

# Area Agency on Aging 1-B Integrated Care Readiness: Survey Results of our Homecare Provider Pool

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Prepared by  
Tabitha Hooper & Andrea Mulheisen



## **Background**

The Area Agency on Aging 1-B (AAA 1-B) is 1 of 16 Area Agencies on Aging in Michigan and is responsible for nearly 30% of the state's older adult population. AAA 1-B is a non-profit organization serving Livingston, Oakland, Macomb, Monroe, St. Clair and Washtenaw counties. AAA 1-B is also a MI-Choice Medicaid Waiver Agent in Michigan serving qualifying adults aged 65 years or older and individuals with disabilities aged 18-64 years who meet both the nursing facility level of care (NFLOC) and the financial eligibility criteria. The purpose of the MI Choice program, now considered a Prepaid Ambulatory Health Plan (PAHP), is to build and strengthen home and community based service capacity to support fully the long-term care setting preferences for its participants.

Integrated care (IC) is coordinated care from different systems providing a multitude of Medicaid and Medicare benefits through a single delivery system. In preparation for the Michigan IC pilot in Macomb County, which is home to more than 14,000 individuals who will be considered part of the pilot projected for October 2014, the AAA 1-B conducted a survey of our homecare agency service provider partners to assess their readiness and capacity for IC. The purpose of this survey was to gain knowledge on how prepared the homecare provider network is for the changes that will come with IC, and determine what actions may need to be taken to further ready the network.

The survey was disbursed electronically to homecare providers through Survey Monkey. The survey was comprised of 29 open-ended and multiple choice questions. 45 agencies were asked to complete the survey. A total of 43 people/agencies began the survey and 36 finished (83.7%).

## **Results**

**The provider pool adequately covers a 6 county region, with 26 agencies currently serving Macomb County and many having a capacity to expand further.**

The homecare pool was strategically arranged by AAA 1-B so that a wide variety of providers are available to service each county. 26 agencies currently service Macomb County and 6 other agencies reported as having the capacity to expand to Macomb County. 7 agencies also reported as currently serving Wayne County, another target area for the IC pilot.

**The provider pool has significant capacity to serve 100% more people.**

Survey respondents were asked the number of AAA 1-B participants they currently provide service to, the number of all current homecare participants they serve, and an approximation of the additional number of participants they could serve with current staffing levels.

The responding agencies reported they are currently serving a total of 1,553 of AAA 1-B participants (including MI Choice and non-MI Choice participants); with a total caseload of 5,809 (all pay sources). With current staffing, agencies could handle roughly 1,470 more

participants overall. This is 95% more AAA 1-B participants than they are currently serving with their existing staff.

To break this down to an individual agency level, the survey respondents have on average 43 AAA 1-B participants, and serve an average of 148 participants total (all pay sources), and could handle approximately 40 more participants per week per agency with current staffing (see Chart A). This data is across all providers/counties in the AAA 1-B region.

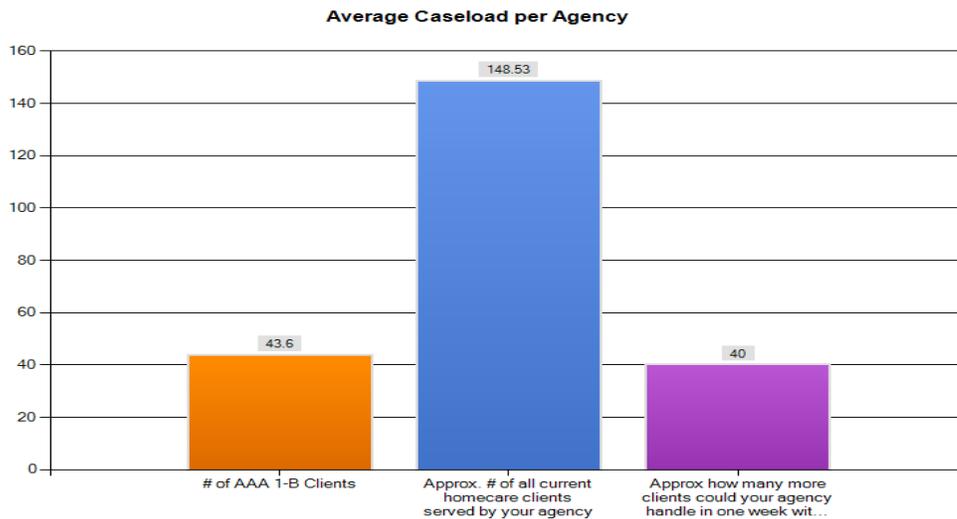


Chart A

**The diverse provider pool represents a strong history of experience, partnership and accreditation status.**

61% (n = 25) of the responding agencies have been in business for more than 10 years, and many of the agencies have worked with AAA 1-B during that entire time period. Another 20% have been in business for 5-10 years.

Almost half of the agencies reported that they have some form of **accreditation**. Some common accreditations are Community Health Accreditation Program (CHAP), Joint Commission (formerly JCAHO) and Commission on Accreditation of Rehabilitation Facilities (CARF).

35% (n=14) of the responding agencies are certified to provide **Skilled Care** services.

Diversity is essential to the provider network as our participant population is equally diverse. 18 agencies are owned or operated by a **female** and 11 agencies are owned or operated by a **minority** (not mutually exclusive).

**The provider pool is able to service participants quickly, often within 24 hours.**

82% (n = 31) of agencies report the ability to serve participants within 24 hours of request. The agencies that are able to provide this quick response report that they have specific staff

members who are on-call, staff with flexible availability, extensive amount of caregivers and a flexible scheduling system.

**The provider pool has a skill set able to serve special populations.**

76% (n=33) of agencies report that they have staff with the skill set to serve persons with mental illness, traumatic brain injury and/or developmental disabilities.

- Greater than 78% of survey respondents are able to serve people with developmental disabilities.
- 65% can serve individuals diagnosed with traumatic brain injuries.
- 65% can serve individuals diagnosed with a mental illness.

Survey respondents are able to provide these services because of experienced staff, regular trainings and continuing education.

Additionally, based on current staffing skills, 70% of survey respondents are able to provide services to Spanish speaking, Middle Eastern/Arabic speaking and Russian speaking individuals (see Chart B).

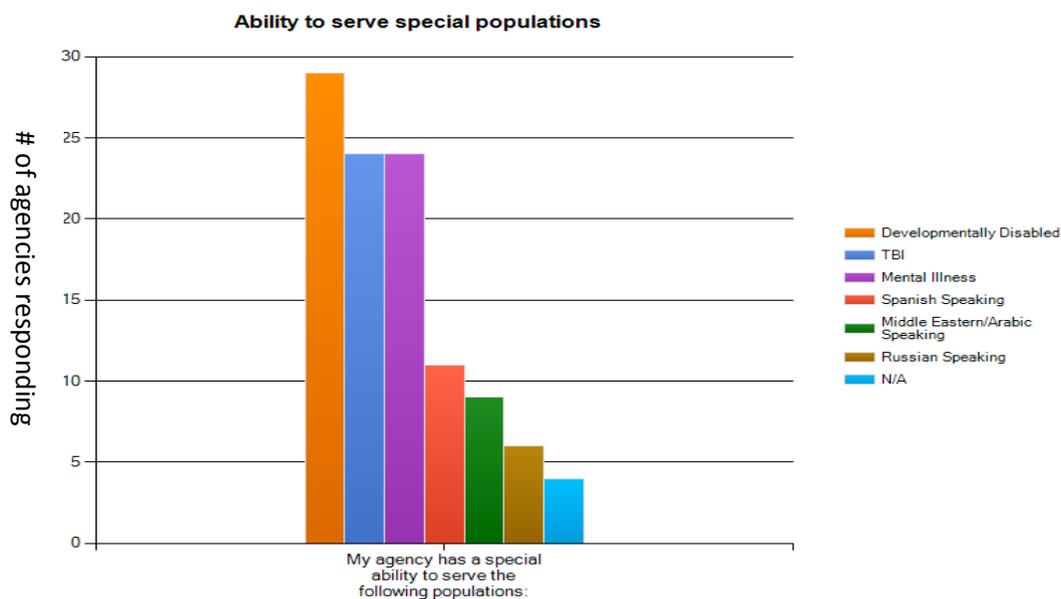


Chart B

**The provider pool focuses on employment of a diverse and highly qualified workforce through the hiring of Certified Nursing Assistants (CNA's), Certified Home Health Aides (CHHA's) or Medical Assistants (CMA) with supervision by a licensed Nurse or Social Worker**

All of the respondents reported as having at least a portion of their direct care workers as CNA's, CHHA's or CMA's. The provider pool reports a total of over 2,700 direct care workers, with an average of 90 direct care workers per agency. These Direct Care Workers are primarily supervised by licensed nurses or social workers. Over 330 nurses are employed throughout the

provider pool for provision of medication management or nursing services in addition to serving as supervisors. Prior to hiring and throughout employment, background checks are conducted through tools such as the Internet Criminal History Access Tool (ICHAT), Offender Tracking Information Center (OTIS), and the Orsus Group. Many also do fingerprinting as an extra measure of background checks although it is not yet required by the State of Michigan. The majority of the provider pool report that they require a minimum of one to two years of health or long term care experience for their direct care workers.

Staff certifications and licenses are tracked and monitored on a regular basis. Initial and annual documented training for staff was reported. Common training topics include cultural competency, safety in the home, identifying and reporting elder abuse, dementia care and medication management.

**The provider pool provides access to care for recipients around the clock and focuses on recruitment and retention of these staff to ensure higher quality.**

Most providers indicate that supervisors, direct care workers and office staff are available 24 hours a day, 365 days a year. Generally speaking the recruitment and retention of qualified staff is a challenge in the home care industry. AAA 1-B providers are encouraged to offer higher rates of pay and/or benefits to aid in retention. Some survey respondents report that their employees are provided with medical, dental and optical benefits at no cost. Other agencies report that benefits are offered at a low cost or at the expense of the employee. The majority of agencies pay their direct care workers minimally \$9/hr (industry average). (see Chart C).

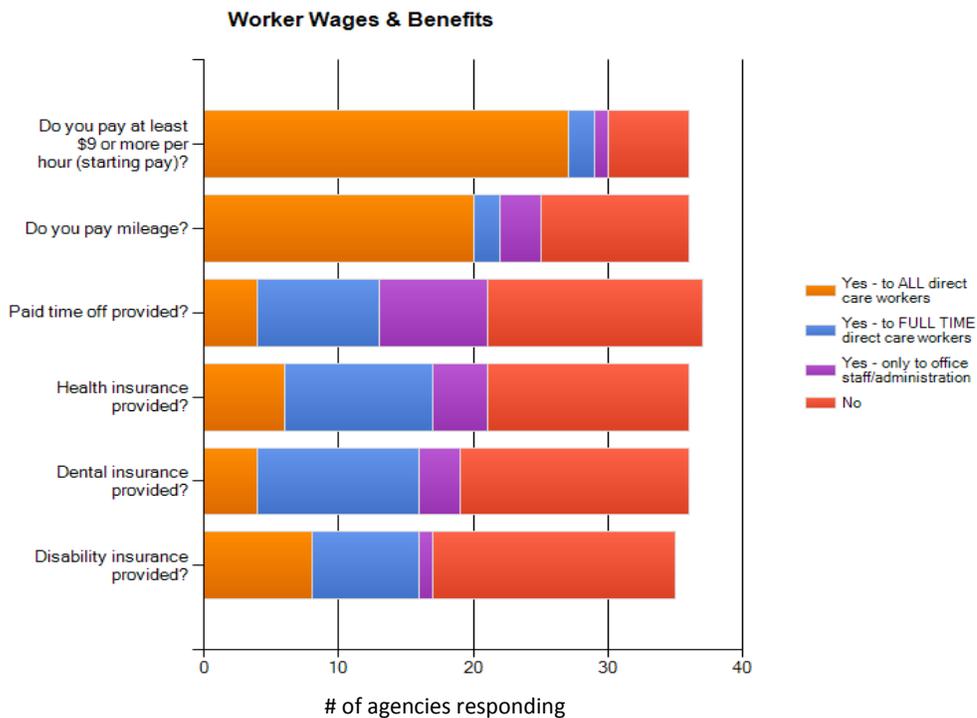


Chart C

## **Conclusions**

These survey results confirm notable information about the capacity and efficiencies of AAA 1-B's homecare provider pool. Insight was gained as to how prepared AAA 1-B's partner homecare agencies are for the Michigan IC pilot that will take place in Macomb County in 2014 (anticipated).

With over 26 agencies currently serving Macomb County and the ability for additional agencies to expand to Macomb County, and a capacity to immediately double the current AAA 1-B caseload, the homecare provider network stands poised to serve in the IC pilot program. To further expand the pool capacity the AAA 1-B would employ two strategies: 1) encourage existing vendors to hire additional staff; and 2) implement the pool of contingency of service providers that previously have worked with the AAA 1-B and could be brought back into the provider pool with relative ease, should there be a need.

Insight was also gained into the quality and efficiencies within this provider pool. The vast majority of survey responses emphasized the overall quality of the agencies' supervisors, staff, and ability to serve special populations, such as the developmentally disabled, mentally-ill and TBI population. The provider pool is made up of many agencies that have a strong history of experience, accreditation and partnership with AAA 1-B. The majority of survey responses indicated that the provider pool is ready for the changes that are to come with IC. Due to AAA 1-B's long standing relationships with the provider pool, AAA 1-B is germane in efficient communication between the single delivery system and the direct service providers.