

Innovation Workgroup Report

1. Recommended the State Study and Support a State Program of All-Inclusive Care for the Elderly (PACE) Program

A Medicare program and Medicaid state option that gives community-based care and services to people 55 or older who otherwise would need a nursing home level of care. PACE covers all Medicare- and Medicaid-covered care and services, and anything else the health care professionals in your PACE team decide you need to improve and maintain your health. This includes prescription drugs and any medically necessary care.

Resources Needed:

- Fund a study to assess feasibility of PACE program in South Dakota for approximately \$65,000;
- Add language to SDCL and Administrative Rules for PACE programs; and
- Amend the State Medicaid Plan to elect PACE as a voluntary state option and seek CMS approval.

2. Recommend Funding for Technology Grants

Technology is one of the key factors that will help long term facilities to care for more patients using less resources. This can include telehealth, health and position monitoring, and remote room control including windows and lights. Technology grants would allow providers to apply for funds to add impactful technology for their staff and residents. The appropriation would go to the Department of Human Services who would assess proposals for use of the technology grants. The grants would then go to any long-term facilities following a successful application. The Department of Human Services would be required to give regular reports on who is using the grants and how the grants are being used. Improvements in technology can help long-term facilities monitor patients using less resources while improving the patients in long term care.

Resources Needed:

- Appropriate \$5 million to the Department of Human Services to administer “Technology grants” for long-term care providers.

3. Recommend Improving the Dakota at Home Resources Registry

The Dakota at Home registry is a registry that anyone in South Dakota can use to find specific services for long term care. For the registry to be effective, it needs to be up to date and easy to use. The Dakota at Home registry is not up to date and lacks search functionality. An appropriation to the Department of Human Services would allow the department to contract with a vendor to create a registry that will be an improvement to the current Dakota at Home registry. These improvements include a continuously updated list of services and a searchable database. This would allow people to connect to the facilities that they need easier and quicker.

Resources Needed:

- Allocate \$200,00 to allow the Department of Human Services to contract with the vendor to create and regularly maintain a single registry of all home and community-based services.

4. Recommend Add-On Payments and Behavior Program Concerns

Currently, facilities are provided compensation for taking on extraordinary cases that would otherwise go into the Human Services Center. However, this program is underutilized with only about 140 residents using this program. The proposal would require the Department of Human Services to provide a report on utilization, rates, barriers to utilization, and any recommendation to improve and streamline the process. By understanding the rates and identifying the problems, the legislature can enact solutions to those problems.

Resources Needed:

- Legislation to require the Department of Human Services to provide a report to the legislature on the utilization and rates of add-on payments for extraordinary care and behavior programs.