

# Multipurpose Senior Services Program

March 15, 2023

# Welcome

**Carrie Harcharik**

Education Department

California Hospital Association



CHA is planning quarterly Post-acute Care webinars. Below are the 2023 dates and times. We hope you'll mark your calendars to join us. You'll also receive emails as respective dates get closer.

- June 20 at 10 am
- August 30 at 10 am
- November 8 at 10 am

Continuing education hours are offered for this program for nursing.

Full attendance and completion of the online evaluation and attestation of attendance are required to receive CEs for this webinar.

**Online Questions:** At any time, submit your questions in the Q/A box at the bottom of your screen and press enter. We will take questions at the end of the presentation.



**Pat Blaisdell, FACHA**  
**Vice President, Policy**  
**California Hospital Association**

Pat Blaisdell provides membership support and advocacy for hospital-based post-acute care and case management services, including policy analysis and interpretation, communication with regulatory bodies and third-party payers, and planning and implementation of educational programs. Pat has more than 25 years of experience in hospital and health care management in acute and post-acute settings and has expertise in clinical operations and reimbursement across the post-acute continuum of care.



**Aloyce Rachal**  
**Senior Director, Multipurpose Senior Services Programs (MSSP)**  
**Partners in Care Foundation**

Aloyce Rachal is the Senior Director of the Multipurpose Senior Services Programs (MSSP) and has played a key role in onboarding three of the agency's MSSP sites. She has been with Partners in Care Foundation since 2003. Ms. Rachal holds a Master's in Counseling Psychology degree, but discovered a passion for working with seniors when she began a role as an MSSP care manager in 1987.



**Erika Ramirez, MPH**  
**Community Linkages Specialist**  
**Partners in Care Foundation**

Erika Ramirez, MPH, is Partners in Care Foundation’s Community Linkages Specialist. She began in September of 2022, and works in support of the MSSP team to build relationships with community referral sources, including health care facilities, medical practices, community-based organizations, and any other source that identifies individuals who can benefit from Partners’ range of services.



# Today's Agenda:



- Multipurpose Senior Services Program (MSSP)
  - History & Background
  - Program Overview and Description
- What MSSP provides
- Success Story
  - Assessing a Participant's Needs
  - Delivering Results
- Risk Factors for Repeated Hospitalization
- MSSP Providers
- Enrollment and Intake Process
- Eligibility Criteria
- Ineligibility
- FAQs
- Questions & Answers

# Multipurpose Senior Services Program (MSSP)

## History/Background

- MSSP became a Home and Community-Based waiver in 1983.
- The MSSP waiver is designed to support nursing home certifiable seniors living at home at a cost lower than nursing home placement.
- There are 37 MSSP sites in the state of California.
- MSSP serves ~12,000 participants annually statewide, and ~3,400 in Los Angeles County.
- In January 2022, MSSP was granted approximately 20% additional slots.

# Multipurpose Senior Services Program (MSSP)

## History/Background

- MSSP operates under a Medicaid 1915(c) Home and Community-Based Services (HCBS) waiver. The program is funded by the state of California Department of Aging (CDA).
- CDA's MSSP Branch oversees the programmatic, fiscal, and service components of local MSSP site operations.
- It is designed to keep seniors out of skilled nursing facilities and reduce hospital readmission by providing a safer home environment and care management services.
- It provides Coordinated Care with health plans, primary care physicians, social and community programs
- It is a Home-based program; MSSP provides services to participants that enable them to remain in their homes.

# Multipurpose Senior Services Program (MSSP)

## Program Description

- The program's goal is to prevent or delay institutionalization through ongoing care management, using available community services and resources, and purchasing needed services when they are not already available.
- MSSP provides both social and health care management services to assist low-income frail individuals aged 65 or older to remain in their own homes and communities.
- The services provided thru MSSP must be lower than the cost of receiving skilled nursing facility care.
- There is no cost to the participant.

# What MSSP Provides: Care Management



- A team consisting of a nurse and a social work care manager conduct comprehensive health and psychosocial assessments
  - Participant's unmet needs are determined by the two disciplines based on their assessment
- Care conferencing is conducted to develop the Care Plan that will address the unmet needs
  - A Care Plan is developed that is agreed upon by the participant
- Case recording and monitoring for changing needs and home safety

# What MSSP Provides: Care Management



- A Primary Care Manager is assigned to carry out all functions of care management
- Coordination with existing community resources
- Coordination of informal and formal systems
- Advocacy on behalf of participant
- Service arrangement and monitoring delivery of services
- Monitoring changing needs of participant
- Making referrals and authorizing the purchase of all items outlined in the Care Plan

# What Services does MSSP provide?



- Durable medical equipment (i.e., walker)
- Emergency Response System (ERS)
- Incontinence supplies
- Household items (i.e., microwave)
- Safety equipment (i.e., handrail, grab bars)
- Oral nutritional supplements
- Transportation
- Respite for care givers
- Delivered meals
- Household chore and personal care assistance
- Minor home repairs

# Meet Mary: Assessing Participant's Needs

- 88-year-old female
- Limited income
- Poor health history and lives alone
- Recently discharged from hospital
- Needs help managing doctors' expectations and maintaining medication plan
- Does not have access to transportation for routine doctor visits
- Determined to be at greater risk of falls due to recent changes in mobility
- Has a history of poor nutrition and noticeable weight loss due to depression and isolation
- Strong desire to remain living at home



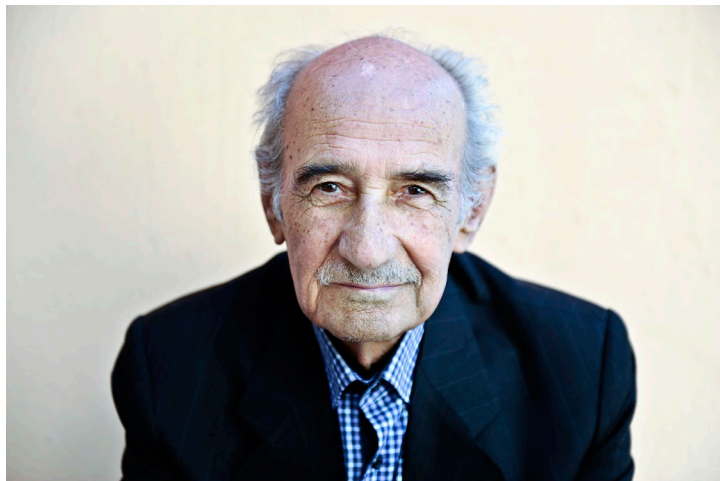


# Meet Mary: Responding to a Participant's Needs

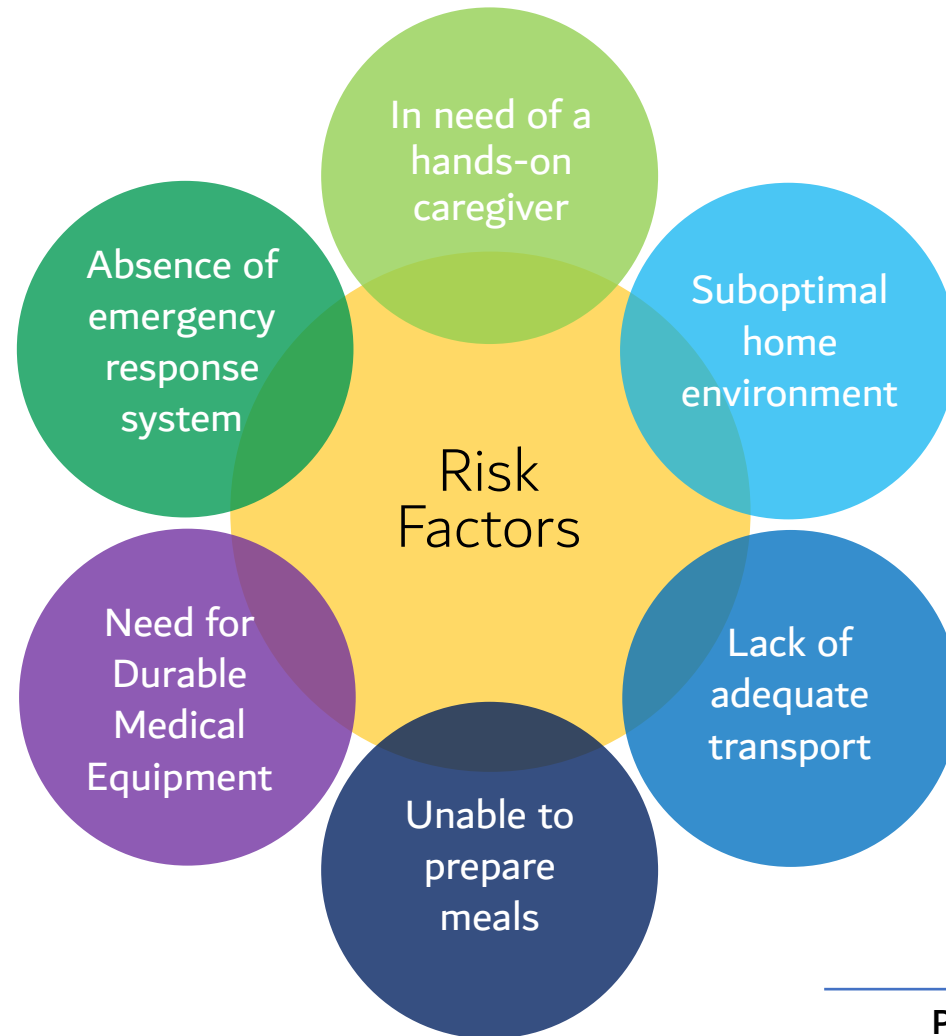
- Referral to In-Home Support Services (IHSS)
- Purchase chore and personal care services until IHSS has allotted hours for help
- Referral to meal preparation/delivery program and acquire nutritional supplements
- Install a grab bar in bathroom and procure a walker with a seat
- Participate in *Partners'* Community Wellness program to attend Fall Prevention workshops
- Transportation vouchers
- Referral to Community-Based Adult Services (CBAS)
- Acquire medication organizer
- Purchase Emergency Response System



# Health Happens at Home



# Repeated Hospitalization



# Medications



- Medication-related problems (MRPs) are estimated to be one of the top five drivers of mortality in those 65 and older.
- MRPs are a major cause of confusion, depression, falls, disability and loss of independence.  
- *American Society of Consultant Pharmacists*
- One-third of seniors taking five or more medications will have at least one bad drug reaction each year; two-thirds of them will require medical attention.

# Catchment areas and finding the right provider



- *Partners* has four MSSP sites:
  - North Los Angeles
  - South Los Angeles
  - Kern County
  - Santa Barbara
- Thirty-five providers offer MSSP throughout the state of California from Humboldt County to San Diego

[California Department of Aging MSSP](#)



# Enrollment/Intake Process



## Partners' MSSP Referral Form

If you are interested in enrolling or know someone who may benefit from *Partners' MSSP*, please fill out the referral form below.

How did you hear about MSSP?

In-Service Presentation

Are you making a self-referral or referring someone else? *(Required)*

- Self-Referral  
 Referring Someone Else

### Your Information

Your Full Name *(Required)*

Your Relationship to the Individual: *(Required)*

Your Preferred Phone Number *(Required)*

Your Preferred Email *(Required)*

Zip Code *(Required)*

Online referral form submitted

Intake call with MSSP program assistant

Psychosocial Assessment with social worker

Health assessment with nurse care manager

Development of Care Plan to begin services

Monthly contact and quarterly home visits

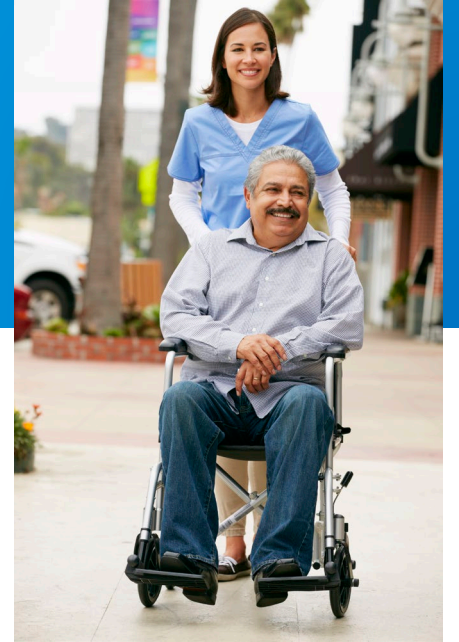
Reassessment to be completed annually

A phone call remains one of the most effective means of reaching and communicating with participants.



# Eligibility Criteria

- 65 and over
- Enrolled in Medi-Cal with no share of cost
- Must live within the catchment area of designated agency and have a physical residence
- Willingness to participate in the care plan by allowing services to be provided in their homes
- Demonstrated need for care management to avoid placement in a nursing facility and prevent repeated hospitalization





# Determining Eligibility

Eligible	Possibly too independent
<ul style="list-style-type: none"><li>■ 72 years old</li><li>■ Enrolled in Medi-Cal</li><li>■ Existing co-morbidities</li><li>■ Multiple prescriptions</li><li>■ Needs transportation to follow-up doctor's visits</li><li>■ Unable to independently shop for groceries</li><li>■ Demonstrates signs of isolation</li></ul>	<ul style="list-style-type: none"><li>■ 59 years old</li><li>■ Not enrolled in Medi-Cal</li><li>■ Would like help with in-home chores</li><li>■ Drives self to doctor's visits</li><li>■ Prepares personal meals</li><li>■ Works or is actively looking for work</li><li>■ Participates in regular high intensity exercises</li></ul>

# Ineligibility – What to do if:

- A patient is under 65 – HCBA, ALW
  - A person does not have Medi-Cal, but may be eligible
  - An individual does not live within the *Partners'* catchment area
  - A person is currently unhoused – ECM
- Note: In order to be eligible, a patient must demonstrate a need for care and assistance in maintaining independence at home.



# Frequently Asked Questions:



- Does enrollment in MSSP impact Medi-Cal eligibility?  
No, enrollment in MSSP does not impact Medi-Cal, IHSS, or ADHC.
- Does citizenship status effect eligibility in MSSP?  
No, patients do not need proof of citizenship to enroll in MSSP.
- Can participants continue with the program if they are not consistently in need of new services?  
Yes, if participants are available for monthly phone visits and quarterly in-home visits, and are following their Care Plans, they can continue receiving services even if they do not have an increase in needs.

# Additional *Partners'* Resources



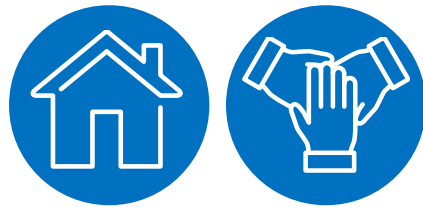
[Multipurpose Senior Services Program \(MSSP\)](#)

[MSSP Online Referral Form](#)

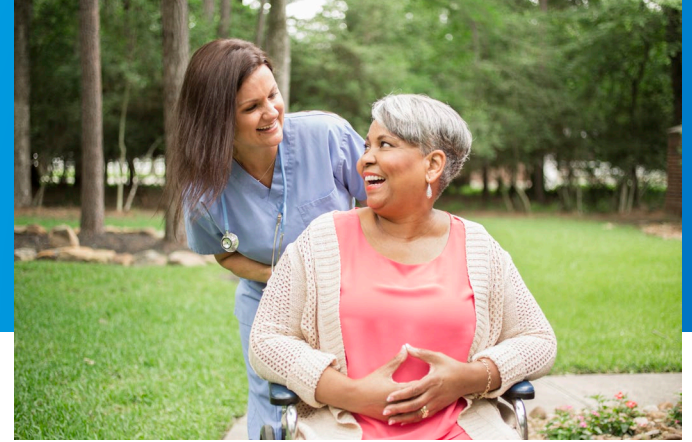
[Home and Community-Based Alternatives \(HCBA\) Waiver](#)

[Assisted Living Waiver \(ALW\)](#)

[Enhanced Care Management \(ECM\) Model of Care](#)



# Additional Resources

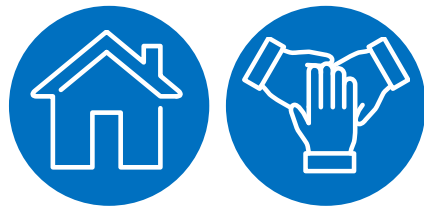


[California Department of Aging MSSP Service Area Map](#)

[DHCS Home and Community-Based Alternatives \(HCBA\) Waiver](#)

[DHCS Assisted Living Waiver \(ALW\)](#)

[DHCS Enhanced Care Management \(ECM\)](#)



Please submit your questions using the Q&A box (usually located at the bottom of your screen).

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# Thank You

Thank you for participating in today's webinar.

An online evaluation and an attestation of attendance will be sent to you shortly.

For education questions, contact:

[education@calhospital.org](mailto:education@calhospital.org)