

Michigan Department of Community Health
Office of Long-Term Care Supports & Services
Single Point of Entry Informational Forum
October 23, 2006

Participant Questions and Department Responses

- Q1** If these are pilots, will they be going statewide at some time?
- A1** The intent is to go statewide after the demonstration period ends pending legislative approval. The results of the evaluation and cost benefit analysis will help determine this.
- Q2** Are the Regional Interagency Coordinating Councils (RICCs), which are local arms of the State Developmental Disabilities Council, partners of the LTC Connections?
- A2** The SPE statement of work requires mandatory collaboration with some local entities, including community mental health organizations. While RICCs are not considered among the mandatory entities, they can get involved in the local process by contacting the SPE and become partners.
- Q3** When will the LTC Connections be prepared to take I & A calls?
- A3** All four LTC Connections are accepting basic I&A calls effective 10/2/2006. The UP is accepting calls via 211 calls and Southwest has arranged for 24/7 I&A coverage. The statement of work requires each SPE to provide 24 hours/month of service outside of customary business hours.
- Q4** Will the general support plan developed by the LTC Connections include choices and preferences?
- A4** The general support plan will be developed using person-centered planning principles and methods. This approach means that the discussion process with a person interested in developing a general support plan starts with a focus on the person's preferences, their goals and priorities for their life and the sorts of choices that they would want to make to achieve their desired life with LTC supports. Development of a general support plan would be aimed at assisting the person to look at alternatives that offer services in a context that best supports achieving their preferences. This will apply to all who utilize a LTC Connections program, beyond a request for basic information. The LTC Connections worker will be oriented to promote a discussion aimed at surfacing the person's preferences and goal for their desired life at the outset of interactions aimed at addressing apparent needs. Implementing an "assessment" process that looks at needs and impairments will then be conducted with the person's preferences and goals in mind. The plan will be more than just a list of services; instead it will be intended to address in the abstract the sorts of services and support options that can achieve the person's preferences and goals. Referrals to those who may be able to offer needed and desired services will not be tied to any specific providers.

- Q5** How will the level of care determination interact with OBRA and the community mental health boards?
- A5** Unlike the Level of Care Determination (which applies only to Medicaid beneficiaries), the Level One PASARR screen is mandatory for every person entering a nursing facility and must be completed prior to admission. Persons who meet the Level One criteria are referred for a Level Two for a final determinant for placement. This issue could be problematic and needs to be clarified at the State level.
- Q6** Will there be more waiver slots? How will their funding be allocated?
- A6** Unknown at this point. The FY'07 budget format (separate and distinct line item appropriations for long-term care services) allows less flexibility to redirect funds within overall LTC funding. The lack of waiver slots places added pressure on the success of the SPE demonstration projects. The Department will continue to communicate the need for increased waiver capacity to the Legislature and work with them on a solution.
- Q7** Will there be stakeholder input on the standards?
- A7** There will be no formal policy promulgation process for the LTC Connections operating standards. The Office of LTC Supports & Services as well as the individual LTC Connections sites are seeking input from stakeholders. The standards are intended to be reviewed by each LTCC consumer advisory board and governing board. In addition, input is being sought from private sector experts (e.g., Alzheimer's Association). Individuals interested in participating are encouraged to communicate their interest to Nora Barkey (barkeyn@michigan.gov).
- Q8** How will TBI screening be incorporated into the LTC Connections?
- A8** Each LTCC will be required to maintain an awareness and appropriate linkage to the TBI initiative. LTCC staff will receive training on TBI services and eligibility criteria so that appropriate referrals can be made and advocacy offered.
- Q9** How will MMAP in non LTCC areas be impacted?
- A9** We are working at the State level to clarify and address issues. Since we are not widely advertising the toll-free telephone number in the non-LTCC areas, little impact is anticipated. When such calls are received by MMAP, they may be handled by the MMAP staff or routed to the local area agency on aging, center for independent living or 211 for assistance.
- Q10** Are options counselors RN's or Social Workers?
- A10** Options counselors must have a at least a bachelor's degree in health or human services and at least one year of relevant experience.

- Q11** UPCAP cited a situation where a consumer called the I&A and was subsequently referred to the MI Choice Program. Will the options counselors refer to MI Choice over other programs?
- A11** Referrals to programs will be based on the individual's preferences, taking into account their circumstances and eligibility. One would expect that any referrals are made in line with the person's choices.
- Q12** Are the LTC Connections working with the 211 system?
- A12** West Michigan and UP calls are being received by 211. Conversations are underway in Detroit as to how the 211 system might interface with the Detroit LTC Connection..
- Q13** Currently 211 only includes information on nonprofit organizations. What about the for-profit organizations?
- A13** Database requirements for the LTCC and 211 are different. DCH will ensure that the Service Point based LTCC resource directory includes information on all providers, including for-profit providers. Specific criteria to be applied to what entities are listed in the I & A databases is under development in the MIS Workgroup.
- Q14** Are the Governing Boards, Consumer Advisory Boards, and Stakeholder meetings open to the public? How can MAHSA become aware of these meetings?
- A14** All meetings must adhere to principles of the Open Meetings Act. We expect LTC Connections board meetings to be open to the public. Minutes to these meetings should be available from the specific LTC Connections agency. MAHSA may contact the local LTCCs for board, workgroup and stakeholder meeting schedules. Detroit indicated they will be holding a Meet & Greet on November 2 from 10:30 - noon.
- Q15** If the single point of entry legislation is not approved, what impact will this have on the concept going statewide?
- A15** The intent is to achieve a statewide system, and to do so after the impact of the demonstrations are known, and to make that system improved based on the findings of the demonstration projects. With or without the legislation, the Department will apply the same process. But with or without the legislation, the intent of the LTC Task Force remains the same. In order to achieve a system of LTC services and supports, a front-door process that informs, supports and assists with individual choice-making is central to this system being responsive, efficient, and with assisting all Michigan residents in planning for their LTC needs. The Department does not intend to implement a statewide expansion without assuring the proper scrutiny to what is learned in the demonstration projects.
- Q16** What are the operating hours for the various LTC Connections?
- A16** Southwest, West and UP are accepting calls 24/7. Detroit is currently accepting calls from 8:30 - 5:00, but is working toward 24/7.

- Q17** How will 211 react if the consumer requires services immediately? Will consumers need to wait until the next day for services?
- A17** It needs to be made clear that while LTC Connections are intended to meet certain response criteria, they are not an “emergency” service, similar to an EMS, a crisis center, or an emergency room. There are response timelines and expectations established in the LTC Connections contracts. These will serve as a benchmark for performance monitoring.
- Q18** How are the Consumer Advisory Board and Governing Board different?
- A18** The governing board is responsible for governance and the day-to-day functioning of the LTCC. The consumer advisory board serves an advocacy role, providing input on policies and procedures in an advisory role.
- Q19** Will the LTC Connections provide services after normal business hours?
- A19** LTCCs are contractually required to have personnel available during non-traditional hours convenient for the public. Options counselors should be available to consumers at critical decision points. All sites reported they are considering alternate work schedules that include nights and weekends, and ensuring that potential employees understand that this is not an 8-5 job.
- Q20** When will the options counselors be available (hired)?
- A20** The goal is to have options counseling services available effective January 1. There is no options counseling being provided at this time.
- Q21** How many options counselors will be available per site?
- A21** It is expected that each LTCC will have adequate options counselors available to cover the need of their specific service area. For planning purposes, the RFP proposed a ratio of one options counselor for every 200 Medicaid long-term care consumers (1:200).
- Q22** Will November be the last informational forum?
- A22** While there is no forum scheduled for December, the Office is committed to holding them as long as the public remains interested. A forum will be held in January and a schedule determined at that time for the remainder of 2007.
- Q23** Is “Single Point of Entry” the name of these entities?
- A23** SPE is a generic and contractual term. For operational purposes, these entities are known as Michigan’s Long Term Care Connections. There are four: Detroit LTC Connection; Upper Peninsula LTC Connection; West Michigan LTC Connection; Southwest Michigan LTC Connection.