



# Meeting the Needs of Children and Families in the 21<sup>st</sup> Century

Deborah A Carroll, J.D  
DC Department of Human Services  
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## Framing the issue ....

JB is a 22 year old mother of 5 children. She lives with a friend in an overcrowded 2 bedroom apartment. She has not finished high school, and has been on public assistance for the past 4 years. Her children range in age from 13 months to 9 years. She took some GED classes but never completed them. The assessment revealed that the 9 year old son, Joseph has not been to school. She works at a bar at night and leaves the children with the friend in the apartment while she is at work.

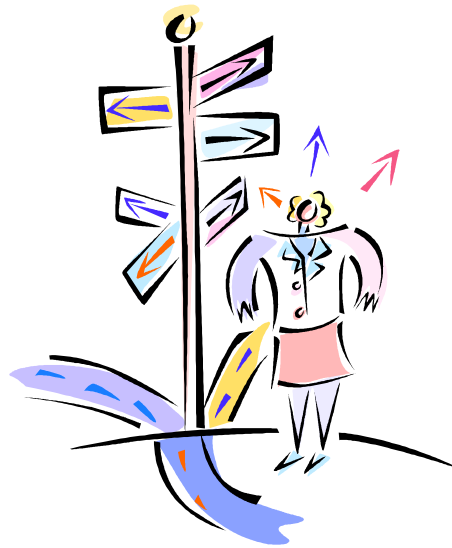
States in regulatory phase– JB is pushed in multiple directions by the agencies, based on their rules and regulations, with no clear, consolidated plan



You need your own place



You need to get your GED

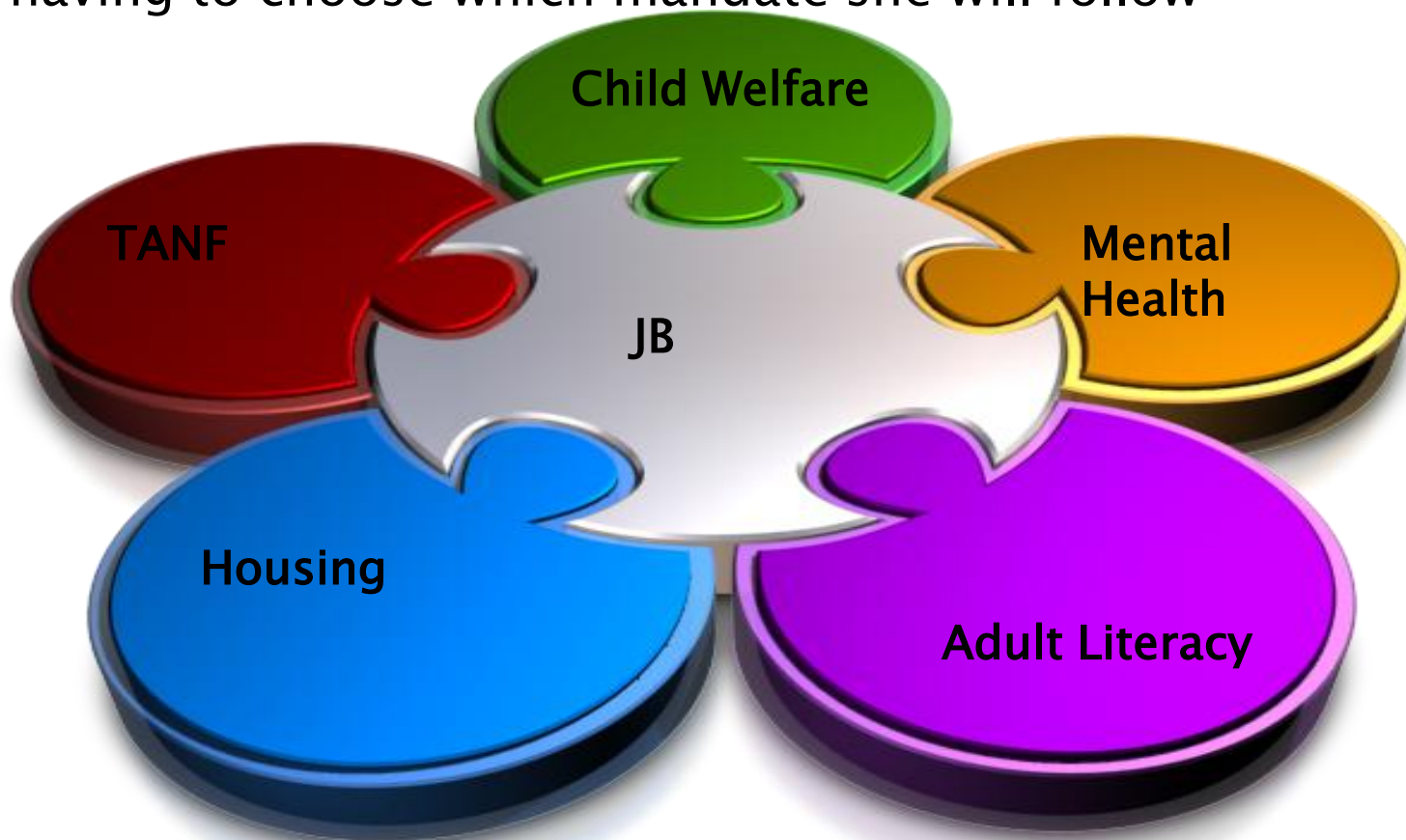


You need to work

The kids must go to school



Without collaboration JB is faced with meeting the demands of each agency, having to choose which mandate she will follow



**Leading to frustration, withdrawal, and devastating results....**

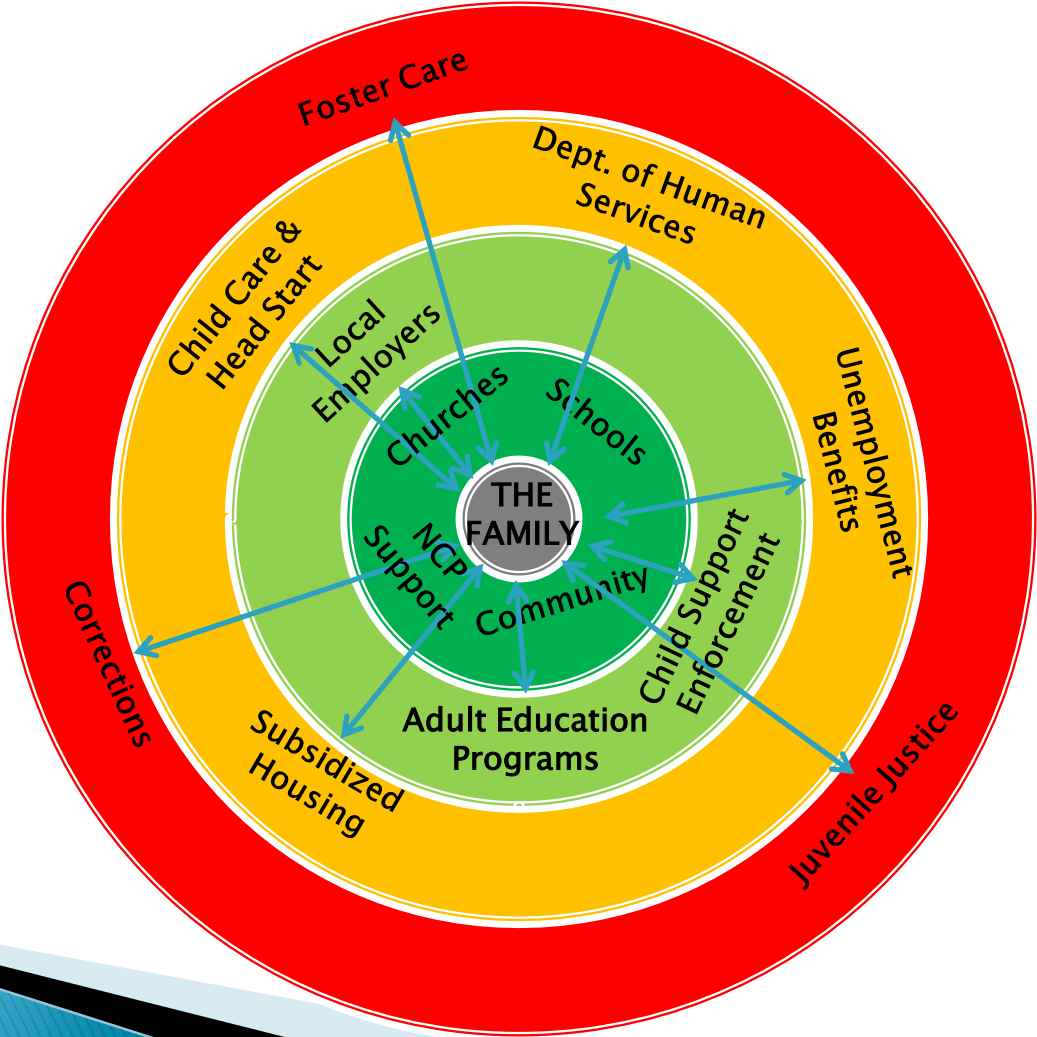


# Goal . . .

- ▶ Develop a system which puts the family in the center and affords families the best opportunity to provide a healthy environment for their children and move toward self sufficiency.

# Putting the family in the center

The result is a recognition that government agencies are one of many types of support that can help a family. We need to work with and strengthen the most effective types of support, not just our own.

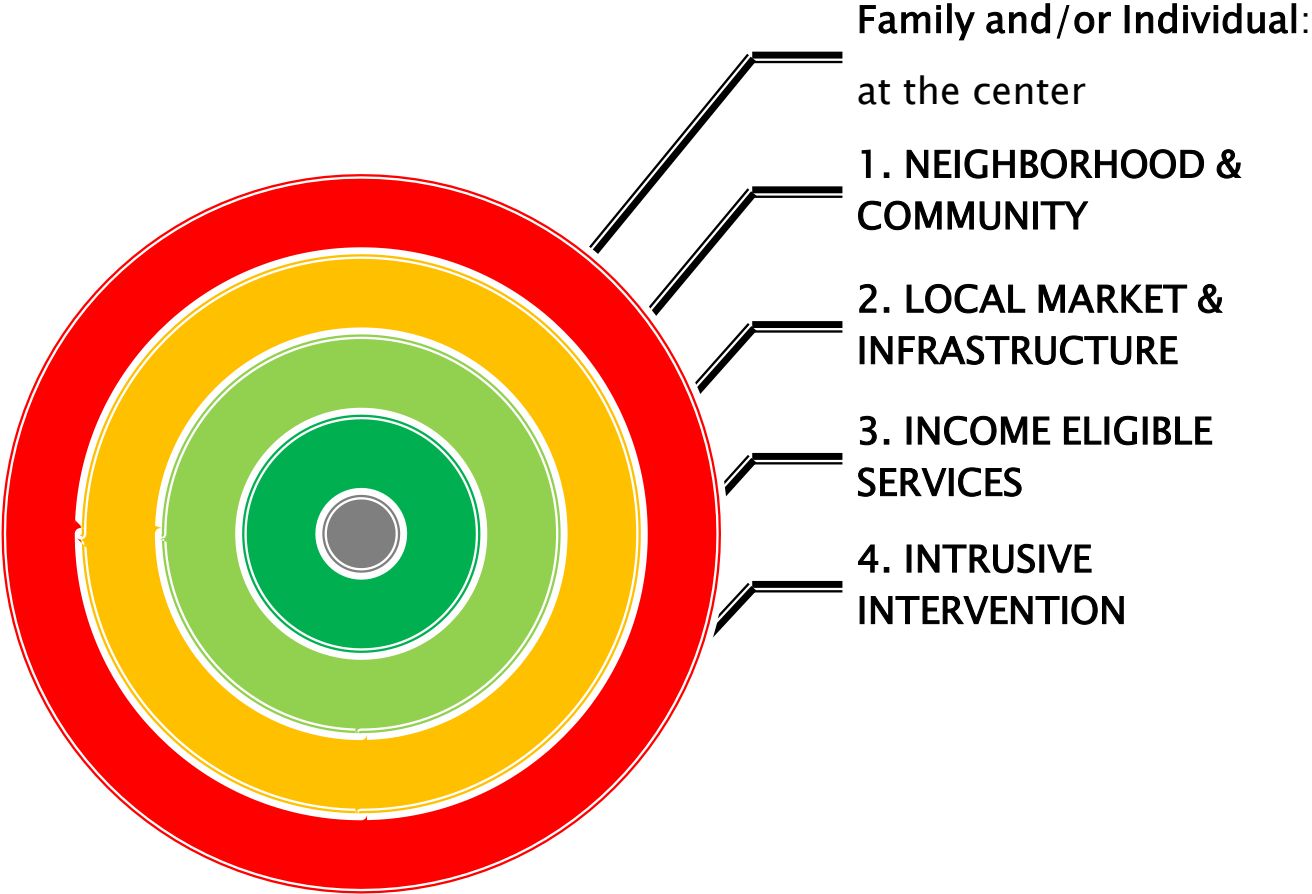




# The Integrated Services Model – Overview

In this model, there are many “layers of support” that can help a family or individual become more self-sufficient. Human Services agencies do not appear until the 3<sup>rd</sup> level.

- Each Support Circle is a prevention program for the ones that follow
- Levels near the center result in low-cost, high quality outcomes
- With each subsequent level, costs increase and quality of outcomes decreases





# The Integrated Services Model - Detail

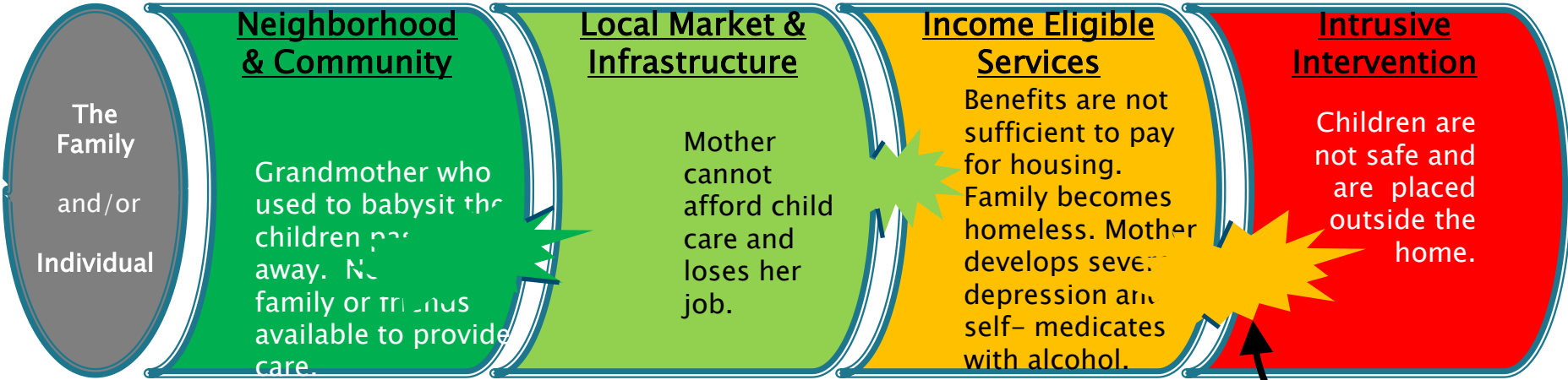
Self-sufficient individuals and families only require support from the services near the “Core”, while those in need may require government assistance or intervention.



*The goal is to prevent families from requiring the dramatic action of the last level, by heavily supporting ALL previous levels – not just government programs and services.*

# Focus on the Margins to Maximize Impact

Negative events can cause an individual or family to “break through” the wall and require services at the next level – but with the proper support, they can rapidly return to their status quo.



With a small amount of support, these families can be more self-sufficient and not rely on government services

These families require urgent assistance to avoid needing more dramatic action (foster care, incarceration)

The goal is to prevent the barriers from “breaking”, making a family require support from the next level

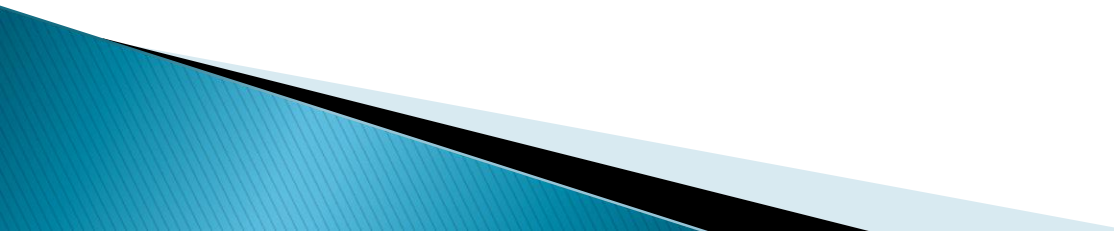
*When each support level is operating at optimum levels for the family or individual, it is also serving as a prevention program for the levels that follow*



Create and innovate...

A business model that provides information to the caseworker about JB and her children.

# DC and the Human Services Value Curve

- **Regulative**– delivering services for which customers are eligible
  - **Collaborative**– ensuring the optimum mix of services
  - **Integrative**– addressing and solving the root causes of client needs
  - **Generative**–generating healthy communities
- 

# DC and the Human Services Value Curve

## Different Stages of the Human Services Value Curve

**Regulative**– Eligibility Determination – due to budget cuts and increasing caseloads, workers had to reprioritize and focus on timely and accurate eligibility decisions

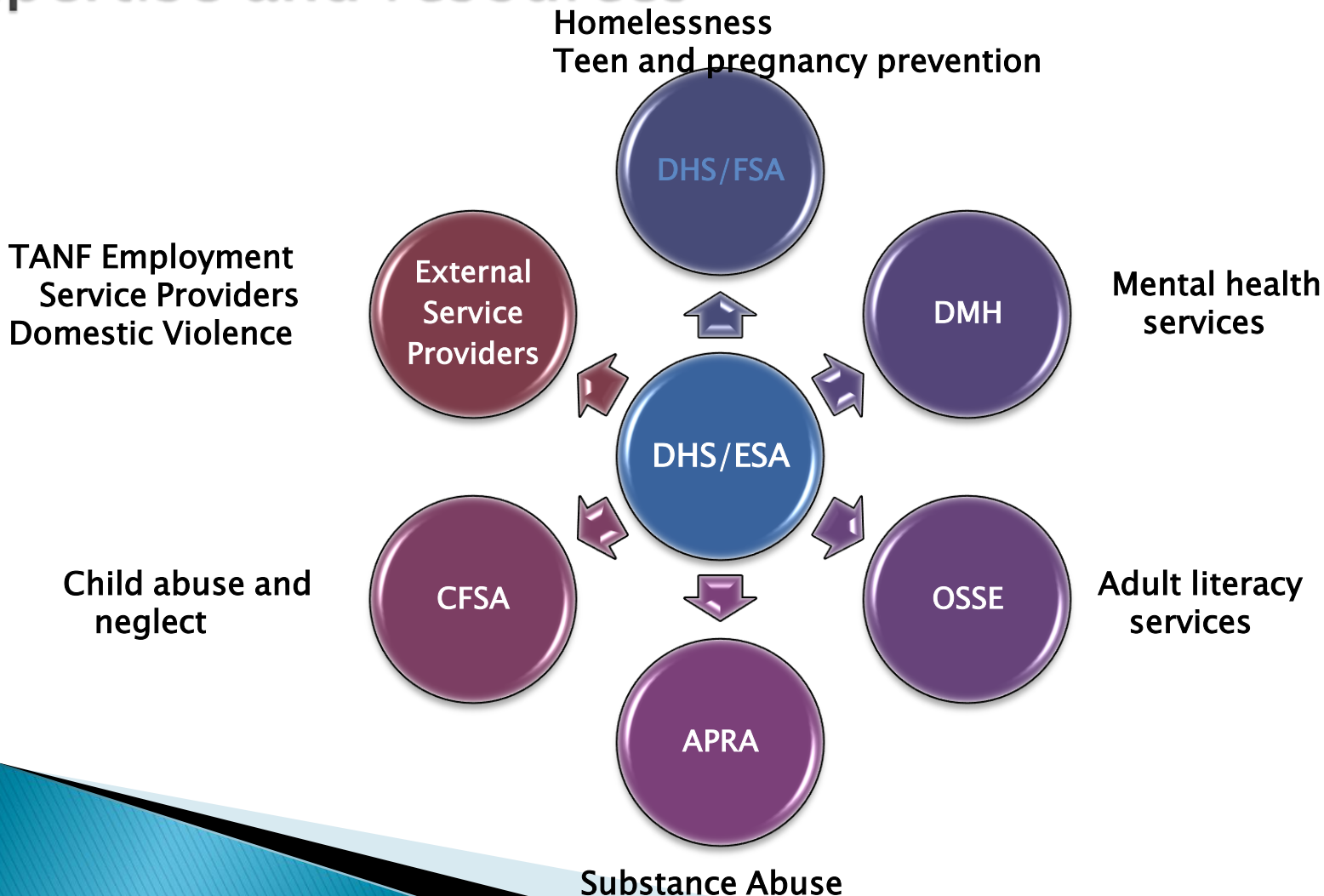
**Collaborative**– Combined Eligibility determinations– one streamlined application; TANF program changes designed to work closely with sister agencies

## DC and the Human Services Value Curve

**Integrative**– TANF innovation strategies, including a comprehensive multi-agency work readiness screening; unified case plans; and integrated and interoperable system to support these strategies

**Generative**– Promising Neighborhoods, TANF/Homeless Integration– focuses on the holistic needs of families

# Cross-agency collaboration to leverage expertise and resources





Enables agencies to better serve the customer, but still in their regulatory silos.

Homelessness  
Teen and pregnancy prevention

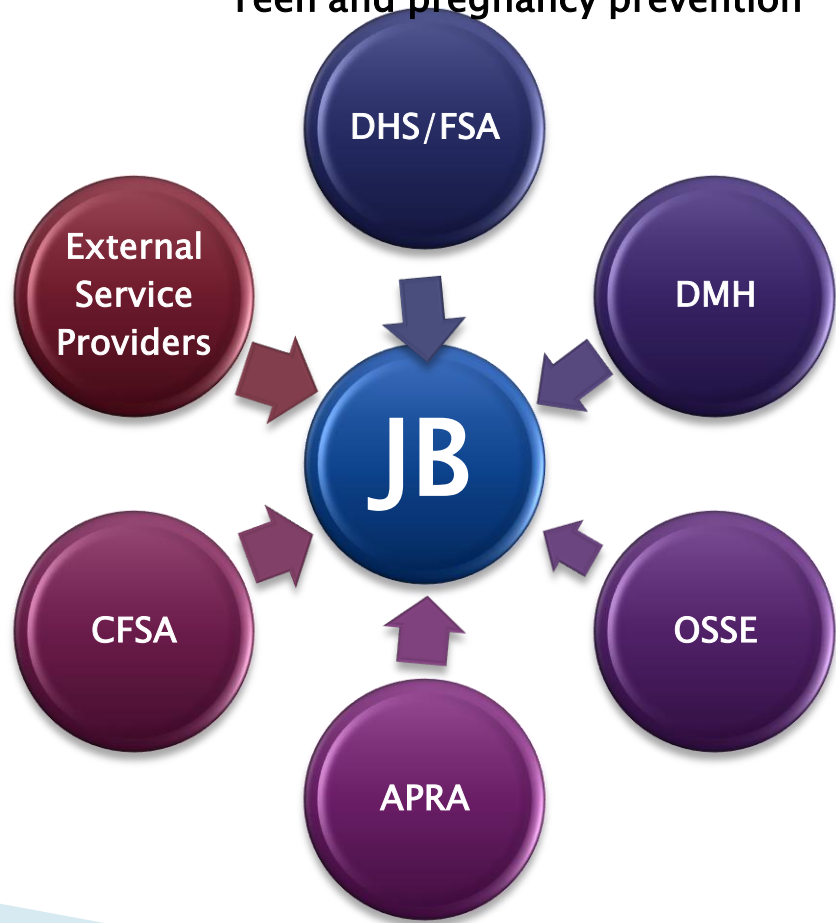
TANF Employment  
Service Providers  
Domestic Violence

Mental health  
services

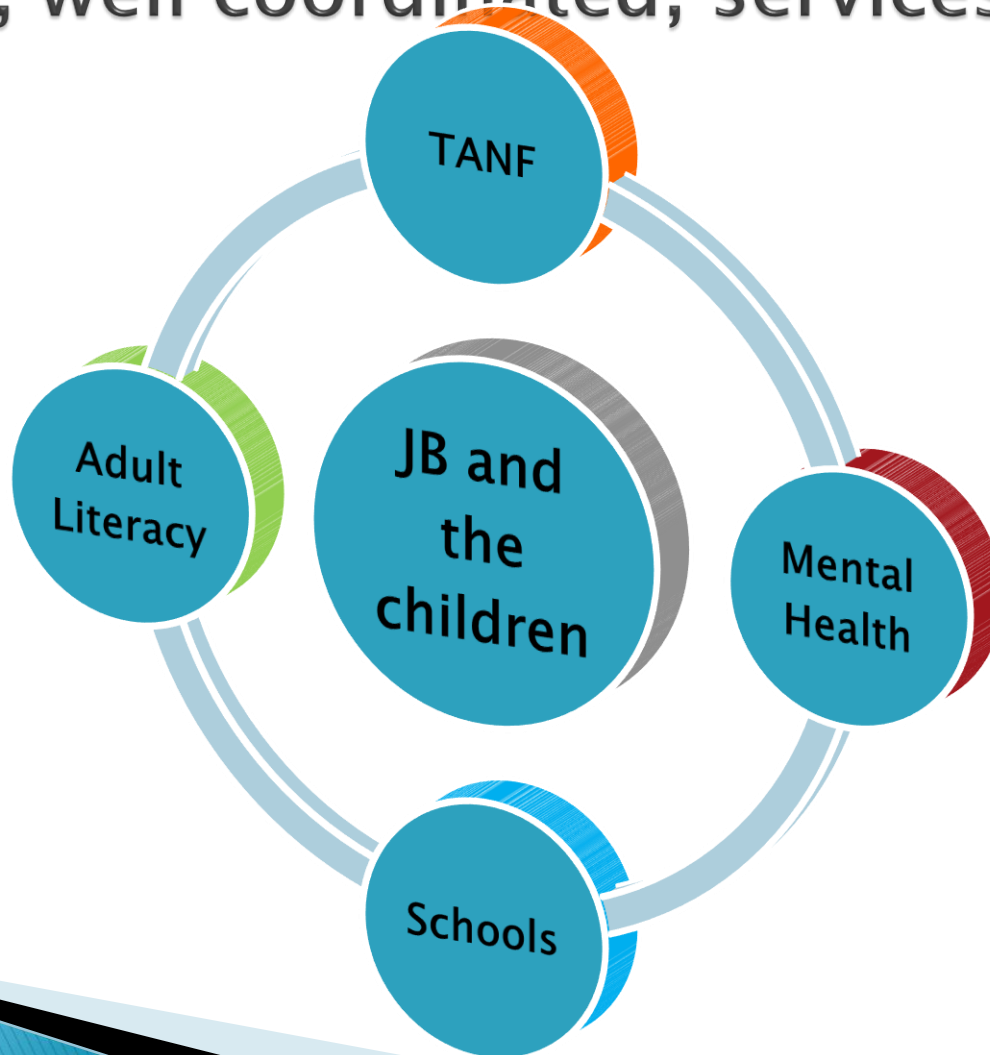
Child abuse and  
neglect

Adult literacy  
services

Substance Abuse



An ecosystem of providers to deliver integrated, well coordinated, services...

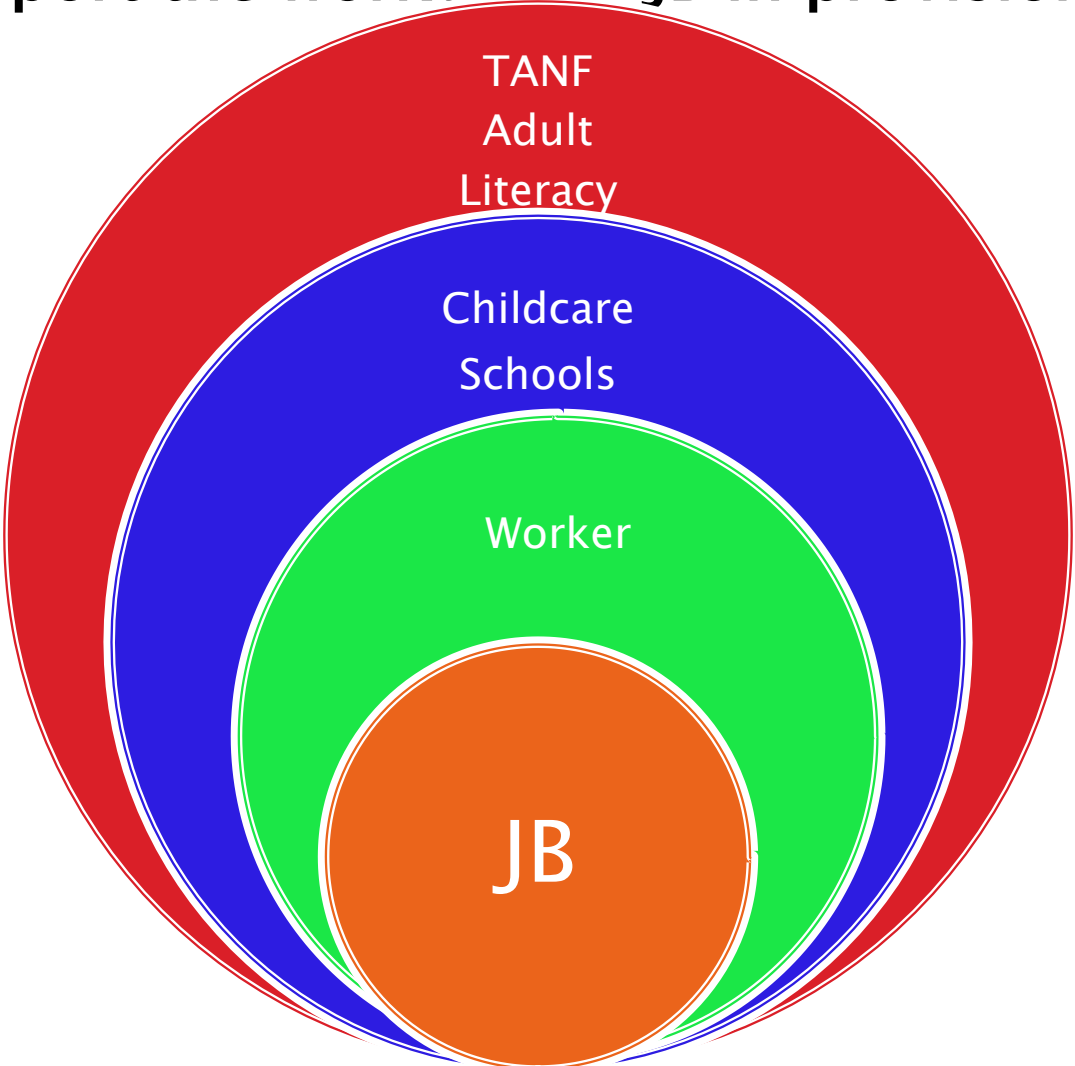


Incorporates the knowledge gained from an integrated system and holistically address the needs of the family



I need day care  
I need help with school  
I need help being  
organized  
I need help for my son  
I need a job

# Agencies support the worker and JB in provisioning services

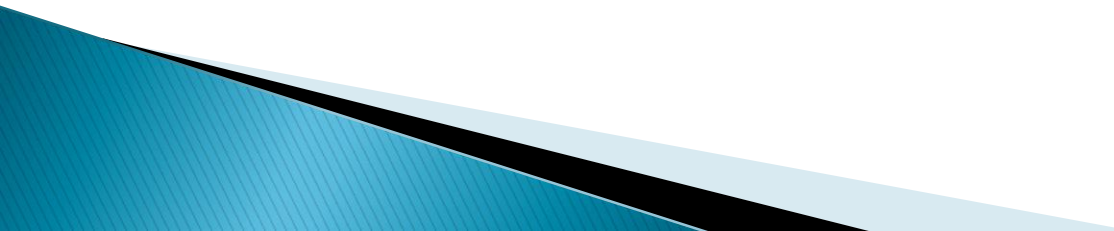


By supporting the caseworker and integrating JB's plan, the customer feels supported and less overwhelmed, the quality of the interactions and outcomes improve





How is the District of Columbia leveraging the Affordable Care Act to support our system transformation?





## 21<sup>st</sup> Century Business Model

**Vision**– Integrated health and human services delivery model

**Shared governance over the system**– Tri–Agency governance with DHS, DHCF, and the HBX

**High Touch Low Touch**– No Wrong Door– online application and My Account; mail, fax, email, in person, in the community, on the phone

**Streamlined integrated structure and business flow**– common application, integrated case management; document management; kiosks

## 21<sup>st</sup> Century Business Model

**Coordinated Service Delivery**– multi–agency and multi–program approach to determine and transmit eligibility to the agency based on their business rules

**Shared Accountability**– timely receipt of benefits; access to health insurance; and reduced dependence on public assistance

# Leverage ACA to build a new system

- ▶ Mandate– Make your Medicaid eligibility interoperable with other human service programs
- ▶ OMB A–87 to bring our eligibility and case management systems into the 21<sup>st</sup> Century



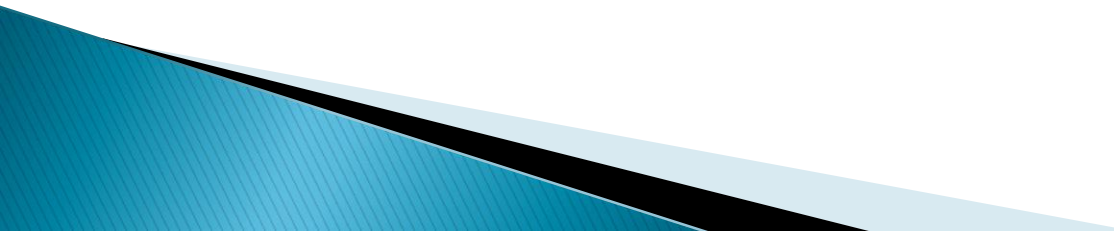
# Key Features

- Online Portal to access
  - Health Benefit Exchange
  - Public Benefit Programs – streamlined eligibility
  - Health insurance coverage information
  - Community Resource information
  - Local data hub

# Incorporates case management module for TANF, SWs, and providers to input information and develop unified plans

- ▶ Ensures access roles are well defined and monitored
- ▶ Allows for unified view of Self Sufficiency plans
- ▶ Provides case manager contact information
- ▶ Assessment summary
- ▶ Benefit information
- ▶ Household composition
- ▶ Work history
- ▶ Skills/barriers
- ▶ Who is providing services
- ▶ Literacy issues

## Interoperable System

- Real time verification with Federal Hub
  - Creation of local data hub
  - Case Management and Referral
  - GIS mapping
  - Health Information Exchange
  - Shared infrastructure
- 



*DCAS will have a secure and modular technology infrastructure to provide state of the art access to health and social benefits for District residents and employees*



# Programs features

Release 1 – MAGI Medicaid and QHPs 10/1/13

Release 2 – Non-MAGI Medicaid, Alliance, TANF, SNAP , SNAP E&T, including case management 10/1/14

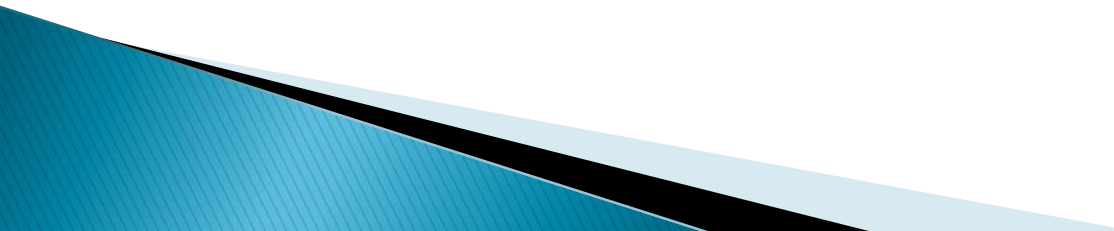
Release 3 – LIHEAP, Child Care Subsidy, Child Support (possible), Homeless Services eligibility and other case management 10/1/15

# Risks

- ▶ Earned Income vs Low Income
- ▶ Multiple systems—result in multiple entries by staff
- ▶ Organizational Change management
- ▶ Blurring of the lines for cost allocation purposes
- ▶ Privacy rules for some programs prohibit disclosure without consent



# Strengths

- ▶ Customers feel more empowered
  - ▶ Small wins yield longer term results
  - ▶ Minimizes risk by having information that would enable staff to intervene earlier
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**Questions?**