

RHODE ISLAND -- 2001 Community PASS Grant

Identified Problems with the States' Long-Term Care System

- There are no consumer-directed personal assistant services available for children unless they are in a residential program.
- The current benefit structure limits the range of available services.
- Existing providers are unable to meet the demand for services.
- Staffing shortages often prevent families from receiving reliable services even for approved services.
- Descriptions of child and family needs are reduced to medical definitions and therapeutic purpose in order to receive reimbursement.

Perceived Strengths

- DHS has developed a strong relationship with consumers in the past three years while developing and implementing Phase 1 of the Comprehensive Evaluation, Diagnosis, Assessment, Referral, and Reevaluation (CEDARR) Initiative: CEDARR Family Centers.
- DHS has demonstrated sustained commitment to the development of a responsive system of care for Children with Special Health Care Needs (CSHCNs) through the CEDARR Initiative.
- PASS will become reimbursable through Medicaid under the EPSDT provisions and have prior authorization through the CEDARR Family Care Plan.
- A CEDARR electronic case coordination system has been designed and implemented to support coordination of services and provide a uniform centralized database.

Primary Focus of Grant Activities

- Design and implement a Personal Assistance Services and Support (PASS) program with collaboration from key stakeholders.
- Develop certification standards for PASS providers.
- Provide specialized training modules for key parties.
- Evaluate and redesign the PASS program through systematic evaluation of key program components and consumer feedback.

Goals, Objectives, and Activities

Overall Goal. To design a consumer-directed PASS program that will maximize control and choice for children with special health care needs and their families by enhancing their independence and ability to live in and participate in the community.

Goal. Design and implement a consumer-directed Personal Assistance Services and Support (PASS) program that will maximize control and choice for children with special health care needs and their families, potentially substitute for other therapeutic services in high demand, expand the pool of current service providers, and improve the continuum of services for children.

Objectives/Activities

- Collaborate with consumers, advocates, and providers to guide the design of key components of the PASS program.
- Develop certification and performance standards for PASS providers.
- Facilitate workshops for potential PASS providers.
- Establish prior authorization system through CEDARR Family Centers.
- Convene a PASS certification Review Team inclusive of consumers.
- Design and develop PASS informational materials.
- Integrate PASS services into the existing Rhode Island Medicaid infrastructure.
- Provide start-up monitoring and technical assistance and support to PASS providers.

Goal. To develop and implement specialized training modules targeted to key parties in the PASS program (consumers, broker agencies/fiscal intermediaries, PASS direct workers, CEDARR Family Centers).

Objectives/Activities

- Analyze the training needs of CEDARR Family Center staff, consumers, and PASS providers.
- Develop a specialized curriculum for each target group.
- Establish a training plan and implement training for all groups.
- Develop tools to be used by CEDARR Family Center staff to assist consumers with decision-making and management regarding PASS.

Goal. Implement a PASS quality assurance and program evaluation system that is data driven.

Objective/Activities

- Provide oversight and monitoring of PASS provider performance in relation to certification standards through site visits and data review.
- Perform financial and utilization analysis (using CEDARR data system) on an ongoing basis.
- Monitor outcomes for families.
- Convene focus groups of PASS consumers and implement satisfaction surveys for program review and improvement.

Key Activities and Products

- Collaborate with consumers, advocates, and providers to guide the key design components of PASS.

- Develop certification and performance standards for PASS providers.
- Integrate PASS services into the existing Rhode Island Medicaid infrastructure for children with special health care needs.
- Develop and implement specialized training modules targeted to key parties in the PASS program.
- Develop tools to be used by CEDARR Family Center staff to assist consumers with decision-making and management regarding PASS.
- Implement a PASS quality assurance and program evaluation system that is data driven.

Consumer Partners and Consumer Involvement in Planning Activities

- The Leadership Roundtable was involved in developing the CEDARR initiative.
- The CEDARR Policy Advisory Committee, an 11-member body that includes six family representatives and one member from each of five state agencies, helped develop.

Consumer Partners and Consumer Involvement in Implementation Activities

The CEDARR Policy Advisory Committee will oversee the CEDARR initiative.

Public Partners

- Department of Human Services.
- Department of Children, Youth, and Families.
- Department Mental Health, Retardation, and Hospitals.
- Department of Health.
- Department of Education.

Private Partners and Subcontractors

- Affiliated Computer Services/Birch & Davis Health Management Corporation (B&D).
- University Affiliated Program (UAP).
- Advanced Behavioral Health, Inc. (ABH)

Public and Private Partnership Development/Involvement in the Planning Phase

Public Partners

- Representatives from the Departments of Human Services; Children, Youth and Families; Education, Health; Mental Health, Retardation and Hospitals gathered for a 2-day retreat and emerged with a commitment to work collaboratively to develop the CEDARR initiative.
- A CEDARR Policy Advisory Committee was formed in August 2000 to provide a more systematic approach to assessing and guiding the program's development.
- PASS workgroups will be developed from the broad base of consumers that collaborated on the CEDARR initiative as well as consumers of other Medicaid services for CSHCN.

Private Partners

Affiliated Computer Services/Birch & Davis Health Management Corporation (B&D) supports DHS in advancing the objectives of the department and functions in an integrated or merged staff model. The DHS worked closely with B&D as well as with the UAP of Rhode Island in preparing this proposal. B&D provided consultation on methodological and management components of the proposal and worked with DHS staff in organizing the presentation of the material. UAP provided technical assistance in the conceptualization and structure for the training aspects of the proposal.

Public and Private Partnership Development/Involvement in Implementation

Public Partners

- Representatives from the Departments of Human Services; Children, Youth and Families; Health; Education and Mental Health, Retardation and Hospitals with consumer involvement has begun to develop draft certification standards for CEDARR Direct Services. CD-PASS certification standards will be developed in a similar fashion.
- The Department of Health, the Department of Education, and the Department of Children, Youth and Families have dedicated a combination of 1.5 full-time equivalents (FTE) to implement the CEDARR Initiative.

Private Partners

- Affiliated Computer Services/Birch & Davis Health Management Corporation (B&D) will provide management consulting services.
- University Affiliated Program will provide training for CEDARR Family Center staff to assist them in effectively communicating information about PASS services to the community. UAP will also provide training to families to strengthen their ability to personally and effectively select personal assistance workers, manage services received, function as supervisors, and manage their services budgets.
- Advanced Behavioral Health, Inc. developed the electronic case coordination system for CEDARR and will modify the system with data elements specific to this grant.

Existing Partnerships That Will Be Utilized to Leverage or Support Project Activities

Affiliated Computer Services/Birch & Davis Health Management Corporation. DHS has worked with B&D since 1994. Due to a hiring freeze at DHS, dedicated staff will be hired through B&D.

Oversight/Advisory Committee

- The CEDARR Policy Advisory Committee, an 11-member body that includes six family representatives and one representative from each of the five state agencies, will provide oversight and direction
- The PASS workgroup, an entity separate from the CEDARR Policy Advisory Committee, will provide oversight and direction. The PASS workgroup will be drawn from members of the Leadership Roundtable, the consumer base of families currently receiving other CEDARR direct services such as Home Based Therapeutic Services, Medicaid providers, and state agency representatives.

Formative Learning and Evaluation Activities

- The state will engage in an interactive process with key stakeholders to design the PASS program and test assumptions through the workgroup process.
- The state will add C-PASS specific data elements to the existing CEDARR case coordination database.
- The Program Quality Consultant will monitor quality assurance and oversee activities through review of program data, financial and utilization information, consumer feedback, and service provider site visits.

Evidence of Enduring Change/Sustainability

- By the end of the grant period, 350–400 families will have access to C-PASS services.
- C-PASS will become reimbursable through Medicaid, under EPSDT provisions, and have prior authorization through the CEDARR Family Care Plan.

Geographic Focus

Statewide.