

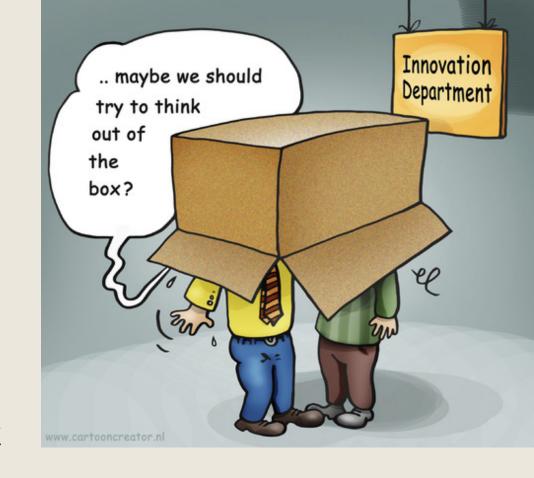
BUILDING THE NEXT GENERATION HCBS DELIVERY SYSTEM:

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 ½ 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 Help Participants:
-Be More Independent
-Achieve Personal Goals
-Have More Control
Over Their Lives
-Feel Valued

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

Reduce Avoidable Hospitalizations and Emergency Room Visits



Major Components of the Network

Processes for Understanding Participants' Needs and Preferences

Matching Participants and Workers

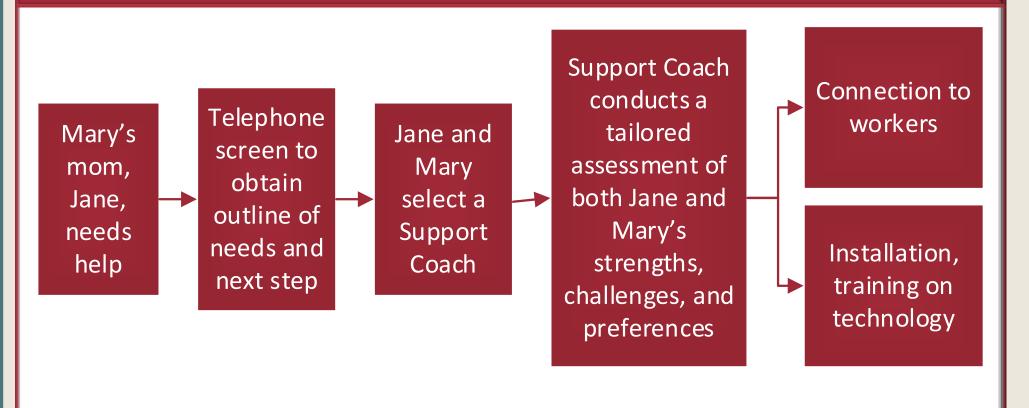
Technology to Enhance Health, Safety, & Well-Being



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Possible Person-Flow Approach: Support Coach



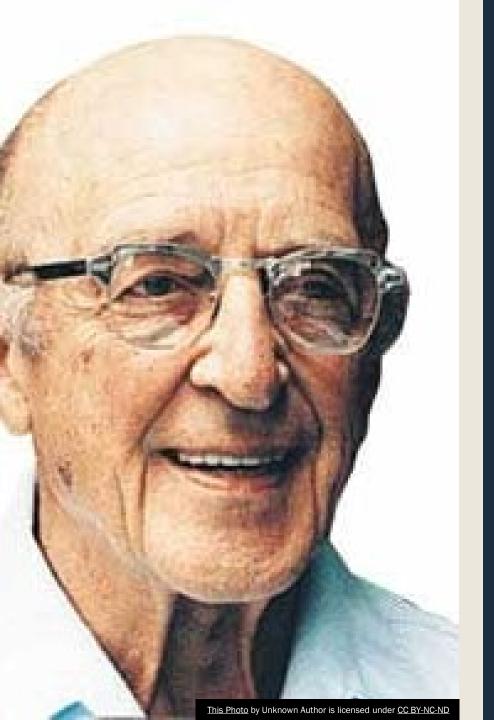
Jane receives regular schedule help

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 Online Connection to Self-assessment Mary's Mary and workers guides Jane and Jane mom, Mary in Jane, conduct developing a needs self-Installation, Support Plan help assessment training on technology Uses app to for questions, Technology, Mary, problem solving. Jane receives Jane, or may call Can obtain regular schedule for additional help help assistance from through app Support Coach as necessary



Understanding Participants' Needs and Preferences – Existing efforts that can be used as building blocks

- Efforts to standardize assessment tools/items nationally
 - interRAl
 - 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

<u>Tiered Assessment</u> <u>Process</u>

1. Minimal2. Basic3. Comprehensive

Domains

-Goals

-Preferences

-Functioning

-Health

-Behavior

-Environment

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

Assessment Options

-Self-Assessment
-Social Worker
-Nurse
-Nurse/Social
Worker

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

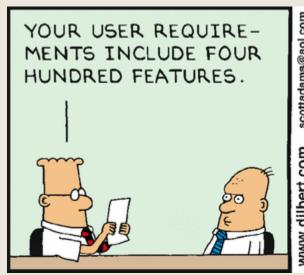
Brick and Mortar
Facilities may be used
to provide emergency
back-up
Or a Day Program

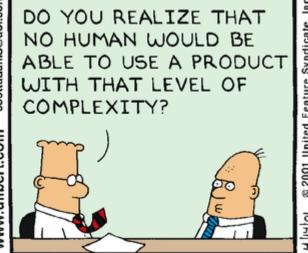
Fiscal Management Services for workers who are considered household employees



The Role of Technology in LTSS Continues to Evolve











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

Remote Monitoring

-Technology
-Personal Emergency
Response Systems
-Cameras
-Sensors
-GPS Trackers

Medication Compliance

Assistive Technology

-Communication
Devices
-Motorized Wheel
Chairs

TeleHealth

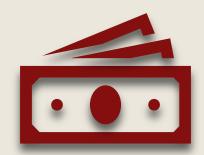
-Wearable technology
-Scales
-Cameras (monitoring balance and gate, etc.)

Companionship

-Videocalls with family, friends, other older adults and people with disabilities and volunteers
-Artificial Intelligence



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)

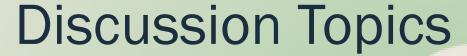




LET'S BRAINSTORM

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