

## Business Acumen Learning Collaborative Spotlight

### Missouri: Lead by Learning

In 2016, the Administration for Community Living (ACL) sought to expand the readiness of community-based aging and disability organizations (CBO) for contracting with integrated care entities, and prepare state and community-based aging and disability organizations to be active stakeholders and partners in the development and implementation of integrated care systems. In response to this request and with funding from ACL, ADvancing States in partnership with national aging and disability organizations<sup>1</sup> convened the Business Acumen Learning Collaborative throughout 2017 – 2019 as one element in this important work.

After a national search, five state teams (Maryland, Missouri, New Hampshire, New York and Texas) were selected to represent the Business Acumen Learning Collaborative. Each state team included representatives from state agencies, community-based organizations (CBO<sup>2</sup>) serving persons with disabilities, integrated healthcare entities and other organizations. Throughout their time together, each team worked together to develop and implement business-related strategies to state-specific challenges to integrating long term services and supports (LTSS) and healthcare services, with the ultimate goal to develop the business acumen of disability-CBOs in their state. In addition to their state-specific work and cross-state sharing, the Business Acumen Learning Collaborative informed the development of the HCBS Business Acumen Toolkit which can be found at: <http://www.hcbsbusinessacumen.org/toolkit.html>.

#### Background:

This spotlight highlights the efforts of Missouri's state agencies to work with the state team to better understand the key components of managed care and build

#### Key Lessons Learned:

1. Build trust.
2. Be intentional when recruiting people and keeping them engaged.
3. Find ways to be inclusive.

<sup>1</sup> Grant Partners included: ADvancing States, American Association on Health and Disability (AAHD), American Network of Community Options and Resources (ANCOR), National Association of State Directors of Developmental Disabilities Services (NASDDDS), National Council on Independent Living (NCIL), National Council on Aging (NCOA), National Disability Rights Network (NDRN), University of Minnesota – Institute of Community Integration

<sup>2</sup> CBO is a broad term to describe local organizations that offer community living services and supports to advance the health, well-being, independence, and community participation of people with disabilities and older adults. CBOs include Centers for Independent Living, developmental disability organizations, University Centers for Excellence in Developmental Disabilities Education, Research & Service, behavioral health organizations, Protection and Advocacy Agencies, Aging and Disability Resource Centers, Area Agencies on Aging, aging services organizations, faith-based organizations, Native American tribal organizations (American Indian/Alaskan Native/Native Hawaiian), nutrition program providers and other local service providers for persons with disabilities and/or older adults.

a network of engaged stakeholders. The Missouri team saw the move to managed care trending nationally and recognized the need to prepare their network in the event that Missouri was to follow suit. Early on in their collaboration, it became apparent that the team had a lot to learn. Discussions about managed care risked creating tension and anxiety. After spending several months learning and dialoguing, the team was able to find areas of agreement and identify key areas of vulnerability for their network if the state were to transition to managed care. The team is now working to integrate practices that will improve their system outside of a managed care environment, and to identify where they need to continue their education.

## Lessons Learned:

**Build trust.** Managed care is a sensitive issue, and since a state agency convened these discussions, there was skepticism around the efforts. Some feared this was leading up to an announcement about a pending transition to managed care; others assumed the CBOs on the team were hand-picked to be the ‘surviving’ agencies in a new managed care environment. This skepticism was addressed by being transparent and going above and beyond to share all information. A report of state activities was given at every meeting. Other efforts have been taken to ensure all involved CBOs can interact with the state team and participate in the ongoing project, including panel discussions with state team and CBO members, additional scheduled meeting times, and the development of local teams to build local capacity.

**Be intentional when recruiting people and keeping them engaged.** Think about the representation that you need in terms of geography, industry, and their capacity regular participation. Organization leaders may not have the time to attend meetings and be fully engaged with a project. In order to keep people engaged, it helps to formalize roles and responsibilities and find ways to hold people accountable.

**Find ways to be inclusive.** The team had more interest from providers than could be accommodated in the collaborative, so they used CBO association meetings to report out monthly. Some regions are replicating the statewide efforts locally. For instance, in the Kansas City Region, a local learning collaborative is being developed, and a resource directory was developed to help connect to local partners. The state team allowed people outside of the learning collaborative to participate in smaller initiatives to advance their work and include more people.

The Missouri team brought a spirit of learning and exploring to their work. By being open to new possibilities, transparent in what they did and did not know, they created trust amongst all participating and an optimism for the future.

You can read more about the Missouri team at:

<http://www.hcbsbusinessacumen.org/missouri.html>

## Missouri Learning Collaborative Partners:

State Agencies

Department of Mental Health

Division of Health & Senior Services

Department of Social Services (Medicaid)

Quasi-Governmental Agencies

Area Agencies on Aging

Senate Bill 40 Boards (County)