# Electronic Long-Term Services & Supports (eLTSS)

Q1 2017 FEDERAL PARTNER WEBINAR

Date: March 3, 2017

# Meeting Etiquette

- Remember: If you are not speaking, **please keep your phone on mute**

- Do not put your phone on hold. If you need to take a call, hang up and dial in again when finished with your other call

  » Hold = Elevator Music = frustrated speakers and participants

- **This meeting is being recorded**

  » Another reason to keep your phone on mute when not speaking

- **Use the "Chat" feature** for questions, comments and items you would like the moderator or other participants to know.

  » **Send comments to All Panelists** so they can be addressed publically in the chat, or discussed in the meeting (as appropriate).

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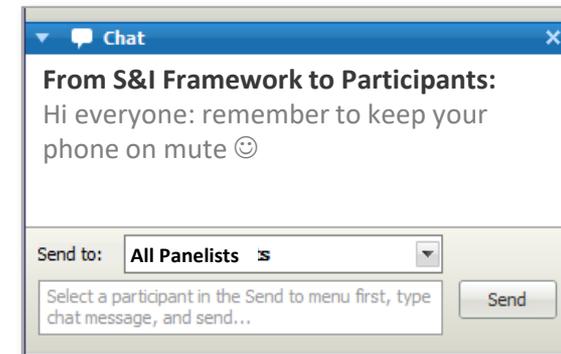
# Agenda

| Topic Area | Presenter |
|---|---|
| Welcome | Mike Smith (CMS)<br>Kerry Lida (CMS) |
| • No Wrong Door Reporting Tool and Dashboard<br>• National Adult Maltreatment Reporting System<br>• ACL Reporting | Scott Cory (ACL) |
| eLTSS Round 2 Pilot Update/ Year 2 in Review | Evelyn Gallego (EMI Advisors LLC) |
| Federal Partner Discussion | All |
| Next Steps | Evelyn Gallego (EMI Advisors LLC) |

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# Welcome & Introductions

# Person Centered Activities Update Administration for Community Living

Scott Cory, Chief Information Officer

# What is the Administration for Community Living?

The Administration for Community Living (ACL) is committed to one fundamental principle—that people with disabilities and older adults should be able to live where they choose, with the people they choose, and fully participate in their communities. In working toward that vision, the ACL oversees and administers programs and activities that support older adults, persons with disabilities, and family caregivers across the lifespan.

- Programs for Older Adults
- Programs for People with Disabilities
- Combined Aging and Disability Programs
- Research Initiatives

# What is the Administration for Community Living?

| Programs for Older Adults | Programs for People with Disabilities | Combined Aging and Disability Programs | Research Initiatives |
|---|---|---|---|
| • 56 State Units on Aging<br>• 56 Long Term Care Ombudsman Programs<br>• 629 Area Agencies on Aging<br>• 239 Tribal organizations<br>• 2 Native Hawaiian organizations<br>• 29,000 local service providers<br><br>• Elder Rights Services<br>• Health Prevention and Wellness Programs<br>• National Clearinghouse for Long-Term Care Information<br>• National Family Caregiver Support<br>• Nutrition Services<br>• Support Services | • 56 State Councils on Developmental Disabilities<br>• 68 University Centers for Excellence in Developmental Disabilities<br>• 57 Protection and Advocacy programs<br>• 54 State Independent Living Councils<br>• 354+ Centers for Independent Living<br>• 56 Statewide Assistive Technology Programs<br><br>• Help America Vote Act<br>• Paralysis Resource Center<br>• Limb Loss Resource Center<br>• Traumatic Brain Injury Program | • Aging and Disability Resource Centers/No Wrong Door Systems<br>• Evidence Based Care Transitions<br>• Veterans Directed Home and Community Based Services<br>• Business Acumen for Community Based Organizations<br>• Policy Analysis and Development<br>• Duals Demonstration Ombudsman<br>• State Health Insurance Assistance Program<br>• Senior Medicare Patrol<br>• Medicare Improvements for Patients and Providers | • Disability and Rehabilitation Research<br>• Rehabilitation Research and Training Centers<br>• Rehabilitation Engineering Research Centers<br>• Research Fellowship Program<br>• Field Initiated Program<br>• Model Spinal Cord Injury Systems<br>• Advanced Rehabilitation Research and Training Program<br>• Small Business Innovation Research Program<br>• Disability Business and Technical Assistance Centers |

# How ACL does facilitate person-centered health information technology?

- Work with CMS and ONC to ensure that the needs and constraints of our partners in the aging and disability networks and the people they serve are understood and incorporated into the emerging standards framework for extending health IT beyond the clinic

- Through our business acumen program, help our partners in the aging and disability networks develop the capacity to use person-centered technology and health IT effectively to support their programs and services

- Through our research initiatives, maintain a portfolio of grants intended to support the development of standards and practices leading to interoperable, accessible and usable technology that support person-centered care

- With our partners in the aging and disability networks, CMS, and ONC, and partners in academia and the private sector, identify and share promising practices

# How Does ACL Develop Technology to Support Person-Centered Care?

- Where possible, focus on the existing data available that supports development of systems that measure care and services to the person

- Take a "data first" approach to system design and development

- Use design thinking, lean, and agile management methodologies to tightly integrate program and administrative needs with technology

- Develop new external applications with cloud-based "as a service" offerings, with the Microsoft Azure Cloud as a preferred service provider

- Design, develop and operate all systems with accessibility and usability and security and privacy as requirements

# ACL Person-Centered Systems

- **No Wrong Door System Management Tool (NWD)** – System to collect information and measure maturity of state implementation of NWD System.

- **National Adult Maltreatment Reporting System (NAMRS):** Web application and web site to collect state Adult Protective Service data and provide APS technical assistance

- **ACL Reporting** – One of four related projects to develop and implement web based applications that collect, analyze, and present data from formula and discretionary grants, and allow measurement of program performance and evaluation of program outputs and outcomes.
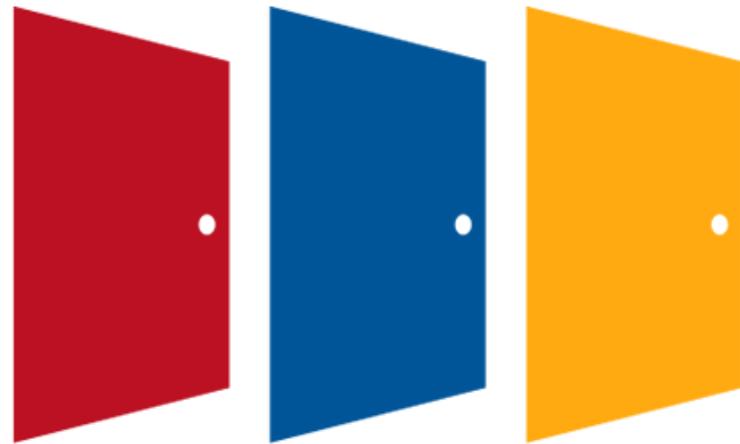
# What is the No Wrong Door System?

- Collaboration between ACL, CMS, and VHA, to support state efforts to streamline access to Long Term Services and Supports (LTSS) options for all populations and all payers.

- The NWD System Management Tool is a web based application that supports collection of information on the maturity of state NWD efforts.

- The NWD System Management Tool was developed incrementally in collaboration with NWD state grantees

# What is the No Wrong Door System?

- As ACL and its partners mature the No Wrong Door System matures, ACL will add additional functionality to the web application

- ACL will work closely with state NWD grantees to ensure additional data related to the provision of person-centered care is included in the NWD System Management Tool

- The NWD System Management Tool will evolve to accept data directly from state and local systems that provides evidence of NWD element adoption and performance

# What is NAMRS?

- Response to repeated requests for national data on abuse of vulnerable adults

- Collaboration between ACL and the HHS Office of the Assistant Secretary for Planning and Evaluation (ASPE) and WRMA

- Reflects contributions of more than 30 state Adult Protective Service agencies to define data elements to be reported, and technical and functional requirements for the system

- ***All*** States and Territories ***voluntarily*** participate in submission of APS data to NAMRS

# What is NAMRS?

- System including web site, database, and data warehouse
- Three Components:
  - Agency Component
  - Key Indicators Component
  - Case Component
- Agency Component provides administrative information about state Adult Protective Service (APS) agencies
- Key Indicators are aggregated data collected by all states
- Case Components are non-identifiable, case level data elements

**ACL***Reporting*

# What is ACL Reporting?

- Web based application to allow submission of program planning and performance reporting information for formula and discretionary grants

- Collaboration between ACL, ICF International, and grantees from multiple programs

- Supports multiple program plans and program performance reports

- Supports exchange of information between systems to minimize the duplication of data entry by grantees

# Questions?

# Agency Component

Provides background information on the state's APS agency, and context for both the Case Component and Key Indicators Component

- Data sources (APS agency only or additional agencies).
- Staffing (budgeted versus filled positions).
- Acceptance of reports (centralized or local intake).
- Report counts (not accepted, resolved through Information and Referral
- (I&R)/Information and Referral Assistance (I&RA), and accepted reports).
- Standards of evidence for substantiation of investigations.
- Time to complete an investigation.
- Types of maltreatment addressed by the state.
- Use of standardized assessment tools.
- Service gaps.

# Key Indicator Component

19 aggregated data elements, intended to allow states unable to provide case-level data to participate in the system

- Client – counts by investigation, interagency coordination, case closure reason

- Victim – counts by age, race, ethnicity, gender identity, receipt of public benefit, having one or more disabilities, one or more screened behavioral conditions, maltreatment type, guardianship or conservator at start of investigation, and received or referred for services by APS

- Perpetrators – counts by age, gender identity, kinship relationship with victim
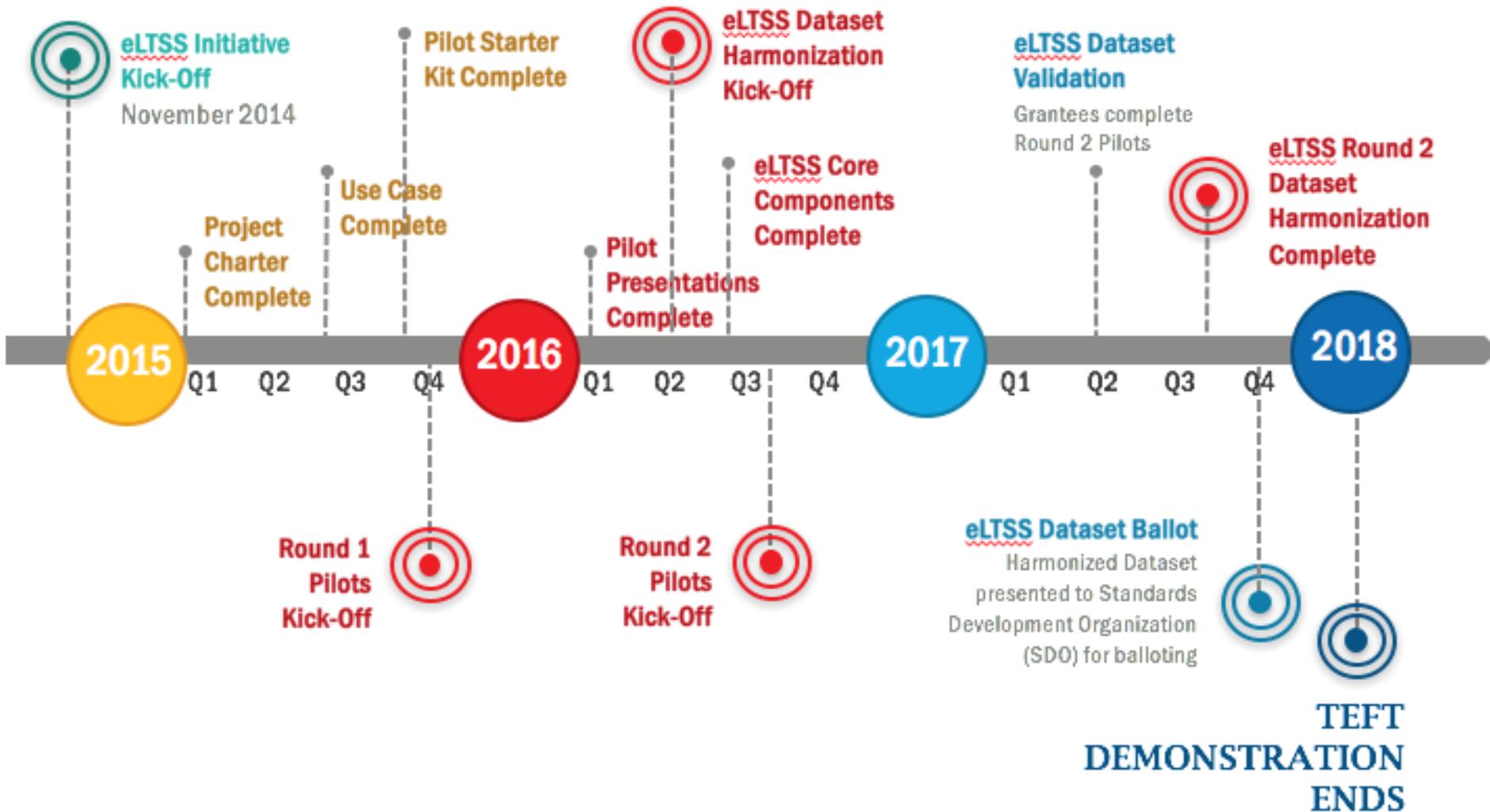
# Case Component

Five categories of data

- Investigation Entity - data on each investigation

- Client Entity - characteristics for each client, each of whom has a unique encrypted ID

- Maltreatment Allegation Entity -- data on each allegation of maltreatment and its disposition

- Perpetrator Entity - data on each perpetrator associated with a *substantiated* maltreatment

- Client-Perpetrator Relationship Entity - data on each of the characteristics of the relationship between each perpetrator and each client with whom there was a relationship
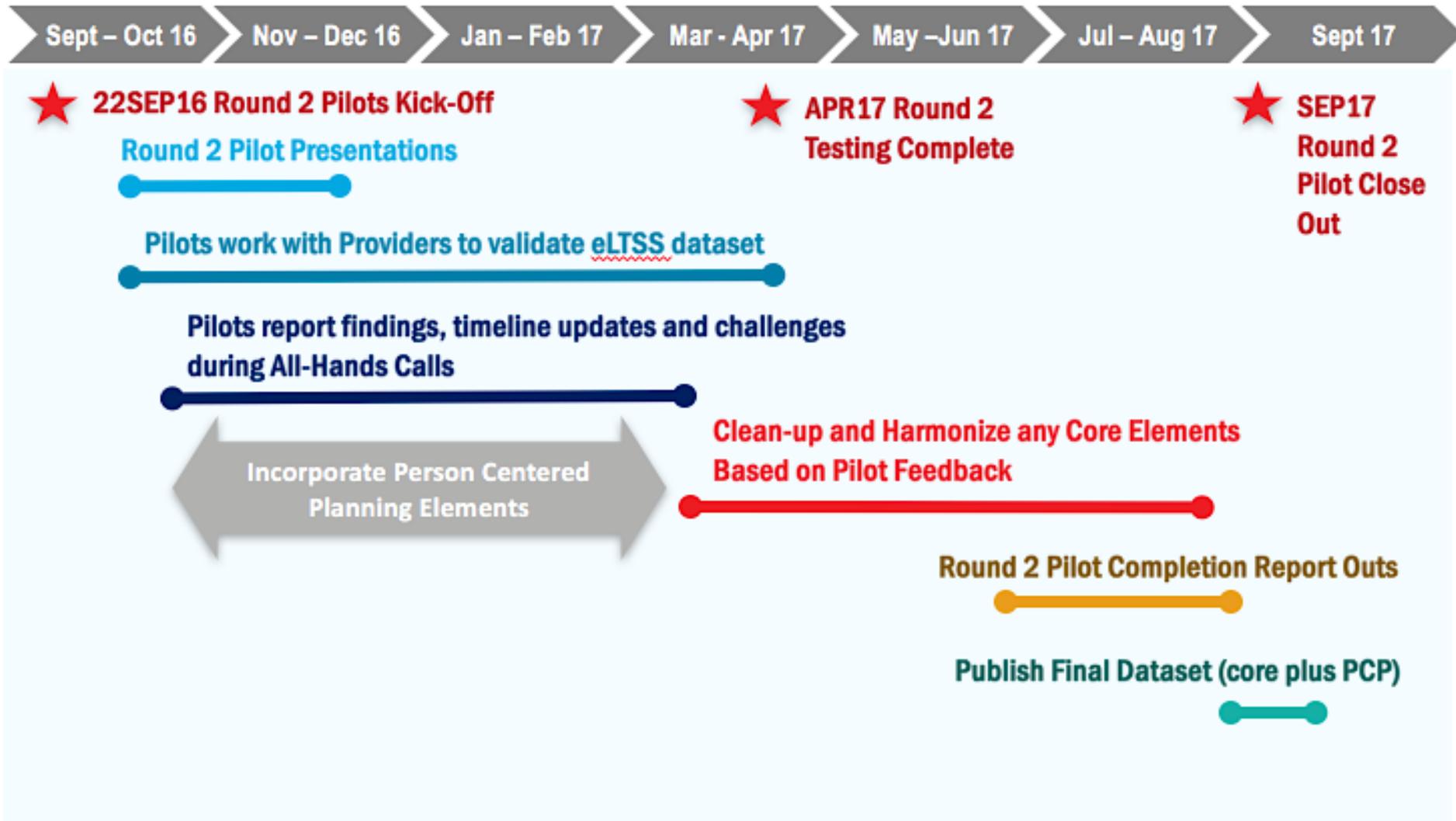
# eLTSS Round 2 Pilot Status Year 2 in Review

**Evelyn Gallego, MBA, MPH, CPHIMS**
**eLTSS Initiative Coordinator**
**EMI Advisors LLC, Contractor to ONC**

# eLTSS Initiative At-A-Glance

# Round 2 Pilots Timeline

| Sept – Oct 16 | Nov – Dec 16 | Jan – Feb 17 | Mar - Apr 17 | May –Jun 17 | Jul – Aug 17 | Sept 17 |
|---|---|---|---|---|---|---|

★ **22SEP16 Round 2 Pilots Kick-Off**

★ **APR17 Round 2 Testing Complete**

★ **SEP17 Round 2 Pilot Close Out**

**Round 2 Pilot Presentations**

**Pilots work with Providers to validate eLTSS dataset**

**Pilots report findings, timeline updates and challenges during All-Hands Calls**

**Incorporate Person Centered Planning Elements**

**Clean-up and Harmonize any Core Elements Based on Pilot Feedback**

**Round 2 Pilot Completion Report Outs**

**Publish Final Dataset (core plus PCP)**

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# 2016 Key Accomplishments

- Completed Round 1 Pilot Phase

- Identified and harmonized core eLTSS dataset: 47 data elements

- Kicked off Round 2 Pilots:

  » 6 TEFT Grantees

  » 5 Non-TEFT Organizations

- Facilitated 3 Federal Partner Webinars

- Conducted 8 public outreach presentations

- Increased eLTSS community participation (+322 total members)

# eLTSS Round 2 Pilots

- Kicked off on September 22, 2016
- Round 2 pilots consist of testing the agreed upon "Core" Plan elements identified by eLTSS Community as part of Round 1 Pilot activities
- Piloting can include:
  - » Updating the Pilot organization's current Service Plan to include the eLTSS Core data elements
  - » Mapping the existing organization's Service Plan to the eLTSS Core data elements
- Piloting MUST include sending the Plan to multiple provider groups
  - » Plan can be sent electronically using secure email and/or fax
- Providers 'receiving' the plan must provide feedback on the eLTSS Core data elements

# eLTSS Round 2 Pilots: Focus on LTSS Providers

- Providers that 'receive' the plan must validate the plan meets their information needs—*does the information in the plan contain everything the Provider needs to know to provide the best and required service to the individual?*

- Need to confirm what information in the plan works, what does not work, and what is missing

  » Information or elements that are 'missing' will be evaluated as either being 'core' to the plan or 'optional'

- Need to confirm whether the Provider can electronically receive, view and accept the Plan

> Grantee Pilot Sites encouraged to identify **3** to **4** different types of providers to work with where at least one of these requires most of the information in the plan to deliver and/or coordinate service.

# What is being Piloted? eLTSS Core Dataset

- Pilots must test at least **80% or 38** elements from dataset
- Total Number of Elements: **47**

### Risk: 1 Element
Identified Risk

### Plan Period/Plan Effective Dates: 1 Element
Plan Effective Date

### Service Preferences: 2 Elements
Person Service Agreement Indicator

Person Service Provider Choice Indicator

### Goals & Strengths: 4 Elements
Assessed Needs

Goal

Step or Action

Strengths

### Financial Information: 4 Elements
Plan Funding Source

Program Name

Total Plan Budget

Total Plan Cost

### Emergency Backup Plan: 4 Elements
Emergency Backup Name

Non-Paid Emergency Backup Relationship Type

Emergency Backup Phone Number

Emergency Backup Plan Text

### Service Provider Name & Other Identifiers: 5 Elements
Support Planner Name

Support Planner Phone Number

Service Provider Name

Non-Paid Service Provider Relationship Type

Service Provider Phone Number

### Beneficiary Demographic: 6 Elements
Person Name

Person Identifier

Person Identifier Type

Person Date of Birth

Person Phone Number

Person Address

### Plan Signatures: 9 Elements
Person Signature

Person Printed Name

Person Signature Date

Guardian / Legal Representative Signature

Guardian / Legal Representative Printed Name

Guardian / Legal Representative Signature Date

Support Planner Signature

Support Planner Printed Name

Support Planner Signature Date

### Service Information: 11 Elements
Service Name

Service Start Date

Service End Date

Service Comment

Service Funding Source

Service Unit Quantity

Unit of Service Type

Service Unit Quantity Interval

Service Rate per Unit

Service Total Units

Total Cost of Service

# eLTSS Round 2 Pilot Organizations

| TEFT Organization | User Story To Be Tested |
|---|---|
| **CO:** Dept. of Health Care Policy & Financing | User Story 1: LTSS Eligibility, eLTSS Plan Creation and Approval |
| **CT:** Dept. of Social Services Division of Health Services | User Story 2: Sharing a Person-Centered eLTSS Plan |
| **GA:** Dept. of Community Health | User Story 1: LTSS Eligibility, eLTSS Plan Creation and Approval |
| **KY:** Office of Administrative & Technology Services | User Story 1: LTSS Eligibility, eLTSS Plan Creation and Approval<br>User Story 2: Sharing a Person-Centered eLTSS Plan |
| **MD:** Dept. of Health & Mental Hygiene | User Story 2: Sharing a Person-Centered eLTSS Plan |
| **MN:** Dept. of Human Service | User Story 2: Sharing a Person-Centered eLTSS Plan |

Detailed presentations from each of the Pilot Sites available here:
http://oncprojectracking.healthit.gov/wiki/display/TechLabSC/eLTSS+Pilots#eLTSSPilots-Round2PilotPlanPresentations

**\*\*eLTSS Pilots are open to all participants regardless of participating grant program**

# Non-TEFT Pilot Participation

- In addition to the 6 TEFT Grantees, **5 Non-TEFT organizations**

  have opted to participate in Round 2 pilots

  - Meals on Wheels

  - Medical Micrographics

  - Therap

  - Netsmart

  - FEi Systems

- All presentations available via eLTSS Past Meetings Link:

  https://oncprojectracking.healthit.gov/wiki/display/TechLabSC/eLTSS+Past+Meetings

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# 2017 Grantee Support Focus: Pilots

- End of March Early April: Finalize Round 2 pilots

  » Includes completed RTMs from pilots

  » List of tested and validated data elements necessary to promote the eLTSS work

  – Provided by the feedback and work of the pilots

- April-May: Pilots will formally report out on pilot findings

  » Including supporting artifacts such as Plans, Report Out and Finalization Documentation

- May-September: Finalize Round 2 dataset

  » Publish the final Core Dataset

- Fall/Ongoing: Continued outreach with Standards Development Organization (SDO) to help further develop the eLTSS Core Dataset

# Federal Partner Discussion

# Key Asks:
## Opportunities for Broader Federal Partner Engagement

- Are there other Federal Partner Projects focused on use of IT to capture person data for reporting?

- Which Federal Partners are currently working with SDOs to include HL7, Integrating the Health Enterprise (IHE) International, International Health Terminology Standards Development Organization (IHTSDO) and Regenstrief Institute?

  » Is there opportunity to collaborate amongst the Federal Partner Projects?

# Next Steps for Federal Partner Engagement

- Participate in eLTSS Quarterly Meetings:
  - » Seeking other Federal Partner Project presentations
  - » Next one to be scheduled for **May 26th 2017**
  - » Upcoming Meetings:
    - Aug 2017
    - Nov 2017
- Identify additional organizations that can contribute to testing and validating of eLTSS dataset

# eLTSS Initiative Contacts

- ONC Leadership
  - » Ali Massihi (ali.massihi@hhs.gov)
  - » Elizabeth Palena-Hall (elizabeth.palenahall@hhs.gov)
- CMS Leadership
  - » Mike Smith (Michael.Smith1@cms.hhs.gov)
  - » Kerry Lida (Kerry.Lida@cms.hhs.gov)
- Federal Partner Leadership
  - » Shawn Terrell (shawnterrell@acl.hhs.gov)
  - » Marisa Scala-Foley (marisa.scala-foley@acl.hhs.gov)
- Initiative Coordinator
  - » Evelyn Gallego (evelyn.gallego@emiadvisors.net)

# Back-Up

# CMS 2014 Medicaid HCBS Rule

Defined by Medicaid under **§ 441.301(c)** as part of the scope of services and supports required under the State's 1915(c) Home and Community-Based Settings (HCBS) waiver to include:

- The setting in which the individual resides is chosen by the individual

- Individual's strengths and preferences

- Clinical and support needs as identified through an assessment of functional need

- Individual's identified goals and designed outcomes

- Services and supports that will assist individual to achieve identified goals, and providers that will perform services

- Risk factors and measures in place to minimize them

- Individual and/or entity responsible for monitoring the plan

- Informed consent of the Individual

- Services the individual elects to self-direct

## WHAT IS IMPORTANT TO ROBERT

Having a straw to hold
Using my iPad apps
Out and about
Swimming
Music
Healthy food

Looking sharp
Drinking water
Eating out
Church
Family
Recreation, sports
Volunteer, Job

## PEOPLE WHO HELP ROBERT BEST

Tell me when I do well

Cheerful and outgoing

Assist me to do things for myself

Help me do what I like to do

Use positive language (not "don't...")

Tell me the plan

Keep my house clean and neat

Communicate and keep my mom in the loop

Minimize waiting for things to happen

Know I may have a seizure

Identify fun activities

Professional

Stay with me

Think ahead

Safe driver

Engage me

Are on time

## WHAT PEOPLE LIKE AND ADMIRE ABOUT ROBERT

Say what I want, decisive

Good memory

Like everyone

Handsome and polite

High energy, adventurous

Love my family

Deep thinker

Nice dresser

Mellow

Funny

Like to "chill"

## SUPPORTS ROBERT NEEDS TO BE HAPPY, HEALTHY, AND SAFE

Medication on time

Careful in parking lots

Help in bathroom

Seat belt on

Wear ID bracelet

Use bathroom a lot

Call Mom if problem or question(s) 410.733.9539

Deep breaths if agitated

Safe seizures

Suntan lotion

Food cut up

Teeth clean

No balcony use

Nurse Lara: 443.677.7130
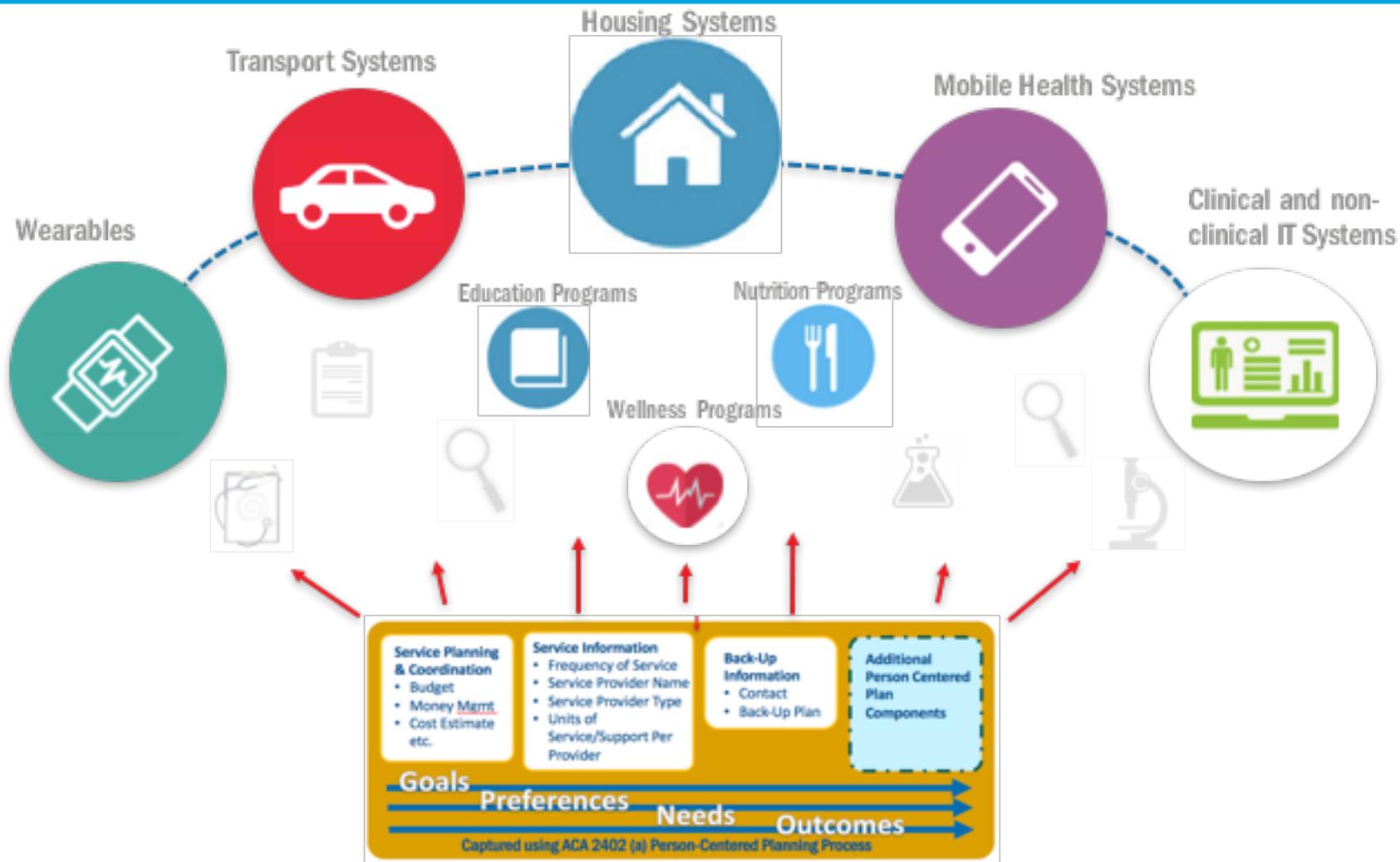
eLTSS Plan Dataset can be incorporated into various programs and health/wellness IT systems

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