

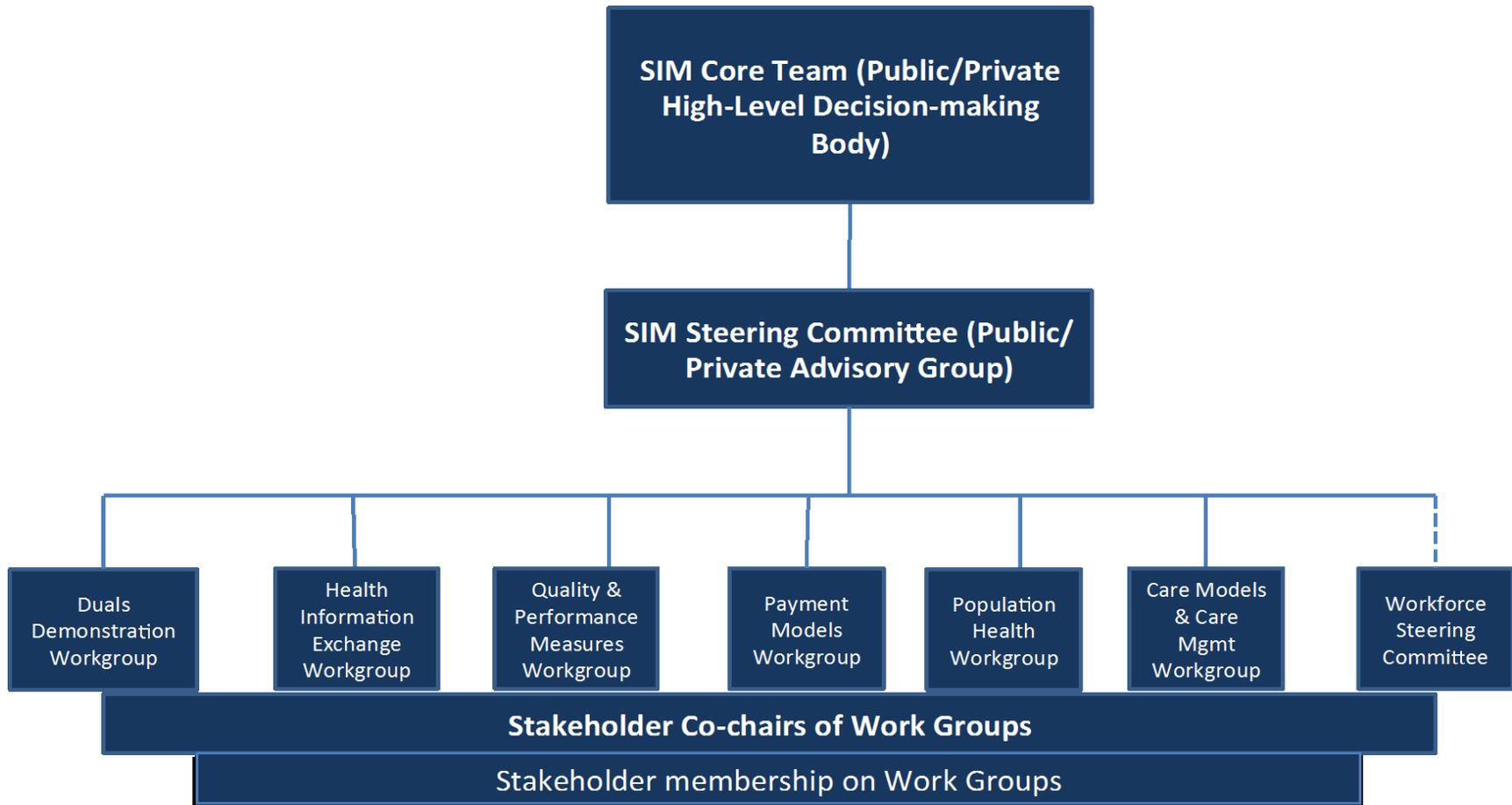
DLTSS Work Group

Including Disability and Long Term
Services and Support Issues in
Vermont Health Care Reform

VHCIP

- 45 M to spend over four year period
- Leadership from Governor and GMCB
- Public/Private partnership
- Core Team, Steering Committee and Workgroups
- Triple Aims: Improve Care, Improve Health of Vermont Population, and & Reduce [unnecessary] Cost

Vermont health care innovation project governance structure*



- Note: The Duals Demonstration Work Group is now the Disability and Long Term Service and Support (DLTSS) Work Group
6/9/2014

Overlap with Other Work Groups

Payment Models- that encompass dltss services and related social outcomes as well as traditional medical services

Care Models and Care Management- proposed model of care, provider training for integrated, culturally responsive, and effective care

Health Information Exchange- IT capacity within DLTSS networks and providers as well as hospitals, primary care, other health settings

Quality and Performance Measures- subset analysis, quality measures of concern to DLTSS Population, including social outcomes.

Population Health Management- wellness and social indicators encompassing disability issues, accessibility, prevention

Workforce Steering Committee- workforce capacity/compensation issues re DLTSS service needs

Work on Products/Activities

- ACO population analysis begun- revisit in July
- QPM recommendations to QPM workgroup
- Care Model recommendations to Care Model/Care Management Work Group- present in July
- Work beginning on provider training recommendations
- monitoring State work on DLTSS financing options
- Need to spend time on beneficiary engagement issues.

Basis for Design of Proposed DLTSS Model of Care

NATIONAL EVIDENCED-BASED DLTSS MODEL OF CARE ELEMENTS				
Core Elements	Commission on Long-Term Care, September 2013 Report to Congress	CMS & National Committee for Quality Assurance (NCQA) DLTSS Model of Care	Medicaid Health Homes (CMS)	Consumer-Focused Medicaid Managed Long Term Services and Supports (Community Catalyst)
Person Centered and Directed Process for Planning and Service Delivery	✓	✓	✓	✓
Access to Independent Options Counseling & Peer Support	✓	✓		✓
Actively Involved Primary Care Physician		✓	✓	
Provider Network with Specialized DLTSS Expertise	✓	✓	✓	✓
Integration between Medical & DLTSS Care	✓	✓	✓	✓
Single Point of Contact for person with DLTSS Needs across All Services	✓	✓	✓	
Standardized Assessment Tool	✓	✓		✓
Comprehensive Individualized Care Plan Inclusive of All Needs, Supports & Services		✓	✓	✓
Care Coordination and Care Management	✓	✓	✓	✓
Interdisciplinary Care Team		✓	✓	✓
Coordinated Support during Care Transitions	✓	✓	✓	✓
Use of Technology for Sharing Information	✓	✓	✓	✓

Challenges

- Broader ACO attribution issues
- DLTSS attribution/fragmentation
- Knowledge/capacity across systems
- The scope of the project-critically needed infrastructure work but overwhelming for all involved
- Cost and sustainability
- Performance measures-valid dtss quality measures are not established. Have to start building this in Vermont and elsewhere,
- Building equal partnerships between medical and dtss providers
- Beneficiary rights and engagement from governance through care provision...