

Question & Answer (Q&A) - Webinar on a Disability Competence Resource: DCCAT

Webinar participants asked these questions during the Q&A portion of the Disability-Competent Care Self-Assessment Tool (DCCAT) webinar. Please note, the responses in this document have been edited for clarity. The webinar recording, slides, and transcript can be found on the Resources for Integrated Care website:

https://www.resourcesforintegratedcare.com/DisabilityCompetentCare/2017_DCC_Webinar/DCCAT

Featured Webinar Speakers:

- Christopher Duff, Disability Practice and Policy Consultant
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- Chris Brieske, Director of Partnership, Care Wisconsin
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- Elizabeth King, Nurse Practitioner, Care Wisconsin
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Q1: How is the goal of reducing risk in health care delivery and targeting high-risk participants compatible with cost management?

Chris Duff: Risk management is a central strategy in health care delivery. The goal of risk management is to capture or prevent avoidable episodes of injury or illness, thereby reducing costs associated with health care. A participant's risk is commonly addressed through health risk assessments (HRAs), a means for identifying areas to focus on with each participant. An example of risk reduction for participants who are prone to falls is to modify the participant's home environment and to introduce physical therapy to improve balance, coordination, and strength. For those using a wheelchair for their mobility, a well-fitting chair and good cushioning will prevent costly orthopedic or skin complications. Keeping the participant healthy and functioning well in their home and community will increase their quality of life and reduce costly medical care and hospitalizations.

Q2: Do you [Care Wisconsin] utilize a weighted tool to identify the hands-on needs of the members based on physical and cognitive functioning?

Chris Duff: At Care Wisconsin, staff do not use a weighted tool to complete risk assessments with members. Instead, providers complete a comprehensive assessment, including a risk assessment, on individual members during preliminary screenings to best determine their physical and cognitive function. These assessments are repeated regularly to note changes in members over time. Members are then stratified into categories of risk across the health plan. This stratification allows the health plan to prioritize levels and immediacy of care management needs. This process is similar across many health plans. Care Wisconsin goes an additional step, seeking leadership and review from their Medical Director, and input from the care managers in identifying members needing more intensive care management. A thorough risk profile, including input from the interdisciplinary care team (IDT), helps to stratify members to best meet their needs and distribute health plan resources accordingly.

Q3: How did you get past resistance to change in a large system?

Chris Duff: The best approach to overcoming organizational resistance to change will vary based on the culture and the leadership of the organization. For instance, Care Wisconsin is an organization that prides itself on embracing change throughout their system. Having this mindset in their culture can help to support innovation at all levels. A key to addressing resistance to change that all organizations may face is to first engage leadership, starting at the executive or senior management level. Once leadership is engaged and committed, the involvement of staff throughout the organization in developing a plan can help to reduce resistance.