Conflict-Free Access and Planning Workgroup
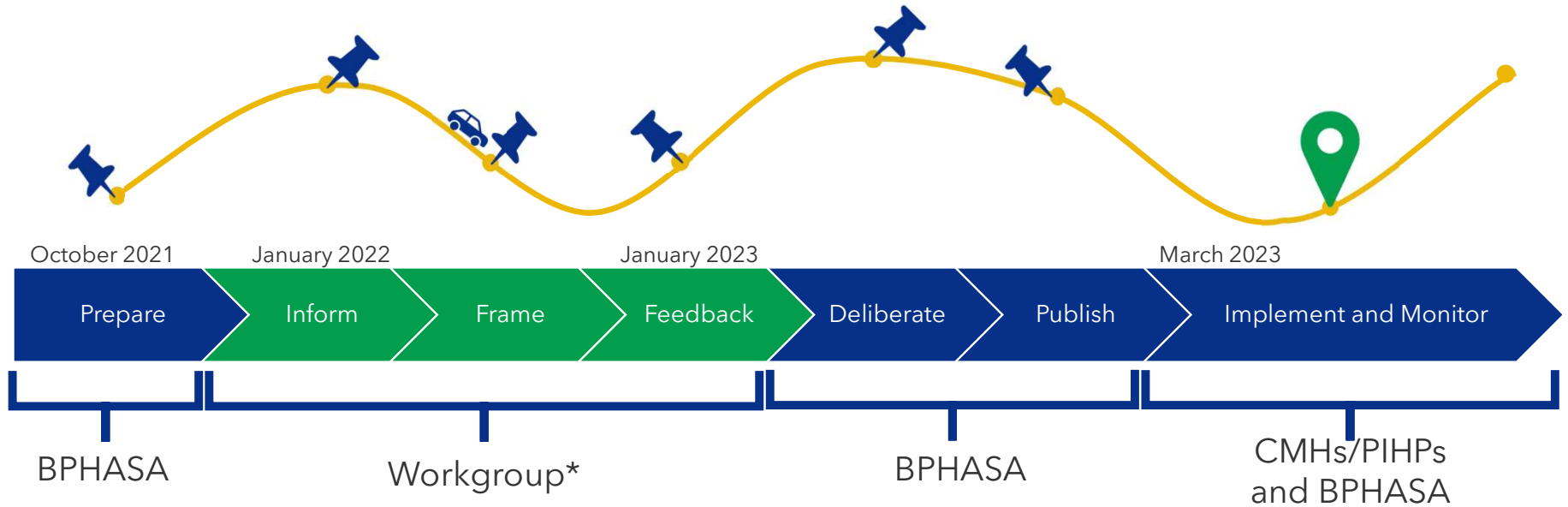
August 17, 2022

Review Workgroup Journey

Workgroup Journey

October 2021   January 2022   January 2023   March 2023

| Prepare | Inform | Frame | Feedback | Deliberate | Publish | Implement and Monitor |

BPHASA

Workgroup*

BPHASA

CMHs/PIHPs and BPHASA

*Portions of framing and feedback are being considered by BPHASA concurrently
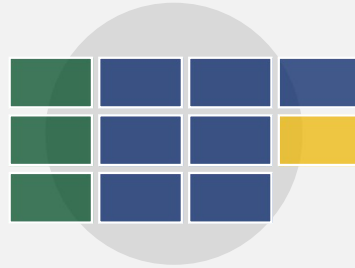
Review Frame

Inform | **Frame** | Feedback

Define Problem

Define Criteria

Develop Options

Evaluate Options

Review Frame

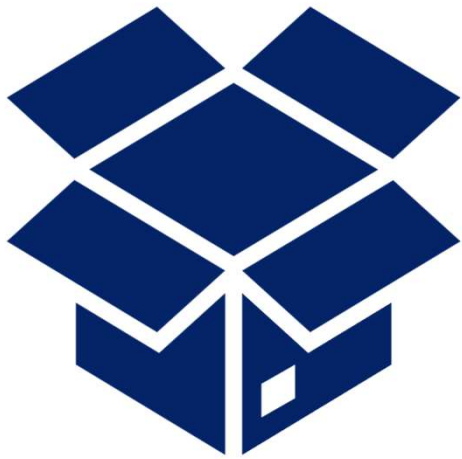Inform Frame Feedback

Define Problem Define Criteria Develop Options Evaluate Options

Meetings in June and July were focused on defining Criteria. Today's focus is reviewing the defined Criteria.

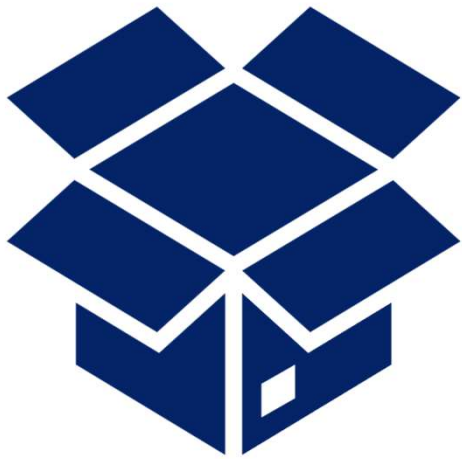# Options and Criteria

Option

Options are the approaches to address Conflict-Free Access and Planning that will be considered by the State. Options still need to be developed. The State has not chosen an option.
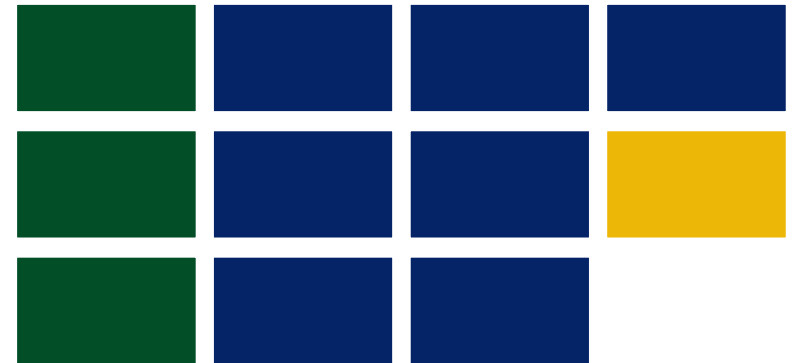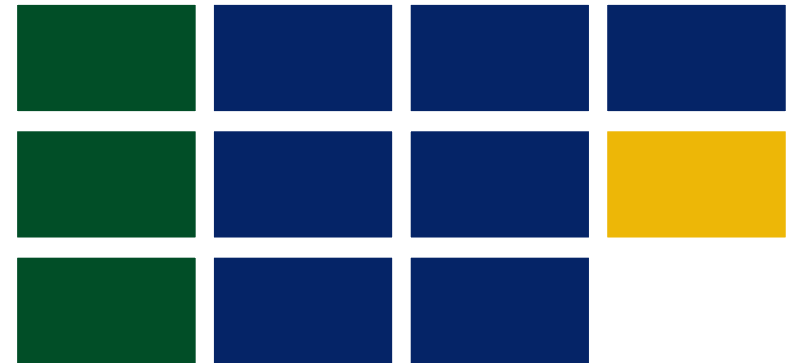
Criteria

Criteria are areas that may be impacted by Conflict-Free Access and Planning.

Options and Criteria
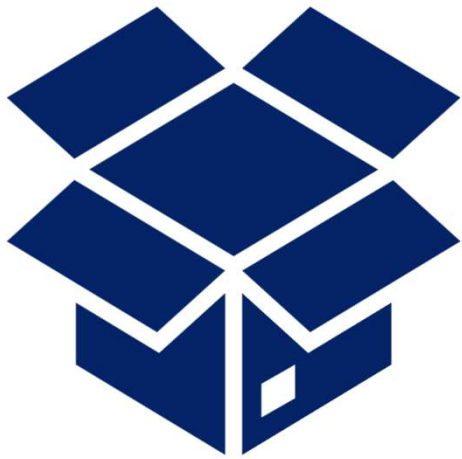
Option

Criteria

Each option will be evaluated using the criteria to develop feedback for the state.

Options and Criteria

Option

Criteria

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Options and Criteria

At the Person Level

There is an incentive for a service provider to determine a person eligible/ineligible or to include themselves in the plan.

At the System Level

The system does not require explicit structures to prevent an entity from acting in its own financial interest at the person level, as defined in federal rules.

Option 1

Option 2

Option 3

Options and Criteria

At the Person Level

There is an incentive for a service provider to determine a person eligible/ineligible or to include themselves in the plan.

At the System Level

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Option 1

Option 2

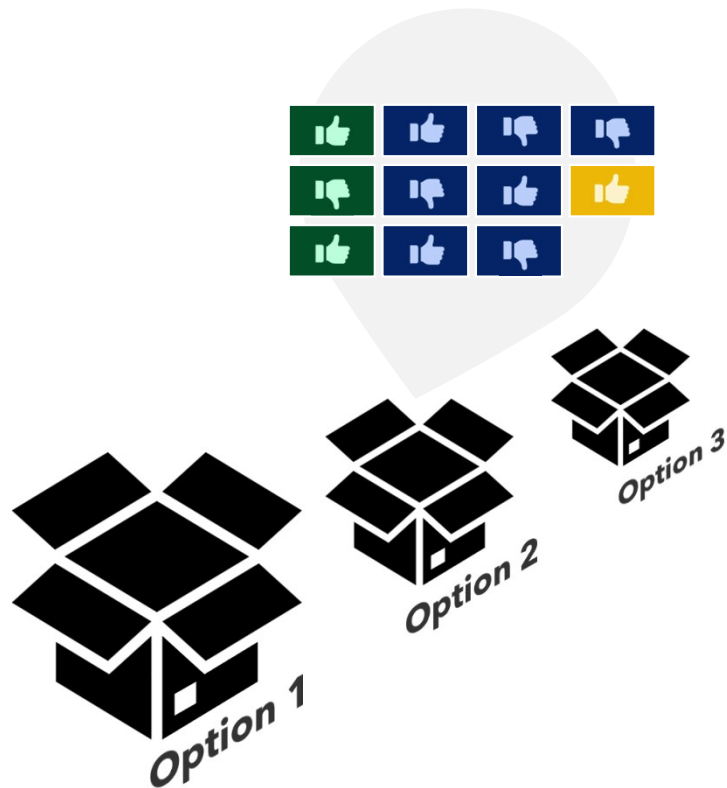Option 3

Options and Criteria

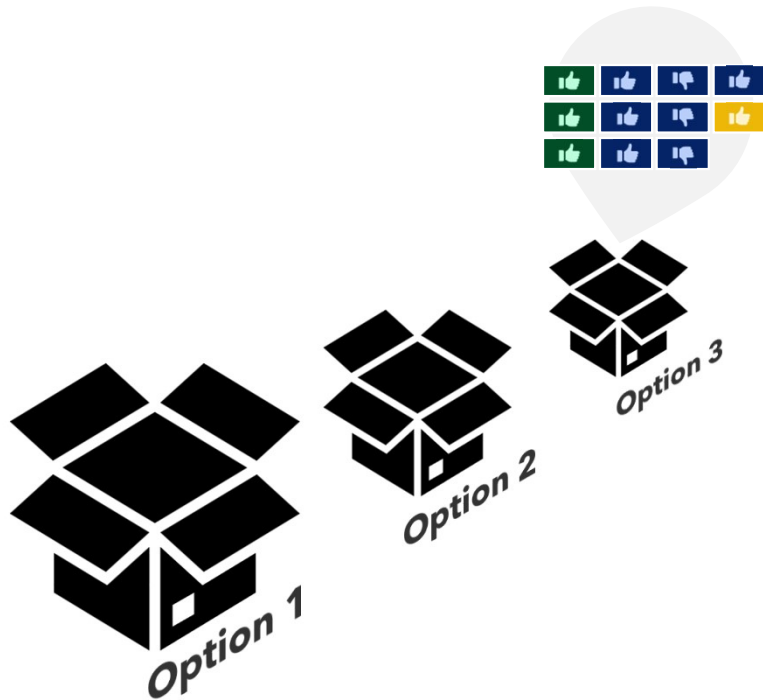## At the Person Level

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Option 1

Option 2

Option 3

Review Criteria and Sub-Criteria

The Ask Today
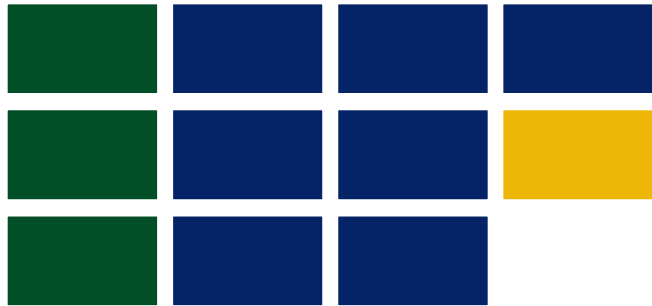
Develop
Draft Criteria/Sub-Criteria

Edit
Criteria/Sub-Criteria

- Re-phrase for consistent structure.
- Relocate "How" and implementation items.
- Remove duplication.

Review
Criteria/Sub-Criteria

The Ask Today

- Review all Criteria and Sub-Criteria.
- If your breakout group's content was misinterpreted, please reach out to Josh and Remi and provide suggestions for revision.
- Consider your priority Criteria and Sub-Criteria and prepare to respond to a future survey.

Remember: Criteria are high-level components to be considered for every option. Criteria and Sub-Criteria do not consider…

"Who"

"How"

Specific Implementation

Breakout Group 1

Autonomy of Personal Choice

- People write the goals in their service plan, when they want to.
- People choose the goals in their plan.
- People choose their services/supports.
- People choose who is involved in the planning process.
- People choose the planning method (e.g., Independent Facilitation, PATH).
- People choose who develops their plan.
- People choose how funds are spent for their services/supports, when they want to (e.g., Self-directed service arrangements).
- People choose the organizations and staff who provide their services.
- People are informed about options before they have to make a choice (e.g., planning methods, services/supports, providers).

Breakout Group 1

Access to Services/Supports

- People choose from the full range of available service options (i.e. all Medicaid services).
- People receive the amount of services/supports they need.
- People receive the least restrictive service/supports to meet their needs (e.g., supports/services provided in the community).
- People are provided services/supports at the needed time.
- People meet with providers in a location that is easy to access.
- People experience diversity, equity, and inclusion in interactions with providers (e.g., providers that consider/recognize race, gender, sexual orientation, religion, disability, and language).
- People with high needs are provided services/supports regardless of insurance coverage.

Breakout Group 1

Continuity of Service/Support Delivery

- People change their plans whenever they want (e.g., change goals, change providers).
- All organizations involved in a person's plan have systems to effectively coordinate care (e.g., health information exchange, record transfer).
- People do not need to retell their story or go to redundant appointments.
- All organizations involved in the person's plan have systems to effectively communicate with payers about coverage and payment.
- Plan developers are knowledgeable about the full range of services and resources available in the community.
- People receive services/supports for more than one need without disruptions (e.g., SUD, MI, and I/DD services).
- People transition smoothly between urgent (e.g., crisis, urgent psychiatric services) and ongoing services/supports.
- People transition smoothly between youth and adult services/supports.
- Evidence-based, integrated services (e.g., Wraparound, ACT) are provided as intended.

Breakout Group 2

Minimal System Changes
(previously "Range from Status Quo")

- – Minimal changes are required to the system.

System Viability
(Previously "Organizational Viability")

- – Staff employed by system matches population need (i.e., the number and qualifications of staff meets the needs of the population).
- – Organizations involved in the system match population need (e.g., the number, qualifications, quality, and services/supports provided meets the needs of the population).

Breakout Group 3

Administrative Efficiency

- – Cost of administrative activities is minimized.

System Structures and Relationship

Moved to Option Development Portion of Project

- – System has structures to oversee and ensure appropriate amount, scope, and duration of services are provided.
- – System has structures to oversee and address recipient rights and grievance and appeals.
- – System has structures to address payment and co-payment of services.
- – System has structures to conduct site reviews to assess safety, quality, and compliance.
- – System has structures to retain or release Access/Planning/Service Providers to ensure sufficient and appropriate services are available to communities.

Breakout Group 4

Alignment in System

- Aligns with most or all Federal Programs and Grants (e.g., CCBHC, FQHC, Block Grants, SAMHSA Grants, HCBS, Health Homes).
- Aligns with most or all State Initiatives (e.g., MiCAL, Parity, 1915(i) expansion, MiKids Now activities, PCP guidelines/principles, self-direction/self-determination, Independent Facilitation, Intensive Crisis Stabilization Services, Integration with Physical Health Care, Trauma-Informed Care, Milliman Rate Setting).
- Aligns with most or all Tribal Initiatives.

Next Steps