# Indiana Pathways for Aging Program Update

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# Agenda

- FSSA LTSS Reform Initiative
- IN Pathways for Aging Overview
- Overview of Direct Service Workforce Plan
- DSW Initiatives
- Q&A



# Long-Term Services and Supports Reform

Overall Objective: 75% of new LTSS members will live and receive services in a home and community-based setting

- Faster eligibility
- Move to Indiana Pathways for Aging in summer 2024
- Pay for outcomes, not transactions
- Integrate LTSS data systems
- Support the growth, retention and training of the HCBS direct service workforce
- Create Home Health Roadmap
- Integrate HCBS waivers



# Why LTSS Reform?

From 2010 to 2030 the proportion of Hoosiers over 65 will grow from 13% to 20%. In order to meet the growing demand, Indiana must reform LTSS ensure Choice, Sustainability, and Quality.

#### Choice: Hoosiers want to age at home



• 75% of people over 50 prefer to age in their own home – but only 45% of Hoosiers who qualify for Medicaid are aging at home\*

#### Sustainability: Developing long-term sustainability



For next ten years, population projections show 28% increase in Hoosiers age
65+ and 45% increase in Hoosiers age
75+

#### Quality: Hoosiers deserve the best care

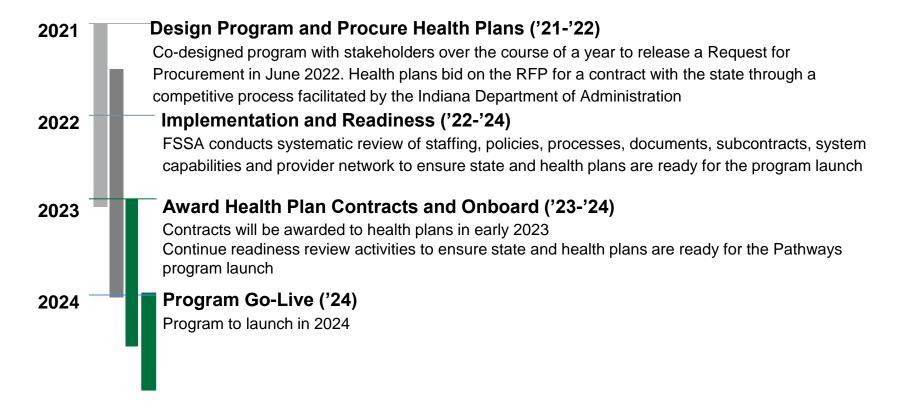


- AARP's LTSS Scorecard ranked Indiana 44<sup>th</sup> in the nation
- LTSS is uncoordinated and lacks cultural competency
- Payment for LTSS services is poorly linked to quality measures and not linked to outcomes



<sup>\*</sup>Accurate as of January 2020

# Indiana Pathways for Aging Milestones





# Stakeholder Engagement

#### Who are our "stakeholders"?

**Indiana Rural Health Association**; Aging Hoosiers receiving Medicaid, their families and caregivers; organizations representing aging individuals and individuals with disabilities; providers; trade organizations; academia; and other interested parties

- 2+ years of surveying and community conversations
- Indiana Pathways for Aging Scope of Work
  - Years' worth of feedback from stakeholders
  - Model contract language from other states
  - National subject matter expertise
  - Federally mandated requirements
- Stakeholders reviewed excerpts from the Pathways SoW; care management manual; MCE reporting manual
- Ongoing updates on readiness review

600+

Meetings with stakeholders

92%

of stakeholder considerations fully or partially incorporated

10

Peer-state programs reviewed in detail



# Managed Care Innovations

- In March 2023, FSSA and IDOA awarded Anthem, Humana, Molina, and United Healthcare as the vendors for the IN Pathways for Aging program
- FSSA is partnering with each vendor to align and collaborate on workforce initiatives
- Based on stakeholder feedback, FSSA has included rural-focus language in the Pathways Scope of Work. For example:
  - HCBS provider network development,
  - Member outreach,
  - Health equity work,
  - Contracting requirements, and
  - Access to services.



## Direct Service Workforce Plan

## Key Result 5

Create and implement a person-centered, statewide plan – the Indiana Direct Service Workforce Plan – to improve the recruitment, training, support, and retention of direct service workers in home and community-based settings.



- Intentional and extensive stakeholder engagement
- Collaboration with healthcare workforce experts at the Indiana University School of Medicine Bowen Center for Health Workforce Research and Policy
- National Staff Stability Survey pilot participation for the Aged & Disabled Waiver
- Formation of and frequent engagement with DSW Advisory Board
- Complementary efforts including self-direction, home health growth strategies, and refreshed HCBS rate methodologies



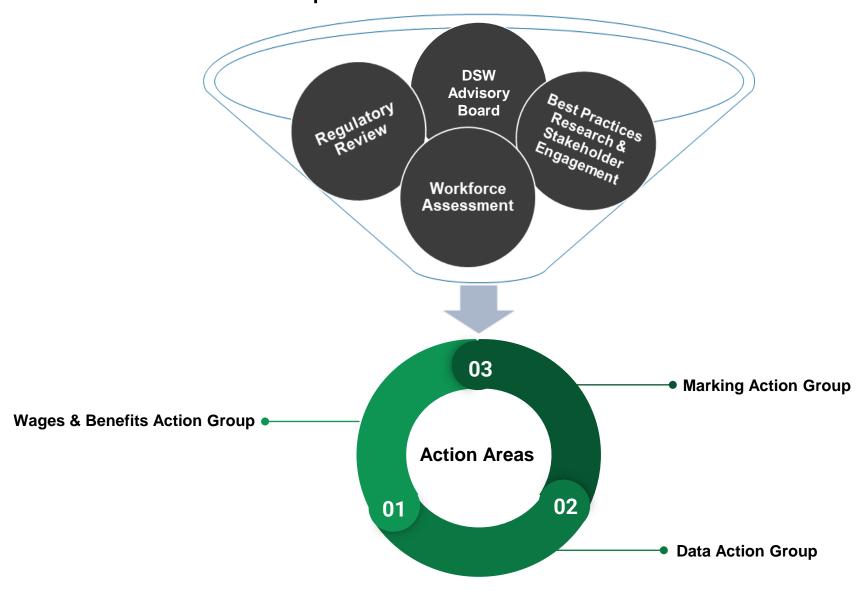
## What We Heard about the Direct Service Workforce

## **Key Themes:**

- Ensure there is a stable and reliable direct service workforce
- Provide a livable wage with benefits to DSWs
- Provide bonus payments to recruit and retain DSWs
- Clearly define the DSW workforce
- Include the DSW plan in a FSSA marketing strategy
- Set up a way for information sharing and peer network system
- Create DSW career pathways beginning in high school
- Develop micro-credentials
- Be mindful of access to state benefits i.e. Medicaid, childcare, SNAP
- Modify reimbursement rate structures
- Create an action group to support DSW plan work



## **DSW Plan Development**



# Direct Service Workforce Plan Action Groups

## Wages and Benefits Action Group

 Explore strategies to address employment-related costs, benefits and value-based incentives

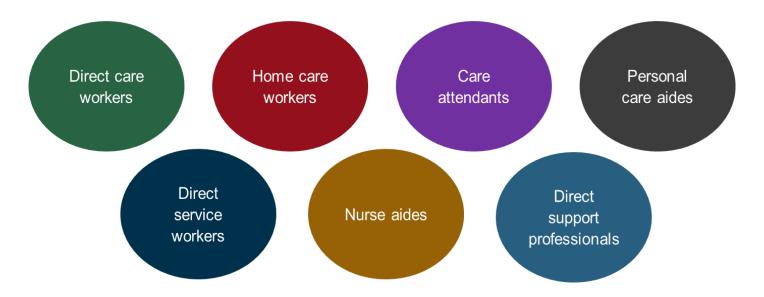
## **Data Action Group**

- Will include persons with lived experiences, DSW Advisory Board members, multiple state agencies, and providers
- Gain a better understanding of the Direct Service Workforce, their roles in the healthcare and social supports systems and what is needed to empower them in these roles

## Marketing Action Group

- Will include individuals with lived experience, DSW Advisory Board members, other state agencies, and providers
- Might include a marketing campaign to help raise awareness for essential workers

## Who are Direct Service Workers?



### Snapshot of the nation's direct service workers in 2021:

- 80%+ identified as a woman
- 50%+ identified as a person of color
- 20-30% identified as an immigrant
- 40% lived in low-income households
- 43% relied on public assistance, such as Medicaid, supplemental nutrition assistance, or cash assistance
- the **median age** was 43 years and 39 years for women and men, respectively
- the median hourly wage was \$14.27



## Indiana Direct Service Workforce Plan at a Glance

#### Challenge



Address workforce shortages resulting from low wages and intense demands on the occupation.

#### **Solution**



Indiana developed the Direct Service Workforce Plan to invest in and support a diverse, stable and well-trained workforce that is essential to providing quality person-centered services and supports to individuals living in their community of choice.

# Target Population



DSWs include certified nursing assistants, home health aides, direct support professionals, personal care aides and other non-licensed personnel.

#### Stakeholder Engagement



Stakeholders and organizations informed every piece of the plan since early 2021:

- Indiana University School of Medicine Bowen Center for Health Workforce Research and Policy
- Individuals with lived experience
- Direct Service Workforce Advisory Board
- Providers and advocacy organizations

## Implementation



The DSW plan will be implemented in a phased approach targeting short-term, mid-term and long-term strategies in three action areas to build and sustain this workforce.

## Indiana Direct Service Workforce Plan (cont.)

The Indiana DSW Plan focuses on short-term, mid-term and long-term strategies in three areas to build and sustain this workforce:

#### 1. Wages & Benefits

**Goal:** Increase the number of DSWs by providing support through enhanced wages and benefits through strategic investment in Medicaid reimbursement.



#### **Short Term:**

- Workforce Investment Grant
- √ HCBS Provider Stabilization Grants

#### Mid Term:

HCBS Rate Methodology

#### Long Term:

- Wages and Benefits Action Group
- Self-Directed Options
- Addressing Benefits Cliffs

#### 2. Training & Pathways

**Goal:** Help guide the establishment of a minimum statewide standard training that would allow for portability for workers who move between providers or for those who hold several part-time positions.



#### **Short Term:**

√ Standardize Definition of DSWs

#### Mid Term:

- Career Pathways
- DSW Registry

#### Long Term:

Training Opportunities

#### 3. Promotion & Planning

**Goal:** Increase general awareness of the DSW career opportunities and increase available data to understand the workforce.



#### **Short Term:**

- ✓ Data Collection
- √ Staff Stability Survey

#### Mid Term:

- Data Action Group
- Marketing Action Group

#### Long Term:

DSW Website Hub



- o = Underway
- = Upcoming



## Goal 5.1 - Recruit

- Launch statewide marketing campaign, including development of a multi-purpose hub
- Coordinate and align recruiting efforts with the four managed-care entities (MCEs)
- Work with the Finance team to ensure that DSW rates and wage and benefits efforts are competitive with other employers

## Goal 5.2 - Retain

- Develop career lattice and ladders and training/microcredentials/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 DSW scopes of work

## Goal 5.3 - Data

Develop comprehensive data system dedicated to direct service workforce

# HCBS Spend Plan Workforce Highlights

Indiana's HCBS Spend Plan highlights the Workforce as one of the top priorities to invest in using the one-time American Rescue Plan Act (ARPA) funding which provides an estimated \$817M into the HCBS landscape through March 2025.

- ~\$176 million in HCBS Stabilization Grants
  - To stabilize Indiana's workforce and HCBS provider network to meet urgent needs in the HCBS landscape
  - 75% of awarded funding required to go to frontline HCBS staff for workforce stabilization activities (i.e. bonuses, wraparound benefits, training, etc.)
- ~\$130 million in Direct Service Worker Investment Grants
  - To support direct service workers as they are essential in providing the day-to-day, in-person HCBS supports and services necessary for people to live, work, and participate in their communities
  - 95% of awarded funding required to go to direct service workers (i.e. bonuses, wage increases, shift differentials, wraparound benefits, retention activities, etc.)
- \$1,000 to complete the A&D Staff Stability Survey
  - To gather comprehensive workforce data on the direct service workforce (i.e. demographics of the workforce, recruitment and retention strategies, vacancy rates, turnover rates, length of employment, benefits, etc.)



## **Looking Ahead**

#### Direct Service Plan 2023

- Distribute the last round of DSW Investment Grant payments
- Analyze Staff Stability Survey data
- Continue DSW Advisory Board meetings
- Progress workforce action groups' initiatives
- Collaborate with MCEs
- Continue complementary efforts:
  - Finalize HCBS rate refresh work
  - Continue home health redesign efforts
  - Exploring Self-Direction

## Questions?

Please reach out to the <u>backhome.indiana@fssa.in.gov</u> for questions or feedback.

Thank you!!!