Person-Centered Budget Algorithm (PCBA) Development

Technical Advisory Group (TAG) Meeting II

November 3, 2020

Agenda

- Introductions
- Person-Centered Budget Algorithm (PCBA) Refresher
- New Assessment and Person-Centered Support Plan Overview
- PCBA Development Process and Update
- Next Steps

Introductions
Health Care Policy & Financing (HCPF)

- Office of Community Living (OCL)
  - Bonnie Silva, Office Director
  - Amanda Lofgren, Case Management & Quality Performance Division Director
  - Michelle Topkoff, Entry Point & Case Management Section Manager
  - Tasia Sinn, Senior Policy Advisor
  - Matt Bohannon, Access Unit Supervisor
  - Ben Hoppin, Operations Coordinator
  - Lori Thompson, HCBS Policy Advisor

Introductions
Optumas

- Project Team
  - Steve Schramm, Founder and Managing Director
  - Meg Frenzen, Sr. Consultant
  - Martin McNamara, Actuarial Consultant
  - Tomas Abrate, Informatics Analyst
  - Additional Supporting Staff

Person-Centered Budget Algorithm (PCBA) Refresher

What is a Person-Centered Budget Algorithm (PCBA)?

- Used for all Health First Colorado Home and Community-Based Services (HCBS) waiver programs
- Built on the new Colorado Assessment data (not the SIS or other existing tools)
- Assigns a range of resources for individuals based on assessment process
- Used alongside person-centered planning process to identify services needed to support individual

Why a Person-Centered Budget Algorithm (PCBA)?

- Important aspect of making sure people get the right services, at the right time, in the right place
- Objective method for assigning resources versus relying strictly on case manager's subjective judgement
- Based on new Assessment, with much more information
- Department priority to get it right – working closely with stakeholders and staff on teams across the offices

Some Concerns We've Heard So Far

- We do not have enough high-quality data to develop the PCBA
- The Clinical Hypothetical Study was not representative of the population and the sample assessments were poorly filled out
- Concerned the new Assessment and Person-Centered Support Plan will not be implemented as expected
- Must train case managers better on certain items in the new Assessment
- Must have an exceptions process
- Is there a hidden agenda?
- What are the "other tools in the toolbox"?
- How will you notify members of allocation methodology?

New Assessment and Person-Centered Support Plan Overview

New Assessment and Person-Centered Support Plan

- After years of development with stakeholders, the new Assessment and Person-Centered Support Plan are being finalized
- Provides more comprehensive assessment to inform eligibility and person-centered support planning (does not include financial eligibility)
- Unified process for all programs and people accessing LTSS
- Eliminates need for most of the other existing tools
- Plan to implement new Assessment and Person-Centered Support Plan July 1, 2021

Pilot Overview

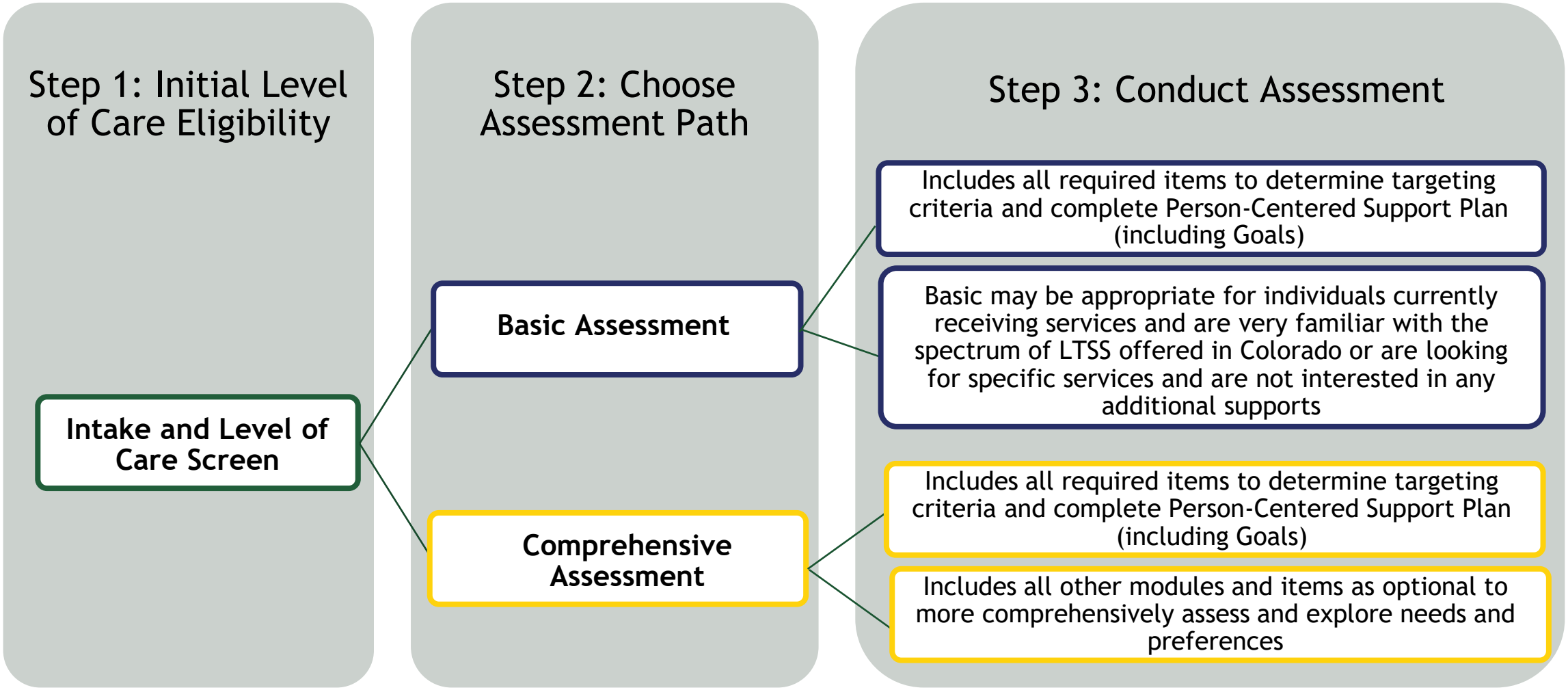
The new Assessment and Person-Centered Support Plan Pilot took place from March 2019 – May 2020 and was conducted with 644 participants seeking or receiving LTSS and 20 Case Management Agencies (10 Community Centered Boards, 10 Single Entry Points).

Phase 1	Phase 2	Time Study
• Tested the content and automation flow of the new Assessment and Person-Centered Support Plan • Conducted Comparative Analysis of the ULTC 100.2 item responses to the new Level of Care (LOC) Screen item responses in the new Assessment • Established objective criteria for Nursing Facility & Hospital LOC using new Assessment items that minimized impact on eligibility • Tested reliability	• Assessed the workflow of the Assessment process and automation within the new Care & Case Management System • Allowed case managers to become familiar with the new Assessment and Person-Centered Support Plan content and automation	• During the Pilot, case managers conducted the Comprehensive Assessment and Person-Centered Support Plan to understand how long the process took • Determined that the average time for completion of the Comprehensive was 266 minutes (~4 hours and 25 mins), the longest time was 309 minutes (adults with IDD) and the shortest time was 231 minutes (for children with IDD)

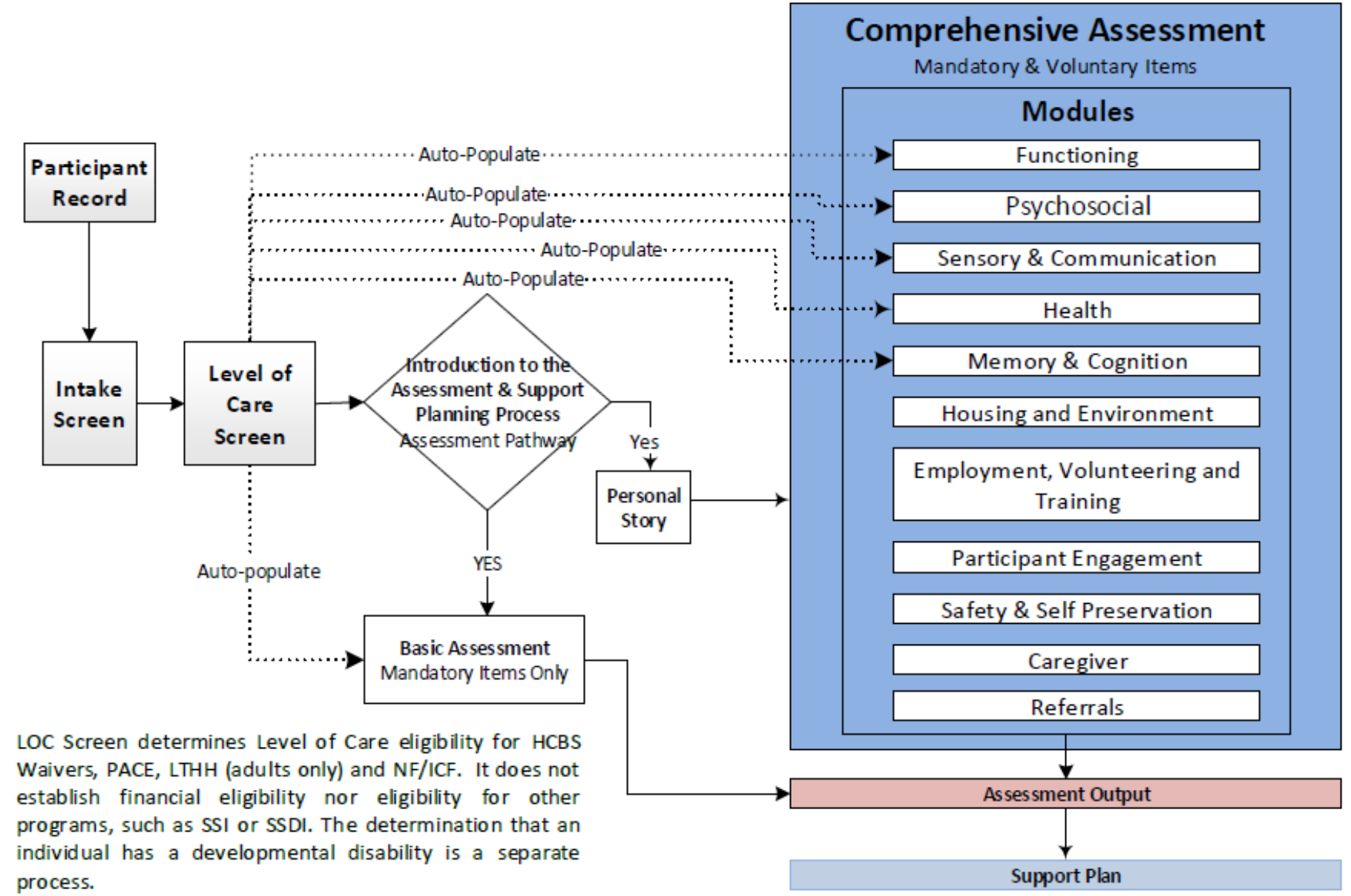
Post-Pilot Work

- A major component of the Pilot was to streamline the process using a variety of approaches, including results from previous efforts, new statistical analyses and input from members, case managers, stakeholders, and Department staff
- Changes were made to the process based on the information, including:
  - Removing and/or simplifying items
  - Reducing redundancies
  - Streamlining the flow of the process, such as grouping similar constructs together
  - Identifying opportunities for enhancements and coordination in the Care & Case Management System
- Between July-September 2020, the Department finalized the new Assessment and Person-Centered Support Plan process
- Now focused on automating the Assessment and Person-Centered Support Plan, including outputs to be used in PCBA and Person-Centered Support Plan

New Assessment Process



Colorado's LTSS Assessment and Support Plan Process (Updated 9/08/20)



LOC Screen determines Level of Care eligibility for HCBS Waivers, PACE, LTHH (adults only) and NF/ICF. It does not establish financial eligibility nor eligibility for other programs, such as SSI or SSDI. The determination that an individual has a developmental disability is a separate process.

NEW Assessment and Support Planning Process

Member participates in Assessment Process with Case Manager in new Care & Case Management System

Support Planning conducted by Case Manager with Member using Assessment and Person-Centered Budget Algorithm Outputs as guides, including all goals, natural supports, personal story elements, desire to self-direct, etc.

Member, Case Manager, and Providers sign off on Person-Centered Support Plan

Assessment Output produced automatically by Care & Case Management System

Person-Centered Budget Algorithm (PCBA) Output produced automatically based on Assessment Output and provides a range of resources

Person-Centered Support Plan produced by the Care & Case Management System as a printout for Member, Case Manager, and Providers

Foundation

- More comprehensive assessment and support planning process
- Whole process conducted at least annually
- New Case Manager training
- More objective, fair and equitable allocation of resources
- New exceptions process

Care & Case Management System

- Developing a new Care & Case Management System that combines into a single IT system:
  - New Assessment and Person-Centered Support Plan processes
  - Service authorization
  - Reporting functions of case management
- Will replace other systems currently used (does not replace financial eligibility systems)
- Target Implementation date is July 1, 2021

Automation

- New Assessment and Person-Centered Support Plan will be automated into the new Care & Case Management System (CCM)
- The Care & Case Management System will produce Assessment, Person-Centered Support Plan and Person-Centered Budget Algorithm outputs to be used by the Individual and Case Manager during the person-centered support planning process
- Case management functions existing across several systems will be consolidated into the new Care & Case Management System

Work Going on in 2020-21

- **Automate** Assessment and Support Plan in Care & Case Management System
- Develop and Implement **Case Manager Training**
- Produce and Distribute Materials for **Member Orientation to New Process**
- Develop **Person-Centered Budget Algorithm** (PCBA)
- Stakeholder Engagement to Develop PCBA **Exceptions Process**
- **Waiver Amendments and Rule Changes**

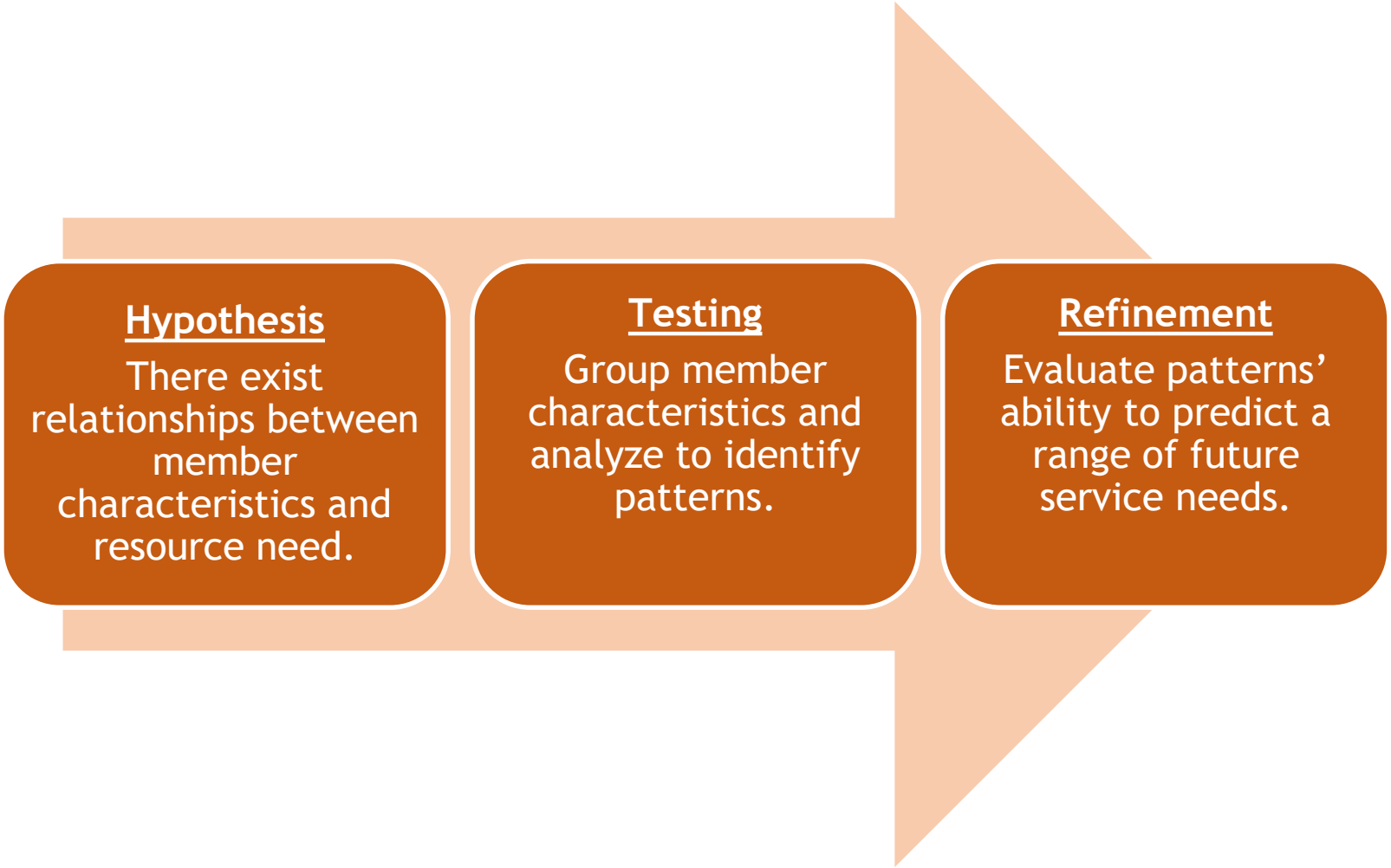
Materials To Be Posted Soon

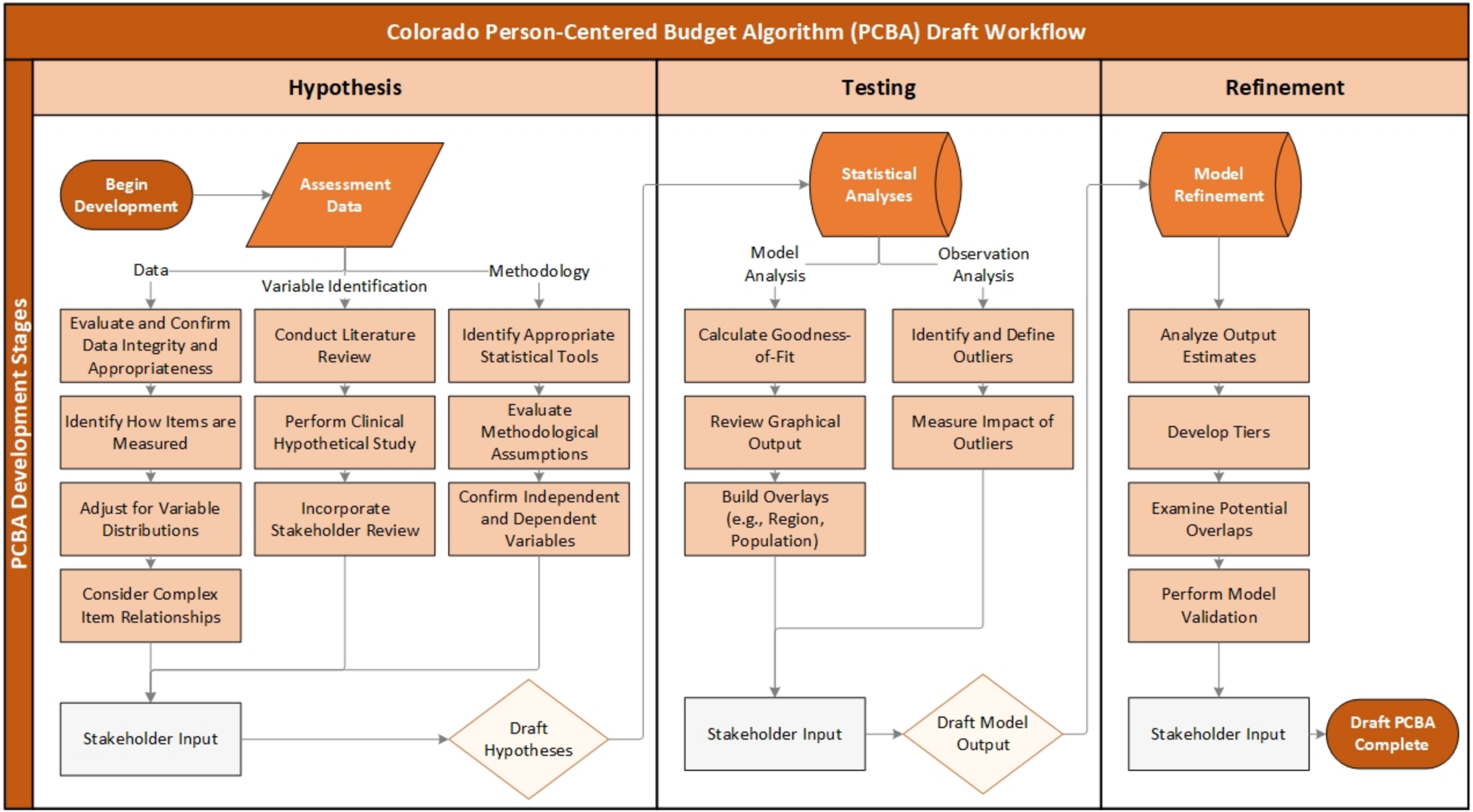
1. Crosswalk of items in Comprehensive and Basic Assessments
2. Draft Assessment and Person-Centered Support Plan training manuals updated to reflect Pilot feedback
3. Sample Assessment and Person-Centered Support Plan outputs

Questions?

Person-Centered Budget Algorithm (PCBA) Development and Update

PCBA Development Stages

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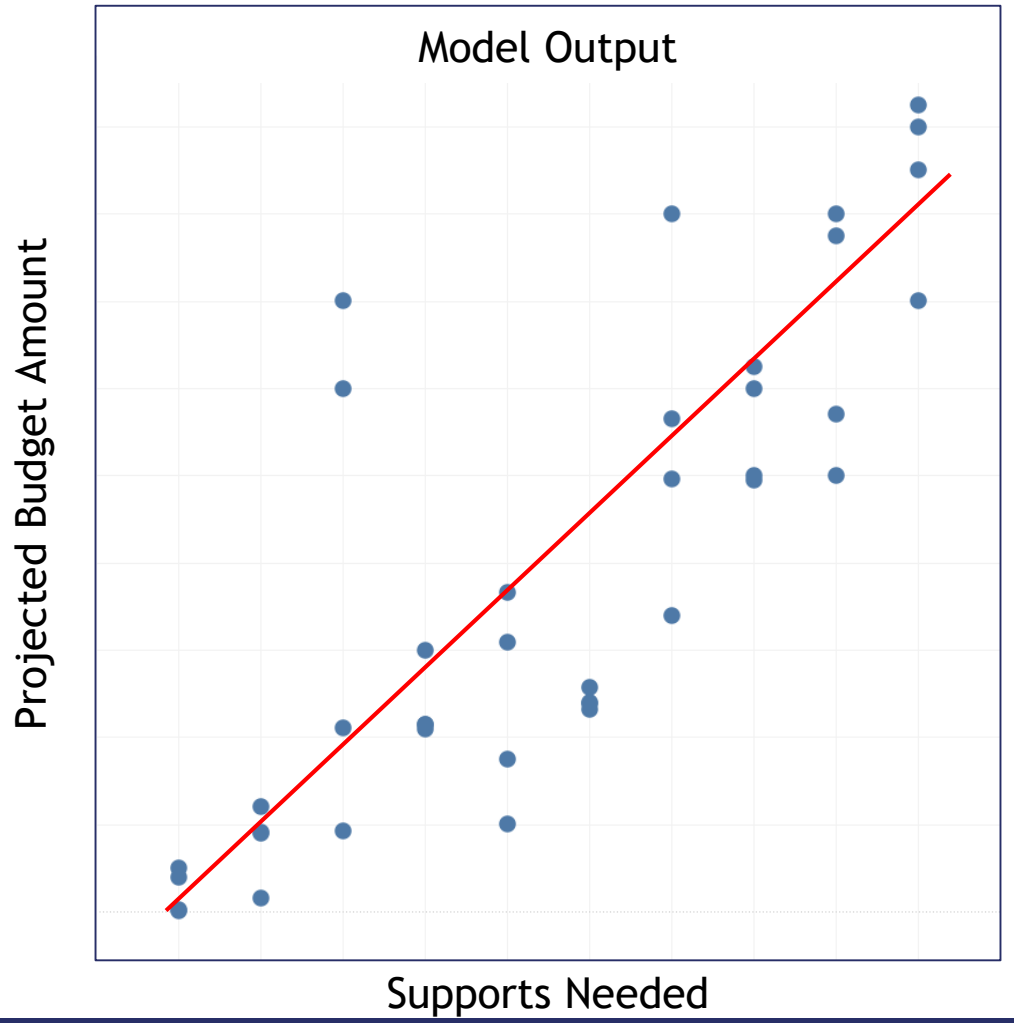
Draft PCBA Complete

Calculate Goodness-of-Fit



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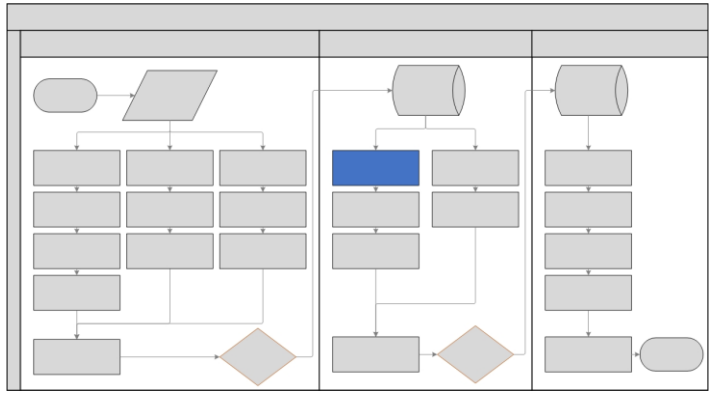
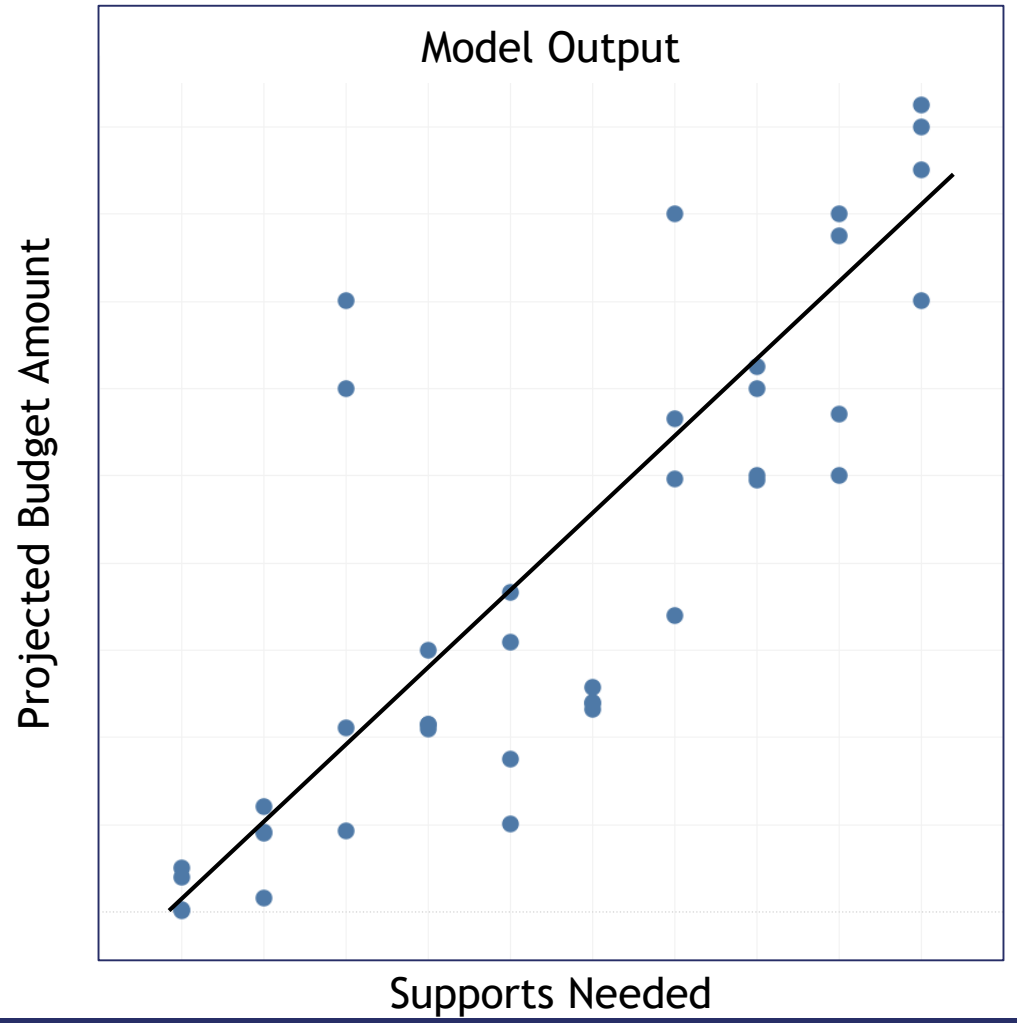
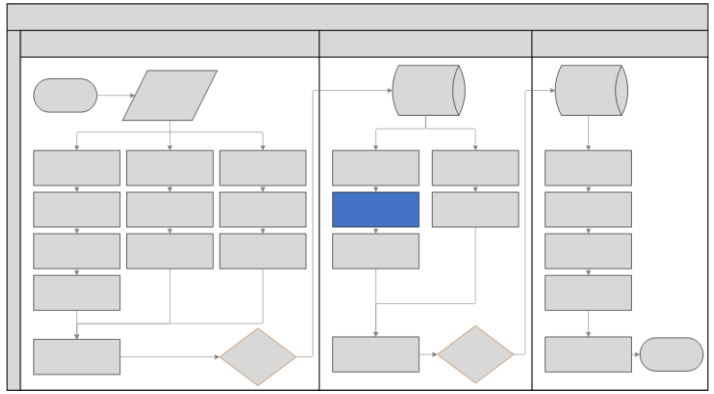
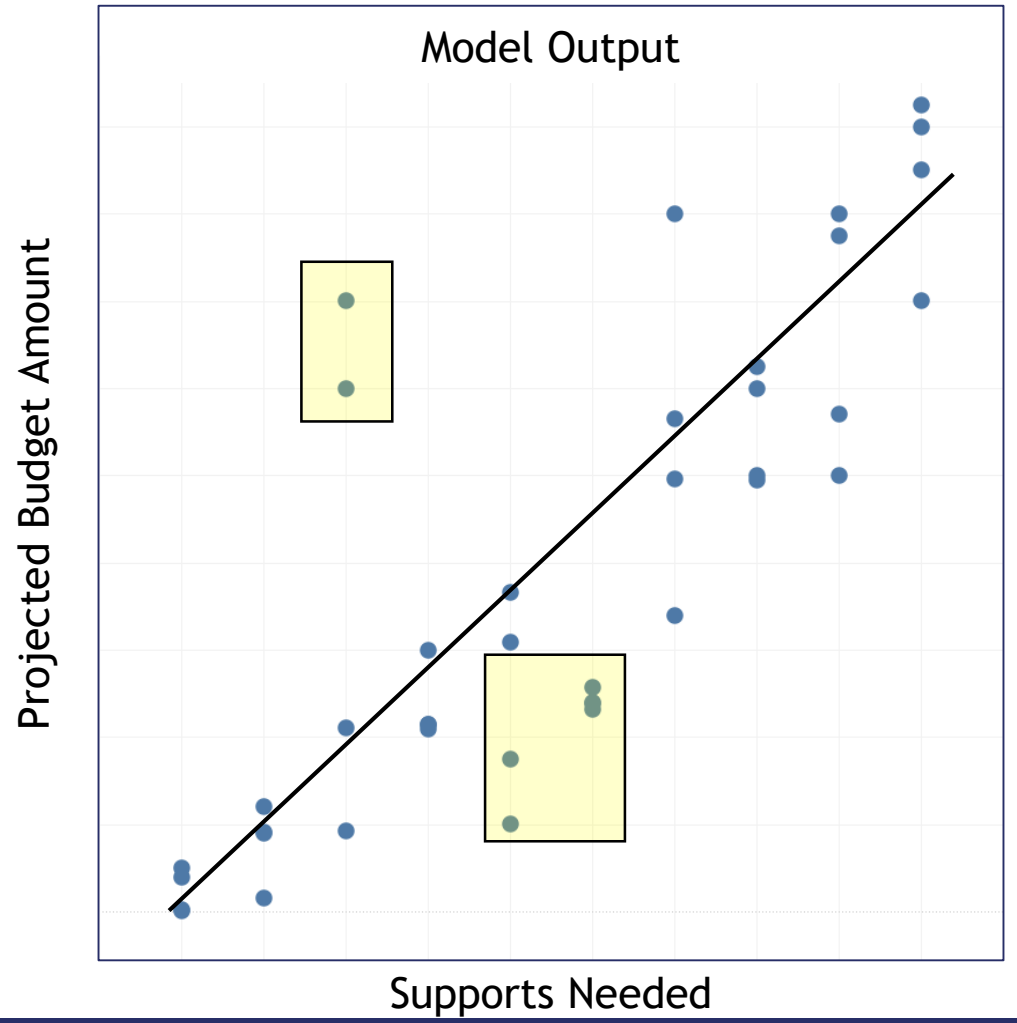


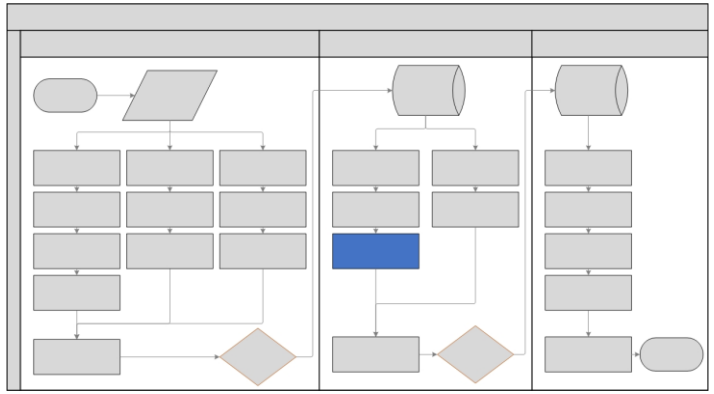
Review Graphical Output



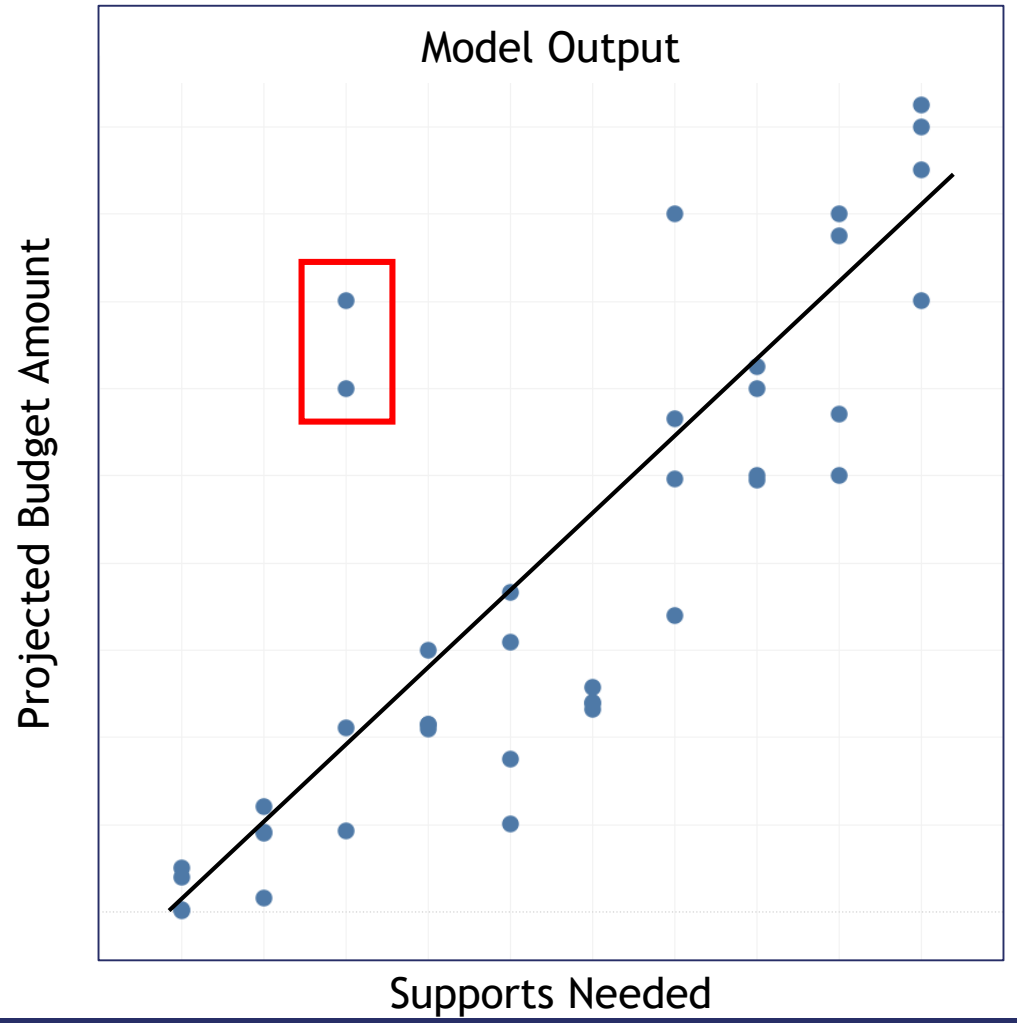


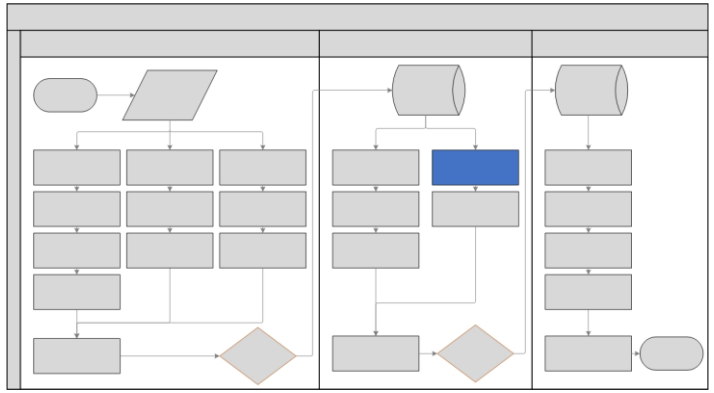
Build Overlays



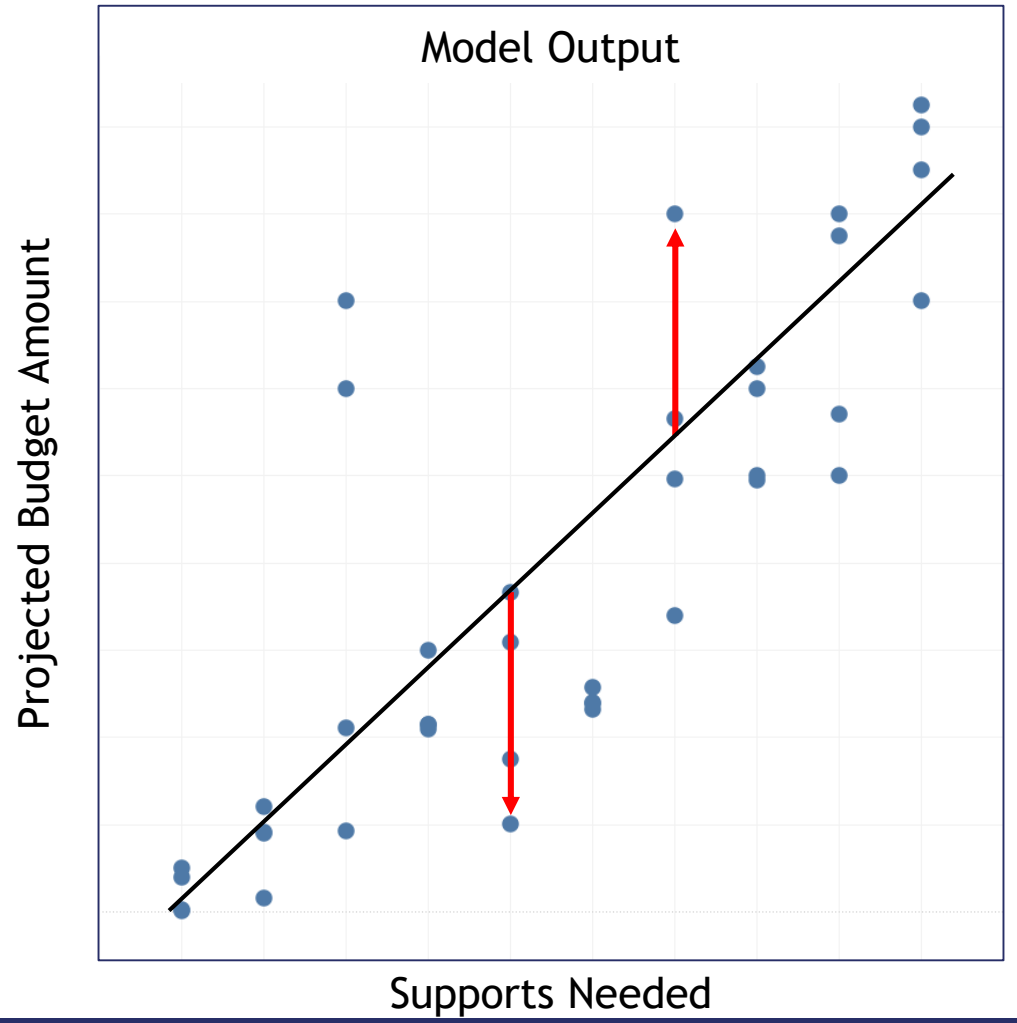


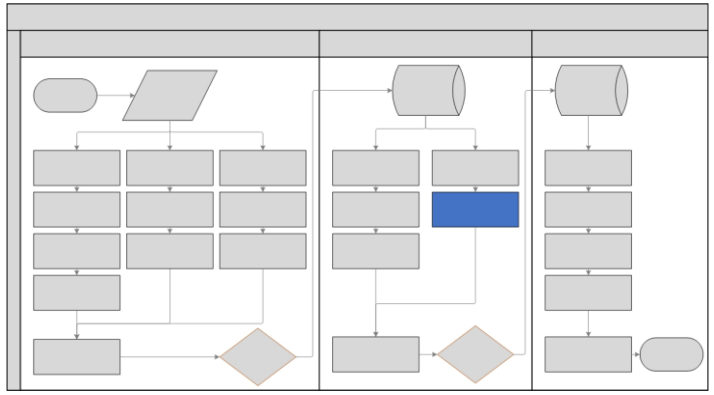
Identify and Define Outliers



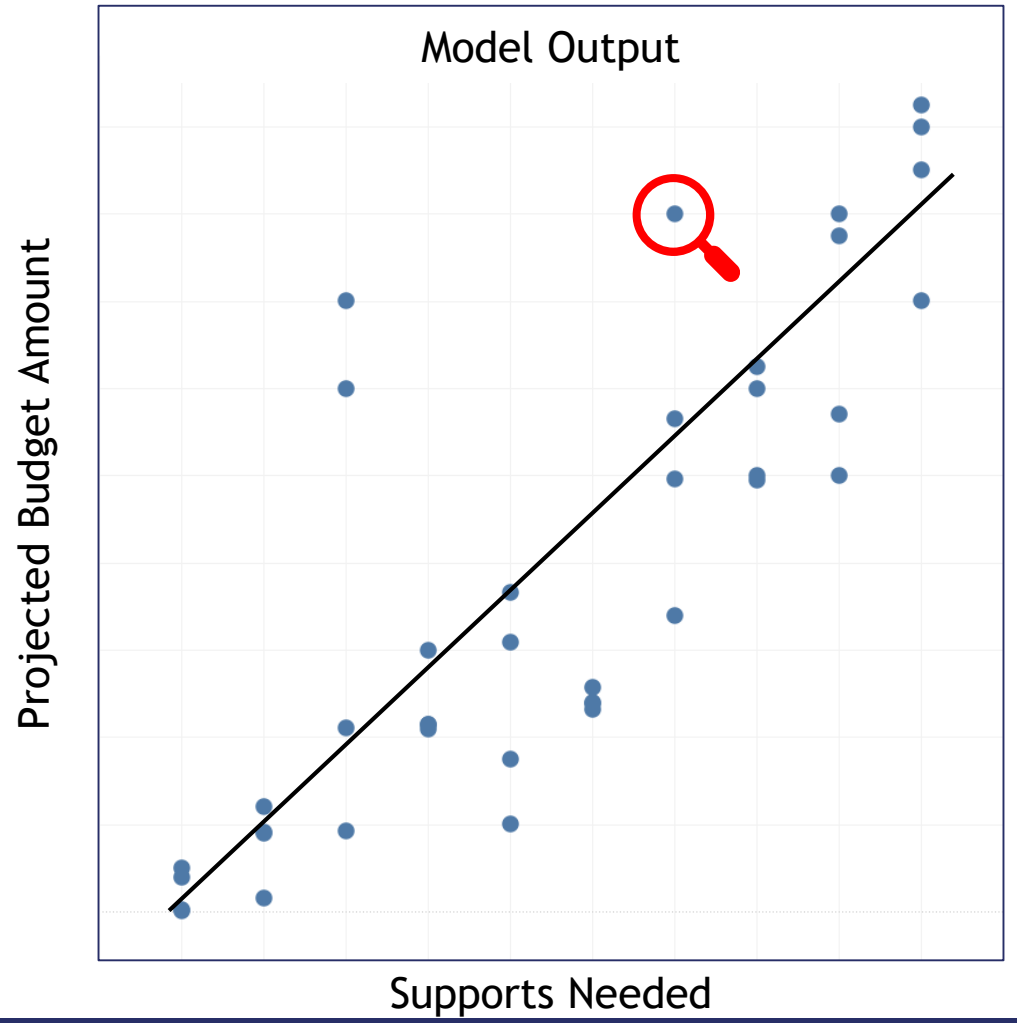


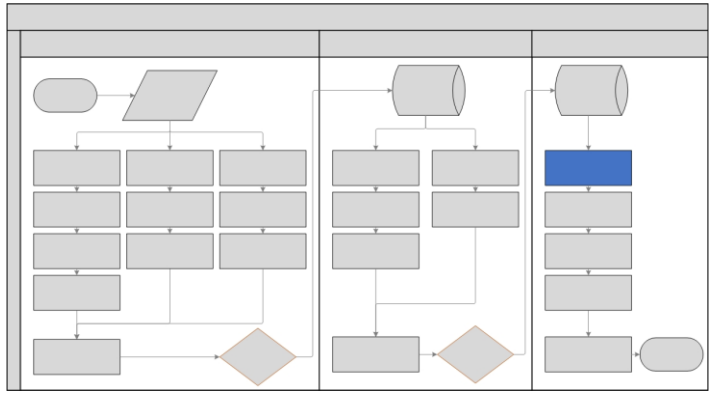
Measure Impact of Outliers



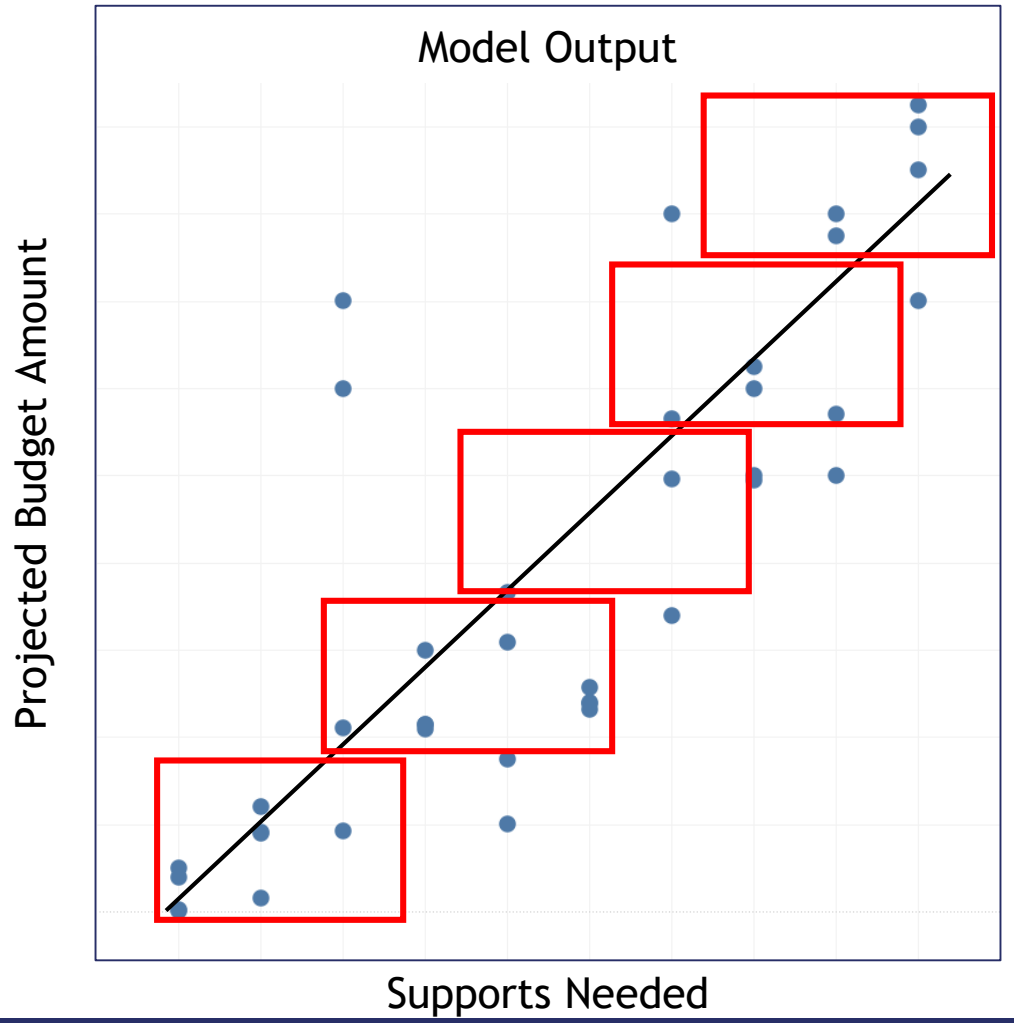


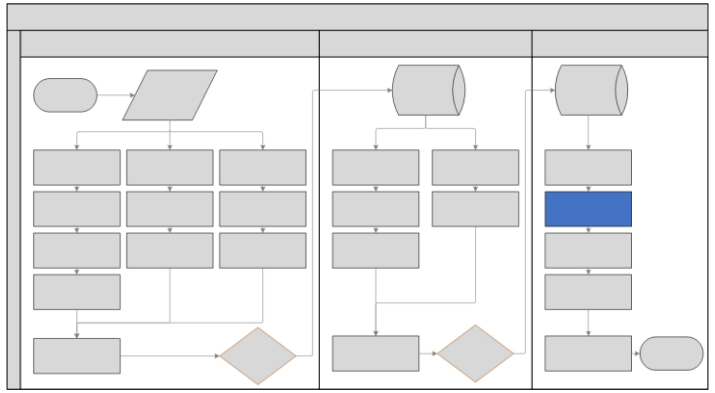
Analyze Output Estimates



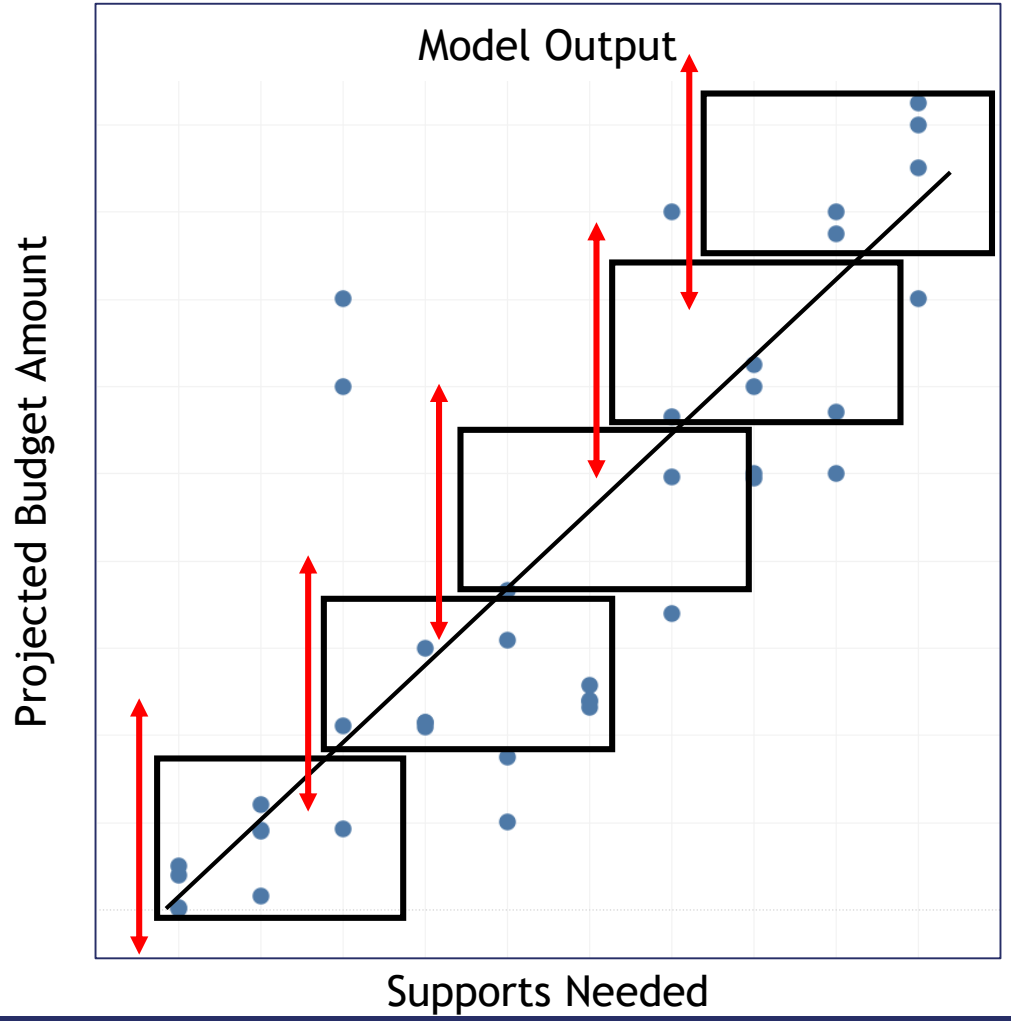


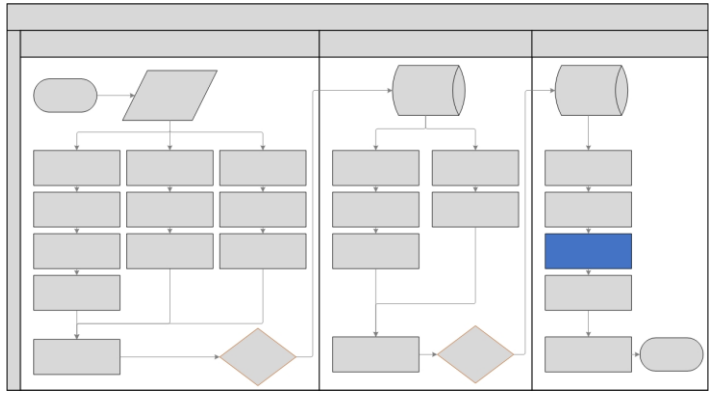
Develop Tiers

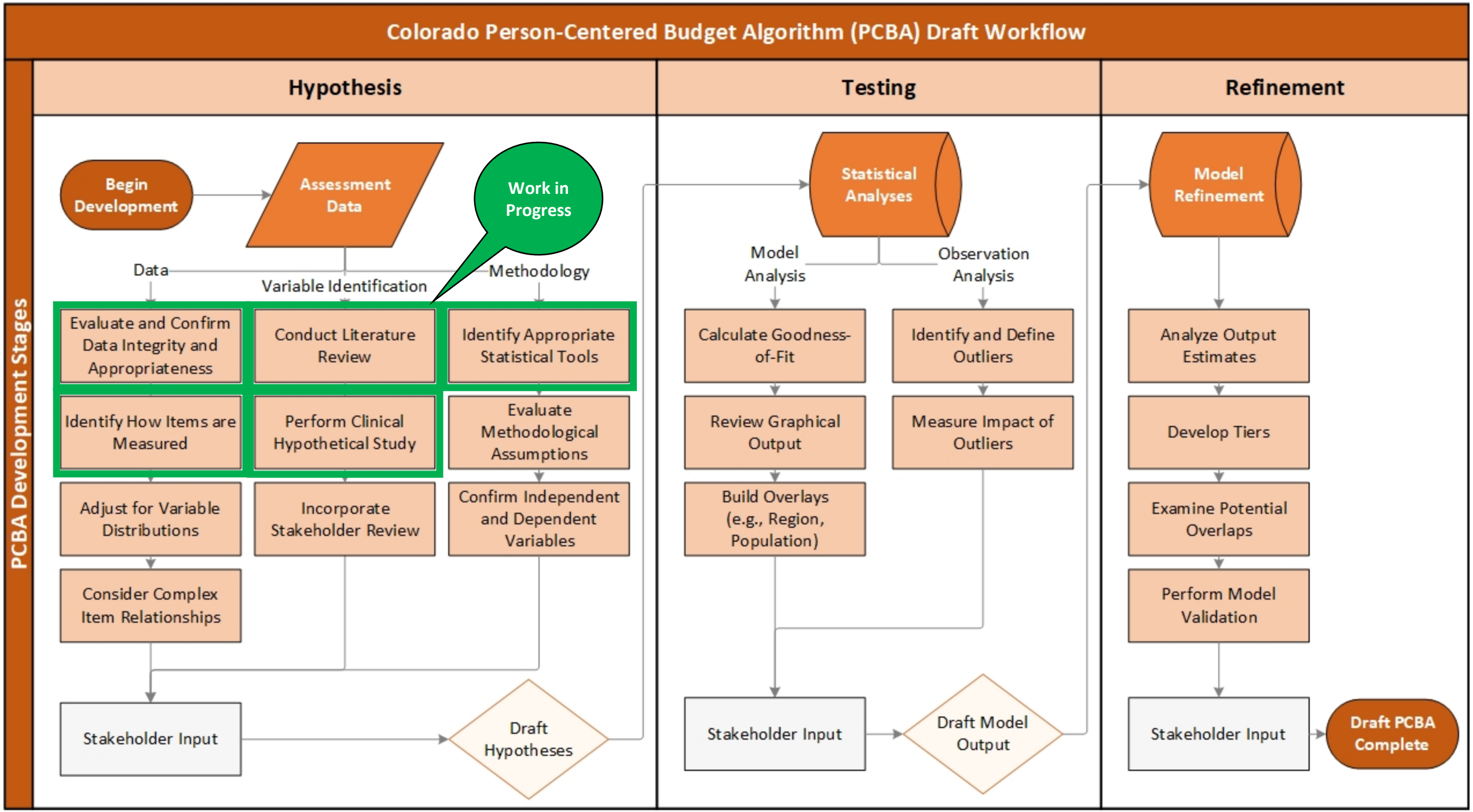




Examine Potential Overlaps



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Key Areas for Stakeholder Input

- PCBA Model Development
- Stratification and Allocation Modeling
- CDASS/IHSS Recommendations
- PCBA Implementation Recommendations
- PCBA Exceptions Process Recommendations

Questions?

Next Steps

TAG Touchbase - Clinical Hypothetical Review

- Nov. 10, 2020 from 9 a.m. - 11 a.m.
- Link: meet.google.com/ejb-poyj-rzu
- Phone: +1 415-604-0739; PIN: 512 531 067#

Statewide Meetings

- Nov. 16, 2020 at 9:30 - 11 a.m. **and** 5 - 6:30 p.m.
- [WEBINAR AND CALL-IN INFO TO BE POSTED AND SENT OUT]

Other Upcoming TAG Meetings

- TBD

Stay Engaged

- LTSS Assessment and Support Plan Webpage
- Person-Centered Budget Algorithm Webpage (includes “Frequently Asked Questions (FAQs)”)
- Office of Community Living Stakeholder Webpage
- Sign up for Constant Contact email announcements

Contact Information

Tasia Sinn
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tasia.sinn@state.co.us

Thank you!

Appendix

New Assessment Modules Summaries

- **Intake Screen:** Collects basic information about the individual. Information obtained through the Intake Screen is used to inform whether the individual should receive or wants to receive an assessment.
- **Level of Care Screen**: Pulls the items necessary to determine and verify that the individual meets level of care (LOC) prior to completing the broader assessment.
- **Personal Story**: Allows the individual an opportunity to provide information that she or he feels is important for providers and others providing support to know. This module is voluntary and can be completed at the individual's convenience online or with the Case Manager during the assessment process. This information is collected early in the process so that the assessor can consider the individual's goals and objectives from the beginning of the assessment and support planning process. Two versions of this module were developed, 1) for individuals ages 0-7 and those with significant cognitive impairments and 2) individuals ages 8+ without significant cognitive impairments.
- **Case Manager Introduction:** Facilitates a discussion between the case manager and individual around which assessment path, Basic or Comprehensive, the *individual* would like to follow.

New Assessment Modules Summaries, cont.

- **Functioning:** Assesses the needs, strengths and preferences of the individual in performing and receiving support for 1) Activities of Daily Living (ADL) such as dressing, eating and bathing, and 2) Instrumental Activities of Daily Living (IADL) such as housekeeping, meal preparation and shopping. The module also includes needs for training or assistive devices to increase independence whenever possible. Specific items are skipped based on the individual's age. There are two versions of the functioning module that are tailored to specific age groups: ages 0-3 and 4+.
- **Health:** Assesses health status of the individual and needs for support or treatment to maintain health. This module also offers brief screening for 1) health risks that could indicate a need for further follow-up with a physician or agency, and 2) undiagnosed brain injury (traumatic or acquired).
- **Memory and Cognition**: Assesses the current functional status of the person to recall and understand information, make judgments, express ideas, and make decisions necessary for daily life.
- **Psychosocial:** Assesses the presence and intensity of behavioral needs and provides an initial screening to determine the need for a referral to assess and treat depression, suicidal ideation and substance abuse, compulsive gambling, and tobacco usage.

New Assessment Modules Summaries, cont.

- **Sensory and Communication**: Contains items related to hearing and vision, functional communication, and sensory integration. In addition to looking at needs, this module considers training and assistive devices to increase independence and community inclusion. In addition to the core module, a supplement has been developed to collect age-specific information about functioning.
- **Employment, Volunteering and Training (EVT)**: Explores interests in work, a volunteer position, or education and training opportunities and to find out what barriers exist for the individual in those areas. The items will also help to identify the support needed to achieve the outcomes the individual would like to see.
- **Housing and Environment**: Contains items related to the individual's current living situation, environmental safety and quality, and interests/needs for housing and environment that support and maximize independence of the individual. This module also helps to identify transitional needs for individuals leaving institutions or hospitals or those who may be in temporary housing or be homeless.
- **Caregiver:** Assesses the level of support provided by informal caregiver(s) and is designed to be used to 1) identify situations in which relief or support is critical to the continuation of informal caregiving and 2) identify situations in which paid supports should be initiated.

New Assessment Modules Summaries, cont.

- **Individual Engagement**: Captures the individual's desire and needs related to advocacy. This includes looking at the need/desire for training and assistance to enhance engagement and control of service planning and service delivery. This module also identifies individual preferences for how information about services is obtained and interest in individual direction. Two versions of this module were developed, 1) for individuals ages 0-13 and those with significant cognitive impairments and 2) individuals ages 14+ without significant cognitive impairments.
- **Safety and Self-preservation**: Evaluates the individual's capacity and need for assistance in personal safety and self-preservation. This module addresses the need for supervision and oversight. It also includes items about the need for training to avoid abuse, neglect or exploitation and the supports necessary to ensure the health and welfare of the individual. Collects information about supervision and support needs across a variety of settings, including home, community, and day programs, and provides space for assessors to document additional information that was not covered in the assessment.
- **Medical Fragility Module:** Identifies additional supports needed because of medical complexity and/or fragility.