Session Outline

- Light NCI-AD Overview
  - What is NCI-AD?
  - Implementation
- 2016-17 NCI-AD Data
  - Data slides
  - Quality implications
- State panel
  - Tennessee
  - Minnesota
  - Nebraska
- Q&A

What is NCI-AD?

NCI-AD
NATIONAL CORE INDICATORS-
Aging and Disabilities

- Quality of life and outcomes survey for seniors and adults with physical disabilities (including ABI/TBI)

- Assesses outcomes of state LTSS systems
  - Nursing homes
  - Medicaid waivers
  - Medicaid state plans
  - PACE
  - MLTSS populations
  - State-funded programs, and
  - Older Americans Act programs

- Gathers information directly from consumers through face-to-face interviews

- State-developed initiative

- Relative of the I/DD system's National Core Indicators (NCI)

- Launched June 1, 2015

2018-19 Participating States

Measures
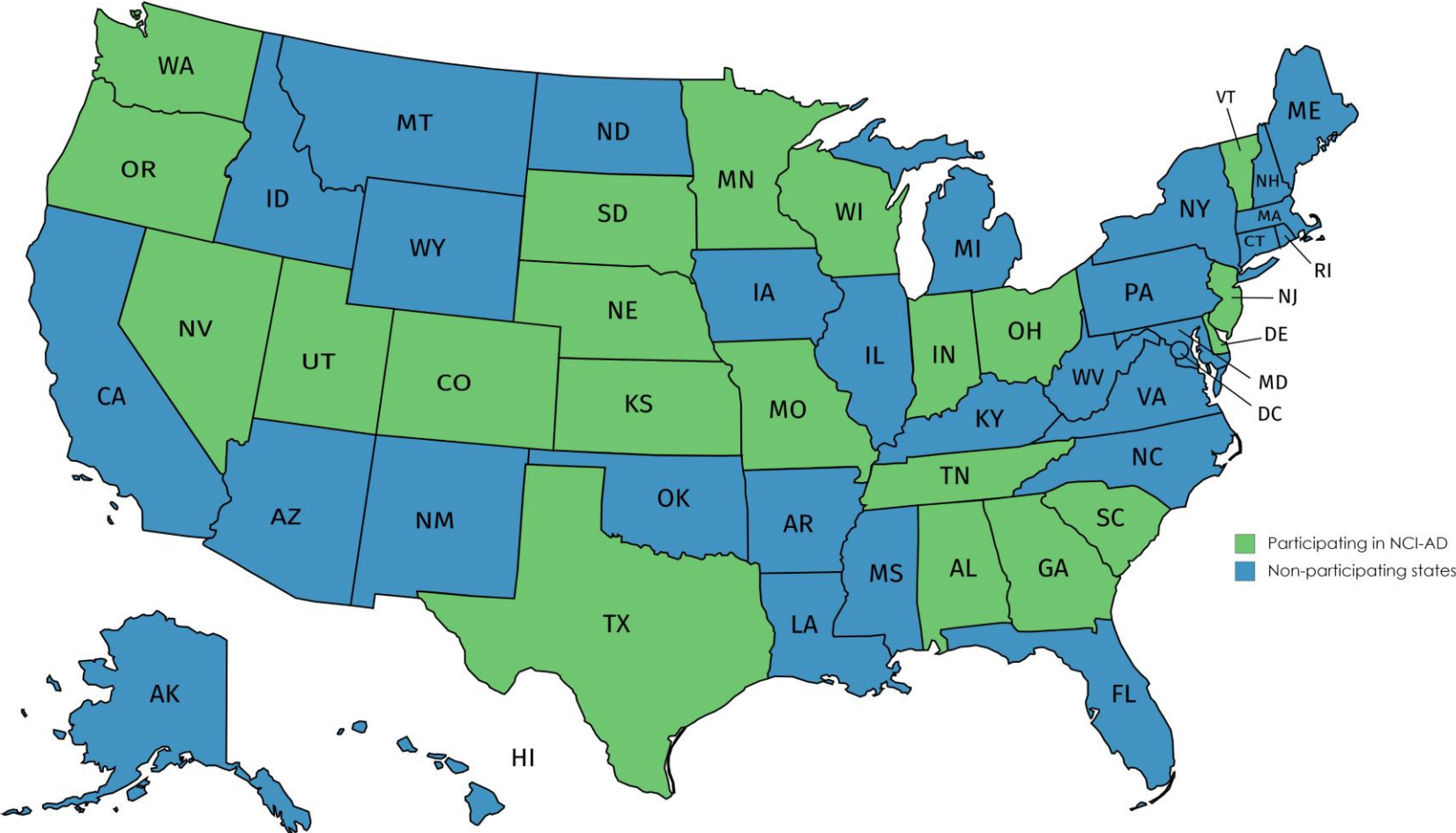
Outcome domains:

- Community Participation
- Choice and Decision-making
- Relationships
- Satisfaction
- Service and Care Coordination
- Access
- Self-Direction of Care

- Work/Employment
- Rights and Respect
- Health Care
- Medications
- Safety and Wellness
- Everyday Living and Affordability
- Planning for the Future
- Control

NCI-AD Survey Tool

- **Pre-survey Form**
  - Used only to set up interviews, for use by the interviewers
- **Background Information Section (19 questions)**
  - Consumer's demographic and personal characteristics; items derived from state's existing data to the extent possible; the rest collected by interviewer
- **Consumer Survey, full version (89 (49 proxy) questions)**
  - Includes <u>subjective</u> questions to be answered only by the consumer, and <u>objective</u> questions that can be answered either by the consumer or their proxy
  - Includes optional PCP Module (states may elect to use)
- **Proxy Version (49 questions)**
  - Includes objective questions only; rephrased to ask about the consumer
- **Interviewer Feedback Sheet**
  - Asks interviewer to evaluate the survey experience and flag concerns
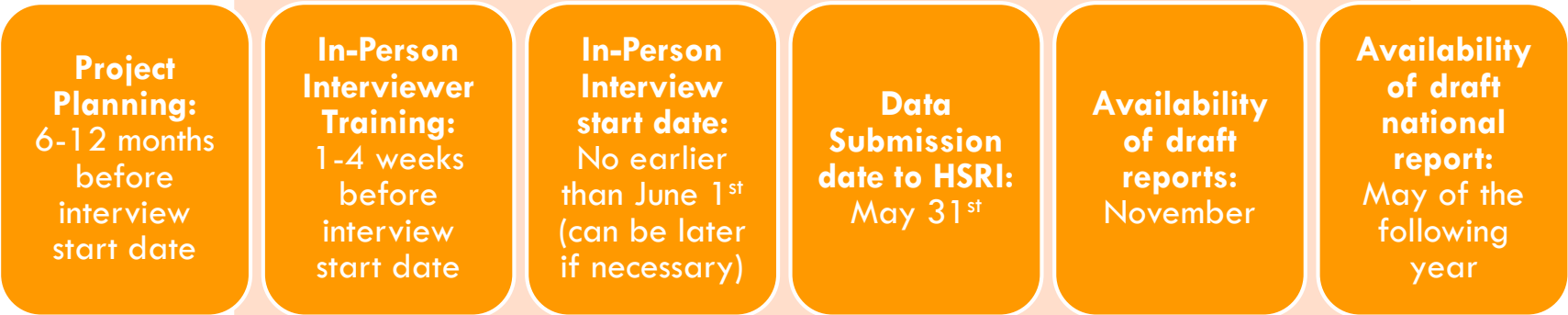- **States may add up to 10 "state-specific questions"**

NCI-AD Process

New Member States:
What's Involved

- Commit to technical assistance (TA) year and 1 year of surveying
- Develop a project team and contact state agency partners
- Begin monthly TA calls with NASUAD and HSRI
- Determine target populations and sample design (min 400 LTSS recipients)
- Hire a vendor or develop internal team to conduct interviews
- Gather contact and Background Information from administrative records
- Arrange for and participate in 1 -2 day onsite in-person interviewer training led by NASUAD/HSRI project team
- Conduct NCI-AD interviews; Enter data into ODESA to share with HSRI
- Review state report and state-to-state comparison report
- Reports published on public-facing website www.nci-ad.org

Timeline for Participation

NCI-AD
NATIONAL CORE INDICATORS-
Aging and Disabilities

| **Project Planning:** 6-12 months before interview start date | **In-Person Interviewer Training:** 1-4 weeks before interview start date | **In-Person Interview start date:** No earlier than June 1st (can be later if necessary) | **Data Submission date to HSRI:** May 31st | **Availability of draft reports:** November | **Availability of draft national report:** May of the following year |

What Sets NCI-AD Apart?

- Can be used across funding sources and settings
- Standardized implementation protocols
  - Training materials and procedures
  - Sampling procedures
  - Survey administration (e.g. proxies)
  - Data entry
- Technical assistance from NCI-AD Project Team
- Customization
  - Optional addition of state-specific questions
  - Optional Person-Centered Planning Module

What Sets NCI-AD Apart?

- Can provide state, program, and regional comparisons
  - Crosswalks to a number of NCI (ID/DD) measures
- Focuses on consumer outcomes and impact of services on quality of life
  - Goes beyond service satisfaction
- State owns—and has immediate access to—its own data
- Transparency and accountability
  - State and National reports publicly available online

Project Update: PCP module

NCI-AD
NATIONAL CORE INDICATORS-
Aging and Disabilities

NCI-AD
NATIONAL CORE INDICATORS
Aging and Disabilities™

(OPTIONAL) PCP Module

1) How involved are you in making decisions about your service plan/plan of care and the goals you want for your life?

2) Do you remember (your most recent service planning) meeting?

3) Did the (service/care planning) meeting take place at a time that was convenient to you?

4) Did the (service/care planning) meeting take place at a location that was convenient for you?

5) Did the (service/care planning) meeting include the people you wanted to be there?

6) As your service plan/plan of care was discussed during the meeting, did you feel that your preferences and needs were being heard?

7) Have you had the opportunity to review your service plan/plan of care after the meeting?

8) Does your service plan/plan of care include what was discussed in the meeting?

9) Are your preferences and choices reflected in your service plan/plan of care?

10) Do the care supports and services you receive help you live a better life? *A life you want?*

PCP Module: Development

- Focus on *THE PROCESS* OF PERSON-CENTERED PLANNING

- Review of HCBS Person-Centered Service Plan Process Requirements

- Review of current NCI questions related to PCP

- Review of additional questions added by member states related to PCP

- Development of candidate PCP items, organized into 3 broad "domains": service planning meeting, service plan, services

NCI-AD

PCP Module: Development

NCI-AD NATIONAL CORE INDICATORS- Aging and Disabilities

- Drafting of candidate questions
- Stakeholder review of draft measures and questions
  - Colorado's Community Living Quality Improvement Committee (CLQIC)
- Expert review of draft items and questions
- Drafting of response options
- Redraft, review, repeat
- Implementation: proxies not allowed
- 2017-2018 Pilot in 7 states: CO, DE, NJ, OR, TN, VT, WI

PCP Module: Pilot

- ## State 1: Waiver, OAA
  - Waiver: ~80% of responders "very involved" or "somewhat involved" in making decisions about service plan; ~75% remember last service meeting
  - OAA: ~60% of responders "very involved" or "somewhat involved" in making decisions about service plan; ~50% remember last service meeting

- ## State 2: HCBS, Nursing Facilities
  - HCBS: ~80% of responders "very involved" or "somewhat involved" in making decisions about service plan; ~75% remember last service meeting
  - NFs: ~65% of responders "very involved" or "somewhat involved" in making decisions about service plan; ~60% remember last service meeting

PCP module: Pilot

■ State 3: MLTSS HCBS, MLTSS Nursing Facilities

- ▣ MLTSS HCBS: between ~80%-85% of responders "very involved" or "somewhat involved" in making decisions about service plan; between ~60%-80% remember last service meeting; some MCO differences

- ▣ MLTSS NFs: ~60% "very involved" or "somewhat involved" in making decisions about service plan; ~55% remember last service meeting

2016-2017 NCI-AD Results: A Preview

12 State National Report

2016-17 State Samples

State	NFs (any)	PACE	MLTSS HCBS	Combined Medicaid program	Aging Medicaid program	PD Medicaid program	BI Medicaid program	OAA	Other
CO				X	X			X	
IN	X			X				X	X
KS		X	X					X	
ME				X			X	X	X
MN						X	X		X
MS				X		X	X		
NJ	X	X	X					X	
NV					X	X			
OH			X	X	X	X		X	
OR	X	X		X					
PA								X	
TN	X		X						

Risk Adjustment

- Age
- Gender
- Race
- Rurality
- Living arrangement (own home vs elsewhere)

- Living along
- Mobility
- ADLs
- IADLs
- Overall health
- Proxy vs. consumer survey

2016-2017 Demographics

- **Age:**
  - 11% over 90 years (state range 0%-24%)
  - Average age if under 90: 69 years (range 51yrs-76yrs)
- **Gender:** 67% female (range 56%-79%)
- **Race/ethnicity:**
  - 71% White (range 36%-98%), 2% Hispanic/Latino (range 0%-11%), 20% Black/African-American (range 0%-64%)
- **Marital status:**
  - 21% single, never married (range 13%-35%), 35% widowed (range 2%-53%), 20% married/domestic partner (range 10%-49%),
  - 25% separated/divorced (range 12%-39%)
- **Recent move (address change in past 6 months):**
  - 6% (range 1%-13%)

2016-2017 Demographics, cont.

NCI-AD
NATIONAL CORE INDICATORS-
Aging and Disabilities

■ Type of area:

- 62% metropolitan (range 32%-94%), 8% micropolitan (range 4%-36%), 9% small town (range 0%-25%), 4% rural (range 0%-19%)

■ Type of residence:

- 74% own/family home/apt (range 38%-98%), 8% ALF/RCF (range 0%-27%), 13% nursing facility (range 0%-55%), 5% group/adult family/ foster/host home (range 0%-33%)

■ Living arrangement:

- 45% alone (range 17%-74%), 15% w/ spouse/partner (range 6%-21%), 21% with other family (range 13%-43%)

A Few 2016-2017 Outcomes

- **Service coordination:**
  - 81% can reach case manager when need to (range 66%-88%)
- **Safety:**
  - 75% with concerns about falls had someone talk/work with them to reduce risk (range 68%-85%)
- **Healthcare:**
  - 35% had routine dental visit in past year (range 25%-63%)
- **Self-direction:**
  - 69% can choose/change the kind of services they get (range 53%-80%)
  - 65% can choose how often/when they get services (range 46%-80%)

NCI-AD

Implications for QI

- Case manager/care coordinator access
  - Reviewing contact procedures
  - Set goals to increase the number of people who can reach their case manager/care coordinator
- Review contact/assessment procedures
  - Are you asking about fall concerns?
  - If fall risk is a concern, what sort of follow up is done?
- Information and awareness
  - How are service recipients made aware they can choose or change their services?

Other Uses for NCI-AD Data

- Identify areas for service improvement
- Identify issues for deeper analysis
- Work with providers (e.g. MCOs) on quality improvement
- Compare state programs nationally
- Compare programs within the state
- Track changes over time and identify trends
- Communicate with service recipients, providers, families, and advocates
- Communicate with lawmakers and state legislature
- Benchmarking – before and after service delivery redesign

NCI-AD Website

www.nci-ad.org

Houses:

- Project overview
- State and National Reports
- Webinars
- Presentations
- Staff contacts
- State-specific project information

For Additional Information:

April Young, NCI-AD Director, NASUAD

ayoung@nasuad.org

Julie Bershadsky, NCI-AD Director, HSRI

jbershadsky@hsri.org

State panel discussion

Tennessee

Minnesota

Nebraska

NASUAD HCBS Conference
National Core Indicator Aging and Disability Survey Results

Stephanie Gibbs, Director of System Transformation
Carrie Brna, Assistant Director of System Transformation

TennCare CHOICES

- TennCare CHOICES in Long-Term Services and Supports ("CHOICES")
  - CHOICES serves individuals 65 and older or 21 and older with a physical disability
  - CHOICES is a statewide managed LTSS program:
    - Amerigroup
    - BlueCare
    - UnitedHealthcare
  - As of June 2018, 57% of CHOICES members are served in nursing facilities and 43% are served through home and community based services (HCBS)
  - Both nursing facility residents and those receiving HCBS were in scope for the NCI-AD survey

TennCare and AAAD Collaboration

- Tennessee Area Agency on Aging and Disability (AAAD) Service Regions
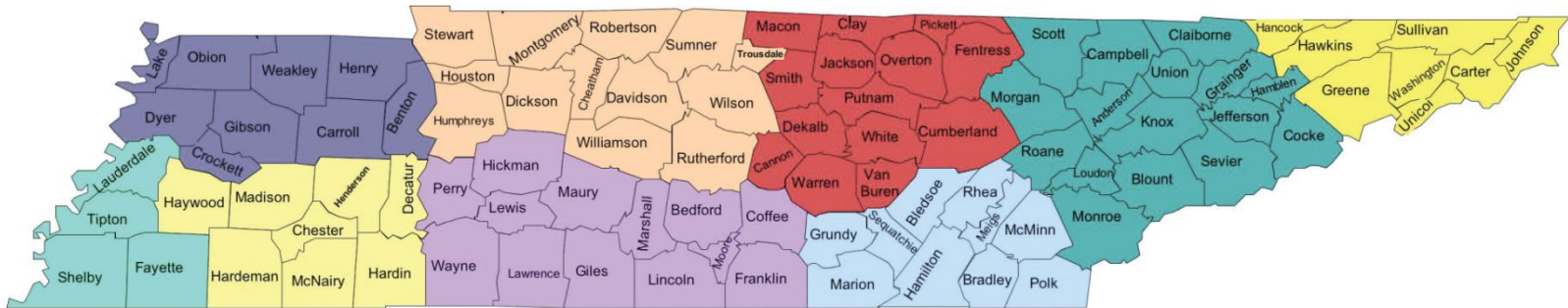
- Approximately 46 AAAD staff conducted interviews across the state for two months
- 2016-2017 sample size was 887 CHOICES members

Available at: https://www.tn.gov/aging/resource-maps/tennessee-area-agencies-on-aging-and-disability.html

NCI-AD Survey Results

- Leveraging Results
  - TennCare requests survey results by CHOICES groups and by health plan
  - Health plans develop action plans based on survey results
  - TennCare monitors survey results to inform policy and program refinements

- Continued Opportunities
  - Additional training with interviewers
  - Timing of the survey results and impact on health plan action plans

THANK YOU