



How COVID-19 Can Spark Transformative Change in LTSS

Presenters: Yonda Snyder and Debbie Pierson
Partners, Sage Squirrel Consulting, LLC

May 20, 2020

We will be taking questions at the end of the webinar. You can ask a question at any time through the webinar control panel.

All registrants will receive a link to the recording and slides next week.

You can help us improve future webinars by filling out the survey you will see as you leave the webinar.

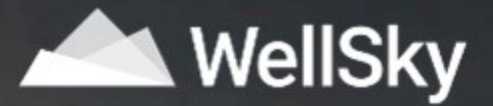
This educational presentation is provided by



Software and services to realize care's potential

Aging & Disability | Protective Services and Guardianship | Behavioral Health
Homelessness | Community Services





78% states use our
LTSS solutions

60% HUD continuums
of care

50% area agencies
on aging



Home Health

Hospice

Physical Rehabilitation

Home Medical Equipment

Behavioral Health

Intellectual & Developmental Disabilities

Specialty Pharmacy

Skilled Nursing

Home Infusion

Cellular Therapy



Debbie Pierson & Yonda Snyder Sage Squirrel Consulting

Debbie Pierson served as the Deputy Director of the Indiana Division of Aging from 2014 until 2018. Before coming to the Division of Aging, Debbie was the Director of Home and Community Based Services with Area 9 Agency on Aging in Richmond, Indiana. Yonda Snyder was the Director of the Indiana Division of Aging from 2014 until 2018. Yonda has a Bachelor of Science from Indiana University. Yonda is a customer service acolyte who also has ten years of executive level human resource management experience prior to leading the Division of Aging.



Introduction

- Long term services and supports has been challenged with effectively meeting the needs of a growing aging population for years now.
- The COVID-19 pandemic has been a major disrupter of long-term care
- Are states and providers going to try to go back to “normal” or can they seize the opportunity presented by disruption to transform operations?



Poll Question

- What is your current role?
 - State aging agency
 - State Medicaid agency
 - State developmental disabilities agency
 - State mental health and addiction agency
 - AAA
 - CIL
 - Provider
 - Other



A Slow-Motion Crisis in LTSS

- Access
 - Awareness of HCBS alternatives
 - Process efficiency – ability to access HCBS alternatives as easily and quickly as institutional options
- Budget
 - Growing demand is driving growth in Medicaid budgets for older adults and others with physical and other disabilities
 - Bending that curve is critical
- Capacity
 - Provider enrollment
 - Workforce issues

Opportunity for Transformative Change

- Change often happens in an incremental way
- People tend to just nibble around the edges of big problems
- While this is still change, it is often transactional change



Sometimes You Need More



- Transformation change takes disruption, even some destruction
- That's why it can be so difficult to change the culture of an organization let alone an entire industry or sector.
- Creating the disruption is sometimes the hardest part



Current Challenges

- Look very similar to those core challenges the LTSS system has faced for years
 - Access
 - Budget
 - Capacity
- The crisis at hand is highlighting these issues
- People need to access services quickly
- Budgets are even more strained
- Providers willing and able to serve must be enrolled quickly
- Direct care staff are in high demand
- Capacity challenges worsened by providers who don't survive stay at home orders and suspended programs



Current Response To This Disruption

- Willingness, even a desire, to eliminate or modify regulatory requirements
- Executive orders
 - Impact state regulatory requirements that can be waived or modified in an emergency
- 1135 waivers
 - Currently 50 states and DC have approved 1135 waivers as of 5/10/2020
 - Several states have submitted multiple 1135s
- Appendix K waivers on HCBS waiver programs
 - Currently 28 states and DC have approved Appendix K waivers as of 5/10/2020

Change is Good

- These are intended to be temporary changes
- Many of them address those same core challenges in long term services and support:
 - Access
 - Budget
 - Capacity
- May be a great time to seize the opportunity to consider longer term changes





Transforming Regulatory/Process Burdens

- While regulations and bureaucratic processes serve a defined purpose they may also create barriers or bottlenecks
- Are there other ways to serve that purpose?
- How to mitigate or eliminate those barriers?
- If you can't change the regulatory requirement then can you figure out to make the regulations work for you?
- Do your business processes actually serve their purpose, or have they taken on a life of their own?



Policy/Regulation Versus Process

- Many of the challenges are not necessarily policy or regulatory issues
- Process/implementation/operations can be a significant part of the problem
- Don't just look at the regulation or requirement itself but consider how you implement your oversight and monitoring
- Workforce management issues
- Fragmented organizational design
- Poorly designed or outdated technology
- Tech that doesn't communicate with each other
- Bad or inadequate data



Access

- ADRCs/NWD
 - ACL has increased funding to states for ADRC activities
- PASRR
 - Many states are requesting in their 1135s to suspend/delay PASRR screenings for nursing facility admissions
 - In some cases there may be process challenges rather than regulatory challenges



Poll Question

- Have the ADRCs or NWD system in your state played an active role in your state's pandemic response?
 - Yes
 - No
- If yes, in what ways?
 - General information and referral
 - Assisting with testing referrals
 - Reporting
 - Data collection
 - Other _____



Access

- Medicaid applications
 - Automated financial authorizations
 - “Presumptive” eligibility
- Service authorization
 - States have requested suspension of some prior approval requirements under 1135s
 - State states have allowed for case management, including eligibility determinations, to take place remotely rather than face-to-face



Budget

- Bundled Supports/MLTSS
- Person centered thinking
- Needs based assessment, options counseling, and care planning
- Remote services when and where appropriate
- Support for family caregivers
- Pre-Medicaid support to slow or avoid spenddown to Medicaid
- Administrative expenditures



Capacity – Network Adequacy

- Provider enrollment
- Certification for new services
- States have made changes through 1135s and Appendix K waivers to streamline certification of new providers or certifying existing providers for additional services
- These too could be process issues rather than regulatory issues
- In Appendix K waivers, some states have requested the ability to do retainer, “bed hold” type payments in some situations



Capacity – Assuring Health and Safety

- Supply of providers need to be of adequate quality starting with providing for health and safety
- States have gone in both directions with incident reporting
 - Increased reporting in some cases for COVID-19 positive tests, symptoms, death
 - Reduced requirements on timelines for other incident reporting



Capacity – Direct Care Workforce

- State requests, primarily in Appendix K waivers, have included:
 - Suspended or delayed direct care staff requirements like background checks
 - Increased rates, frequently in the form of pass-through payments to direct care staff
 - Expanded participant directed services
 - Eliminated restrictions on family members as paid staff
- New experiences with remote workers have hopefully broadened recruiting/retention options for agency workforce.



Modernizing Service Delivery

- Potential to streamline access to care and services, increase capacity and potentially reduce budgets
- Telehealth
 - Current regulations permit it but not widely used
 - Expanded offerings during the pandemic
- Other remote supports
 - LTSS is inherently high touch but some supports are appropriate for remote delivery
 - Potential to preserve caregivers or support persons longer in home with remote supports/training
 - With some sites, like adult day care that are shut down, providers have experimented with live streams on Facebook, web meetings, Skype, etc.



Efficient/Effective Business Processes

- Focus on accuracy, consistency and efficiency in your processes
- Be sure each step in your process has value
- Automate where you can, including sharing information across systems
- Tie process evaluation to individual performance evaluation
- Business needs should drive organizational structure
- Organizational culture should value process improvement

Guide to Business Process Evaluation

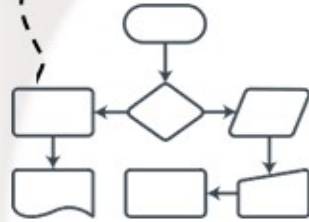
Tools for Process Evaluation:

- ✓ Process map
- ✓ Time study
- ✓ WHY?



Mapping Current Process:

- ✓ Capture all the steps
- ✓ Document inputs and outputs
- ✓ Document all "touches"
- ✓ Can be visual or narrative
- ✓ Keep it simple to make it easier to spot patterns/duplications



Time Study:

It's important to understand the element of time in the process.

- ✓ How long should each step take?
- ✓ How long is taking now?
- ✓ How much variance is there between staff and why?

Accurate time study data is critical to setting performance expectations. That leads to accurate measures of capacity.



Evaluate Each Process/ Sub-Process:

- ✓ Does the activity have value?
- ✓ How does the activity contribute to the organization's purpose/goals?
- ✓ Can the activity be automated?
- ✓ Are the right people in the right roles?
- ✓ Are there similarities to other processes?



Document and Measure:

- ✓ Update process map
- ✓ Create job aides
- ✓ Set performance standards
- ✓ Measure regularly
- ✓ Be transparent



Re-evaluate:

- ✓ Periodically re-evaluate the process
- ✓ Create opportunities for continuous process improvement
- ✓ Measure performance and address outliers



Sage Squirrel Consulting, LLC

Imaginative. Pragmatic.

- Watch for **fragmentation points** – information from multiple sources, too many handoffs/touches
- Watch for **bottlenecks** at critical steps



Poll Question

- What are the key business process your agency manages? (click all that apply)
 - Provider enrollment/certification
 - Provider reimbursement/claims
 - Incident reporting
 - Provider oversight/monitoring
 - Wait list management
 - Licensing
 - Review of service authorizations
 - Medicaid financial eligibility determinations
 - Nursing facility level of care determinations
 - PASRR

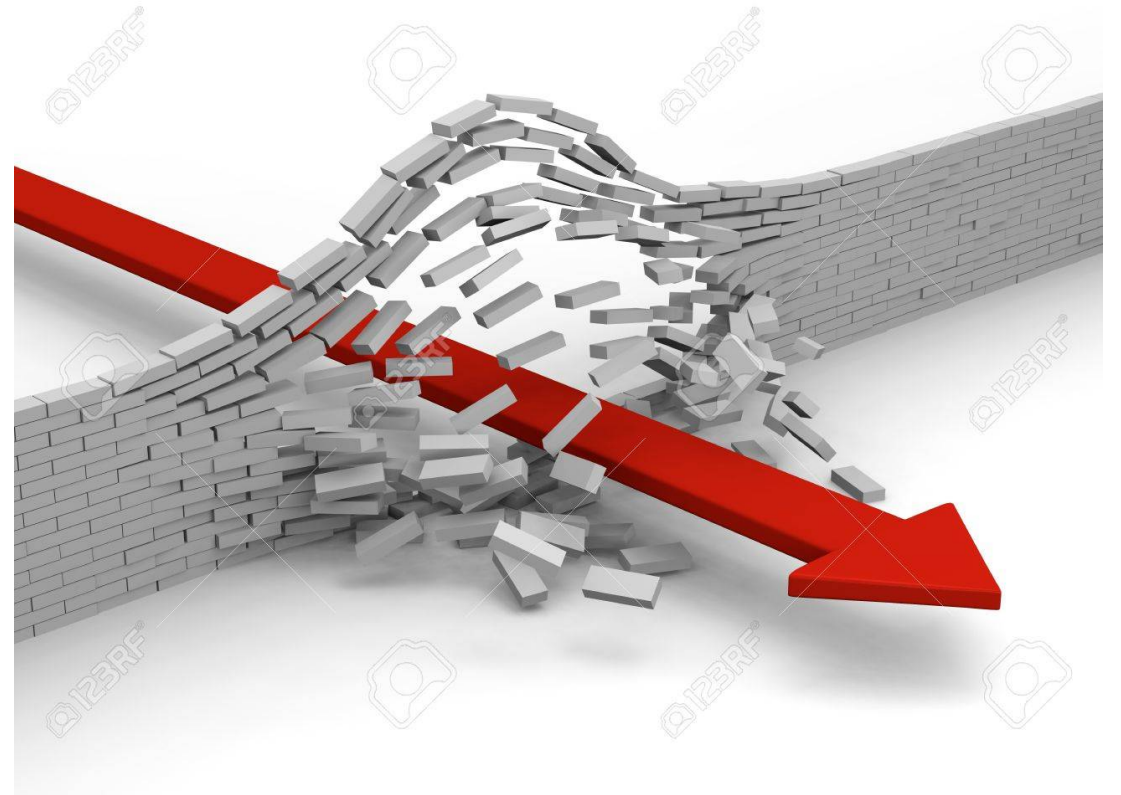


Takeaways

- Challenges around access, budget, and capacity have been around a long time in LTSS systems
- The disruption of the pandemic presents a possible opportunity to bring about real transformative change in these systems
- Effort should be put into understanding whether the challenge is in the policy or regulation or whether it is in the execution.

Disruption is here – like it or not!

- COVID-19 has created disruption across every area of society
- Don't let this crisis go to waste!



Please note

The views, information, and guidance in this resource are provided by the author and do not necessarily reflect those of WellSky. The content provided herein is intended for informational purposes only. The information may be incomplete, and WellSky undertakes no duty to update the information. It is shared with the understanding that WellSky is not rendering medical, legal, financial, accounting, or other professional advice. WellSky disclaims any and all liability to all third parties arising out of or related to this content. WellSky does not make any guarantees or warranties concerning the information contained in this resource. If expert assistance is required, please seek the services of an experienced, competent practitioner in the relevant field.

WellSky resources are not substitutes for the official information sources on COVID-19. Providers should continue to track developments on official CMS and CDC pages, including:

- **CMS response to Coronavirus and latest program guidance**
<https://www.cms.gov/About-CMS/Agency-Information/Emergency/EPRO/Current-Emergencies/Current-Emergencies-page>
- **CDC interim infection prevention and control recommendations**
<https://www.cdc.gov/coronavirus/2019-ncov/infection-control/control-recommendations.html>



About Sage Squirrel

We work on human service projects where objectives are not being achieved and operational challenges need to be identified and addressed.

- Backlogs
- High rates of non-compliance with process
- High denial rates
- Personnel issues
- Budget overruns
- Demand that is straining available resources

If you would like to know more about working with Sage Squirrel, please answer “Yes” on the exit survey as you leave the webinar today.

A timely, free webinar for healthcare professionals in every setting

On the heaviness of halos:

care for the professional caregiver during crisis



with **Dr. Carla Cheatham**
renowned educator and author on
compassion fatigue and resilience

Friday, May 29 | 12:00-1:00PM CDT

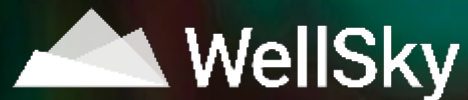


Register now: wellsky.com/caregivers

Everyone will receive a link to the recording and slides. You don't have to do anything.

Request a demo today.

wellsky.com/demo





Thank you!



Sage Squirrel Consulting, LLC

www.SageSquirrel.com

Debbie Pierson

dpierson@sagesquirrel.com

Yonda Snyder

ysnyder@sagesquirrel.com