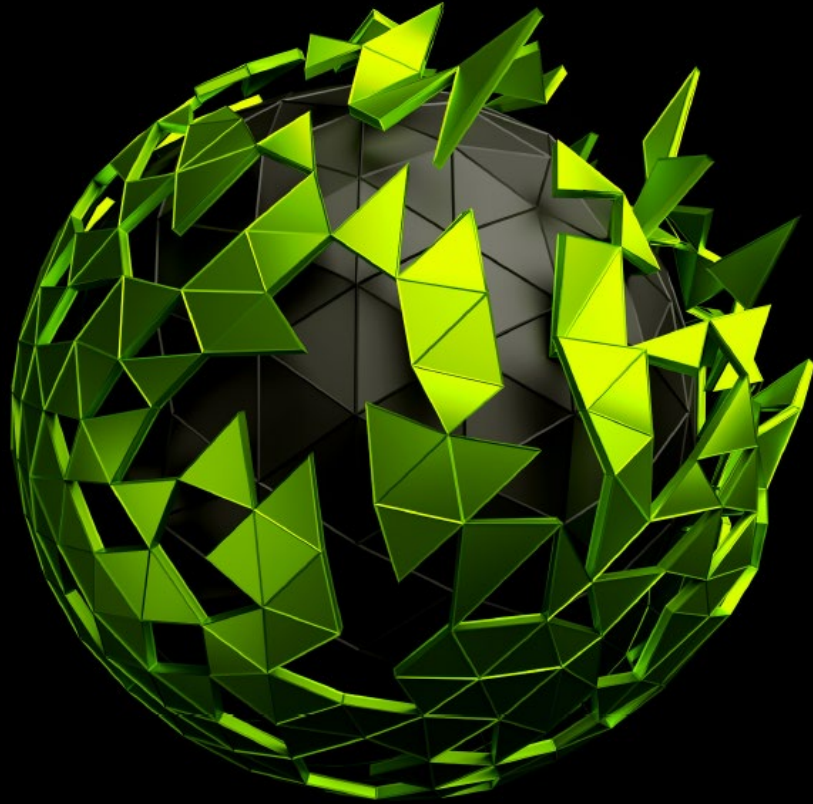


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HCBS 2019

Improving the Stakeholder Experience through Collaborative Digital Transformation

Jessica Lehfelddt & Matthew Mardorff
Wednesday, August 28, 2019

Today's Agenda



Topics

Welcome/Introduction

Drivers for Change

Common Challenges

Guiding Principles for Transformation

Potential Benefits of Change

What's Next?

Closing/Panel Q&A



Your Speakers Today



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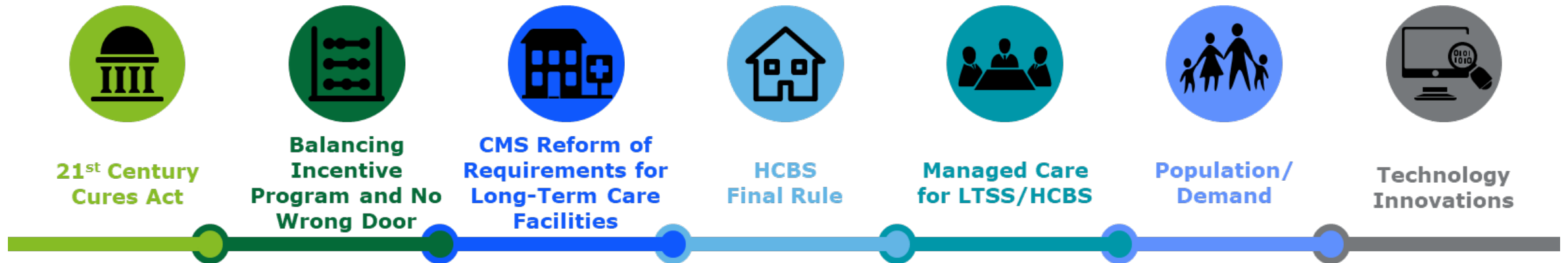
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Trends in LTSS: The Drivers for Change

Multiple factors are driving the need for transformation in the LTSS space

LTSS Transformation Drivers



Trends in LTSS: Innovations to Address State Needs

States are looking for innovative solutions to address pain points and focus on three key goals: reduce costs, improve the individual's care experience, and improve population health

Sample Innovation Trends



Using Analytics to Improve Quality and Identify Risks

- Use data to better understand overall program quality and identify risks to participants
- Leverage insights to provide guidance to program managers and workers



Key Benefits:

- Provides an integrated program view
- Drives consumer-level actions based on identified risks
- Supports workers to navigate information



Implementing Cloud-Based Systems

- Implement a solution that is available to all users via the Internet "cloud"
- Provide access through mobile platforms and self-service portals to improve flexibility and accessibility for workers, staff, and consumers



Key Benefits:

- Reduces cost of ownership
- Improves flexibility
- Enhances collaboration abilities



Common Program Management Challenges

As the scope and size of state HCBS programs expand, so do the challenges of coordinating care and delivering/monitoring quality services

Oversight Challenges

Lack of Timely and Consistent Data

LTSS data is often inconsistent in format and not available in time to be used to inform key decisions

Defining and Managing for "Quality"

Standard quality measures for HCBS programs are not yet mature and in many cases are still being defined

Moving from FFS to MLTSS

Difficulties moving from direct program involvement to contract management of MCOs and cross-MCO program oversight

Operational Challenges

Program Silos/Lack of Consistency

Lack of standardized processes, policies, and procedures across different waiver programs and/or different operating agencies/departments

Limited Visibility into Benefits

Poor outreach capabilities and lack of transparency across different benefit programs

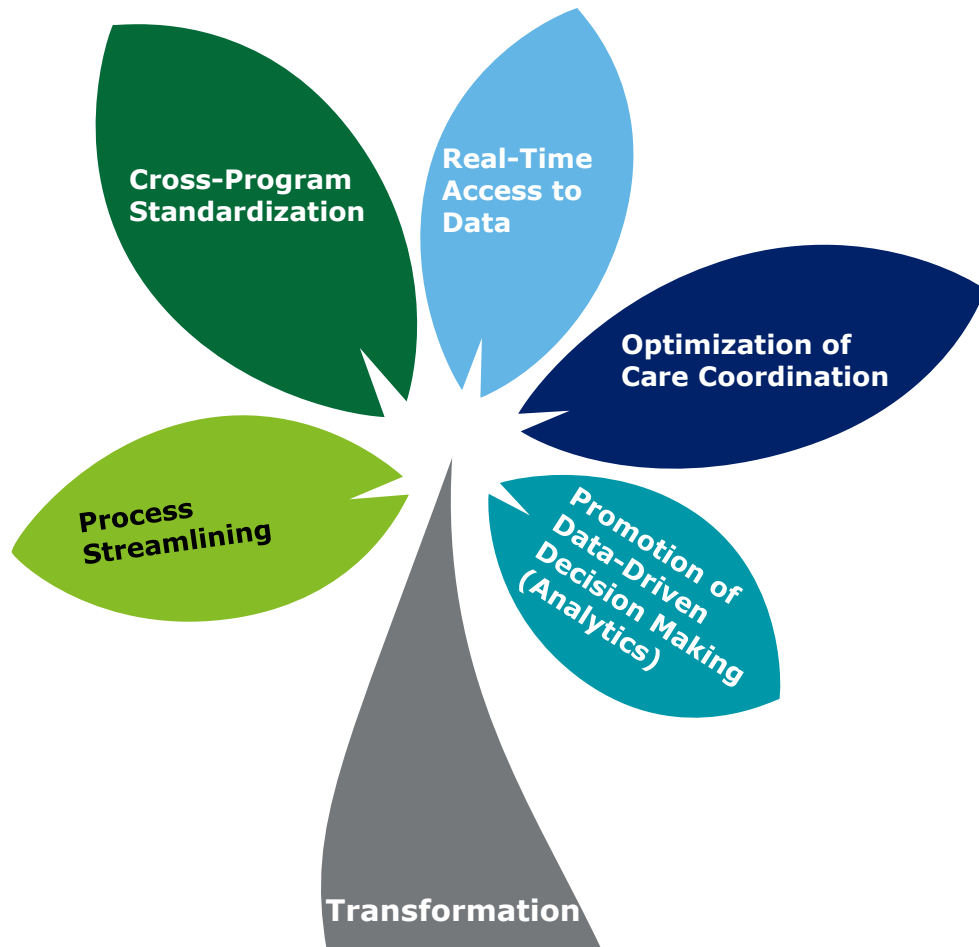
Inefficient and/or Manual Processes

Lack of an IT system that automates the various waiver processes and integrates with other enterprise systems



Guiding Principles for Transformation

Determining the best approach for system modernization that aims to resolve as many existing challenges as possible



- Process Streamlining**
Streamline processes—such as no-wrong-door application intake—to enhance efficiencies and enable faster access to services
- Cross-Program Standardization**
Standardize programs to improve the user experience, ease cross-program communication, and share cost of program and case management
- Real-Time Access to Data**
Improve access to information for all users—including the individuals and their families—to enhance visibility into their own care and benefits
- Optimization of Care Coordination**
Promote visibility into case information for beneficiaries and their care teams to ease communication gaps and promote continuity of care
- Promotion of Data-Driven Decision Making (Analytics)**
Plan for the use of data to inform decision making at all levels of the organization, including how advanced decision support technology will be leveraged



Alignment with Regulations

Focus on a solution that supports requirements of CMS Final Rules

Conflict-Free Case Management

Requires that any case management provider not provide another HCBS direct service, unless that provider is the only one in the participant's geographical area

Person-Centered Planning & Person-Centered Service Plan

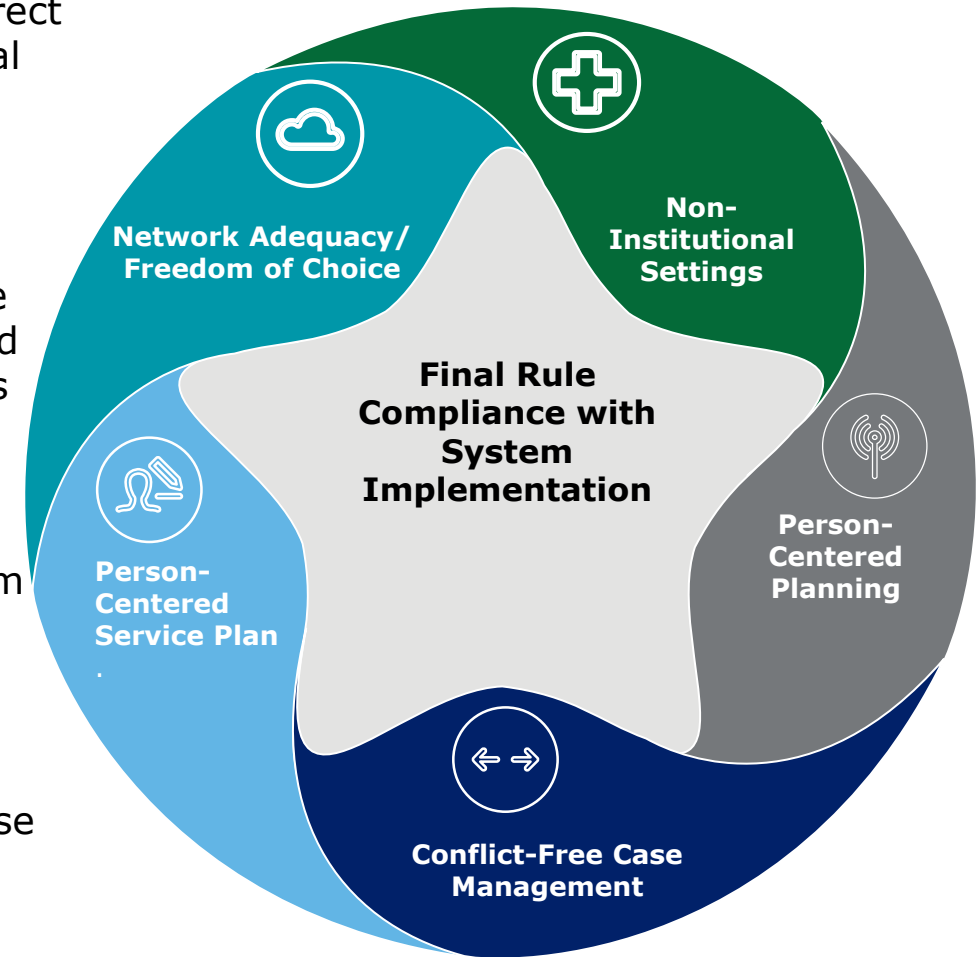
All planning, including updates to plan, have a process established so individuals may make changes to service providers and/or services. Service Plans are oriented around the individual's strengths, preferences, goals, and wanted outcomes, and these are clearly linked and visible to the individuals and their care teams

Non-Institutional Settings

HCBS services cannot be provided in an institutional setting, and the system disallows this by having only approved providers available for selection

Network Adequacy/Freedom of Choice

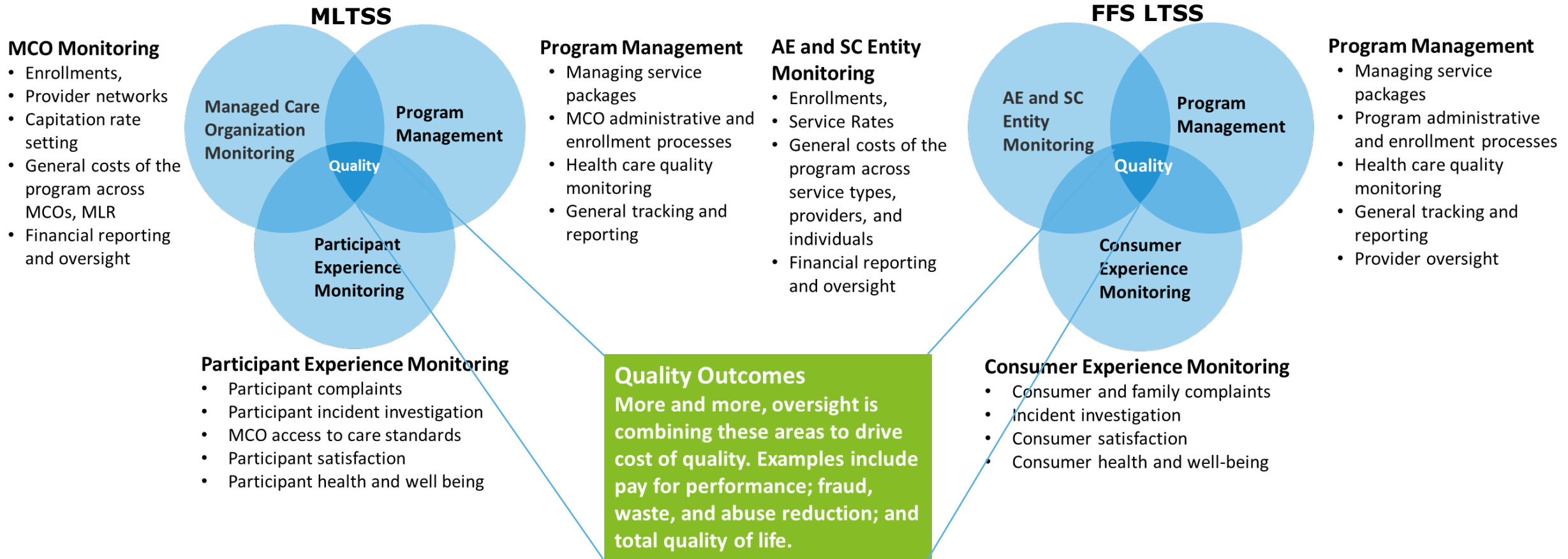
For MLTSS, develop and monitor standards to ensure beneficiaries can efficiently access providers in the network, have multiple providers to choose from, and monitor MCO compliance with these standards



Promotion of Data-Driven Decision Making

Systems should have the ability to leverage data to improve LTSS quality

The goal of LTSS is to deliver services using a coordinated model to improve outcomes and quality while controlling costs. An integrated analytics solution is needed to monitor and control such complex programs regardless of operating model



HealthInteractive™ Connect

A cloud-based, consumer-centric, scalable platform for managing new models of care while driving innovation

CONSUMER HEALTH	PROVIDE EASIER ACCESS <ul style="list-style-type: none">• Access to personal health information test results, referrals, education, appointments and home care / health services plans• Quick access to primary care and care network via Chat, Video and Messaging channels		ENABLE HIGH PERFORMING HEALTH SYSTEMS  OPTIMIZE INTERACTIONS AND DRIVE MEANINGFUL INSIGHTS
PREVENTATIVE CARE	SUPPORT CARE NEW MODELS <ul style="list-style-type: none">• Provide preventative, outreach and health coaching programs to reduce chronic disease and acute care costs• Extend virtual platforms for patients to engage with clinical professionals and health coaches		
HOME CARE	BRING CARE CLOSER TO HOME <ul style="list-style-type: none">• Connect and coordinate home care services across health service providers.• Enable collaboration between care network, service providers and care givers• Monitor patients at home for activity, and vital signs and proactively engage to avoid complications		



HealthInteractive™ Connect

A cloud-based, consumer-centric, scalable platform for managing new models of care while driving innovation

The screenshot displays the HealthInteractive Connect interface for a patient named Patrick Kieran. The top navigation bar includes the HealthConnect logo, a Home button, and a user profile for Patrick Kieran. Below this, a breadcrumb trail shows the patient's current status: Referral, Investigation & Assessment, Planning (highlighted), In Care, and Complete. The main content area is divided into several sections:

- Profile:** Shows the patient's name, ID (00001078), and various action buttons (Follow, Edit, Delete, Change Owner). It also lists profile details such as name, status (Planning), phone number, allergies (Penicillin | Peanuts), age (74), and consent status.
- Related:** A central hub with tabs for Alerts, Details, Charts, Service, Communication, and Survey Responses.
- Alerts (1):** A table listing alerts with columns for Alert Number, Date of Alert, Alert Status, and Type. One alert is shown: AL-0000002, dated 18/12/2018 2:41 PM, with a status of New and type of Adherence Risk.
- Circle of Care (3):** A table listing care team members with columns for Association, Member Status, Role, and Name. Three members are listed: Robert Burger (Caregiver), Patrick Kieran (Patient), and an unnamed Care Coordinator.
- Service Plans (1):** A table listing service plans with columns for Plan No, Client, Plan Template Name, and Status. One plan is shown: SP-0004, for Patrick Kieran, with a template of Skilled Nursing and a status of Ready for Approval.
- Cases (1):** A list of cases with columns for Case ID, Status, Case Reason, and Subject. One case is shown: 00001105, with a status of New, reason of Inquiry, and subject of Change of Address Requ...

On the right side, there is an **Activities** panel with tabs for Map and All Activities. It includes a 'Generate Activities' button, filters (All time, All activities, All types), and a 'Next Steps' section with a 'Welcome Call - 2nd ...' task scheduled for 14-Dec-2018. Below that, a 'Past Activities' section shows a 'Welcome Call' task from 12-Nov-2018.



HealthInteractive™ Connect

A cloud-based, consumer-centric, scalable platform for managing new models of care while driving innovation

The screenshot shows a Salesforce-style dashboard for HealthInteractive Connect. At the top, there's a navigation bar with the user's name 'Patrick Kieran' and a search bar. Below this is a row of five KPI cards: Adverse Events (9), Unassigned Cases (3), Open Cases (2), New Cases (5), and New Documents (8). A 'Launch Video/Chat Conferencing' button is on the right. The main content area is divided into several sections: a table of expiring offers (3), a 'Starrd (4)' section with client cards, an 'Overdue (3)' section with client cards, and a 'Today (4)' section with client cards. On the right, there's an 'Assistant (5)' section with a list of alerts and a 'Clients With Unmet Needs' table.

Expires In (Min)	Type	Status	Offer
31 h 41 m	Homecare	New Offer	232980
39 h 41 m	Homecare	New Offer	231165
55 h 41 m	Homecare	New Offer	239012

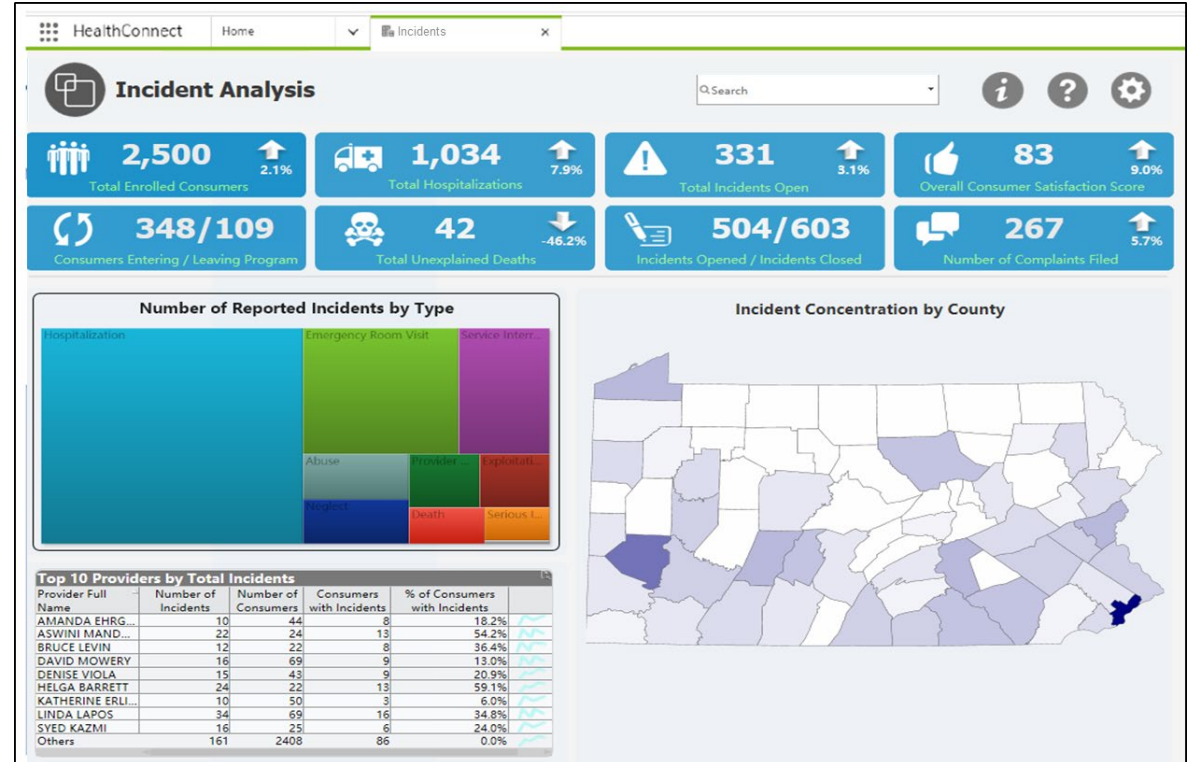
Client	Unmet Visits
Bernard Kaminski	6
Rosann Nerenberg	3
Patrick Kieran	1

1. KPIs
2. Time-sensitive records
3. Tasks
4. Clients with Unmet Needs
5. Important Alerts
6. Telehealth
7. Remote Monitoring



HealthInteractive™ Analytics for LTSS

Using analytics to guide program management, identify risks, and improve quality. Some examples:



- Program Enrollment
- Waitlist
- Incident Trends
- Service Coordination Oversight
- Provider Risk
- Individual Risk



Key Elements of Transformation

A system that aligns expectations and actions among a variety of user groups to manage the ongoing case management process



Measuring and Reacting to Key Metrics

- Gives Program Administrators the ability to gauge overall program health at a glance while supporting drilldown to individual participant and provider details
- Makes Service Coordinators aware of key changes in the status of the individuals they serve



Workflow & Task Management

- Replaces manual and operational processes with a solution that supports timely completion of work items through task assignment
- Routes case to the appropriate next step in the workflow to improve efficiency between process phases



Single View of the Individual

- Provides single view of an individual's case across programs and benefits
- Prevents users from having to navigate multiple systems to see an individual's case details



Person-Centered Service Planning

- Involves individuals/families in the service planning process to determine which services should be requested for authorization
- Includes an individual's goals and objectives and requires each service to be aligned with a goal/objective—promoting service alignment with the needs/wishes of the individual



Trends in LTSS Case Management Technology — What's Next?

Opportunities to move beyond traditional case and program management and leverage Analytics and Artificial Intelligence (AI) to enhance states' management of their programs

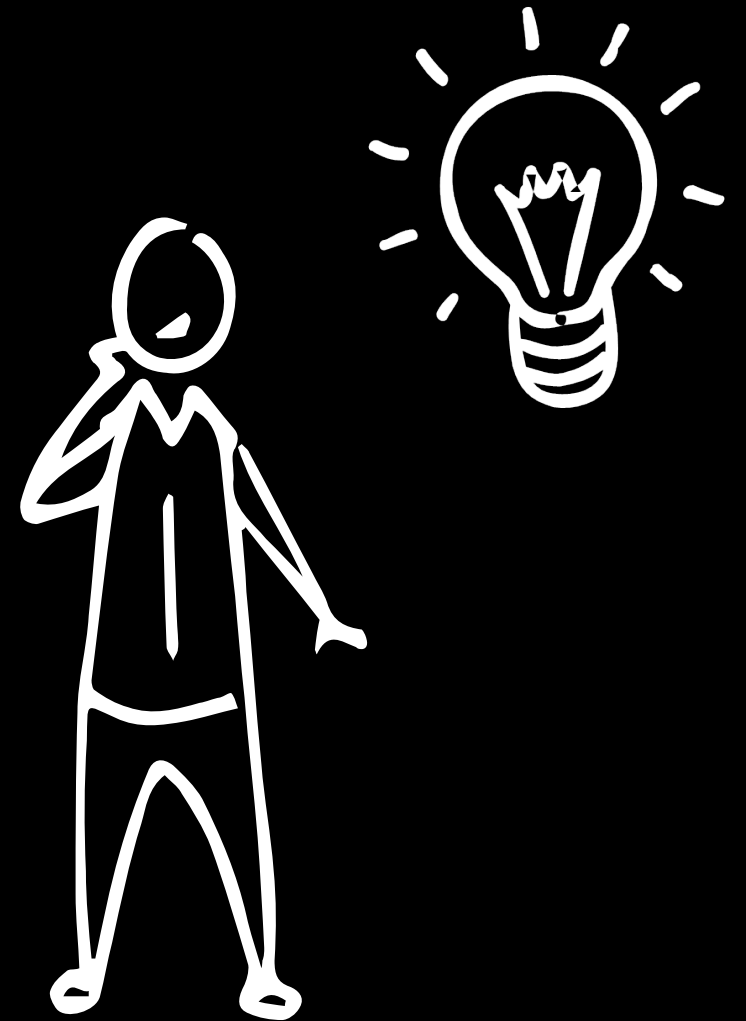


Using Analytics to Predict Risk and Guide People in How to Improve Case Management

- Leveraging Health Information Exchanges (HIEs) for LTSS
- Continuing automation of administrative tasks
- Continuing to increase the data sources used for oversight and case management, including additional health data and data collected as part of Electronic Visit Verification (EVV) implementations
- Using multiple predictive algorithms and machine learning to not just identify issues, but also to identify strategies and tactics that work both for programs and individuals
- Integrating decision support (AI) into case management solutions to directly assist support coordinators



Questions?





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