Data to Innovate, Inform, and Influence:

How States are Using

NCI-AD for HCBS and

DSW Policy and Planning



2023 Home and Community-Based Services Conference

Hello and Welcome!





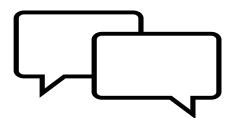




Stephanie Giordano	Rosa Plasencia	Kayla Trzpuc	Heather Johnson
Co-Director – NCI HSRI	Director – NCI-AD ADvancing States	MFP Program Administrator North Dakota	ARPA Long-Term Direct Care Workforce Unit Supervisor Colorado
sgiordano@hsri.org	rplasencia@advancingstates.org	kbtrzpuc@nd.gov	heather.a.johnson@state.co.us



Agenda



National Core Indicators – Aging and Disabilities

Introduction to National Core Indicators – Aging and Disabilities

Research Interests

Revisions

NCI-AD Adult Consumer Survey (ACS)

State of the Workforce – Aging and Disabilities (SoTW-AD)

State Perspectives

North Dakota

Colorado

Access Rule and HCBS Quality Measure Set Wrap Up/Questions



National Core Indicators—Aging and Disabilities



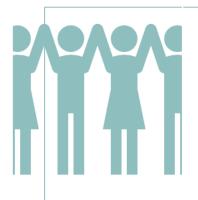
Established

- 2015
- Grew out of NCI-IDD



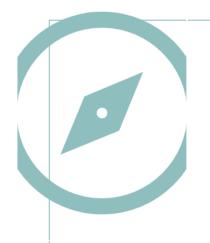
Participating states

- 24 in 2023-2024
- 35 throughout project



Population addressed

 Older adults and people with physical disabilities



Survey Tools

- Adult Consumer Survey (ACS)
- State of the Workforce



What's new with NCI-AD: Research Interests



Unmet needs

- Alzheimer's Dementia and Related Dementias
- Historically Underserved populations
- Medicaid HCBS and Poor Health and Community Living Outcomes

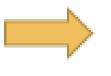
Medicaid Utilization

Policy, program delivery methods, and needs assessment results



What's new with NCI-AD: Revisions

Steering committee meeting recap



0000

Top areas for improvement

Workgroups

- Community involvement
- Relationships
- Health, wellness, medications
- Cultural competence
- Workforce
- Self-Direction

Based on question: How much does this subdomain need to be changed or reviewed



Medication



Relationships



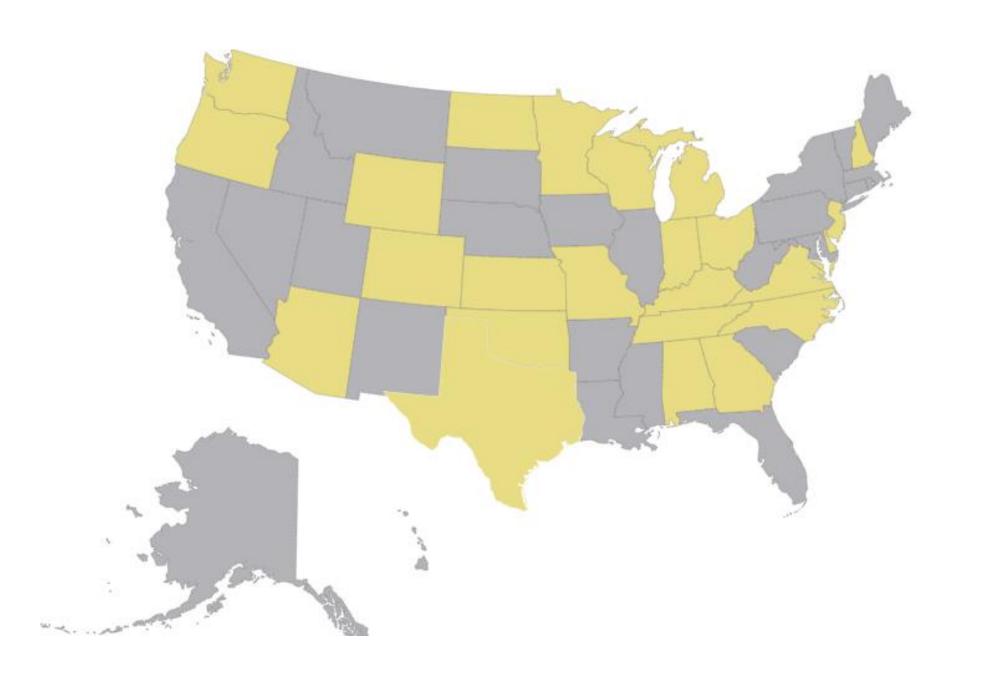
Communtiy Involvement



Health



Adult Consumer Survey (ACS) A Person-Centered Approach



- Standardized survey with a sample of individuals receiving services
 - No pre-screening procedures
- Survey includes:
 - Demographic and service-related characteristics typically from existing records
 - Main survey section conducted with person receiving services
 - Some questions may be answered by a proxy respondent
- Survey conducted in-person, via video conference, over the phone
- Standardized surveyor training
- Allows questions to be reworded or rephrased using familiar names and terms
- Survey portions take 50 minutes on average



Domains (Area of Interest)

Community
Participation
Access to
Community
Work
Everyday Living
Relationships

Safety
Satisfaction
Service
Coordination
Rights and
Respect

Care
Coordination
Access to
Technology
Access to
Needed
Equipment
Health Care

Medications
Wellness
Affordability
Choice and
Control

Self-Direction (Optional)
Service Planning (Optional)
State Specific Questions (Optional)



Background Information (BI)

Key demographic characteristics:



Gender Race/Ethnicity **Martial Status** Age Type of Preferred Who Lives Residential Zip Code with Person Language Setting LTSS Services Guardian Mobility Falls including SDS Status Medicare Deaf/Hard of Blind/Visually Conditions **Impaired** Status Hearing



Data can help measure disparities

Individual characteristics of people receiving services	Where people live Gender	
	Race/Ethnicity	
	Disability	
The nature of their experiences with services	Interaction with staff and case managers	
	Self-direction	
	Choice and Control	
The context of their live	Involvement with family and friends	
	Access to community involvement	
	Safety	
Health and well-being	Utilization of health services	
	Ability to manage chronic conditions	
	Mental healthcare	



Data are used to...





Compare outcomes to other states



Compare specific groups or geographic regions within states



Identify areas for quality improvement



Share outcomes with stakeholders and advocates for feedback and strategic planning



Benchmark and track progress toward quality improvement goals over time



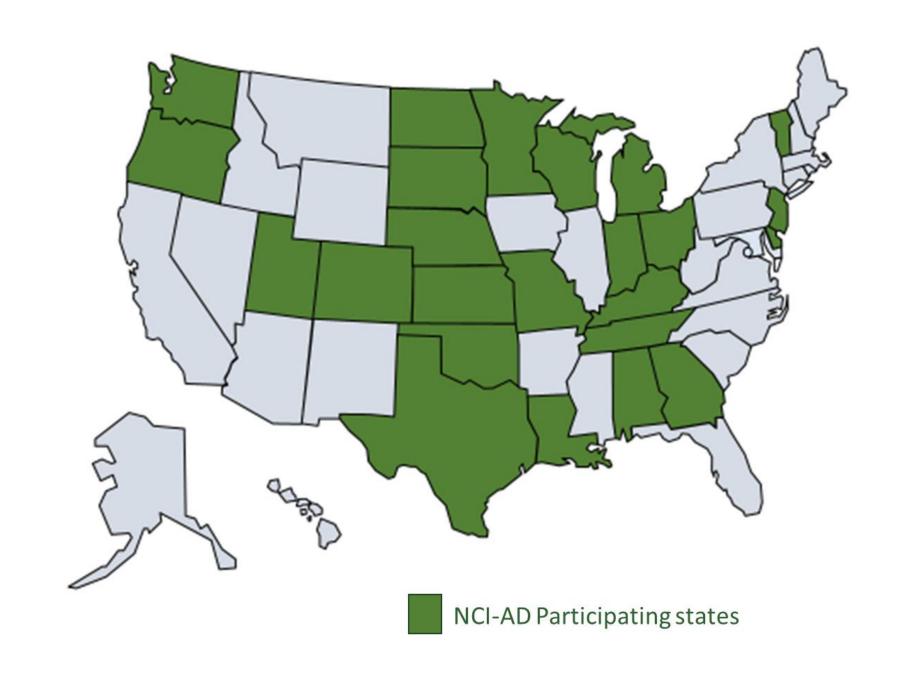
Researchers also use data to look more closely at specific topics



2021-22 Adult Consumer Survey Data

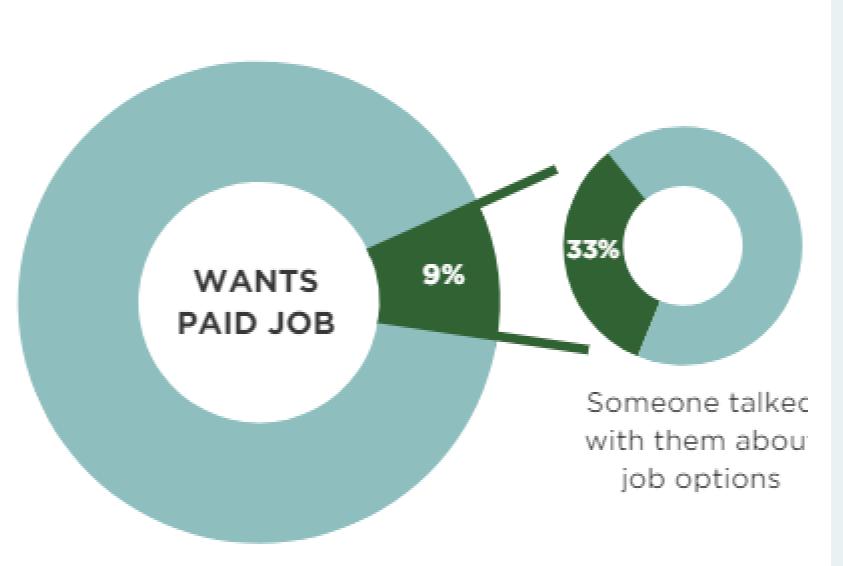
13,594 respondents

- 34% Male, 66% Female
- 64 average age



All data are available online: www.nci-ad.org







85%

can see/talk to family/friends they do not live with when they want

77%

have enough help with everyday activities



74%

always have a way to get where they want to go

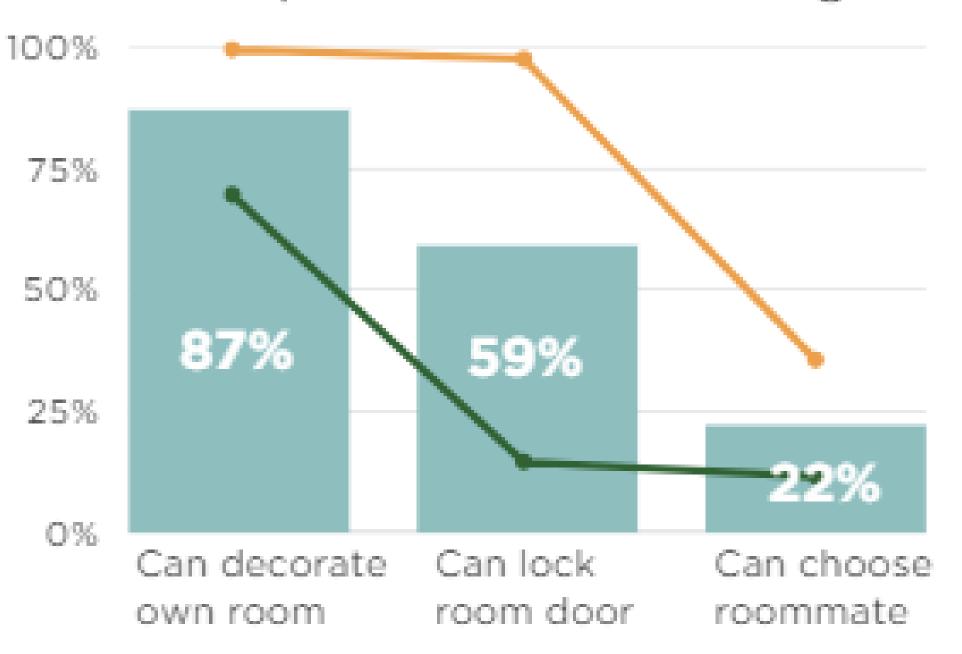


58%

can take part in activities with others as much as they want



Outcomes related to regulations at provider-owned settings



National average

Highest state

Lowest state





Among 7,040 Americans age 65+ who use LTSS:

- 58% say they or someone else have concerns about them falling
- 86% worked with someone to help reduce their risk of falling
- 11% had a *visit to the emergency* room in the past year due to falling



OLDER AMERICANS MONTH

DATA SPOTLIGHT

For more information, see: nci-ad.org





People who often feel lonely are less likely to:

- Always have help they need with everyday activities
- Always get enough help with self-care
- Report their services meet all their needs and goals



LONELINESS AWARENESS WEEK

DATA SPOTLIGHT

For more information, see: nci-ad.org



State of the Workforce – Aging and Disabilities (SoTW)

Conducted by States, HSRI and ADvancing States to gather information about the strengths, weaknesses, and trends of the direct service workforce (DSW)

- Basis:
 - State of the Workforce Survey (I/DD population)
 Administered by states, HSRI and NASDDDS
 Launched in 2007
 30 states use
 - Aging and Disabilities 5 State Pilot: 2022
- Gather data that will inform policies and decision-making
 - Access NPRM requires multiple data points about DSW wages
 - Use a tested tool, updated based on pilot state feedback

SoTW-AD Launched July 2023





SoTW-AD Topics Included

Demographics of state DSW workforce

Information on providers in the state such as size, number of people served, etc.

DSW turnover rates

Length of DSW employment

Vacancy rates

Hourly wages

Benefits

Recruitment and retention strategies

States may add 10 of their own questions



How are states using SoTW-IDD data?

NY is using SoTW data to compare outcomes before and after a DSP credentialing project

Many states have required the SoTW through statute to monitor the DSP workforce

TN used data as evidence to advocate for a rate increase. Then used SoTW to determine whether rate increase went to wages.

NY is also conducting additional analyses to understand predictors of tenure and turnover

NCI-IDD staff have presented SoTW findings to federal agencies and data have been used in reports and papers

UT used SoTW data to advocate for, and assess outcomes of a wage increase

States are using the SoTW as part of Value Based Purchasing









Kayla Trzpuc

MFP Program Administrator North Dakota

kbtrzpuc@nd.gov



Kayla Trzpuc North Dakota

- Member of NCI-AD since 2021
- First ACS Survey Cycle 2022-2023

Coordinated by:

- Adult and Aging Services Section
- North Dakota Health and Human Services





Heather Johnson

ARPA Long-Term Direct Care Workforce Unit Supervisor Colorado

heather.a.johnson@state.co.us



Heather Johnson

Colorado

- Member of NCI-AD since 2015
- Participating state –
 State of the Workforce-AD

Coordinated by:

- Colorado Department of Health
 Care Financing & Policy
- Colorado Department of Human Services



What's new with NCI-AD:

Access Proposed Rule and HCBS Quality Measure Set



HCBS Quality Measure Set: Background

September 2020:

 CMS released a request for information (RFI) seeking feedback on a draft set of recommended HCBS measures

July 21, 2022:

• SMDL 22-003 was released, detailing first-ever HCBS Quality Measure Set

May 3, 2023 – July 2, 2023

- Access NRPM Released
- State Meetings
- Comments submitted from National NCI Project team and ADvancing States

Final Access Rule Anticipated early 2024



HCBS Quality Measure Set Organization

Measures are arranged by the areas CMS is interested in:

1915(c) waiver assurance: Service Plans	1915(c) waiver assurance: Health and Welfare			
Access	Rebalancing			
Community Integration				

If a measure addresses more than one of these topics, they are indicated as such.



HCBS Quality Measure Set Organization

Source

Vast majority of measures are drawn from consumer surveys

Flexibility

CMS permits states flexibility to determine which survey tool they implement:

NCI®-IDD

NCI-AD™

HCBS CAHPS® and

POM®



HCBS Quality Measure Set Organization

Multiple measures for each 'topic' means that states can use the consumer survey(s) of their choice to collect and report data on those topics, so that:

- a state that fields the NCI-AD™ survey would <u>only</u> use the applicable NCI-AD™ measures in the measure set to report to CMS on outcomes for older adult and persons with physical disabilities
- a state that fields the NCI-IDD™ survey would <u>only</u> use the applicable NCI-IDD™ measures in the measure set to report to CMS on outcomes for adults with intellectual or developmental disabilities



Key Takeaways

States that are already administering NCI-AD are better positioned to meet CMS reporting requirements

Many states are only surveying some waiver populations, not all, so additional work will be needed

Equity stratification will be a heavy lift



States with MLTSS programs could begin requiring MCOs to report the MLTSS measures in next contract cycle



Access NPRM Quality Section Overview

Requires adoption of HCBS Quality Measure Set

- Originally shared as guidance in CMS State Medicaid Director Letter #22-003
- Applies to all HCBS authorities (except state plan personal care) and all delivery systems as well as self-directed programs
- Requires stratification and sampling phase-in
- Set updated every other year by the Secretary
 - Process includes soliciting public comment

States must establish performance targets, reviewed and approved by CMS, of mandatory measures

• Performance targets must include quality improvement strategies states will pursue to achieve the performance targets

Several operational changes required of states to meet compliance





80% or more of all Medicaid payments must go to compensation for direct care workers. Goal is to support hiring and keeping DPSs.

Rule would apply to specific HCBS services: homemaker, home health aide, personal care



States will be required to report on a set of nationally standardized quality measures specifically for HCBS established by CMS. Goal is to increase transparency, have comparative data across states, support quality improvement, and promote equity HCBS programs.

Rule proposes requirement of data collection and reporting from the Quality Measure Set

- Data will be stratified for certain measures by certain demographics
- States would be required to develop an accessible website to report HCBS reports



Contact us:

Stephanie Giordano	Rosa Plasencia	Kayla Trzpuc	Heather Johnson
Co-Director – NCI HSRI	Director – NCI-AD ADvancing States	MFP Program Administrator North Dakota	ARPA Long-Term Direct Care Workforce Unit Supervisor Colorado
sgiordano@hsri.org	rplasencia@advancingstates.org	kbtrzpuc@nd.gov	heather.a.johnson@state.co.us



Thank you!



