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Proposal to Strengthen One Care Plan: Integration of Independent Living Philosophy and Recovery Principles into its Care Model

Presented by

Disability Policy Consortium

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Introduction

* Educate the Council, MassHealth, CMS and One Care plans about DPC research project One Care presentation.
  + Goal of research
  + Research scope
  + Funding Source
* Request support from the Council, MassHealth and One Care plans for the research.
  + Council endorsement
  + Participation of MassHealth, plans, LTS coordinator and CPS providers, members

*The following footnote appears on slides* 2-14: “DRAFT”.

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Background 1: Funding Partners

* DPC has received funding from the Brandeis University Lurie Institute’s Community Living Policy Center (CLPC) to strengthen the integration of independent living philosophy and recovery principles into One Care.
  + Underwritten by the National Institute on Disability Independent Living and Rehabilitation Research (NIDILRR), CLPC was established to advance research, policy, and practices that promote community living in participation.
  + CLPC will examine barriers and facilitators to services and provide rapid analysis of community living policies and programs as they evolve.

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Background 2: YESHealth

* We will implement the research under the umbrella of our YesHealth research program,
* YesHealth is guided by:
  + the “about us by us” philosophy of the Disability Policy Consortium,
  + the research framework of Community-Based Participatory Action Research (CBPAR).

This logo and tagline appear on this slide:   
“yesHealth

**Your Experience: Speak up** for better health care”

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Goal 1: Strengthen One Care the LTS Coordinator and CPS roles

* Investigation into the implementation of these two roles will serve as:
  + Proxy indicator of degree of paradigm shift within One Care away from medical model to independent living and recovery model;
  + Foundation for recommendations by the disability community to:
    - enhance implementation of these two roles in care teams
    - strengthen the capacity of One Care to operationalize independent living and recovery principles.

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Goal 2: Strengthen the whole person approach to disability and recovery in One Care

* Advance increased transparency and reporting of quantifiable data needed to track trends in implementation and utilization of LTS Coordinator and CPS roles,
* Increase quantifiable measurement of impact of LTS coordinator and CPS in development and implementation of One Care member comprehensive assessment and care plans.
  + Expand ability of primary care providers, care coordinators and One Care members to articulate and integrate independent living philosophy and recovery principles in the development and implementation of care plans.
  + Increase consumer agency and with it,
  + enhance and control over the type of service they receive, and, where, when and by whom such services are provided.

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Goal 3: Strengthen Capacity of Community to Engage in Community-Based Participatory Action Research

* **CBPAR is collaborative and involves stakeholders in all aspects of a project:**
  + Nurture relationship and solidarity,
  + Advance knowledge base and skills of the disability community,
  + Shape actions to effect advances in health and wellness identified by the disability community.

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Year 1:

1. Establish Research Advisory Committee (RAC),

1. Hire and train four experts on CBPAR and YesHealth,
2. ***Analyze claims data on utilization of the LTS Coordinators and Certified Peer Specialists,***
3. Create expert interview tool.

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Year 2:

1. Conduct expert interviews with
   * 2 representatives from MassHealth,
   * 1 representative from each health plan,
   * 4 randomly chosen LTS Coordinators - 2 from ILCs, 2 from RLCs and 2 from ASAPs.
2. Provide training to two ILCs about CBPAR and YesHealth,
3. Write a brief report with analysis of all activities.

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Year 3:

1. Conduct four informal focus groups of One Care members about their experience with and/or understanding of the LTS Coordinator role,
2. Conduct training of one IL center and one RLC about CBPAR and YesHealth,
3. Write a brief report with analysis of all activities.

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Year 4:

1. Conduct expert interviews with 4 CPSs,
2. Conduct four informal focus groups of One Care members about their experience with and/or understanding of CPSs,
3. Conduct training of 2 RLCs about CBPAR and YesHealth,
4. Write a brief report.

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Year 5:

1. Synthesize all findings,
2. Write 2 issue briefs - One brief for disability advocates and a second brief for the Implementation Council,
3. Make recommendations to the Implementation Council,
4. Submit final report to Lurie Institute.

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Wrap-up: Quantitative data

* Why claims data:
  + Be able to generate basic descriptive demographic and utilization trends of One Care members utilizing LTS coordinator and CPS services;
  + Understand how data migrates between CBOs, plans and MassHealth;
  + Have knowledge needed about claims to make informed recommendations on ways to enhance current methods;
  + Identify the barriers to accessing claims data.

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Wrap up: Questions?

* What questions do IC members have about the project?
* What questions do the plans and MassHealth have about project and the requested role?