

TOOLS OF THE TRADE: Person-Centered Services of the Future

Co-Sponsored by NYSRA & NYSACRA



TRAINING TOPICS INCLUDE:

1. Care Coordination & Health Home:

An in-depth look at the interplay between planning from a person-centered perspective, person-centered care coordination, and managed care "care management." Examples from other states in addition to any available information from New York State on Care Coordination and health homes will be used to examine requirements of health home model and integration of physical / medical and LTSS needs.

2. Compliance Management & Quality Improvement:

A discussion of organizational capacity and strategies for quality management and quality improvement including the types of quality measures and metrics used by managed care plans to assess the "value" of service providers. Strategies for implementing and improving quality management programs will also be provided in addition to an analysis of examples of quality measures from other states that have their DD populations, and managed care measures used in other parts of the health care system in New York.

3. Documentation & Billing:

Overview of the definition of medical necessity and the State's documentation requirements including a detailed review of form UB-40. This topic will also include a review of documentation and billing tools use in other New York systems including BH and managed care billing "tools" with a focus on utilization management (prior and post-payment review).

4. Changing Business Relationships & Contracting with Managed Care Organizations:

Gain a basic understanding of how to execute sound contracts with managed care organizations. Review requirements placed on managed care organizations as defined by their contracts with NYS. This topic will also contemplate provisions providers might want to include in their own contracts with managed care organizations.

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5. Moving Toward At-Risk, Value-Based Payments:

This topic will establish a framework for providers to assess their current and future services and sources of revenue. Discussion will include the administrative impact and the associated financial impact of moving toward managed care and value-based and / or at-risk contracts.

6. Holistic Care: Relationships with Other Health Care Providers:

Managed care and value-based payment models work best when providers across continuums of care and settings work together. This topic will discuss New York's existing integration of physical and behavioral health and offer considerations of the expected integration between these fields and DD in the future.

7. Intersection with HCBS:

Olmstead, the ADA, and the HCBS Medicaid Rules have established expectations for residential and day / employment services that are and will have a dramatic impact on some providers' current service models. Training will focus on identifying whether significant service revisions are necessary; understanding and operationalizing person-centered planning requirements and metrics of client satisfaction; and coordinating plans for changes to planning / documentation, IT / EHR, reimbursement, and other operational considerations.

8. Organizational Change Processes:

Discussion of systems change strategies that agencies can use to achieve success in a managed care, value-based environment including reforming providers' business and program practices, implementing new IT and / or EMR systems, HCBS rule compliance, and outcome-based payment.

9. Data, Information Systems and Outcomes:

Data is the life blood of modern health care systems and providers need to understand, collect, analyze and use information for person-centered care and measuring outcomes. The key focus will be on using data to improve core administrative processes key to person-centered planning and care including a discussion of best practices in using information systems to inform and support improved outcomes.