Strategies for Training Care Coordinators and Care Managers in Integrated Programs

January 14, 2015

Carolyn Ingram, Senior Vice President
Brianna Ensslin, Program Officer

Supported by the California HealthCare Foundation and The SCAN Foundation.
Agenda

- Introductions and CHCS Overview
- Our Research
- Plan Training Strategies
- Shared Health
- Questions
Introductions

Carolyn Ingram  
Senior Vice President  
Center for Health Care Strategies  
cingram@chcs.org

Brianna Ensslin  
Program Officer  
Center for Health Care Strategies  
bensslin@chcs.org

John Cole  
Chief Operating Officer  
Shared Health  
John_Cole@bcbst.com  
615-598-5612

Brooke Boswell  
Product and Implementation Manager  
Shared Health  
Brooke_Boswell@bcbst.com  
615-948-2018
Questions?

To submit a question please click the question mark icon located in the toolbar at the top of your screen.

Your questions will be viewable only to panelists.

Answers to questions that cannot be addressed due to time constraints will be shared after the webinar.
About the Center for Health Care Strategies

A non-profit health policy resource center dedicated to advancing access, quality, and cost-effectiveness in publicly financed health care.
Our Research

- About This Project
- Who Did We Interview?
- Level-Setting: Care Coordinators vs. Managers
- Interview – Key Focus Areas
About This Project

• Researched health plan practices to train care coordinator/manager staff in:
  ► Dual Eligible Special Needs Plans (D-SNPs)
  ► Fully Integrated Dual Eligible Special Needs Plans (FIDE-SNPs)
  ► Managed long-term services and supports (MLTSS) plans
  ► Medicare-Medicaid Plans (MMPs)

• Supported by the California HealthCare Foundation and The SCAN Foundation
## Who Did We Interview?

<table>
<thead>
<tr>
<th>Health Plan</th>
<th>States</th>
</tr>
</thead>
<tbody>
<tr>
<td>Independent Care Health Plan (iCare)</td>
<td>• Wisconsin&lt;br&gt;• D-SNP, FIDE-SNP, and MLTSS plan</td>
</tr>
<tr>
<td>Medica</td>
<td>• Minnesota&lt;br&gt;• FIDE-SNP and MLTSS plan</td>
</tr>
<tr>
<td>‘Ohana Health Plan</td>
<td>• Hawaii&lt;br&gt;• D-SNP and MLTSS plan&lt;br&gt;• WellCare</td>
</tr>
<tr>
<td>Shared Health</td>
<td>• Tennessee&lt;br&gt;• D-SNP and MLTSS plan&lt;br&gt;• Blue Cross Blue Shield</td>
</tr>
<tr>
<td>VNSNY CHOICE</td>
<td>• New York&lt;br&gt;• D-SNP, MMP, and MLTSS plan</td>
</tr>
</tbody>
</table>
Terminology varies across health plans:
- Care coordinators
- Care managers
- Service coordinators

Terminology varies across product lines within health plans

Care coordination/management services varies across states and programs
Interview – Key Focus Areas

- **Overview and History**
  - What coordination services do you provide?
  - Provide an overview and history of training strategies.

- **Tool/Curriculum Design**
  - Describe your current training tool(s)/curriculum.
  - Were these developed internally or through a contractor?
  - What ongoing training do you provide?

- **Qualifications and Recruitment Strategies**
  - What qualifications do you require of your coordinators?
  - Do you target hiring particular types of individuals?

- **Training Evaluation, Constraints, and Plans for Revision**
  - Describe current evaluation strategies in place to assess quality of care coordination services provided.
Plan Training Strategies

- Training
- Structures to Support Training
- Qualifications and Recruitment
- Continuing Education and Staff Development
Develop tailored training approaches

- Develop tailored approaches to provide foundational skills and consider members’ diverse needs
- Incorporate state resources
- Most plans use a combination of plan, state, vendor, and outside organization-developed materials

**iCare**

- Uses Reliance Learning, an online system
- Trains on motivational interviewing
- Incorporates learning on the Resource Allocation Decision process and other state resources
Use multi-modal approaches, tailored to each new hire

- Offer both classroom-based and hands-on learning
- Balance convenience of computer-based/web-based learning and opportunities for dialogue

Medica
- Uses electronic and paper-based manual as foundation for training
- Includes an intensive mentoring program
- Supplements with webinars and guest speakers
Align training programs and staff across similar integrated products

• Most interviewed plans:
  ► Use different staff and/or training programs across some integrated products
  ► Cross pollinate and align training as program requirements allow

‘Ohana
• Use same staff and same training across its MLTSS plan and D-SNP
• Allows members to maintain established relationships during transitions across programs
Dedicate staff or departments exclusively to training

- Most interviewed health plans have full-time staff dedicated to training
- Promote staff from within the care coordinator/care manager team

Shared Health
- Regional trainers conduct in-person trainings for MLTSS staff
- Benefits: More cost effective and preferred by staff
Standardize training of delegates while allowing for flexibility

- Two of the five interviewed plans use delegates
- Strike a balance between providing structure and support, and flexibility

Medica
- Contracts with 60+ entities with 400+ staff
- Conducts a pre-contract audit with delegate entities
- Supplies materials for delegate entities to train staff
- Invites delegates to “Lunch and Learns”
Hire diverse staff with strong community connections

- All interviewed plans look beyond educational qualifications and backgrounds exclusive to the medical field

VNSNY CHOICE

- Experience with Medicare-Medicaid enrollees, long-term care, and home- and community-based services preferred
- Hire from within larger VNSNY organization, such as home care agency staff
Identify and address new program requirements and issues in ongoing training

- Have mechanisms to ensure materials are kept up-to-date
  - Periodic newsletters
  - Webinars
  - Shared drive or intranet

‘Ohana
- WellCare University
- Identifies issues to address during weekly meetings
- Remote staff are flown in for face-to-face contact
Cultivate internal feedback mechanisms and a culture of open dialogue

- Most plans interviewed emphasize importance of creating a workplace that promotes shared learning and honest exchange of ideas and challenges

**iCare**

- Open plan office space
- Uses SocialCast as an internal “Facebook”
- Uses its intranet as an idea generator
- Produces report cards for care coordinators/managers
CHCS – Strategies for Training Care Coordinators/Case Managers
Tennessee Medicaid LTSS and Dual History

• The Bureau of TennCare (State of Tennessee 1115 Waiver Medicaid program) integrated LTSS with the Managed Care program in March 2010.
• The Bureau of TennCare implemented a Money Follows the Person program within the MLTSS program in October 2011.
• The Bureau of TennCare submitted its Capitated Financial Alignment Demonstration program design document to CMS in April 2012.
• The Bureau of TennCare withdrew its Capitated Financial Alignment Demonstration program design document from CMS consideration in December 2012.
• The Bureau of TennCare required all TennCare Managed Care organizations to operate a state-wide Dual Eligible Special Needs Plan by January 2015.
Organizational Structure

**MLTSS**

- **MLTSS Director**
  - **Manager of Clinical Operations (Care Coordination)**
    - Managers (5)
      - Supervisors (17)
        - Care Coordinators (190)
  - **Manager of Operations (Support Center)**
    - Manager (1)
      - Supervisors (2)
        - Member Associates (15)

**Other areas of operation:**
- Operational Compliance
- Provider Networks
- Quality

Optimal Mgr:Sup Ratio 1:4
Optimal Sup:CC Ratio 1:12

*Training Support Provided by MLTSS Education and Staff Development Team: 1 Supervisor, 5 Regional Trainers, 2 Support Center Trainers*

** DSNP**

- **Clinical Operations and Support Manager**
- **Manager, Medical Management**
  - **Supervisor, Medical Management**
    - 13 BH Care Coordinator
  - **Supervisor, Medical Management**
    - 12 Nurse Care Coordinators

**Population Health Management**
**Dual SNP Medical Management**
**Organizational Chart**
Support Center Operations Services

- Perform level 2 customer support for LTSS members;
- Verify the plans of care and other data created by the care coordinators;
- Schedule HCBS care for the member with the provider;
- Operate a process to send the HCBS providers a confirmation form that the provider will use to ensure that they can provide HCBS to the member;
- Send the provider authorizations to confirm their schedule and approval to begin services;
- Validate the LTSS information within the system of record;
- Update the member contact information obtained from the care coordinators within the system of record;
- Manage correspondence and submissions to and from the State; and
- Coordinate with Fiscal Employer Agents.
# MLTSS Training

## MLTSS – New Hire

<table>
<thead>
<tr>
<th>Training Method</th>
<th>Care Coordination Staff (Field-Based)</th>
<th>Support Center Staff (In-House)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Location</td>
<td>Regional Office/Field</td>
<td>Nashville Office</td>
</tr>
<tr>
<td>Length</td>
<td>7 weeks</td>
<td>3 weeks</td>
</tr>
<tr>
<td>Elements</td>
<td>Classroom based:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Program Concepts</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Systems Training</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Individual/Group Exercises</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Safety Training (Safety Bags)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Self-Defense Training</td>
<td></td>
</tr>
<tr>
<td>Field based:</td>
<td>Paired with a mentor starting Week 1 of Training</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Meet/Greet; Expectations</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Visits/Checklist</td>
<td></td>
</tr>
<tr>
<td>Individual Learning:</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Homework Exercises</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Case Studies</td>
<td></td>
</tr>
<tr>
<td>Follow-Up</td>
<td>1:1 in-person support session with regional trainer.</td>
<td>1:1 in-person support session with in-house trainer.</td>
</tr>
<tr>
<td></td>
<td>Additional training support, as needed.</td>
<td>Additional training support, as needed.</td>
</tr>
<tr>
<td>Shadowing</td>
<td>Support Center Shadowing</td>
<td>Ride-Along Shadowing</td>
</tr>
</tbody>
</table>

## MLTSS – On-Going

<table>
<thead>
<tr>
<th>Training Method</th>
<th>Care Coordination Staff (Field-Based)</th>
<th>Support Center Staff (In-House)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Webinars</td>
<td>Bi-weekly rotation of web-based: training with:</td>
<td>Bi-weekly in-person training with Support Center staff</td>
</tr>
<tr>
<td></td>
<td>- Managers/Supervisors</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- All Field Staff</td>
<td></td>
</tr>
<tr>
<td>1:1</td>
<td>As identified by Manager/Supervisor, and as needed:</td>
<td>As identified by Manager/Supervisor, and as needed:</td>
</tr>
<tr>
<td></td>
<td>- In-person</td>
<td>- In-person</td>
</tr>
<tr>
<td></td>
<td>- Telephonic</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Web-based</td>
<td></td>
</tr>
<tr>
<td>Small Group</td>
<td>As identified by Manager/Supervisor, and as needed:</td>
<td>As identified by Manager/Supervisor, and as needed:</td>
</tr>
<tr>
<td></td>
<td>- In-person</td>
<td>- In-person</td>
</tr>
<tr>
<td></td>
<td>- Telephonic</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Web-based</td>
<td></td>
</tr>
<tr>
<td>Regional Staff</td>
<td>Upon new program requirements, and as needed:</td>
<td>Upon new program requirements, and as needed:</td>
</tr>
<tr>
<td></td>
<td>- In-person</td>
<td>- In-person</td>
</tr>
<tr>
<td>All Staff</td>
<td>As Needed:</td>
<td>N/A</td>
</tr>
<tr>
<td></td>
<td>- In-person</td>
<td></td>
</tr>
</tbody>
</table>
Care Coordination Safety

• Security Tools Available
  – Command Center
  – ActSoft

• Prevention and Control

• Incident Tracking

• Bloodborne Pathogens

• Safety Sacks (pictured at right)

• Self-Defense Training

<table>
<thead>
<tr>
<th>#</th>
<th>Item/Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Poncho</td>
</tr>
<tr>
<td>2</td>
<td>Whistle Key Ring</td>
</tr>
<tr>
<td>3</td>
<td>Emergency Survival Blanket</td>
</tr>
<tr>
<td>4</td>
<td>First Aid Kit</td>
</tr>
<tr>
<td>5</td>
<td>Dynamo 4-in-1 Emergency Radio/ Flashlight</td>
</tr>
<tr>
<td>6</td>
<td>Fix a Flat</td>
</tr>
<tr>
<td>7</td>
<td>3 Sets of Shoe Covers and Gloves; 3 Masks</td>
</tr>
<tr>
<td>8</td>
<td>Small Non-Woven Reflective Hit Sports Pack</td>
</tr>
</tbody>
</table>
MLTSS Training Business Process Documents

• Created as a training guide for the MLTSS program – defines operational process and system documentation

• Developed into a reference guide during visits

• Used to develop custom MLTSS systems for the Care Coordinator staff
Intake Visit for New Member

1. Contact Member/Rep/POA via phone to Schedule Visit and document in SOR.
2. Utilize Workbook Builder to create Workbook template with required and optional documents specific to member's type and visit. This includes Plan of Care for HCBS/At-Risk members, and Supplement to NF Plan of Care for NF members, if applicable.
3. Document member's address, contact information for member/caregiver, and caregiver's relationship to member in Workbook, if applicable.
4. Visit member, complete all necessary documents, and obtain member signatures in the Workbook during the Intake Visit. This includes Plan of Care for HCBS/At-Risk members, and Supplement to NF Plan of Care for NF members, if applicable.
5. Document Consumer Direction Representative, if applicable, in Workbook. Include name, address, phone number, and relationship to member.
6. Utilize Workbook Uploader to upload all documents completed in the Workbook into SOR. This includes member's signature Plan of Care.
7. Route to Support Center in SOR.
8. Mail POA Letter, if applicable.

- Does member elect Consumer Direction?
  - NO: HCBS At-Risk
  - YES: Transition HCBS to NF
- Does member want to Transition to NF?
  - NO: LTSS Group
  - YES: Ongoing Care Coordinatio NF
- Transition NF to HCBS
- Does member want to Transition to HCBS?
  - NO: Route to Support Center in SOR.
  - YES: Create a Nursing Facility Census Record in SOR.
- Mail POA Letter, if applicable.
Systems Used For Training

• Builder / Workbook (planned upgrade to Mobile Application)

• Plan of Care Scheduling Software

• MLTSS Reporting Tables
Questions?

To submit a question please click the question mark icon located in the toolbar at the top of your screen.

Your questions will be viewable only to panelists.

Answers to questions that cannot be addressed due to time constraints will be shared after the webinar.
Visit CHCS.org to...

- **Download** practical resources to improve the quality and cost-effectiveness of Medicaid services
- **Subscribe** to CHCS e-mail updates to learn about new programs and resources
- **Learn** about cutting-edge efforts to improve care for Medicaid’s highest-need, highest-cost beneficiaries