



*To compassionately serve
Hoosiers of all ages and
connect them with
social services, health care
and their communities.*

WWW.FSSA.IN.GOV



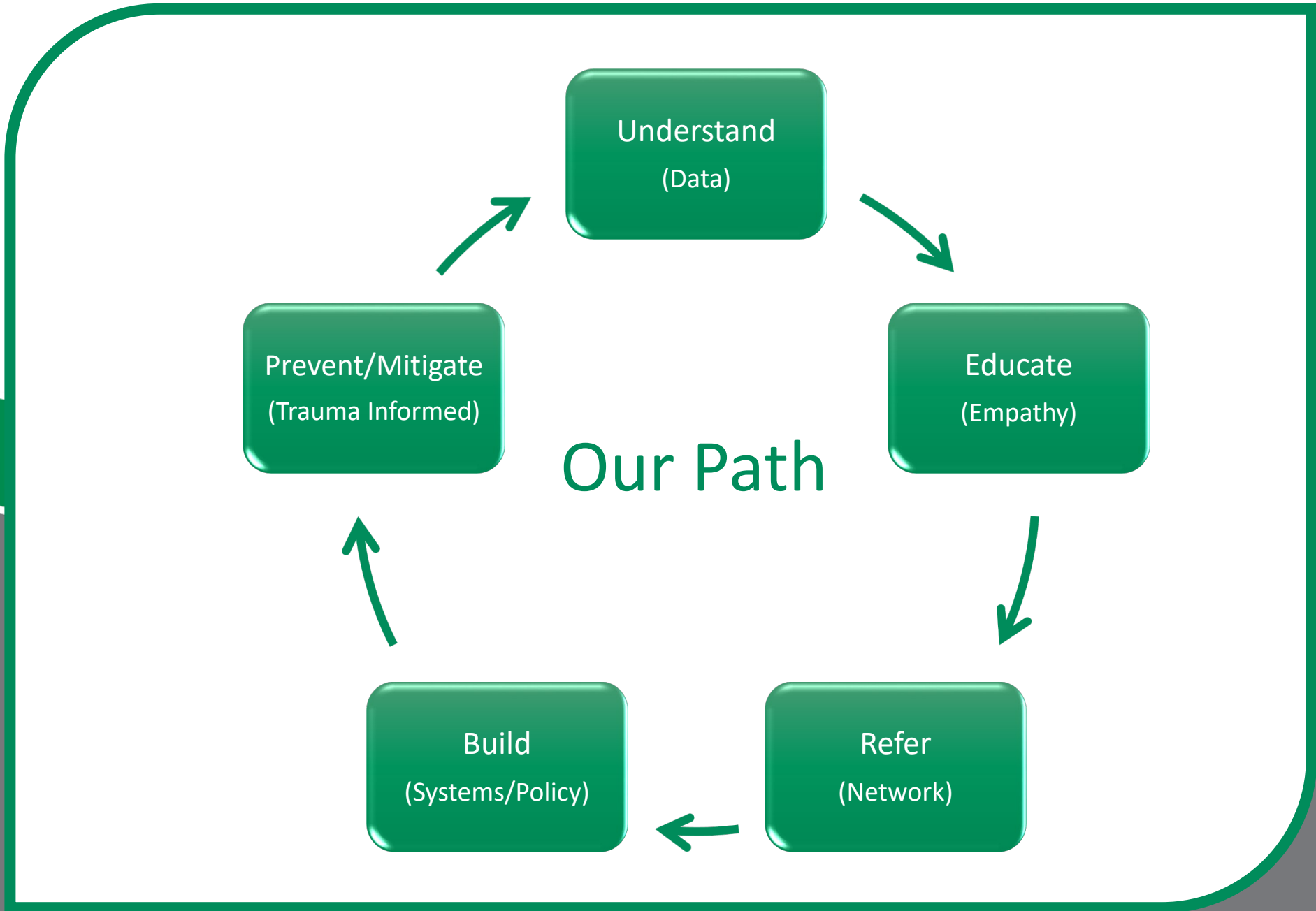
Overview

- Healthy Opportunities
- Team kudos & special guests
- 2019 Big Projects updates
- Staff Survey results
- Mission/Vision/Values showcase
- SECC season
- Wedding pictures



Office of Healthy Opportunities







Social Risk Assessment

Healthy Opportunities Assessment Tool	Yes / No / NA
In the last 12 months, did you ever eat less than you felt you should because there wasn't enough money for food?	
In the last 12 months, has your utility company shut off your service for not paying your bills?	
Are you worried that in the next 2 months, you may not have stable housing?	
Do problems getting child care make it difficult for you to work or study? (leave blank if you do not have children)	
In the last 12 months, have you needed to see a doctor but could not because of cost?	
In the last 12 months, have you ever had to go without health care because you didn't have a way to get there?	
Do you ever need help reading hospital materials?	
Are you afraid you might be hurt in your apartment building or house?	
During the last 4 weeks, have you been actively looking for work?	
In the last 12 months, other than household activities or work, do you engage in moderate exercise (walking fast, jogging, swimming, biking or weight lifting) at least three times per week?	



Results: County Level Data

Counties Selected:

- Adams
- Allen
- Bartholomew
- Benton
- Blackford
- Boone
- Brown
- Carroll
- Cass
- Clark
- Clay
- Clinton
- Crawford
- Daviess
- Dearborn
- Decatur
- Dekalb
- Delaware
- Dubois
- Elkhart
- Fayette
- Floyd
- Fountain



137,096
Total Surveys Completed

100.00%
Percent of State

Per Selection Since Aug. 2018

Social Risk Factor Mapping Tool

Click county or question to filter metrics

Sort questions by...

Survey order

Greatest to least

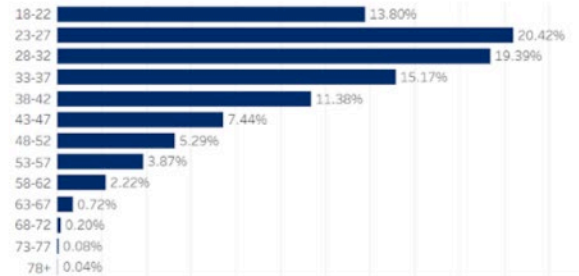


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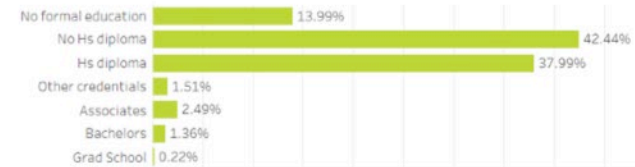


Selection Demographics

Age



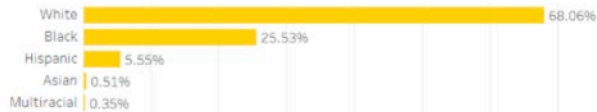
Education



Gender

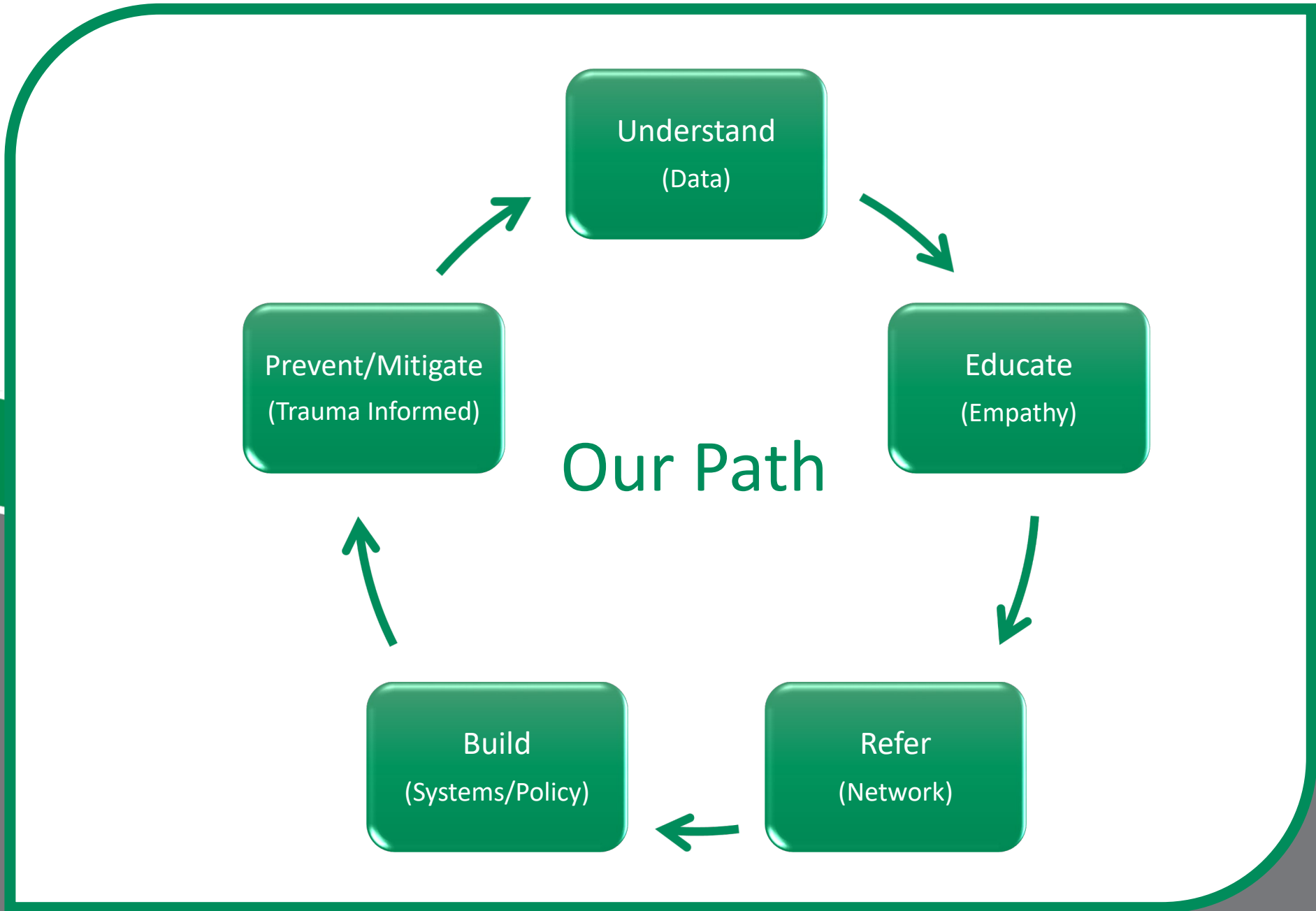


Ethnicity



Marital Status







Complete the Survey

Team FSSA,

FSSA's mission is to compassionately serve Hoosiers of all ages and connect them with services, health care and their communities. Today, our Healthy Opportunities office is launching an internal survey to better understand the many ways we can make those connections. And we need your input!

The link below will take you to the survey, which should take less than 10 minutes to complete, and your responses will remain anonymous. Your input is extremely important to us. Could you please take the time to respond? The survey will be open until close of business on October 4, 2019.

[To take the survey please click here.](#)



ACEs





Addressing the Gap of Social Care

- CBO Network
 - 210K in U.S.
 - CBO's deliver ~\$200B in services annually
 - Lack of coordination
 - Difficult funding
 - Insufficient access
 - Insufficient data

¹ Oliver Wyman, SeaChange, Alliance for Strong Families and Communities, American Public Human Services Association, National Imperative, Joining Forces to Strengthen Human Services in America - 2018.



SUD Provider Grant

CMS awards grants for Medicaid project to increase SUD treatment

© Sep 20, 2019 - 02:54 PM

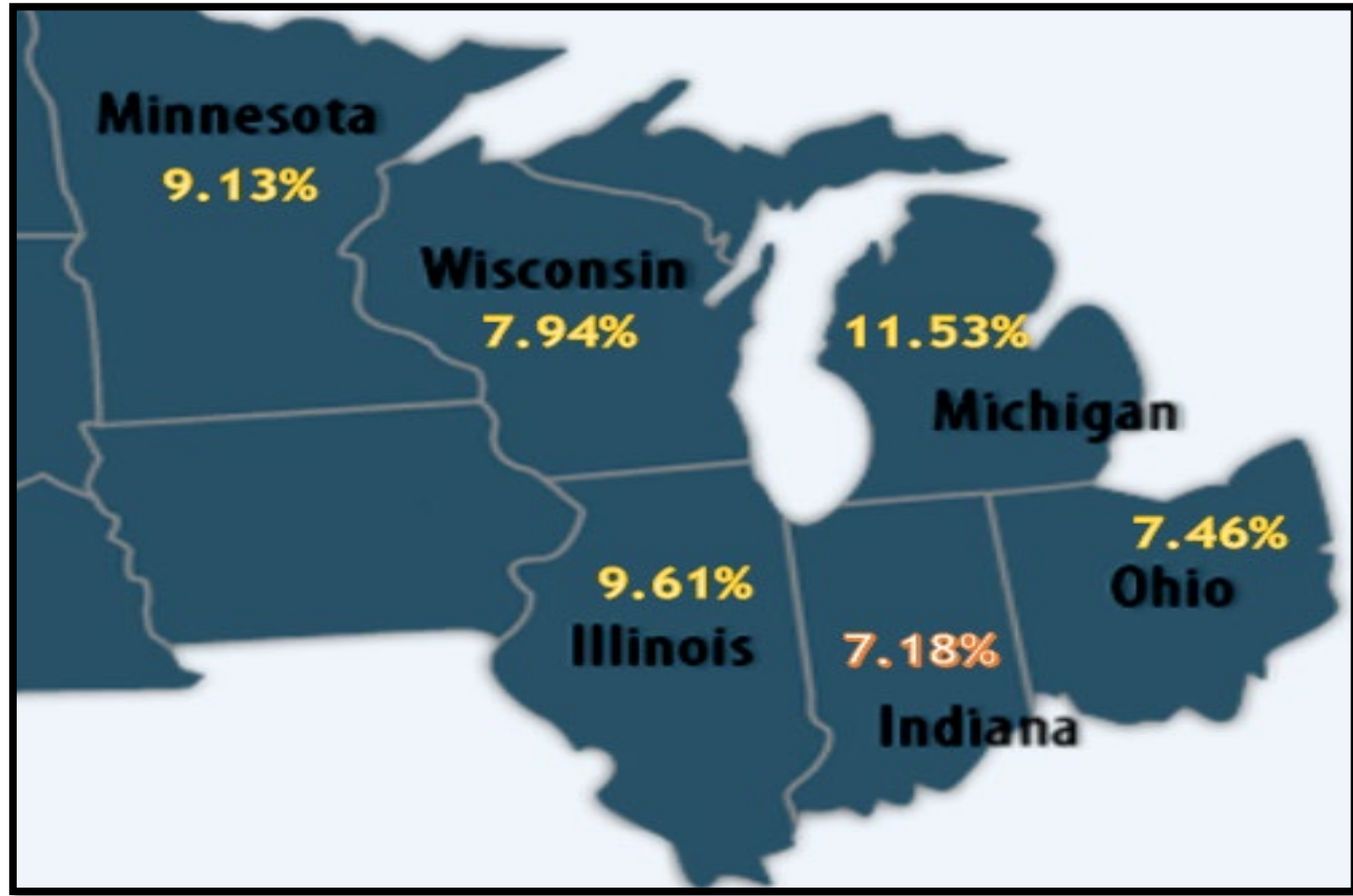




Caution: Horn Tooting Ahead



DFR: Best in Midwest, SNAP Error Rates





DFR: Gleaners Donation





DFR: DNR Give-Back Day





DFR: Mobile WIC Office





DFR: Mission, Vision, Values



Division of
Family Resources

DFR MISSION

To compassionately provide all Hoosiers accurate, timely and consistent services with dignity.

DFR VISION

To concentrate our efforts and resources on meeting Hoosiers needs today so they may focus on creating a better tomorrow.

DFR VALUES

- V** **VISIBILITY** Hoosiers know who we are, what we do and how to find us.
- I** **INITIATIVE** Continuously inspire creative solutions by utilizing data to take action and deliver results that make a difference.
- T** **TEAMWORK** Working together, without borders or boundaries, to collaborate and celebrate with individuals, communities and partners.
- A** **ACCOUNTABLE** Take ownership of our work every day while adhering to the highest standards.
- L** **LEADERSHIP** Inspire growth and innovate through learning and action.

#todaysneeds/bettertomorrow



DFR: Mission, Vision, Values

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Kudos/Accomplishments - Medicaid

- MAC: Had our first successful MAC meeting – expanding to 40+ members!
- OMPP/DFR Collaboration: DFR and OMPP leadership have been meeting regularly in executive leadership sessions. Working on improving pregnant women application processing!
- SMI waiver submitted: No states in the country have yet received an approved SMI waiver! We'll be among the first – targeting 1/1/20 implementation date.



Kudos/Accomplishments - Medicaid

- SUD Waiver Optimization Workgroup: Participation grown tremendously – barely fit in conference center. 50,000 served, 200M in expenditures! Focusing on transitions of care next!
- SUD Grant: Almost 3 million to increase SUD capacity! OMPP, DMHA, ISDH and contracts office/healthy opportunities partnership!



Leadership Examples

- Kathy Leonard – HCBS Rate Methodology work. She’s exemplified the “Excellence” in FSSA values. Leading across divisions, building consensus and displaying integrity at all times.
- Andrew Bean – LTSS Workgroup. Andrew has been a tremendous project manager and has demonstrated “inclusion” aligned with our FSSA values.
- Laura Dodson – new EA to Medicaid Director. She’s very mission driven and has demonstrated purpose and resilience!



Kudos/Accomplishments – DMHA

- New: Division of Recovery Support Services
- Recovery Café Indy
- Record breaking INARMS
- Peer recovery coaches reimbursement
- State Opiate Response Grant year 2 - \$18M
- Lyft/2-1-1 partnership providing > 100K rides/month for treatment



Leadership Examples

- Terry Cook: Looks to help, support, and educate as needed without complaint. He has shown exemplary humility, leadership, and courage.
- Eric Heeter: Maintains his positive attitude and humble character as well and has been the glue that has held his team together without much recognition.



Kudos/Accomplishments: OECOSL

On My Way Pre-K

- To date over 3,300 children have been enrolled state wide
- 57 counties have had children enrolled and are beginning in their Pre-k journey
- Since 2014 OECOSL has enrolled 875 OMW providers who are ready to support young learners
- OECOSL has issued \$3.79M in capacity building grants to 43 applicants in 37 different counties serving 99 different locations in three rounds of funding requests.
 - The fourth RFF was released 9/23/19. Grant Applications and information can be found on the website: <https://www.in.gov/fssa/carefinder/5465.htm>. Grant applications are due by Friday, November 8, 2019 at 5:00pm EST.



Kudos/Accomplishments: Aging

- Case management system
- A&D waiver rate methodology
- APS team training
- Dementia Advisory Group



Kudos/Accomplishments: DDB

- Remember the person behind the case
- Remember that we serve ALL citizens, not just those who have applied for benefits
- Pride in our own work
- Pride in our agency/team



Jay
Chaudhary,
JD
DMHA
Director





Rachel
Halleck
DMHA
Deputy
Director and
Chief of Staff





Gateway to Work

- Federal litigation 9.23.19
- Multiple elements of HIP
- Ongoing program, continuing services



2019-20 Agency Priorities

- ① DDRS HCBS Waiver Redesign
- ② IEDSS completion
- ③ LTSS planning
- ④ NEMT stabilization and growth
- ⑤ Medicaid rate matrix
- ⑥ SMI waiver
- ⑦ HIP Bridge
- ⑧ Preschool Development Grant



2019-20 Agency Priorities

DDRS HCBS Waiver Redesign

Increase Person-Centered Planning

Improve Coordination of Care

Increase Community Engagement

Enhance Member Experience

Maintain Qualified Providers

Comply with HCBS Rule

Promote Efficiency



2019-20 Agency Priorities

DDRS HCBS Waiver Redesign

Increase Person-Centered Planning

Improve Coordination of Care

Increase Community Engagement

Enhance Member Experience

Maintain Qualified Providers

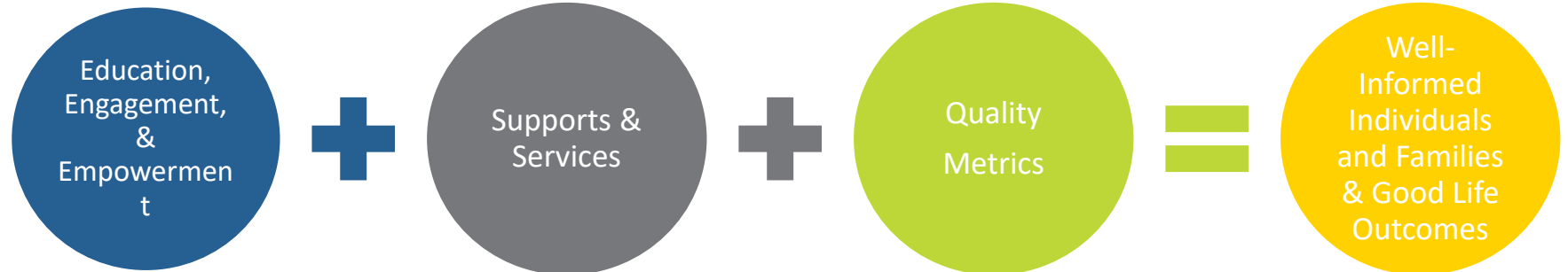
Comply with HCBS Rule

Promote Efficiency



2019-20 Agency Priorities

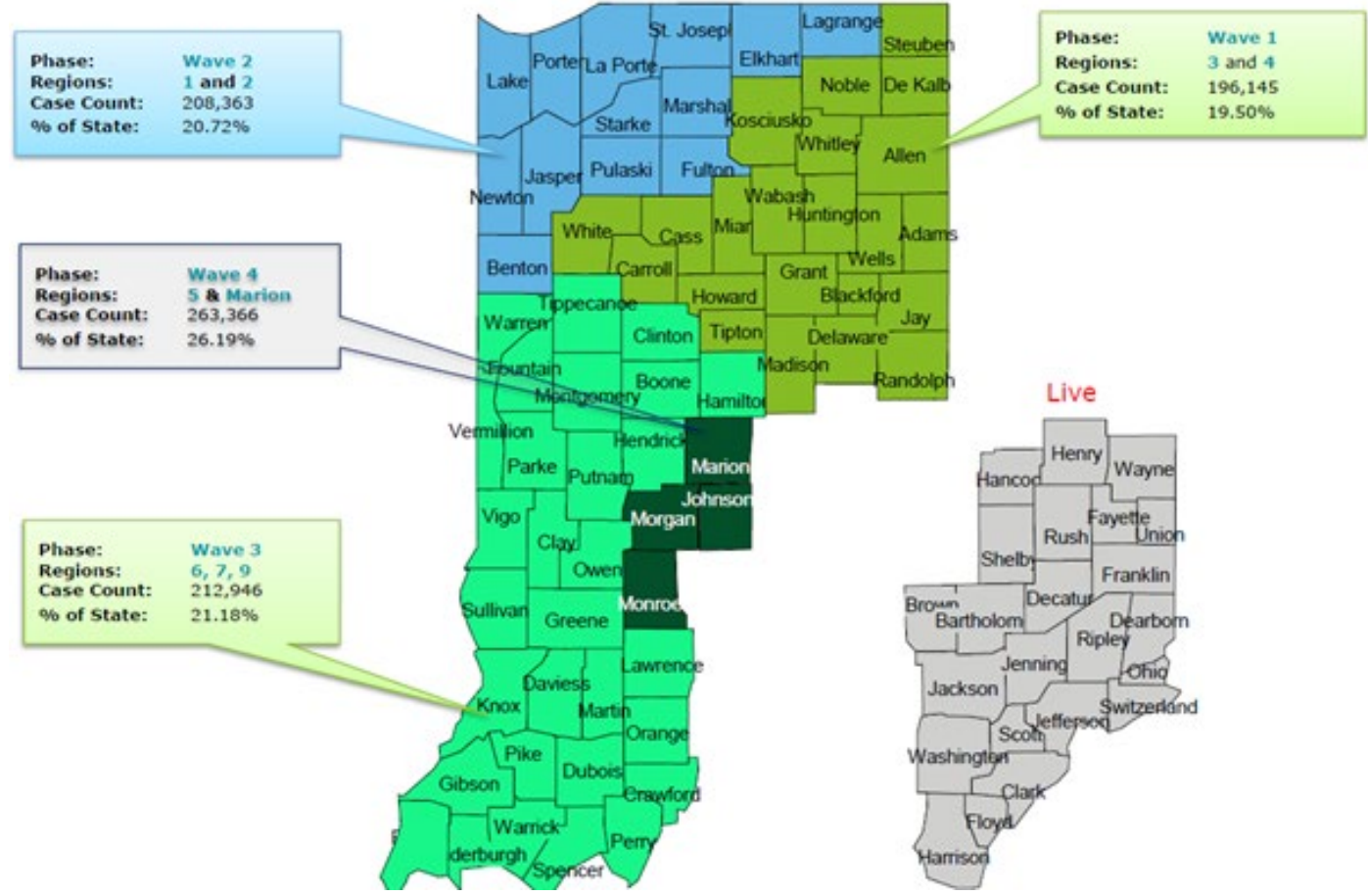
DDRS HCBS Waiver Redesign & Living Well





2019-20 Agency Priorities

IEDSS completion

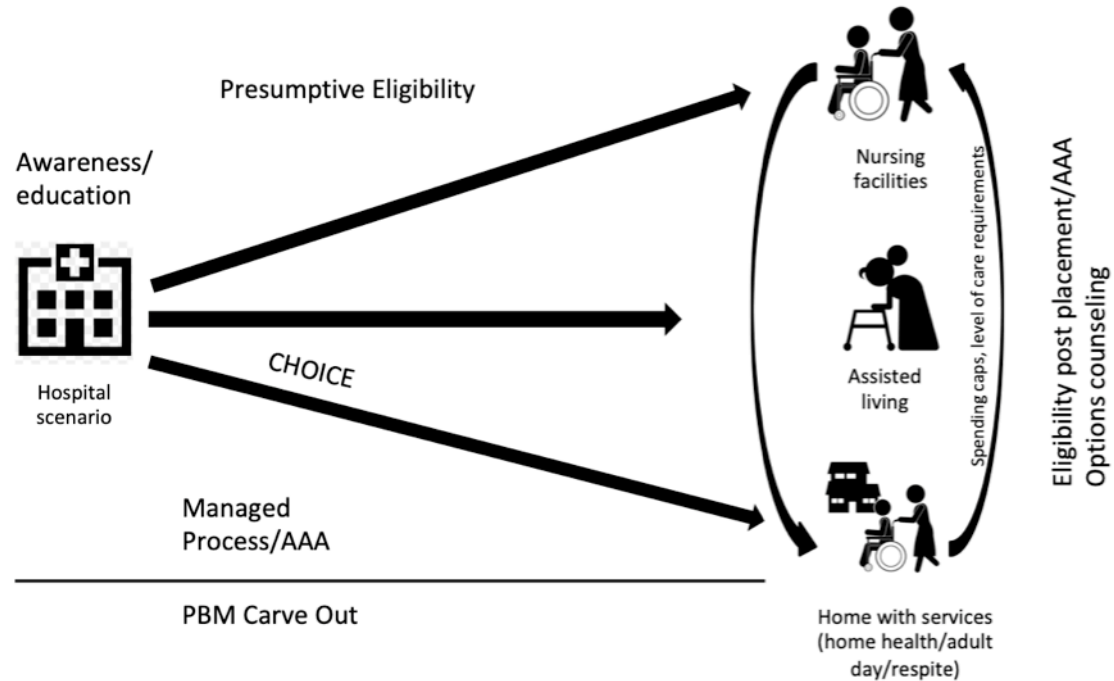




2019-20 Agency Priorities

LTSS planning

Future State – Aging in Community
Goal: Members transition to services in 48 hours.





2019-20 Agency Priorities

NEMT stabilization and growth

Q1	Q2	2019
1,301	1,146	Avg. # calls for ride requests/day
2,781	2,502	Avg. # all calls handled/day
11,670	11,249	Avg. # members served/month
53,321	50,777	Avg. # rides/month
85%	88.64%	Need met
3.14%	3.00%	Non-compliant send-backs
1,633	1,651	Active drivers
1,539	1,518	Active vehicles
168,006	167,150	Claims received
165,946	165,742	Claims paid
37.6%	39.37%	Ridership are high risk members
25.11%	21.61%	Provider no-show rate
74.89%	78.39%	Member no-show rate
93%	93%	Positive approval rating
7%	7%	Negative approval rating
94.13%	96.07%	Call center satisfaction rate



2019-20 Agency Priorities

SMI waiver

• Current State

- Current §1115 waiver permits reimbursement for stays in an IMD for substance use disorder
- Managed care entities (MCEs) may also elect to reimburse for short-term stays for serious mental illness (SMI)
- FSSA reimbursing for IMD stays for presumptively eligible enrollees with 100% state funds
- Reimbursement not available for fee-for-service enrollees between the ages of 21-64

• Proposed Future State

- Reimbursement for short-term acute inpatient stays in an IMD for all Medicaid enrollees between 21-64
- Short term stays are defined as 15 days or less
 - Based on medical necessity
 - Not a “hard stop”
 - Federal requirement for 30 day statewide average length of stay
- Ensures comparable access to IMDs for enrollees regardless of managed care or fee-for-service enrollment



Waiver Goals

Reduced utilization & length of stay in emergency departments

Reduced preventable readmissions

Improved availability of crisis stabilization services

Improved access to community-based services

Improved care coordination



2019-20 Agency Priorities

HIP Bridge

- Gateway to Work will increase employment and education for HIP members
 - HIP members will have increased income and will need to transition to commercial coverage
 - HIP members face cost related barriers when transitioning to commercial coverage
- The HIP Workforce Bridge seeks to address the cost barrier and reduce the benefit cliff for HIP members
 - Supports member successful transition to commercial coverage reducing churn back to Medicaid
 - Promotes sustained economic mobility over the long-term



2019-20 Agency Priorities

HIP Bridge

- Available to all HIP enrolled members who have an increase in income and are no longer eligible
- \$1,000 to cover health care and health insurance costs during transition from HIP to commercial insurance
 - Covers premiums, prescriptions, and HIP covered services while waiting for coverage to kick-in
 - Covers copayments, coinsurance and deductible costs for HIP covered services following commercial coverage enrollment
 - Member directs account spend to premium payment or services most essential to their health
- Account is available for up to 12-months following HIP disenrollment or until the account balance is \$0



2019-20 Agency Priorities

Preschool Development Grant

Strategic plan has been completed and submitted to the Administration for Children and Families

Thank you to the large stakeholder group that helped to support the writing of the grant and to the over 1,000 families who provided input through the parent survey.

Updates regarding PDG can be found at:

<http://brighterfuturesindiana.org/indiana-preschool-development-grant-pdg/>




Next Round of Preschool Development Grant

The grant has been released and can be found at:

<https://ami.grantsolutions.gov/HHS-2019-ACF-OCC-TP-1567>

OECOSL in conjunction with stakeholders will be writing a new application to build upon the strategic plan that has been developed

Applications are due November 5th



Indiana Efforts to Address Perinatal Substance Use

October 3, 2019



INDIANA
PERINATAL
QUALITY
IMPROVEMENT
COLLABORATIVE
[IPQIC]

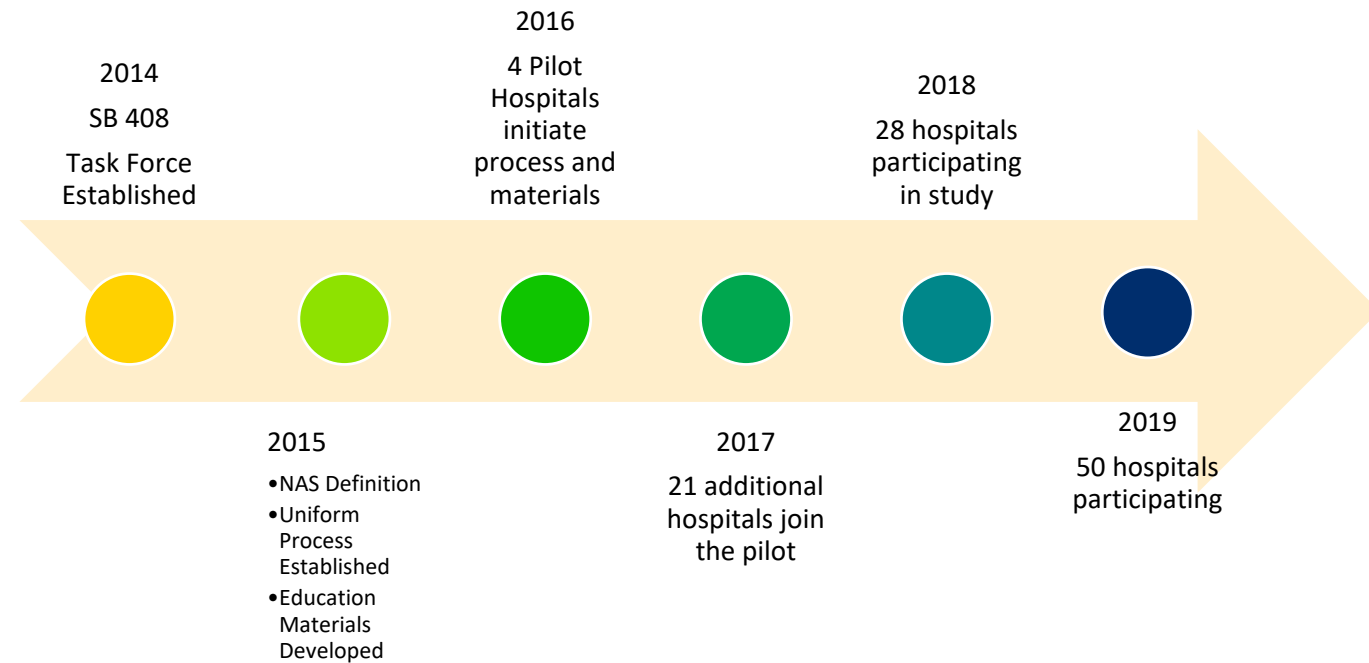
Indiana
Legislation to
Address Drug
Exposed
Newborns

The 2014 Indiana General Assembly charged
ISDH with:

- The development of the appropriate standard clinical definition of Neonatal Abstinence Syndrome (NAS)
- The development of a uniform process of identifying NAS
- Determine the estimated time and resources needed to educate hospital personnel in implementing an appropriate and uniform process for identifying NAS
- The identification of standard reporting and trending NAS diagnoses and related data including the identification of whether payment methodologies for identifying NAS and the reporting of NAS data are currently available or needed
- Permissive language for the ISDH to conduct hospital pilots to determine the prevalence of perinatal drug exposure



Perinatal Substance Use History in Indiana



NAS Diagnosis Criteria

Symptomatic (tremor/jitteriness, difficult to console, poor feeding, or abnormal sleep); and

Have one of the following:

- *A positive toxicology test, or*
- *A maternal history with a positive verbal screen or toxicology test.*



Recommended Perinatal Action

Mother's status	Level of Risk for infant	Suggested Action
Negative verbal and toxicology screens	Newborn with no identifiable risk	No testing recommended at birth
Positive verbal screen and/or positive toxicology screen	Newborn at risk for NAS	<ul style="list-style-type: none">• Perform urine and cord tissue toxicology screening at birth• Perform Modified Finnegan scoring• Evaluate maternal support resources
No known verbal or toxicology screen during pregnancy	Newborns with unknown risk	Observe infant for signs <ul style="list-style-type: none">• If signs: Send cord for testing and Perform Modified Finnegan scoring

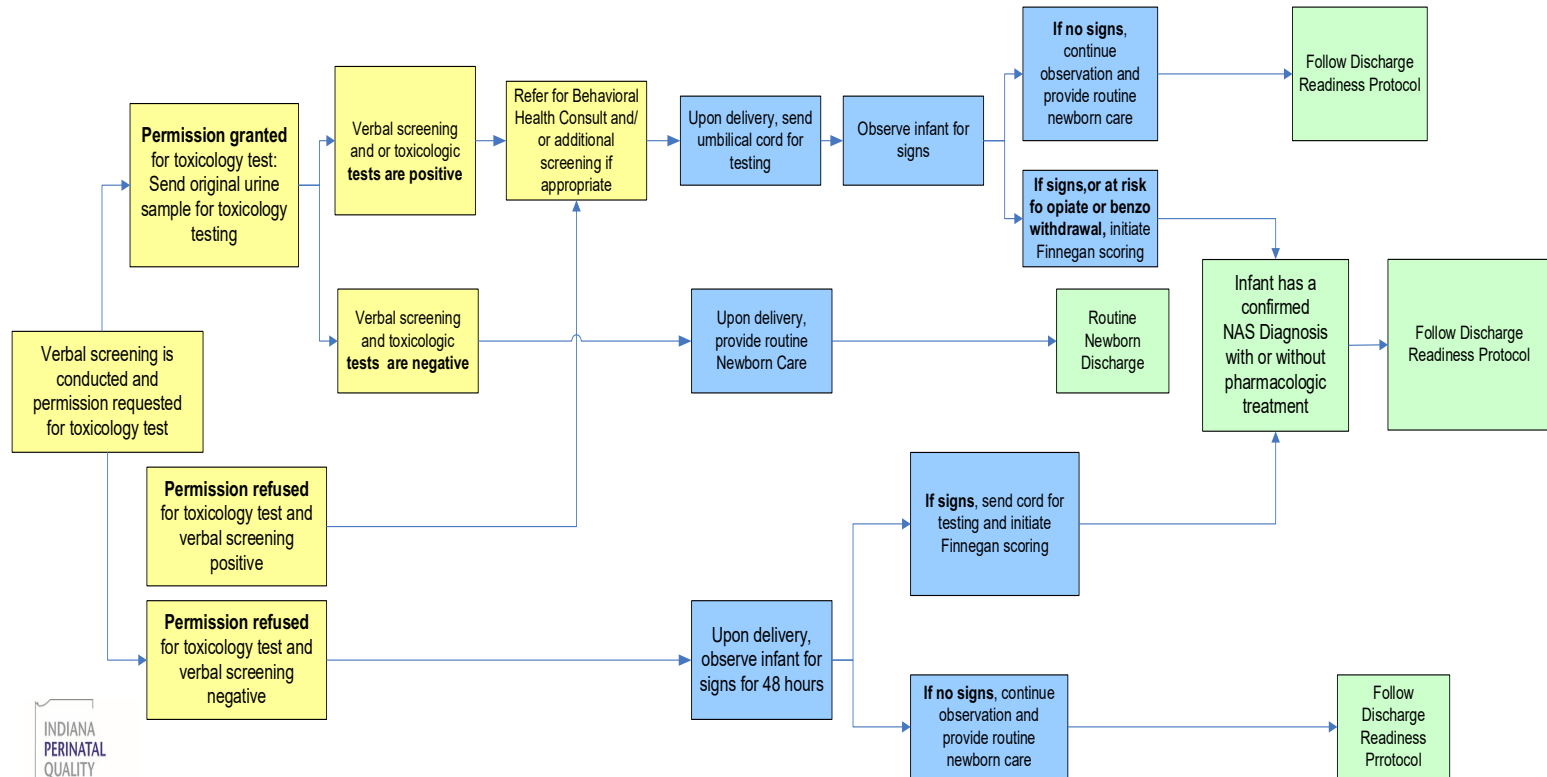


Neonatal Abstinence Syndrome and In-Utero Drug Exposure Algorithm

UNIVERSAL MATERNAL TESTING: verbal screening and toxicology testing for maternal use of illicit drugs, opiates or alcohol at the first prenatal visit and again at presentation for delivery.

INFANT SCREENING AND TESTING: all newborns will have umbilical cord samples saved for two weeks

DISCHARGE





Perinatal Substance Use Practice Bundle Modules

Non-Pharmacologic Care

Pharmacologic Care

Transfer

Discharge Planning for Women

Discharge Planning for Infant

<https://www.in.gov/laboroflove/208.htm>



Universal: the discharge plan for all infants who have been prenatally exposed should include the identified supports;

Targeted: the discharge plan for infants diagnosed with NAS with no other presenting concerns includes everything in the universal component and adds additional recommendations for services for infants and must be followed by the Perinatal Center Developmental Follow-up program.

High Risk: These are infants with an NAS diagnosis who will need sub-specialty care. The discharge plan for these infants includes all resources in universal and targeted discharge recommendations.



Issues to be Addressed

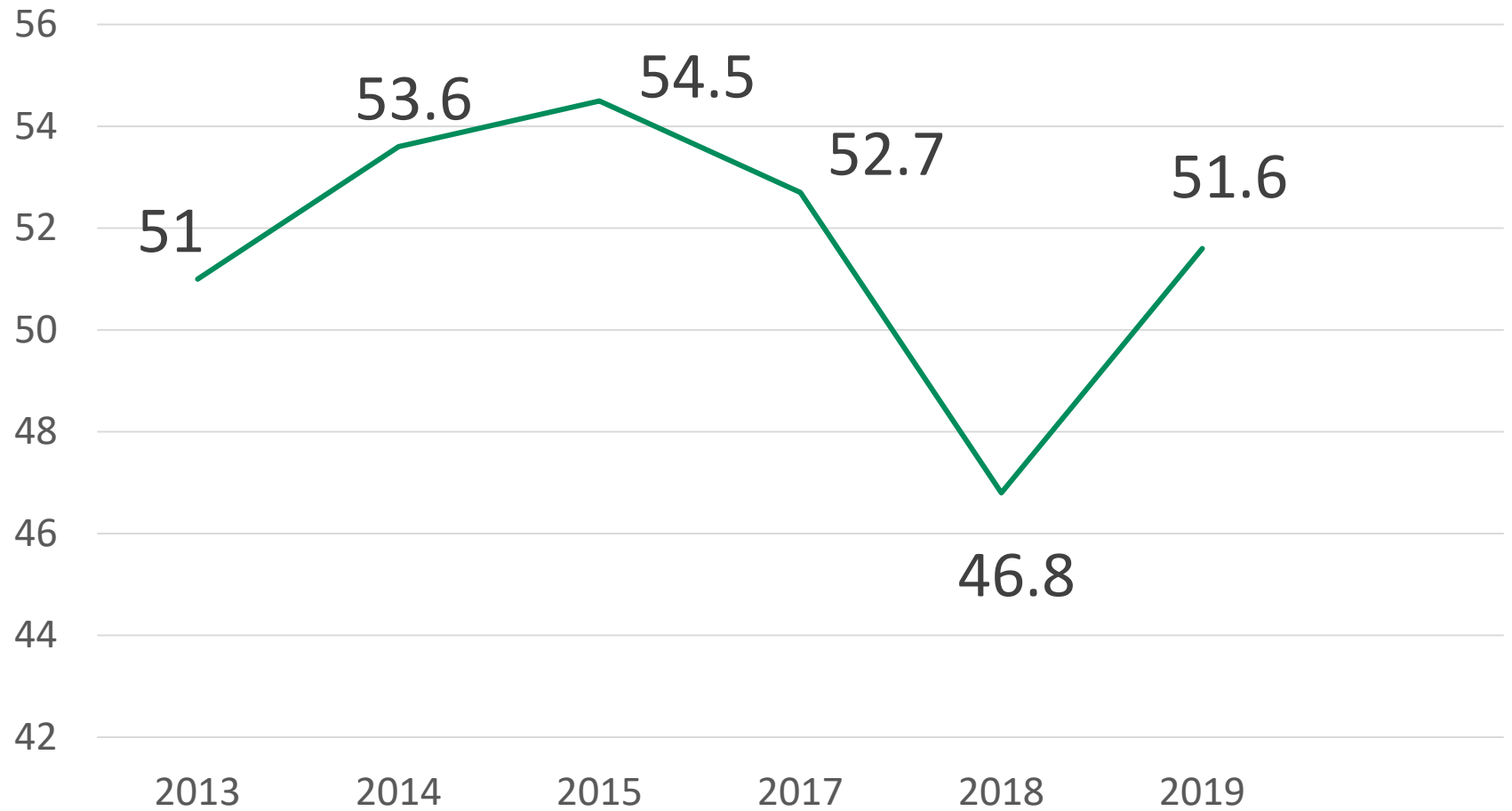
- Smoking cessation;
- Inpatient rehabilitation;
- Evaluation by mental health or addiction specialist;
- Intensive outpatient program;
- Counseling;
- Medication Assisted Treatment (MAT) provider;
- Community support group meetings;
- Recovery Coach;
- Relapse prevention plan;
- Home health;
- Parenting classes;
- Transportation assistance;
- Housing assistance;
- Lactation assistance; and
- Legal aid.



The results are in!
2019 FSSA employee engagement
survey



Percentage of employees taking survey



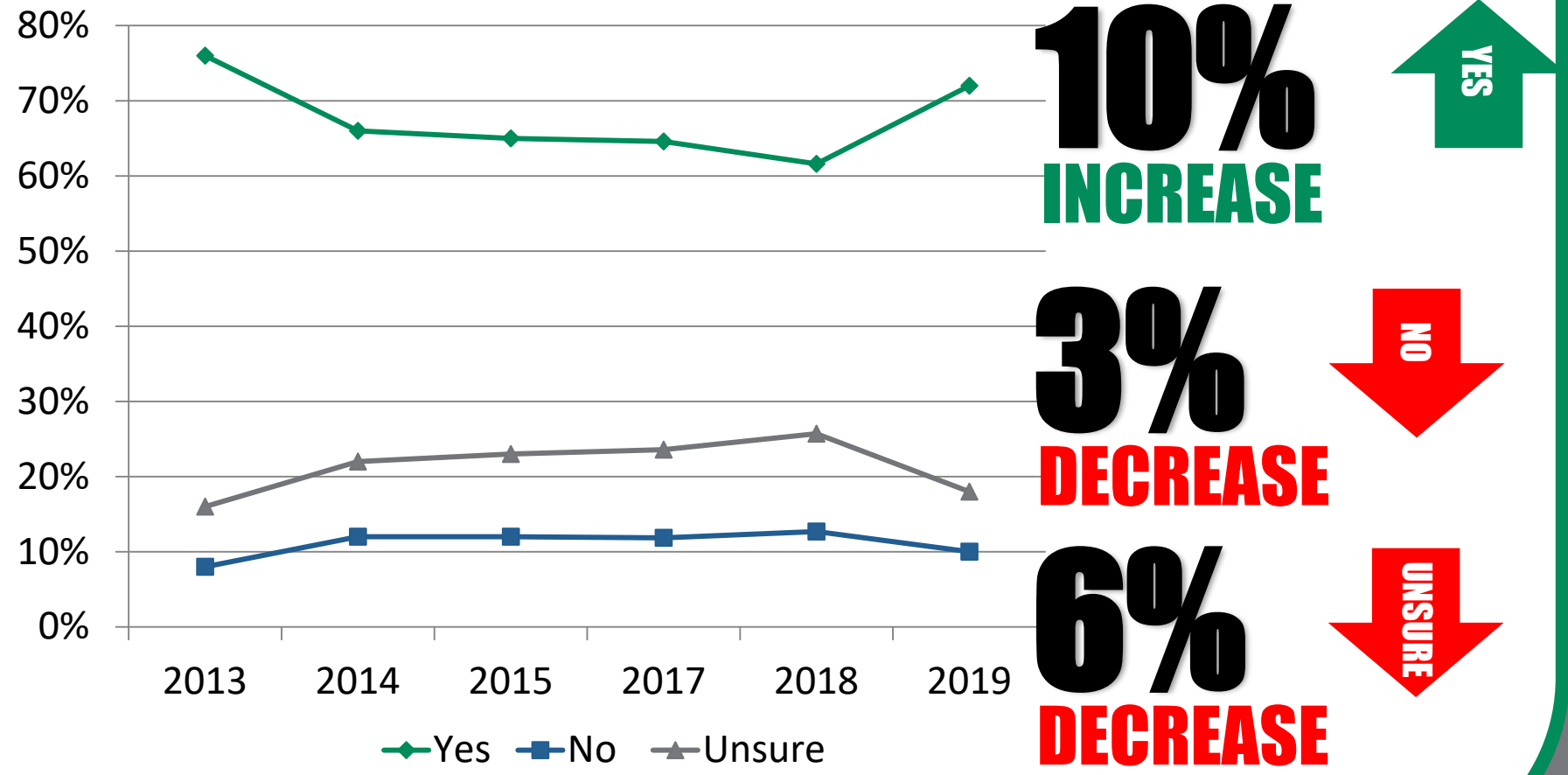


Survey Questions

- ▶ Do you understand the strategic direction in which FSSA is headed?
- ▶ Do you understand your role in helping FSSA meet its strategic goals?
- ▶ Do you understand what results you are being measured on individually?
- ▶ Are you confident FSSA can achieve its goals?
- ▶ Have you considered leaving FSSA in the past year for another job?

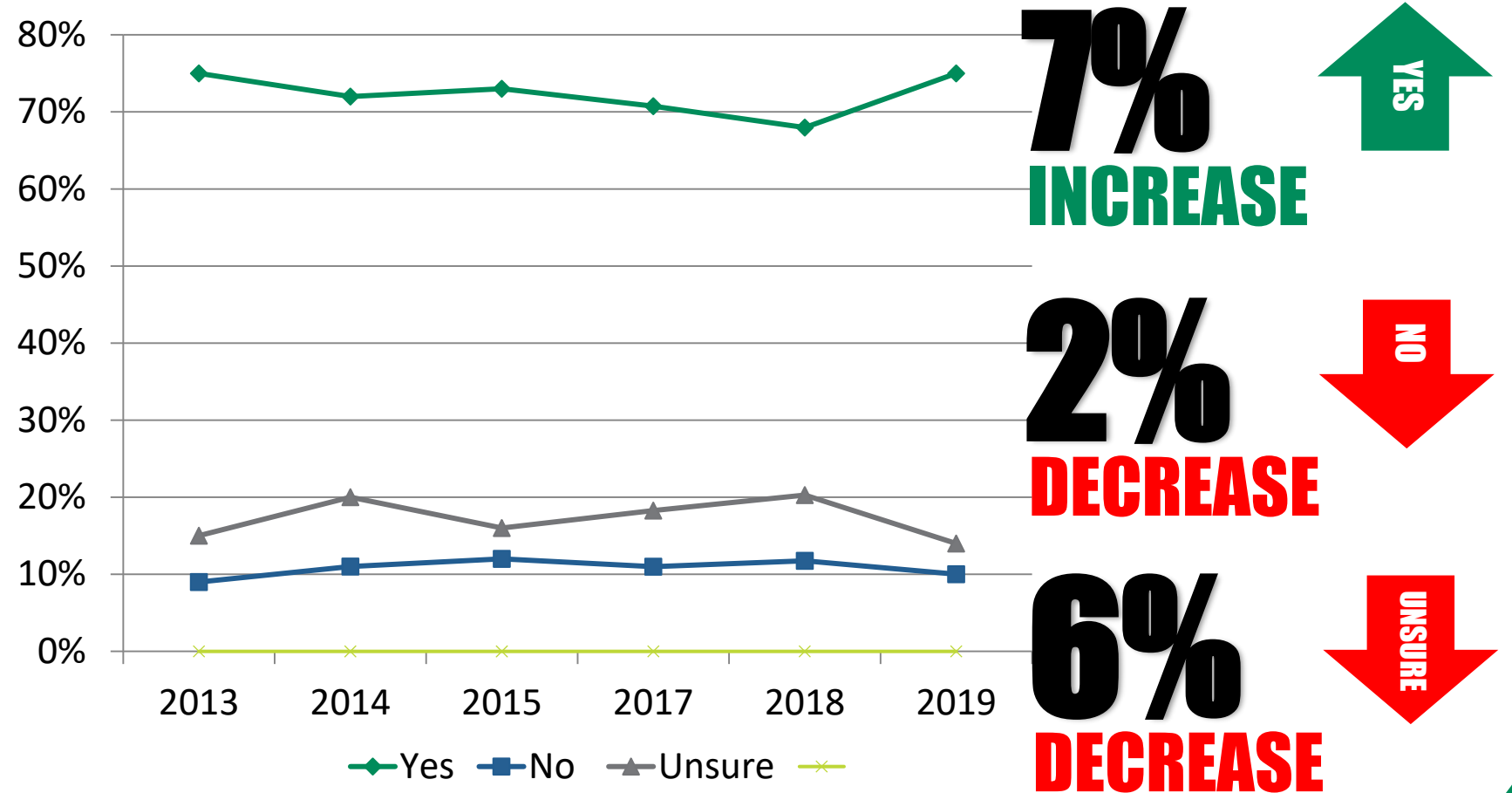


1. Do you understand the strategic direction in which FSSA is headed?



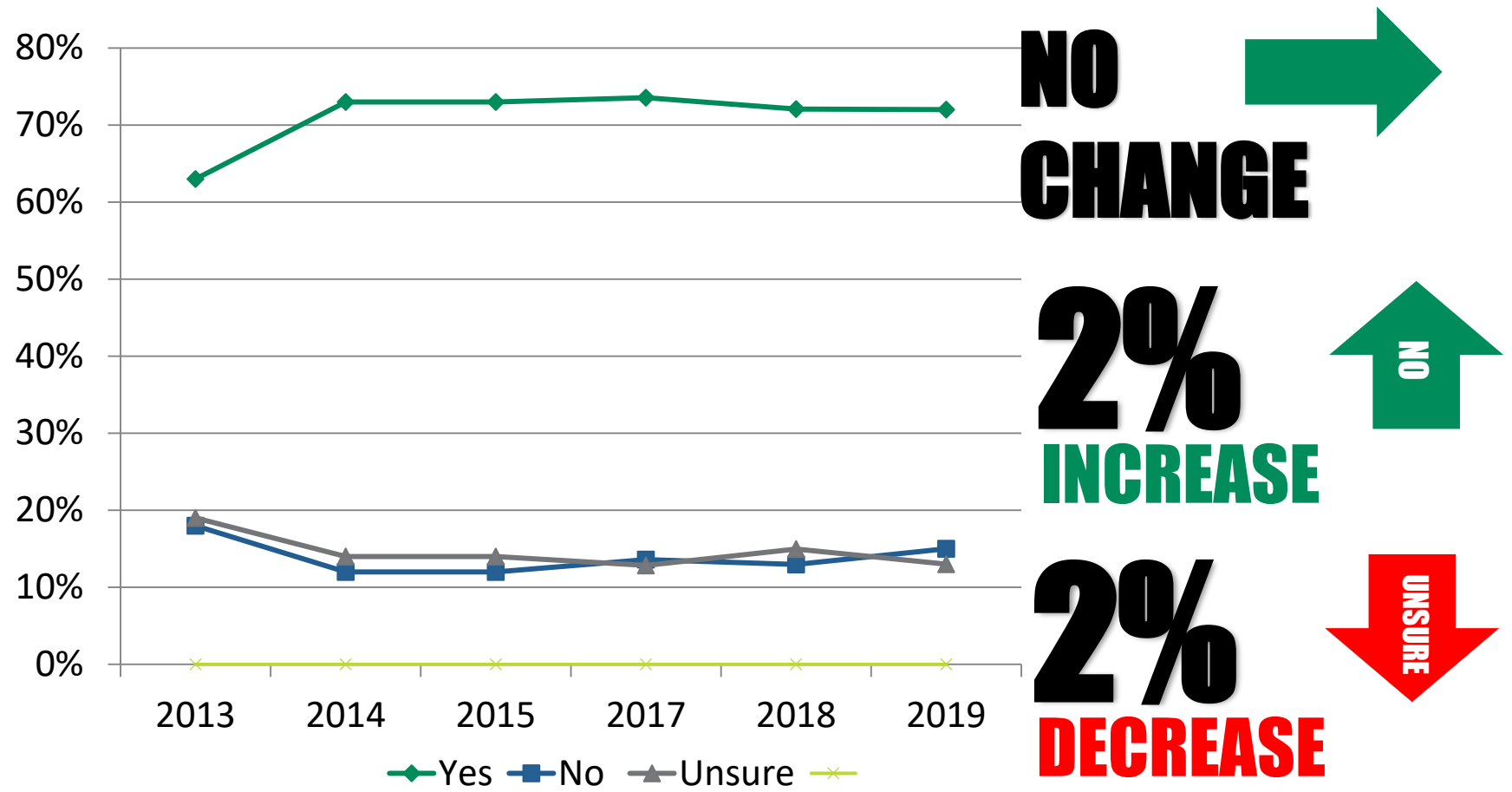


2. Do you understand your role in helping FSSA meet its strategic goals?



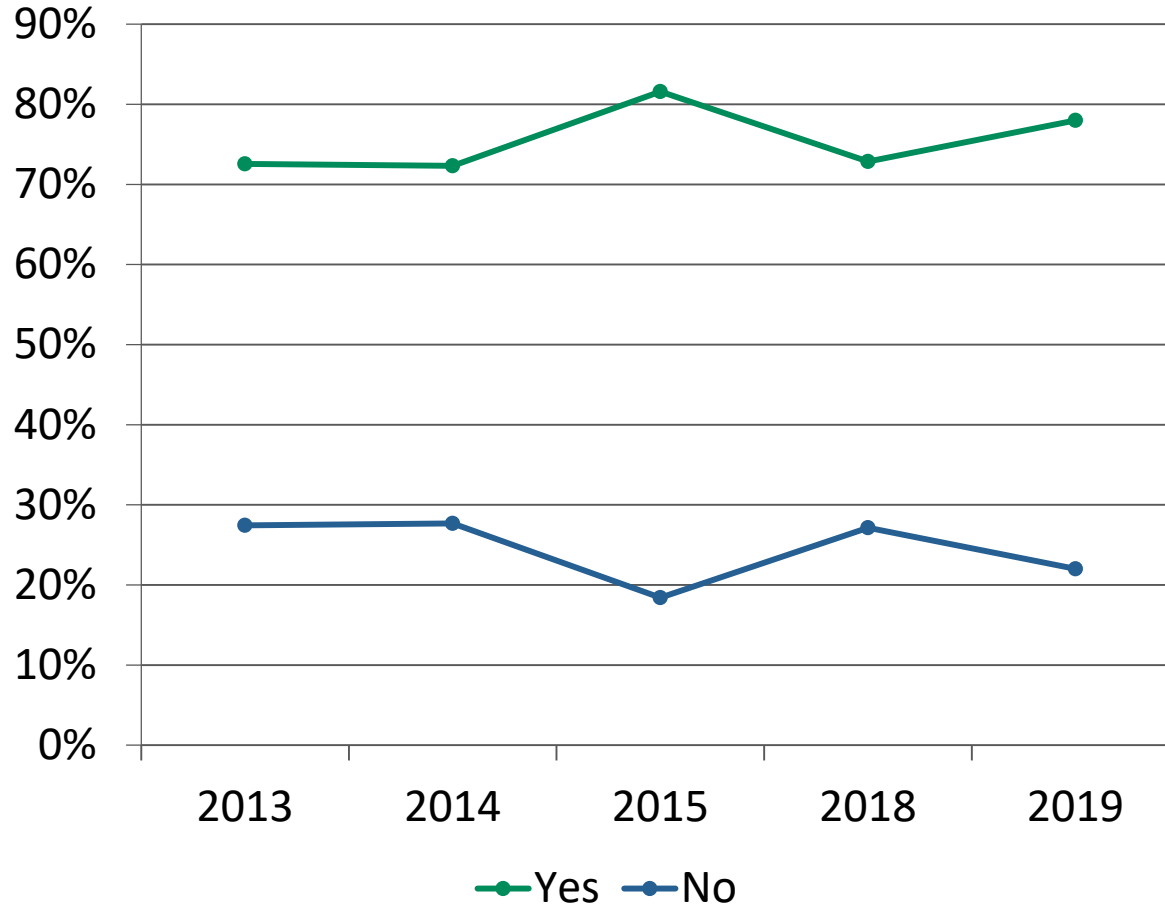


3. Do you understand what results you are being measured on individually?





4. Are you confident FSSA can achieve its goals?



5%
INCREASE



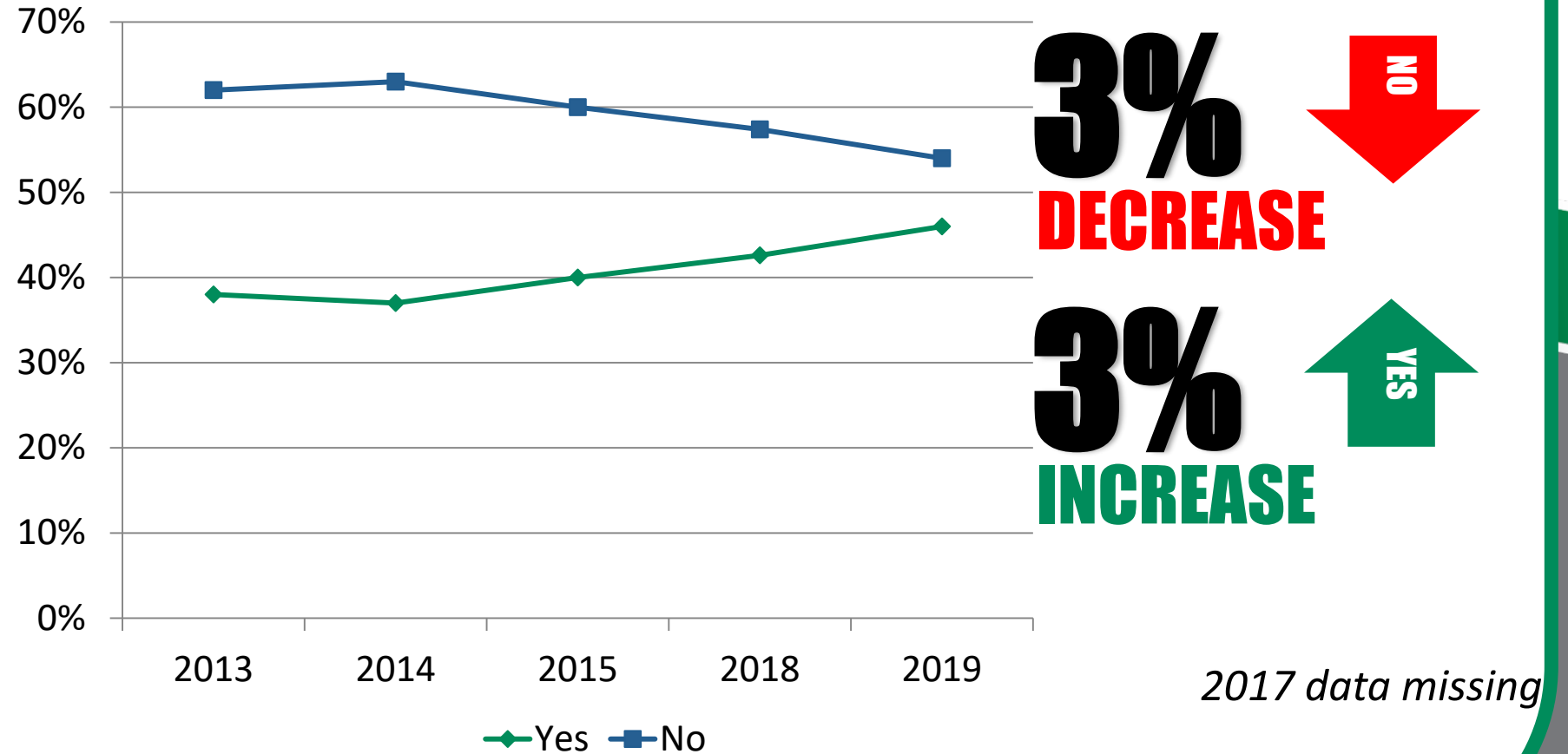
5%
DECREASE



2017 data missing



5. Have you considered leaving FSSA in the past year for another job?

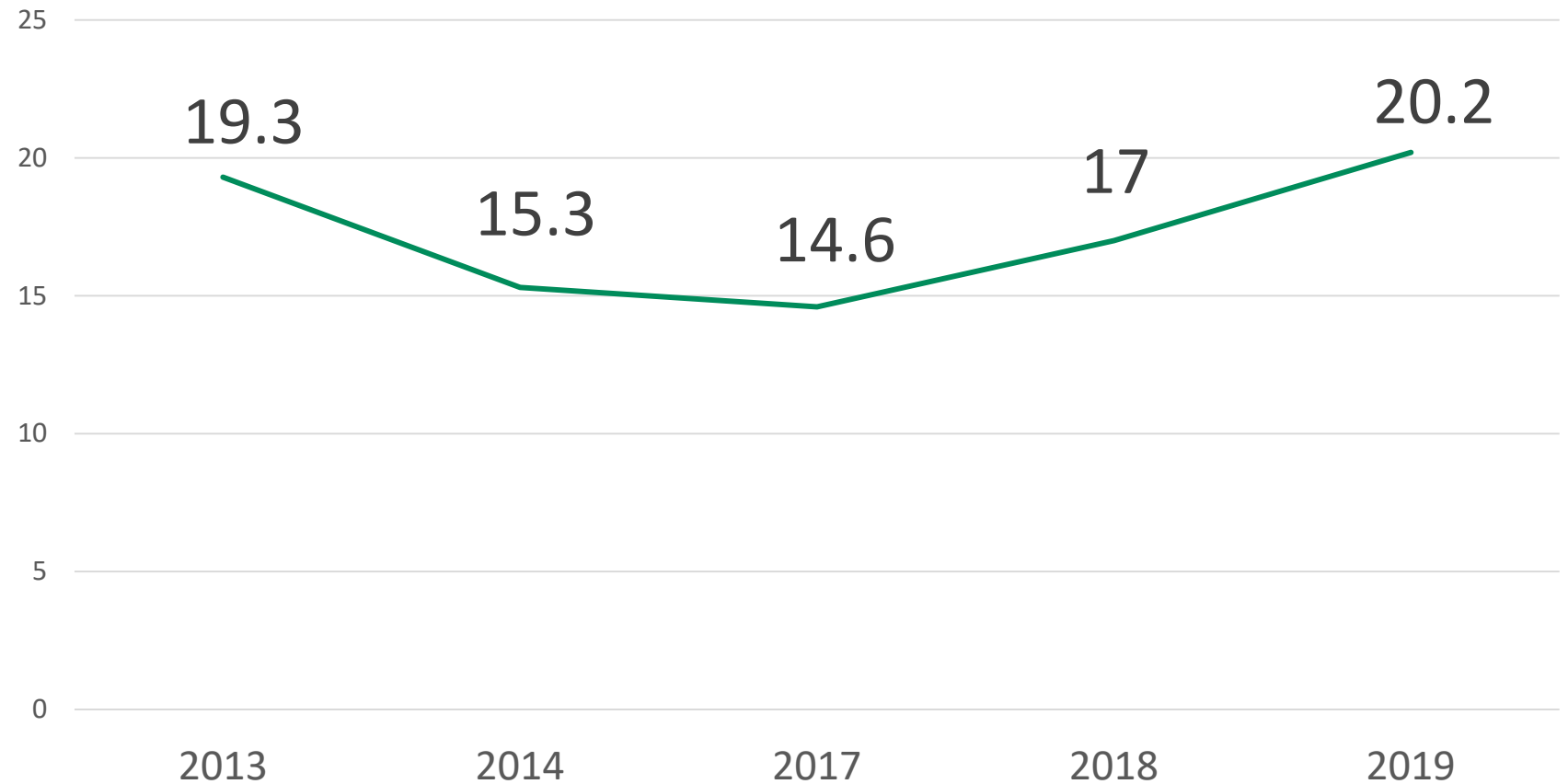




Open-ended comments

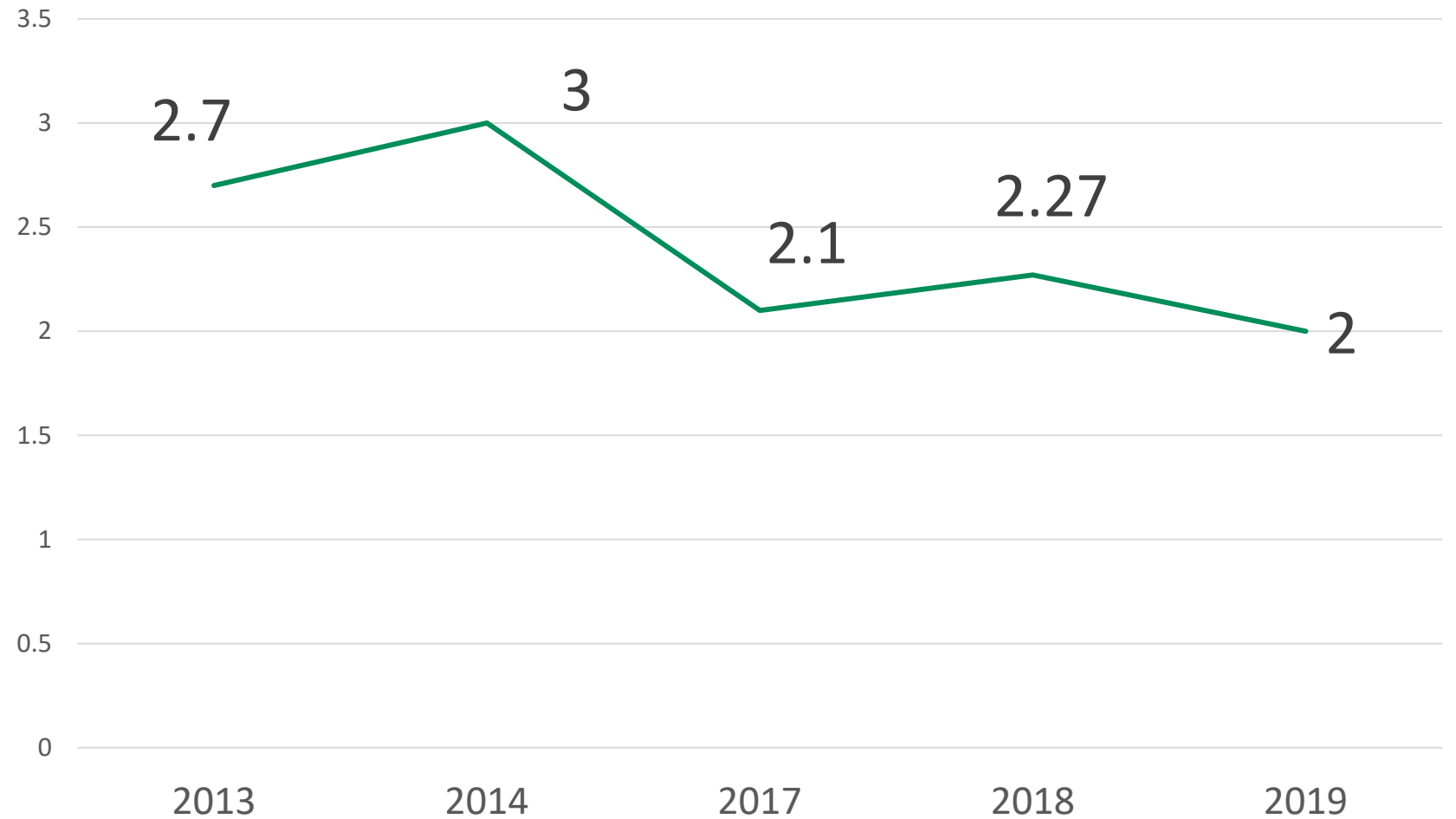


Percentage of survey takers making comments



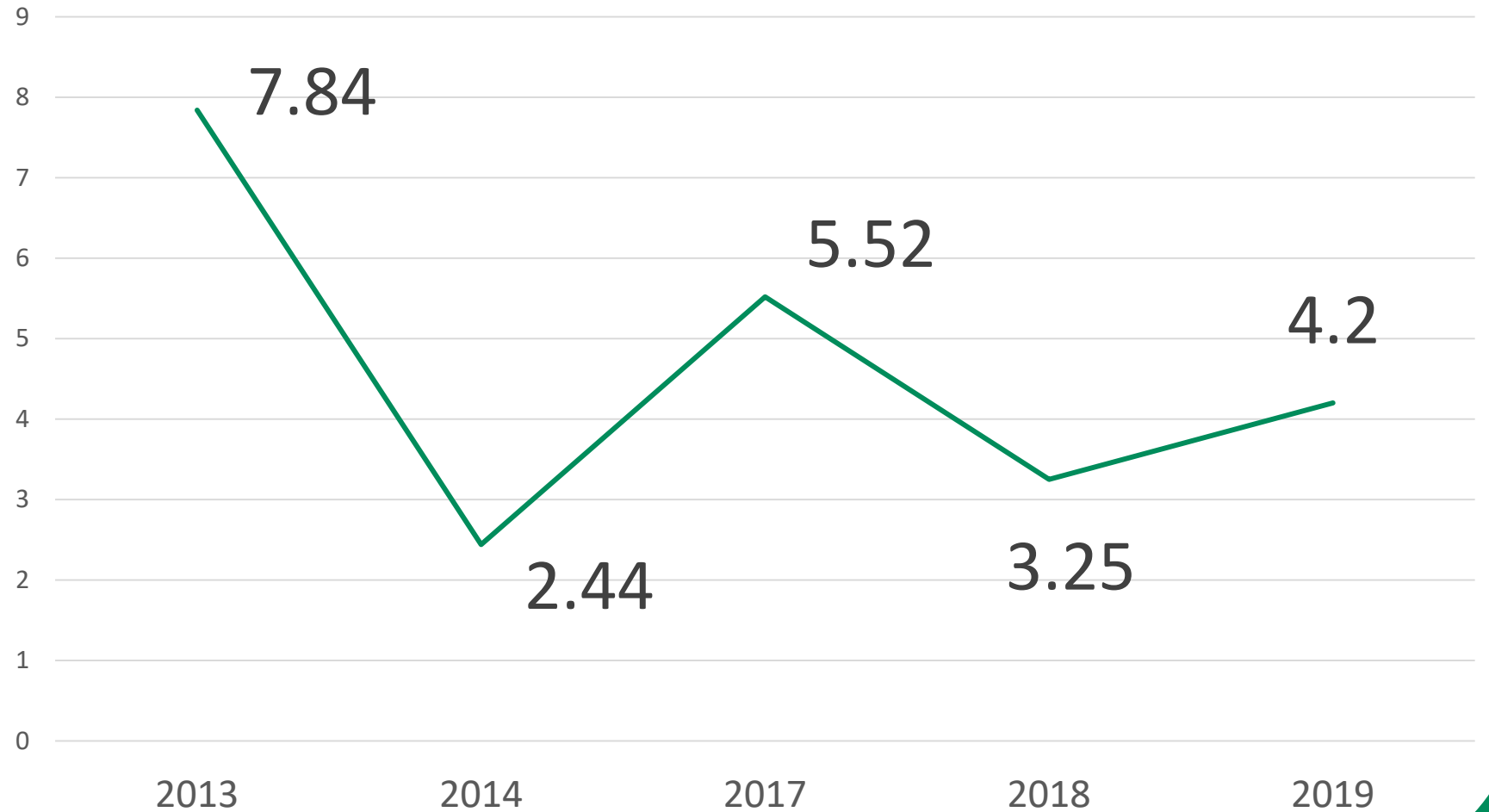


Work too hard/too much



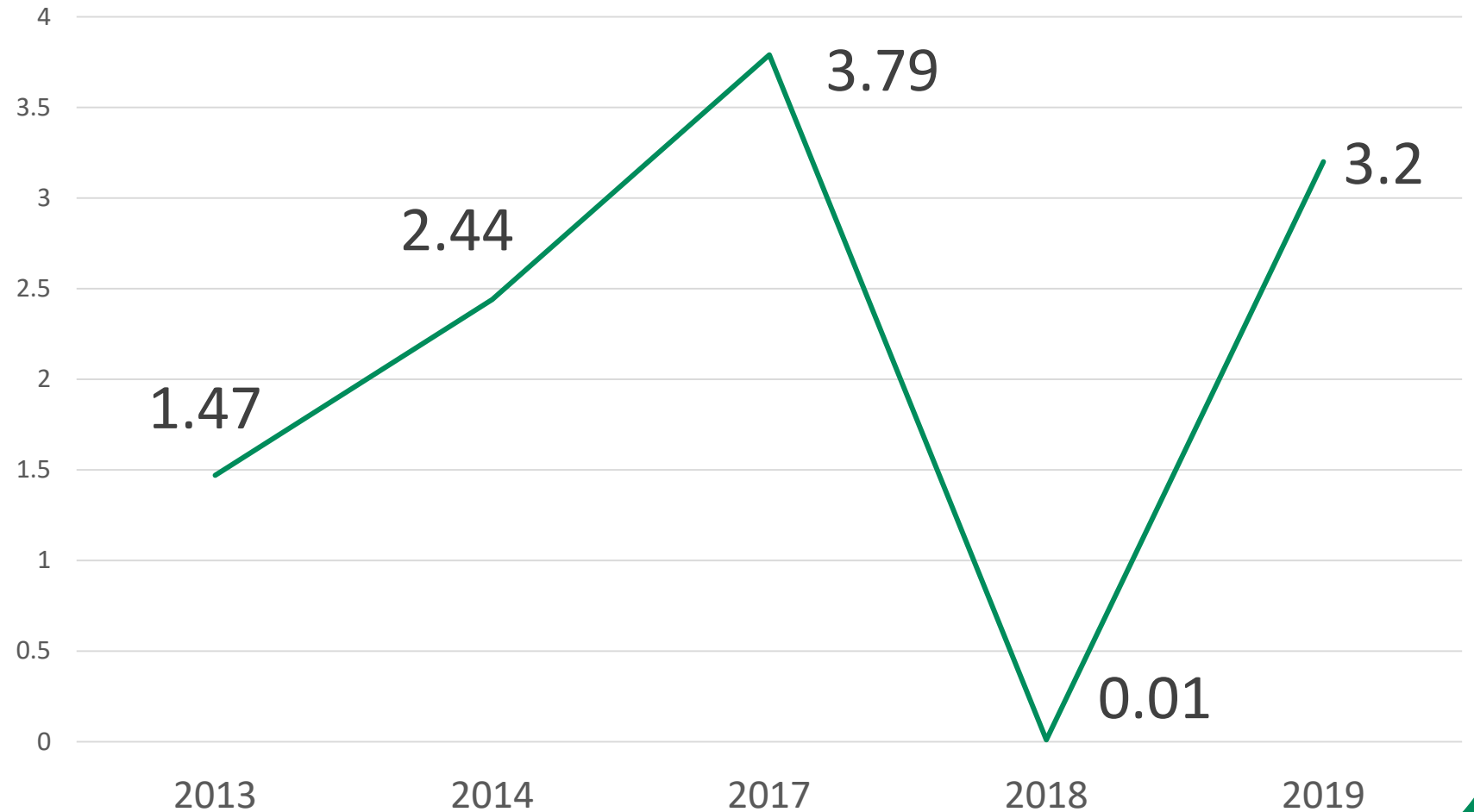


Lack of appreciation/respect



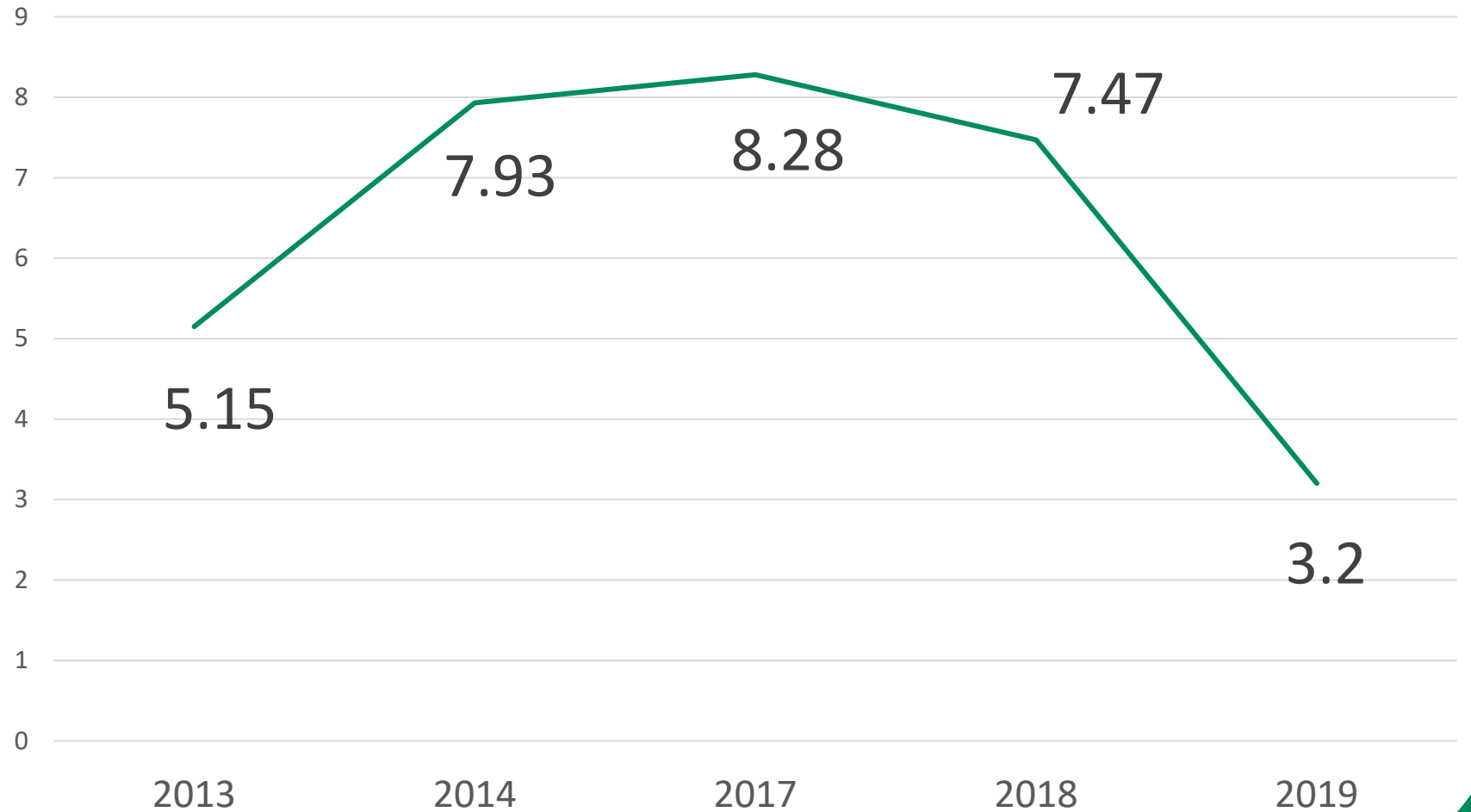


Lack of recognition and/or opportunity for promotion



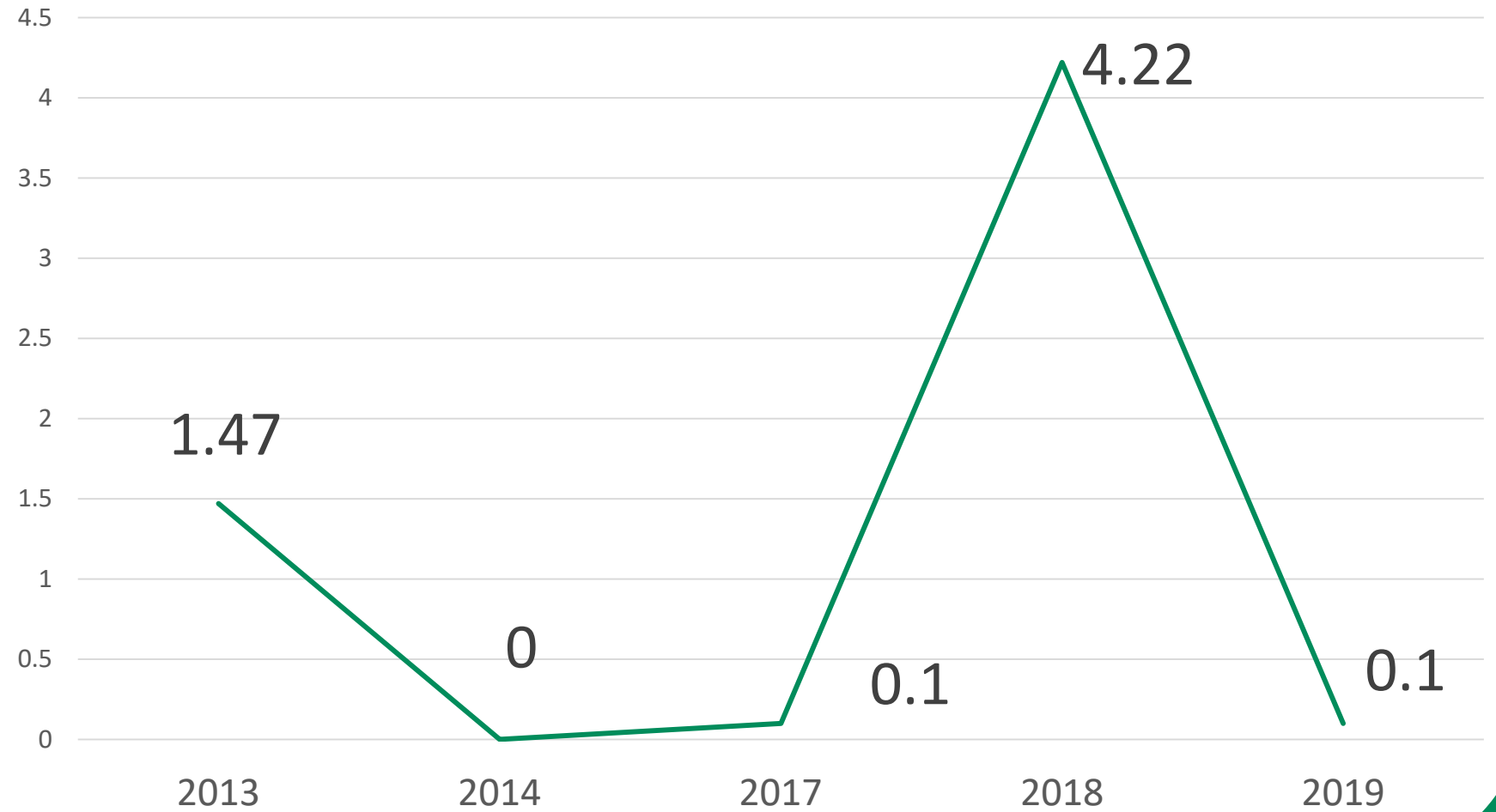


Unclear strategic plan/agency goals



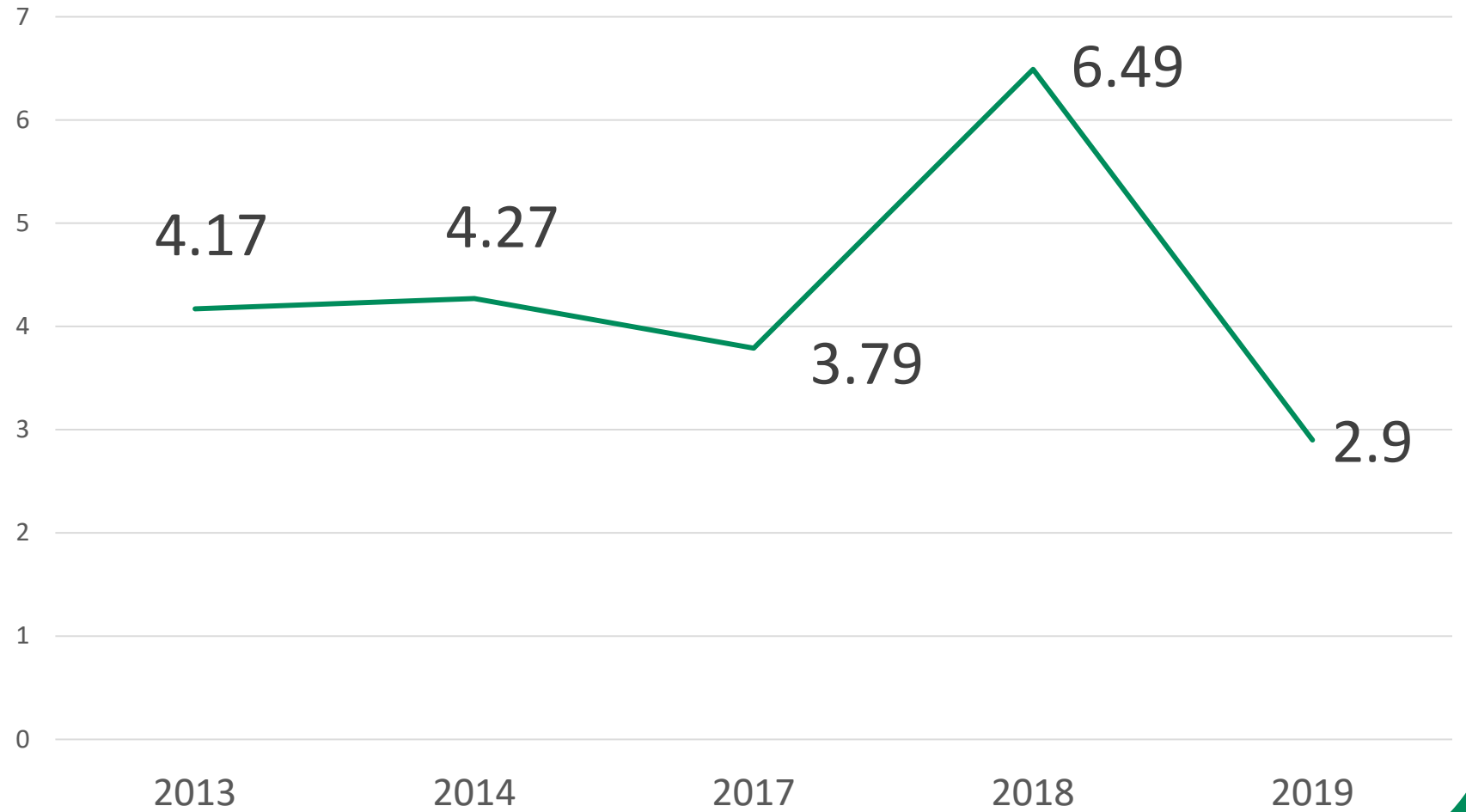


Micromanagement



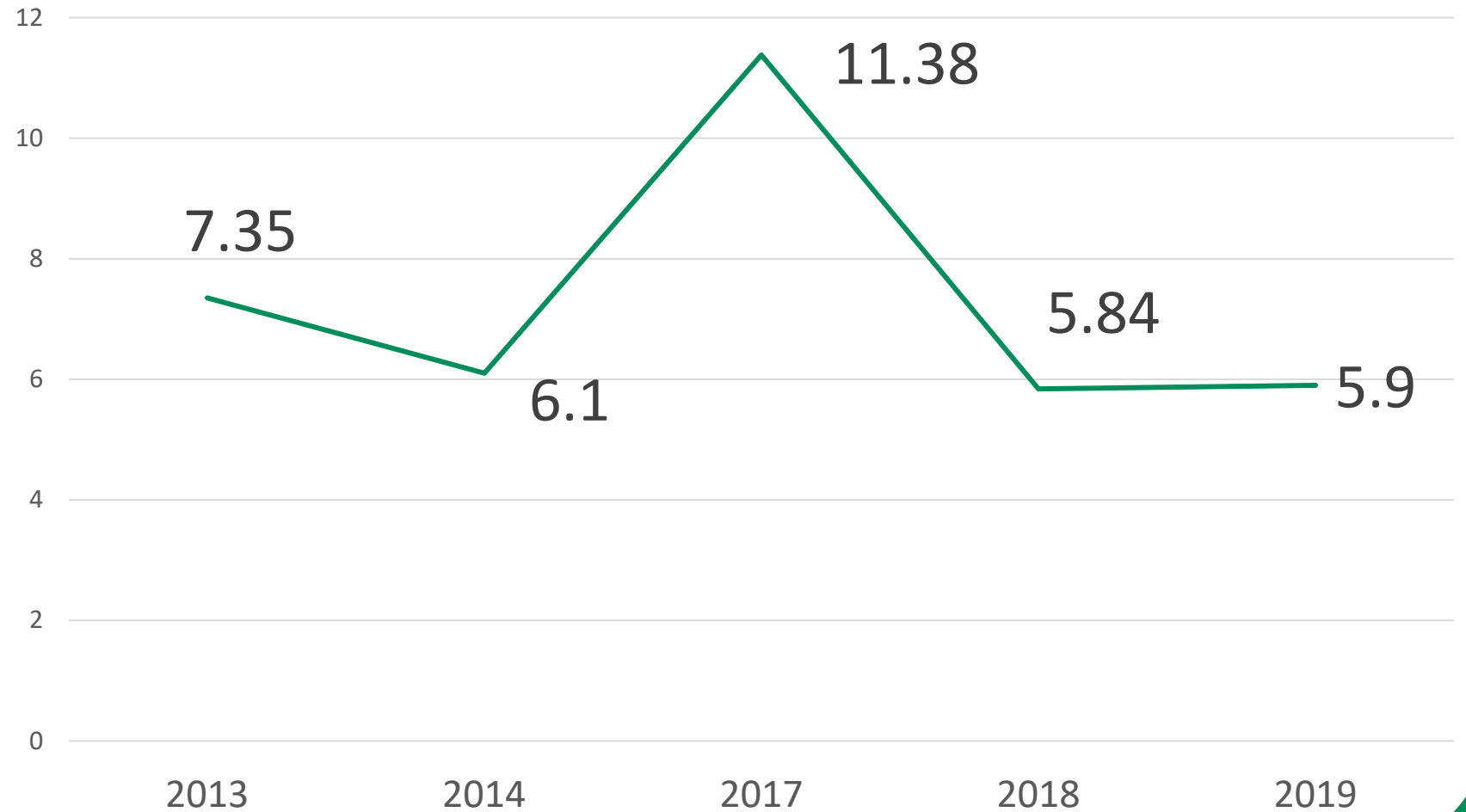


Communication



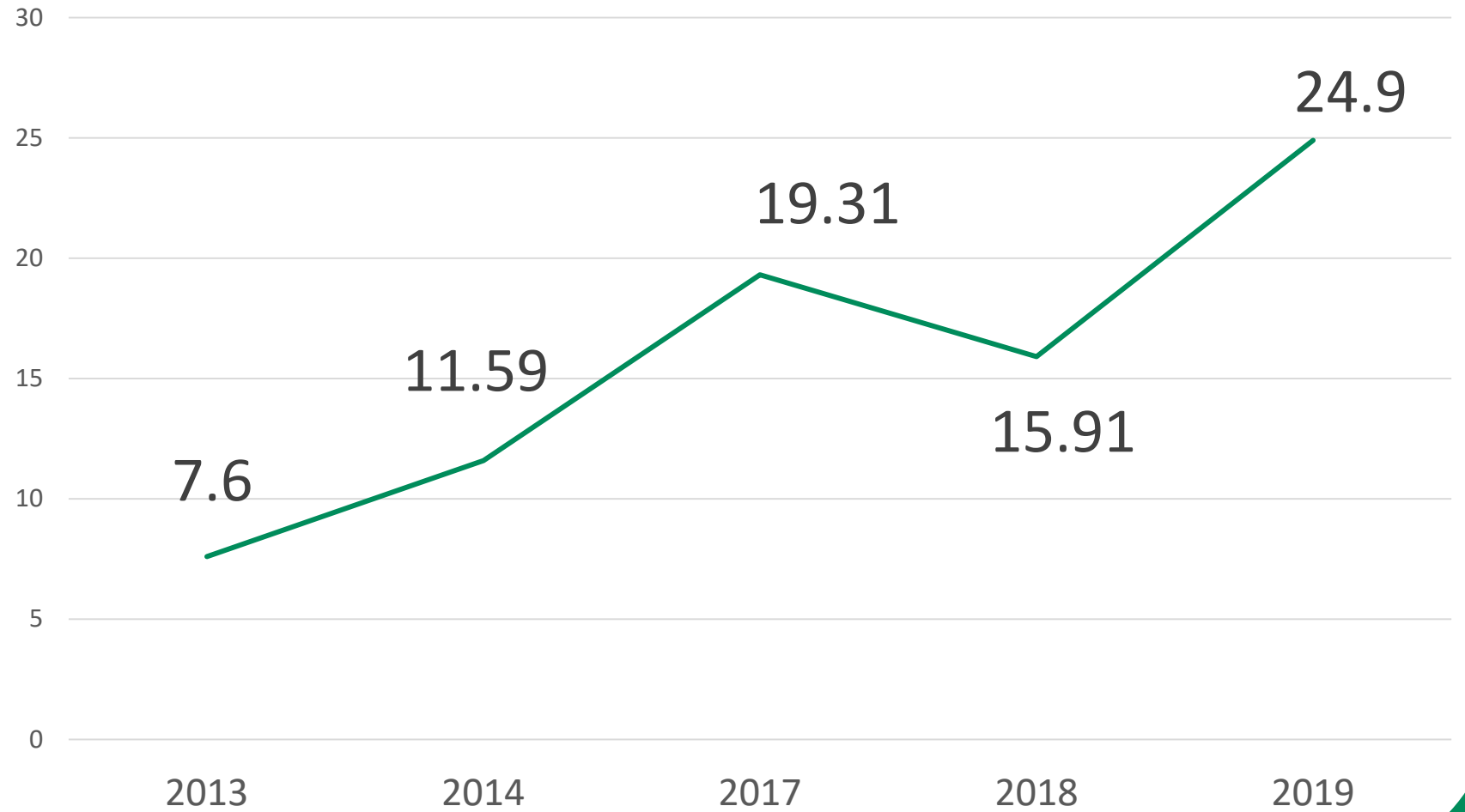


No chance to succeed/set up to fail





Pay





Other common themes 2019

- Frequently mentioned:
 - Mandatory OT
 - IEDSS
 - No chance to earn “Exceeds Expectations”
 - Having to travel to work during travel emergency
 - Pay vs. benefits cost increases
 - Us vs. them
 - Indy vs out state
 - State employees vs. contractors
 - Pay equity (execs vs. rank and file)



"BE KIND WHENEVER
POSSIBLE. IT IS ALWAYS
POSSIBLE."

The 14th Dalai Lama



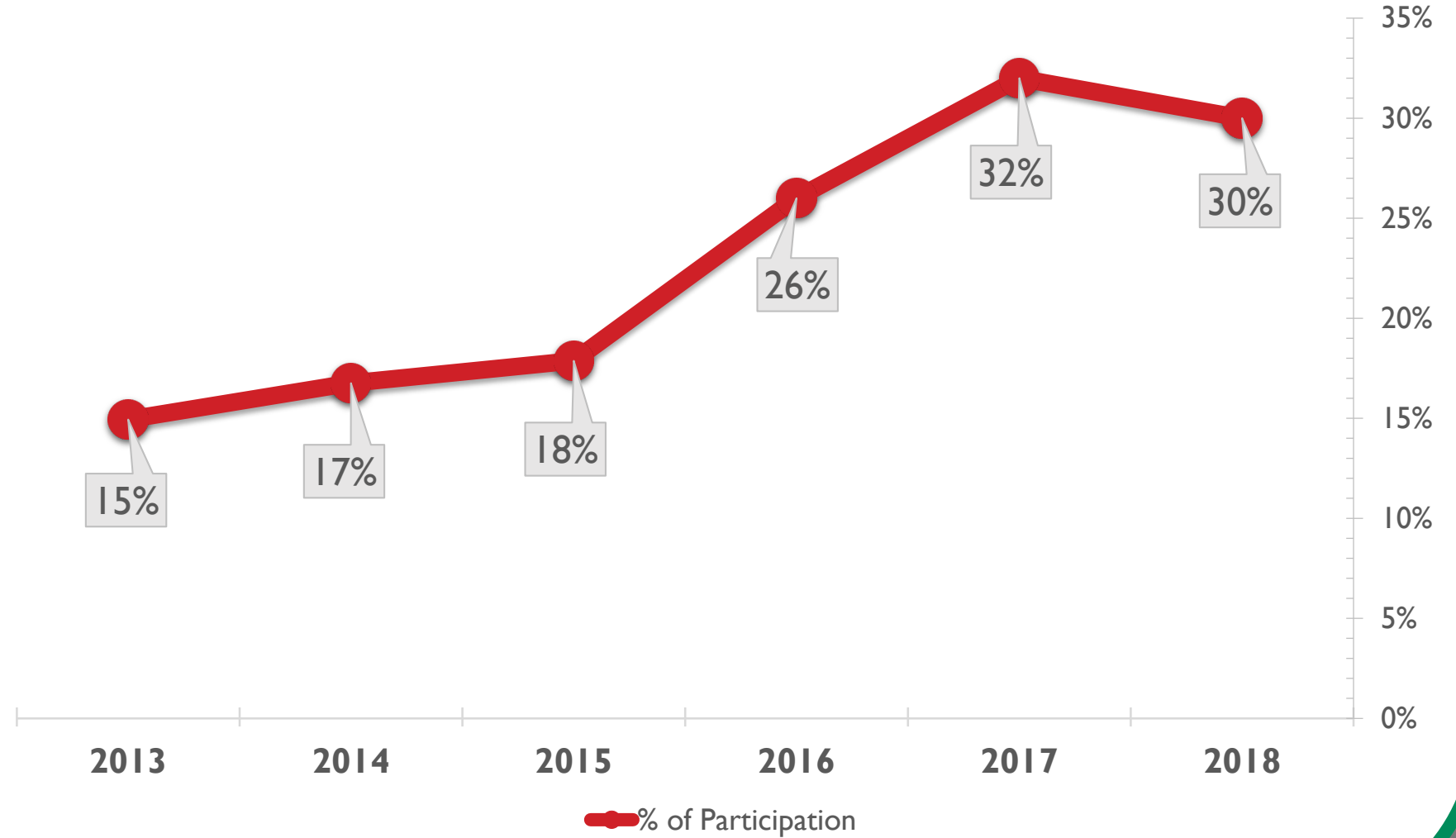
State Employee Community Campaign

2013-2018



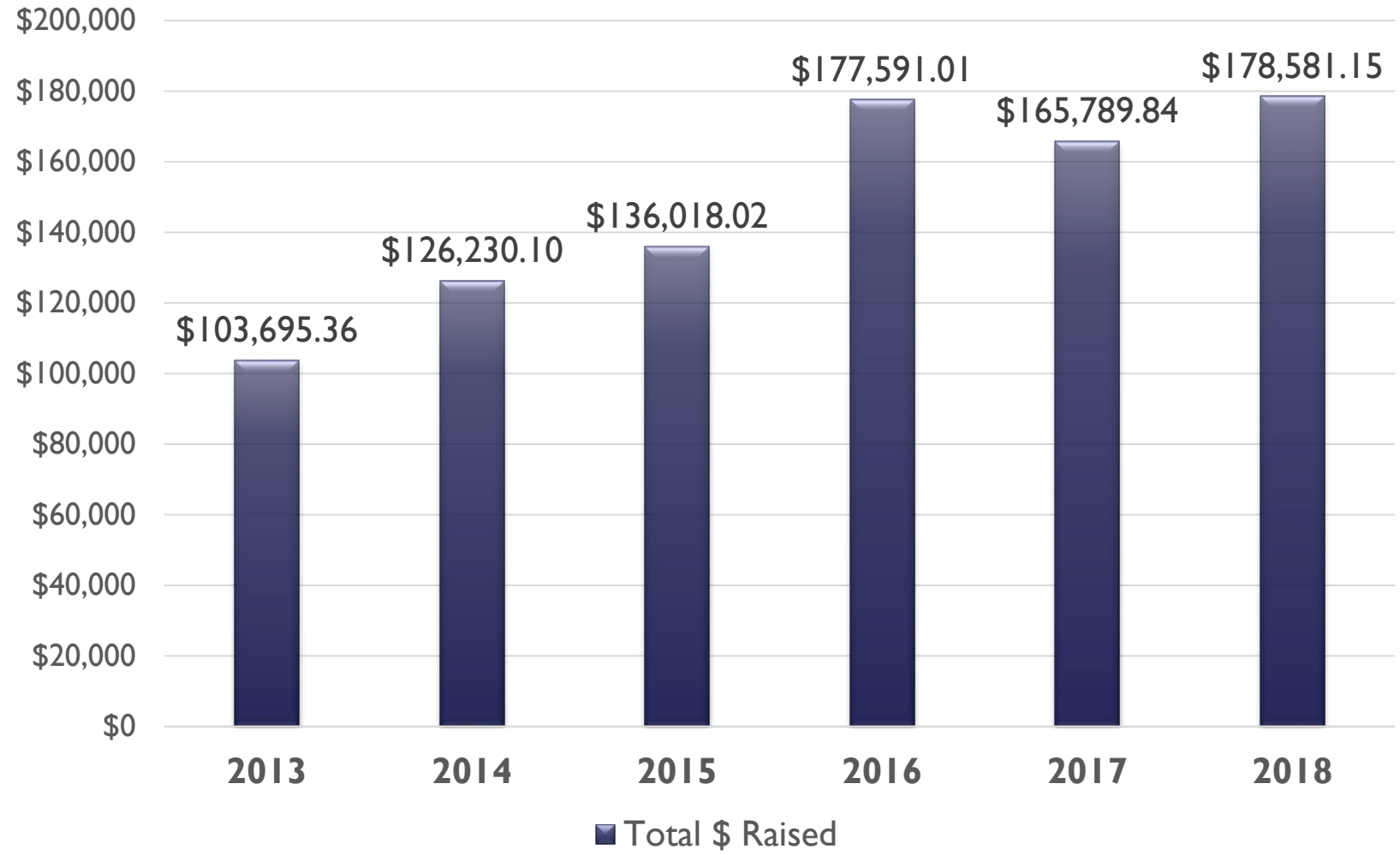


FSSA Participation Rate



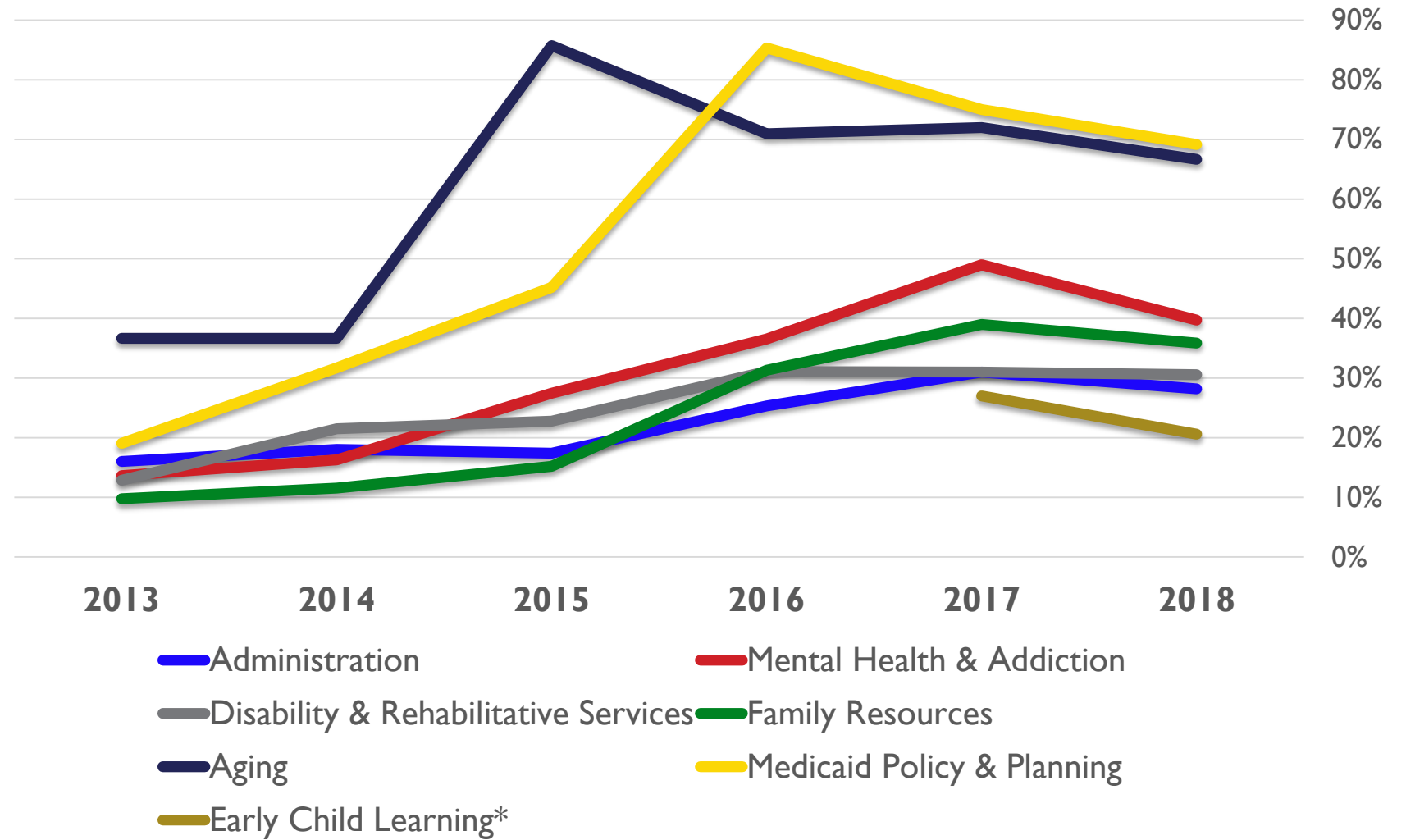


FSSA Total Raised





FSSA Participation Rates by Division



*Early Child Learning did not exist until 2017 within SECC and had previously been included with DFR.



Not why we do it, but....

- OMPP: Per Capita Gold AND Champion Award
- Division of Aging: Per Capita Gold
- DMHA: Per Capita Silver AND Champion Award
- Madison State Hospital: Champion Award
- DDRS: Champion Award
- Administration: Per Capita Silver





Our featured organization

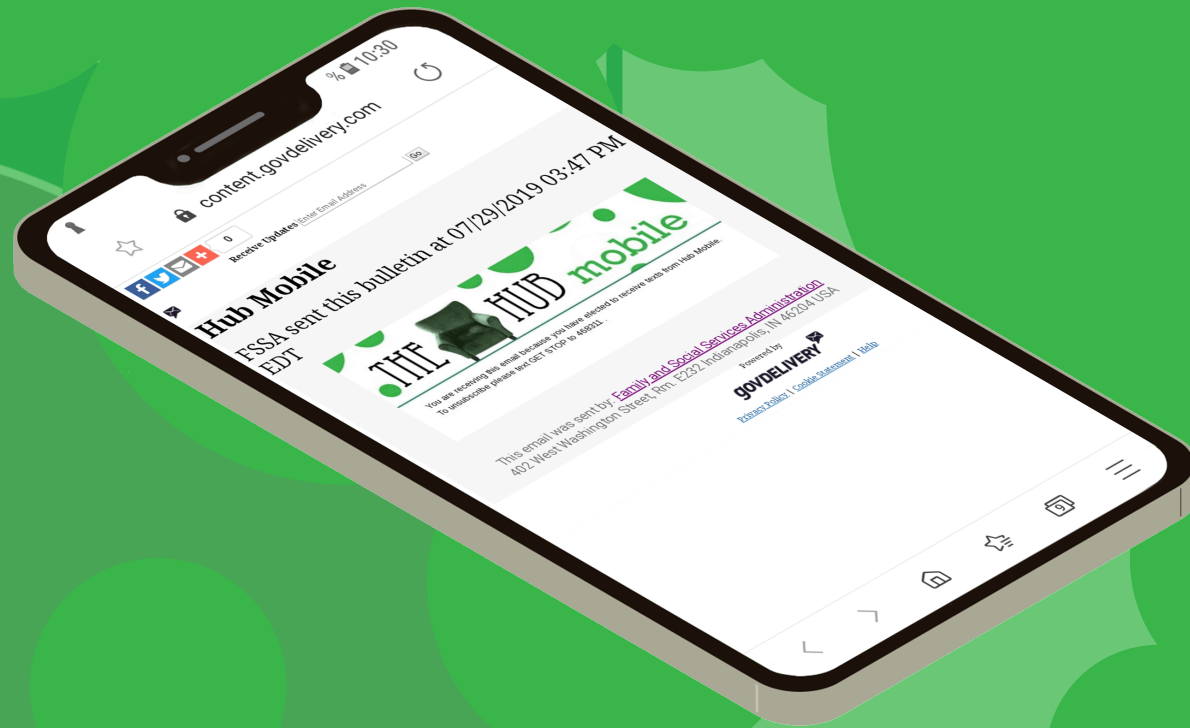


Book code:764500



SEPTEMBER
26, 2019

THE HUB mobile



Want the latest FSSA employee news and info delivered to your mobile device? 🤔

👍 Sure! How can I sign up?



Easy! Just text **GET HUB** to **468311** to sign up for **Hub Mobile**. 😊



2019 Call To Action

- In 2018, we asked for civility within our agency. You have knocked it out of the park.
- In 2019, we redesigned our mission and vision to focus on WHY we do what we do. This calls for civility + passion.

Thus, 2019/2020 =





Wedding photos

September 1, 2019

McGuire's Millrace Farm

Murphy, NC





 NATHAN BAERREIS
PHOTOGRAPHY



