

Single Points of Entry – Meet the Pioneers

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What is an SPE?

- ... a system that enables consumers to access long term and supportive services through one agency or organization.
- ... the mandatory access point for consumers wishing to access Medicaid-funded long term care supports and services.

What does it do?

- Provide *comprehensive information and referral*
- Provide *long term support options counseling*
- Conduct *functional eligibility determination*
- Coordinate *financial eligibility determination*
- Provide *benefits counseling*
- Provide *LTC crisis intervention/stabilization*
- Facilitate *person centered planning*

Core SPE Functions

Outreach, Education and Advocacy

- Serve as convener of the community around long term care needs.
- Identify gaps in service, advocate for resources to address.
- Establish linkages with major pathways.

Core SPE Functions

Information and Assistance

- Telephone based system to determine needs, evaluate availability of resources, identify organizations that may meet caller needs, locate alternative resources, actively participate in linking caller to needed services, follow up.

Core SPE Functions

Information and Assistance

- Trained and certified I&A coordinators
- Provided at hours convenient for the public
- Toll-free telephone access
- Web-based resource directory
- After hours coverage for emergency and urgent situations.

Core SPE Functions

Person Centered Planning

- Process to identify personal preferences, desires and goals.
- Assistance in planning and choosing long term care options that support preferences.
- The basis for ensuring informed choice.

Core SPE Functions

LTC Options Counseling

- Eligibility determination
 - conduct functional assessment
 - facilitate financial determination
- Choice counseling
- Transition services

Core SPE Functions

Supports Coordination

- Assessment
- Service planning
- Monitoring
- Quality assurance

Why do we need an SPE?

- Lack of a centralized, neutral source of information and assistance.
- Existing systems, providers and care networks are not well integrated.
- Maze of programs difficult to navigate.
- Costs are skyrocketing.

How will we pay for it?

- Reduce duplication, gain efficiency
- Redirect resources from within existing programs, line items
- Realize better value through consumer choice of less expensive non-institutional settings

Governor's Press Release

- \$34.83 million for four demonstrations
 - Detroit, \$13.1 million
 - Southwest Michigan, \$7.18 million
 - Western Michigan, \$9.15 million
 - Upper Peninsula, \$5.4 million
- When fully operational will cover over 47% of state's population .

Governor's Press Release

"I am thrilled that numerous groups, individuals and agencies have worked tirelessly to put forward strong proposals... It is only through their broad, collaborative efforts that Michigan residents can have a single entry point... that permits individual consumer choices.

Governor's Press Release

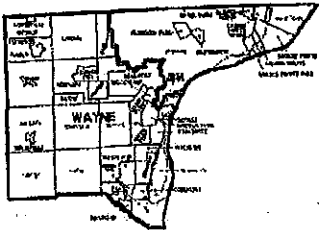
SPEs will operate based upon a basic principle of ensuring that individuals are provided with timely, unbiased and appropriate information to enable informed consumer choice in planning for and utilizing long term care services.

SPE Demonstrations

Detroit

- Submitted by Detroit AAA
- Initially serves PSA 1-A
- Plans to expand to western Wayne County
- Firewall: establishing independent 501(c)3
- Collaborators include Wayne County DHS, the Senior Alliance (AAA 1-C), nursing facilities, 211

Detroit
\$13.1 Million




SPE Demonstrations

Southwest Michigan

- Submitted by Region IV AAA
- Serves Barry, Berrien, Branch, Calhoun, Cass, Kalamazoo, St. Joseph, Van Buren counties
- Firewall: establishing independent 501(c)3
- Partners include: Regions 3-A, 3-B and 3-C Area Agencies on Aging

Southwest
\$7.18 Million



SPE Demonstrations

Western Michigan

- Submitted by HHS and AAA of Western Michigan
- Serves Allegan, Ionia, Kent, Lake, Mason, Mecosta, Montcalm, Muskegon, Newaygo, Oceana, Ottawa
- Firewall: establishing an independent 501(c)3
- Partners include Region 8 AAA, Region 14 AAA and HHS, Inc.

Western

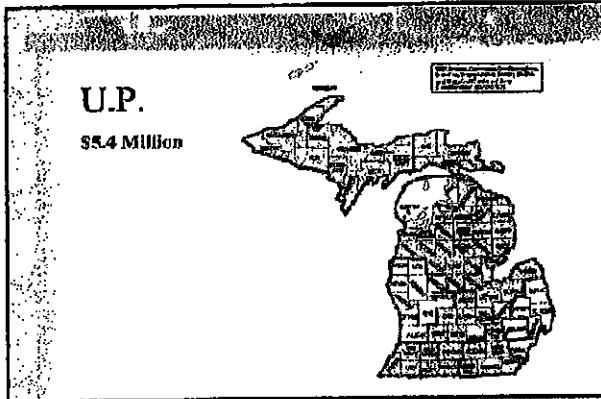
\$9.15 Million



SPE Demonstrations

Upper Peninsula

- Submitted by U.P. Commission for Area Progress
- Serves Alger, Baraga, Chippewa, Delta, Dickinson, Gogebic, Houghton, Iron, Keweenaw, Luce, Mackinac, Marquette, Menominee, Ontonagon, and Schoolcraft counties
- Firewall: independent entity within CAP agency.
- Partners include county DHS, nursing facilities, hospital system, 211



SPE Demonstrations

- 27 month contracts (7/1/06 – 9/30/08)
- 1st quarter start-up activities
 - ✦ Hire staff
 - ✦ Establish governance
 - ✦ Establish physical office
 - ✦ Conduct local level planning, outreach
- Target date for initiation of I&A is 10/1/06

SPE Demonstrations

Priority activity is establishing linkages with:

- critical pathways (hospitals, nursing facilities) to divert and transition
- MI Choice waiver programs to document unmet need and advocate for increased program capacity
- DHS home help program to access consumer-directed supports

Anticipated Outcomes

- Slowed growth.
- One primary contact point.
- Coordinated service delivery.
- No (real or perceived) conflict of interest
- Improved quality

Planning Grants

- Planning grants available for regions not funded.
- Will be awarded to independent entities to establish collaborative efforts that bring stakeholders together to overcome barriers and develop proposals.
- Expect in next fiscal year

ADRC Grant – How does it fit?

- Funding to support consumer participation in governance
- AIRS members, I&A staff certification
- Financial support for resource directory software – licensing, training
- Training in meaningful partnership building and sustaining collaborations

SPE Demonstrations

Failure is not an option

- Ongoing monitoring and performance measurement.
- Non-performers will be asked to exit the demonstration and replacement sites identified.

??? QUESTIONS ???
