# Attachment B

# Delivery System Reform Incentive Payment (DSRIP) Program

# Community Partner (CP) BP2 Annual Report Response Form

# Part 1: PY2 Annual Report Executive Summary

## General Information

|  |  |
| --- | --- |
| **Full CP Name:** | Family Service Association |
| **CP Address:** | 101 Rock Street, Fall River, MA 02720 |

## Part 1. PY2 Annual Report Executive Summary

During the second year of DSRIP funding, Family Service Association (FSA), as a Long Term Services and Supports Community Partner (LTSS CP), has assembled a talented, well-prepared team of Care Coordinators, Community Health Workers and administrative personnel to coordinate services for children and adults living with chronic and / or complex medical needs. We have maintained meaningful relationships with our two MCO and ten ACO partners and are committed to the integration of care between the insurer, the primary care provider and the network of community based service providers. During BP2 FSA has received over 1,450 referrals for Medicaid ACO members residing in 69 cities and towns throughout the southeastern region of the state; including Martha’s Vineyard and Nantucket. FSA has provided over 7,350 qualifying activities and signed participation agreements with almost 475 individuals. We have LTSS CP satellite locations in three cities; including Brockton, New Bedford and Hyannis putting valuable care coordination services in the heart of the areas that they serve.

FSA is proud to operate one of the independent stand-alone LTSS CP programs utilizing the organization’s existing infrastructure of strong, well-established LTSS programs. We have formed a Consumer Advisory Board with involvement from numerous community stakeholders, and continue to strive to increase our member support. FSA continues to work on the administrative infrastructure of this complex program, making changes to staffing and workflows as needed to meet the requirements of the contract and expectations of our partners. We continue to work with FSA’s first fully electronic health record providing a secure yet mobile, web-based platform to support outreach, engagement, and support of referred individuals and families. We have the technology to work totally remotely in order to meet any member, anywhere and we are equipped to begin the important task of identifying needs, setting goals, connecting members to services and coordinating care at the time of first encounter.

We have assisted referred members to obtain required durable medical equipment, apply for an array of benefits, connect to food and other community resources, establish connections with primary care providers and research and facilitate housing options. We pride ourselves in our ability to aide parents to advocate for the educational, recreational, medical and psychosocial needs of children with complex medical, developmental and behavioral health needs. We continue to work with victims of trauma, abuse and neglect, putting a safety net in place and working with individuals to recover and rebuild their lives. We are fully vested in the mission of the Community Partner program to improve upon member’s social determinants of health, enhancing their overall quality of life and well-being, and strengthening of communities together with all of our partners.