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MassHealth

Chapter 171 Report and Annual Individual and Family Support Plan

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MassHealth
Annual Family Support Plan
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Overview

The Executive Office of Health and Human Services (EOHHS) serves as the single state agency for Medicaid in Massachusetts. EOHHS, through its Office of Medicaid and in conjunction with its constituent agencies, administers the MassHealth program, which pays for medically necessary health care services for eligible individuals. Through its various operational areas, MassHealth routinely seeks input and consultation from families and constituents. This report describes a variety of routes for this input. Family support includes consultation with families of individuals who utilize MassHealth supported services, both on an individual basis and on a system level. This report describes several key areas wherein MassHealth creates opportunities for input and consultation from members and families. In addition, various operational units of MassHealth seek input from members, families, advocates, and stakeholders. During FY22, EOHHS actively reached out to members and families for consultation on several key program areas, including One Care, the Personal Care Attendant (PCA) program, behavioral health care, and Home and Community Based Services (HCBS) waivers and the Community Case Management program. EOHHS regularly consults with stakeholders who represent the interests of members and families. Extensive consultation with members, families, and stakeholders has been a very important aspect of the ongoing restructuring effort to develop and implement an accountable, person-centered model of care.

One Care is an integrated health care option for people with disabilities who enroll between the ages of 21 to 64 years old and are eligible for both MassHealth and Medicare. One Care makes it easier for a person to get all of the services they need, including all their MassHealth and Medicare benefits, plus additional behavioral health and community support services, and care coordination, from a single plan. MassHealth regularly obtains consultation and input from a wide variety of stakeholders, including consumers and their family members, and caregivers. Throughout the past year, MassHealth communicated regularly with stakeholders through monthly meetings of the Implementation Council (One Care's stakeholder advisory board with a majority consumer membership), email, updates to the website (www.mass.gov/one-care), and a dedicated email box (onecare@state.ma.us). Beginning in April 2020 MassHealth successfully transitioned monthly Implementation Council meetings to a virtual platform and updated the Implementation Council's website so dial-in and video attendance options were available to the public. MassHealth also ensured that Implementation Council meetings include live subtitles of the discussion via CART and on-camera ASL interpreters.

On January 1, 2022 UnitedHealthcare became the third One Care plan along with Commonwealth Care Alliance and Tufts Health Unify. MassHealth worked with CMS to extend the Duals Demonstration and Three-way Contracts through the end of 2023.

The Personal Care Attendant (PCA) Workforce Council provides opportunities to families and members for input into the MassHealth PCA program. Chaired by the Undersecretary for Health Policy, designated by the Secretary, the Council consists of MassHealth members who use PCA services, advocates, and other stakeholders. The role of the Council is to ensure the quality of long-term, in-home, personal care by recruiting, training, and stabilizing the work force of personal care attendants. The Council has a website that encourages families/caregivers and members using PCA services to share their views and ideas about the PCA program. The Council also holds quarterly meetings that are open to the public. The website link is www.mass.gov/pca/. During FY16 and FY17, the Council established a workforce subcommittee and stakeholder work groups to provide feedback and input on initiatives to promote consumer access to quality personal care services and PCA retention rates across the state. One outcome

of this process is an online PCA referral directory that launched in 2018. This directory provides upgrades and functionality to expand Consumer and PCA access and utilization. In 2019, the PCA program procured the PCA Enhancements Advisory council, consisting of Consumers, surrogates, caregivers and family members, as well as advocates, to assist MassHealth in forming policy decisions and programmatic change. Also in 2019, MassHealth re-procured the Personal Care Management (PCM) agency network including contract revisions effective January 2020 that highlighted the need for stakeholder involvement at the PCM level through Consumer Advisory Boards, required to meet biannually at a minimum. In 2021, MassHealth procured its Fiscal Intermediary (FI) contract for a single FI to serve the Commonwealth beginning January 2022, with a focus on enhancing customer service through the addition of Consumer and PCA Liaison roles, increasing regional walk-in access, and the convening of regional Consumer Advisory Boards, required to meet 6 times per year at minimum. FIs are organizations contracted by MassHealth to perform back-office administrative functions such as payroll and the withholding of state and federal taxes on behalf of consumer-employers who self-direct their services through the PCA program and the MFP waiver program. Prior to selection, in 2020, MassHealth procured a group of stakeholders, including surrogates, Consumers, PCAs, and other advocates to review certain sections of the FI Request for Response (RFR), incorporating their feedback into the selection of the single FI.

The MassHealth Office of Behavioral Health engages the Massachusetts Behavioral Health Partnership (MBHP) to provide behavioral health services for many MassHealth members. MBHP has a Family Advisory Council which consists of family members of members with behavioral health conditions and family advocates. The role of the council is to provide oversight and input into the quality management process as it relates to the development and implementation of services and their delivery to Members and their family members.

Home and Community Based Services (HCBS) waivers are alternative long-term services and support programs that support MassHealth members to live in community settings who would otherwise require care in a facility, such as a nursing facility, long-stay hospital, or intermediate care facility. MassHealth operates ten HCBS waiver programs in collaboration with EOHHS sister agencies. Each waiver must be approved for renewal by CMS every five years. Each time an HCBS waiver is renewed or substantively amended, information regarding the renewal or amendment is posted on the MassHealth website and input regarding the changes is solicited from members and their families. In FY21, MassHealth received input from stakeholders including families and advocacy groups representing individuals and families regarding amendment of the Children's Autism Waiver, operated by the Department of Developmental Services (DDS). Such input informed aspects of the waiver program, including providing additional flexibility for telehealth contact between Autism Clinical Managers and families and the addition of a new service to the waiver.

MassHealth, through the Community Case Management (CCM) program, supports approximately 850 to 900 MassHealth members annually who have significant medical complexities that require continuous skilled nursing (CSN) services. MassHealth defines CSN services as a nursing visit of greater than two consecutive hours. CCM members receive Community Case Management services through the University of Massachusetts Medical School (UMMS). UMMS employs Clinical Managers, who are registered nurses, to assess, coordinate and authorize each CCM Member's community long-term care (CLTC) services on behalf of MassHealth. CCM members are among the most medically fragile in the Commonwealth; many members are diagnosed with chromosomal defects, degenerative disorders, or major injuries resulting in the need for significant nursing care. About 60% of members are ages below 21 years of age. Members often have intensive and complex needs that only a nurse is qualified to manage and if not for the provision of CSN services, many of these members would require inpatient/intensive unit care. In addition to CSN services, CCM members may receive additional MassHealth services including but not limited to personal care attendant (PCA), home health aide (HHA),

durable medical equipment (DME), oxygen and respiratory equipment, medical supplies and therapy services. MassHealth holds Quarterly listening sessions with CCM Families and CCM Members to understand the needs of members and their families and works on providing solutions to their concerns. Additionally, MassHealth holds periodic meetings with individual CCM families or groups of families to hear concerns.

In addition to LTSS engagement, MassHealth Accountable Care Organizations (ACOs) are required to establish Patient and Family Advisory Committees (PFAC). The makeup of the PFAC must reflect the diversity of the MassHealth population, with a minimum of at least two MassHealth enrollee (or family member) representatives serving on the Committee. In addition, the Office of Medicaid holds a monthly meeting with consumer advocates who provide input to the agency on a wide range of matters. These meetings allow advocates to share issues or concerns that consumers, families, or caregivers may have with their MassHealth benefits. The meetings also provide a forum through which MassHealth can solicit feedback on member and other public facing materials. The monthly agenda includes updates about new initiatives and changes being made to existing programs at MassHealth, and dedicates time to respond to specific questions submitted by advocates in advance of the meeting.

I. Family Empowerment

EOHHS has incorporated opportunities for member and family input on policies, program development, and program evaluation into many MassHealth programs, including One Care, behavioral health care, and HCBS Waivers. MassHealth relies on member and family input to assess managed care contractors. Public input from members, families, and advocates is actively solicited through a variety of sources to improve the family-friendliness of a wide variety of MassHealth programs.

To reach out to and include families and members, One Care, MassHealth's integrated health plan for adults with disabilities in Medicare and MassHealth, convened an Implementation Council entirely made up of stakeholders. The Implementation Council plays a key role in monitoring access to health care and compliance with the Americans with Disabilities Act (ADA), tracking quality of services, providing support and input to EOHHS, and promoting accountability and transparency. The Implementation Council's membership requires that at least 51% of seats be held by consumers or their family members, and it welcomes attendance at its meetings from all stakeholders and members of the public with interest in One Care.

For example, MassHealth engages with members of the Implementation Council and other stakeholders on an ongoing basis to develop online webinars and training modules to help educate One Care plan staff and providers about topics related to providing effective and culturally competent care to individuals living with disabilities, and ensuring that One Care enrollees are always at the center of the care planning process. Over the past year, topics included: 1) A two-part series – Discussing the Housing Landscape; and 2) Assistive Technologies.

MassHealth launched new advisory committees for both the Senior Care Options (SCO) and the Program of All-Inclusive Care for the Elderly (PACE) programs with newly procured membership in September 2019. These committees will promote input from current and/or former family members and caregivers to SCO and PACE enrollees. The SCO Advisory Committee began meeting virtually (on a quarterly basis) in November 2020 and MassHealth joins monthly meetings with MassPACE and the PACE Programs to discuss PACE and receive feedback.

Another example of obtaining family input to evaluate services is the MBHP Family Advisory Council, through which family members provide oversight and input into quality management processes associated with the development, implementation, and delivery of services to MassHealth members.

In spring 2017, MassHealth engaged with consumers and other stakeholders to develop a new MassHealth Health Plan Ombudsman program, now known as My Ombudsman (MYO), currently administered through a contract with the Disability Policy Consortium (DPC). The MYO program provides an independent resource to MassHealth members in managed and integrated care programs and their families, to help them access their benefits and services, with a particular focus on matters related to disability, accessibility, long-term services and supports (LTSS) and behavioral health (BH) services as MassHealth continues implementing delivery system reform across managed care programs. As of January 2022, the program expanded to serve any MassHealth member, including members who receive their care via fee for service (FFS). My Ombudsman provides free assistance to help members connect to community-based resources, identify and address access concerns, and support members seeking help accessing their MassHealth benefits and services. Many MYO staff are themselves individuals with lived experience of disability. MYO services are available to any MassHealth member, including those who receive their care via fee FFS or who are enrolled in one of MassHealth's managed care programs, including ACOs, MCOs, Senior Care Options (SCO), One Care, the Massachusetts Behavioral Health Partnership (MBHP), and the Program of All-Inclusive Care for the Elderly (PACE), as well as individuals enrolled in the Community Partners program. More information about the MYO program can be found at: <https://myombudsman.org/>.

MassHealth Behavioral Health leadership meets monthly with the Department of Mental Health (DMH) and the Massachusetts chapter of the Federation for Families, known as the Parent/Professional Advocacy League (PPAL), to identify any issues that arise related to children with behavioral health issues needs and those of their families. The combined EOHHS leadership elicits and responds to input from PPAL leadership and provides information about policy changes that may impact children and their families. EOHHS also periodically attends PPAL statewide meetings to get input from a broader group of family stakeholders.

One Care is a good example of how MassHealth has embraced input from consumers and family members. Consumers, families, and caregivers helped develop the One Care public awareness and enrollment materials, the One Care website, and continue to serve as advisors and presenters in the development of training webinars as described above. The new SCO Advisory Committee includes members of each Plan's own consumer advisory boards, and the PACE Advisory Committee includes the voices of family members. MassHealth will continue stakeholder meetings to provide wide and timely opportunities for input, discussion and consultation from consumers, families, and caregivers. The PCA website provide members, families, and caregivers with extensive information and access to updates, as well as the opportunity to ask any questions. More generally, the Office of Medicaid Advocates group mentioned above will devote regular and consistent meeting time to provide input and consultation regarding MassHealth efforts to provide flexible supports to families.

MassHealth is also seeking to establish a CSN Service Delivery Advisory Council representing diversity across race, age, ethnicity, disability, socioeconomic status, and gender, and to bring together a diverse collection of health professionals, caregivers of individuals receiving CSN, MassHealth members receiving CSN services, and other key stakeholders with CSN experience or expertise. The roles and responsibilities of the Council will include advising MassHealth on CSN service delivery and the Community Case Management (CCM) program. Additionally, the function of this council will be to provide recommendations to MassHealth on enhancing CSN service delivery, providing input to policy and programmatic changes, and informing MassHealth of member concerns. MassHealth is in the process of procuring this council.

II. Family Leadership

MassHealth continues to expand and enhance training opportunities for caregivers in the PCA and CBHI programs. Regular input from members, their families, and others provides MassHealth with continued feedback and helps to identify opportunities for future improvements in training and support. The One Care Implementation Council is an innovative model for promoting members' development of leadership skills.

In FY14, the PCA Workforce Council and the MassHealth Office of Long-Term Services and Supports (OLTSS) implemented a new three-hour training and orientation requirement for PCAs. The consumer/employer has the option to choose to provide their own training in lieu of the classes provided by OLTSS and the PCA Workforce Council. In FY15, the PCA Workforce Council and OLTSS reviewed the requirements implemented in FY14 to ensure that appropriate training is provided to new PCAs and to appropriately track the PCAs who completed the training and the staff who provided the training. The PCA Workforce Council and OLTSS also initiated reviews to ensure that those consumers/employers who conduct their own trainings are properly trained. Today, free PCA skills training workshops, featuring topics and content developed from consumer input, are offered in convenient locations statewide for consumers/employers. For information, see <http://www.mass.gov/pca/training/training-opportunities-for-pcas.html>.

MassHealth's adult foster care program (AFC) provides care management and nursing oversight along with a financial stipend to family and non-family caregivers to support members who live with their caregiver and require assistance with at least one activity of daily living (ADL). As a part of the care management function of the AFC program, AFC caregivers are provided with initial and ongoing caregiver training as well as ongoing caregiver support. AFC caregivers must receive a minimum of eight hours of in-service training per year with at least one hour of training on recognizing, responding to, communicating and reporting changes in condition, critical incidences, emergencies, and knowledge of emergency procedures, including the AFC provider's fire, safety, and disaster plans. The initial orientation training sessions must include techniques of providing safe delivery of ADLs, IADLs, and any other personal care; good body mechanics; the AFC program and AFC provider services including the regulations governing the program; caring for people with disabilities, elders, individuals with Alzheimer's disease and related disorders, behavioral health issues and cognitive impairments including behavioral interventions, behavior acceptance, and accommodations; observation, reporting and documentation of the member's status and the care provided including AFC caregiver log entries; basic first aid, cardiopulmonary resuscitation (CPR) and emergency procedures; universal precautions and infection control and practices; privacy and confidentiality; communication and interpersonal skills; advance directives; prevention of, and reporting of, abuse, neglect, mistreatment and misappropriation/financial exploitation; critical incident reporting; human rights, nondiscrimination and cultural sensitivity; and recognizing the physical, emotional, and developmental needs of the individuals in their care and working in a manner that respects them, their privacy and their property.

The One Care Implementation Council provides wide-ranging opportunities for input into the implementation of the One Care demonstration, which serves dually eligible Medicare and MassHealth members under the age of 65. This unique approach was developed based on input from stakeholders, including a requirement that at least half of all Council members be MassHealth members with disabilities, or family members or guardians of MassHealth members with disabilities. MassHealth further requires that Council members select leadership annually, including a consumer chair, allowing more opportunities for families and individuals to develop new or enhanced skills. The Council has been in place since October 2013 and was re-procured for a new term that began in June of 2017. This model has been so successful that MassHealth created similar councils to help with the development and implementation of delivery system reform. During the COVID-19 pandemic, the One Care Implementation Council has been a source of best practices for other MassHealth advisory committees in

terms of demonstrating how to offer a robust, member-facing dialogue while maintaining high standards for accessibility.

In the realm of HCBS waivers, DDS and MRC jointly convene the ABI/MFP/TBI Stakeholder Advisory Committee, comprised of stakeholders of the Acquired Brain Injury (ABI), Moving Forward Plan (MFP), and Traumatic Brain Injury (TBI) Waivers, respectively. The Committee, which includes waiver participants, meets periodically to support MassHealth, DDS, and MRC in assessing and ensuring the highest quality services, ongoing monitoring of system improvements, and promoting consistency across waivers where appropriate.

MassHealth is also taking additional steps to strengthen engagement with members and families on program and policy initiatives as part of its work to promote health equity. This work has included steps to strengthen requirements for health plans to engage more directly with MassHealth members through their Patient and Family Advisory Committees (or similar groups), as well as planned efforts to increase the number of member participants in MassHealth's delivery reform and other stakeholder workgroups. MassHealth also released a Request for Information (RFI) to solicit ideas directly from members and other stakeholders to help inform and strengthen MassHealth's efforts in these areas. MassHealth is continuing to identify and implement opportunities for greater engagement based on the RFI responses and other initiatives. (More information on the Member Engagement RFI can be found at: [MassHealth Health Equity Requests for Information \(RFIs\) | Mass.gov](#)).

III. Family Support Resources and Funding

MassHealth strives to create flexible supports for individuals and families to effectively meet their needs and keep individuals living independently in their own communities. Special funding in One Care and Home and Community Based Waiver enables family inclusion in care coordination. The PCA program allows individuals the flexibility to direct their PCA care most effectively, and certain HCBS waiver programs allow participants wide latitude to self-direct services. The ACO initiative will focus on assisting special populations who require individualized services and supports.

MassHealth supports hundreds of thousands of families in the Commonwealth by providing comprehensive health insurance and long-term services and supports.

In April 2020, MassHealth expanded access to Applied Behavioral Analysis by developing and implementing a 15-minute billing code for family adaptive behavior treatment guidance to support families with children with autism during the COVID-19 pandemic. This change results from families and caregivers emphasizing the importance of accessing shorter increments of time in family adaptive behavior treatment guidance, and MassHealth has issued further guidance to make this change permanent.

The One Care program is another example that highlights the breadth of support MassHealth provides. OneCare delivers comprehensive, integrated health care and supportive services to disabled adults ages 21-64. OneCare includes families and caregivers in the care planning process at the discretion of the member. One Care plans are obligated to undertake person-centered planning and service plan development directed by plan enrollees. The goal of One Care is to provide integrated and coordinated care for enrollees, ensuring a more synchronized set of services to members that addresses their needs for medical, primary care, behavioral health care, and long-term services and supports.

Other examples of MassHealth programs that support families are the HCBS waiver programs that provide support to members and families. Case management activities are person-centered, have the participant at the core of the care planning team and incorporate input for developing individualized service plans for the individuals being served and, as appropriate, their families. Three EOHHS agencies currently operate ten different HCBS waivers, several of which include family support, and/or family training as waiver services. The MassHealth PCA program affords members a state plan service that is entirely self-directed. MassHealth individuals, who are eligible to receive PCA services choose their personal care attendant, train that worker as they see fit and arrange service times at their convenience.

Similarly, the Children's Autism HCBS waiver, operated through DDS, provides an excellent example of a program that affords broad flexibility in provision of HCBS to waiver participants. This waiver provides a budget of up to \$25,000 to each participant/family who then self-directs the services they receive and selects the providers of these services. Several other HCBS waivers provide opportunities for participants to self-direct certain services, including the two Moving Forward Plan waivers. Support is also provided to members or their families to ensure they can self-direct services, for example the Children's Autism waiver provides support brokers to all families to assist in their ability to take full advantage of self-direction opportunities. As noted above, a person-centered approach to develop and implement individualized care plans is central to One Care, PACE, SCO, MCO and ACO, as well as all of MassHealth's HCBS waivers. The process is designed to respect and utilize the expertise of families and ensure they are central to service planning decisions.

One of the chief objectives MassHealth has for ACOs is to encourage and reward the provision of coordinated, integrated patient-centered care. To meet this objective, special attention is being focused on long term services and supports (LTSS) as well as on care for other special populations who also require individualized services and supports. ACOs are required to ensure members with special health care needs, which includes certain members with LTSS needs or functional impairments, are comprehensively

assessed, and that those member-centered assessments are used to inform care planning and care management. When ACOs form care teams to support members' care management, they are expected to include family members and other supports that members ask for on the care team to ensure a member-centered approach to decision-making.

In July 2018, through the 1115 waiver, MassHealth launched the Behavioral Health and Long-Term Services and Supports Community Partners Program. MassHealth has contracted with 27 community-based health care and human service organizations to provide specialized wraparound supports and care coordination for MassHealth members with complex long term medical and/or behavioral health needs who are enrolled in ACOs, MCOs, or the Adult Community Clinical Services (ACCS) program. At this time, there are approximately 46,667 active members in the CP program.

IV. Accessing Services and Supports

MassHealth provides members access to a great deal of information, both in print and online, to inform members about their coverage and to enable their access to services and supports. Efforts are made to ensure that materials are linguistically appropriate and targeted to the members' needs. Individuals can access "walk-in" centers and attend enrollment events around the state. Some MassHealth programs offer specialized personal assistance. MassHealth also outreaches to members and others to encourage their active participation in a variety of public meetings. New MassHealth members are mailed a MassHealth Enrollment Guide within 14 days of their approval for benefits. The Enrollment Guide describes how to choose a primary care provider (PCP), the rights and responsibilities of MassHealth members, and MassHealth covered services, including prenatal care, emergency care, and specialists. In addition, members are provided with tips on how to choose a health plan that works best for them, and what to do after enrolling into a plan, including making an initial appointment with their PCP, getting regular check-ups, notifying their PCP when they have had an emergency room service, etc. The MassHealth website also includes information about how to choose a health plan and doctor as well as coverage updates, wellness information, and tobacco cessation benefits.

MassHealth holds public meetings for stakeholders, consumers, and families about One Care. There have also been workgroups on quality, member notices, assessments and other areas. To increase understanding of One Care, community outreach initiatives have been developed that include public awareness kit mailings to community-based organizations and presentations to and meetings with specific groups and conferences. One Care has developed a website, outreach materials (poster, flyer and booklet), six videos for the website and YouTube (in American Sign Language), and an information packet that includes an enrollment form. These materials were all developed with input from consumers and other stakeholders.

MassHealth has developed new brochures and websites to educate consumers, families and caregivers about opportunities to transition from facility settings back to the community through the ABI and MFP waivers. The newly revised ABI and MFP waiver websites include up-to-date information about how members can apply for one of these waivers, what services are available, as well as an email address where consumers, families and caregivers can submit questions. In addition, MassHealth recently issued a member handbook for participants in the ABI and MFP waivers, as well as an updated brochure about these programs. Revisions are also underway on a companion brochure about opportunities for self-direction in the MFP waivers. All of these materials have been reviewed by our ABI/MFP/TBI Stakeholder Advisory Committee which includes waiver participants.

The PCA Workforce Council website provides updates for consumers, families and caregivers with links to other websites with pertinent information. MassHealth developed a PCA consumer handbook with extensive information about the PCA program, including lists of organizations with contact information helpful to the consumer.

MassHealth produces publications regarding specific populations, including members aged 65 and older who might be eligible for Senior Care Options, women who are pregnant, children with behavioral health issues, etc. These materials describe what families should do to utilize the services that are available for their specific situation.

In July 2018, MassHealth launched the My Ombudsman program for MassHealth members enrolled in managed care programs. The Ombudsman program is an independent office that helps consumers, including their family members and representatives, by providing information and answering questions, and by helping to address concerns or conflicts that may interfere with their access to MassHealth benefits and services.

In response to the COVID-19 public health emergency, MassHealth created a page for members and applicants with information specific to MassHealth's response to the outbreak. The website provides general information about COVID-19 safety and infection control, information about applying for MassHealth and maintaining coverage during the emergency, information about accessing services during the emergency, and attachments to a number of resources such as food and nutrition supports and telephone and internet accessibility. MassHealth produces various booklets and brochures, as described above, to promote access to information and referral. Examples of such resources include: a MassHealth Members Handbook, the One Care Facts and Features brochure, Enrollment Guide, and other materials, the One Care website, brochures highlighting various HCBS waivers, PCA Handbook, PCP Member Handbook, and a SCO brochure.

In addition, a section of the MassHealth website is dedicated to information for MassHealth members. This includes information on choosing a health plan and doctor, the MassHealth card, covered services, coverage updates, wellness, applications and forms, as well as information about the HCBS waivers, the PCA Workforce Council and CBHI.

As the health insurer of approximately 2.2 million Massachusetts residents, MassHealth enables members to manage their MassHealth and other health assistance benefits online through "My Account Page." This allows members to view and update information about their coverage without having to call MassHealth. Members also have access to local MassHealth Enrollment Centers where they are able to walk-in and speak with MassHealth representatives regarding their eligibility for MassHealth and various benefits. As noted above, MassHealth Enrollment Centers are in four locations across the state. Individuals and/or family members can walk-in to obtain information, sign up for MassHealth as well as learn about programs and benefits available to them through MassHealth. Enrollment Centers also have staff members who are accessed by consumers who call MassOptions (1-884-422-6277), the "No Wrong Door" (NWD) telephone system for Massachusetts leading people to aging and disability services. MassOptions call center processing includes the integration of an initial screen or self-screen assessment tool into an NWD website that would be available to all NWD network access points exploring ways to expedite financial eligibility determinations and enrollment into MassHealth. MassOptions augments other on-going Affordable Care Act (ACA) and state level initiatives aimed at transforming its LTSS system to better support individuals living in the community.

Additionally, MassHealth holds enrollment events at various locations around the state. These events provide members an opportunity to talk to staff one-on-one about MassHealth coverage and receive onsite application assistance.

V. Culturally Competent Outreach & Support

EOHHS, including MassHealth leadership, frequently meets and interacts with stakeholders to ensure that it provides culturally competent and appropriate outreach and support, including to members/families who communicate in many languages other than English, including American Sign Language.

MassHealth continually strives to ensure that outreach to families and individuals are linguistically appropriate, and culturally competent. The MassHealth Publications Department works to publish materials in multiple languages and to ensure that individuals who speak diverse languages understand the importance of various notices.

Our MassHealth Customer Service Unit employs bilingual representatives who speak a variety of languages including Spanish, French, Portuguese, Vietnamese, Cantonese, Russian, and Cape Verdean. All customer service representatives are trained to handle calls from individuals with limited English proficiency. Interpreters are available if there are no available customer service representatives on staff that speak the caller's language. MassHealth Enrollment Center staffs are trained on how to use Language Line services for non-English speaking members. MassHealth provides applicants and members their rights and responsibilities through the Member Booklet and the MassHealth & You guide which are part of the application in various languages. The MassHealth Fact Sheet is also translated into various languages. MassHealth Managed Care Organization (MCO) and Accountable Care Organization (ACO) contracts require participation in any EOHHS efforts to promote the delivery of services in a culturally competent manner. The contracts require that MCOs and ACOs regularly evaluate the population of their members to identify language needs, including needs experienced by members who are deaf or hard of hearing, needs related to health literacy, and to identify needs related to cultural appropriateness of care. Additionally, MCO and ACOs must identify opportunities to improve the availability of fluent staff or skilled translation services in members' preferred languages and opportunities to improve the cultural appropriateness of members' care.

MassHealth strives to make each new initiative accessible to our culturally diverse members and families. For example, the ABI-MFP Member handbook and brochures mentioned above, as well as the PCA consumer handbook are all available in both English and Spanish. Through the person-centered planning process, HCBS waiver case managers engage with participants to ensure that services and supports are culturally appropriate. Most significantly, contract language requires that ACO models of care proactively outreach their members in linguistically and culturally appropriate ways as well as provide training and coaching to increase the availability of culturally competent care to members of racial, ethnic and language minorities, as well as for LGBTQ members and members with physical, intellectual, and development disabilities.

MassHealth is also working to improve and strengthen the collection of social risk factor data including race, ethnicity, language, disability status, sexual orientation and gender identity. We are in the process of making updates to our enrollment systems to better collect this information, as well as collect this information from other health system partners including ACOs and Hospitals. This will enable us to better understand and address inequities faced by MassHealth members.

VI. Interagency Collaboration

MassHealth, through its HCBS waivers, collaborates with several EOHHS agencies, including DDS, the Executive Office of Elder Affairs (EOEA), and the Massachusetts Rehabilitation Commission (MRC) to deliver home and community-based services to eligible waiver participants.

In addition to the day-to-day collaborative work related to the ongoing operation of the ten HCBS waivers, MassHealth works extensively with each of these agencies, for example, in the development of waiver renewal applications. As HCBS waivers must be renewed with CMS every five years, MassHealth and the agencies leverage this process to make changes in the waiver programs that will further strengthen effective service delivery and maximization of resources. In FY18, MassHealth collaborated with DDS and MRC regarding the renewal of seven HCBS waivers, in FY19 MassHealth collaborated with EOEA and MRC regarding the renewal of two HCBS waivers, and in FY20 MassHealth worked closely with DDS on the renewal of the Children's Autism Waiver, followed by an amendment to the Children's Autism Waiver in FY21. In the latter part of FY20 and FY21 MassHealth collaborated with DDS, MRC and EOEA regarding temporary amendments necessary to respond to the COVID-19 Public Health Emergency. The agencies' collaborative work has led to systemic and programmatic changes that streamline service delivery and promote efficient resource utilization while concomitantly improving access to services and supporting participants to live independently in the community.

MassHealth administers and DDS operates three waivers to serve participants with intellectual disability, and the Acquired Brain Injury (ABI) – Residential Habilitation waiver, the MFP-Residential Supports Waiver, as well as the Commonwealth's Children's Autism Spectrum Disorders waiver for eligible children. DDS has documented its extensive interaction with stakeholders, families, and children's advocates from whom we obtain and use input in the on-going operation of the Autism waiver serving children age eight and under.

MassHealth meets and collaborates routinely with the Executive Office of Elder Affairs, which operates the Frail Elder Waiver, and the Massachusetts Rehabilitation Commission (MRC) to oversee the on-going operation of multiple HCBS waivers, including the Traumatic Brain Injury waiver, the ABI Non-Residential waiver and the MFP Community Living waiver. These waivers were developed with input from and review by advocates, individuals with disabilities, and their families. All HCBS waiver participants receive waiver case management through which the participant engages in a person-centered planning process facilitated by the case manager. Through this process, waiver participants work to develop their individualized service plan. These person-centered service plans provide the opportunity for input and consultation with participants and their families or guardians.

In collaboration with the Department of Public Health Division for Children and Youth with Special Health Needs, MassHealth has engaged family members through the Federation of Children with Special Health Needs Family Voices program for input on care coordination for kids and families and health equity.

MassHealth is collaborating with many EOHHS agencies, including the Department of Public Health (DPH), DMH, DCF, DYS, DDS, MRC, and EOEA in the ongoing efforts to implement payment reform and provide care through ACOs. EOHHS agencies participate in various stakeholder working groups, and MassHealth will collaborate with these agencies as well as various non-EOHHS agencies such as the Health Policy Commission and the Health Connector as these implementation efforts progress.