



## Care Coordination Organization Operational Requirements

### **STAFFING and PROGRAM REQUIREMENTS**

#### *Staffing*

- Intense caseload/supervision to achieve health & community-based service integration for both health/medical + OPWDD services
- Care Manager experience & qualification requirements, resulting in higher pay to attract viable candidates
- Caseload size restrictions for Tier 4 & Willowbrook
- Increased face to face requirements, varying by Tier designation
- Requirement to enroll all individuals without regard to caseload management/staffing availability at CCO

#### *Assessments*

- Increased assessments (DDP2, IAM, LCED, CAS) either directly by Care Manager or in collaboration with Care Manager
- Lifeplan process has intense documentation requirements, including but not limited to medical/pharmacy/approvals/authorizations

#### *Operations*

- Coordination of Risk Management assessments and planning process for high risk individuals and others with legal involvement
- Establish health care management team with clinical professionals to meet regulatory requirements
- Clinical component requirements including health promotion and education, chronic disease management, and management of ADTs and high utilizers. Incorporation of marketing teams to accomplish proactive health promotion expectations
- Work with NYStart and local crisis management teams in collaboration with medical, especially for high utilizers of Emergency Departments



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- The development of health/clinical screenings, related trainings, and monitoring and analysis
- Establish Intake department as the CCOs are the single point of entry into the OPWDD service system to meet regulatory requirements
- Establish a Benefits and Enrollment department to meet regulatory requirements and to ensure individuals maintain their benefits
- Establish Housing Navigator group to ensure that individuals are placed in the most appropriate residential setting.

## **IT and DATA MANAGEMENT REQUIREMENTS**

- I/DD Care Management specific electronic health record (EHR) system management, maintenance, and records management
- Need for a robust IT infrastructure to support care management, quality, enrollment, healthcare, training, provider network, compliance, intake and finance
- Compliance with costly Data Use Agreement requirements set forth by the Medicaid Security Bureau. First time implementation costs, but ongoing audit costs, maintenance requirements and costs, and support staff to ensure compliance
- Countless reporting requirements set forth ad hoc and ongoing by OPWDD (i.e.: flu vaccines, High Risk assessment reports, Lifeplan completion rates, enrollment counts, etc.)
- Regional Health Information Organization (RHIO) connectivity requirement-consent acquisition, systems connectivity, and maintenance, requiring several staff at each CCO in Care Management, IT, Compliance, Network Development, Clinical Departments, etc.)
- Enhanced data management and analytics to meet HH metric, quality and system requirements which have been significantly expanded during the ongoing pandemic
- CMART development implementation, training, and reporting



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- Expectation of data sharing directly with OPWDD
- CAS assessors accessing charts electronically requiring CCO staff to ensure compliance with DUA and other readiness activities for CAS assessors' needs

### **PROVIDER NETWORK DEVELOPMENT**

- Developing a service provider network and establishing provider relations to meet regulatory requirements
- Provider Relations team, Clinical team and Care Management team working directly with medical providers and Medicaid managed care plans to ensure integration of health and welfare of individuals we serve

### **SUPPORT FUNCTIONS**

- Training department to deliver enhanced training to meet regulatory requirements (i.e.: 10 basic skills in addition to other SLMS trainings)
- Complaint, issues, grievance, appeal tracking, monitoring system and management supported by staff in multiple departments and system development and maintenance
- Customer service department to take call 24/7 to meet regulatory requirements
- Compliance, HIPPA Officer and compliance staff to ensure CCO meets all regulatory requirements
- Individual/Family Advisory Boards requirements
- Weekly/monthly reporting to OPWDD, including CCD and monthly Lifeplan reporting
- CCO Administrative structure since Care Management is a standalone service



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### SUPPORT FUNCTIONS (continued)

- DQI monthly audits, as well as redesignation
- IRMA data entry and significant follow up to incidents including current pandemic reporting requirements
- DOH/OPWDD designation review is extensive with two regulatory bodies and significant additional audit requirements.