



Long Term Care Coordinating Council

Minutes of the meeting held Wednesday, November 8, 2017

Child and Family, Main Conference Room, 1268 Eddy St., Providence, RI 02905

Attendance:

| | | |
|------------------|-----------------|-------------------|
| Alison Croke | Janet Spinelli | Michelle LaFrance |
| Amanda Graziosi | Jim Nyberg | Michelle Szylin |
| Arthur Pullano | Karen Statser | Mike Walker |
| Barbara Dunder | Kathleen Heren | Mykahla Gardiner |
| Bonnie Sekeres | Kathleen Kelly | Nelia Botelho |
| Brenda DuHamel | Kelly A. Lee | Nicholas Oliver |
| Connie Milbourne | Laurie Ellison | Paula Bradley |
| D. Karen Enright | Laurie Mantz | Sandra Fournier |
| Dawn Allen | Lori Light | Sandy Curtis |
| Deborah Burton | Maria Petrillo | Sheila DiVincenzo |
| Holly Garvey | Maureen Maigret | |

- Welcome:** Meeting called to order by Maureen Maigret at 10:00am. Introductions by all.
- Approval of Minutes of 10/11/17:** Motion to approve as submitted and all in favor.
- ICI Nurse Rounding program – Diana Shaw, Manager of Long Term Services and Supports, NHPRI**
 - Power-Point Slides at the end of minutes.
 - Caseload minimums for each NP. Facilities that have smaller caseloads share a NP.
 - NHP has been looking at admissions and how members are chosen to go to a nursing home.
 - 84 nursing homes have contracts with NHP. 39 of them participate in this program.
 - This program is not available to assisted living.
- RI CMS Nursing Home Behavioral Health & Substance Use Training Special Study – Gail Patry, Chief Program Office, Healthcentric Advisors:**
 - Power-Point Slides at the end of minutes.
- Nursing Homes Regulatory Update:**
 - 4 certification surveys
 - No high level
 - 4 follow up visits – everything was corrected
 - Complaints – 4 investigations. Cited 2 facilities at harm level. Coventry and Warwick sexual abuse. Dollar amount fee and plan of correction required.
 - Assisted living facilities – DOH has the discretion to inspect assisted living facilities up to 2 years.
 - Is there an association that covers Adult Day Center? Provider Association is Leading Age. Licensing is done by DOH.
 - The facilities do their own evaluation of each situation that they have of patient to patient abuse.
- Family Caregiver Alliance of RI – Kathy McKeon:**
 - Kathy unable to attend last minute.
 - Michelle S – part of the increased with the grant is to enhance the alliance.
 - 2nd round of grant 1. Increasing direct service of Respite 2. Enhancing the alliance 3. Contracted with 2 nursing programs to work with the nursing students provide Respite services
 - McKenzie handles the grants – invite him to the next meeting to give an overview.
 - Unsure if the new funding changes the eligibility requirements.
 - Family Caregiver Alliance of RI – Langevin Award was given to the Alzheimer’s Association last week.
- Subcommittees Review**
 - Alzheimer’s Update:** Michelle has been working with the Lt. Gov’s office to obtain a grant for the plan update. Looking to get the funding in the beginning of the year and send out an RFQ shortly thereafter.

- b. Aging in Community / Age Friendly RI:** lots of momentum on the projects. Sent out latest newsletter. Applying for another round for Tufts Health Plan funding. Trying to inspire local communities to have an age friendly project to help move this initiative forward.
- c. LGBT Report:** successful seminar
- d. Oral Health:** working to get a statewide plan together.
- e. New Behavioral Health Subcommittee:** first meeting November 15th at 2:30pm at the Alliance for Better Long-Term Care. Anyone interested please reach out to the Lt. Gov's office. Organizational meeting.

8. RI College Institute for Healthcare Education:

- a.** Paraprofessional Training Programs – Marianne Raimondo, Director
- b.** As healthcare is changing, working to collaborate to offer training programs to the communities for these changes. Received a DLT grant 3 years ago. Started with just hospitals, but now that has grown. The vacancies and need was for behavioral health training and paraprofessionals.
- c.** Formed a committee and developed a 30-hour behavioral healthcare curriculum to be able to receive a certificate. Pilot program with home healthcare centers and it is going well. The students are absorbing the training and bringing it back with them. Changing the programs and customizing from the information given from the students participating.
- d.** Community Health worker training – developed a 72-hour program. Piloted with the Central Falls community and now the program is also offered in Spanish.
- e.** Developed specialized programs – working to create career ladders for healthcare workers.
- f.** Where do you find a community healthcare worker? We are working on a database and a website to get them connected with them. Right now, contact Marianne Raimondo.
- g.** Charlesgate Special Program – locate behavioral services in senior housing communities. Partnered with Community Care Alliance and they have an office located right in the housing. Looking to get the funding to make the position full time because the need is so great. Resident coordinators are really pleased with the program.
- h.** Marianne will provide curriculum descriptions and possible job descriptions.

9. Pending Legislative Discussion:

- a.** Any suggestions? Forms are available too. Send an email as well.

10. Public Comment:

- a.** Kathy Heren: ADA Application proposal: RIPTA and RIDE program. The application is far too complicated for someone with disabilities to fill out. Someone will attend the 11/14 4pm-6pm meeting and we have reached out to Meg Clingham (Mental Health Advocate) and ACLU to look at the application. The application is invasive and inappropriate.
- b.** Sandy Curtis: Community Health Team RI – CareLink. Budget cut to sunset the program effective Nov 30th. General letter went out to all 2500 to let them know that the program is ending. Letters have been sent out with other options as well. High risk population is approximately 120. PACE is an option as well. All the information is on the letters that have been mailed out.
- c.** Senior choice consulting cosponsoring a training Principals
 - i.** Nov 16th 3 class options 7,11, 4 handout
- d.** Dementia training all day training on Nov 15th
- e.** Stakeholder meetings – start of discussions to extend to June (Email sent)
- f.** Request for agenda items please email Craig or Maureen.

11. Next Meeting: December 13, 2017 at 10am at Child & Family

12. Adjournment: Meeting adjourned by Maureen at 11:43am.

ICI Nurse Rounding program – Diana Shaw, Manager of Long Term Services and Supports, NHPRI Power-Point Slides



Reducing Hospital Admissions Among Long Stay Nursing Home Residents

Dianna Shaw, CNHA, CALA, CCM, FACHCA, MA
LTCC Presentation
Nov 8, 2017



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Integrated Care Initiative Goals

- Person-centered care
- Coordination of primary and acute care, behavioral health care and LTSS
- Improve or maintain health and quality of life
- Improve transitions of care from the hospital or nursing home back to member's home
- Rebalance the long-term care system to support home and community-based living vs. institutional care
- Align financial and quality incentives to improve care



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CMS Data: Supporting the need for a specialized nursing home program

- CMS reports custodial residents often experience potentially avoidable inpatient hospitalizations.
- Residents are especially vulnerable to risks that accompany hospital stays and transitions between nursing home and hospitals, including medication errors and hospital-acquired infections.
- CMS research on Medicare/Medicaid enrollees in nursing homes found that approximately 45% of hospital admissions could have been avoided, accounting for 314,000 potentially avoidable hospitalizations and \$2.6 billion in Medicare expenditures in 2005.



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Optum Care Plus

- The program started in February 2017 with the four homes with the highest INTEGRITY membership
- Additional nursing homes were added in waves over the course of four months
- The Nursing Homes easily operationalized Optum's existing business model to INTEGRITY members



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Objectives

- Nurse Practitioner (NP) Rounding Program Overview
- Program Goals and Impact
- Measuring Success
- Challenges
- Lessons
- Next Steps



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Nursing Home Engagement

- 39 out of 84 Rhode Island Nursing Homes were identified as having significant INTEGRITY custodial level enrollment
- Decision to partner with Optum and their Care Plus Program
- Optum's Care Plus Nurse Practitioner Rounding program was identified as being active in these homes.
- Nursing Homes were vetted for Medical Director participation



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Goals

- Reduce re-hospitalization rates by 5% (from baseline)
- Ensure clinical documentation and coding activities mirror intervention and treatment plan
- Provide services for ambulatory conditions in place
- Provide additional diagnostic services in place
- Improve quality metrics
- Member / caregiver satisfaction
- Collaborate with home for development of specialized programs; ie., bariatric, wound, cognitive impairments, behavioral health



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Successes

- A general orientation session for all 39 participating homes was well received
- Follow up site visits to each of the 39 homes personalized the process
- Communication was multi-channeled
- Positive feedback received from the homes, members, and caregivers



Challenges

- Technical IT requirements required an extended implementation timeline to develop file transfers
- Program participation peaked in the Spring at 275 members. Goal was to enroll 500 members.
- Attrition rates are higher than budgeted through transfers to non-participating facilities and deaths



Measurement

- Nine months post-start up, the establishment of baselines is close to completion (these members were Medicare prior to enrollment)
- Received our first 837 file this month to incorporate into all Integrity LOB coding files
- The Nursing Home network reports a high level of satisfaction
- We expect to have our first measurement period completed by end of year 2017



Lessons

- Nursing Home buy in is critical to the success of the program
- Have a strong marketing plan in place for on-going program viability
- Have a clearly identified IT lead and implementation timeline plan



Next Steps

- Develop and incorporate incentives and/or quality measures into both the nursing home and Optum contracts
- Consider increasing enrollment through program expansion to additional nursing homes
- Consider expansion to the skilled short stay population



Questions



Contact Information

Dianna Shaw, CNHA, CALA, CCM, FACHCA, MA
Program Manager of Long Term Services and
Supports Medical Management

Neighborhood Health Plan of Rhode Island
Address: 910 Douglas Pike, Smithfield, R.I. 02917

Direct Line: 1-401-427-8186
Email: dshaw@nhpri.org



RI CMS Nursing Home Behavioral Health & Substance Use Training Special Study
Gail Patry, Chief Program Office, Healthcentric Advisors
Power-Point Slides

*waiting for electronic version of the presentation

Respectfully Submitted by: Tabatha Dube, Office of Lieutenant Governor Dan McKee