

## ATTACHMENT B

### DELIVERY SYSTEM REFORM INCENTIVE PAYMENT (DSRIP) PROGRAM COMMUNITY PARTNER (CP) BP4 ANNUAL REPORT RESPONSE FORM

#### PART 1: BP4 ANNUAL REPORT EXECUTIVE SUMMARY

##### General Information

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|----------------------|--------------------------------------|
| <b>Full CP Name:</b> | Care Alliance of Western MA, LTSS CP |
| <b>CP Address:</b>   | 4 Valley Mill Road, Holyoke MA 01040 |

##### Part 1. BP4 Annual Report Executive Summary

A summary of BP4 activities and milestones for Care Alliance of W MA, LTSS CP follow.

Workforce development was very important during this year for two primary reasons. BP4 continued “COVID times” so that staff needed to be kept abreast of allowable COVID flexibilities and the most effective strategies for managing member driven preferences, particularly for face to face visits in conjunction with program requirements.

The second reason workforce development was especially important in 2021 (BP4) was that from April on, there was staff turnover as was the case across many organizations and diverse sectors/industries. This brought both a challenge and an opportunity to revisit the basics of the program, workflows and review of the training tools for staff. In addition, a TA project was completed which focused on an orientation to the program, work with members from a compliance perspective and understanding aspects of data and performance in relation to member experience, revenue and growth as well as program performance and outcomes. This has been a helpful tool to use with new staff.

CAWM also worked to align the Care Coordination teams to work with fewer ACOs to reduce the “many to many” relationships per the request of ACOs. This was already in place to a large extent in the more rural counties (Berkshire and Franklin) due to a lower number of ACOs and members served in those areas. It was implemented in the spring of 2021 with ACOs with members concentrated in Hampshire and Hampden counties. Care Coordinators and the Data team have good working relationships with primary contacts at the practice level and with the staff on the central teams. The Transitions Coach role is very effective in reaching members and especially of value during COVID when member needs were acute. COVID factors including staff absences, delayed visits to PCPs, specialists or other providers and staff turnover caused delayed contact with members in some cases. Members also had “COVID concerns” and were some members unwilling to connect face to face with Care Coordinators or ACO team members. The Consumer Advisory Board continues to recruit new members and meet quarterly.

TA Projects: A project with one ACO will integrate and automate timely exchange of key data points between CAWM and one of our largest referral bases; HNE BeHealthy. A second project involving eHana data and all LTSS CPs with UMass Medical worked together to gain insight into Total Cost of Care and operational trends as reflected by MassHealth Claims data. This data will complement a third project with HMA on pricing and sustainability modeling as well as adding health-related expenditure of our member population. Data integrity and quality improved as a concerted effort was made to update workflows surrounding the daily review and reconciliation of reports including the 834 report which has resulted in significant improvements in the accuracy of the member roster and their status at all times. The availability and use of Mathematica Portal data has also been helped to inform performance of this CP in relation to other LTSS CPs.