



# Medicare Advantage Learning Collaborative: Final Report April-September 2019

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#### Background

As the health care and home and community-based services industries continue to explore opportunities to enhance delivery of cost effective, patient centered care, Congress has responded with supportive legislation. The 2018 **Creating High Quality Results and Outcomes Necessary to Improve Chronic Care Act** (CHRONIC Care Act) provided the foundation for considerable Medicare Advantage (MA) policy reforms at the Center for Medicare and Medicaid Services (CMS). Over the last two years, CMS has enhanced MA policies to improve care coordination and health outcomes for chronically ill beneficiaries. The introduction of the **Special Supplemental Benefits for the Chronically Ill** (SSBCI) opened the door to provision of more services tailored to the needs of chronically ill MA enrollees. These benefits expand options for MA plans to cover non-clinical benefits and services such as home modifications, home delivered meals, and caregiver support, among others. These expanded benefits are the expertise of home and community-based services delivery systems nationwide. As MA plans opt to cover these services to maximize quality of care for their enrollees, community-based organizations (CBOs) must be prepared for effective engagement.

Based on national CBO surveys and feedback from other key resources, the need for more intensive technical support regarding Medicare Advantage is substantial. In response, the National Council on Aging (NCOA) and the National Association of Area Agencies on Aging's Aging and Disability Business institute (n4a) developed the **Medicare Advantage Learning Collaborative** (MALC) through cooperative funding agreements with the Administration for Community Living. The MALC was designed to educate select CBOs that are ready to invest in MA contracting about the fundamentals of Medicare Advantage. Additionally, the program supports increasing understanding of MA contracting expectations as well as development of CBO product marketing techniques through the design of targeted value propositions.

#### Learning Collaborative Design





- 1. <u>Faculty</u>: Sharon Williams served as the lead facilitator. Kathleen Zuke, NCOA and Karol Tapias, n4a served as project managers. The design of the learning collaborative was initiated in the fall of 2018 and implemented from April- September 2019.
- 2. <u>Charter (see Appendix A)</u>: The learning collaborative charter outlines the purpose, timeline, faculty, key learning benchmarks, participant benefits, and participant expectations.
- 3. <u>Application Process</u>: In collaboration with the Administration for Community Living, NCOA and n4a selected 11 organizations and/or networks to participate in the six-month learning collaborative. Selection was based on review of applications which requested information on current contracting, primary goals for participation in the learning collaborative, needs and challenges related to business acumen, and progress to date. Nonprofit and governmental organizations at the state or community level that are 1) focused on serving older adults and adults with disabilities through home and community-based services and supports and 2) interested in contracting with Medicare Advantage plans were eligible to apply. Over 100 applications were submitted for the learning collaborative.
- <u>Curriculum</u>: The six-month curriculum featured presentations from leading MA experts and experienced CBOs. Each monthly session was two hours in duration and included curated lectures, participant sharing focused on progress reporting and homework assignments, and Q&A.

In between each lecture, participants completed content-related homework, which reinforced the content discussed and supported integration of the curriculum material into strategic plans. Additionally, participants completed monthly reports to highlight their progress, challenges, and accomplishments. Participants utilized the online community to complete progress reporting (see Appendix B). Lecture topics and homework assignments are outlined in Table 1.

Session	Length	Торіс	Homework Assignment
1	120 min	Learning collaborative kick-off meeting	Review foundational materials
			focused on Medicare Advantage
			and the special supplemental
			benefits for the chronically ill.
2	120 min	Session 1) Medicare Advantage plan	Research the STAR ratings for 2-3
		structure and assessing plans in your	Medicare Advantage plans and
		region	identify which services you would
		Session 2) Key Medicare Advantage plan	propose marketing to these
		quality and performance standards	organizations and why.
3	120 min	Session 1) Medicare Advantage plan	
		application process and network	In collaboration with your team,
		contractor considerations	complete the n4a Readiness
		Session 2) Organizational readiness for	Assessment Tool

Table 1. 2019 Medicare Advantage Learning Collaborative Curriculum





		contracting (e.g. SHIP considerations,	
		adapting to plan standards, etc.)	
4	1 ½ days	n4a 44 <sup>th</sup> Annual Conference and	Post a message on the online
		Tradeshow- Medicare Advantage Pre-	community discussing which pre-
		Conference Intensive	conference session had the most
			impact on your Medicare
			Advantage strategy and why.
5	120 min	Session 1) Financial modeling	Use the "Value Proposition How-To
		Session 2) Building blocks of a value	Guide and Worksheet" to write a
		proposition	value proposition and be prepared
			to present it to the group on the
			next calls.
6	120 min	Shark Tank: Each participating	
		organization presents their prepared	
		value proposition statements for a panel	
		of three experts in the field of health	
		care, public health, and aging.	

- 5. <u>Online Community</u>: The online community (see Appendix C) was designed to archive learning collaborative materials and resources, support communication between participants, and track participant progress throughout the learning collaborative. This forum was used by both faculty and participants to post recorded lectures, supplemental content materials, health care industry news, and questions for discussion.
- In-Person Learning Opportunities: Two in-person learning opportunities were provided during and after the Collaborative, including the Aging and Disability Business Institute's Pre-Conference Intensive at the n4a Annual Conference and Tradeshow in New Orleans, LA and a meeting that brought together the alumni of three learning collaboratives.
  - a. <u>Aging and Disability Business Institute's Pre-Conference Intensive at the n4a Annual</u> <u>Conference and Tradeshow, July 27-28, 2019</u>: The pre-conference was focused on the Medicare Advantage Special Supplemental Benefits for the Chronically III. The event discussed the MA plan landscape, the policy changes that lead to the supplemental benefits opportunity as well as how CBOs are responding through building networks and creating their value propositions. The most highly rated session of the pre-conference was a panel of representatives from three MA plans that discuss their approaches to providing the supplemental benefits and some of the challenges they are facing as the benefits begin to roll out. The pre-conference concluded with a private lunch and networking event for the MALC participants. (See Appendix D for the agenda.)
  - b. <u>Closing Meeting of the Learning Collaboratives</u>: Members of the Medicare Advantage Learning Collaborative were also invited to an n4a convened meeting of three learning collaboratives in December 2019. This meeting served as both a closing meeting for





each individual learning collaborative as well as an opportunity to share information across learning collaboratives. The MALC participants had the opportunity to meet once again with each other and share progress made since the close of the learning collaborative in September as well as ask additional questions of the faculty. They also presented on what they learned to the members of n4a's Health IT and Trailblazers Learning Collaboratives. They had the opportunity to network and brainstorm with the members of the learning collaboratives over the course of the two-day event as well as hear from speakers on value base payment and from health care representatives on their approach to network building. (See Appendix E for the agenda.)

7. <u>One-on-One Technical Assistance Sessions</u>: MALC faculty conducted one-on-one technical assistance sessions with each participating organization or network at the beginning and end of the learning collaborative. The initial one-on-one call provided an opportunity to learn about the participants' environmental scan, programmatic goals, and progress to date. The second session was held following the n4a Annual Conference and Tradeshow and focused designing a targeted value proposition.

The sessions complemented the monthly lectures and were an opportunity for participants to utilize the faculty's skills and expertise to address issues specific to their organizations. For example, one organization asked for connections in their state to explore current work in their region. Another organization needed guidance on creating an internal value proposition to spark more commitment from senior leadership. Most questions during the one-on-one sessions focused on contracting and network development. Several MALC participants were encouraged to apply for the NCOA-led Network Development Learning Collaborative and four were selected to participate. During the TA calls participants expressed satisfaction with the overall direction of the program.

#### Learning Collaborative Participants

The MALC included 11 participating organizations, including Area Agencies on Aging, Centers for Independent Living, and other non-profit organizations (see Table 2). The group included organizations experienced in implementing evidence-based health promotion and disease prevention programs as well as other home and community-based services. Each organization designated a lead and co-lead contact for communication/project administration. See the Learning Collaborative charter in Appendix A for an overview of key responsibilities for successful engagement in the MALC.

State	Lead Organization
WI	Aptiv, Inc.
ОН	Benjamin Rose Institute on Aging
IL	Coordinated Care Alliance
ME	Healthy Living for ME
MN	Innovations for Aging (Juniper Network)
КҮ	Kentucky Council of Area Development Districts

#### Table 2: 2019 MALC Participants





MA	Mass Home Care
СТ	North Central Area Agency on Aging
GA	Open Hand Atlanta
SC	South Carolina Association of Council on Aging Directors
NY	Selfhelp Community Services, Inc.

#### **Program Evaluation**

At the end of the learning collaborative, 8 out of 11 organizations completed the evaluation survey. The 23-item survey assessed satisfaction with the learning experience as well as achievement of critical components indicating readiness to pursue partnerships and contracts with MA plans. The survey was developed with the intention to use the feedback to improve the 2020 MALC. See the evaluation report in Appendix F.

This report was prepared by Sharon Williams, Williams Jaxon Consulting; Kathleen Zuke, NCOA; and Karol Tapias, n4a.





## Appendix A: 2019 Medicare Advantage Learning Collaborative Charter

## Purpose

The purpose of the Medicare <u>Advantage Learning Collaborative (MALC), hosted by the</u> National Council on Aging (NCOA) and the Aging and Disability Business Institute at the National Association for Area Agencies on Aging (n4a), is to provide community-based organizations (CBOs) with the knowledge and skills to pursue partnerships and contracts with Medicare Advantage plans for home and community-based services and supports.

## Timeline

Six months: April 2019 - September 2019

## Faculty

The MALC faculty will include leading experts on Medicare, Medicare Advantage, the aging network, social determinants of health, and quality measures. Sharon R. Williams, CEO of Williams Jaxon Consulting, LLC will serve as the lead faculty.

## **Key Learning Benchmarks**

Participating organizations will work toward achieving these tactical objectives:

- Learn a framework to develop value propositions for Medicare Advantage plans.
- Learn how to evaluate and prioritize contracting opportunities with Medicare Advantage plans.
- Increase knowledge of Medicare Advantage plans and requirements for contracting.
- Utilize the n4a Readiness Assessment Tool to strengthen strategic planning.
- Identify a Medicare Advantage plan partner.
- Develop a customizable value proposition to present to a Medicare Advantage plan.

## **Participant Benefits**

- A no-cost, significant investment in the long-term sustainability of your organization or network.
- Over 12 hours of content delivered monthly, paired with defined action steps to help you create transformation. Content will be delivered through monthly webinars with lectures by experts from the field, peer-to-peer learning, and discussion of suggested readings and homework assignments.
- Access to a private online community to connect with peers and resources.
- Access to a one-hour session of consulting through the Aging and Disability Business Institute at n4a.

## **Participant Expectations**





Up to 10 organizations or networks will be selected to participate in this learning collaborative. Participants will be announced in early April 2019. Participants are expected to complete the entire six-month MALC curriculum, which includes:

- Collaborating with your team to develop measurable goals and objectives to achieve the MALC purpose;
- Actively participating during monthly webinars, including reporting on progress and lessons learned to encourage shared growth among all participants;
- Attending the <u>n4a Annual Meeting</u> pre-conference intensive focused on Medicare Advantage. This pre-conference will take place on Sunday, July 28<sup>th</sup> in New Orleans, LA;
- Dedicating 4-5 hours per month to prepare for monthly MALC lectures and homework assignments;
- Actively and regularly participating in ongoing discussions on the online community;
- Submitting homework assignments and progress report updates monthly through the online community;
- Becoming familiar with the community-integrated health care resources on <u>n4a's Aging</u> and <u>Disability Business Institute</u> website and <u>NCOA's Roadmap to Community Integrated</u> <u>Health Care</u> website as well as other supplemental materials.
- Participating in one-on-one technical assistance calls at the beginning and end of the learning collaborative (May and September); and
- Completing an evaluation survey at the end of the learning collaborative.

## Application

The Medicare Advantage Learning Collaborative application can be found <u>here</u>.

## Funding

The Medicare Advantage Learning Collaborative is funded by the Administration for Community Living, U.S. Department of Health and Human Services through cooperative agreements to n4a and NCOA.

## Contact

Please contact Kathleen Zuke (<u>kathleen.zuke@ncoa.org</u>) with any questions regarding the Medicare Advantage Learning Collaborative.





#### Appendix B: Progress Report

#### PROGRESS DETAILS

Progress Record	+ Follow	Edit Dele	te Update Progress
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## Appendix C: Online Community

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Monthly Meeting Materials		
E • Reports		
Aging and Disability Business Institute SCACAD Assessment Results.pdf		
n4a Business Institute_Readiness Assessment Module	5- -	
Questions.pdf		

Owner     Weekly Digest       MEDICARE     PRIVATE       Medicare Advantage       Manage Notifications     Edit Group	Croup Details Description Welcome! The Medicare Advantage Learning Collaborative online community will house discussion focused on seeking opportunities to contract with Medicare Advantage plans for nome and community-based services. Show Mare Default De
FEED ENGAGEMENT	Every Post     Daily Digest     Weekly Digest     Limited (not recommended)
Post Poll Question Announcement	To change notifications for the overall Community:
Share an update Share	Show More Owner Kathleen Zuke





#### Appendix D: Pre-Conference Intensive Agenda

## Medicare Advantage Supplemental Benefits: Opportunities for AAAs and other CBOs

Co-sponsored by the Aging and Disability Business Institute and the National Aging and Disability Transportation Center

The Balanced Budget Act of 2018, which included the Creating High-Quality Results and Outcomes Necessary to Improve Chronic (CHRONIC) Care Act, offers new flexibility for Medicare Advantage (MA) plans to provide a broader range of supplemental benefits to people with Medicare who have chronic illnesses, including home-delivered meals, transportation for non-medical needs, and more. This presents an exciting chance for aging and disability CBOs to partner with MA plans to deliver these home and community-based services that impact social determinants of health. Come to this two-day preconference intensive to learn how you can take advantage of these new opportunities. Learn from national experts and your peers who are navigating this process and come away with action steps that will help you prepare your agency for these new revenue pathways!

## AGENDA

#### Saturday July 27, 1:00 – 4:45 pm

1:00 – 1:05 pm	Welcome
	Marisa Scala-Foley, Director, Aging and Disability Business Institute, n4a, DC
1:05 – 2:00 pm	Setting the Stage, Part 1: About Medicare Advantage Plans
	Moderator: Marisa Scala-Foley, Director, Aging and Disability Business Institute,
	n4a, DC Presenters:
	James Michel, Director of Policy & Research, Better Medicare Alliance, DC
	Joe Perretta, Health Policy and Communications Analyst, SNP Alliance, DC
2:00 – 2:45 pm	Setting the Stage, Part II: About the New Supplemental Benefits
	Moderator: Marisa Scala-Foley, Director, Aging and Disability Business Institute,
	n4a, DC
	Presenter:
	Mary Kaschak, Executive Director, Long-Term Quality Alliance, DC
2:45 – 3:00 pm	Break
3:00 – 4:00 pm	How Are Plans Responding?
	Moderator:
	Courtney Baldridge, Corporate Relations, n4a, DC





Presenters:

Brandi Brunson, Senior Advisor, Medicare Product Strategy, Cigna, TX Joy Cameron, Associate Vice President, Public Policy, Humana, DC Jason Smith, Executive Director, Duals Center of Excellence, Operations, Aetna Medicaid, OH

4:00 – 5:00 pmBuilding Networks to Respond to MA OpportunitiesModerator: Karol Tapias, Deputy Director, Aging and Disability BusinessInstitute, n4a, DC

## Presenters:

Sandy Atkins, Vice President, Strategic Initiatives, Partners in Care Foundation Virginia Dize, National Aging and Disability Transportation Center, n4a, DC Byron Crowe, Associate Medical Director, Solera Health, CO

## Sunday July 28, 8:00 – 11:30 am

8:00 – 8:30 am	Breakfast
8:30 – 9:30 am	Partnerships in Action
	Moderator: Karol Tapias, Deputy Director, Aging and Disability Business
	Institute, n4a, DC
	Presenters:
	Paul Cantrell, Consultant, n4a, DC
	David Crocker, Community Care Director, SARCOA, AL
9:30 – 10:30 am	Developing a Value Proposition for MA Plans
	Moderator: Sharon Williams, CEO, Williams Jaxon Consulting, LLC, MI
	Presenters:
	Maureen McIntyre, Executive Director, North Central Connecticut Area Agency on Aging, CT
	Gerard Queally, President & CEO, Spectrum Generations, ME
	Alan Schafer, Senior Director, LTSS, Clinical Operations, Aetna Medicaid, TN
10:30 – 11:15 am	Breakout Activity
11:15 – 11:30 am	Report Back and Wrap-Up





## Appendix E: Agenda for the Closing Meeting of the Learning Collaboratives

DAY ONE – DECEMBER 3, 2019			
9AM	BREAKFAST		
9:30-10:30AM	INTRODUCTIONS & WELCOME		
	Welcome from n4a Sandy Markwood, CEO Welcome from the Administration for Community Living Kelly Cronin, Deputy Administrator, Center for Innovation and Partnership		
	Introductions		
10:30 – 11:30AM	LEARNING COLLABORATIVE MEETINGS		
	Discussion Prompts:		
	What has been your progress to date? Changes to report? Updates? What remain your biggest challenges in health care contracting? What other questions do you have?		
11:30-11:45AM	BREAK		
11:45AM – 12:15PM	TLC LEARNING COLLABORATIVE SHARE		
	Each learning collaborative will present on lessons learned, tools developed, and updates/highlights from participants.		
12:15PM – 1:15PM	LUNCH		
1:15AM – 1:45PM	HIT LEARNING COLLABORATIVE SHARE		
1:45PM – 2:45PM	PRESENTATION ON VALUE BASED PAYMENT AND ASSUMING RISK		
	Kelsey Brykman and Michelle Herman Soper		
	Center for Health Care Strategies		
2:45PM – 3PM	BREAK		
3PM – 4PM	PEER ROUNDTABLES		

An opportunity to sit with your peers to discuss the most pressing challenges. **Come with your contracting related questions** to ask your peers and share your experiences and knowledge with each other.





- Building Networks
- Navigating Volume Challenges
- Contract Negotiation
- Open Space

4PM-4:30PM

CLOSING

#### DAY TWO – DECEMBER 4, 2019

9AM	BREAKFAST
9:30–10AM	CHECK-IN
10 – 10:30AM	MA LEARNING COLLABORATIVE SHARE
10:30AM – 11:30 AM	PRESENTATION ON NATIONAL NETWORKS
	Sucheta Lakhani, Unite Us
	Laura Sankey, Social Health Bridge
11:30-11:45AM	BREAK
11:45AM – 12:30PM	LARGE GROUP DISCUSSION
	A final opportunity to share additional needs and share feedback on future directions.
12:30PM – 1:30PM	CLOSING & NETWORKING LUNCH





## Appendix F: 2019 Medicare Advantage Learning Collaborative Evaluation

The following is an overview of the evaluation of the 2019 Medicare Advantage Learning Collaborative (MALC). The evaluation consisted of two components:

- 1) A survey administered at the completion of the MALC.
- 2) Achievement of critical components indicating readiness to pursue partnerships and contracts with Medicare Advantage (MA) plans.

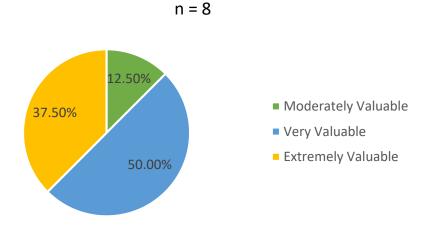
## Survey Results:

A total of eight organizations completed the post MALC survey. This survey consisted of twenty-three (23) questions, including several open-ended questions. The purpose of this survey was to obtain feedback on participant satisfaction with the MALC and its achievement of the key learning objectives. The survey was developed with the intention to use the feedback to improve the 2020 MALC.

The 8 (out of 11) organizations that completed the survey indicated that approximately 76 other organizations were involved in the MALC work during the six-month course.

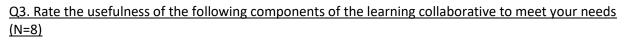
<u>Q2. How valuable was your MALC participation in supporting your efforts to engage MA plans to support</u> your programs?

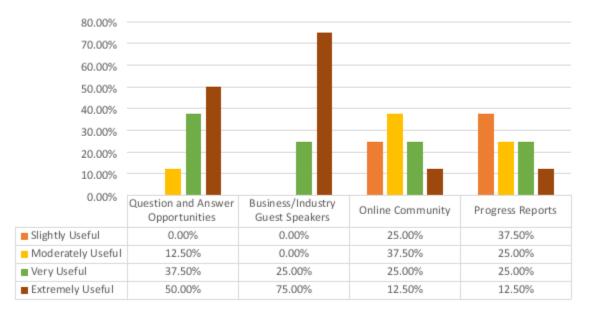
Value of MALC





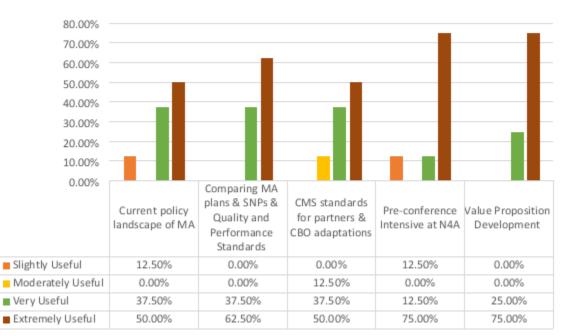






## Usefulness of Components

Q.4 Rate the usefulness of the monthly lecture topics for your organization's efforts towards your understanding of MA plans and tools for engagement (N=8)



# Usefulness of Monthly Lecture Topics





## Q5. How informed were the designated lecture faculty? (N=8)

One hundred percent (100%) of participants agreed that designated lecture faculty were very or extremely informed.

## Q6. How responsive were faculty to questions? (N=8)

One hundred percent (100%) of participants agreed that designated lecture faculty were very or extremely responsive to questions.

## Q7. Was sufficient time devoted to each lecture? (N=8)

One hundred percent (100%) of participants agreed that there was sufficient, or more than adequate time devoted to each lecture.

Q8. List any additional topics that you would have liked to have covered in the lecture series (N=7)

- Outcome measures
- The SHIP conundrum, including maintaining the firewall between the SHIP services and anything we would do with an MA. What the regulations are? What the statutes are? What that structure has to look like? How to create that structures?
- HIPPA compliance, technology needs
- More on the analysis of determining if there is sufficient call for providing such services in an area
- How to bridge the normal operational behavior change of non-profits to a culture based on performance and accountability
- Success stories and how the success was accomplished.

## Q9. How valuable did you find the one-on-one technical assistance calls? (N=8)

Eighty-seven and a half percent (87.5%) of participants agreed that the technical assistance calls were very or extremely valuable. Only 1 respondent reported that these calls were moderately useful.

<u>Q10. Was there adequate time to address your issues/questions in these hour-long calls?</u> (N=8) One hundred percent (100%) of participants agreed that there was sufficient, or more than adequate time devoted to the technical assistance calls.

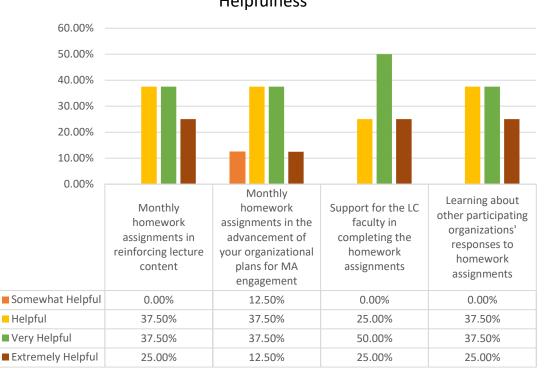
Q11. Share your recommendations for improving the one-on-one technical assistance calls? (N=6)

- Topics to be discussed sent out to local projects
- Share other 1:1 frequently asked questions





## Q12. How helpful was/were the... (N=8)

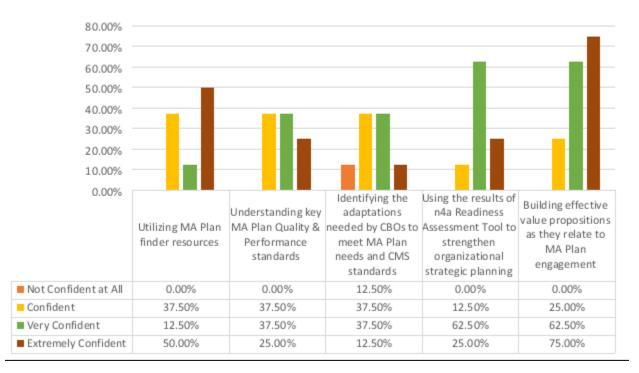


Helpfulness





# Q13. How confident do you feel in your understanding of the following elements of MA Plan engagement process? (N=8)



Confidence

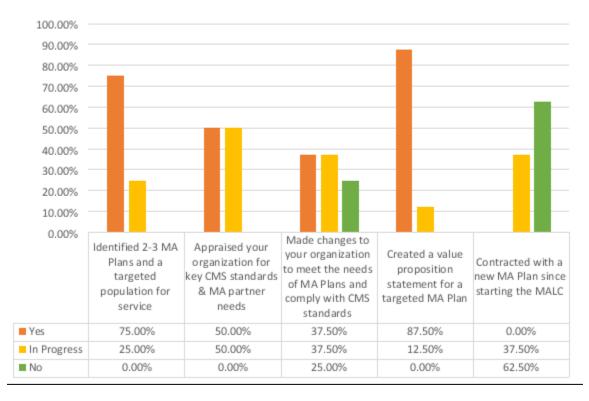
## <u>Q14. To what extent do you feel confident in your ability to continue to work toward MA Plan</u> engagement and secure a contract? (N=8)

Six of the 8 respondents reported that they felt very or extremely confident while only 1 respondent reported feeling somewhat confident and 1 respondent reported feeling confident.





## Q15. Did your organization complete the following milestones? (N=8)



## Completion of Milestones

Q16. Identify which MA Plan(s) you've engaged or contracted with (if applicable) (N=4)

- Aetna, Anthem, Humana, WellCare
- CarePartners CT, Aetna, Connecticare
- WellCare, United Healthcare
- BlueCross and BlueShield of MN, Dual eligible contract HealthPartners, Dual eligible contract UCARE Medica United HealthCare/Optum

## Q17. How would you summarize your experience overall? (N=7)

- The overall experience was extremely helpful as we progress towards contracting with an MA
- This was a wonderful learning experience. It was definitely a time intensive process and you definitely get out of it what you put into it. It was a great opportunity to force ourselves to focus on the topic of MAs. Without intentionally creating the space for it and then investing in it, it's too easy to be consumed by the daily fire-fighting that's our lives in this industry.
- It forced us to move forward with action items in engaging a health plan.
- The experience has been extremely helpful. Thank you so much. This work can be lonely- it's very nice to have support in this new arena and hear from other organizations.





- Great learning and readiness but have yet to find how an investment of resources in this would prove beneficial at this time for our organization.
- Innovations for Aging: Juniper Network was contacted by health plans to begin this work. But we were coming to the table blindly. Participating in this learning collaborative helped us understand how MA plans are incentivized, measured, and to identify how we can help them. This is important work to start shifting health care spending into the community.
- The MALC has increased our confidence in moving forward with MA value propositions. NCOA provides a wealth of knowledge and resources.

Q18. What are your key takeaways from participating in the learning collaborative? (N=7)

- That the MA Plans need us to improve their HEDIS scores as much as we need them to expand our service reach.
- Language is important. Immersion in the MA world to really understand their perspective is important. Being honest about what we don't know so that we can do the necessary work. The need to invest and take action. It shouldn't be a matter of "if" it needs to be a matter of "when".
- Understanding how they operate where they get their \$\$ from, deadlines, and how to research the star ratings, etc.
- How to complete the necessary "homework" before approaching plans and all the information specific to MA plans vs government plans.
- We have an understanding to be ready when the marketplace is ready to engage and invest in services
- We must NOT come to the negotiating table blindly. We must be knowledgeable and be committed to internal quality and integrity as we bring our network partners with us.
- Value proposition, MA knowledge, research preparation

Q19. What would have improved your MALC experience? (N=6)

- While recognizing how much of an ask this is, if each state represented on those selected could have a state specific coach that is familiar with the MA plans in the respective state.
- Honestly can't think of anything relative to the experience. I thought it was extraordinarily positive. 9/26/2019 8:04 AM
- Seeing samples of contracts with CBOs who have already partnered with a plan. 9/26/2019 5:16 AM
- Taking it one step further in having each organization actually contact the MA plan and discuss their experience.
- More analysis on how to determine if there is a call for services in the marketplace that make the investment in services of value at this time.
- Could have been 12 months long. If it was longer we could have gone from start to finish.

## Q20. What challenges did you face during the MALC? (N=7)

• Having the time to devote to this service expansion project.





- Marshaling my partners for feedback required a lot of advance planning in terms of the homework. I needed to time my completion and factor in the time needed to collect and integrate comments. They were great and very timely with my requests but I think I'd do more of an upfront dialogue/working group next time.
- Funding who will fund the project... the plan or us? Or both?
- For CCA, time was the only issue. We just started a new contract and therefore, I do not believe I spent as much time looking at MA plans as I would have hoped.
- Time to focus on this initiative and develop an in depth understanding to move forward in progress
- Sharing my learnings with my team and leadership to USE IT! My learnings were valuable to continue conversations and bring my colleagues along as we grow and change. There is an internal disconnect, which I am working on, to ensure we are using this information at the table.
- Scheduling through the summer, technical challenges with website and Zoom.

# Q21. What top challenges do you still face as you continue to develop your strategy for MA Plan engagement? (N=7)

- Having the time to devote to this service expansion project
- Keeping up the momentum! I know it's a choice of priorities but it's also resources. Looking at some grants to fund activities and build capacity (staffing) but that will require additional time. It's all good!
- Same, funding the pilot. and getting the plan to make the initial investment.
- Time, CCA staff time, and capacity of the network as we just took on a big contract in southern and central IL
- Identifying our marketplace's readiness for this type of services
- Meeting the performance needs of the MA plan, showing them that we can serve quality programming to their members and that we can be a quality partner.
- ROI analyses, pricing, strategy including other services with HL4ME CBO's.

## Q22. What ongoing support do you suggest NCOA and n4a staff provide for MALC alumni? (N=7)

- Occasionally asking for progress reports from the teams
- Continued access to the sessions as non-participants. It would be really helpful to hear a lot of that info again. Every time I read my notes I see something I missed. Alumni chat group monitored/curated by a member of the faculty? Support as the contracting process may become a reality. When the rubber actually meets the road is when we're really going to need someone in our corner. Almost like a MALC SWAT team.
- Contract reviews
- I would love to have a monthly call with statewide networks where we would have time to just ask each other questions- potentially no set agenda just a time to discuss/collaborate with other folks doing the same work.
- More analysis to determine marketplace readiness





- Continuing to document lessons learned from other networks in the nation to continue learning from one another.
- Bi-monthly check-in calls.

Q23. As we plan for the 2020 MALC, please share any additional comments or recommendations to improve the MALC experience (N=3)

- Posting information to the website was a bit challenging
- Just a sincere "thank you". And thank you as well for providing financial support for the conference registration. It was really helpful. And kudos to the team and faculty for their combination of great personal warmth and subject matter expertise.
- As stated before, a longer collaborative.

## Achievement of critical components indicating readiness to pursue partnerships and contracts with Medicare Advantage (MA) plans – from April to September 2019

Component	April	Sept
Contracting opportunities with MA reform	7	8
Aligned SDOH and MA plan benefits	7	7
Documented existing contracts	4	4
Documented services in current contracts	3	3
No existing contracts	4	4
Used the Medicare Plan Finder	8	9
Identified 2-3 services MA plans	6	7
Reviewed MA plan quality ratings	7	8
Researched MA plan service area/benefits	7	8
Identified target population for service	7	8
Appraised organization for key CMS standards	4	5
Completed n4a Readiness Assessment	11	11
Identified areas of strength/weakness	7	8
Aligned plan needs with CBO services	7	8
Evaluated program/development costs	5	5
Identified plan contract responsibilities	6	7
Crafted a value proposition	7	8