

SUMMARY

CCP maximized on DSRIP investments in BP1 and allocated funding to a variety of critical initiatives that served to further build and strengthen its infrastructure and programming. Funding was dedicated to workforce development, enhanced technology and operational infrastructure. These investments in turn further advanced CCP's efforts with regard to integration with ACO/MCO partners, its Quality Management program and its Consumer Advisory Board.

CCP and its Member Organizations prioritized recruitment of a multilingual workforce that represents the rich cultural diversity of the communities served and had success in hiring care coordinators who are often bilingual in English and either Spanish, Mandarin, Cantonese, Vietnamese, Haitian Creole, or Portuguese. In fact, CCP had the good fortune of hiring a trilingual RN and a quad lingual RN. CCP has also been fortunate to hire two seasoned care coordinators who specialize in partnering with enrollees identifying as LGBTQ. This need is prevalent and CCP is glad to have the capacity to meet it.

CCP was successful in implementing a customized CCIT Platform, which was go-live ready on July 1 and served the immediate needs of Care Teams during start up. Additional functionalities were fine tuned in the months that followed. Care Team efforts have been strengthened by having access to one streamlined system in which to document and track their outreach and care coordination activities with enrollees, and to develop both Comprehensive Assessments and Person-Centered Treatment Plans (PCTPs). CCP's CCIT platform has the automated functionality to ensure that eligibility checks can be performed against the MassHealth EVS system. This is a tremendous advantage and a functionality on which Care Teams rely heavily.

CCP has entered into service agreements with two ENS vendors, MAeHC and PreManage ED, which in turn further advance the efforts of Care Teams in the field. Care coordinators benefit greatly from having access to real time ADT feeds. With PreManage ED, in particular, Care Teams not only have access to real-time admissions alerts. They also have access to other pertinent enrollee detail, including contact information of any medical providers recently seen by an enrollee. Upon outreach to these healthcare providers, care coordinators have been able to secure updated enrollee contact information and in turn locate otherwise hard-to-find enrollees. Once alerted to an event, Care Teams have had tremendous success in engaging directly with hard-to-reach enrollees at the Emergency Department or hospital. At these vulnerable times for an enrollee, care coordinators are generally welcomed as a critical link to supports and services.

CCP collaborates with 14 ACO/MCO partners in three regions (Greater Boston, North and South). Its Care Teams are geographically based which allows for a lead Member Organization to align with each ACO/MCO. The goal in implementing this structure is to promote and facilitate relationship building and communications between specific Member Organization Care Teams and ACO/MCO clinical staff. CCP is beginning to reap the benefits of promoting this structure. To date, it has embedded a care coordinator on site within a PCP practice of two different ACOs for a few hours each week, and is exploring with other ACO/MCO partners opportunities for a similar level of integration within their practices. Monthly case reviews are being implemented with some ACO/MCO partners. And there are some ACO/MCO partners who contact CCP care coordinators directly when a shared enrollee has presented to the Emergency Department or hospital. CCP is dedicated to advancing these efforts with ACO/MCO partners to further impact fragmented care and promote a more integrated healthcare paradigm that will benefit the physical and mental wellness of MassHealth members.