



OPEN MINDS

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Using A Meta-Leadership Approach For Value-Based Social Services



By Monica E. Oss

One of the executive competencies that is increasingly important for health and human service executives is meta-leadership—the ability to create strategic linkages with organizations outside of your own for the benefit of shared outcomes (see [Meta-Leadership In Action](#)). This concept goes beyond collaboration (which is part of the equation) to more formal relationships with objectives and results that are critical to organizational success.

Earlier this year, I had the opportunity to learn more about how meta-leadership can be applied to value-based reimbursement. The West Michigan case study, [Building An Organization That Can Out-Perform The Competition: Value-Based Reimbursement & Performance Management](#), was presented at The 2018 *OPEN MINDS* Children's Services Executive Summit in the session, by Kristyn Peck, Chief Executive Officer of the West Michigan Partnership for Children (WMPC) and Nancy Rostoni, State Administrative Manager, Performance Based Child Welfare System, Michigan Department of Health and Human Services (MDHHS).

This initiative is about meta-leadership at two levels. First, there is a partnership among a group of provider organizations serving children that has a unique relationship with the MDHHS. WMPC is a non-profit in Kent County formed as the lead agency for a case rate funding model for foster care through a contract. WMPC is a consortium of five private child-placing non-profit provider organizations in Kent County, Michigan: Bethany Christian Services, Catholic Charities West Michigan, D.A. Blodgett-St. John's, Samaritas, Wellspring Lutheran Services. WMPC has more than 40 additional

subcontracted providers of residential, counseling, parent support, domestic violence, and other services (see [Status Of Performance-Based Contracting Model](#)).

In October 2017, MDHHS transferred approximately 810 foster care cases to WMPC, with a reimbursement model that included a case rate and specific performance measures. The case rates—including all child welfare services for residential, foster care, and adoption, but not Medicaid-funded services, are front-loaded, semi-annual payments starting at \$22,600 for first six months then decreasing from there.

1. Payments 1 & 2 (year 1): Above calculated average cost per case
2. Payments 3 & 4 (year 2): At calculated average cost per case
3. Payments 5+ (year 3+): Below calculated average cost per case

Contracting and Payment

- MDHHS will contract directly with the WMPC for all case management activities and the WMPC will, in turn, contract with child placing agencies and direct service providers.
- The WMPC will be responsible for ensuring its contracted providers are meeting the requirements laid out in its contract with MDHHS.
- The contract between the WMPC and MDHHS will outline federal outcome measures as well as a program improvement policy to support achievement of outcomes.
- MDHHS will pay the West Michigan Partnership for Children (WMPC) a case rate for each child under WMPC case management responsibility.
- The WMPC will manage costs in accordance with the fixed case rate.

WMPC Performance and Quality improvement team meets with the provider organization managers monthly to discuss key performance indicators, data quality, outcome measures and quality improvement plans. WMPC has seen placements of youth in residential settings—the most expensive line item—decrease by four percentage points from October 1, 2017 to August 20, 2018. Other key performance indicators where there are steady positive trends throughout the year WMPC has been in operation include:

1. 94% worker-child monthly contact, up from 90%
2. 66% sibling monthly contact, up from 61%
3. 88% case plan completion timeliness, up from 86%
4. 88% worker-child return home contact, up from 66%



Nancy Rostoni

The message on the day—it takes a long time to develop this kind of arrangement, but it's significant when it happens. Ms. Rostoni explained the background of laying the groundwork in Michigan, noting that child welfare is a state-administrated, state-run system, and health care services are state administered and county run. They brought health out from the human services umbrella, and Kent county 100% privatized in foster care. She explained that while historically they didn't have data, in 2014,

they implemented a statewide tele system that gives them the data they need.



Kristyn Peck

Ms. Peck shared what this work looked like during the forming of WMPC:

WMPC worked collaboratively with our community to develop our mission, vision, and values. We conducted listening sessions and focus groups to ensure we understood the change the community wanted to see. We've been able to undertake this initiative with relative ease because our community shares the

belief that all children deserve safety, belonging, and the opportunity to flourish. And we believe that we are all responsible for our community's children.

WMPC and MDHHS validated and refined the data for quality assurance reviews and case record being shared between Michigan Statewide Automated Child Welfare Information System (MiSACWIS) and Mindshare Technology with the goal of developing dashboard reports for performance measures.

Additional Performance Measures for FY19 Subcontract

The number of children placed through community-based foster care in the most family-like setting will increase by three percentage points until at least 94 percent of children are placed in community-based care annually.

50 percent of children will transition from institutional placement to community-based placement within nine months of placement into residential care and will not re-enter residential care within twelve months.

The number of children placed in relative care will increase by six percentage points each year until at least 35 percent of children are placed in relative care annually.

Each provider will license the number of foster homes in Kent County needed to meet their benchmark as identified by the Kent County AFPRR licensing calculator.

Each provider will increase face-to-face contact by the assigned case worker with parents of children who have a permanency goal of reunification by 12 percentage points until at least 85 percent of parents have face-to-face contact monthly.

As

the health and human service system looks to incorporating social services into the value-based arrangements, I think this meta-leadership model is one to keep in mind. This move will require a different set of financial and program design strategies and are tied to a “non-traditional” set of relationships between provider organizations and payers. Increasingly, I think we will see the “vendor” model that dominated both fee-for-service contracting, and managed care network reimbursement replaced by unusual and interdependent operational and financial partnerships like these. For more on meta-leadership in health and human services, check out:

1. [Meta-Leadership In Action](#)
2. [Creating Public/Private Partnerships: Making Meta Leadership Work](#)
3. [The ‘Melting’ Value Chain](#)
4. [Adaptable Standardization-In Service Of Mission?](#)

5. [Meta-Leadership In Action: Making Provider Organization Collaborations Work](#)
6. [Creating Innovative Partnerships With Managed Care Plans](#)
7. [Best Practice Meta-Leadership: A Framework For Leadership Effectiveness](#)
8. [Meta-Leadership Framework For Leadership Effectiveness](#)
9. [Moving Leadership From Complicated To Complex](#)
10. [Collaboration, Connectivity & Complex Leadership](#)

For more on the issues for children with complex needs, mark your calendars for October 28, 2019 in Philadelphia for [The 2019 OPEN MINDS Children's Services Leadership Summit](#). Our new summit agenda and faculty will be posted soon. For more on last year's summit, check out [The Five Key Drivers Of Change In The Children's Service Market](#), [Meeting The Challenge Of New Service Lines](#), and [Value/Performance Based Contracting: Meeting The Dual Requirements Of Expected Outcomes & Cost Effectiveness](#).

