerging organizations can engage as partners with MCOs and other integrated care organizations in meeting needs of those with disabilities.
Transitions: Challenges and Opportunities

- **Challenges:**
  - Conclusion of key federal initiatives
  - Need to continue nursing facility outreach and diversion
  - Focus on data-driven outcomes

- **Opportunities:**
  - Environmental changes
  - Strengths of CBOs
Transitions: What can be done about it?

Action:
- Educate CBOs about the states overall healthcare structure
- Have CBOs evaluate their service structures
  - SWOT analysis
    - Integrate CBO’s experience in consumer controlled and directed practices into managed care
- Improve CBO internal business processes
- Improve CBO communication and negotiating skills with MCO
  - Learn how to price and package relocation services
I/DD system: Challenges and Opportunities

■ Challenges:
  ▶ Changes in how the programs are to be delivered
  ▶ Increased demand and request for services and dollars.
     ■ Increased complexity of those served.
     ■ Lack of workforce capacity: rates, aging workforce.
  ▶ Inefficient or outdated systems
     ■ Need for effective billing and payment mechanisms
     ■ Need for utilization review, outcome based measures

■ Opportunities:
  ▶ Use of $ to develop prioritized services
  ▶ Need for integration among medical, behavioral, whole person
I/DD Systems: What can be done about it?

- Building relationships with integrated health care entities
  - Focus on high users of medical and/or behavioral health services
  - Increase ability to contract with integrated care and MCOs

- Structuring and building community-based networks.

- Strategic business planning
  - Performance based and value based contracting and payment process
  - Consider and manage culture change

- Develop systems and processes
  - Utilization Review Process
  - Data Analytics
To accomplish these aims, the Learning Collaborative will focus on building awareness and capabilities around:

- Understanding the overall healthcare structure
- Articulating Value
- Innovation
- Pricing and various fee structures
- Performance-based and value-based contracting
- Contracting and negotiating
- Real-time, uniform Utilization Review Process
- Information technology to assist with data analytics capacity.
- Promoting evidence based and leading practices (i.e. community, integrated employment; nursing facility transitions)
Dissemination
The Future...

- Collect and disseminate promising practices from learning collaborative
- Continue to provide content via webinars
- Respond to CBO, State or health plan specific requests for technical assistance
- Disseminate the Business Acumen Toolkit
- Continue to evaluate needs in the field
Opportunities to Get Involved

- Contribute to the Business Acumen Resource Center
- Participate in ongoing feedback and dissemination
  - Webinars
  - Conference presentations
- Provide Technical Assistance
  - Short-term
  - Peer-to-Peer exchanges
  - Learning Collaborative
Thank You!

For more information, please visit: www.nasuad.org
E-mail: businessacumen@nasuad.org
Or Call: 202.898.2583