

## MassHealth Chapter 171 Annual Family Support Plan for Fiscal Year 2016

### Human Service Agency Overview of Family Support

*What is your agency's definition of family support?*

The Executive Office of Health and Human Services (EOHHS) serves as the single state agency for Medicaid in Massachusetts. EOHHS, through its Office of Medicaid and in conjunction with its constituent agencies, administers the MassHealth program, which pays for medically necessary health care services for eligible individuals. Through its various operational areas, MassHealth routinely seeks input and consultation from families and constituents. Several of these routes for input are described in this report. Family support includes consultation with families of individuals who utilize MassHealth-supported services, both on an individual basis and on a system level.

*Describe where family support fits within your overall agency.*

This report will describe several key areas wherein MassHealth creates opportunities for input and consultation from families and constituents. Various operational units of MassHealth seek input from families, constituents, advocates and stakeholders.

*How was substantial consultation and input from families obtained in the development of this plan?*

The One Care program is a new health care option for people with disabilities who are 21 to 64 years old and eligible for both MassHealth and Medicare. One Care makes it easier for a person to get all of the services they need, including all their MassHealth and Medicare benefits and care coordination, from a single plan. MassHealth has undertaken extensive and regular meetings with stakeholders to obtain consultation with and input from a wide variety of stakeholders, including consumers and their family members and caregivers. Throughout the past year, MassHealth communicated regularly with stakeholders through monthly open meetings, email, a website ([www.mass.gov/masshealth/duals](http://www.mass.gov/masshealth/duals)), and a dedicated email box ([duals@state.ma.us](mailto:duals@state.ma.us)).

The Assistant Secretary for MassHealth hosted a series of MassHealth listening sessions across the Commonwealth. They were held in Boston, New Bedford, Lawrence, Worcester and Springfield. These sessions were attended by 50 – 150 people representing potential and current MassHealth members, family members, providers and advocates. MassHealth received excellent feedback on ways that it could improve programs for individuals with disabilities and elders.

The Personal Care Attendant (PCA) Workforce Council provides opportunities to families and members for input into the MassHealth PCA program. The Council is comprised of members who use PCA services with the Undersecretary of Health and Human Services as the chair. The role of the Council is to insure the quality of long-term, in-home, personal care by recruiting, training, and stabilizing the work force of personal care attendants. The Council has a website that encourages families/caregivers and members using PCA services to share their views and ideas about the PCA program. The Council also holds quarterly meeting that are open to the public. The website link is: [www.mass.gov/pca/](http://www.mass.gov/pca/).

The Children's Behavioral Health Initiative provides a number of opportunities and activities through which families and caregivers provide input regarding the programming administered by MassHealth, as well as the specific services their children receive. Also in the arena of behavioral health, the MassHealth Office of Behavioral Health engages the Massachusetts Behavioral Health Partnership (MBHP) to provide behavioral health services for many MassHealth members. MBHP has a Family Advisory Council which consists of family members of members with behavioral health conditions and family advocates. The role of the council is to provide oversight and input into the quality management process as it relates to service development, implementation, and delivery to Members and their family members.

In addition, there is an Office of Medicaid Monthly Advocates meeting at which consumer advocates provide input to the agency on a wide range of matters. The consumer advocate groups bring any issues or concerns that consumers, family or caregivers may have concerning Medicaid. Monthly meeting dates, locations and agenda items are all posted on-line. Agenda items routinely include MassHealth updates and information on new initiatives. Part of the meeting time is spent in workgroup sessions in which consumer advocates and MassHealth staff discuss specific agenda items.

## **I. Family Empowerment**

*What is the agency currently doing to promote or enhance family input or direction in the development of agency policies and procedures, program development, and evaluation of services?*

In an effort to reach out to and include families and members, MassHealth's managed care program called One Care has a One Care Implementation Council. The Implementation Council plays a key role in monitoring access to health care and compliance with the Americans with Disabilities Act (ADA), tracking quality of services, providing support and input to EOHHS, and promoting accountability and transparency. The Implementation Council, which must have at least 51% consumers, welcomes attendance at its meetings from all stakeholders and members of the public with interest in this new health care option. The Implementation Council is going strong and continues to receive substantive feedback from council members.

As MassHealth implements the MFP Demonstration it continues to hold quarterly meetings that are open to the public and welcome input from consumers, families and caregivers. In addition, the MFP website provides extensive information and access to members and families/caregivers with updates and opportunities to ask any questions about MFP.

A major focus of family input and direction is through the Children's Behavioral Health Initiative (CBHI). CBHI is an interagency initiative of the Commonwealth's Executive Office of Health and Human Services (EOHHS) whose mission is to strengthen, expand and integrate Massachusetts state services into a comprehensive, community-based system of care, to ensure that families and their children with significant behavioral, emotional and mental health needs obtain the services necessary for success in home, school and community. Initially formed to coordinate implementation of a court ordered remedy, CBHI was developed by EOHHS to go beyond the requirements of the remedial order and to undertake a large-scale interagency effort to develop, over time, an integrated system of state-funded behavioral health services for children, youth and their families.

Key to the remedial order and the CBHI is the principle that families are critical partners in service planning for their children. This is perhaps best exemplified through an important behavioral health service offered by MassHealth: Intensive Care Coordination (ICC). This service is grounded in the approach that a Care Coordinator partners with the parent or caregiver and the identified child to build

a Care Planning Team (CPT) that includes “professionals,” i.e. therapists, teachers, social workers, and “natural supports,” i.e. individuals important in the lives of the family and child such as relatives, friends, etc. Typically, the team also includes what is known as a Family Partner. A Family Partner is a parent/caregiver of a child with special needs, who has been trained to work with families to ensure they receive the services they need. Family Partners are identified and recruited through a CBHI grant made available to the Parent Professional Advisory League (PPAL), a statewide grassroots family organization that advocates for improved access to mental health supports for children. The CPT creates an individualized and holistic service plan that builds upon strengths of the child and family while also addressing their needs. They meet regularly to implement and monitor the plan and make course corrections as necessary in order to meet the family’s goals. The foundational approach in CBHI respects the expertise of families and includes them as key decision-makers in service planning for their children.

MassHealth, through its Managed Care contractors, is using two state-of-the-art assessment tools to evaluate ICC provider practice: the Wraparound Fidelity Index 4.0 (WFI-4) and the Team Observation Measure (TOM). The WFI-4 is completed through confidential telephone interviews with the parent or caregiver. Another example of family input to evaluation of services is through the MBHP Family Advisory Council. Family members provide oversight and input into quality management processes associated with the development, implementation, and delivery of services to MassHealth members.

*How will agencies change how they are currently doing business to make their agency and services more family-friendly and provide opportunities for families and individuals to have greater input and influence?*

The new MassHealth initiatives, One Care, Money Follows the Person (MFP) Demonstration and MFP Waivers, are good examples of how MassHealth has embraced input from consumers/family members. MassHealth will continue with the stakeholder public meetings that provide wide and timely opportunities for input, discussion and consultation from consumers, families and caregivers. The PCA and MFP websites provide extensive information and access to members and families/caregivers with updates and opportunities to ask any questions. Consumers, families and caregivers were involved in developing the One Care public awareness and enrollment materials and will continue as advisors and presenters in the development of training webinars.

The Children’s Behavioral Health Initiative ensures that family’s voices are heard related to evaluation of services utilizing the instruments noted above. More generally, the Office of Medicaid Advocates group mentioned above will be requested to devote regular and consistent meeting time to providing input and consultation to MassHealth to support agency efforts to provide flexible supports to families.

## **II. Family Leadership**

*What training opportunities does the agency currently offer to families/individuals that would enhance their repertoire of skills?*

The PCA Workforce Council and the Fiscal Intermediaries have developed trainings for consumers, families and caregivers on electronic submission of PCA workers timesheets. The PCA Workforce Council has also organized public forums for consumers, families and caregivers to voice any issues or concerns they may have about the PCA program. The PCA Workforce has also implemented, with the MassHealth Office of Long Term Services and Supports, a new benefit for Personal Care Attendants.

Effective in 2014, new PCAs must attend 3 hour PCA orientation training. Their consumer/employer also has the option to choose to provide the training. In addition, due to legislation passed in November of 2014, PCAs are now eligible for paid sick leave.

The Children's Behavioral Health Initiative provides an excellent example of opportunities for family leadership; these opportunities provide hands-on experience and training for families. For example, family/caregivers act as key advisors to Community Service Agencies (CSA), which are tasked with delivering ICC. MassHealth requires that each CSA develop and coordinate a local Systems of Care Committee, which includes parents/caregivers. The committee supports the CSA's efforts to establish and sustain collaborative partnerships among families, parent/family organizations, traditional and non-traditional service providers, community organizations, state agencies, faith-based groups, local schools, MassHealth and its contracted Managed Care Entities, and other community stakeholders. These committees meet monthly on an ongoing basis.

*What new ideas or proposals would the agency initiate to give families/individuals more opportunities to develop and/or exercise their leadership skills?*

The One Care Implementation Council was initiated earlier this year to give wide-ranging opportunities for input into the implementation of the One Care demonstration that will serve dually eligible MassHealth members. This unique approach to stakeholder input into a key MassHealth initiative was begun based on input from stakeholders and included an open and widely-publicized procurement process to contract with individuals who self-identified to engage as members of the Council, which must be 51% consumers.

### **III. Family Support Resources and Funding**

*What are the current resources/funding that the agency allocates to family support?*

As the major health insurer of low income families in Massachusetts, MassHealth is primarily involved in providing resources and funding to support families. Some examples of specific programs may illustrate aspects of this wide-ranging support. The One Care program will provide health insurance coverage to younger disabled adults, and, by extension, to their families/caregivers. One Care plans are obligated to undertake person-centered planning and service plan development directed by plan enrollees. The goal of One Care is to provide integrated and coordinated care for enrollees, ensuring a more synchronized set of services to members that addresses their needs for medical, primary care, behavioral health care, and long term services and supports.

Other examples can be seen in MassHealth HCBS waivers that provide support to members and families. Case management activities are person-centered, have the participant at the core of the care planning team and incorporate input for developing individualized service plans for the individuals being served and, as appropriate, their families. Three EOHHS agencies currently operate ten different HCBS waivers, several of which include family support, and/or family training as waiver services. In addition, as described above, all children receiving services through the Children's Behavioral Health Initiative are engaged with intensive care coordination.

*What are ways that the agency provides flexible funding to families that allow them to customize their services?*

The MassHealth Personal Care Attendant (PCA) program affords members a state plan service that is entirely self-directed. MassHealth individuals, who are eligible to receive PCA services choose their personal care attendant, train their PCAs as they see fit, and arrange service times at their convenience.

Similarly, the Autism waiver, operated through the Department of Developmental Services, provides an excellent example of a program that affords broad flexibility in provision of HCBS to waiver participants (up to age nine). This waiver provides for a budget of up to \$25,000 for each participant/family who then will self-direct the services they receive and select the providers of such services. Several other waivers provide opportunity for participants to self-direct certain services, including the newly operational MFP waivers.

*Are there new initiatives proposed to help families design individualized services and supports?*

As noted above, a person-centered approach to development and implementation of individualized care plans is central to all of MassHealth's HCBS waivers, and is a foundational component of the One Care program. Moreover, involvement of and direction from parents/caregivers and the individual is foundational to how the CBHI program operates. Intensive Care Coordination, delivered through the Wraparound model of service planning ensures that the child's Care Coordinator partners with the parent/caregiver, the identified child and, in some cases, a Family Partner to form a highly individualized Care Planning Team and holistic service plan that builds upon the child's and family's strengths and addresses their needs. The process is designed to respect and utilize the expertise of families and ensure they are central to service planning decisions.

#### **IV. Accessing Services and Supports**

*What are current examples of ways the agency is educating families on how to access services in a timely and effective manner?*

New MassHealth members are mailed a MassHealth Enrollment Guide within 14 days of their approval for benefits. The Enrollment Guide discusses MassHealth covered services, including choosing a primary care physician (PCP), prenatal care, emergency care, and specialists, as well as the rights and responsibilities of MassHealth members. In addition, members are provided with tips on the best ways to choose a PCP, how to choose a health plan that works best for them, and what to do after enrolling into a plan, including making an initial appointment with their PCP, getting regular check-ups, notifying their PCP when they have had an emergency room service, etc. MassHealth also has a website for members, which includes information about how to choose a health plan and doctor as well as coverage updates, wellness information, and tobacco cessation benefits.

MassHealth has provided public meetings for stakeholders, consumers and families about One Care. In addition, there have been workgroups on quality, member notices and assessments. To increase understanding of One Care, community outreach initiatives have been developed that include public awareness kit mailings to community based organizations and presentations to and meetings with specific groups and conferences. One Care has developed a website, outreach materials (poster, flyer and booklet), three videos for the website and YouTube (in American Sign Language), and an information packet that includes an enrollment form.

The Money Follows the Person (MFP) Demonstration and MFP Waivers continue with quarterly stakeholder meetings that are open to consumers and families. Brochures and websites have been

developed to educate consumers, families and caregivers about the MFP Demonstration and MFP Waivers. There is a MFP website with up-to-date information as well as a MFP email address where consumers, families and caregivers can submit questions to MassHealth staff.

The PCA Workforce Council has a website that provides updates for consumers, families and caregivers with links to other websites with pertinent information. MassHealth developed a PCA consumer handbook with extensive information about the PCA program, including lists of organizations with contact information helpful to the consumer.

MassHealth produces publications regarding specific populations, including members aged 65 and older who might be eligible for Senior Care Options, women who are pregnant, children with behavioral health issues, etc., and what they can do to utilize the services that are available for their specific situation.

*What are some illustrations of different services and resources which promote good access to information and referral?*

MassHealth produces various booklets and brochures, as described above, to promote access to information and referral. Examples of such resources include: a MassHealth Members Handbook, the Introduction to One Care booklet, the One Care website, brochures highlighting various HCBS waivers, PCA Handbook, CBHI brochures, PCP Member Handbook and a SCO brochure.

In addition, the MassHealth website has a section specifically dedicated to information for MassHealth members. This link includes information on choosing a health plan and doctor, the MassHealth card, covered services, coverage updates, wellness, and applications and forms. This link also offers information about the HCBS waivers, the PCA Workforce Council and CBHI.

As the health insurer of approximately 1.3 million Massachusetts citizens, MassHealth makes functionality available for members to manage their MassHealth and other health assistance benefits online through "My Account Page." This allows members to see and update information about their household benefits without having to call MassHealth. Members also have access to local MassHealth Enrollment Centers where they are able to walk-in and speak with MassHealth representatives regarding their eligibility for MassHealth and various benefits.

*What new initiative(s) will the agency undertake to promote good local access to information and resources?*

Through the Balancing Incentive Payment program (BIP), grant money has allowed the state to hire eight new eligibility specialists in the MassHealth enrollment centers. They will be co-located at community based organizations, known as the Aging Disability Resource Consortia (ADRC) Network.

As noted above, MassHealth Enrollment Centers are in four locations across the state. Individuals and/or family members can walk-in to obtain information, sign up for MassHealth as well as learn about programs and benefits available to them through MassHealth.

Through its Money Follows the Person demonstration, MassHealth is in the process of engaging with up to thirty eight local entities in contiguous areas across the Commonwealth to provide access for and transition coordination (TC) services to MFP-eligible MassHealth members, to assist them in transitioning out of facility settings and into community living with long term services and supports. These TC entities will be charged with providing information and direct services to individuals who wish

to take advantage of the MFP demonstration, and will complete their work at a local level, working through the nursing facilities and long-stay hospitals in the state.

The Centers for Medicare and Medicaid Services (CMS) have promoted the production, availability and delivery of linguistically appropriate information and services through the Children's Health Insurance Program Reauthorization Act which provides for increased federal matching funds for translation and interpretation services. MassHealth takes advantage of the opportunity for this increased funding, as feasible, in the provision of such services to individuals and families.

## **V. Culturally Competent Outreach & Support**

*What are the current activities or services that the agency offers that ensure culturally appropriate access and supports to ethnically, culturally, and linguistically diverse families and individuals?*

EOHHS, including MassHealth leadership, has engaged in multiple meetings and interactions with stakeholders to ensure culturally competent and appropriate outreach and support. These meetings have been with members/families who communicate in many languages other than English, including American Sign Language.

Further, MassHealth is continually striving to ensure that outreach to families and individuals is linguistically appropriate, and culturally competent. The MassHealth Publications Department works to publish materials in multiple languages and to ensure that individuals who may speak diverse languages are informed of the importance of various notices.

Our MassHealth Customer Service Unit hires representatives that are bilingual. These representatives are able to speak a variety of languages including Spanish, French, Portuguese, Vietnamese, Cantonese, Russian, and Cape Verdean. All customer service representatives are trained on how to handle calls from individuals with limited English proficiency. Interpreters are available if there are no available customer service representatives on staff that speak the caller's language. The MassHealth Enrollment Center's staff members are trained on how to use Language Line services for non-English speaking members. MassHealth provides applicants and members their rights and responsibilities through the Member Booklet and the MassHealth & You guide which are part of the application in various languages. The MassHealth Fact Sheet is also translated into various languages. MassHealth managed care organization contracts require the managed care organizations to participate in all EOHHS efforts to promote the delivery of services in a culturally competent manner to all members, including those with limited English proficiency and diverse cultural and ethnic backgrounds.

*What new ideas/initiatives will the agency propose to outreach and meet the needs of culturally diverse families and individuals?*

MassHealth's One Care public awareness campaign has been designed to include a culturally diverse audience. The One Care flyers, booklets, posters, and public awareness kit to community based organizations have been printed in English, Spanish, large print (flyer and booklets available in Braille) and at the 6th grade reading level. There are public awareness spots on Radio PSA in both English and Spanish, and there will be videologs in American Sign Language.

The MFP Demonstration, MFP Waiver brochures and the PCA consumer handbook are all available in both English and Spanish.

## **VI. Interagency Collaboration**

*What are the current activities that the agency is collaborating with other EOHHS agencies to promote more effective service delivery and maximization of resources?*

MassHealth, through its community-based waivers, collaborates with several EOHHS agencies, including the Department of Developmental Services, Executive Office of Elder Affairs, and Massachusetts Rehabilitation Commission to deliver home and community-based services (HCBS) to eligible waiver participants.

MassHealth worked extensively with the Department of Developmental Services (DDS) in developing three waivers to serve participants with an intellectual disability. DDS provided multiple opportunities for family input on the plan to operationalize these waivers. In addition, MassHealth administers and DDS operates the Commonwealth's Autism HCBS waiver. See DDS's report regarding their extensive interaction with stakeholders, families, and children's advocates from whom we obtain and use input in the on-going operation of the Autism waiver serving children 8 and under.

MassHealth meets and collaborates routinely with the Massachusetts Rehabilitation Commission (MRC) to oversee the on-going operation of multiple HCBS waivers, including the Traumatic Brain Injury waiver, the Acquired Brain Injury (ABI) waivers and the MFP waivers. These waivers were developed with input from and review by advocates, individuals with disabilities, and their families.

All HCBS waivers provide case management to waiver participants and ensure that service plan development and service delivery are person-centered and provide opportunity for input and consultation with both participants and, as directed by participants, families/guardians.