Agenda

- Introduction and Project Recap
- State Workforce Development Initiatives
  - **Indiana:** Peggy Welch, Indiana Family and Social Services Administration
  - **Arizona:** Bill Kennard, Arizona Health Care Cost Containment System
  - **Tennessee:** Anna Lea Cothron, TennCare
- Discussion
- Next Steps and Adjourn

Long-Term Care Policy Guide

Table of Contents

Long-Term
POLICY GUIDE | Care

CSG The Council of State Governments

Revitalizing the Direct Care Workforce and Supporting Family Caregivers

National Center for State Long-Term Care Workforce Policy (2023) Project Summary

- National Long-Term Care Workforce Network
- National Online Resource Center
- State Technical Assistance Services

Indiana's Direct Service Workforce Plan

**The Council of State Governments National Long-Term Care
Workforce Network — Meeting #8**

**Peggy Welch, Chief Advocacy Officer
Indiana Family and Social Services Administration**

Wednesday, October 18, 2023

Presentation Agenda

I. Long-Term Services and Supports Reform in Indiana

II. Indiana Direct Service Workforce Plan

III. Looking Ahead to 2024 and Beyond, *How Might We…*

Why Reform Indiana's Long-Term Services and Supports System?

Drivers:
- From 2010 to 2030 the proportion of Hoosiers ages >65 will grow from 13% to 20%.
- Indiana recognized the need to reform its LTSS system to meet growing demand for person-centered, home and community-based services (HCBS) and to ensure **choice**, drive **quality**, and manage **cost**.

Overall Objectives:
- 75% of new LTSS members will live and receive services in a home and community-based setting
- Faster eligibility
- Move to managed LTSS (now "Indiana PathWays for Aging") in mid-2024
- Pay for outcomes, not transactions
- Integrate LTSS data systems
- Recruit, train, support, and retain HCBS direct service workforce
- Create "Home Health Roadmap"
- Integrate Section 1915(c) Medicaid HCBS waivers
- Commitment to stakeholder engagement (700 meetings)

Indiana's Direct Service Workforce Plan: Vision, Partners, and Priorities

Indiana's Vision:

- Create and implement a data-driven, community-informed, statewide plan—the Indiana Direct Service Workforce Plan—to improve the recruitment, training, support and retention of direct service workers across home and community-based settings.

Partners for Impact:

- Direct Service Workforce Advisory Board Members

- State Departments (e.g., Health), Agencies (e.g., Disability and Rehabilitative Services), and Offices (e.g., Communications)

- Managed Care Entities' Workforce Development Administrators

- Consultants

- Diverse array of stakeholders (e.g., advocates, provider agencies, academic researchers)

Priorities:

- Equitable access to person-centered services and supports for direct service workers

- High-touch and coordinated transitions across employers and community-based settings

Indiana's Direct Service Workforce Plan: Key Results

Key Result #1: Recruit
- Launch statewide marketing campaign, including development of a multi-purpose hub
- Work with the finance team to ensure that direct service worker rates and wage and benefits efforts are competitive with other employers
- Coordinate and align recruiting efforts with the three managed care entities (MCEs)

Key Result #2: Train, Support, and Retain
- Develop career lattice and ladders and training/micro-credentials/macro-credentials
- Standardize core competency training that allows for portability
- Address benefits cliff
- Develop worker-centered opportunities for job satisfaction and success with different types supports
- Simplify/standardize/refine direct service worker scopes of work
- Coordinate and align retainment strategy efforts with the three MCEs

Key Result #3: Data Strategy
- Develop comprehensive data system dedicated to direct service workforce
- Coordinate and align data strategy efforts with the three MCEs

Indiana's Direct Service Workforce Plan: Workgroups

Action Areas and Workgroups:

1. **Training and Pathways** – definition; roles; training core competencies; and direct service worker registry (legislative mandate)

2. **Wages and Benefits** – Medicaid HCBS provider rate increase; investment of ARPA funds in the form of grants to providers with allocation and reporting recruitments

3. **Promotion and Planning** – statewide, multimedia campaign; eventual resource hub for direct service workers, providers, and consumers

4. **Data Strategy** – comprehensive, robust data strategy to track direct service worker demographics, training and employment status, and workforce trends

Indiana's Direct Service Workforce Advisory Board

- **Who:** Seventeen (17) direct service workers who come alongside of older adults and people with disabilities to work and live where they want, including individual homes, assisted living facilities, and group homes. Members were selected through a competitive application process and are compensated for their participation.

- **What:** Examples of what FSSA wants and needs to learn from direct service workers throughout the implementation phase:
  - » What is **important to you** in your role as a direct service worker?
  - » What **training(s)** would be helpful in your role as a direct service worker?
  - » What, if any, **barriers** exist to staying and/or advancing in your role as a direct service worker?
  - » What **types of support** would enable you stay in your role as a direct service worker?

- The Direct Service Workforce Advisory Board has met eight (8) times since January 2022. During these meetings FSSA staff, consultants, and external stakeholders provided updates and solicited feedback from Advisory Board members. FSSA also connects frequently with Advisory Board members via e-mail and texting.

- In addition, Advisory Board members have participated in FSSA stakeholder meetings (i.e., strategy sessions, workgroup meetings) and conferences.

Looking Ahead to 2024 and Beyond

Regarding opportunities for collaboration with PathWays for Aging MCEs…

1. How might we raise the public perception of DSWs being essential and valuable and valued workers?

2. How might we ensure that DSWs will be integrated into the total care team and recognized as an integral contributing member of the team?

3. How might we engage untapped pools of potential DSWs?

4. How might we address the benefits fiscal cliff?

5. How might we reduce equity gaps with standardization of DSW roles and responsibilities?

6. How might we reduce equity gaps with standardization of DSW trainings and lattice and ladder pathways?

7. How might we ensure portability of trainings?

8. How might we educate federal and state workforce leaders about artificial barriers to local DSW trainings?

Looking Ahead to 2024 and Beyond

Regarding opportunities for collaboration with PathWays for Aging MCEs…

9. How might MCEs and HCBS providers come alongside DSWs with supports and services to ensure their professional success?

10. How might MCEs support FSSA in creating a registry and hub that provide accessibility to all things related to the direct service workforce for DSWs, HCBS providers, and HCBS consumers?

11. How might we measure the success of our FSSA and MCE partnership?

12. How might we maximize MCEs' ideas and resources?

13. How might we ensure that DSWs have 24/7 access to an MCE-based medical problem-solver?

14. How might we monitor DSWs' utilization of an MCE-based medical problem-solver?

15. How might we collaborate with MCEs to define the data necessary for direct service workforce development?

16. How might we collaborate with MCEs to define the benchmarks for ensuring a sufficient workforce?

Looking Ahead to 2024 and Beyond

Regarding opportunities for collaboration with PathWays for Aging MCEs…

17. How might we create and support sustainable DSW cohorts?

18. How might we engage Indiana Department of Education and higher education institutions in DSW trainings?

19. How might we measure DSW job satisfaction?

20. How might we develop value-based strategies?

21. How might we measure DSW investment grant impact?

22. How might we better engage/utilize Community Health Workers? Parish Nurses?

23. HMW the MCEs come alongside FSSA in the development and execution of the DSW marketing campaign?

Questions? Comments?

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Indiana PathWays for Aging and Direct Service Workforce Plan Milestones

2021 ———— **Design Program and Procure Health Plans ('21-'22)**

- Co-designed program with stakeholders over the course of a year to release an RFP in June 2022. Health plans bid on the RFP for a contract with the state through a competitive process facilitated by the Indiana Department of Administration.
- FSSA engaged ADvancing States and Bowen Center for Health Workforce Research and Policy and began developing the Indiana Direct Service Workforce Plan.

2022 ———— **Implementation and Readiness ('22)**

- FSSA conducted systematic review of staffing, policies, processes, documents, subcontracts, system capabilities and provider network to ensure state and health plans were ready for the program launch.

2023 ———— **Award Health Plan Contracts and Onboard ('23-'24)**

- Recommended mananged care entities announced in April 2023
- Continuing readiness review activities to ensure state and health plans are ready for the PathWays for Aging program launch

2024 ———— **Health Plans Contracts Signed ('24)**

- Contracts will be finalized in early 2024 with plans which complete readiness

Program Go-Live ('24)

- Program will launch in summer 2024

Arizona Approach to Workforce Development & Current Workforce Development Initiatives

Bill Kennard

Administrator, Office of Health Care Workforce Development

AHCCCS At A Glance

Largest insurer in AZ, covering over 2.3 million individuals and families...

...more than 50% of all births in AZ...

...and 60% of nursing facility days.

AHCCCS uses federal, state and county funds to provide health care coverage to the state's Medicaid population.

More than 115,000 health care providers are registered with AHCCCS.

Payments are made to 12 contracted health plans that are responsible for the delivery of care to members.

AHCCCS System Overview

AHCCCS
Arizona Health Care Cost Containment System

90% Managed Care Organizations (MCO)
(as of October 1, 2022)

12 contracts with 9 unique MCOs

10% Fee For Service

2 primary programs

AHCCCS Complete Care	AHCCCS Complete Care Regional Behavioral Health Agreements (ACC-RBHA)	Arizona Long Term Care System Elderly and Physical Disability (EPD)	ALTCS Developmentally Disabled (DD)	DCS-Comprehensive Health Plan (DCS-CHP)
1.9m members	49k members w/ SMI	26k members	45k members	13k members
$ 11.8 billion	$ 1.4 billion	$ 1.9 billion	$ 3.1 billion	$ 217 million
Integrated PH & BH services	Integrated PH & BH services and	Integrated PH, BH & LTSS services	Integrated PH, BH & LTSS services	Integrated PH and BH Services
	BH services only and			
	Crisis Services			

Direct Care Workers / Direct Support Professionals

AIHP

135k members

$ 1.7 billion

Tribal ALTCS

2.3k members

$ 160 million

Integrated PH & BH and LTSS services (ALTCS)

Direct Care Worker - Workforce Challenges

- Help Wanted
  - o Need 190,000 more DCWs by 2028
  - o Hardest workforce segment to recruit
- Career Development
  - o 59% of DCWs say they do not have opportunities for advancement
- DCW Training (Required, Provided by approved training agencies – ACOM 429)
  - o 12-year-old Competencies, Testing and Curriculum
  - o 61% of DCWs cite the lack of post hire in-service training as reason for leaving
- Supervision
  - o 32% couldn't describe supervisor's role or didn't know their supervisor

Reasons For Leaving The Workforce

Organizations with Low Retention Rates <60% - 2years

- Higher Pay – 17%
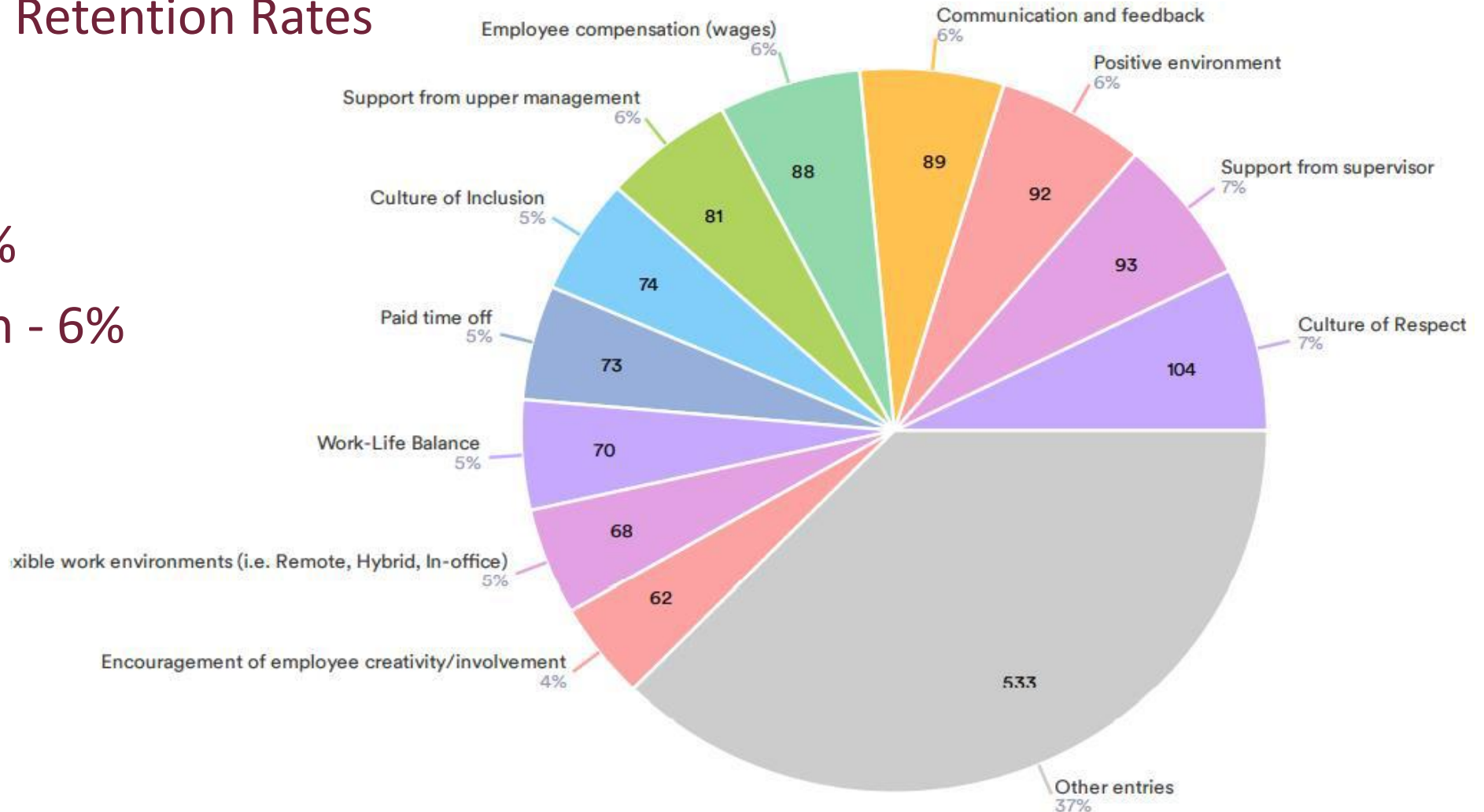- Personal Issues – 16%
- Burnout - 10%
- Other – 20%
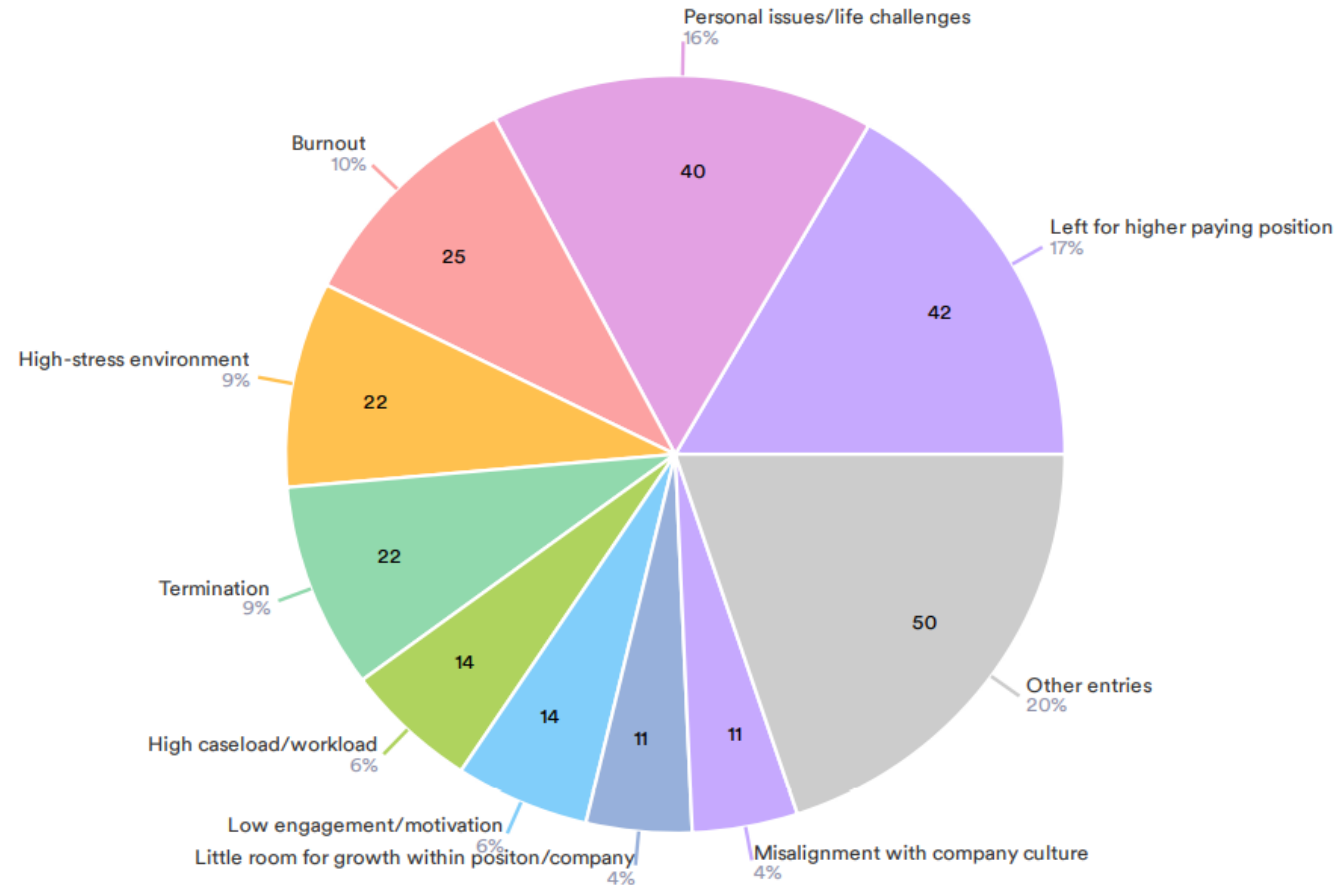
Reasons For Staying In The Workforce

Organizations with Retention Rates
61%> 2years

- Culture – 7%
- Supervisor – 7%
- Communication - 6%
- Wages – 6%
- Other – 37%

Pie chart data:
- Employee compensation (wages) 6% — 89
- Communication and feedback 6%
- Positive environment 6%
- Support from upper management 6% — 88
- Support from supervisor 7% — 92
- Culture of Inclusion 5% — 81
- Culture of Respect 7% — 104
- Paid time off 5% — 74
- Work-Life Balance 5% — 73
- Flexible work environments (i.e. Remote, Hybrid, In-office) 5% — 70
- Encouragement of employee creativity/involvement 4% — 68
- (62)
- Other entries 37% — 533

Approach to Workforce Development & Current Workforce Development Initiatives

Mission

Model

Vision

Arizona Health Care Workforce Development

Data Initiatives

Workforce Initiatives
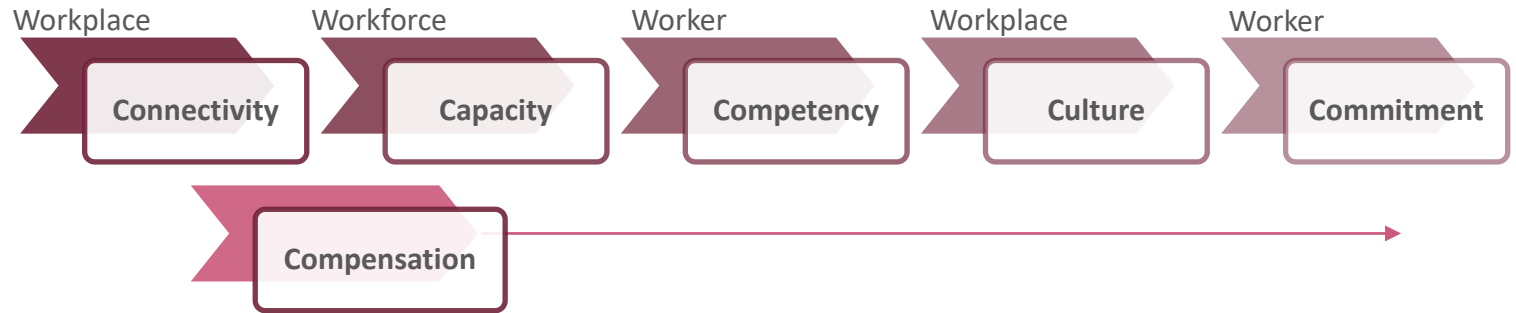
Mission

- AHCCCS

"Reaching across Arizona to provide comprehensive quality health care to those in need."

- Workforce Development

*Ensure the Provider Workforce has the **capacity, competency** and **commitment** to reach across Arizona to provide comprehensive quality health care to those in need.*

Model

- Philosophical The 5Cs ... or maybe it's 6 Cs

Workplace — **Connectivity**
Workforce — **Capacity**
Worker — **Competency**
Workplace — **Culture**
Worker — **Commitment**

Compensation

- Policy
  - ACOM 407 – Describes workforce development (WFD) requirements for MCOs

- Organizational
  - All MCOs have a WFD Administrator & Operation
  - WFD integrated with Networks, Quality etc. depts.
  - WFD Administrators work as Alliances & Coalitions
  - Annual Workforce Development Plan

Workforce Initiatives

- Incentives
  - **Majority of ARP $ payments and grants to providers**
- Career Development (https://pipelineaz.com/hubs/healthcare)
  - **AZ Health Care Careers**
- Education
  - **Partnership with AZ's Community Colleges**
- Training
  - Part of the community college partnership
  - Job/Service specific approach
  - Initial In-Service Training Program
  - Ongoing In-Service Training Program
  - Behavioral Health & Long-Term Care

Data Initiatives

Workforce Database & Decision Support System

- Demographically describe each workforce
- Assess workforce capacity relative to demands for service
- Determine how workforce recruitment selection, training and competency contributes to service quality
- Determine the impact that implementation of Provider Workforce Plans has on workforce demographics, capacity and capability
- Forecast how changes in AZ's health care delivery model influences the current workforce and workforce development practices and priorities.

Evaluating Workforce Development Initiatives

- Model for determining the ROI of WFD practices are having on network sufficiency, quality of care, diversity & inclusion etc.

Vision

- Continue Growing AZ's WFD Team
  - Professional Development for WFD Professionals
  - Partnership with Association for Talent Development (ATD)
    - Facilitator Training for Provider Trainers
    - Talent Management for Provider HR Professionals
    - WFD Best Practice Briefings for Provider Executives
    - Specialized Training for MCO WFD Professionals

- Expand Collaboration with AZ's Communities
  - Grow our High School Based Direct Care Worker Training
  - Create Regional Relationships Between Providers and Local Community College Districts
  - Establish Relationships with Community Economic/WFD Authorities

- Become Data Driven WFD Operations

AHCCCS
Arizona Health Care Cost Containment System

Thank You.

On behalf of AHCCCS
and the
Coalition of Health Plan Workforce Development Administrators

Comprehensive Workforce Strategy: State Medicaid and Managed Care Organizations Perspectives

Tennessee's Comprehensive Workforce Development Strategy

- Support provider organizations with recruitment and retention efforts
- Support the direct care workforce through high-quality competency-based training, progressive certifications, professionalization, and additional career development opportunities
- Provide financial incentives for implementing evidence-based best workforce development practices, as well as financial incentives for specific workforce and quality of life outcomes
- Continue to collaborate with multiple partners and stakeholders
- Evaluating efforts through continued survey and data collection

Recommendation: Support Organizations to Implement New Recruitment/Selection Tools

Looking for a career with meaning?

Gain valuable experience and learn new skills by working with people with disabilities.
Become a direct support professional.

- TN-specific targeted marketing flyers and public service announcements to recruit new populations to the workforce

- Efforts to recruit a diverse workforce including "Encore" employees, New Americans, and High School/College students (ex: Leaders in Inclusive Services (LINCS)

- TN-specific realistic job preview to help select the right people for the workforce

- Align current training practices and requirements for HCBS Programs in TN

Recommendation: Retain Direct Support Professionals and Front Line Supervisors through Competency Based Training and Wage Incentives

- Invest resources in a competency-based training model for Direct Support Professionals and Frontline Supervisors in TN

- Expansion of DSP Apprenticeship to include credentialing and career ladder program

- Training for Caregivers/DSPs and FLSs

- Strategic Partnerships (ex: NADSP E-Badge Academy, Tennessee Board of Regents, Tennessee Department of Labor, etc.)

- Promote Career Path opportunities

Recommendation: Continue Collaborative Efforts with Managed Care Organizations

- **TN Regional Workforce Development Community of Practice -** To continue to support the ongoing development, implementation and evaluation of workforce strategies that improve workforce stability across the state of Tennessee at the organizational, regional and state levels.

- **Statewide WFD Stakeholder Committee -** To glean insight into the current workforce development climate in Tennessee as well as increase the effectiveness and focus on strategies to address issues facing Tennessee provider agencies.

- **Quality Improvement in Long Term Services and Supports Workforce Strategy** – Comprehensive document to support provider organizations to see a more stable and highly trained workforce over time and support the direct care workforce through high-quality competency-based training, progressive certifications, professionalization, and creating additional career development opportunities.

- **MCO Provider Supports** – Offerings include Organization Readiness Reviews, Workforce Consultations, Workforce Coaches, etc.

- **MCO Provider Workforce Development Series** - Providers are invited to join virtual quarterly workforce development workshops planned with providers in mind.

TN

- Understand the sample and consider the composition
- Improve the representativeness and stability of the sample
- Gather quality data
- Measure the effectiveness of the tools and strategies used in recruitment and retention efforts

Tennessee LTSS Workforce Quality Improvement Initiative 2021 Survey Results
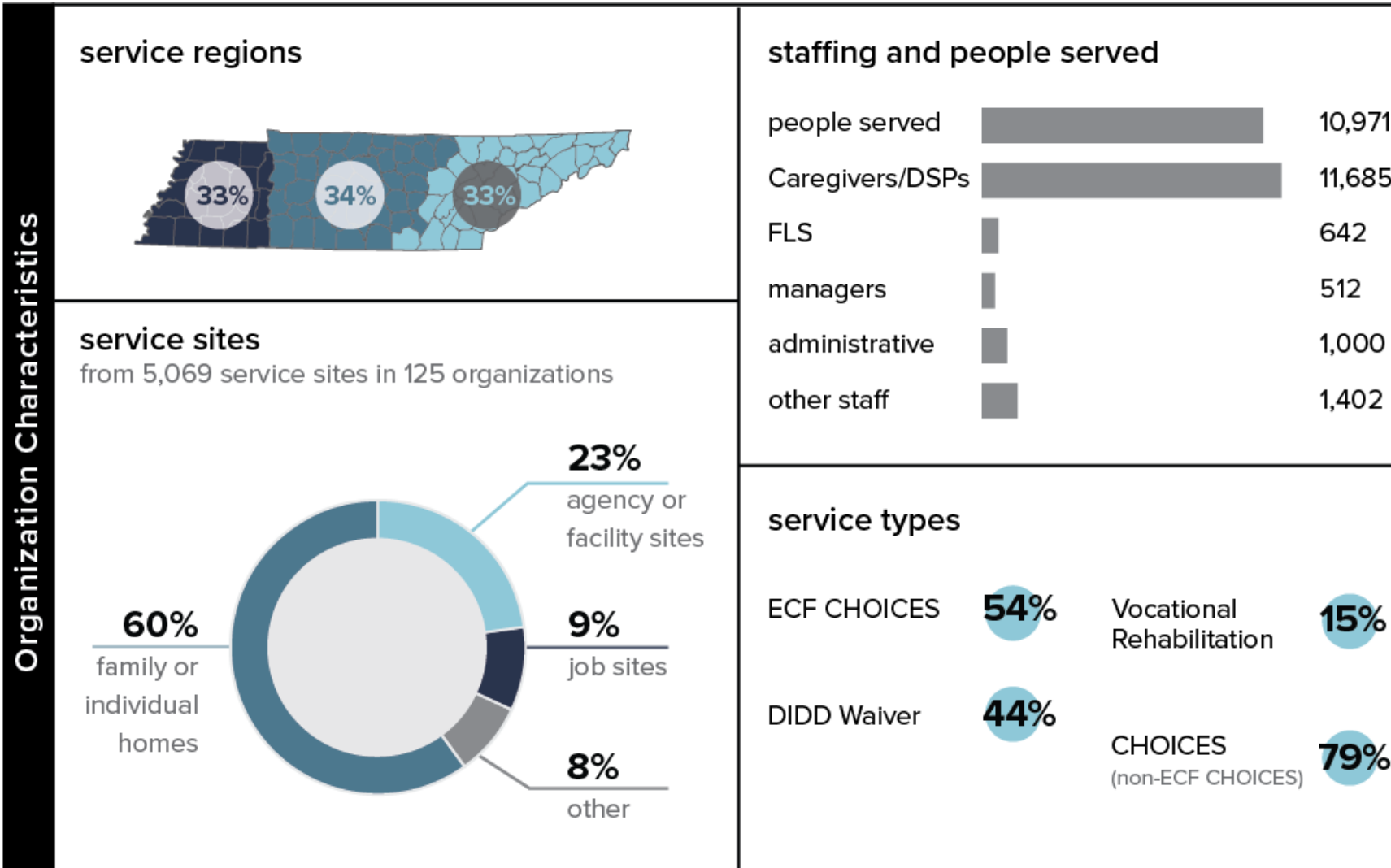
https://tenncare.ici.umn.edu/

Next Steps

- Next Network Meeting: November 17
  Register Now: https://csg-org.zoom.us/webinar/register/WN_LpBcRco_SO2e02jb79Jo-w#/registration

- CSG National Conference: Dec. 6-9, Raleigh, North Carolina

- Reach Out With Your Thoughts (sslone@csg.org)

- Coming Soon: National Online Resource Center

- Send Us: Relevant Bills, Reports, Resources, Articles, Initiatives

- Request State Technical Assistance Services

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Thank You!