“Business Institute”

**Mission:** The mission of the Aging and Disability Business Institute is to build and strengthen partnerships between aging and disability community-based organizations (CBOs) and the health care system.

**Long-term outcome:** Increase in the number of CBOs successfully implementing business relationships (contracts) with health care payers.
Building on Previous Success

Capture and Share Learnings

- n4a Aging Business Academy & Capacity Building
- ACL Business Acumen Learning Collaboratives
- The John A. Hartford Foundation Phase 1: Prototype Networks
- The SCAN Foundation Linkage Labs
Funders

• The John A. Hartford Foundation
• Administration for Community Living
• The SCAN Foundation
• The Gary and Mary West Foundation
• The Marin Community Foundation
• The Colorado Health Foundation
Partners

• National Association of Area Agencies on Aging
• Independent Living Research Utilization/ National Center for Aging and Disability
• Partners in Care Foundation
• Elder Services of the Merrimack Valley/ Healthy Living Center of Excellence
• Meals on Wheels America
• National Council on Aging
• Evidence-Based Leadership Council
• American Society on Aging
• Scripps Gerontology Center, Miami University
# Public-private Partnerships and Collaboration Across Grants

<table>
<thead>
<tr>
<th>Grant</th>
<th>Funder</th>
<th>Grantee</th>
<th>Partners</th>
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<tr>
<td>Building the Capacity of the Aging &amp; Disability Networks to Ensure the Delivery of Quality Integrated Care</td>
<td>The John A. Hartford Foundation</td>
<td>n4a</td>
<td>• ILRU/NCAD&lt;br&gt;• PICF&lt;br&gt;• ESMV/ HLCE&lt;br&gt;• Scripps Gerontology Center, Miami University</td>
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<tr>
<td>Learning Collaboratives for Advanced Business Acumen Skills</td>
<td>ACL</td>
<td>n4a</td>
<td>• ILRU/NCAD&lt;br&gt;• PICF&lt;br&gt;• ESMV/HLCE&lt;br&gt;• MOWA&lt;br&gt;• NCOA&lt;br&gt;• EBLIC&lt;br&gt;• ASA</td>
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<tr>
<td>Improving the Health of Older Adults using Integrated Networks for Medical Care and Social Services</td>
<td>The SCAN Foundation, Gary and Mary West Foundation, Colorado Health Foundation, Marin Community Foundation</td>
<td>ASA</td>
<td>ASA</td>
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Goals & Activities

- 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
Business Institute Resources

• Helpful resources across common integrated care categories
  - Get Started
  - Understand the Landscape
  - Define Your Value
  - Build Your Network
  - Manage Finances
  - Evaluate Contracts
  - Deliver Measurable Results

• Resources filterable by expertise level ensure users find the right information
Assessment Tool

1. Develop contract and ongoing management plan
2. Understand healthcare Market
3. Demonstrate Adaptability
4. Understand current cost of care delivery
5. Develop ROI
6. Understand competitors
7. Operationalize new service model
8. Implement quality improvement process
9. Institute marketing and branding strategies
10. Demonstrate board leadership
11. Institute business development strategies

Baseline

- 2nd assessment
Training and Technical Assistance

- Monthly Webinar Series
- Conferences
- State & Regional Business Acumen Trainings
- Case Studies
- Learning Collaboratives
- Targeted Technical Assistance
- Consulting Services
Common TA Requests

- Network Development
- General contracting
- Developing a value proposition
- Information technology infrastructure
- Pricing and return on investment (ROI) analysis
- Accreditation, metrics and quality systems
- Medicare billing
Statewide Networks Are Expanding

CA Partners At Home Network

Florida Health Networks

MA Healthy Living Centers of Excellence & Greater North Shore Link

NY Western NY Integrated Care Collaborative

PA Aging Well, LLC & C3

VA Eastern Virginia Care Transitions Partnership & VAAA Cares

WA Conexus Health Resources

IL Illinois Community Health and Aging Collaborative

OH Direction Home

IA Indiana Aging Alliance

OK Oklahoma Aging & Disability Alliance

TX Healthy at Home, T4A

FL Florida Health Networks

1 Not a full statewide network

Aging and Disability BUSINESS INSTITUTE
National Conferences
Case Studies & Publications
Action Learning Collaboratives for Advanced Skills
Trailblazers

The trailblazers learning collaborative will serve as a “think tank” for prototyping and collectively work towards solutions addressing next generation obstacles and challenges.
Virginia Finds Better Ways to Transition Patients from the Hospital to Their Homes

Nearly one in five Medicare patients discharged from a hospital—approximately 7.6 million seniors—are readmitted within 30 days, at a cost of over $20 billion a year. Implementing evidence-based innovations necessary for reducing readmissions can go a long way to reduce costs and improve quality of care. An innovative program in eastern Virginia is helping them do just that—and is being expanded across the state because of its success.

Community leaders led by five local Area Agencies on Aging (AAAs) in eastern Virginia established the Eastern Virginia Care Transitions Partnership (EVCaTP), focused on assessing patients’ needs in their homes and keeping them out of the hospital as much as possible. Part of the program is the Care Transitions Intervention Program (CTIP), which works to provide patients and their caregivers with the skills, confidence, and tools they need to take a more active role in their care. CTIP employs coaches who are professionally trained and certified to educate patients and build confidence so they can achieve the goals they have set for themselves. In-home environmental assessments identify needs beyond health and discharge plan, taking into account well-being and quality of life.

Results from EVCaTP are impressive. From 2012 to 2013, the EVCaTP conducted 3,565 total home visits for Medicare patients discharged from the hospital. Those home visits translated into lower patient readmission. While the 20% average target group readmission rate was 14.4 percent, the EVCaTP overall readmission rate was 9.4 percent—well below the 2010 statewide baseline of 23.4 percent.
Partnering with Health Care

Establish Integrated Care Advisory Committee (ICAC) to inform the Advanced Learning Collaboratives regarding the perspectives of the health care systems and payers.
Systems Change = Sustainability

- Secure additional funding to support business acumen development among CBOs
- Stakeholder outreach and engagement
- Project Advisory Committee
Advice and Lessons Learned

• Start to build it before they come
• Be proactive
• Create on-going QI and evaluation processes
• Go above and beyond & have a “can do” attitude ALWAYS!
• Address provider’s core needs/problems and identify additional opportunities
• Look at outcomes broadly
Advice and Lessons Learned Continued

- Take advantage of opportunities and focus on performance
- Be prepared, be flexible and tailor your services
- Truly understand contract details and expectations
- This work requires culture change at all levels of the organization
- Data! Data! Data!
Factors Contributing to Success

• Advocacy
• Relationships with hospitals, HCBS providers, consumers
• Single contract for evidence-based programs through the Health Living Center of Excellence
• Outcomes and proof of value… Data!
Factors Contributing to Success Continued

• Creating champions and building partnerships
• “One-Stop Shop” network model = capacity
• Proven results

“Be invaluable so they (health care) can’t afford NOT to do business with you.”
Action Planning…

• Who can be your health care champion and help open doors?

• Organizational issues to address?

• What steps can you take in the next week?

• In the next month?
EUGENE KIM AND THE WONDERS OF INFLIGHT CONSTRUCTION
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Business Acumen for Disability Organizations

NCOA National CDSME and Falls Prevention Resource Centers’ meeting

May 25, 2017
Welcome

Martha Roherty, Executive Director
National Association of States United for Aging and Disabilities
CBO’s and MCO’s.. Oh my!

Managed Care Organizations responsible for Managed Long Term Services and Supports (MLTSS)...

- Local, regional or national contractors (health plans)
- Arrangement between State Medicaid programs and contractors
- Capitation for all or selected services
- Contractors are accountable for quality, cost and other standards set in the contracts
- LTSS populations include persons with age-related qualifications or needs (i.e. physical or intellectual/developmental disabilities.) Many also have serious mental illness.

Community Based Organizations...

- 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
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 doubles between 2004 and 2012, growing from 8 to 16 states.

MLTSS spending increases by 55% in FY14, from $14.5 B to $22.5 B.

MLTSS accounts for 15% of LTSS spending.

As of October 2016, 21 states had MLTSS programs with 8 states planning to move in that direction.

Sources:
- Truven Health Analytics, Medicaid Expenditures for MLTSS in FY2014, April 2016
- GAO Report – Medicaid Managed Care: Improved Oversight Needed of Payment Rates for Long-Term Services and Supports, January 2017
States with MLTSS

MLTSS Programs - 2017

Current MLTSS program (regional **)
Duals demonstration program only
MLTSS in active development
MLTSS under consideration
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
The Administration on Community Living (ACL)

- The Administration on Community Living is an organization created by the US Department of Health and Human Services (HHS)
  - Federal agency responsible for increasing access to community supports, while focusing attention and resources on the unique needs of older Americans and people with disabilities across the lifespan.
    - Administration on Aging
    - Administration on Intellectual and Developmental Disabilities
    - Health and Human Services Office on Disability
Why does ACL care?

• Desire to ensure that CBOs are part of the evolving service delivery system and that their significant knowledge and experience serving people with disabilities is preserved.

• Provide framework for effective response and network development to:
  • deploy evidence-based programs and
  • build state and CBO business capacity
Why Business Acumen Matters

Integrated Care Opportunities

- Accountable Care Organizations (ACOs)
- Health Homes
- Medicaid Managed LTSS (MLTSS)
- State Innovation Models
- Community-Based Care Transitions Program (CCTP)

Why Business Acumen Matters
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.
• What is the purpose of our work?
  • **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.
Disability Business Acumen Grant: Business Acumen for Integrated Care

Effective Leadership

Business Planning & Financial Sustainability

Partnerships

Quality Assurance

Centralized, Coordinated Logistical Processes

Adequate Delivery Infrastructure

Managing Chronic Conditions

Activating Beneficiaries

Avoiding Long-Term Residential Stays

Preventing Hospital (Re)Admission
Business Acumen Grant Partners

- Partner Organizations

- NASUAD (National Association of States United for Aging and Disabilities)
- AAN (American Association on Health and Disability)
- ANCOR (American Network of Community Options and Resources)
- ASAN (Autistic Self Advocacy Network)
- NASDDDS (National Association of State Directors of Developmental Disabilities Services)
- NCIL (National Council on Independent Living)
- University of Minnesota
- National Disability Rights Network
- National Council on Aging
- Mercer
- ACL (Administration for Community Living)

Funded by:
Disability Business Acumen Grant: Key Activities

- **How will we accomplish our work?**
  - 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.
Disability Business Acumen Grant: Anticipated Outcomes

- **How will we know if we are successful?**
  - Increased knowledge of current CBO successes, challenges, needs, and promising practices
  - Increased technical assistance and business acumen resources to support CBOs
  - Increase in learning collaborative participants’ business capacity to engage with integrated care networks
  - The improvement of health care entities’ awareness about the role CBOs can play in the health care system
Key Activities

• Environmental Scan and Needs Assessment Survey
• Webinars and Technical Resources
• Learning Collaborative
Early Findings

Environmental Scan and Needs Assessment Survey
Early Findings: Respondents
Early Findings: Where Clients are Served
Early Findings: Where Clients are Served
Early Findings: 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”
Early Findings: Contracting Efforts

- 9.50% Currently not working with these entities and have no intention of doing so
- 38.10% Currently not working with these entities but would like to
- 17.90% Have had limited communication with these entities and are beginning to discuss our relationship
- 10.70% Have tried to partner with these entities unsuccessfully
- 11.90% In discussions with these entities but have not begun negotiating contracts
- 3.60% Actively negotiating contracts for services
- 8.30% Have executed a contract, MOU, or other legal agreement
Early Findings: Contracting Efforts

- 25.00% Other, please describe:
- 12.50% Didn't have any data to substantiate value
- 62.50% Perception that we didn’t add value to partner
Early Findings: CBOs

- Consumer Satisfaction: 78.8%
- Understanding Customer Needs: 70.2%
- Consumer Engagement: 68.6%
- Articulating your Value: 67.4%
- Measures (e.g. outcomes, consumer satisfaction): 65.9%
## Early Findings: CBOs

<table>
<thead>
<tr>
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<th>Importance 5 - Very Important (%)</th>
<th>Demonstrated Capabilities 5 - Very Strong (%)</th>
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</thead>
<tbody>
<tr>
<td>Consumer Satisfaction</td>
<td>78.8</td>
<td>48.2</td>
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<tr>
<td>Understanding Customer Needs</td>
<td>70.2</td>
<td>41.5</td>
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<tr>
<td>Consumer Engagement</td>
<td>68.6</td>
<td>37.3</td>
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<tr>
<td>Articulating your Value</td>
<td>67.4</td>
<td>19.3</td>
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<tr>
<td>Measures (e.g. outcomes, consumer satisfaction)</td>
<td>65.9</td>
<td>19.5</td>
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Early Findings: CBOs

<table>
<thead>
<tr>
<th>Area</th>
<th>Importance 5 - Very Important (%)</th>
<th>Demonstrated Capabilities 5 - Very Strong (%)</th>
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<tr>
<td>Evaluating Competition</td>
<td>29.8</td>
<td>4.9</td>
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<td>Developing Information Technology Systems</td>
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<td>Effective Sales Techniques</td>
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<tr>
<td>Pricing and Rate Determination</td>
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<td>6.3</td>
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<tr>
<td>Developing Quality and Performance</td>
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<td>8.4</td>
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<td>Management Systems</td>
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## Early Findings: CBOs

### Importance 5 - Very Important (%)

<table>
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<tr>
<th>Task Description</th>
<th>Importance</th>
<th>Demonstrated Capabilities</th>
<th>Standard Deviation</th>
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<tr>
<td>Pricing and Rate Determination</td>
<td>54.8</td>
<td>6.3</td>
<td>34.3</td>
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<tr>
<td>Articulating your Value</td>
<td>67.4</td>
<td>19.3</td>
<td>34.0</td>
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<tr>
<td>Developing Quality and Performance Management Systems</td>
<td>56</td>
<td>8.4</td>
<td>33.7</td>
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<tr>
<td>Measures (e.g. outcomes, consumer satisfaction)</td>
<td>65.9</td>
<td>19.5</td>
<td>32.8</td>
</tr>
<tr>
<td>Building Essential Infrastructure Support</td>
<td>54.7</td>
<td>9.9</td>
<td>31.7</td>
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Opportunities to Get Involved

• Complete the Environmental Scan and Needs Assessment Survey
• Contribute to the Business Acumen Resource Center
• Participate in ongoing feedback and dissemination
  • Webinars
  • Conference calls
  • Conference presentations
• Provide Technical Assistance
  • Short-term
  • Peer-to-Peer exchanges
  • Learning Collaborative
Environmental Scan and Needs Assessment
Environmental Scan and Needs Assessment
Environmental Scan and Needs Assessment
Environmental Scan and Needs Assessment
Environmental Scan

The rapid expansion of Medicaid managed long-term services and supports (M LTSS) and other efforts to integrate healthcare and long-term services and supports is creating new, exciting, and yet challenging opportunities for Community Based Organizations (CBO) - working to work within these new program designs.

These new approaches mean that TIOs, Area Agencies on Aging, aging service organizations, behavioral health organizations, Centers for Independent Living, developmental disability organizations, faith-based organizations, Native American tribal organizations (American Indian/Alaska Native health networks), isolation program providers, Protection and Advocacy Agencies, University Centers for Excellence in Developmental Disabilities Education, Research & Service, and other local service providers for persons with disabilities and older adults - need to think differently about the services they offer, the communities they serve, and the way they demonstrate the value they add to their clients and supporters. Instead of contracting directly with government, vendors, CBOs are now negotiating contracts with hospitals, health systems, accountable care organizations (ACOs), health plans, and other integrated care entities.

To equip CBOs with the skills, training, and experience needed to effectively negotiate and partner with integrated care entities and other payers, the Administration on Community Living is funding a three-year Business Acumen for Disability Organizations grant. This award is intended to ensure that CBOs are part of the evolving service delivery system and that their significant knowledge and experience serving people with disabilities is preserved. The grant is being implemented in partnership with 17 national organizations representing a variety of perspectives and experience on disability.

To better understand the needs of the disability network community, we are conducting an environmental scan of the business acumen of the disability network. Responses are being solicited from the following three categories, each with its own unique set of questions:

- Community-Based Organizations (CBOs), click here.
- Assisted Care Organizations (ACOs), Accountable Care Organizations (ACOs), and other healthcare and long-term services and supports providers, click here.
- States currently operating or planning to implement a managed long-term services and supports (MLTSS) program, click here.

The survey should take no more than 10-15 minutes to complete.

Your responses will be used to guide the development of a web-based resource center, ongoing training opportunities, and the development of an extensive learning collaboration.
Learning Collaborative: Tying it all together

- States
- Community Organizations
- Health Plans & other health care systems