MEDICAID LONG-TERM CARE SINGLE POINT OF ENTRY SERVICES PILOT PROJECTS

April 30, 2006

Section 1686: (1) The department shall submit a report by April 30, 2006, to the house of representatives and senate appropriations subcommittees on community health and the house of representatives and senate fiscal agencies on the progress of 3 Medicaid long-term care single point of entry services pilot projects. The department shall also submit a final plan to the house of representatives and senate subcommittees on community health and the house of representatives and senate fiscal agencies 60 days prior to any expansion of the program. (2) As used in this section, "single point of entry" means a system that enables consumers to access Medicaid long-term care services and supports through 1 agency or organization and that promotes consumer education and choice of long-term care options.

Michigan Department of Community Health

Jennifer M. Granholm, Governor
Janet Olszewski, Director
Section 1686 of Public Act 154 of 2005 requires a report on the progress of Long-Term Care Single Point of Entry pilot projects. The Single Point of Entry Project was established as a result of the Governor's Executive Order 2005-14. As of August 24, 2006, contracts have been established with lead agencies in the four regional areas that were awarded SPE grants in June. These demonstration projects were initiated by the Governor's Executive Order 2005-14, issued in June, 2005, in order to implement recommendations made by the Governor's Medicaid Long-Term Care Task Force. The Michigan Department of Community Health, through its newly formed Office of Long-Term Care Supports & Services, issued an Invitation to Bid in November, 2005. Twelve proposals were received and carefully reviewed for desired features. In June, 2006, grants for a 27-month demonstration period were awarded in four of the proposing areas. Each area involves one lead contractor and other local partners and collaborators all working together to develop a collaborative Single Point of Entry system in their area. In September, 2006 the SPE's were named Michigan's Long-Term Care Connections. The sites include:

**Detroit:** Leading the SPE development process for the Detroit area is the Detroit Area Agency on Aging. Their work includes developing a separate governance structure to operate the SPE entity. To date they have retained an interim director, a quality management director, and several information technology staff. They are housed in temporary offices while a permanent office area is being prepared.

**Western Michigan:** Western Michigan partners leading the development efforts include the Area Agency on Aging of Western Michigan (lead), Senior Resources, and HHS Health Options, Inc. They are establishing a governance structure and are engaged in hiring management staff.

**Southwest Michigan Collaborative (SWMC):** The Southwest Michigan project development partners include Region IV Area Agency on Aging, Inc. (lead), Branch – St. Joseph Area Agency on Aging, Burnham Brook, and the Kalamazoo County Health & Community Services Department. The partners are developing a separate governance structure and have retained an interim director.

**Upper Peninsula:** The Upper Peninsula project is being developed as a unit of the Upper Peninsula Area Commission for Area Progress Services, Inc. with a separate governance board for the SPE demonstration. An interim director has been established, and the agency is currently setting up governing structures for the SPE and required policies/processes to ensure that the SPE functions are independent of the AAA and MI Choice Waiver Agent programs under UPCAP.

Revised initial implementation plans are due to MDCH by September 30. All of the above agencies are working directly with the department on establishing a web-based electronic data system and establishing preliminary policies and processes for SPE core functions. Currently all four entities are evaluating regional access practices to determine a baseline for improvement, as well as grasp a deeper understanding as to the barriers and challenges in processes as consumers attempt to access Medicaid services. In the next several months, work will begin on establishing preliminary quality management structural requirements.

Plans for contracting with an independent evaluator to assist in analysis of implementation and outcome issues are currently being developed by MDCH. Actual implementation of SPE Core functions will be phased in over time. It is expected that Information and Assistance functions will be established in at least one section of each region by October 1. Long Term Care Options Counseling Functions should be established and initiated by January 2007.

**Vision Statement**

The Single Point of Entry will be a highly-visible and trusted source of information and assistance about long-term care, aiding Michigan citizens with planning and access to needed services & supports, in accordance with their preferences.