

**One Care Implementation Council Meeting**  
**Department of Public Health 250 Washington Street**  
**Boston, MA**  
**December 11, 2018 10:00 am – 12:00 pm**

**Council Member attendees:** Dennis Heaphy (Chair), Jeffrey Keilson, Henri McGill, Paul Styczko and Sara Willig.

**Key Stakeholders and Support Staff attendees:** Corri Altman Moore (MassHealth), Jennifer Baron (CMS), Maggie Carey (UMMS), Daniel Cohen (MassHealth), Hilary Deignan (UMMS), Andrew Falacci (UMMS), Raymond Gomez (Tufts Unify), Josh Krintzman (CCA), Lisa McGlinchy (UMMS), Mark Margiotta (Tufts Unify), Roseanne Mitrano (MassHealth), Jennifer Morazes (My Ombudsman), John Ruiz (CCA).

**Unable to Attend:** Suzann Bedrosian, David Matteodo, Dan McHale and Dale Mitchell

**Handouts:** Agenda; Draft minutes from November 13<sup>th</sup> IC meeting, Shared Learning presentation, MassHealth presentation, IC Year in Review presentation.

Documents will be available online at <https://www.mass.gov/service-details/one-care-implementation-council-0>

### **1) Welcome/Review of Agenda/Introductions**

Implementation Council Member Paul Styczko opened the meeting and asked participants at the table, and on the phone, to introduce themselves before speaking so that people on the phone and/or people with vision impairments know who is speaking. The Council Chair, Dennis Heaphy asked that the Council follow the “round robin” meeting style – with each member having a chance to either comment or “pass” on commenting during each discussion – to encourage more participation.

### **2) Review of November 13th IC Meeting Minutes**

Council Member asked the Council if there were any suggestions or concerns about the minutes. With no objections, the minutes were approved.

### **3) UMass Medical School Shared Learning Update**

Lisa McGlinchy, Senior Manager of Performance Improvement & Training at UMass Medical School, gave an overview of the Shared Learning projects completed this year and suggested topics for 2019. Shared Learning is a collaborative effort which involves IC Members, MassHealth and UMass Medical School Personnel to provide in-depth web-based informational presentations about topics and services in One Care.

- The proposed topics for 2019 include:
  - The Right Fit in Assistive Technology/ Durable Medical Equipment
  - Addressing Social Isolation: Person Centered Planning – Circles of Support
  - Accessing and Retaining Housing
- Shared Learning presents topics for One Care coordinators, plan staff, providers, community partners, LTS-C (coordinators) and other interested parties.
- CMS expressed interest in the housing presentation topic and plans to connect with Lisa McGlinchy about ways to collaborate.
- CMS named Care More, as an exemplary program operating in seven states to provide care supports to reduce loneliness. Care More is housed in California and provides services to help mitigate the effects of isolation. has on care populations. CMS representative will follow-up with Lisa McGlinchy directly with more information on the program.
- CMS offered support to the webinars. Specifically, CMS wants to increase discussion with MassHealth on housing and wants to provide informational resources for the loneliness webinar, in addition to connecting more with the Implementation Council. Council Member offered to find speakers and help support the webinar on housing. The Members suggested there is a need to focus on the issue through a housing lens and not a shelter lens.
- Council member suggested the need to address all the barriers to services ahead of the webinars. Getting codes established for specific services will enhance delivery and bring down certain barriers to service.

#### 4) MassHealth Presentation:

Corri Altman Moore, MassHealth Director of Policy, delivered the MassHealth presentation to the Council. MassHealth first expressed appreciation for the video conference with CMS director Tim Engelhardt that the IC hosted on November 26th. MassHealth said they would appreciate getting Council and other stakeholder feedback throughout the year to improve the process for assessing the program and making the necessary improvements. The two main themes were eliminating disparities in health/wellness equity and ensuring enrollees' goals drive the person-centered care planning present in One Care.

- Council Member asked if MassHealth had an update on the RFR process for the Duals 2.0 demonstration
  - MassHealth is currently working on finalizing the RFR and expects to have a public update soon. The January 1, 2020 goal start date for the new One Care Plans remains in place.
- Council Member suggested the Duals 2.0 Demonstration needs to shift the paradigm away from the “medical model” towards a model based on equity, with a focus on finding solutions to health and service disparities within healthcare plans.
  - For example, a New York program has taken a holistic approach to find solutions for community and population health issues where the state worked with plans to focus efforts on reducing rodent populations, improving health for people with asthma and increasing employment opportunities.
  - Person-centered planning is a piece of the solution – in the move away from the fee-for-service system to more person-centered goal setting / care.
  - The first step is to identify existing barriers to person-centered interventions and to service access through conversations with MassHealth, the Plans, and the IC
  - Key questions to ask are:
    - How to create an environment promoting an *incubation for innovation*?
    - How to address *social determinants of health*?
    - How to *bend the cost curve*?
- Council Member expressed how the current challenge is larger than One Care.
- Council Member suggested the definition of “Network Adequacy” needs to be extended to include whether the network is able to:
  - Accept new patients
  - Provide members with appointment options
  - Maintain compliance
- The same Council Member acknowledged these networks would not be built overnight, and how it requires an intrinsic and extrinsic approach from the Plans.
- Council Member suggested States and the Federal Government have information on how to be compliant and serve the disabled community efficiently. The information could help networks ease their burden.

- Tufts Unify explained it would be beneficial to understand how Plans and the Implementation Council Members can work to help alleviate social determinants of health together.
- CCA explained the Plan’s desire to get data and incorporate specific needs relating to social determinants of health.
- Council Member expressed the importance of focusing less on medical aides to instead focus more on social needs.
- MassHealth explained they have a continued interest and commitment to investigating the issues raised more broadly. Furthermore, the Commonwealth wants to work on ways to incentivize hospitals to improve and expand services for high needs populations. The goal is not only to increase capacity, but to strengthen training and education.

This work includes:

- Building a directory of specialty providers
- Having more facilities serve disabled populations
- CMS expressed the desire to continue working with MassHealth and the IC on helping One Care to succeed.
- Council Member asked if the concept of “equity” resonated with CMS.
  - CMS expressed that it does
  - The Council Member also explained how MassHealth is doing a lot of work around these issues under the Massachusetts Delivery System Reform Incentive Payment Program (DISRP) and mentioned how MassHealth could expand and do more.

## **5) One Care Implementation Council Year in Review Work Assessment Presentation:**

Implementation Council Chair, Dennis Heaphy, and Council Member, Paul Styczko, led the conversation reviewing the 2018-2019 Work Plan, noting what the IC has accomplished so far and what still needs to be done. Comments included:

- MassHealth explained changes to the Duals 2.0 Demonstration from this date forward will be considered during the procurement process and will not be considered during the contract negotiations with the Plans.
- MassHealth plans to work on Communication Access to make it more individualized.
  - One example of this is MassHealth is planning to work with CMS on the TTY requirements that are currently federally required to see if there is a way to make the requirements better suited to consumer needs.
- CCA and Tufts both commented on the listening sessions MassHealth held during the initial Duals 2.0 proposal period. The Plans found the information from individuals helpful and both look forward to doing more listening sessions in the future.

- Tufts specifically noted how the listening sessions gave them an opportunity to interact with members that they otherwise may not be communicating with.
- CCA noted how over the past year the Implementation Council was effective in reaching new people and hearing feedback from people who they had not engaged with.
- Council member expressed dissatisfaction with the Tele-Townhall event that the Council sponsored. The Member would like to do similar events, but reform the design and better educate the Plans and members on the intention and format of the events.
- MassHealth applauded the Council's efforts to build up more consumer engagement.
- Tufts Unify would like to increase education around enrollment
  - Tufts usually has many Members who chose to dis-enroll. More engagement with the Plan would be helpful to mitigate the number of individuals who chose not to go through with enrollment.
- CCA explained the need to communicate all of the benefits of One Care out to more people. The Plans could play a larger role in showcasing what the program has to offer and how it can help many different populations.
- Council Member expressed the desire to increase education around enrollment and suggested hosting a One Care and SCO enrollment fair at Pine Street Inn.
  - The Member has held two enrollment fairs in the past and the feedback was that people were not aware of what One Care offers.
- Council Member asked what would happen if a Member needed services outside of the State – and suggested the One Care program needs to be flexible in providing access to specialized health services for rare diseases etc. that are only offered out of state.
- Council Member suggested that Standardized Reasonable Accommodation form would be useful and that all the plan and MassHealth literature and education should be written at a 5<sup>th</sup> grade reading level.
- Council Member asked how CMS and MassHealth could help the IC be more involved in the communication and education process, specifically as part of the enrollment process.
- MassHealth asked for clarification about the IC concern about medical necessity – asking whether the problem is with the definition of medical necessity or a problem with the actual process. MassHealth would like to learn more about what barriers exist that prevent plans from implementing the care plan in a person-centered way. MassHealth stressed that One Care is meant to address medical necessity in a person-centered manner.
  - MassHealth asked the Council to think about the barriers inadvertently created in getting individuals the services they need and then how to think about them differently to overcome them.

- CMS expressed the desire to go to the next level and to start gathering information to see what the Plans need specifically to provide individualized care to One Care members. CMS would also like to understand what specific barriers exist that stop them from implementing more creative services.
- Council Member clarified that the goal would be to make the definition of medical necessity as well as the accompanying processes incorporated in a way that pushes thinking forward.
- Council Member explained the process of gathering information needs to be ongoing as more individuals join the program.
- Council Member expressed the need for members with Behavioral Health issues and SUD be more engaged in creating their care plans.
- Council Member suggested that services such as the LTS coordinator, recovery coaches and peer supports should be an opt-out feature, especially for the Mental Health and Substance Use Disorder populations.
- Council Member asked MassHealth and the Council to create more focus groups ahead of the Duals 2.0 Demonstration to learn more about consumers' needs.
  - Council Member suggested active engagement of the IC throughout the Duals 2.0 process, so the IC can help identify issues and add input and have a larger impact on the process.
  - Tufts supported having more Townhall meeting events at other sites around the Commonwealth.
  - CCA stated they have begun seeing higher retention rates of One Care members.
- The IC Chair expresses his satisfaction over the changed format to the meeting, noting how the “round robin” process led to greater participation and more enhanced conversation.
- MassHealth found the discussions during this December meeting to be productive. They said it was helpful to have more people participate in the conversation using the “round robin” format.
- MassHealth announced the procurement process for new IC Members has begun. MassHealth will provide updates as they come up. The Council is a unique body and MassHealth looks forward to continuing its work with the Council on the initiatives and ideas presented.
- CMS Representative thanked the Council for all of its work and expressed support for the Members' continued work and commitment to the program. CMS appreciates the special relationship present amongst the Agency, the Council and the Commonwealth.

## **6) Public Comment:**

The Council Chair invited those who were inclined to join the Council in enjoying refreshments after the meeting.

**Upcoming Meetings:**

**Tuesday January 15, 2019**

10:00-12:00

Boston Society of Architects (BSA)

290 Congress Street

Suite 200 – Pearl Street Conference Room

Boston, MA 02210

**Tuesday February 12, 2019**

10:00-12:00

Boston Society of Architects (BSA)

290 Congress Street

Suite 200 – Pearl Street Conference Room

Boston, MA 02210