San Francisco Long Term Care Coordinating Council (LTCCC)

Guiding the development of a network of home, community-based, and institutional long term services and supports -- in the most integrated settings – for older adults and adults with disabilities

2014 - 2015 LTCCC Policy Agenda

Adopted: January 9, 2014

GOAL 1: Improve Quality of Life

GOAL 2: Establish Better Coordination of Services

GOAL 3. Increase Access to Services

GOAL 4: Improve Service Quality

GOAL 5: Secure Financial and Political Resources

GOAL 6: Expand Service Capacity

ACTIVE INVOLVEMENT IN POLICY & STRATEGY DEVELOPMENT
- TO CONTINUE IN 2014 & 2015

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Strategy A. Oversee implementation of San Francisco's Long Term Care Integration (LTCI) Strategic Plan

With the development and implementation of California's Coordinated Care Initiative (CCI), the state has begun the process of integrating health care and supportive social services while looking to reduce escalating health care costs. The desired results are: (1) a coordinated health care delivery system; (2) better health outcomes for consumers; and (3) greater control on spending.

In preparation, in December 2011, the LTCCC in collaboration with DAAS, appointed the Long Term Care Integration (LTCI) Design Group to: (1) explore the potential for long-term care integration (LTCI) in San Francisco; (2) determine what is required to improve the provision of long-term services and supports (LTSS) that will benefit older adults and adults with disabilities; and (3) develop an LTCI Strategic Plan that includes recommendations to guide improvements in the organization, availability, and financing of long-term services and supports (LTSS). That plan was completed in August 2013 and published in October 2014.

An LTCI Implementation Body will be created that will be responsible for ensuring implementation of all recommendations in the LTCI Strategic Plan. The LTCCC will be represented on that LTCI Implementation Body.

Following are the objectives to be achieved from the implementation of the LTCI Strategic Plan between 2014 and 2016, which will improve access and coordination of LTSS for older adults and adults with disabilities:

- Objective 1: Strengthened collaboration among county departments, including the Department of Aging and Adult Services (DAAS), Human Service Agency (HSA), and Department of Public Health (DPH), and among the three managed care plans (Health Plans), which include the San Francisco Health Plan, Anthem Blue Cross, and On Lok Lifeways.
- Objective 2: Improved access to long term services and supports (LTSS) for seniors and people with disabilities.
- Objective 3: Improved ways to obtain information for consumers and service providers.
- Objective 4: Enhanced coordination of services and efficiency.
- Objective 5: Linked data systems to improve efficiency and collaboration.
- Objective 6: Improved quality of services provided for consumers.
- Objective 7: Expanded supports for family caregivers, independent providers, community caregivers and individuals who are socially isolated.
- Objective 8: Incorporated LTSS, crucial in keeping older adults and adults with disabilities healthy and safe in the community, into San Francisco's LTSS managed care system.
- Objective 9: Enhanced direct care workforce to meet current and projected service needs.
- Objective 10. Improved In-Home Supportive Services (IHSS) Program
- Objective 11: Improved resources for people with Alzheimer's and other dementias served by Health Plans.
- Objective 12: Clear, consistent messaging delivered to consumers, stakeholders and advocates through a robust communications plan regarding the recommendations to improve access to and coordination of LTSS.
- Objective 13: Opportunities for aging and disability service providers to collaborate in the development of integrated business models and plans for the delivery and financing of community-based LTSS.

<u>Cal MediConnect Pilot Project</u>. California's has established a *Cal MediConnect Pilot Project*, which focuses on individuals who are full benefit Medicare and Medi-Cal beneficiaries (dual eligibles). The three-year project will combine all health services (medical, behavioral health, home and community-based services, and long-term services and supports) into a single benefit package, which will be delivered through a coordinated system. A capitated payment model will be used to provide both Medicare and Medi-Cal benefits through the state's existing network of Medi-Cal Health Plans.

This pilot project will initially launch in 2014 with eight approved demonstration counties, including: Alameda, Los Angeles, Orange, Riverside, San Bernardino, San Diego, San Mateo, and Santa Clara.

Expansion from the original eight counties cannot begin without state legislative approval. The state's goal is to expand to eight additional demonstration counties (which may include San Francisco), with full statewide implementation will begin after that. Since additional legislation is needed, the most likely timeframe for CCI expansion to San Francisco is 2016.

Accordingly, time is available to prepare for this transition so that the City and County of San Francisco, the Health Plans, and older adults and adults with disabilities eligible for Medi-Cal – all are ready for this transition.

The LTCCC is the policy body that can: (1) oversee San Francisco's Long Term Care Integration (LTCI) Strategic Plan, to be managed by an LTCI implementation body; (2) advocate for the realization of all recommendations; and (3) communicate with key stakeholders, policy makers, and the community about the need to prepare for the transition to LTCI, which will strongly impact Medi-Cal eligible older adults and adults with disabilities.

To do this, the LTCCC should create improved public information, outreach, and community education mechanisms that inform key local stakeholders, policy makers, and consumers about: (1) the work of the LTCCC; and (2) the implementation of the LTCI Strategic Plan. Toward this end,

- 1. Review this 2014 2015 LTCCC Policy Agenda.
- 2. Develop the 2014 2015 LTCCC communications strategy.
- 3. Review the LTCI communications strategy found at the end of the LTCI Strategic Plan.
- 4. Consider how the transition to Medi-Cal managed care for LTSS will be communicated to Medi-Cal eligible older adults and adults with disabilities, and to the larger San Francisco community.
- 5. Learn what County departments (DPH, DAAS, MOD) are doing in regard to communications.
- 6. Consider the role of the Mayor's Office in implementing this LTCI communications strategy.
- 7. Consider obtaining mainstream media coverage (print and television) to educate the public.
- 8. Participate in presentations about: (1) the work of the LTCCC as identified in the 2014 LTCCC Policy Agenda; and (2) the LTCI Strategic Plan and its recommendations to key local stakeholders, policy makers, and consumers, including the following:

Mayor's Office:

- Mayor's Office of Housing
- Mayor's Office on Disability

Controller's Office

Board of Supervisors

City Commissions:

- Aging and Adult Services Commission
- Health Commission
- Human Services Commission
- MUNI Commission
- Housing Authority Commission
- Council on Disability

Health Plans:

- San Francisco Health Plan
- Anthem Blue Cross
- On Lok Lifeways

Consumers:

- Older Adults
- Adults with Disabilities

Policy and Advocacy groups:

- Coalition of Agencies Serving the Elderly
- Senior & Disability Action
- Advisory Council on Aging

Strategy B. Provide leadership re implementation of California's Coordinated Care Initiative (CCI) and San Francisco's LTCI Strategic Plan, which is the local response to the CCI. Be the recognized, trusted source of CCI Information

- 1. Track the State's implementation of the Coordinated Care Initiative (CCI).
- 2. Be the recognized, trusted source of information about the CCI in California, and implementation progress in San Francisco as it prepares for the transition to LTCI and the provision of LTSS by managed care Health Plans:
 - Become informed about the LTCI Strategic Plan and the CCI.
 - Become familiar with all recommendations in the LTCI Strategic Plan.
 - While not every LTCCC member will be an expert on the LTCI Strategic Plan and the CCI, know how to direct inquiries to LTCCC members who are experts.

Strategy C. Facilitate San Francisco becoming an age and disability friendly city

The Age and Disability Friendly San Francisco Workgroup is working with the Planning Department and the Office of Economic and Workforce Development to:

1. Select 25 commercial corridors for improvements. This Workgroup is adding age and disability criteria into the toolkit for these corridors.

The Workgroup is working with the Mayor's Office and other stakeholders and policy makers to:

- 2. Enable San Francisco to join the WHO (World Health Organization) network for Age Friendly Cities. WHO provides expertise, resources, and an exchange with other cities in the network throughout the world.
- 3. The WHO application, if accepted, will endorse the city as a member of this network. Then there is a three year implementation period.
- 4. WHO wants continual improvement in five year increments. There are eight domains for improvements.

Strategy D. Support efforts to increase the availability of a range of safe, affordable, accessible and adaptable housing options

- 1. Reactivate the Housing and Services Workgroup:
 - Explore options to increase the availability of housing and services.
 - Meet and work with housing developers re the development of housing and services.

- Advocate with Mayor's Office of Housing re uses of Housing Trust Fund to address the needs for accessible, adaptable and affordable housing for:
 - o older adults,
 - o adults with disabilities,
 - o adults aging with HIV/AIDS,
 - o adults with Alzheimer's disease and other forms of dementia, and
 - o families caring for children with disabilities
- Explore opportunities to provide input into decisions about the uses of the Housing Trust Fund.
- Advocate with Mayor's Office of Housing re issues raised in Housing Impediments Report.
- Explore issues related to shelters and SRO hotels.
- Evaluate issues involving housing and health care reform.