

December 20, 2017: Please stand by for realtime captions. >> All right. Good afternoon everyone. Thank you for joining today's webinar execute your plan, developing relationships with potential payers and community partners. I am Eric Anderson senior director at the National Association of States United for Aging and Disabilities otherwise known as NASUAD. This grant is made possible by the Administration for Community Living.

Shortly after today's session, you'll find the PowerPoint and recording of this webinar along with archives of all the facility network Business Acumen Center webinars at [Indiscernible]. There will be time for Q&A at the end of the presentation. Please answer your questions in the comment box on the lower right-hand corner of your screen. Over the last two months, we described how to position organization for success. This effort begins with having a clear vision for your organization and work followed by the collection of business intelligence through the completion of environmental scan and SWOT analysis. This information along with input from [Indiscernible] and other stakeholders what you will have used to develop your strategic plan. For community-based organizations serving people with disabilities, you may find there are a number of things you identify as priorities in your strategic plan. You may find that you need to develop data collection systems that you can better utilize data to drive decisions. You may need to develop a way to better articulate your value or make your business case to potential payers and providers. You may need to develop a quality and performance management system that you can effectively demonstrate the quality and efficiency of your program.

All these things and others are strategies designed to lead your organization to financial and programmatic sustainability. A strategic plan is a roadmap of sorts. The main road is clear and relatively static. You need to have a vision, you need to have a plan and you need to execute. These crazy chutes and ladders image shows that there are 100 steps you can take if you stick solely to the boxes on the board. However, there are times in reality where you will see a bridge or a ladder that gets you to your goal much quicker than you expected or you may findings take a detour or a slide in order to revisit an activity. You may need to collect additional information. You may need to analyze data, to reevaluate a strategy for example to accomplish a certain objective. The course may not be the same for all organizations but the objective is that all CBOs want to have his financial and programmatic sustainability , particularly in a changing environment.

So if in the pursuit of financial and programmatic sustainability, the first step is to prepare or to gather information. The second step is to plan or to create a strategy. The third step is to execute that plan. As I mentioned, there are examples with specific areas that community-based organizations might need to pay specific attention to during the of limitation of their strategic plan. That includes analytical driven data decision-making, articulating values, building essential infrastructure support, building essential infrastructure support, developing quality -- these are some examples that are drawn from the [Indiscernible] survey that many of you participated in earlier this year. Needs in which organizations feel they can improve

and. -- In. Today's speaker is Rita Wiersma CEO of community involvement programs in Minneapolis Minnesota. Rita will talk to us about her experience and provide tips for developing relationships with payers and community partners. Rita comes to us with a wealth of experience running programs for people intellectual and develop -- develop mental disabilities. Has effectively negotiated contracts with multiple managed-care organizations, modernize their services by creating programs that help to transition people from group homes into their own homes and apartments by forging new relationships, adapting to a changing environment and staying true to the foundational [Indiscernible] values of the company she is representing -- representatives she has helped.

Good morning everybody. This is Rita Wiersma . As Erica said, I am the CEO of community involvement programs. CIP provide services in Minnesota to about 2700 people annually in multiple ways. Whether it is through employment or housing or residential services, home health or case management, these services are working in a changing environment. We all know that the world is changing today. Gone are the days that the community organization such as ourselves who provide service are funded strictly by our local county people which we have had great relationships with in the past.

First some moved to their contract to the state level and it was difficult for us to always understand where people in the large buildings in the big city were coming from. Then we added funders like insurance companies that have a new set of rules and regulations. We added HMOs or managed-care organizations plus people are choosing their own services. These are through private pay or consumer juice dollars, all wonderful ways to have choice in the services that you want to get, you want to have. Many of our contact changed and so did their titles. Relationships that you and I have had for years had changed or are gone and you are left to seek out new people in new places with new roles and the specific outcomes for you as a provider.

We did good work or we do good work is no longer enough to demonstrate why we should be paid to do the work that we do and word of mouth no longer brings the same referrals that it did in the past. Data matters in lots of different ways, and we have not necessarily been great at understanding what to collect or how to interpret that data and then how to use that as proving our case is in the work that we do. Have you ever been asked to provide data on something that makes no sense to the service that you are doing or wonder why they chose the data they are requesting? And now we have a worker shortage and some of these new entities will be hiring some of your best people. This can be positive. You now will have a connection. If our world today as we see it and as we seek to provide service to some of the countries most vulnerable people, it is really changed to a retail market. People have choice and you are asked to do more with less. It is time to focus outward and develop partnerships and new relationships that will carry you into the future.

Becoming proactive is more important than ever. So getting to the door. I am just going to say, Erica, I cannot see the slides changing so I'm going to make some assumptions that it is all happening okay.

Yes.

Okay good. Getting in the door. What do you need to know about these new potential funders or partners in your community? It is really a time for you to do your homework. You need to investigate who or what do you know about any of these people or who or what does your board know? Talk to other organizations about their experiences. Look at the funders website including their provider network listings but remember to look at what they are telling the people that they are providing service for four dollars for. Read the contract that they have with the state or the County levels to provide the funding for the services that you provide. That is always very interesting and telling about why they are taking approaches that they are taking. Research their board and leadership team and search for common connectors or affiliations. Visit linked in to see who their connected to because you just might know somebody who knows someone.

Go to their open houses and their learning events every chance you get. Learn their language so you understand who you need to build this new relationship with. It might be contract management, provide relations department or someone else multiple people actually in their administration versus in the past many times our connections have been through a County case manager. It is a different world today. Be prepared to share information not only about the services you provide and remember like Erika said have an elevator speech ready. Be bright, short, and leave an impression. Always know that you need data to back up those services. Not only the specific data about cost and all things that are affiliated with that but the success stories, the -- that demonstrate that great work and you will find that the funder needs to share those success stories just as much as you do.

As I said, be sure to take time to learn about them. We are all charged with providing the best service to people while being good stewards of our tax dollars. They are no different. Ask what that means to them. How do they define their role and how do they achieve it? Understanding where they are coming from will help you build a stronger partnership and give you the tools to inform your board, your staff, and the people that you serve, where your commonalities are, and how you can all work together. One of my roles when I was in Wisconsin was to work with one of the largest social service agencies. [No audio]. I think we might be having some technical difficulties.

Rita, are you still there?

My apologies. Give us just one moment to reconnect the speaker.

Hello?

Yes, Rita?

Okay. I could hear you all the time on the phone but you could not hear me.

Okay. We lost you right when you were starting to tell your story about Wisconsin, I believe Eric

okay. That is a good place. One of my roles in Wisconsin was to work with a large organization. It was actually one of the largest social service organizations in Wisconsin providing services to people with disabilities. As managed-care was being rolled out, [Indiscernible] previously a state pilot project across a couple of counties. Wisconsin had made a commitment that now services for people who have developmental disabilities, physical disabilities [Indiscernible] was going to become an entitlement program. So what was interesting about Wisconsin is they actually decided to use a homegrown [Indiscernible] managed care organization versus a national model. So there were nine entities throughout the state that we needed to develop new relationships with. We spent a lot of hours on the road to meet with provide relations, their CEOs and their senior leaders and learn about the culture of their business. They were all very unique and how they are rated. All determined their rates differently. They had different philosophies in service. Their locations that they covered were all different and actually how they even felt about working with providers was all very unique. Note to were alike and I actually found that only 2232 them had even the same philosophy of service that we at the organization I worked for had. Which made it a little bit difficult and really we had to put a lot of effort into building those relationships.

They define service in different ways and have a different set of business rules than what we did. They worried about things like risk pools and a very complicated state contract. We worried about service and being paid for that service and the quality of service of the individual. They had little to no staff that had experienced serving people with developmental disabilities in a case management role. Actually, their first round of assessments when they came into working with individuals was for a social worker and an RN to come to the home. So these were [Indiscernible] person group homes. They sat down with the individual and asked a lot of questions. Staff were not allowed to be present in many individuals did not understand what they were asking or could not verbally respond to the questions. So it was clear that we have a lot of work to do to help them understand the disability world. Most listened and wanted to work together. Good or bad, they were the ones that hired our great staff.

A lot of our front-line managers went to them and received a higher wage working for them. We cannot compete with that. But the real positive piece that happened because of that was we had a connection. Most importantly, the people with disabilities now had a kiss -- case manager that understood their world and advocated for them in a very changing system. If there were one thing that I would truly want you to get out of today's presentation, it is really remembering the three elves. Listening, learning, and leading. If you use these tools he will certainly be successful in building a true partnership. I cannot repeat

enough how important these three elements are at every level and step of the way on your journey. It is not only that you are the leader of your organization, but your entire organization needs to be a part of the three Ls .

Each level and the involvement that they have with these different roles within the new funder will tell you something different about the funder. While in the beginning of this relationship, you will meet often with your funders, your funders [Indiscernible] provide relations, there will come a time in their business that they will want to move it into a maintenance mode. Be sure that you set up consistent ongoing meetings. Do not expect that that is all going to happen at the case manager level of the individuals and your [Indiscernible] staff but as the leader of your organization, make sure you are [Indiscernible -- low volume] time. Relationship change as everyone becomes more comfortable with these new entities and assumptions will begin to form. If you do not continue to nurture this relationship, it can take a turn and leave you wondering what in the world just happened?

I want to focus a couple of minutes on your role as a leader within this new system. It is not only important for you to learn about them but for you to support their learning about you as an organization, your mission to the people you serve and their roles, and your staff. Please please please new entities really need to know more about how your organization works and the people you serve. Another thing that many times we do not think about is if they are new to the area and they have been building a business, there might be cultural things within your community that are important for them to understand that might not be part of your consideration. Also when I talk cultural differences, here is one of the things that happened in Wisconsin that I thought really interesting. Years ago, when the institution closed and many of those institutions were in very small towns in rural Wisconsin, the area around that small town then would become very populated with people with disabilities as they moved into communities.

So that might have been 20 years ago that happened, but the reality is that people begin to move to a larger town in the area which is still only 60,000 people. In that area, there was the most opportunity for people to live and work but it became very heavily saturated with people with disabilities and that kind of service. So when the new MCO came to that area, the saturation actually affected their crewmember per month cost and their ability to decrease cost because of the high needs of people living in that area. One attribute that truly affected the success or lack of success for this MCO in the eyes of the state and what they were charged to do which was of course to manage cost. It resulted in pressure on providers to look at their cost and services to determine what if anything could be done to change expenditures.

You are going to have history, and it can be very helpful to a funder to understand these kinds of causes and effects that they might have not even considered if they came into the area. Sharing this important information helps build the partnership. Do not use it as a reason to change, to not change or to circle the wagon but it can be a useful

negotiation tool to give you time to look at opportunities and change for the future. Of course, again, I cannot say enough about success stories. Not only are they useful to you as an organization but they are to the funder as well. These are the stories that they are looking to share within their annual report.

I want to talk a little bit about open-mindedness and positivity. They are so imperative in building a new relationship. While today when you think about new funders and the navigability that change is going to - - inevitability that change is going to happen, as a leader, you have to set stage for your organization's success. The sky is not falling but change is going to happen and it can be difficult along the way. Get your full organization involved from the board to the direct care worker. You can all have a positive impact on this change. Go at this from a strategic initiative in a positive manner but incorporate stakeholders at all levels. Help people understand internally and externally. Be a role model for your community and the provider community in your area. I have experienced negativity that can change - - that changes can produce and the impact that they have. So whether it is a large change like full funding to managed care or a response to an [Indiscernible] for a new funder that your team just does not understand and they are struggling with because they think they now have unrealistic expectations from the funder or maybe a funder is setting up some kind of healthcare goal for people that you may be in limited contact with so you do not feel like you have control of that outcome and yet now you're funder has set that up as a payment incentive which you feel like you have little control to get. Do not get discouraged. Have conversation before you sign a contract.

Understand those expectations. Understand if your contract is an evergreen contract that just keeps going where you have the power to make changes within it and where you have the ability to help set outcomes and be at the discussion point versus being told what those outcomes might be. Then you can help your team work through these types of issues as they arise, and you can be a contributor member and partner with your new funder. Any kind of changes can instill a lot of fear around the people and [Indiscernible] family members. You will play a huge role as people try to work through these changes. That includes your employees also. An important role you play is providing open and honest support to people during these times of change. It is important to be reassuring and to be an advocate but be careful not to put the individuals you serve in the middle of a business issue.

If this is a new business with a new funder, people will be excited to receive your service and will be honest but you need to be honest about what they can expect and any limitations to the service. Again, I would say do not circle the wagon. There is a sad example here in Minnesota. Over the past couple of years, the state has worked really hard to try to work towards community employment. There have been a couple of shelters workshop companies that really rallied the people they served and their families to stop the change to competitive employment. They put out flyers, they held meetings that looked like rallies. They provided some questionable information to families based on their

interpretation of the change and to the communities that border line on [Indiscernible -- low volume].

It wasn't really clear what was trying to be said. So DHS at the state level was notified by families who felt that they were advocating for their loved ones to continue the service as it is today. Instead of advocating for change for being open to the service could be differently done. DHS promptly called the company and hoped perimeters around them requiring any mailing be put through DHS prior to being sent out to family members. Any meetings DHS would attend so that true information was shared. Sadly, the company -- the approach that the company chose encircling the wagon created this scare tactic for families which really did not help anyone. You do not want to become known as that company and earned that reputation.

That will be a lasting thing that is difficult to work through -- to walk away from once you have that reputation. So be careful where you involve and what you say to families. Be honest, but also be very open with them. Now is really the opportunity for you to create and innovate your services. Take time to look at each of the services that you provide. Do you still do it because you have always done it? Have you asked the people or the families you serve what are they interested in looking at for the future? Do they know if there are other options or other ways to get the services they need and yet be very community involved and independent as possible with the right support. Who will be the future customer for you and what will they one for services?

It is not -- it is no longer a culture of build it and they were come as -- in the residential setting. [Inaudible -- static] something big. [Indiscernible] around services that are successful in other parts of your state or in the country or even the world. Find champions who are willing to explore with you and develop a pilot program for just one single-family that is willing to explore the dream that they have for their individual or the individual themselves once to challenge their family to think differently. Such a wonderful story around this. It is calling [Indiscernible]. A call -- coal lives in a group home. At the point in time before managed-care came into the picture, Cole lived on one side of a duplex and two other individuals with 24 seven services lived on the other side.: Just -- coal would just tap into those other employees as he needed their support. He was a little more free living and had independence.

Then one managed-care came into the picture, the provider made the decision that they could not do services in a cost-effective manner for one or two people in a duplex. They created four-person homes. Cole moved into a four-person home. While it was not horrible for him, it really wasn't -- it made him more dependent on the system and it wasn't what he really wanted. So as the relationship with no MCO developed and the provider decided there were alternate ways to do service, they worked with the managed-care and the family to talk about what could Cole's life look like if he had his own apartment? What services would need to be there for him? What technology support did he have? How could the organization help Cole learn the skills that he needs to learn and then work their way out of the job -- they would never fully

work their way out of the job because Cole would always need some kind of support.

I have got to say what I really loved about the relationship between the managed care organization and its provider is the managed care organization realized they were going to pay more up front for Cole's the daily service in order to make this happen for him. And that in the end, Cole would have better outcome and the managed care organization would have lower rates once Cole had the opportunity to learn the skills and become more independent. So Cole had a lot of ups and downs during this time. It took a while to get a subsidized housing so that he could afford housing, and he started with staff almost 24 seven. That backed off, and then staff would only be there not overnight. Technology took overnight and he had overnight monitoring for a period of time along with some alarms in his apartment with the stove and refrigerator to see if they were left on or left open. Then some pressure things in the bathroom. So if he got up during the night and was in the bathroom for a long period of time, the overnight monitoring would recognize that he might be sick and maybe we should contact him.

What was wonderful about this is after a period of time, Cole did not even require the overnight monitoring because by watching his patterns over and over four months at a time, we could see that he was not getting up once he laid down unless he was sick. We looked at how could he connect with his family during the middle of the night or an on-call staff member if you got sick three tablet instead of requiring overnight monitoring full-time. He had some downfalls in the community. There were a couple of times where it was like oh my gosh, the team would get together and what in the world are we going to do about Cole? They would troubleshoot different ways to make things happen and ensure some safety for him.

The family actually were wonderful about what could they do to help Cole be successful. And the managed care organization actually extended the time of the higher rate than what they really wanted to. They could see life was changing for Cole and he did eventually get to a lower rate but we really had to work towards that. Cole is in his own apartment today with minimal technology. He goes to work in the community. He has really strong family involvement, and he has some natural supports within the apartment building that he is in now. He certainly is one of those awesome success stories. And Dana's story, she moved out of her family home like her brothers and sisters and wanted to move into an apartment. She was in her own apartment with two gentlemen who received a services. She could tap into their services and she needed them much the same as Cole did. Sadly this was a small rural community and the provider went out of business because they did not have enough business to keep going. So Dana's options were actually to move to Rochester so that was here in Minnesota. Her only option was to move to a group home.

She moved into a group home thinking it would be a temporary thing and six years later still was in the group home. That is -- she was not very happy. She and her family began to advocate for what were her other

options. The sad thing was there were not any other options. Sadly, a provider in the area started a transition apartment program where they rent an apartment. It is a three bedroom apartment. 14 gentlemen and one for women. Within that apartment, two ladies lived there and one bedroom is for staff. The goal there is they are going through assessment and training on life skills [Indiscernible] meal planning, their safety, getting to work on time, learning the public transportation system, how are they doing on their finances and managing their money? Those are all skills that people need to be successful. They are evaluated about every 30 days. This was a six-month program and during that time, they also look for what are other options besides a group home.

Dana is in her six month now and looking for an apartment. Hopefully, she will be able to find someone else to share a two bedroom because money is tight for everybody. So she is trying to begin that transition to her own apartment with the skills that she has learned. The other thing that this transition provides is the ability to really assess and make everyone comfortable with a good understanding based on data about what support does she need and when. She does not need somebody in the morning to get her up and out of the door to the bus. To get to her job. She is really good about getting up in the morning. After work, she has lots of stuff she wants to do and she needs help with her finances and she needs help in her meal planning and nursery shopping. Having staff there afterwards and to support her community involvement are really important. Again, she does not need overnight staff. To go from a 24 setting to this kind of setting is actually going to be more cost-effective in the long run. Again, it is a difference of \$30 a day for her to go through this transition program but it is temporary and in the end will lead to a better outcome. Two great examples about ways to create and innovate services differently.

I want to say this is a business. We have to all remember that there is a business side of this. We come to this work because our hearts are in it, but you are running a business and you need to be sustainable in the future. So partnering with your funder requires you to be really honest about your business. You need to understand your costs and be able to explain the why behind those costs. Do not be afraid to share the inside information of your organization and what barrier you are hitting with your funder. Talk about is it workforce? Is it wages? Do you get funded enough to develop a new service X are things going to cost more in the beginning and then change later down the road so that people see a benefit? Was sharing this information might feel like you have made yourself a little vulnerable, that is not a bad thing. If you are developing a strong partnership with the funder, this is actually going to strengthen your partnership. There is a really good reason for them to support you and help you work through those solutions.

I would bet that you are not the only one who has those kinds of barriers. One of the things that I saw and many of the managed care organizations as they heard more of these barriers and assemble that they are contracting with, they helped develop some support systems for providers to work together on addressing some of these barriers. Remember as much as you need them to pay for the services you want to

do, they need you also because they are required to have multiple options for services. So part of being able to share that information, though, it is really the open-minded and understand the work that you do and the service that you provide. So doing that internal assessment is really important. One of the things we have done and I really do recommend the [Indiscernible] process as one way to look at your service. You will find the information on the stars process called the first 90 days by Michael Watkins. At CIP, we have been taking Aegis service to this assessment to understand where they are in their lifecycle. So are they a start up, a turnaround, accelerated growth, realignment or are they sustaining themselves? Looking at all avenues of that service like what is your market share? What kind of financial information do you have X are you getting enough revenue to support the things you do? What future referrals look like? What kind of marketing efforts do we need to make because this is no retail market. You need to market yourself differently. What are the stressors on the organization as a whole? What are your employees factor? Can you pay enough to get really good workers? What are the pros and cons of continuing service? You really need to take time to look at your services and can you be everything to everyone? Or is there a niche that you meet?

One of the things we did here at CIP and this was a really really tough decision for us, we provided services called consumer directed community support, CDCS. Here in Minnesota what that means is basically you help families who have control of their budget so they get a budget from the state that says here are the dollars you can spend based on the needs of the individual and your family. They hire their employees. They choose their employees, they schedule their employees, they decide how much to pay them, they choose what products they might need, and the provider such as a CIP that pays those bills and then bills the state for those -- that work. We at CIP totally believe in consumer direction and really support people making service choices. The issue became that this is more of an administrative function than a service function. And CIP is about providing service to individuals. So we started to look at what is a good match for CIP?

In many ways, it met our mission but it was very draining on the system. We did not have a good strong technology in place we got a per member, per month fee to do a lot -- \$80 million worth of [Indiscernible] dollars that we pay for. So when an organization takes that kind of financial responsibility on, we really need to think about how does this impact the other parts of the organization? What kind of control do we have? So you cannot overlap hours or [Indiscernible] Medicaid fraud so what kind of system do we have in place to pay attention to that? What risk was there? -- Should we miss something like that? When families are in control of that and we are paying the bill and are required to Minnesota law to pay somebody who works those hours, then there is a lot of rug between the consumer direction and what we require by regulation to do.

In the end, we actually had to say we as an organization were not set up well for this kind of dismiss. We thought when we went into the work about 10 years ago it would be a really small book of dismiss and it

grew to 18 million really quick. So we had to find a way out of that work and to reposition the organization to deal with PR issues in the community and to say to our community that yes, we support consumer direction but there are other providers who do this work and many are set up better to do the -- it then we are. Those are the really really tough decisions that you as an organization need to think about as you are looking at getting into new business with new funders and with new community partners.

At the end of the day, we are just people who want to help people get things they need to live their greatest life. You can remain true with your organization's mission and vision while helping people build new and different services with this new funding partner. I think about the orphanage [Indiscernible] institution. At one point in time, they were the new way of services. And then came community living and people living in smaller settings. And that was the new wave. Now it is at a time where it is appropriate to plan for the future again. A future where community-based services are people making their own choices about the services they want and need in a holistic approach. A future where the funders are part of the focus on people looking for service, services that are based on people's hopes, dreams, and aspirations in life and a funding partner that will help achieve that along with the service partner.

So ask yourself a question as you lead your organization down this road. What do you want your organization to be remembered for? Is it circling the wagon and focusing on the past? Or is it helping shape the future of what services could be? Being a partner and a proactive approach in positivity. Being a support organization that as you learn together, you make new systems for people you serve and their families. In the end, it is really about relationship and the effort that you make along with your funding partner to change the world and to the organization for the future.

I really just want to recommend a couple learnings that as of I have -- as I have gone through my years of looking at this new development and some ways to build your organization prepare your self for some changes, and that is the good to great by Jim Collins and then good to great and the social sector by Jim Collins which really speaks to the nonprofit world. I think both of those will help you think about your organization and the right people in the right places and are you focused on what you need to be focused on and looking at all different attributes of your organization as you are partnering with new partners out there. And the other one is called traction by Gino Wickman. I do not know if anybody is familiar with the EOS system which is the entrepreneurial [Indiscernible] system which really is a system much like we see with Stephen [Indiscernible] about how do you have your organization [Indiscernible] and moving all in the same direction for your strategic goals, whether it is changing funding partners, finding new services, looking at innovation, all those kind of things. These are a couple of great books. Then I would make myself available. If you have any questions or things you would like to troubleshoot or I

can help in any way, I am happy to do so. You will see my contact information there. Erika.

Very good. Thank you, Rita. As a reminder, we will have some time here for questions and answers. You can enter any questions you have for Rita in the lower right-hand corner of your screen under Q&A. As we are waiting for this questions to come in, I just want to kind of recap and address some questions that we have heard from CBOs over the last year. Rita spoke to this at some point but one of the first questions people say is who do I talk to? So clearly, that connecting people -- connecting with the appropriate staff at the organization that you want to work with is really critical to establish the business relationship that you are seeking, the one that you desire as a place to start. It is likely that those potential payers or partners -- they may have business development or community relations, provide relations and so forth. Staff that is a good inroad. So when you think about who to find at any organization, you need to ask yourself some questions. Ask those that you know up front who makes the decisions regarding contracting? Who handles business development? Who is worried about the people? It might be through the more clinical department, the connections that you have with the mutual individuals that you serve.

You have to go into it recognizing that [Indiscernible] size of the organization that you are seeking to work with that an in person meeting with the leadership there might be optimal but in some cases, it might not be initially a possibility. It might not even be necessary. So really start where you can. Just keep working and asking the questions until you get to the right person at that organization. Another common question that Rita helped to address is what is the right information to share? So again, the primary objective of that meeting is to determine if a future relationship can be cultivated with that potential partner and payer. So agenda items to address might include the reason for the partnership, why are you coming to them? The proposed outcomes, perceived advantages, costs of working together, the value of your CDL -- CBO and your roles and responsibilities that you see for yourself and how that supports that of the payer. Once you are there and this cannot be stressed enough. We hear this both from CBOs that are successful and in establishing relationships but we hear it over and over and over again from payers and managed-care organizations in particular. Is the critical importance of listening. When you are preparing for the meeting, you come in with your ideas but you really have to listen to the nuances of what it is they are telling you. What are the issues that are really important to them? What are their current priorities? You have to understand that they are managing multiple things. They are juggling multiple priorities. They had different pressures. They have a lot going on. What is it that is in front of them and that they are working on and how can you impact that and use that information to help them address those issues? It might be a small tweak to a business strategy. It might be a way that you communicate, -- Medicaid the value of your services. You want to speak a common language and understand their needs. So listen, listen, listen.

So simple tricks and tips for those initial introductions. Do your research, be prepared. Show that you understand the potential partner, their mission, their clientele, etc. Be concise. Find that balance between communicating necessary information and avoiding unnecessary [Indiscernible]. The longer your message, the greater the odds that you will lose your audience. That is something you do not want to do. Be clear and communicate information about your organization and what you are asking. Do not push your partner or do not force them to have to guess or assume what your intentions are. You want to be explicitly clear with what you are asking of them. Answer the question why me? Find a way to address why should I be interested? Question from your potential partner to understand -- what sets your organization apart from the rest or the proposal that you are bringing to them? Leave an action item. Close with a request. Let me know what your availability looks like in the next few weeks. Let's follow-up on X issue that you identified during the discussion. Really close a strong. Have a reason to reconnect.

Follow-up. Following up increases the odds that you will likely catch somebody at a good time. Use multiple means. Whether it is an email or a phone call. Whenever possible, do not rely solely on email. Relationships are really built through communication and there is nothing like face to face or voice to voice communication to really be able to start to establish rapport in addition to being able to address any kind of unanswered questions that are hanging out there. you'll be able to hear their voice, here their inflections, here their concerns are and also if the timing is not right I the way that they respond to your request.

Rita mentioned this as well. Always be ready. Had that elevator pitch. Kind of your short sales pitch that is used to quickly and simply state and define your value proposition. This can be used in your communication with partners to really effectively convey your message, and you should have not just your sales -- the people that are most responsible for developing the relationship but other staff that interact with people from the organizations that you want to work with should also be able to speak clearly and directly about your organization to help build inroads wherever possible.

With that, we will move on to the Q&A portion. I just want to remind everyone that this and the archives of all of the [Indiscernible] webinars can be found at [Indiscernible]. The recording from today will be available in the next day or so. With that, I will move to questions. Again, please ask them in the lower right-hand corner. I am just going to see what we have here.

Somebody asked about the book titles and authors. Without going back to the slide, Rita, can you repeat the book title and author that you referenced?

Yes. You are probably talking about the first 90 days. That was the one with the [Indiscernible] process. It was by Michael Watson.

Okay. One question I have that goes back to some things we have heard from CBOs in the past, Rita, is you mentioned early on in the presentation that sometimes, the payers or providers seem to ask for data that does not hold relevant in your current world but it means something to the payers. You have examples of the type of data that has been requested of you in the past?

Sure. One of the things that we really struggled with was on HMO -- and HMO that for our case management services that care coordination that we were providing. So being the coordinator or research binder for people. We were being judged on number of people who had mammograms. So that was an important thing for that HMO. They had initiative to hit a certain amount of number of people achieving that and yet, it is pretty common for people with disabilities not to have a mammogram or choose not to have a mammogram because of the fear around that. We struggled with that as being an outcome for us and our [Indiscernible] based on that because people always have the option to say no.

When anxiety and fear fall into that, you can only explain so much to somebody and they are still going to have the option to say no. So that was just one of the things that really stands out to me as we think about we need to be prepared to talk with a funder for the data that they are asking for and understanding why they wanted and helping them understand what might be the barriers to get that information.

That is actually a really interesting example. The plans in that case are being judged -- it is a pass-through way to collect data. The plans are judged on their clinical outcomes and those heated metrics and so forth that impact their quality scores which ultimately impacts their payment. So they are trying to maximize their ability to effectively demonstrate their value and outcomes which will impact their success as an organization, trying to collect that -- having the CEO help you mechanism to collect that. When you are talking about this goes to a bigger issue. I do not want to do press too much but I find it fascinating because it really goes back to the correctness of the measure in and of it self and where this should potentially be exclusions. The plan cannot make that decision but it is really at the measured development level and what is being recorded. So in those kinds of circumstances, kind of back to a point as far as really being a partner to the payer, if you can describe the reason such as the fear and anxiety and the things that has happened and the reasons why they are not occurring to the payers so that they can actually see that information back to the organization that developed the measured -- measures and provide that influence what is being asked at the national level, it can help not immediately but it could potentially actually help to kind of ask the crack in the system that is there. that is a really important point. I can see where CBOs really [Indiscernible] payers capture information that impact clinical outcomes even though it is not a part of your normal day to day business. Very interesting. Okay.

Another question that I think comes up often is change in and of itself is hard. Like you mentioned, pressures that [Indiscernible] have combined with the history of CBOs , you will distinctly put it

into a few high-level pieces of advice, how can the CBO and the payer work through changes so that they -- contractual obligations are met and that the sustainability of the CBO is as insured as it can be? How do you get that place to demonstrate that you are willing to grow in a staff that you need to do so with an understanding of the history and the reason for why they are in the places that they are [Indiscernible] also undercurrent pressures to change the system. How what do you move [Indiscernible -- low volume]?

Yes. I think my big top things are really again about understanding your organization, your cost factors and where you have the ability to be a little bit flexible or think about things differently. Then it is really about communication and building a trusting relationship with that funder. There may be times that that just plain does not happen. There have been times I have walked away from contracts because we just could not come to an understanding whether it was around [Indiscernible] or whether it was around varmint within a contract or it asked us to do things that were just over and above what we as an organization could do within a cost-effective manner. You just have to be prepared to one, have those conversations, but it really comes down to knowing your organization and all the pieces will work out really well.

Very good. All right. With less than a minute left of the webinar, I am not going to -- we will not be able to hit all the questions that have come in but I will share these with Rita afterwards and tried to make a Q&A portion available through the HCBS Business Acumen Center site. I will post it alongside the slides and recording of this webinar. Thank you all for joining us today. Thank you, Rita, for your presentation. We hope that everyone has a wonderful holiday season. We will talk to again at the end of January. >> [Event concluded]