

LTC Redesign Meeting Notes May 8, 2019

Welcome given to Call-in and In Person Attendees

### **Institutional Level of Care Assessment Redesign Project – Courtney Miller**

DHHS has kicked off an Institutional Level of Care Assessment Redesign Project and the project plan overview was discussed. The project will be completed in two (2) phases:

Phase I – Nursing facility Level of Care

Phase II – Intermediate Care Facility for the Developmentally Disabled Level of Care.

- A [dedicated webpage](#) is being designed and a link will be provided as soon as it is available.
- A Technical Advisory Group, which will serve through both phases, will have members representing the clinical, academia, provider and policy perspectives.
- Focus Group opportunities will be announced for each phase to receive feedback for both adults and children assessment tools.
  - Families, individuals in services, and advocates will be encouraged to participate.
  - DHHS will host a Statewide Stakeholder Webinar at the conclusion of each phase to provide an overview and outcomes of the project. These will be recorded and posted to the webpage.

### **National Core Indicators Aging and Adult Consumer Survey – Karen Houseman**

- Link to the PowerPoint discussed

# National Core Indicators Aging and Disabilities™ Adult Consumer Survey Nebraska Results 2017-2018

May 8, 2019

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# National Core Indicators Aging and Disabilities™

## Adult Consumer Survey

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- National Core Indicators (NCI) project is a collaboration between National Association of State United for Aging and Disabilities (NASUAD) and Human Services Research Institute (HSRI).
- National Core Indicators Aging and Disabilities (NCI-AD) data measures the performances of states' long-term services and supports (LTSS) systems and service recipient outcomes. The project officially launched in the summer of 2015 with 13 participating states.
- 25 states currently participate in the survey.
- Full national report and individual State report are available online at:
  - <https://nci-ad.org/resources/reports/>
  - The national report for the 2016-2017 was released in February 2019.
  - Nebraska's data collection started in the 2017-2018 year cycle.

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# National Core Indicators Aging and Disabilities™ Adult Consumer Survey

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- The NCI-AD Adult Consumer Survey is designed to measure outcomes:
  - Eighteen broad domains and key areas of concern.
  - These eighteen domains are comprised of approximately 50 core indicators.
  - Indicators are the standard measures used across states to assess the outcomes of services provided to individuals.
- The next slides will show a chart of the domains and indicators for this survey.

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Domain	NCI-AD Indicator
<b>Community Participation</b>	Proportion of people who are able to participate in preferred activities outside of home when and with whom they want
<b>Choice and Decision Making</b>	Proportion of people who are involved in making decisions about their everyday lives including where they live, what they do during the day, the staff that support them and with whom they spend time
<b>Relationships</b>	Proportion of people who are able to see or talk to their friends and families when they want to
<b>Satisfaction</b>	Proportion of people who are satisfied with where they live
	Proportion of people who are satisfied with what they do during the day
	Proportion of people who are satisfied with staff who work with them
<b>Service Coordination</b>	Proportion of people who know whom to call with a complaint, concern, or question about their services
	Proportion of people whose case manager talks to them about any needs that are not being met
	Proportion of people who can get in contact with their case manager when they need to
	Proportion of people who receive the services that they need
	Proportion of people who find out about services from service agencies
	Proportion of people who want help planning for future need for services
	Proportion of people who have an emergency plan in place
	Proportion of people whose support workers come when they are supposed to
	Proportion of people who use a relative as their support person
	Proportion of people who have a backup plan if their support person doesn't show up

Domain	NCI-AD Indicator
<b>Care Coordination</b>	Proportion of people discharged from the hospital or long-term care facility who feel comfortable going home
	Proportion of people making a transition from hospital or long-term care facility who have adequate follow-up
	Proportion of people who know how to manage their chronic conditions
<b>Access</b>	Proportion of people who have adequate transportation
	Proportion of people who get needed equipment, assistive devices (wheelchairs, grab bars, home modifications, etc.)
	Proportion of people who have access to information about services in their preferred language (for non-English speakers)
<b>Safety</b>	Proportion of people who feel safe at home
	Proportion of people who feel safe around their staff
	Proportion of people who feel that their belongings are safe
	Proportion of people whose fear of falling is managed
	Proportion of people who are able to get to safety quickly in case of an emergency
<b>Health Care</b>	Proportion of people who have been to the emergency room in the past 12 months
	Proportion of people who have needed health screenings and vaccinations in a timely manner (e.g., vision, hearing, dental, etc.)
	Proportion of people who can get an appointment to see their doctor when they need to
	Proportion of people who have access to mental health services when they need them
<b>Wellness</b>	Proportion of people who are living with a physical disability
	Proportion of people who are in poor health
	Proportion of people who have unaddressed memory concerns

<b>Domain</b>	<b>NCI-AD Indicator</b>
	Proportion of people who have a chronic psychiatric or mental health diagnosis
	Proportion of people who often feel sad or depressed
	Proportion of people who have a chronic condition(s)
	Proportion of people who have poor hearing
	Proportion of people who have poor vision
<b>Medications</b>	Proportion of people who take medications that help them feel less sad or depressed
	Proportion of people who know what their medications are for
<b>Rights and Respect</b>	Proportion of people whose basic rights are respected by others
	Proportion of people whose staff treat them with respect
<b>Self-Direction of Care</b>	Proportion of people who are self-directing
	Proportion of people who can choose or change the kind of services they receive and who provides them
<b>Work</b>	Proportion of people who have a paid job
	Proportion of people who would like a job
	Proportion of people wanting a job who have job search assistance
	Proportion of people who volunteer
	Proportion of people who would like to volunteer
<b>Everyday Living</b>	Proportion of people who have adequate support to perform activities of daily living (e.g. bathing, toileting, eating, etc.) and instrumental activities of daily living (e.g. preparing meals, housework, taking medications, etc.)
	Proportion of people who have access to healthy foods
<b>Affordability</b>	Proportion of people who ever have to cut back on food because of money
<b>Planning for future</b>	Proportion of people who want help planning for future need for services
<b>Control</b>	Proportion of people who feel in control of their lives

# Nebraska NCI-AD

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- 2017-2018 was the first year Nebraska participated in NCI-AD Adult Consumer Survey
- Nebraska DHHS-DDD & MLTC contracted with Munroe-Meyer Institute, University Center of Excellence in Developmental Disabilities (MMI UCEDD) at the University of Nebraska Medical Center to conduct the survey
  - This team also completes the Adult Consumer Survey for the Division of Developmental Disability.
    - ✓ 14 surveyors
    - ✓ Team trained by HSRI staff
    - ✓ Reliability checks implemented to maintain 90% reliability between surveyors and NCI Project Coordinator
- NCI-AD survey is approximately 90 questions in length with skip patterns depending on living arrangement and multiple part questions for certain indicators.
  - This survey allows for a proxy, determined on an individual case basis.
    - Proxy version includes a subset of objective questions.

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# Nebraska NCI-AD Adult Consumer Sample

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- Random sample of 672 adult participants
  - ✓ Interviewed in person
  - ✓ Verbal consent from the participant or guardian (as applicable)
  - ✓ Guardians, family members and provider support staff could be present and serve as proxies
  - ✓ Service Coordinators could not serve as proxies
  - ✓ No individuals were excluded if randomly selected and consented to participate regardless of:
    - ❖ Diagnosis
    - ❖ Behavioral concerns
    - ❖ Age
    - ❖ Preferred means of communication etc.
  - ✓ Four program populations were included in the survey sample.

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# Nebraska NCI-AD Adult Consumer Sample

➤ Program populations surveyed in year 1 of data collection (2017-2018)

Program	Number of analyzed surveys	Number of eligible participants
Aged and Disabled Waiver (A&D Waiver)	229	4,206
Traumatic Brain Injury Waiver (TBI Waiver)	17	19
Nursing Facility Institutional Services (NF)	305	6,537
Personal Assistance Services (PAS)	121	2,332

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# Demographic Tables

Table 1. Average age (reported for those under 90 years of age)

	Average Age	N
A&D Waiver	59.1	200
TBI Waiver	48.8	12
NFs	70.6	225
PAS	57.7	109
Sample Average	63.3	546

Table 2. Age: 90 years and over

	Under 90	90 and Over	Don't Know/Unclear	N
A&D Waiver	92%	7%	1%	217
TBI Waiver	86%	0%	14%	14
NFs	81%	18%	1%	277
PAS	96%	4%	0%	114
Sample Average	88%	11%	1%	622

Table 3. Gender

	Male	Female	Other	Don't Know/Unclear	N
A&D Waiver	33%	66%	0%	1%	215
TBI Waiver	86%	14%	0%	0%	14
NFs	41%	59%	0%	0%	275
PAS	39%	54%	0%	8%	114
Sample Average	39%	59%	0%	2%	618

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# Limitations of Report

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- The report contains survey results related to the quality and outcomes of LTSS in Nebraska
- This report does not establish benchmarks for acceptable or unacceptable levels of performances.
- These results can be used to guide a further look into programs.
- The charts compare average outcomes between Nebraska's programs and the state overall.
- It is important to keep in mind the differences and similarities between the programs and the participants who utilize the programs.
- The national report for the 2017-2018 cycle will be available in future.

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# In the data report

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Data for the indicators is displayed in:

- 112 graphs
- 128 tables

The following slides are random examples of the data charts found within the report.

Please view the entire report for additional information and data.

[https://nci-ad.org/upload/state-reports/NE\\_2017-2018\\_NCI-AD\\_state\\_report\\_FINAL.pdf](https://nci-ad.org/upload/state-reports/NE_2017-2018_NCI-AD_state_report_FINAL.pdf)

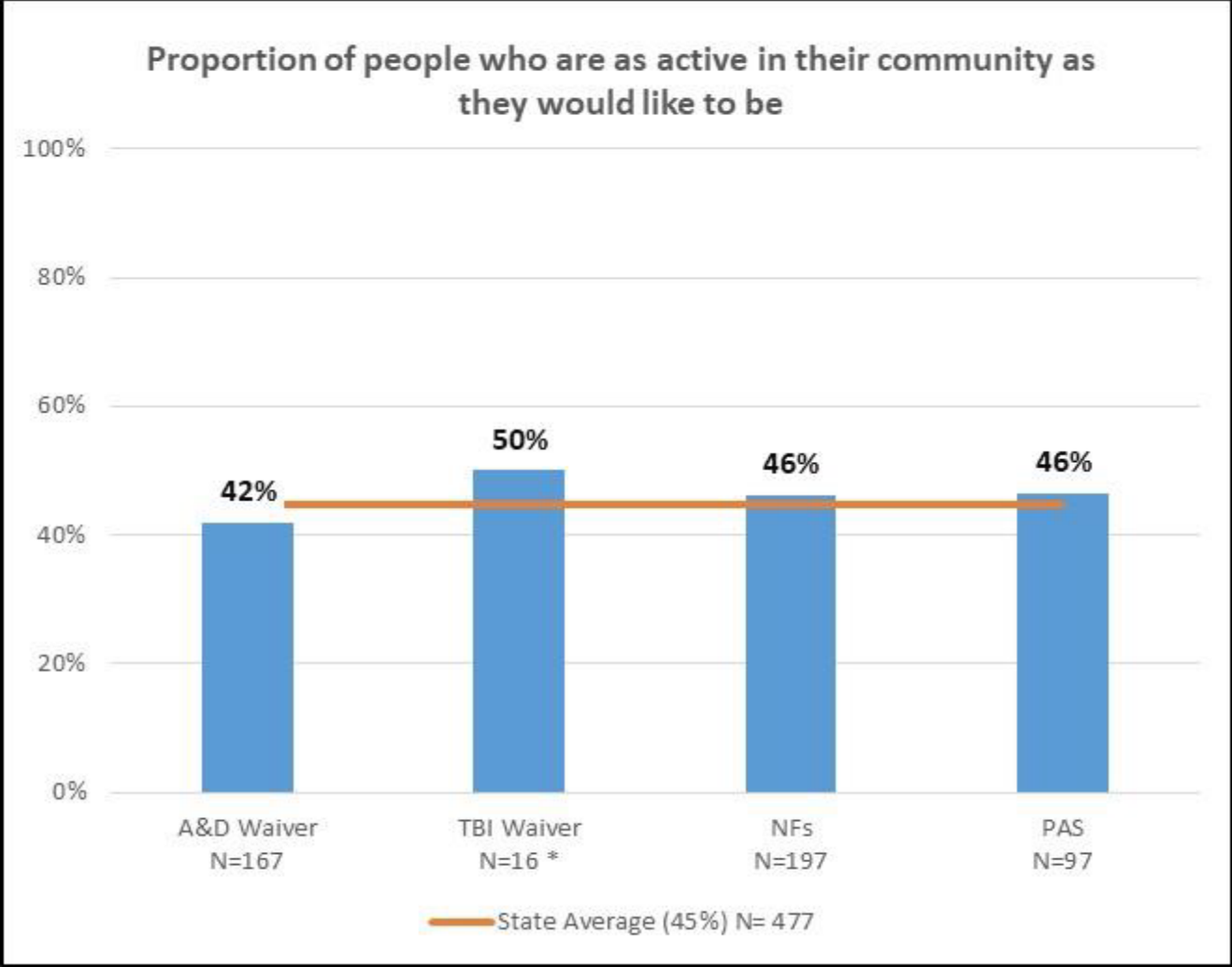
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# Community Participation



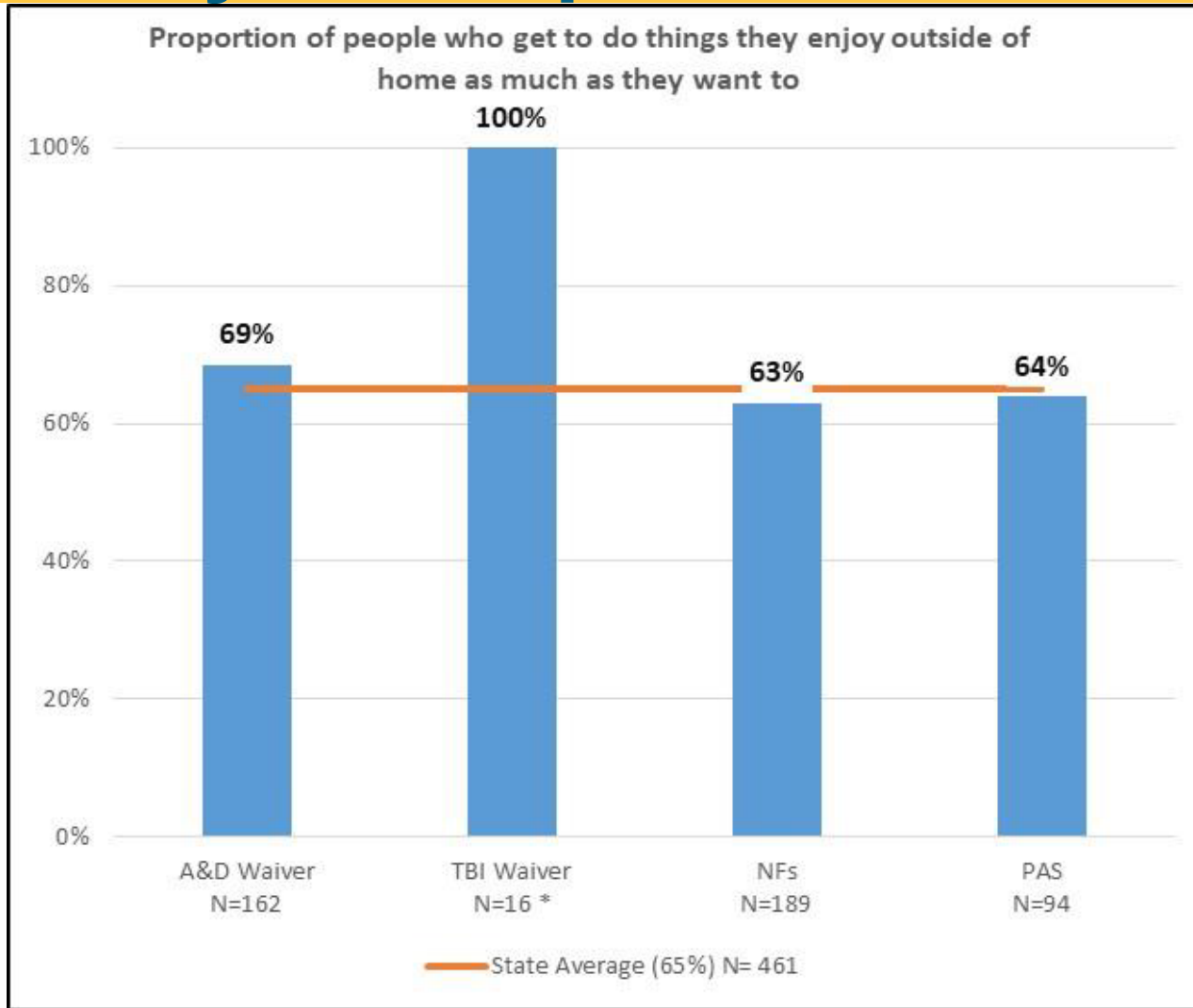
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# Community Participation



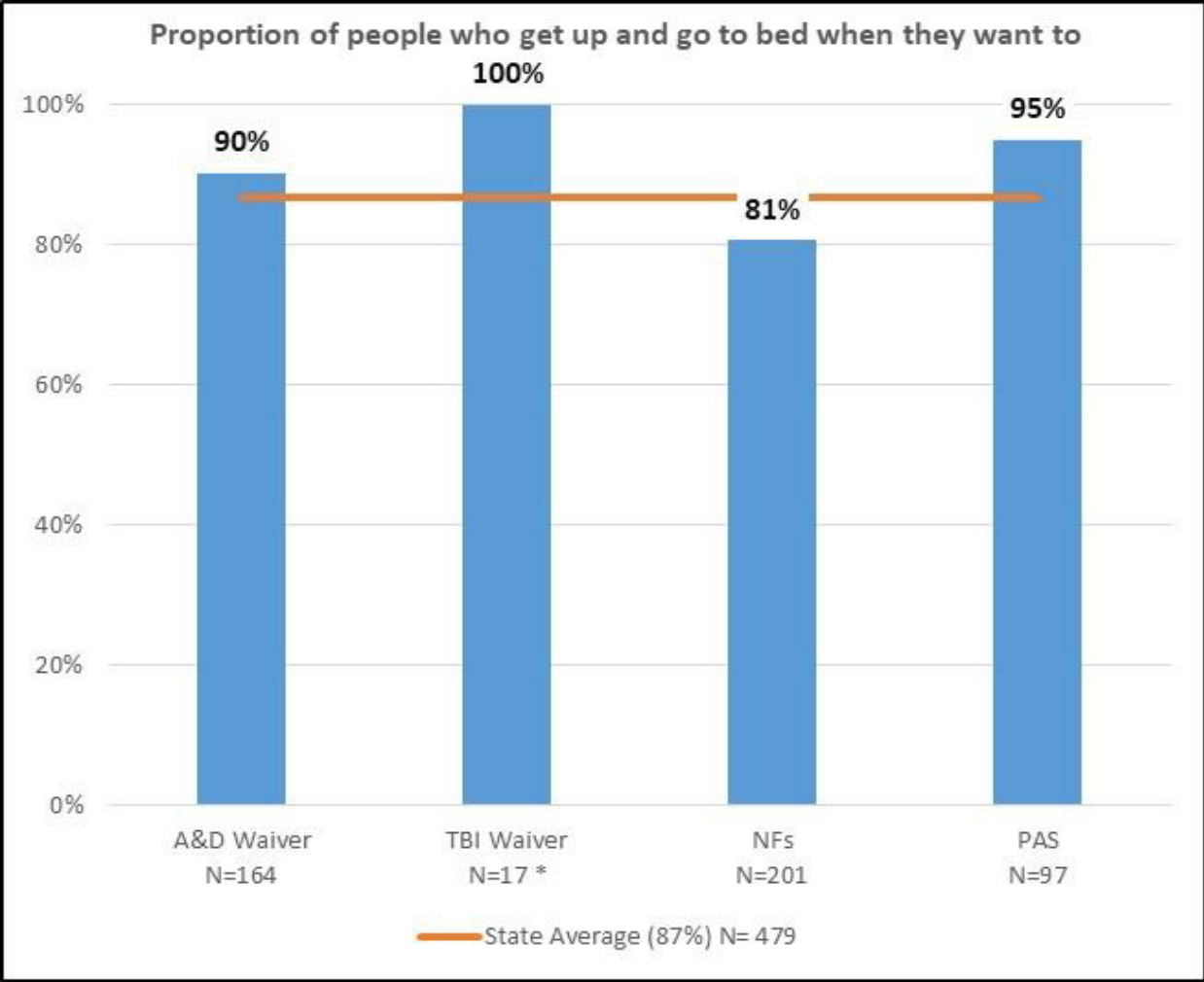
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# Choice and Decision Making



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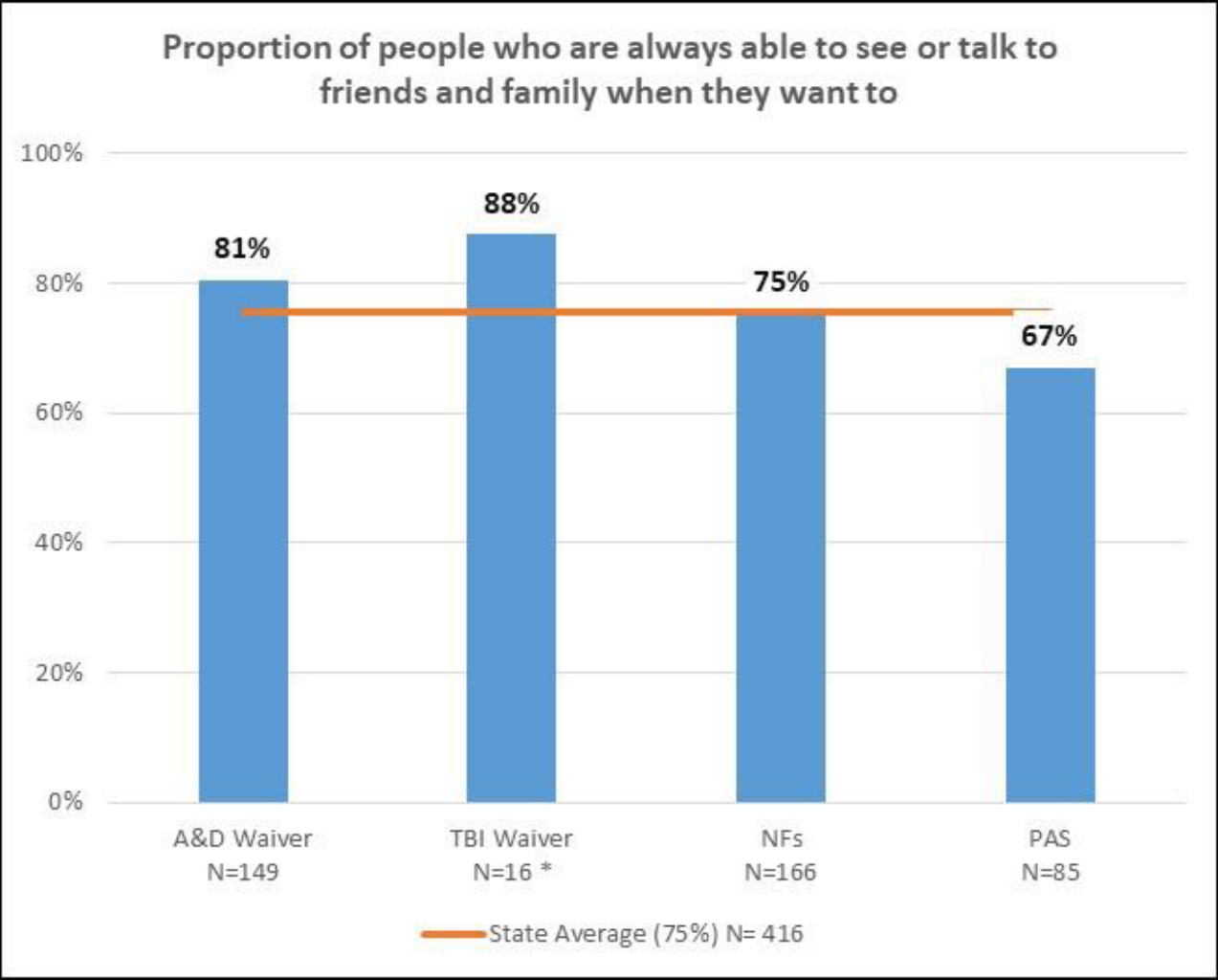
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# Relationships



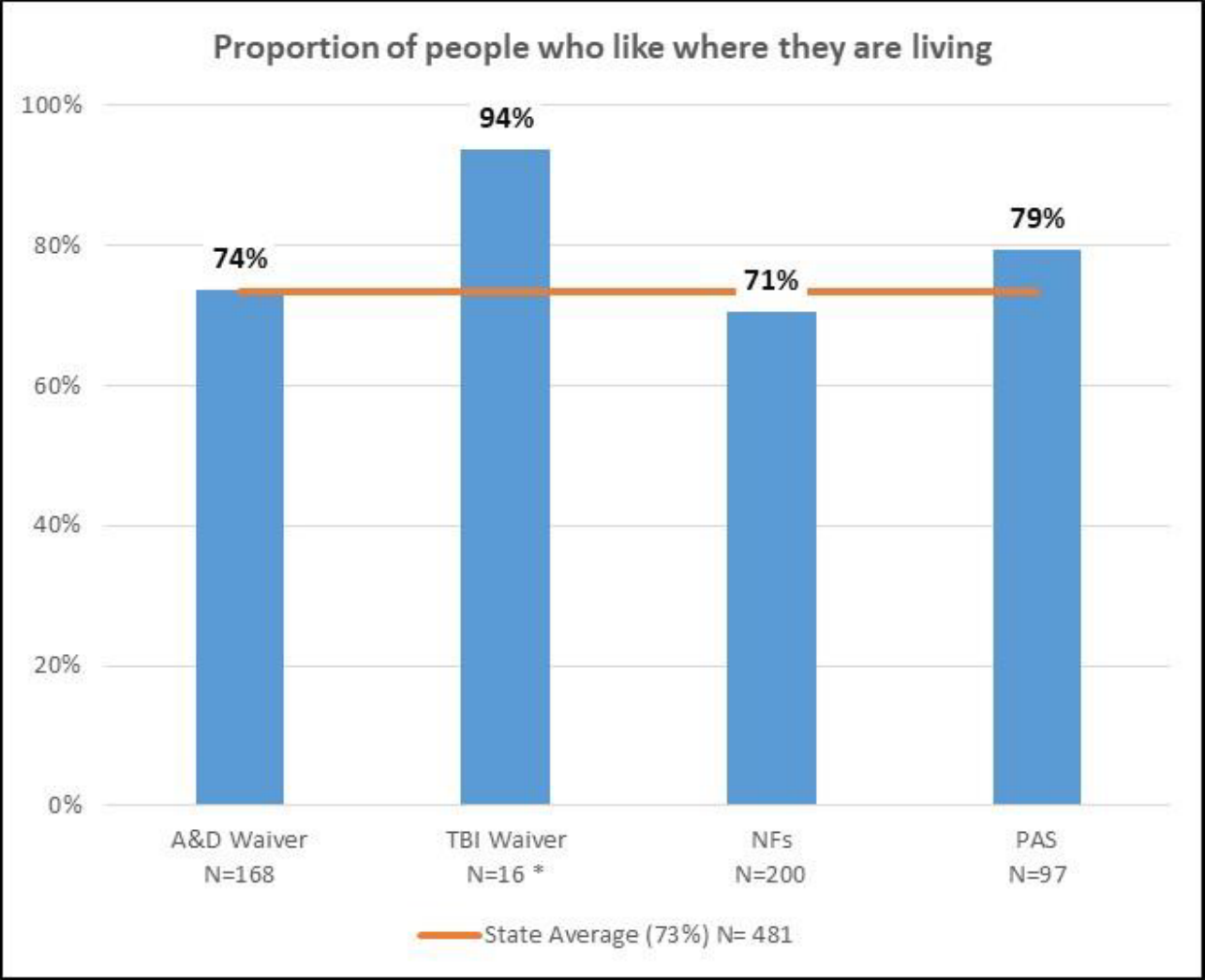
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# Satisfaction



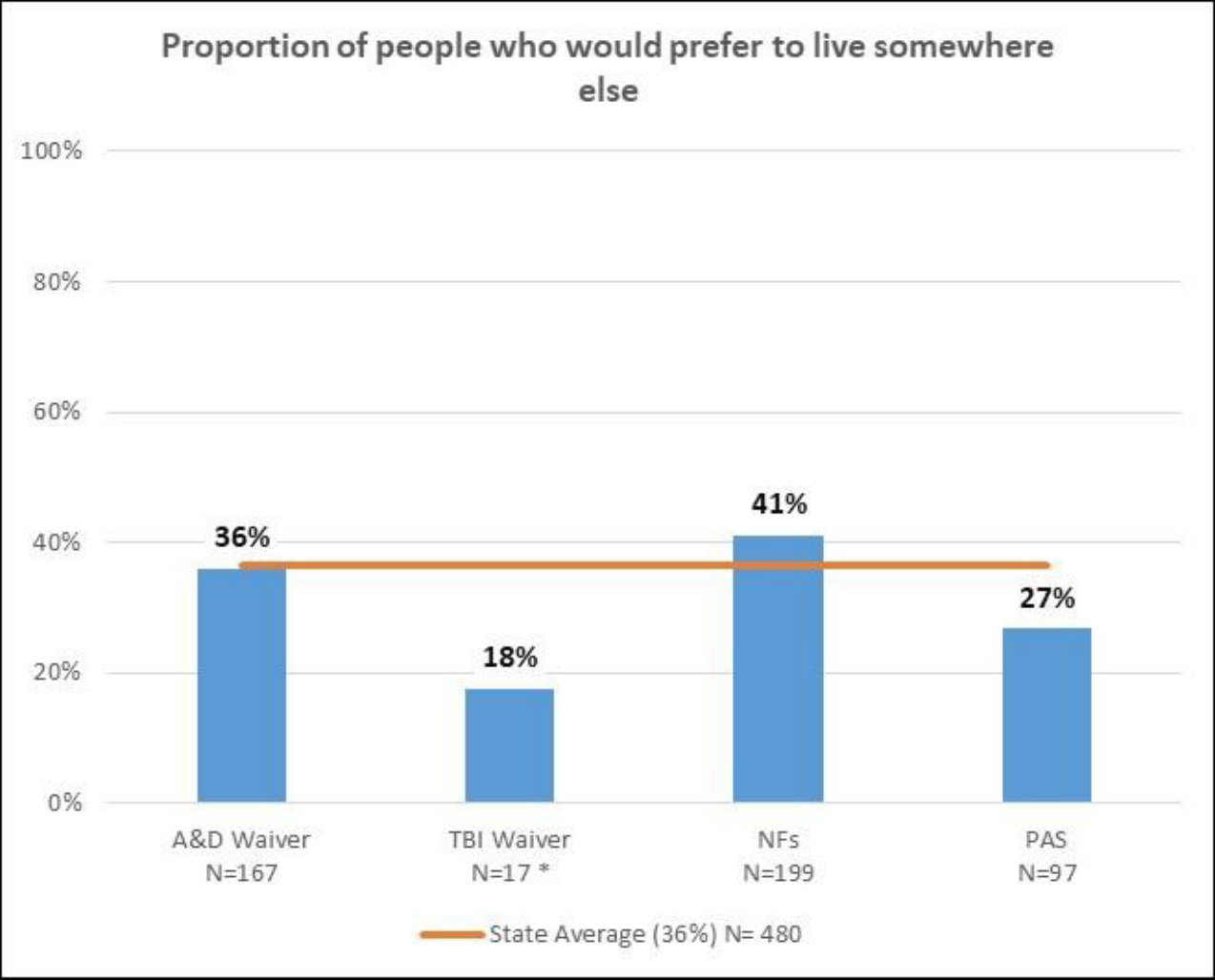
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# Satisfaction



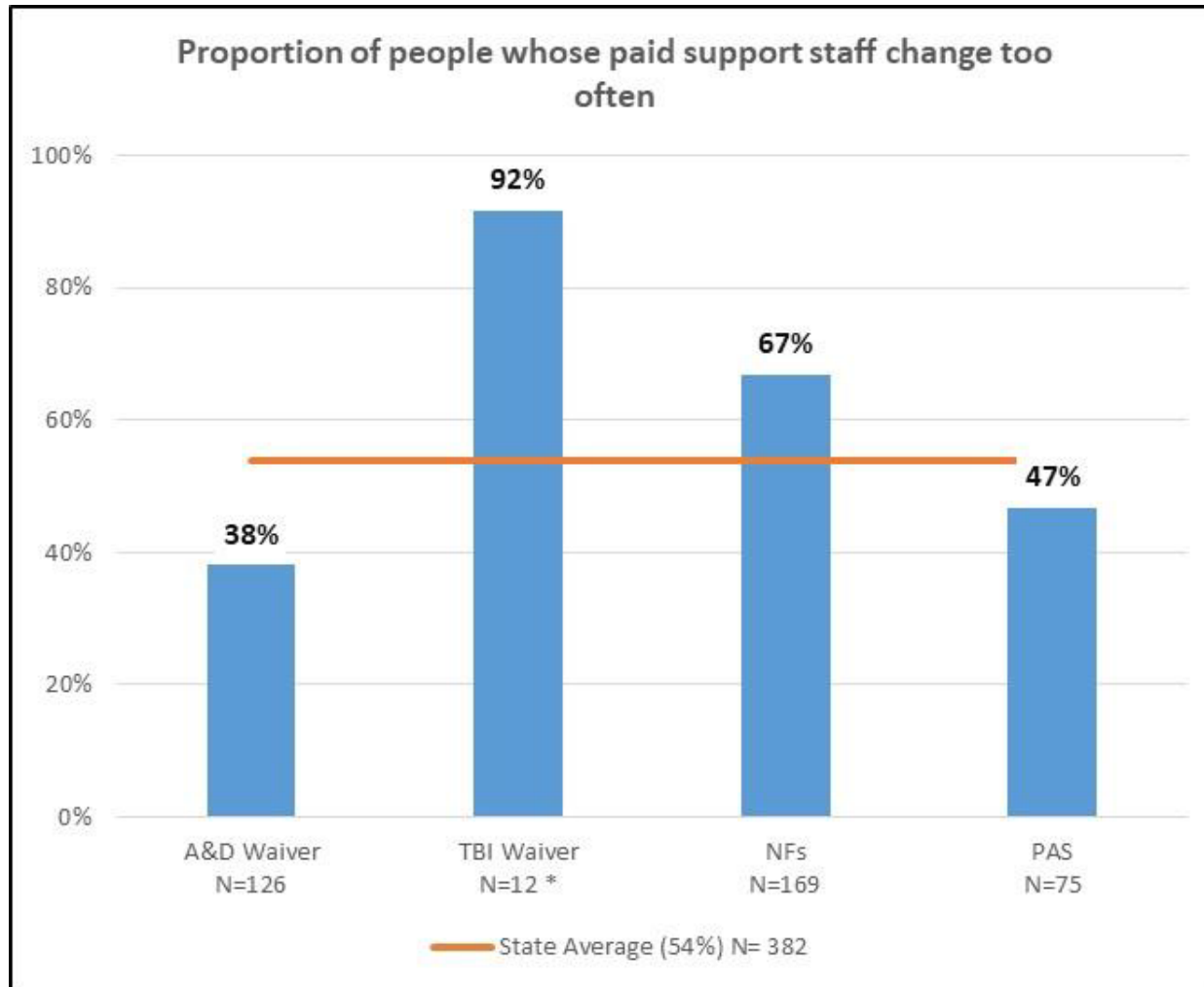
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# Satisfaction



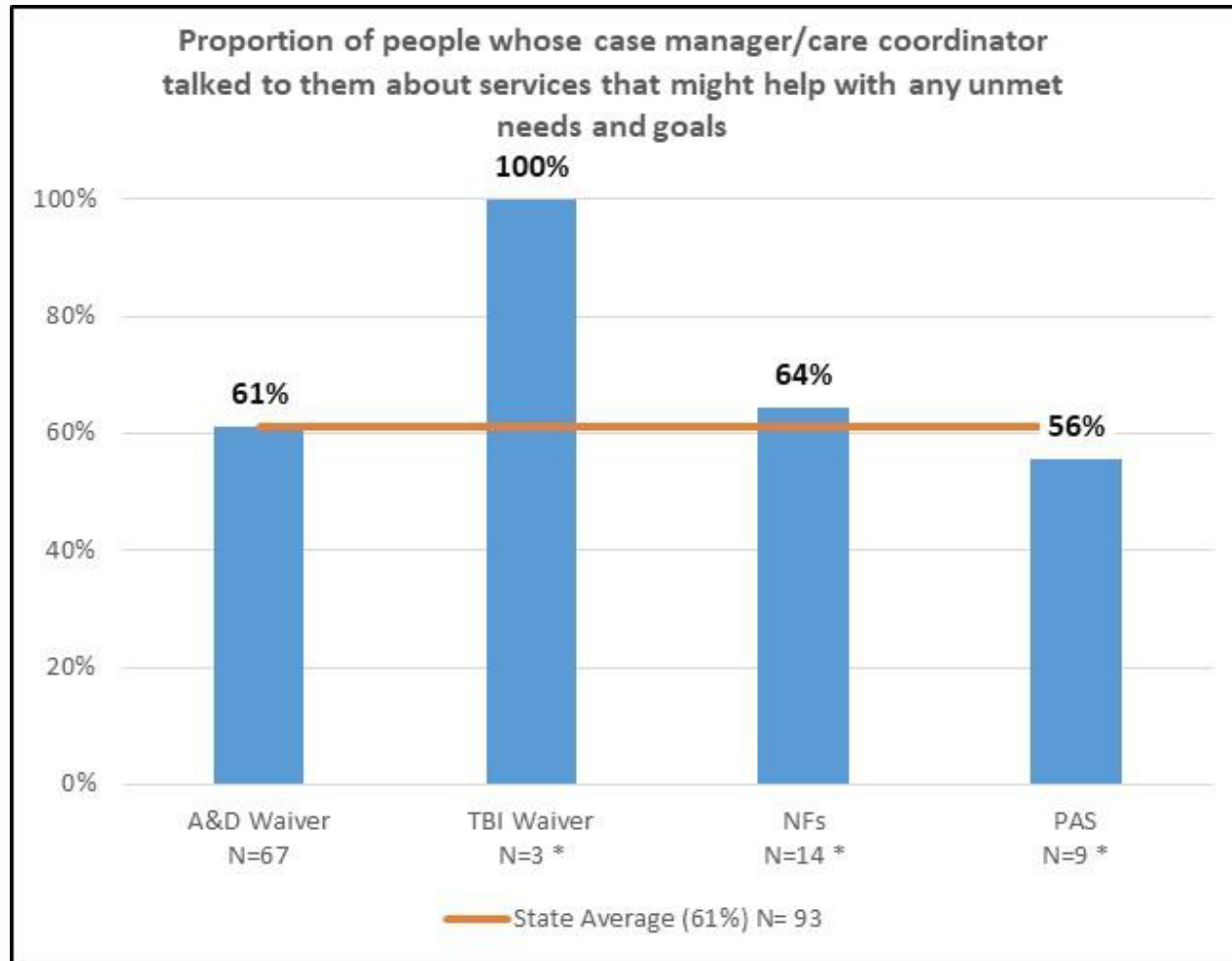
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# Service Coordination



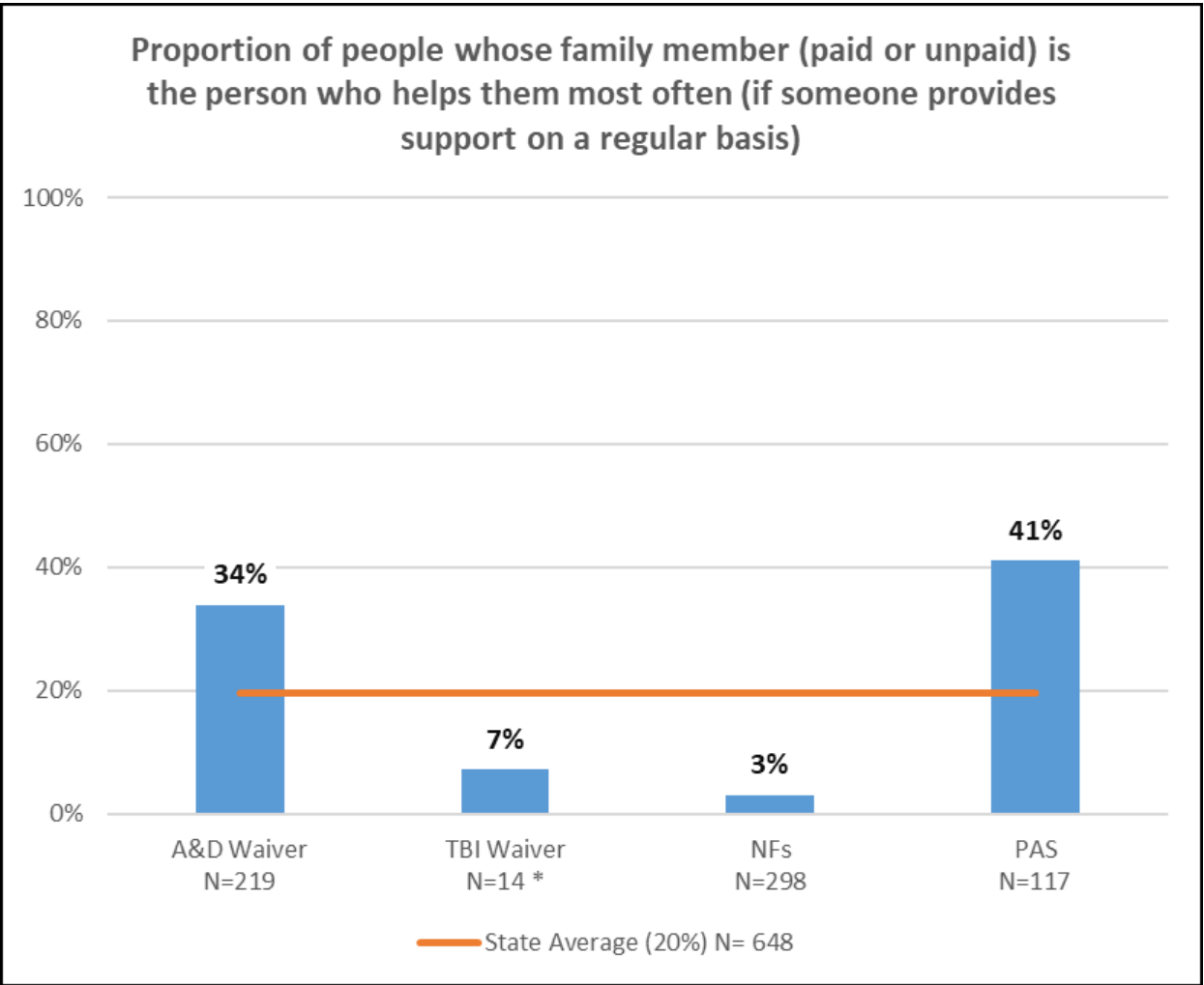
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# Service Coordination



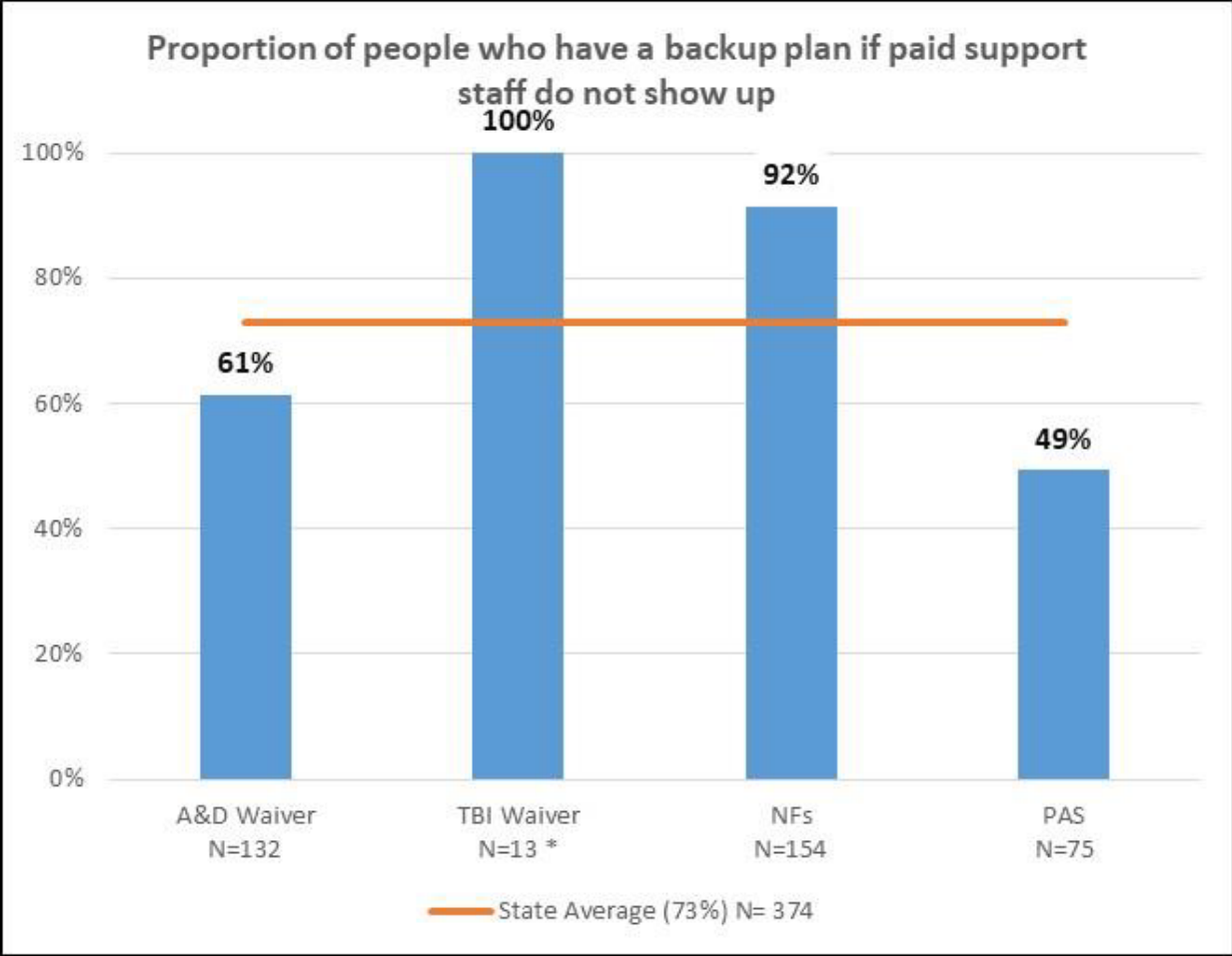
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# Service Coordination



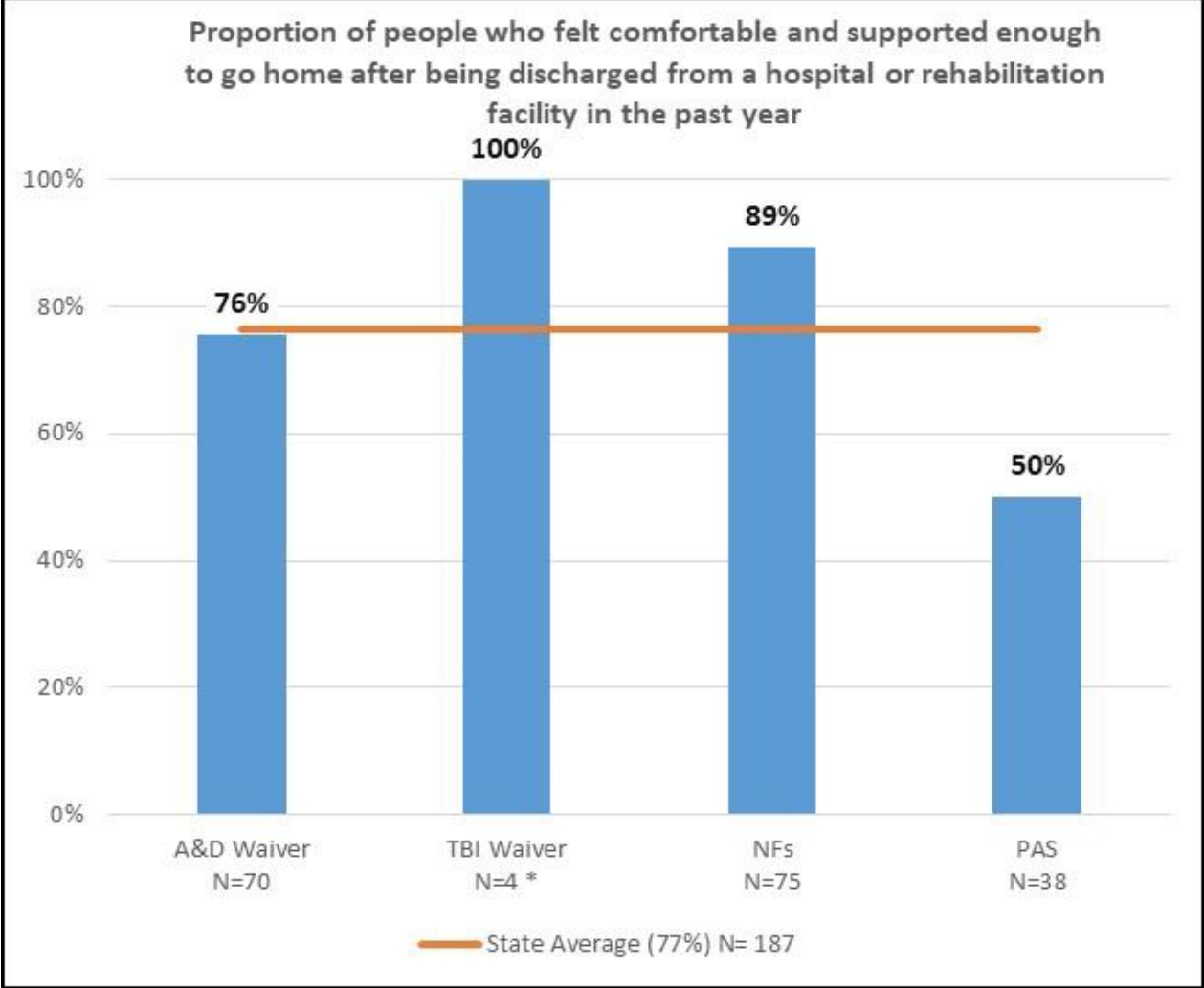
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# Care Coordination



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# Next Steps

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- NCI-AD survey data collection from year 2 (2018-2019) is near completion
  - Nursing Facilities
  - Aged and Disabled Waiver
  - Personal Assistance Services
- Planning for survey year 3 (2019-2020) in underway
- Nebraska DHHS will watch for trends in the data in the future
- When the national report is released for the 2017-2018 year, Nebraska's data will be compared to the national average

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# Questions and Comments

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### **Statewide Transition Plan – Kathy Scheele**

- Once we receive approval from DHHS, the public notice and dates for public comments will be published.
- The STP webpage will be updated with the information and most current version of the Statewide Transition Plan.

### **Aged and Disabled Waiver Amendment – Kathy Scheele**

- Update language related to compliance with the Home and Community-Based Settings Final Rule: CMS provided stock language that has been updated in Main Attachment #2: Home and Community-Based Settings Waiver Transition Plan section of the application.
- Increase the number of unduplicated waiver participant slots for all waiver years: Due to an increased number of individuals choosing home and community based services over nursing facility based service, the number of slots available in the waiver is being increased.

### **Traumatic Brain Injury – Karen Houseman**

- TBI Waiver has been Renewed
  - Expiration date October 31, 2023
- Next year we will begin discussions on possible amendments.

### **Money Follows the Person – Karen Houseman**

- The Money Follows the Person Grand Program is ending.
- Earlier this year an extension was offered for current grant awardees and the last transition will be on June 30, 2019.

### **Electronic Visit Verification – Mary McMichael**

- We are working to complete final reviews and updates to the procurement package
- Also working on completion of the CMS certification submissions
- We plan to file an extension request for post-1/1/2020 implementation once CMS provides the process and documentation expectations
- Timeline is a bit fluid pending approvals and procurement dates
  - Target procurement release summer of 2019
  - Target vendor selection in 4<sup>th</sup> quarter of 2019
  - Go-live date to be determined based on solution selected and implementation timeline required for that solution
- We will be looking for a small focus group to reflect various waivers served for ongoing input and participation for proposed:

- Communication Processes
- Training Requirements
- User Acceptance Testing
- If you believe you would want to participate in any of these facets, please send an email to the Nebraska EVV mailbox – [DHHS.MedicaidFA-EVV@nebraska.gov](mailto:DHHS.MedicaidFA-EVV@nebraska.gov)
- After the procurement is released, we will reach out to those who volunteer to see how you can best participate to provide well-rounded feedback

Stakeholder questions and comments were addressed throughout the presentations and before concluding the meeting.

Next LTC Redesign Meeting: July 10, 2019  
LLA 1:30-3:00 PM