**Establish Value and Impact in Care Continuum**

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| **Outcome** | **Tactic (Action Steps)** | **Timeline** | **Responsible** |
| 1. Achievement of priority quality measures    1. Priority clinical quality measures (Clinical Quality Team) | 1. Develop a plan for sharing comparison data with members. 2. Develop a plan for quality improvement education. 3. Develop 2 priority clinical quality measures | 1st Q 15  2nd Q 15  1st Q 15 | Clinical Quality Team/Education Manager |
| 1. Increased business relationships with other continuum providers, such as physicians, hospice and palliative care organizations, long term care associations | 1. Determine appropriate organizational structure for physician champions 2. Recruit physicians that are engaged with home care to be MHCA Physician Champions 3. Discuss collaboration with MNHPC 4. Continue regular meetings with LeadingAge MN and CareProviders of MN | 1st Q 15  2nd Q 15  1st Q 15  On-going | Kathy  Kathy  Hospice & PC Team/ Kathy  Kathy/Staff |
| 1. Improved image and public support of home care    1. Positive coverage of home care in media outlets    2. Public relations support and plan to shift image of MHCA members | 1. Develop MHCA public relations plan    1. LeadingAge MN collaboration    2. Contract with public relations consultant 2. Create & manage media list across regions 3. Create & disseminate case studies that highlight the value of home care 4. Develop “Members Making a Difference” and share stories with media 5. Offer Crisis Management webinar | 3rd Q 14  4th Q 14 - 1st Q 15  1st Q 15  2016  1st Q 15  2nd Q 15 | Kathy/Jason  Kathy  Jason  Jason  Jason  Education Manager |

**Influence Change for Quality Home Care**

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| **Outcome** | **Tactic (Action Steps)** | **Timeline** | **Responsible** |
| 1. Improved reimbursement    1. Achieve improved reimbursement    2. Achieve targeted increases/re-basing for nursing and therapies    3. Standardized billing and procedures | a.1 Participate in campaigns to increase reimbursements  b.1 Gather data for rate increases & develop messaging  b.2 Develop and act on an advocacy plan  c.1 Determine billing and procedures advocacy priorities  c.2 Schedule regular health plan meetings – MCHP  c.3 Develop talking points for the health plan meetings that are scheduled | 1st Q 15  4th Q 14  3rd Q 14 – 1st Q 15  1st Q 15  4th Q 14  TBD | Legislative Team  Jay Jones/ Kevin Goodno  Legislative Team  MA/MC Team/Kathy  Kathy  MA/MC Team/Kathy |
| 1. Providers equipped for compliance and success    1. Develop compliance courses, including “101” orientation, MN licensure and Medicare CoP    2. Specialized programming in targeted member segments | Develop beginner (How to Start Home Care), intermediate and advanced level home care coursesUpdate “How to Start Home Care” websiteDevelop specialized educational plan for member segments, including Medicare, PDN, PCA, CFSS, 245D, hospice and palliative care | 2016  2nd Q 15  3rd – 4th Q 15 | Education Team/ Education Manager  Jason  Education Team/ Education Manager |
| 1. Successful legislative advocacy agenda    1. Successful adoption of 1-2 priority legislative issues    2. Resources to help members support legislative priorities | 1. Identify legislative agenda for each session. 2. Create Legislative Handbook 3. Develop member talking points for each issue 4. Post “letter to your legislator” and other templates for members on website 5. Educate members on how to successfully advocate for issues    1. Educational Session at Fall Conference 2014    2. Webinars    3. Invite legislators to provider sites for Home Care Month 6. Increase attendance MHCA Day at the Capital (Goal: 30 MHCA members) 7. Study financial feasibility of automated government relations messaging system 8. Develop patient awareness materials for members | 3rd Q - 4th Q every year  2016  4th Q 14  1st Q 15 - 2016  4th Q 14  1, 3rd Q 15  3rd – 4th Q 15  Post Construction  2016  2016 | Legislative Team/ Kevin Goodno  Jason  Jason/Anni Simons  Jason/Anni Simons  Jason  Kevin Goodno/ Anni Simons  Jason  Jason  Jason  Jason |

**Organizational Health and Sustainability**

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| **Outcome** | **Tactic (Action Steps)** | **Timeline** | **Responsible** |
| 1. Satisfied, continuous staff    1. Consistent staff at 2 and 3 year mark | 1. Re-institute Retirement Plan 2. Revisit compensation package 3. Revisit staff roles & clearly identify primary responsibilities; update job descriptions 4. Quarterly review of strategic work plans 5. Staff Continuing Education    1. Home Care visits    2. Staff attend Beginner Home Care Educational Course    3. Association related courses    4. Office/business courses | 1st Q 15  3rd – 4th Q 14  4th Q 14  4th Q 14  4th Q 14 – 1st Q 15  TBD  2015 as budgeted  2015 as budgeted | Kathy  Kathy  Kathy  Kathy  Kathy/Staff |
| 1. Achievement of revenue and membership goals    1. Achievement of budgeted revenue goals (and corresponding staff bonuses)    2. Established membership goals (satisfaction, recruitment, retention) | 1. Create membership recruitment & retention campaigns 2. Develop membership and revenue goals 3. Study dues model 4. Create new membership materials 5. Highlight member benefits in e-news 6. Develop promotion plan for RCTC 7. Review member benefits; enhance if feasible 8. Develop plan for Region development 9. Refine and strengthen team structure 10. Enhance website functionality: communication, ease of use 11. Enhance & distribute member survey 12. Develop plan for Business Partner Member Spotlight in e-news 13. Research various business partner categories & establish priorities based on member needs 14. Review and enhance affinity programs 15. Study non-dues revenue opportunities | 2nd Q 15  3rd Q 15  1st -2nd Q 15  2nd Q 15  1st Q 15  2nd Q 15  3rd Q 15  2nd Q 15  2nd Q 15  2016  3rd Q 15  1st Q 15  3rd Q 15  2016  2016 - 2017 | Jason/Kathy  Jason  Kathy  Jason  Jason  Education Manager/ Jason  All staff  Jason  Kathy  Jason/Annie  Kathy/Jason  Jason  Jason  All Staff  Kathy |