



LI RPC HHH (Health Home/HARP/HCBS) Workgroup – Q3 Meeting

Thursday 9/24/20 Held through Go To Meeting

MINUTES

Meeting began at 1:34 PM

- Introductions Attendance taken through the chat feature. Those on via phone were asked to email Alyssa to confirm their attendance. Alyssa began the meeting and went over housekeeping issues.
- **Previous HHH Identified Issues** Alyssa presented the issues that were previously identified in the HHH group during 2018-2019. Each issue was presented to the group for feedback and insight.
 - 1. Agencies often not sure how to best utilize the many alerts being received from RHIO.
 - Discussion focused that Health Homes get real time alerts and are then passing that along to the CMA. This issue will be closed as no one reported this as a current issue.
 - 2. Region uncertain about how to better facilitate HCBS workflow to improve access to services.
 - State is working on a training regarding this. DOH will be arranging the trainings in this area. System change to CORE will also change this. Suggested to move to parking lot until more information comes out about the CORE transition/requirements.
 - **3.** HH CMA's report HARP member lists from DOH are largely inaccurate and it is difficult to find members.
 - HARP members are going back and forth in eligibility. Many members lose their HARP status. Providers aren't notified and then are being denied services. Impacts Care Management and HCBS Providers. There is often no reason for the loss of their H1H9 status. This issue is identified as being from DOH not the local DSS. This issue will be Open and may be broken down further to allow for focus on problem-solving status loss with DOH.
 - 4. RCA's report member lists received from MCOs is 60-70% inaccurate.
 - The lists have dwindled down. A lot of the lists are still inaccurate. Not seeing referrals. This issue will remain open.

- 5. Region is experiencing shortage of qualified care managers.
 - Workforce is still an issue. Need to look at this still. Issues hiring and retraining staff, especially Care Managers, bilingual staff and peers. This issue will remain open.
- 6. Region experiencing shortage of qualified peers
 - Same as issue 5. This needs to remain open and be an area of focus.
- 7. Region reporting that working peers feeling lack of support and role uncertainty.
 - No feedback provided on this. Peer Supervision Learning Collaborative still continues. Will continue this issue and reassess in a later meeting.
- HHH Moving Forward: Discussion on if group should continue to meet quarterly. If meeting, topic areas to focus on. Alyssa discussed structure of having Co-Leads for the committee to help offer subject matter expertise and help guide the group. If anyone is interested in being a co-lead, reach out to Alyssa. Alyssa will reach out to group members if there are no volunteers.
 - Feedback was it may be best to be put meetings on hold until there is more information about when service transition will begin. Also feedback that the group should still meet to discuss other issues, including workforce, transition, as well as State Mandate initiative.
 - Important for the group to meet when CORE transition is occurring and to prep for it.
 - Current crisis has changed the nature of the work that is being done. Need to strategize and problem-solve through the transition.
 - Concern raised over the State Mandate that HH program is being asked to disenroll up to 16% of clients that are being billed at the low rate. Need to look at this population. They are high need, but not going in and out of the hospital. Because they are not in a Managed Care Plan and may have Medicare they don't qualify for the medium level payment. They are coming in at the low rate because of the work that is being done for years. Could look at the impact of what this mandate will do for this population.
 - \circ $\;$ Should have more definitive information by December.
 - May be helpful for Health Home to present.

• Workforce work in Central Region

 RPC Coordinator Katie Molanare from Central NY presented on the work being done in this region. Discussion surrounded having universal certification for Care Managers. Partnered with Syracuse University for a Care Management Pilot to do a Care Management training. Pilot program showed it may be more applicable to those starting in the field. There were topic areas that were not part of the curriculum that the Care Managers felt would be beneficial (SUD, harm reduction).

• HCBS Capacity Survey

• Showed example of HCBS Capacity Survey utilized in other regions. Asked for feedback if this would be helpful for Long Island.

- Feedback is that it would be helpful to have the information. Has been helpful to get the info in the children's subcommittee
- Alyssa will prepare the survey for dissemination

• LI Service Directory

- Showed examples of directories that were created in other regions.
- Group liked the layout of the directories better than the current list from DOH.
- Suggestion that any nuances be added to the list, so people are aware of how services are currently being delivered right now (ex: Face to Face, telehealth, not currently providing a service they previously did).
- Best way for getting in touch as timely communication is an issue.
- Alyssa will work on this and get this out before the next meeting.

• Open Floor

- Dr. Close 10/27 at 2 PM is the next monthly LI Adult HCBS Provider Forum. If you are interested send an email to Dr. Close or Leon for the link. Meeting is usually the last Tuesday of each month.
- No issues brought up.

Meeting ended at 1:53 PM.

Next Meeting: TBD

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