Integrating Long Term Supports into Systems of Care

Maine Wisdom Summit
September 12, 2018

Marisa Scala-Foley
Director, Aging and Disability Business Institute
n4a
The “Business Institute”

The mission of the Aging and Disability Business Institute (Business Institute) is to successfully build and strengthen partnerships between community-based organizations (CBOs) and the health care system so older adults and people with disabilities will have access to services and supports that will enable them to live with dignity and independence in their homes and communities as long as possible.

www.aginganddisabilitybusinessinstitute.org
Our Funders

• The John A. Hartford Foundation
• The Administration for Community Living
• The SCAN Foundation
• The Gary and Mary West Foundation
• The Colorado Health Foundation
• The Buck Family Fund of the Marin Community Foundation
Our Partners

- Independent Living Research Utilization/National Center for Aging and Disability
- American Society on Aging
- Partners in Care Foundation
- Elder Services of the Merrimack Valley/Healthy Living Center of Excellence
- National Council on Aging
- Meals on Wheels America
- Evidence-Based Leadership Council
Our work

- Build a national resource center
- Develop an assessment tool to determine the capacity of CBOs
- Provide training and technical assistance
- Conduct an outreach and educational campaign targeting the health care sector
- Systems Change Through Stakeholder Engagement
My charge

• How is integrated care unfolding across the country?
• What are the new opportunities?
• What do health care and long-term services and supports (LTSS) providers need to do to prepare?
Where is integration happening, and what have we learned?
Where integration is happening

http://nasuad.org/initiatives/managed-long-term-services-and-supports/mltss-map
Most Common Health Care Partners of AAA Respondents

- Medicaid Managed Care Organization: 33.80%
- Hospital or hospital system: 32.40%
- Medicare/Medicaid Duals Plan: 24.60%
- Veterans Administration Medical Center: 16.20%
- State Medicaid: 14.80%
- Health care center or clinic (including FQHC): 10.60%
- Commercial health insurance plan: 9.90%

Data source
Results and lessons from integrated care models (overall)

• Managed LTSS models are helping with rebalancing

• Some improvements in health outcomes – fewer admissions/readmissions, higher self-reported health, increased primary care visits

• Stakeholder engagement – early and often!

• While satisfaction levels are generally high, the devil is in the details
  • Real-time or regular check-ins with individuals enrolled in these programs are important
Aging and Disability CBO-Health Care Partnerships: What Works and Why?

- Finding and nurturing champions
- Shared vision, mission, and language
- Agreements that support that shared vision
- Flexibility
- Laser focus on your partner’s pain points
- Integrated, efficient work flows
- Adequate infrastructure to support the partnership
- Clearly defined and open data-sharing protocols
Comprehensive Care Connections (C3)

- Pennsylvania-based 501(c)3 non-profit
- Provides administrative supports to area agencies on aging (AAAs) and related community-based organizations (CBOs), including:
  - Joint marketing contracting with managed care organizations (MCOs) and integrated health systems, (primarily under Medicare and Medicaid programs, including ACOs)
  - Focused on achieving volume-based efficiencies, such as:
    - Sophisticated staff training program
    - Readiness assessments, agency leadership coaching, and standards development;
    - Toolkits, policies and procedures, and technical assistance;
    - Communities of Practice/Learning Collaboratives;
    - Data consolidation, analytics, benchmarking, and quality management;
    - Contract management and advocacy with partners (MCOs, etc.) and regulatory agencies;
    - Billing/fiscal management.
Lessons Learned

• Start EARLY! AND plan readiness/early trainings to be relevant to current work
• Review partner’s contract with state Medicaid or CMS (Medicare Advantage, ACO, etc.) and mirror their requirements in your training
• Identify partner pain-points/priorities and design training to address
• Meet with potential partners – be prepared in advance to present observations and solution ideas
• Understand partner’s compliance requirements and mirror in your policies and practices
• Prepare for “what ifs” (staff resignations, FMLAs, etc.)
• Manage execution closely!
New opportunities
Opportunities – Medicare Advantage (MA)

- Expansion of Medicare Advantage supplemental benefits
- Changes in the following areas:
  - Uniformity requirements
  - Targeting of beneficiaries
  - Definition of “primarily health-related”
- Resources:
  - [https://www.cms.gov/Medicare/Health-Plans/MedicareAdvtgSpecRateStats/Announcements-and-Documents.html](https://www.cms.gov/Medicare/Health-Plans/MedicareAdvtgSpecRateStats/Announcements-and-Documents.html) (select “2019 Announcement”)
Opportunities – MA (continued)

• Examples of allowable types of supplemental benefits
  • Adult day care services
  • Home-based palliative care
  • In-home support services
  • Respite care
  • Transportation (to doctor’s visits)
  • Home modification (e.g., safety devices and modifications like grab bars, shower stools, stair treads)
  • “Stand alone memory fitness benefit”
Where to begin?
Building blocks: Market analysis

• Understanding your market (aka…do your homework)
  • Existing and changing
  • Who are your customers (payers AND clients)?
  • What do they want/need?
  • What are your organization’s or network’s strengths (and weaknesses)?
• Who are your competitors?
• What regulatory and political factors might impact your ability to deliver services and attain contracts?
Building blocks: Service lines/packages

• Which service(s) does your organization or network have the capacity to deliver?
• What is your history of delivering those services?
  • What is your organizational stature in the market?
Building blocks: Developing your value proposition

- What is the business case for buying your services?
  - Communicating your services and value clearly and consistently
    - Stories and data
    - Return on Investment (ROI)
  - How do the services you can offer meet your customer’s needs or solve their problem(s)?
- How can your services help a payer meet the quality requirements to which they must adhere?
Questions?

For more information:
www.aginganddisabilitybusinessinstitute.org

Marisa Scala-Foley
mscala-foley@n4a.org
202-580-6021