

# Multi-Assistance Center Demonstration Project

As Required by Section 17.31, Article IX,

**Senate Bill 1** 

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### **Executive Summary**

Section 17.31 of Article IX under the 2022-2023 General Appropriations Act (GAA), (Senate Bill (S.B.) 1, 87th Legislature, Regular Session, 2021) appropriated \$7.5 million in funding for the biennium to the Health and Human Services Commission (HHSC) to support a demonstration project providing comprehensive medical, therapeutic, and non-medical services to adults and children with special needs. HHSC was required to use the funding to assist a demonstration project utilizing a one-stop service model that provides on-site services to adults and children with special needs in Bexar County and the south Texas region. The demonstration project was also required to include staff serving as single points of contact to coordinate support between clients requesting services and service providers.

Section 17.31 requires HHSC to submit a report to the Legislative Budget Board and Governor by August 31, 2023, detailing a review of the demonstration project and outlining best practices to implement the model elsewhere in the state. HHSC is also required to identify and pursue opportunities to use any available federal or other non-general revenue source of funds to implement this project.

This report details a review of the demonstration project, including challenges faced in the early operational period and data on who the project has served. Additionally, the report outlines best practices, including the one-stop model, the electronic health record system being utilized and single point of contact coordination.

HHSC competitively procured the multi-assistance center demonstration project and awarded a single contract to The Multi-Assistance Center at Morgan's Wonderland (the MAC) in San Antonio, Texas, named for the new Multi-Assistance Center building located at and operated by the owners of Morgan's Wonderland fully inclusive theme park. Despite initial challenges, the demonstration project has grown over the course of the reporting period, July 2022 through April 2023. As the provider's capacity to provide services has increased, the program has been able to increase the number of people served.

Initial evaluations of this model display community engagement in and benefit from the care model specializing in services to this population and having availability of multiple service types in one physical location. While demonstrating early promise, replicating this model successfully will require building a network of community and stakeholder support.

### Introduction

The multi-assistance center demonstration project serves adults and children with special needs in Bexar County and the south Texas region by making various services available, including medical, non-medical, and therapy services, in a single location and managing the care of people and their support systems through staff serving as single points of contact for people receiving services.

#### This report includes the following:

- 1. Demonstration Project Review
  - A. MAC Services Walkthrough
  - B. Demonstration Project Data Review
- 2. Best Practices for Implementation
  - A. One-Stop Accessibility
  - B. Electronic Health Record System
  - C. Single Point of Contact Coordinators
  - D. Implementation Planning
  - E. Community Support

### **Background**

The multi-assistance center demonstration project is designed to be a one-stop model that provides therapeutic, medical, and nonmedical services for people of all ages who have special needs. HHSC competitively procured the multi-assistance center demonstration project by issuing a Request for Application in January 2022. HHSC awarded the contract to the Multi-Assistance Center at Morgan's Wonderland (the MAC) on June 15, 2022, with a start date of July 1, 2022.

The MAC facility is a multistory complex located in San Antonio, Texas. The facility was built in 2022 with special attention towards eliminating physical barriers for people who require specific accommodations in accessing treatment. The facility is designed to provide a calming environment, incorporating pink noise and padded flooring. Sensory-friendly exam rooms support people with special needs to acclimate themselves to the building.

The care model implemented by the MAC is a collaborative model, bringing together community service providers to serve Bexar County and other south Texas counties. The MAC developed a framework to initiate, coordinate and refer people to the most appropriate service providers. Most of the providers are located within the building; however, some clients with more complex issues are referred to other community providers.

Service delivery is designed to be comprehensive and collaborative, resulting in improved care coordination for people. A Single Point of Contact Coordinator (SPOCC) is assigned to each client and remains the primary point of contact throughout the person's participation at the MAC. The SPOCC's role is to support and guide people with special needs to receive appropriate services for which they are eligible. The MAC provides the SPOCCs with training on a comprehensive assessment used to identify areas of need. The SPOCCs identify and provide practical solutions to a person's needs, whether therapeutic, medical, or nonmedical. Training encompasses six weeks of in-person and online training. The SPOCCs monitor client caseloads to ensure clients receive the services they need.

People receive an array of services depending on their specific needs. Medical services could include primary care clinics and specialty clinics, including optometry, ophthalmology, audiology, dental, and mental health services. Therapeutic services could include physical therapy, occupational therapy, speech

therapy, Applied Behavior Analysis therapy, orientation and mobility, vision therapy, and a guide dog readiness program.

### **Demonstration Project Review**

### **MAC Services Walkthrough**

The multi-assistance center demonstration project serves people who meet the Local Intellectual and Developmental Disability Authority priority population outlined in Title 26 Texas Administrative Code Section 304.102(19), as well as people of any age with a long-term impairment of cognitive, sensory, motor, or communication functions—either congenital or acquired—that is not readily rehabilitated.

For this demonstration project, people seeking the MAC's services undergo a prescreening assessment generated in an electronic health record system to determine eligibility, which then notifies a SPOCC and prompts them to complete the intake process. During this intake process, the SPOCC inputs information detailing therapeutic, medical, and non-medical areas of need.

A SPOCC is then assigned to schedule and complete, with participation of the client and authorized representative (if applicable), a person-centered care plan that guides the client and their family to ensure needed services are provided in a timely manner. To ensure collaboration and communication, the care plan is accessible to everyone involved in providing services to the client through the MAC. The SPOCC regularly reviews the care plan, updating appropriate referrals for monitoring as new needs are identified. SPOCCs work with on-site partners and other community providers to assess the client's current needs before initiating referrals, with the aim of eliminating duplication of services through collaborative efforts. People then receive services according to their care plan at the MAC or are referred out to the community if their needs are more complex.

The care plan plays a crucial role in guiding how people will navigate the array of services available at the MAC. Some services include primary and specialty care clinics, optometry, dental, mental health, physical therapy, legal assistance, and food assistance, all available in a single location. This diverse range of services enables people and their support system to access the necessary services efficiently. Moreover, the custom electronic health record system implemented for the MAC allows all providers in the facility to access a client's record, ensuring a seamless exchange of information and coordinated care.

### **Demonstration Project Data Review<sup>1</sup>**

#### **Assessments**

Assessments include initial intake and screening of people. The number of assessments conducted by the MAC shows a positive trend as time progressed. The gradual increase shown in Chart 1 is due to delays in hiring SPOCCs and the holiday season. At its peak during the reporting period, the MAC provided 310 assessments, in both March and April 2023, to new people during their initial intake.

Chart 1. Number of Assessments Conducted. See Table 1 below for detail.

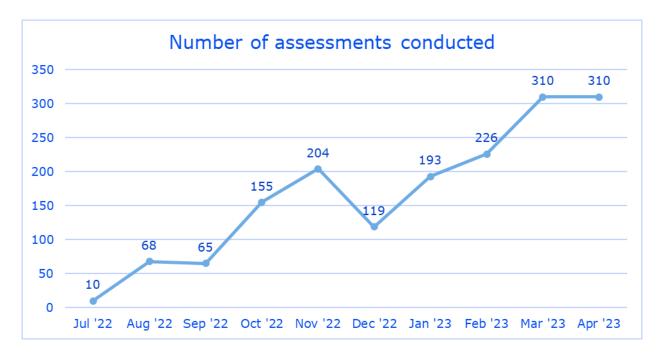


Table 1.

Months	Number of assessments conducted
Jul-22	10
Aug-22	68
Sep-22	65
Oct-22	155
Nov-22	204

<sup>&</sup>lt;sup>1</sup> Data reported in this section is derived from monthly activity reports submitted to HHSC by the MAC.

Dec-22	119
Jan-23	193
Feb-23	226
Mar-23	310
Apr-23	310

#### **Medical**

Medical services include primary care clinics and specialty clinics, including optometry, ophthalmology, audiology, dental, and mental health services. The data in Chart 2 shows an increase in the number of unique people who received on-site medical services. The decrease in April 2023 occurred during the period in which the MAC reported a focus on staff training activities. The number of other medical services referrals made by physicians at the MAC is trending alongside the provision of medical services.

Chart 2. Number of Medical Services Provided. See Table 2 below for details.

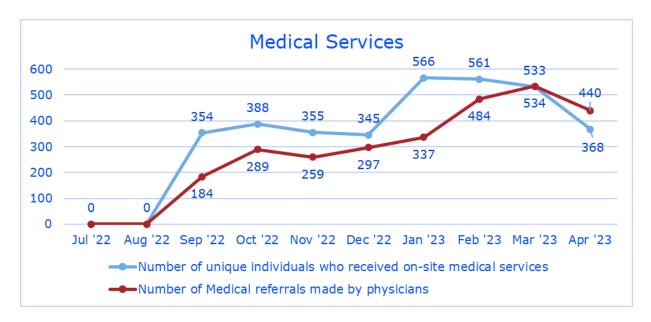


Table 2.

	Number of unique individuals who received on-site medical services	
Jul-22	0	0
Aug-22	0	0
Sep-22	354	184

Oct-22	388	289
Nov-22	355	259
Dec-22	345	297
Jan-23	566	337
Feb-23	561	484
Mar-23	533	534
Apr-23	440	368

#### **Dental**

Dental services include oral checkups, regular cleanings, and cavity treatments. Data in Chart 3 also shows a trending increase in the provision of dental services.

Chart 3. Number of On-Site Dental Services and Outside Referrals Made by On-Site Dentists. See Table 3 below for details.

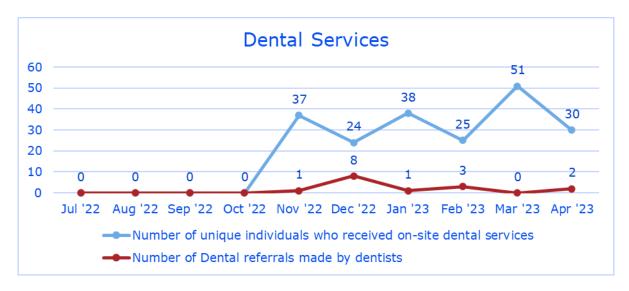


Table 3.

Months	Number of unique individuals who received on-site dental services	Number of Dental referrals made by physicians
Jul-22	0	0
Aug-22	0	0
Sep-22	0	0
Oct-22	0	0
Nov-22	37	1
Dec-22	24	8

Jan-23	38	1
Feb-23	25	3
Mar-23	51	0
Apr-23	30	2

#### **Therapy**

Therapy services include physical therapy, occupational therapy, speech therapy, Applied Behavior Analysis therapy, orientation and mobility, vision therapy, and a guide dog readiness program. Chart 4 shows an upward trend in the provision of therapy services per month. At its peak, the MAC provided therapy services to 141 people in one month.

Chart 4. Number of People Receiving Therapy Services and MAC Referrals to Outside Therapy Services Made. See Table 4 below for details.

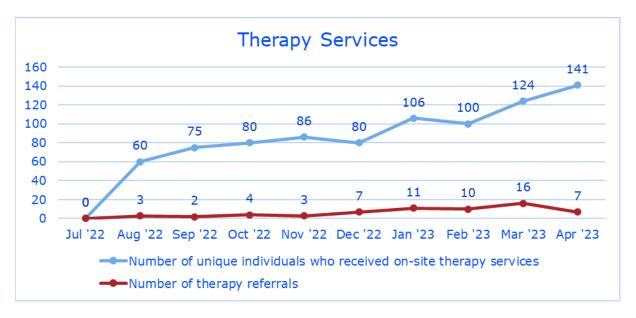


Table 4.

Months	Number of unique individuals who received on-site therapy services	Number of therapy referrals
Jul-22	0	0
Aug-22	60	3
Sep-22	75	2
Oct-22	80	4
Nov-22	86	3

Dec-22	80	7
Jan-23	106	11
Feb-23	100	10
Mar-23	124	16
Apr-23	141	7

Performance data reflects a slow start to the provision of services to people, due to: a ramp-up period for the new program; initial vacancies for SPOCC positions, some of which lasted until March 2023; and facility construction taking longer than planned, which led to delays in operations and initiation of partner services in the MAC's shared spaces.

### **Best Practices for Implementation**

Reporting requirements in the 2022-2023 GAA, S.B. 1, 87th Legislature, Regular Session, 2021 (Article IX, Section 17.31) include "outlining best practices to implement the model elsewhere in the state." This section includes several of the multi-assistance center demonstration project's best practices that may be considered if this same model were implemented elsewhere in the state.

### **One-Stop Accessibility**

A one-stop model has several advantages. It provides people and their support system with the convenience of receiving multiple services in one location, saving valuable time and reducing transportation costs. The model also fosters an environment of coordinated, comprehensive care, which can lead to improved treatment outcomes. Providers under this model can also share information and discuss the person's needs with each other, which may help with the development of more effective care plans.

### **Electronic Health Record System**

The MAC uses an integrated computerized program as its electronic health record system. The SPOCCs use the electronic health record system to perform basic functions of registering eligible clients in person and online, documenting intakes and assessments, identifying needs, making referrals to on-site partners, updating records with progress notes, and recording documentation. The goal of the system is to integrate with on-site partners and community service organizations serving eligible people. While basic functions are currently available to providers who are actively serving the person, future enhancements to the system will result in improved efficiencies in the overall coordination of service delivery which include improvements to the interface and exporting data for analysis.

The MAC designed its electronic health record system to reduce the duplication of information provided by the person and of services received by allowing access to all providers who are actively serving the person. The primary benefit of this electronic health record is that all records for the array of services a person receives at the MAC are immediately accessible to anyone providing or planning for a care to people receiving MAC services.

### **Single Point of Contact Coordinators**

While the MAC's number of SPOCCs was nearing full strength by the end of the reporting period, in April 2023, the most recently hired SPOCCs were not yet up to a full caseload. During the reporting period, July 2022 to April 2023, having one person assist as the primary point of contact has been a promising practice to increase efficiency in the provision of an array of services to a person. Once assigned, SPOCCs remain the primary point of contact throughout the person's participation at the MAC.

SPOCC staff meet weekly to review all clients and the status of each person's referrals to various partner organizations. During the weekly meeting, SPOCC leadership assesses case management responsibilities and the impact it has on current caseloads. Adjustments are made based on the needs identified by SPOCC staff and workload capacity. Another best practice for implementation would be to expand data collection efforts of SPOCCs to evaluate their effectiveness. By collecting a wider range of data, valuable insights can be made regarding the SPOCCs performance and can help make informed decisions to optimize operations.

### **Implementation Planning**

When a contractor is awarded a grant for services, establishing infrastructure and the staffing of qualified professionals is time-intensive, and ensuring contractors have support and sufficient time to perform these duties can reduce early project delays. Contractors providing health and health-related services often require electronic health record systems that must be implemented with care to ensure a successful launch and adequate security of sensitive information. This process can be lengthy, often requiring significant time to input data, train staff, and refine the system.

Given these factors, other demonstration projects would benefit from having a sufficient operational window to build infrastructure, hire and train staff, and establish their electronic health record systems before beginning full implementation.

### **Community Support**

The MAC has extensive depth and breadth of support from local, regional, state, and national levels. Furthermore, the MAC has attracted attention from media, celebrities, and other supporters. Building a network of community support,

including diverse funding opportunities and financial support, is a best practice to ensure the success of future projects.

### Conclusion

During the reporting period, the MAC developed processes to provide service delivery through the one-stop model. This includes the development of a specialized electronic health record system, clarification of SPOCC roles and responsibilities, and collaboration with multiple community partners, collectively promoting an efficient service delivery model.

The demonstration project model has established that there is community demand for the services, with some service numbers increasing dramatically between the start and the end of the data reporting period included in this report, July 2022 and April 2023, respectively. The MAC reports higher-than-expected demand for some services, such as the demand for dental services, and developed plans focused on expansion of targeted space and staff to address these areas. The MAC has noted that it expects to be fully operational during the fourth quarter of 2024.

At the time of publication, the 2024-2025 GAA, House Bill 1, 88th Legislature, Regular Session, 2023 (Article II, Section 85), appropriated \$7.5 million in each state fiscal year for the 2024 and 2025 biennium to continue this demonstration project in Bexar County and the south Texas region.

## **List of Acronyms**

Acronym	Full Name	
HHSC	Health and Human Services Commission	
MAC	Multi-Assistance Center at Morgan's Wonderland	
S.B.	Senate Bill	
SPOCC	Single Point of Contact Coordinator	