



LTSS Care Coordination:

How We Can Help

How Care Coordination Connects Members to Positive Outcomes



MCCCN

MASSACHUSETTS CARE
COORDINATION NETWORK

MCCN brings a wealth of experience and a commitment to coordinating care for MassHealth enrollees with complex lifelong needs. We partner with children, adults up to age 65, and their families to better manage their health and well-being, and improve their quality of life.

The MCCN Long Term Services and Supports (LTSS) Community Partners are a network of community-based health care and human services organizations experienced in providing long-term services and supports. Through outreach and engagement; LTSS care coordination, planning, and choice counseling; care team participation; supports for transitions of care; health and wellness coaching, and connections to social services and community resources, knowledgeable MCCN staff help eligible Members and their families navigate the complex system of LTSS care in Massachusetts.

MCCN LTSS Care Coordination Can Help Members lead healthy and independent lives in their own communities by connecting them to the appropriate and impactful long-term services and community resources in the following six key qualifying areas:

- **Individuals with Intellectual and Developmental Disabilities Including Autism**
- **Individuals with Brain Injury or Cognitive Impairments**
- **Older Adults, Up to Age 65, with LTSS Needs**
- **Children & Youth, Aged 3-21, with LTSS Needs**
- **Individuals with Complex Long-Term Services and Supports, and Behavioral Health Needs**
- **Individuals with Physical Disabilities**





Individuals with Intellectual and Developmental Disabilities Including Autism

25-year-old Matt has a developmental disability and lives at home with his mom, Pam, through Adult Foster/Family Care (AFC). AFC provides daily assistance with personal care and case management oversight in a caregiver's home. As Matt's caregiver through AFC, Pam receives ongoing training, regular nursing visits to monitor Matt's health, and

periodic assessments of Matt's activities of daily living such as eating, bathing, and dressing. Pam is appreciative of the AFC supports that are affording her the ability to provide optimum care for Matt in her home.

How MCCN Can Help: As an adult with developmental disabilities, Matt is eligible for MCCN LTSS Care Coordination. An appointed care coordinator would develop and administrate a care coordination plan tailored to his needs. Matt's plan could include connections to community-based recreation services, skills training for volunteer or vocational opportunities, referrals to assistive technology, advocacy forums to promote self-esteem and independence, and hourly or overnight respite supports that offer Matt or Pam time away from home. With all of this and more, MCCN's LTSS Care Coordination has access to a vast network of services for Matt and Pam to round out Matt's care at home and in the community.



Individuals with Brain Injury or Cognitive Impairments

Carrie, 27, is a vibrant and determined survivor of traumatic brain injury sustained in an auto accident in 2013. Since that life-changing event, she has been recovering with the help of her case manager who helps coordinate her clinical and rehabilitation teams.

Carrie benefits from care coordination to help keep her connected to community-based social activities she enjoys. She also accesses workforce skill development and training, working toward her cosmetology license.

How MCCN Can Help: Through community-based rehabilitation, Carrie identifies goals and the steps needed to achieve them. As an enrollee with MCCN LTSS Care Coordination, Carrie's goals would be addressed through Care Planning and Choice Counseling. Her LTSS Care Coordinator would find the resources related to Carrie's goals and assist her in making the right choices to meet her needs. As Carrie improves through rehabilitation, LTSS Care Coordination would help her transition to the next level of service. For example, Carrie may become eligible for an independent living option, one of her goals. Her LTSS Care Coordinator could help her navigate the various residential options, and make the desired connections within her community.



Older Adults, Up to Age 65, with LTSS Needs

Jean has mobility disabilities and serious health conditions. She lived in her daughter's inaccessible, second-floor apartment and was faced with many challenges and hadn't been independently mobile for years. With her well-being compromised, Jean and her family sought case management for ease into a more independent and mobile lifestyle.

Jean's case manager helped her receive intensive peer support, advocacy, community access, medical care, and cognitive behavioral therapy. Through hands-on training and new-found confidence, Jean learned to use public transportation. She found an accessible, first-floor apartment in which to live independently.

How MCCN Can Help: Looking to her future, MCCN LTSS Care Coordination would help Jean with her transition into independent living. Using Choice Counseling, Jean's care coordinator would develop an integrated care plan that would reflect Jean's new lifestyle—considering potential employment, and supporting activities of daily living. Pulling from MCCN's extensive network of resources, Jean could secure skills training for employment in a field of interest, create a schedule with locations of community-based activities, and make lists for groceries, medications, and other essentials. With MCCN LTSS Care Coordination, independence is attainable, opportunities are available, and the outcomes are remarkable.



Children & Youth, Aged 3-21, with LTSS Needs

Sherri relies on specialized case management for her daughter, Rachel, aged 19, who has Canavan disease, a rare debilitating and progressive condition. Rachel, who was diagnosed when she was just eight months old, has limited vision, seizures, and is not able to speak or control her movements.

For 18 years, Rachel experienced as normal a life as possible at home. When Sherri needed minor surgery, however, she realized that caring for Rachel on her own had become too much. She needed assistance navigating the complexities of Rachel's health care, therapy, and education in the family's school district.

How MCCN Can Help: With MCCN's LTSS Care Coordination, Sherri and Rachel would receive Choice Counseling, seeking the best resources available. Advocacy, community-based access, and assistive technology are just a few of the many connections available to Rachel's family through MCCN's community partners. Family Support Centers offer networking with other parents and guardians who can relate to Sherri's journey—every enrollee has one, and MCCN LTSS Care Coordination offers countless care connections that enrollees, families, and loved ones can discover along the way.



Individuals with Complex Long-Term Services and Supports, and Behavioral Health Needs

Leah was diagnosed with chronic mental illness and appointed a case manager who assessed her strengths and needs, building trust upon which to develop a course of action. Leah began receiving a continuum of support, including connections to housing and a local food pantry.

Leah was also referred to a recovery-oriented, therapeutic Adult Day Treatment Center for mental illness, which changed her life. In a group setting, Leah improved the functional skills essential to maintain independent daily living—learning how to rebuild relationships and connect back to her community. Most important, she learned to manage the symptoms associated with her mental illness and engage in meaningful activity. Leah's success in this coordinated treatment approach allowed her to heal.

How MCCN Can Help: With a refreshed, positive outlook, Leah has a number of choices through MCCN LTSS Care Coordination that can lead to exciting opportunities in her life. LTSS Care Coordinators offer Choice Counseling to empower enrollees and their families to make the best decisions for their optimum care. Through Choice Counseling, Leah can select the best social, vocational, advocacy, and living needs to keep her recovery on track and her happiness in check.



Individuals with Physical Disabilities

Kelly has been certified in advanced computer numerical control (CNC) training, qualifying her as an accredited CNC operator. The training is a workforce-readiness program of the Massachusetts Manufacturing Extension Partnership (MassMEP). Kelly, who has Spina Bifida and needs physical assistance, is the first individual to complete the rigorous CNC training through this new partnership to train bright, inspired individuals with disabilities for manufacturing careers.

Kelly has always been good at math and technology, so when she learned about the training program, she applied—and scored high on the qualification exams. With her certification achieved, Kelly is working to secure competitive employment in her community.

How MCCN Can Help: MCCN's person-centered LTSS Care Coordination supports the abilities of us all. Through individualized Care Planning and Choice Counseling, LTSS Care Coordinators pull from an extensive network of resources to provide the best possible supports to meet each enrollee's needs. From health care to skills training, assistive technology to workforce readiness & employment, enrollees like Kelly can pursue their dreams, with the coordination of their health and well-being in the experienced hands of MCCN LTSS Care Coordinators.

MCCN Affiliated Partners

- **Seven Hills Family Services** sevenhills.org
- **Advocates** advocates.org
- **Brockton Area Multi Services (BAMSI)** bamsi.org
- **Horace Mann Educational Associates (HMEA)** hmea.org
- **The Boston Center for Independent Living (BCIL)**..... bostoncil.org
- **BayPath Elder Services** baypath.org
- **Additional subcontractors are located throughout the state**

LTSS Care Coordination:

Making Long Term Services and Supports a Reality
for the Children and Adults Who Need Them



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