

**Annual Plan for Family Support for MassHealth FY06
Office of Medicaid**

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?

The MassHealth program is continually engaged in a variety of initiatives that support this goal:

- During the past year, the Community Case Management (CCM) Program was initiated through a contract with UMass Medical School. CCM provides comprehensive case management for the Commonwealth's most medically complex children so that they can be cared for in their own homes. Each of the approximately 500 families served is assigned a registered nurse case manager with whom they have ongoing personal contact. As previously reported, families participated in a series of five focus groups throughout the state during the implementation phase of the program. CCM is contractually obligated to conduct ongoing quality assurance activities, including yearly member satisfaction surveys. Families are encouraged to provide continuous feed-back and suggestions for improvement.
- The Office of Acute and Ambulatory Care (OAAC) is working with the UMass Center for Health Policy and Research to conduct a series of interviews with MassHealth members to learn about their experiences in care management programs provided through MassHealth and its managed care health plans. Information also will be gleaned from members who may not have had such support from MassHealth but can provide information about what would be helpful should they need such support in the future. These initiatives are intended to inform Managed Care Organization (MCO) reprocurement and to assist the Primary Care Clinician (PCC) Plan in improving its ability to serve members with special health care needs. The Office of Acute and Ambulatory Care (OAAC) works with the UMass Center for Health Policy and Research to conduct a biennial Managed Care Member Satisfaction survey of MCO and PCC Plan members. The 2005-2006 survey will assess member experiences with care provided during 2005.
- The Office of Acute and Ambulatory Care (OAAC) is working with the UMass Center for Health Policy and Research to conduct a survey of MCO and PCC Plan members to evaluate the nature of health care provided to children aged 0-4, for the annual Clinical Topic Review. The survey will be complemented by a medical record review.

- The PCC Plan/Massachusetts Behavioral Health Partnership has a Family Advisory Council. The Council provides a forum for discussion of client rights, and family consultation and input into policies, programs, and projects. During the past year, the Council has reviewed numerous new initiatives including Access to Psychopharmacology, Acute Inpatient availability, Medicaid pharmacy, the Outcome measurement initiative, Coordinated Family Focused Care, the and the various Performance Incentive projects. The Family Advisory Council convened joint meetings with the Consumer Advisory Council in order to work on projects of mutual interest.

II Family Leadership

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

- The Coordinated Family Focused Care (CFFC) pilot trains and hires family members to work as Family Partners in the program. Currently, 25 family members work full-time as Family Partners. CFFC has an on-going training program for Family Partners provided by a nationally known “Parent trainer” in which training is provided bi-monthly across the state.

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

This type of activity is largely supported through the mission agencies.

III Family Support Resources and Funding

What are the current resources/funding that the agency allocates to family support? What are ways that the agency provides flexible funding to families that allow them to customize their services?

- Neighborhood Health Plan, one of four MassHealth contracted managed care organizations, employs a Parent Consultant who provides information and support to NHP-enrolled MassHealth families of children with special health care needs, including linkages to a variety of parent support groups and information about resources available through special education in Massachusetts. The Parent Consultant also informs and educates NHP staff about the needs of their enrollees with special needs. A web based resource directory provided by the health plan also offers a link to a site called “Smart Neighbor”, which was created with direct input from the Parent Consultant and provides members with a variety of

community based resources and other information pertinent to issues involving disabled children.

- One of the covered services in the behavioral health area is that of a Family Support Team, designed to support caregivers of members with behavioral health conditions. Family Consultation and Family therapy are covered services.
- The Personal Care Attendant (PCA) Program provides funding for members with disabilities to hire persons of their choosing to provide for their basic activities of daily living and related needs.
- The CFFC model with the PCC plan is jointly funded in collaboration between MassHealth, DSS, DMH, and DOE. This program provides flexible funding for families to identify, secure, and develop natural supports to meet their needs. Examples include mentoring services for their child, non-medically necessary transportation, camper ships and after-school programs.

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

Families are active participants in the ongoing CCM case management process. Service plans are developed at frequencies that meet the needs of the individual children, with all children having a plan developed at least once per year.

- The Performance Incentive project on the Enhanced Outpatient Service model for DSS involved families is based on individualized, family-driven service delivery. The family convenes a team of professional and natural supports that assist them in identifying individualized solutions to meet their treatment goals.

IV Access to Services and Support

What are current examples of ways the agency is educating families on how to access services in a timely and effective manner? What are some illustrations of different services and resources, which promote good access to information and referral?

MassHealth engages in ongoing development and distribution of flyers, brochures, member newsletters and websites containing relevant information. In addition, MassHealth staff participated in the development of *Directions, a Resource Guide for Families of Children with Special Health Care Needs* that is intended to assist families in planning and coordinating care. This Guide was published by DPH in English and Spanish. It is distributed through the PCC Plan Support Materials Catalog so that providers will have it available to assist their patients. The four MassHealth-contracted

MCOs also use the book as a resource for their pediatric members with special care needs and their families.

- MassHealth notices all members under 21 years of age by mail, upon enrollment and annually, regarding the Early and Periodic Screening Diagnosis and Treatment Services (EPSDT) that are available and how to access those services.
- The Massachusetts Behavioral Health Partnership recently updated a guide book co-authored with the Department of Social Services - “Guide to Crisis Prevention and Planning for Foster and Adoptive families.” The guide contains family-friendly information on how to assist their child in a psychiatric crisis.
- The Massachusetts Behavioral Health Partnership’s Family Stabilization Team (FST) program was recently featured in the DSS newsletter for foster families. It detailed the program, supports available, and who to call for more information.
- Each month MBHP forwards to PAL (Parent Advocacy League) copies of their outpatient access reports. These reports are utilized to inform their local communities.

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

- MassHealth will acquire additional noticing capability with the acquisition of a new Medicaid Information System. Noticing will be available via, e-mail and other communication technology.

V Culturally Competent Outreach and 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?

- Publications that are developed for member education and outreach are produced in response to the ethnic, cultural and linguistic needs of the members.
- OAAC is expanding its multicultural Adolescent Anticipatory Guidance Public Awareness Campaign to include additional materials in Spanish and has developed materials in Portuguese. These teen /parent friendly media pieces are being displayed on buses, trains, in school buildings and on bookmarks in collaboration with school nurses in targeted areas that are matched with a high rate of Spanish and Portuguese speakers.
- Healthy Mother/Healthy Baby booklets, produced by CMS, are mailed to all new mothers for a year after delivery to assist them in identifying and supporting normal and delayed developmental growth. These booklets are sent to mothers in

either English or Spanish depending on the preferred language indicated on their member file.

The Office of Acute and Ambulatory Care recently awarded \$880,000 in grants to hospitals for interpreter costs associated with Emergency Departments and Psychiatric units.

- For the 2004-2005 QI Goal cycle, MassHealth allowed MCOs to select two Plan-Specific QI Goals, in addition to focusing on three Standard QI Goals. Until June 30, 2005, Network Health (NH) selected CLAS as one of its Plan-Specific Goals. The Plan initially focused on assessing the results of a NH staff survey, to gauge baseline-employee knowledge, and developed initiatives accordingly. BMCHP has focused on CLAS during previous QI cycles. Although the current QI Goal structure no longer includes Plan-Specific Goals, these MCOs, as well as the others, continue to promote culturally appropriate access and supports through various ongoing initiatives.

The PCC Plan is working through its contract with the Massachusetts Behavioral Health Partnership for PCC Performance Improvement Management Services to seek input from PCCs on their needs for training and education to improve their ability to serve members with culturally diverse backgrounds.

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

- The Data Warehouse will allow for enhanced assessment of racial, ethnic, gender, age and geographical data to guide delivery of services and appropriate initiatives including publications.

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?

- Representatives of the MassHealth OAAC and the Program Policy LTC/Elder Affairs units continue to participate in the Massachusetts Consortium for Children with Special Health Care Needs. The Consortium consists of a Family Participation Workgroup, Care Coordination Workgroup, academic institutions, health plan, providers and representatives of DPH, DMH, DPH and others.
- OAAC participation in the Children Youth and Families Coordinating Team, the Advisory Committee of the MA Child Psychiatry Access Project .
- OAAC participation in the School Readiness Indicators Project at the Department of Early Education and Care including the development of a website for parents to

access information about preparing their children for school and locating appropriate resources including health care.

- MCO Program and PCC Plan staff facilitate regular Maternal and Child Health and Special Populations workgroups with MCO representatives. .These workgroups provide a forum for MCOs to collaborate on initiatives and discuss best practices, and involve guest speakers on topics of interest. In addition, the Massachusetts Adolescent Anticipatory Guidance Public Awareness Campaign workgroup, consisting of representatives of MassHealth, DPH, UMass MAP, DOE, and Argus Communications, is relaunching the MAAGPAC campaign, initially launched during 2003 and aims to encourage adolescents to seek well-care and anticipatory guidance from their health care providers..
- MassHealth and DSS co-sponsor a pilot program to enroll children who have special health care needs and who are living in DSS foster care at the time of initial enrollment into a MassHealth contracted managed care organization. The medical pilot program provides a nurse practitioner to each enrolled child to provide and/or arrange for a full range of medical and behavioral health services to be delivered in the child’s foster home or other appropriate settings when medically necessary. The nurse practitioner works with the child’s DSS case manager, foster family and primary care physician to develop an individualized medical care plan and arrange for the child to obtain necessary care and services. The DSS case manager remains responsible for the delivery of social services and other non-medical supports so the provision of a full range of medical and non medical services is being addressed for the child. The pilot program affords an opportunity for the two state agencies to monitor and evaluate the effectiveness of targeted case management as delivered to the most medically complex MassHealth eligible children residing in the state’s care and custody. The pilot is called Special Kids/Special Care and currently serves approximately 100 children.
- MassHealth Behavioral Health and MBHP are collaborating with the Office for Child Care Services (OCCS) to evaluate the effectiveness of pairing a mental health clinic with a child care provider to support children’s tenure in the child care program and address any emotional or behavioral health needs.
- MBHP and DSS are collaborating to improve the delivery of specialized assessments and services for children who engage in fire-setting and sexualized behaviors.
- MBHP and DSS collaborated on training for acute inpatient facilities titled the “Treatment Improvement Series” addressing after-care planning and coordination with families, DSS, and other systems.
- In addition to the aforementioned initiatives, MBHP regional leadership meets regularly with their Area counterparts at DSS, DMH, DPH, DMR and DYS to discuss local programmatic needs. This has led to specific program development,

including but not limited to: clinical services embedded in DYS day reporting centers, outreach in the Southeast to develop an adolescent substance abuse day treatment program, increased child/adolescent crisis stabilization capacity in the Northeast, and improved access to Family Stabilization Services in the Metro/Boston area.

- MassHealth, through its CCM contract with UMass, collaborates with all other EOHHS agencies serving the children in this program. Service plans are developed that coordinate with and supplement services provided by all of the agencies. The majority of the children are served concurrently with DSS, DPH and/or DMR.

What new activities or initiatives does the agency propose to demonstrate the above goals?

- The Performance Incentive project on the Enhanced Outpatient Service model is a collaborative initiative with DSS, DMH, MassHealth Behavioral Health, and MBHP. The Enhanced Outpatient Model is a clinical treatment program in which the outpatient clinician is accountable for coordination of all services within a wraparound planning process.
- The 2006 Performance Incentive, “Enhancing Emergency Service Program (ESP) Services, Phase III” will conduct a feasibility study for the development of an Emergency Services Peer/Family Specialist job function for deployment to ESP’s and/or identified ED’s.