| **2014 Work Plan Tasks** | **Status** | **Notes** |
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| Priority: Establish Council priority areas and tasks for 2014. | | |
| Hear priority areas for Council input from MassHealth. | Completed |  |
| Gather feedback from all Council members on Council priorities for the coming year. | Completed |  |
| Establish a working group to develop a workplan based on Council priorities. | Completed |  |
| Develop an initial budget to present to MassHealth to complete the immediate activities in the workplan. | Not started | 2014 activities completed within Council budget |
| Seek Council approval of 2014 Workplan at May 2014 Implementation Council meeting. | Completed |  |
| Review and revise workplan on quarterly basis. | Not started |  |
| Determine Implementation Council member interest and willingness to participate in workplan activities and ongoing Council activities. If needed, determine process for adding new Council members. | Completed | Chair led and staff led engagement activities occurred |
| Priority: Provide input on auto-assignment and broader roll-out. | | |
| Hear from MassHealth about the current indicators or criteria used for determining One Care plan capacity for auto-assignment enrollments. | Completed | Included in November MassHealth Update |
| Review EIP Survey data to determine the effectiveness of MassHealth notices and informational documents in reaching enrollees and providing them with the information needed to make enrollment decisions. | Complete | Reviewed EIP Survey 1 outcomes |
| Establish indicators to measure plan and provider competency with working with One Care eligible populations, including complying with the ADA; identify data source. | Not Started |  |
| Establish indicators to measure plan and provider capacity; identify data source. | Partially Complete | Provider Strategy Work Group developed and administered a survey of One Care providers |
| Determine how auto-assignment is affecting homeless populations by collecting anecdotal data and identifying additional data sources. | Partially Complete | Included in EIP Survey 2 as well as in discussions with One Care plans |
| Determine how auto-assignment is affecting non-English speaking and English as a Second Language populations, including Latinos and Deaf individuals. | Partially Complete | Included in EIP Survey 2 |
| Recommend interventions to address identified issues. | Partially Complete |  |
| Priority: Participate in decision-making regarding the development and implementation of the IL-LTSS Coordinator. | | |
| Participate in IL-LTSS Coordinator Stakeholder Group and provide regular updates to the Council on IL-LTSS Coordinator rollout and barriers. | Completed |  |
| Invite stakeholders, including consumers and IL-LTSS Coordinators, to provide anecdotal evidence of the IL-LTSS Coordinator roll out at a Council meeting and to submit information via email. | Not started |  |
| Review data collected by MassHealth around enrollee LTSS needs and use of the IL-LTSS Coordinator and develop recommendations about how to increase access to use of the IL-LTSS Coordinator. | Partially Completed | Included in EIP Survey 2 |
| Develop indicators to measure consumer experience with IL-LTSS Coordinators. | Completed | Included in EIP Survey 2 |
| Priority: Monitor the overall performance of the Demonstration, including the ability of plans to meet the unmet needs on One Care enrollees. | | |
| Provide feedback to MassHealth on Council member experiences reviewing the user-friendliness of the One Care plan websites and affiliated sites (i.e. the MassHealth One Care website, Ombudsman site, and website with SHINE information). | Completed | Work Group meeting held |
| Determine additional topics for One Care plan quarterly updates beginning in May 2014. Example topics include: financing, and successes and challenges. | Completed |  |
| Hear updates from One Care plans on topics determined by the Council. | Completed |  |
| Hear updates from One Care Ombudsman on semi-annual basis on topics determined by the Council. | Completed |  |
| Hear updates from SHINE on semi-annual basis on topics determined by the Council. | Completed | SHINE presented updates to Council, however often than anticipated |
| Hear an overview of the SHINE program to understand what information is available to SHINE counselors. | Completed | SHINE Presentation at April meeting |
| Determine how best to partner with SHINE on outreach efforts made too hard to reach and minority populations. Provide recommendations, including data collection elements, if applicable. | Partially Complete | Input was provided at April meeting |
| Determine what data on service utilization, quality, and ADA compliance, including communication access, will be available from MassHealth and on what timeline. | Partially Complete | In September 2014, Council members met with MassHealth regarding the availability of service and financial data |
| Determine what data elements should be considered when monitoring the program and access to services. Examples include: use of acute hospital, psychiatric hospital, PCA, Day hab, home modifications, certified peer specialists, transportation. | Partially Complete | Encounter Data Work Group established |
| Develop or recommend mechanism for measuring medical and LTSS quality of services and utilization of service by One Care plans over time. | Partially Complete | Encounter Data Work Group establish |
| Determine the extent of the use of Recovery Learning Communities and Certified Peer Specialists on One Care care teams. | Partially Complete | Council presentation and discussion at June meeting |
| Provide recommendations to MassHealth on how to best promote awareness of Certified Peer Specialists and increase access to the role. | Partially Complete | Council presentation and discussion at June meeting |
| Continue to work with MassHealth to develop recommended mechanisms for One Care plans to offer enrollees the opportunity to self-identify gender identity and sexual orientation during the comprehensive assessment process. | Not started | Included in EIP Surveys |
| Priority: Provide input on outreach strategy to underserved populations. | | |
| Participate in outreach events with partner organizations targeting hard to reach and under-resourced populations. | Partially Complete |  |
| Host a tele-town hall with One Care stakeholders to provide information on the program and to hear from stakeholders about their One Care experiences and questions. | Not started |  |
| Hold semi-annual public hearings in different areas of the state to provide information on One Care and to hear from stakeholders about their One Care experiences and concerns. Activities could include tele-town hall component or could occur in conjunction with outreach efforts. | Not started |  |
| Connect with Community Health Worker (CHW) representatives to provide information on One Care and learn how CHWs fit into One Care service delivery and outreach. | Partially Complete | Presentation at January Meeting |
| Enhance relationships between CHWs, ILCs and RLCs. Ex. Host forum that identifies next steps and measurable outcomes, develop 2-3 pilots. | Not started |  |
| Priority: Provide recommendations on enrollee privacy. | | |
| Seek feedback from providers on MassHealth and One Care plan trainings. | Not started |  |
| Seek input from providers on current concerns regarding One Care (Ex. Focus groups or survey of providers.) | Completed | Provider survey conducted in August |
| Provide input on provider outreach strategy and activities informed by feedback received directly from providers and consumers. | Partially Complete | Provider outreach strategies discussed at October 2013 Council meeting |
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| Determine what individual One Care plans are doing to ensure privacy and confidentiality. | Partially Complete | Behavioral Health Privacy Work Group convened |
| Provide guidance on what data should be collected to measure how well One Care plans are protecting enrollee privacy. Ex. Collect consumer feedback. | Partially Complete | Behavioral Health Privacy Work Group convened |
| Determine how consumers perceive maintenance of privacy and confidentially by One Care plans | Not started |  |
| Priority: Provide recommendations on independent monitoring and participate in ongoing quality monitoring and Early Indicators | | |
| Recommend a mechanism for the continuation of the Early Indicators Project workgroup, or similar workgroup, to track access to services and experiences of enrollees beyond the initial roll out of One Care. | Partially Complete | Quality Work Group convened |
| Hear from MassHealth regarding the quality process and timeline; form a workgroup consistent with the timeline. | Completed | Quality Work Group convened |