

National Core Indicators – Aging and Disability (NCI-AD)

Update and Data

Aug 31, 2017

What is NCI-AD?

- 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

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

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■ Pre-survey Form

- Used to setup interviews, for use by the interviewers only

■ Background Information (19 questions)

- Demographics and personal characteristics: gathers data about the consumer from agency records and/or the individual

■ Consumer Survey (91 questions)

- Includes subjective, satisfaction-related questions that can only be answered by the consumer, and objective questions that can be answered by the consumer or, if needed, their proxy
- States may add up to 10 “state-specific” questions to consumer survey

■ Proxy Survey version (50 questions)

- Includes objective questions only; rephrased to ask about the consumer

■ Interviewer Feedback Sheet

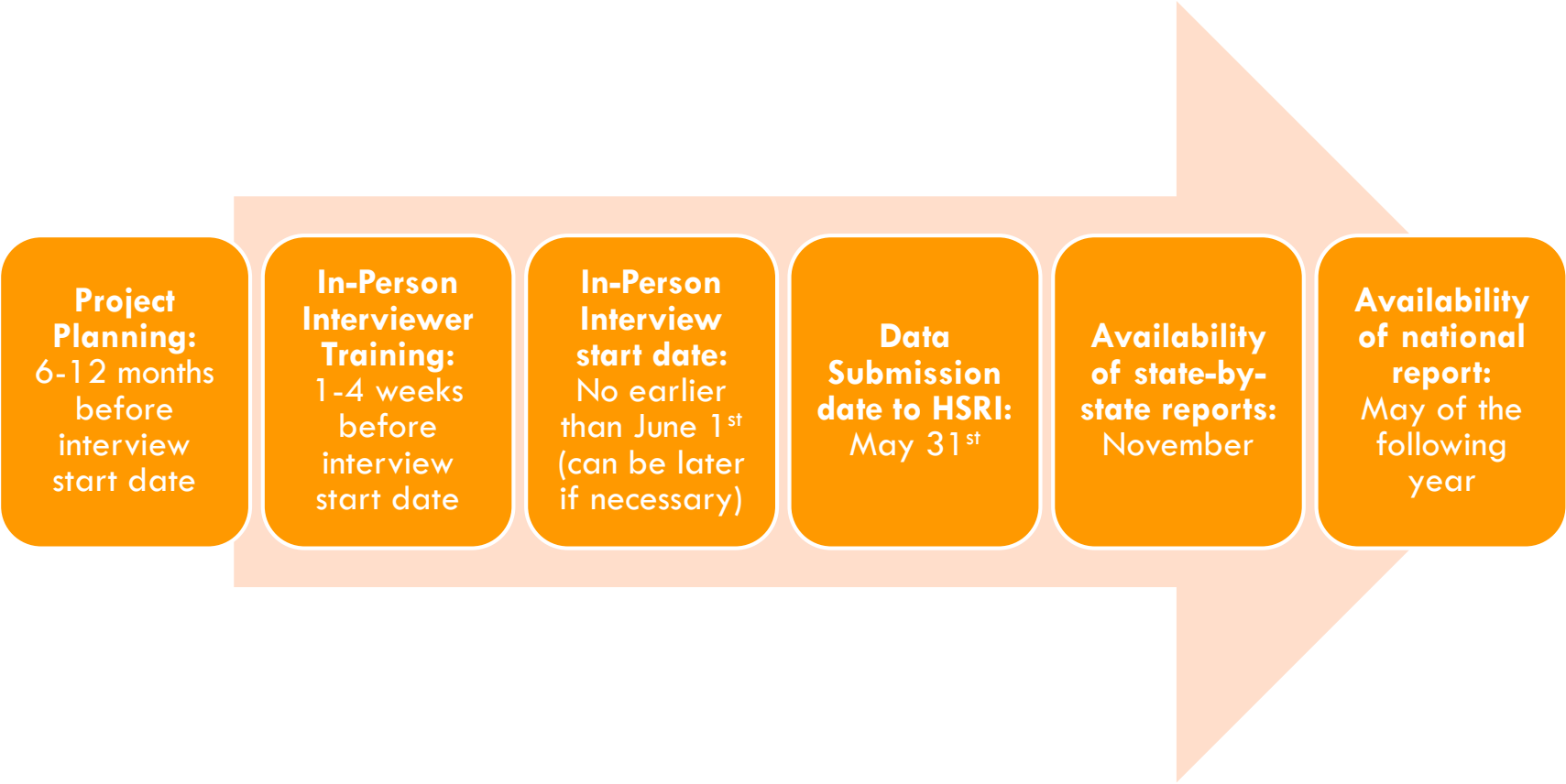
- Asks interviewer to evaluate the survey experience and flag concerns

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NCI-AD Process

Timeline for Participation

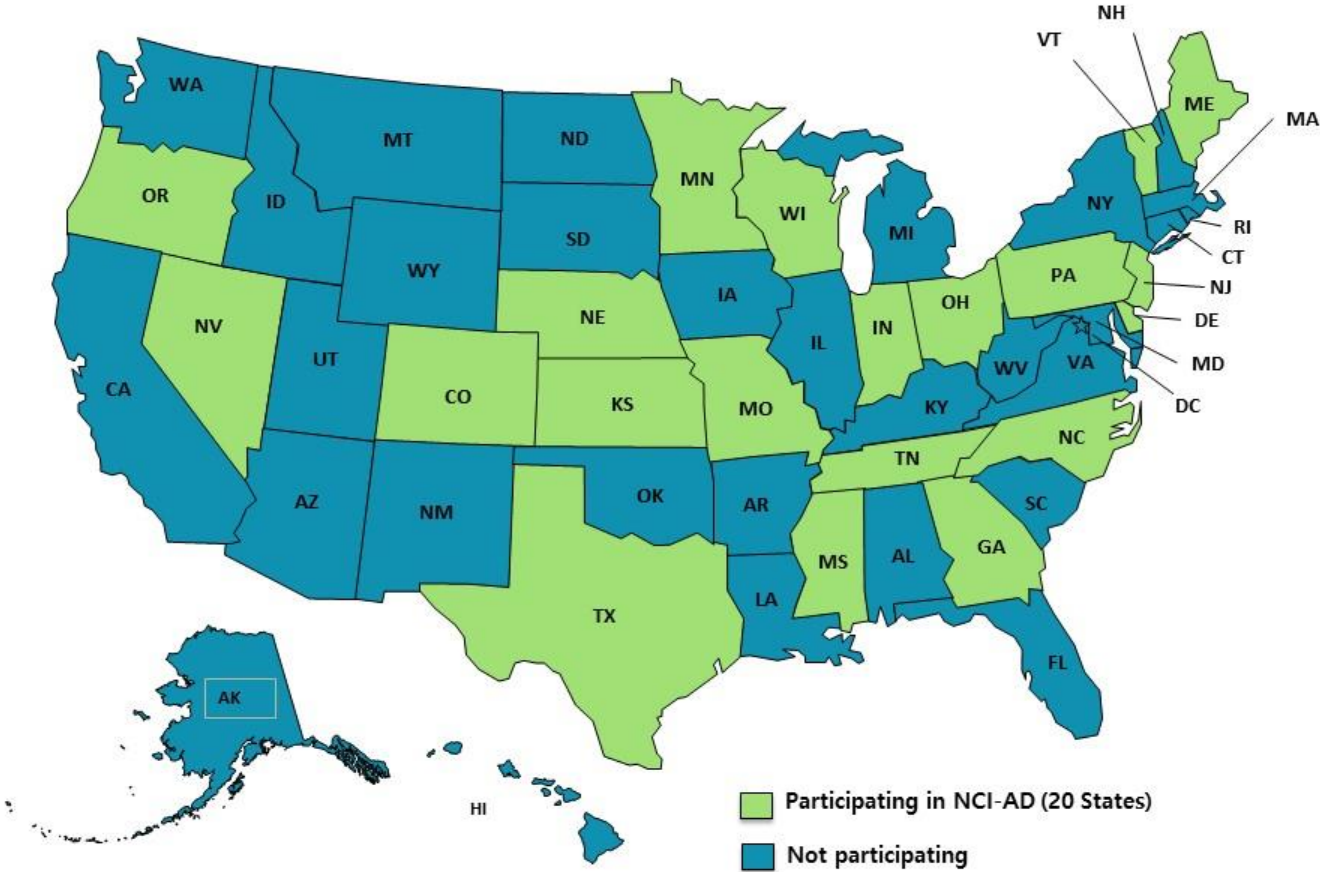
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Expectations for States

- Commit to technical assistance year and 1 year of surveying
- Develop a project team and contact state agency partners (Medicaid, Aging, and Disability)
- Monthly technical assistance calls
- Determine target populations and sample design
- Contract with vendor or develop team to conduct interviews
- Gather background information from administrative records
- In-person interviewer training
- Send data to HSRI through ODESA
- Review state report
- Data is published on www.nci-ad.org

Participating States



2015-2016 NCI-AD Results

13 State National Report

State Samples

State	SNF	PACE	MLTSS	Combined Medicaid program	Aging Medicaid	PD Medicaid program	BI Medicaid program	OAA	Other
CO				X			X	X	
DE			X					X	
GA				X				X	
IN				X			X	X	X
KS		X			X	X	X	X	X
ME				X				X	X
MN			X		X	X	X	X	X
MS				X		X	X		
NC	X	X		X		X		X	
NJ	X	X	X					X	
OH					X	X		X	
TN			X						
TX		X	X					X	

Risk Adjustment

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- Age
- Gender
- Race
- Rurality
- Living arrangement
(own home vs elsewhere)
- Living alone
- Mobility
- ADLs
- IADLs
- Overall health
- Proxy vs. consumer survey

Demographics

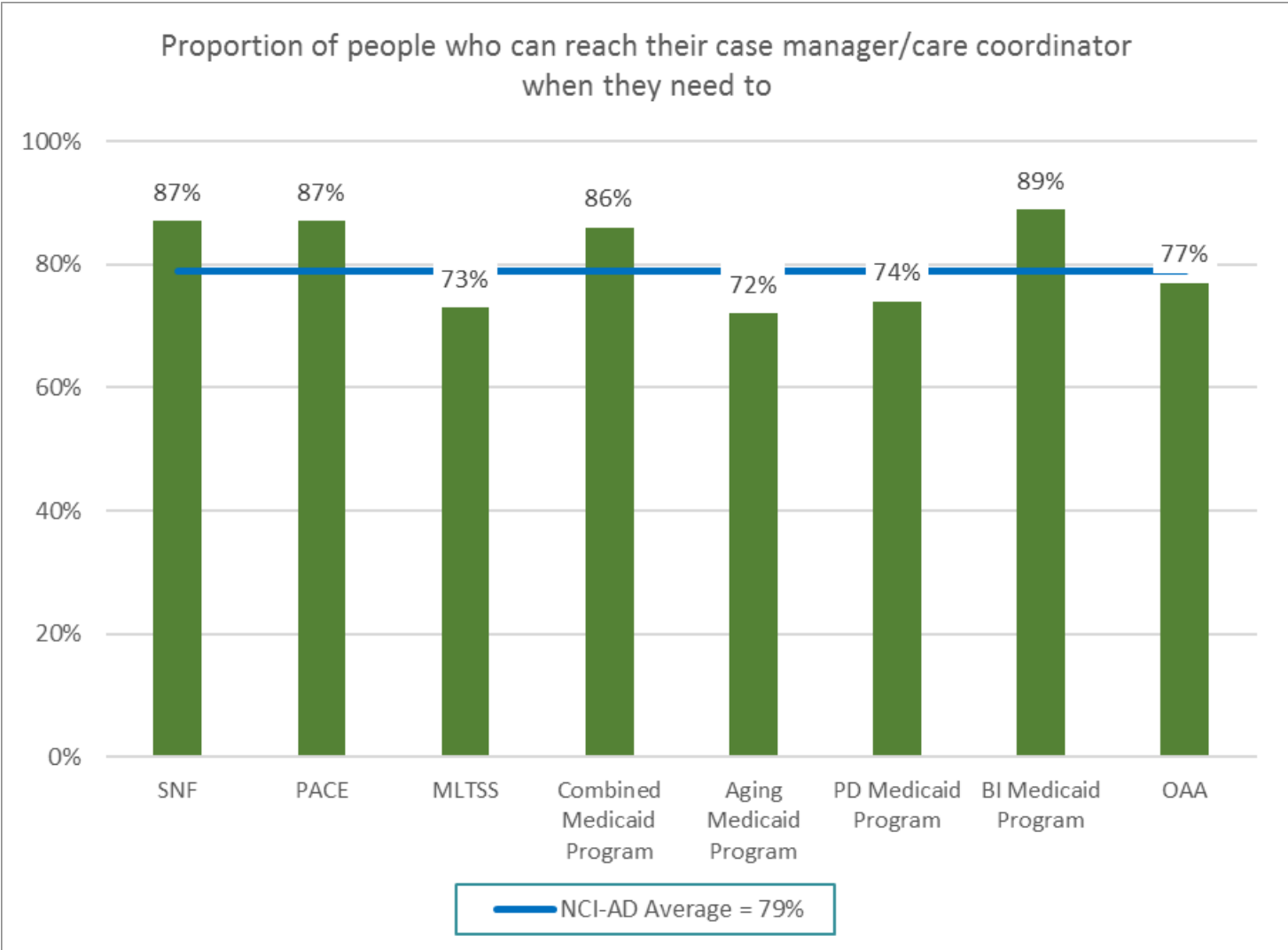
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- Average age: 69
- 70% female
- 59% White
 - ▣ 23% African American; 13% Hispanic/Latino
- 76% living in own or family home
 - ▣ 14% nursing home; 7% assisted living
- 45% live alone
 - ▣ 16% with spouse/partner; 25% with other family
- 16% diagnosis of Alzheimer's or other dementia
- 43% reported family member as primary caregiver

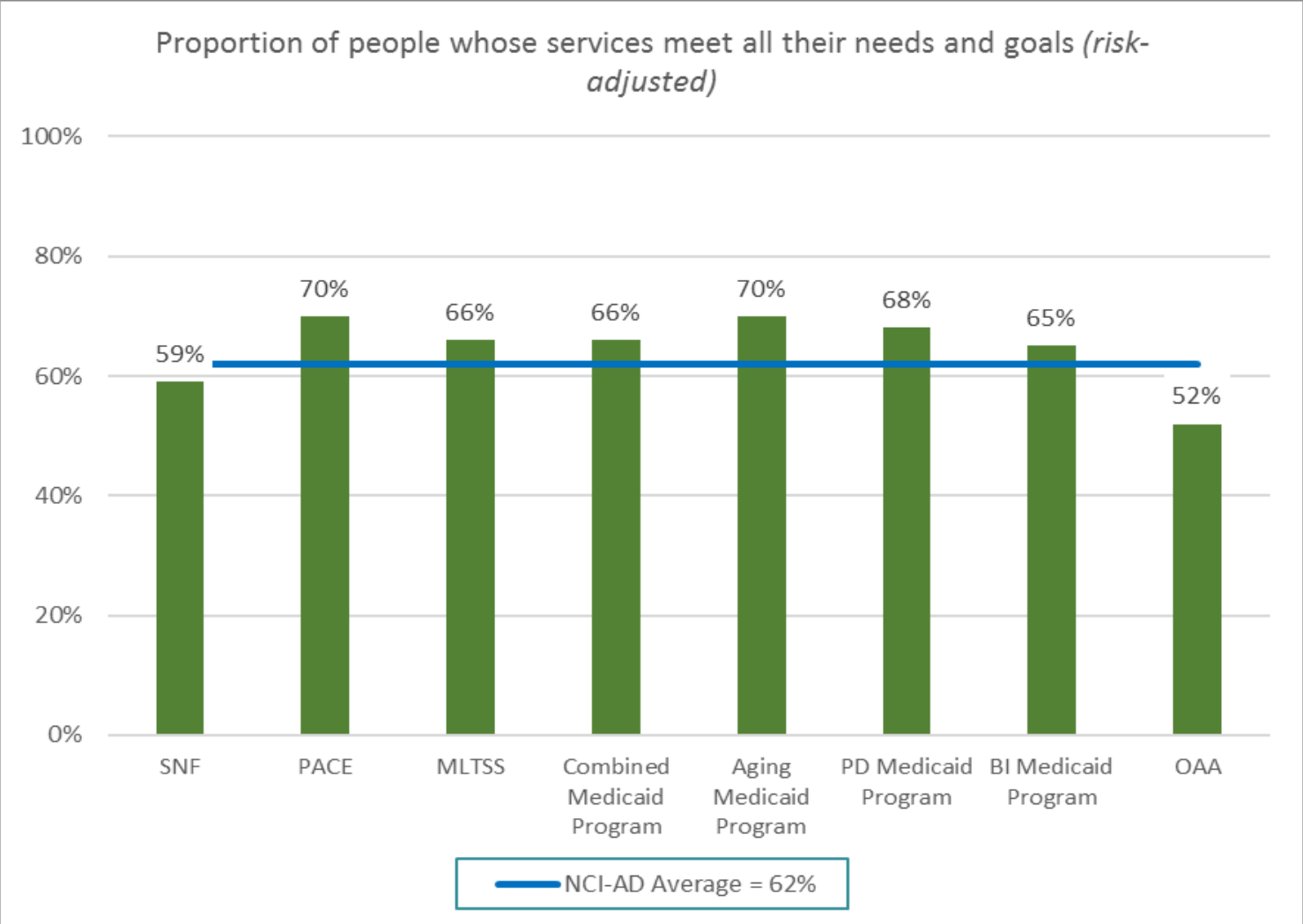
Proportion of people who like where they are living (*risk-adjusted*)

State	Overall In State	N	SNF	PACE	MLTSS	Combined Medicaid program	Aging Medicaid program	PD Medicaid program	BI Medicaid program	OAA
GA	91%	758	n/a	n/a	n/a	89%	n/a	n/a	n/a	92%
MS	89%	886	n/a	n/a	n/a	88%	n/a	92%	91% ⁰	n/a
MN	86%	3386	n/a	n/a	89%	n/a	75%	84%	78%	n/a ^{**}
CO	86%	393	n/a	n/a	n/a	84%	n/a	n/a	n/a	n/a ^{**}
TX	85%	1667	n/a	89%	84%	n/a	n/a	n/a	n/a	89%
TN*	83%	693	n/a	n/a	83%	n/a	n/a	n/a	n/a	n/a
IN	83%	737	n/a	n/a	n/a	82%	n/a	n/a	88%	81%
KS	83%	374	n/a	n/a	n/a	n/a	83%	77%	n/a	85%
NC*	81%	730	72%	88%	n/a	90%	n/a	91%	n/a	87%
NJ*	81%	578	71%	86%	81%	n/a	n/a	n/a	n/a	93%
OH	81%	391	n/a	n/a	n/a	n/a	73%	83%	n/a	87%
DE	77%	354	n/a	n/a	77%	n/a	n/a	n/a	n/a	79%
ME	73%	467	n/a	n/a	n/a	73%	n/a	n/a	n/a	76%
NCI-AD Average	83%	11414	71%	88%	83%	84%	75%	84%	84%	87%

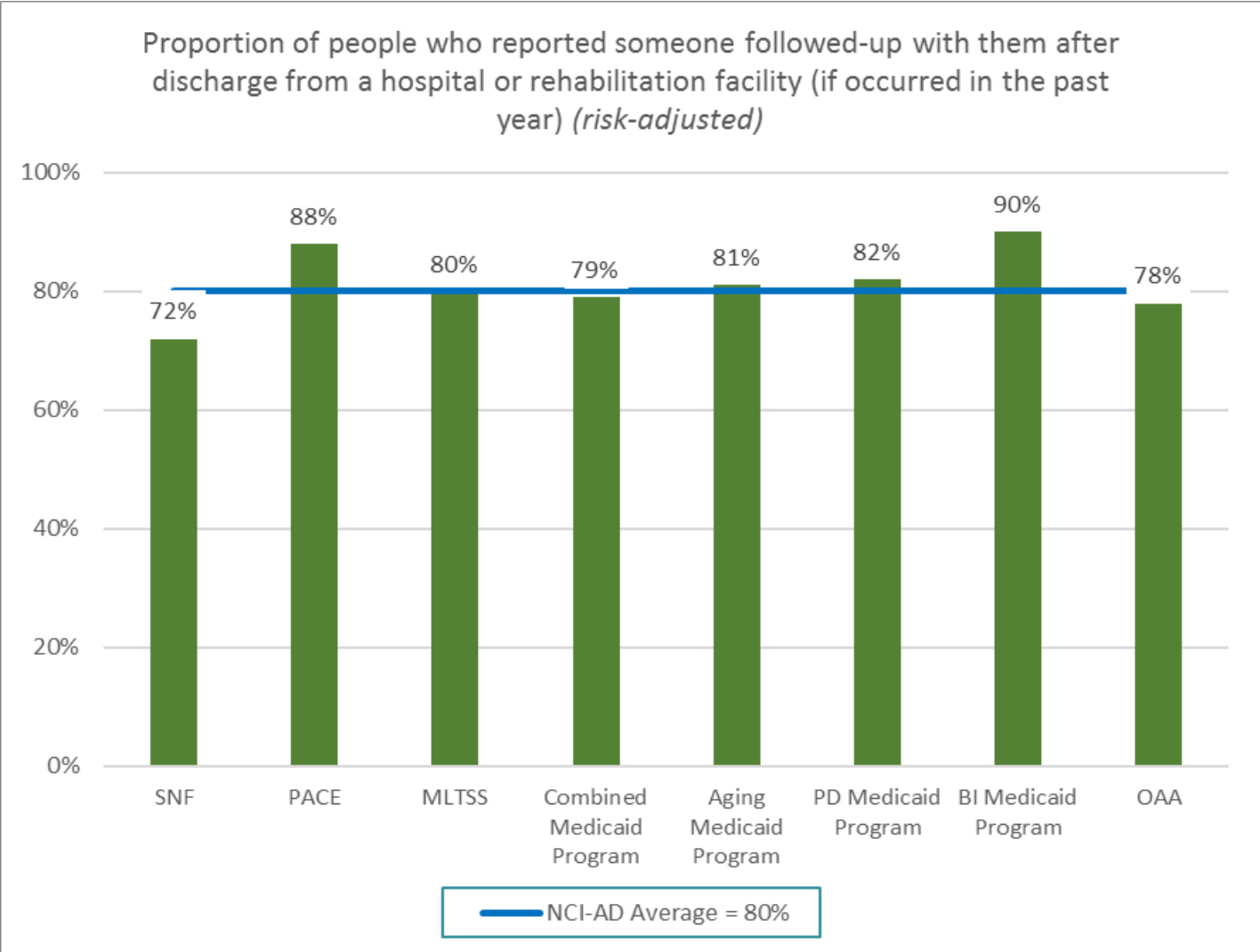
Service Coordination



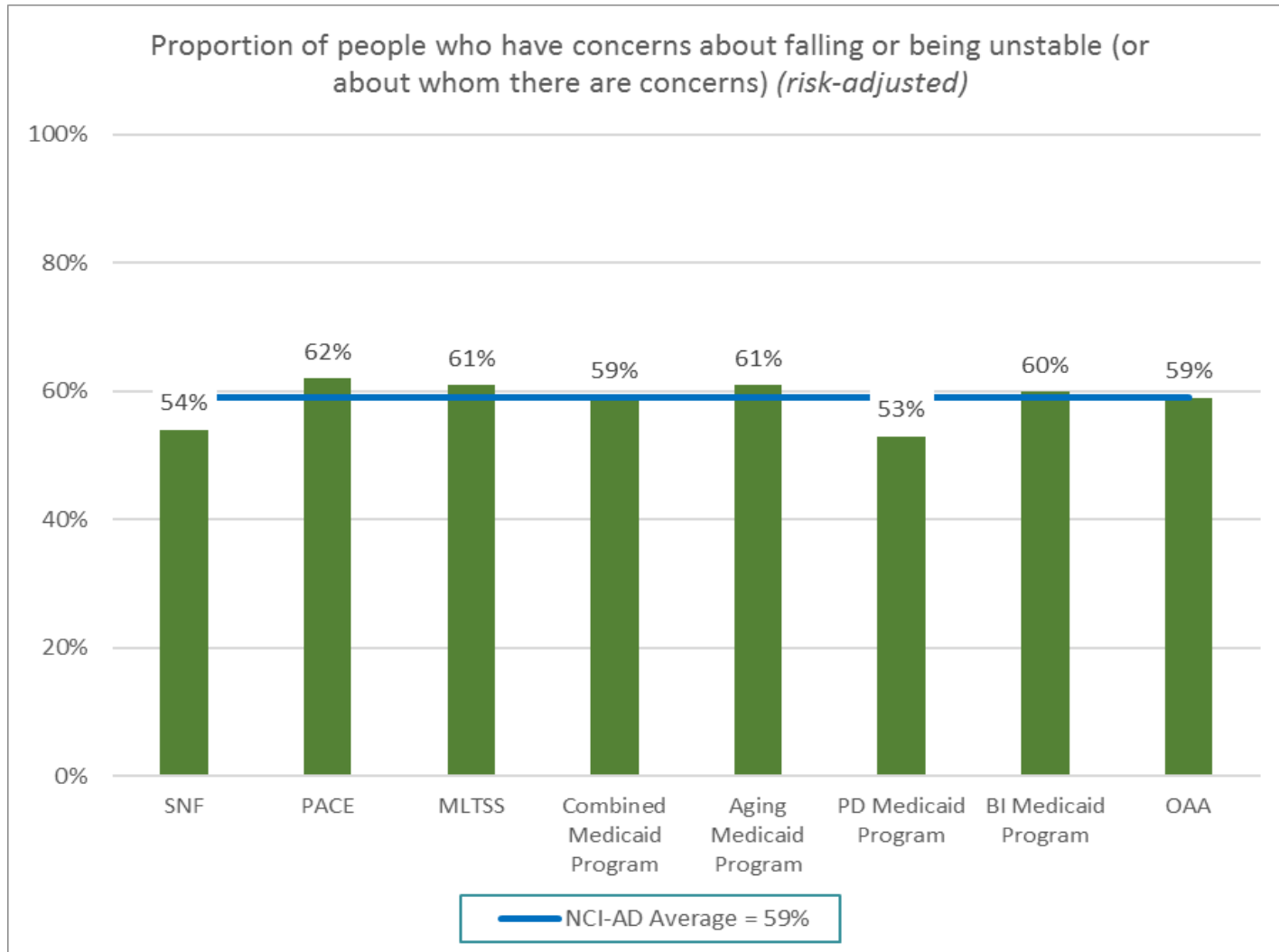
Service Coordination

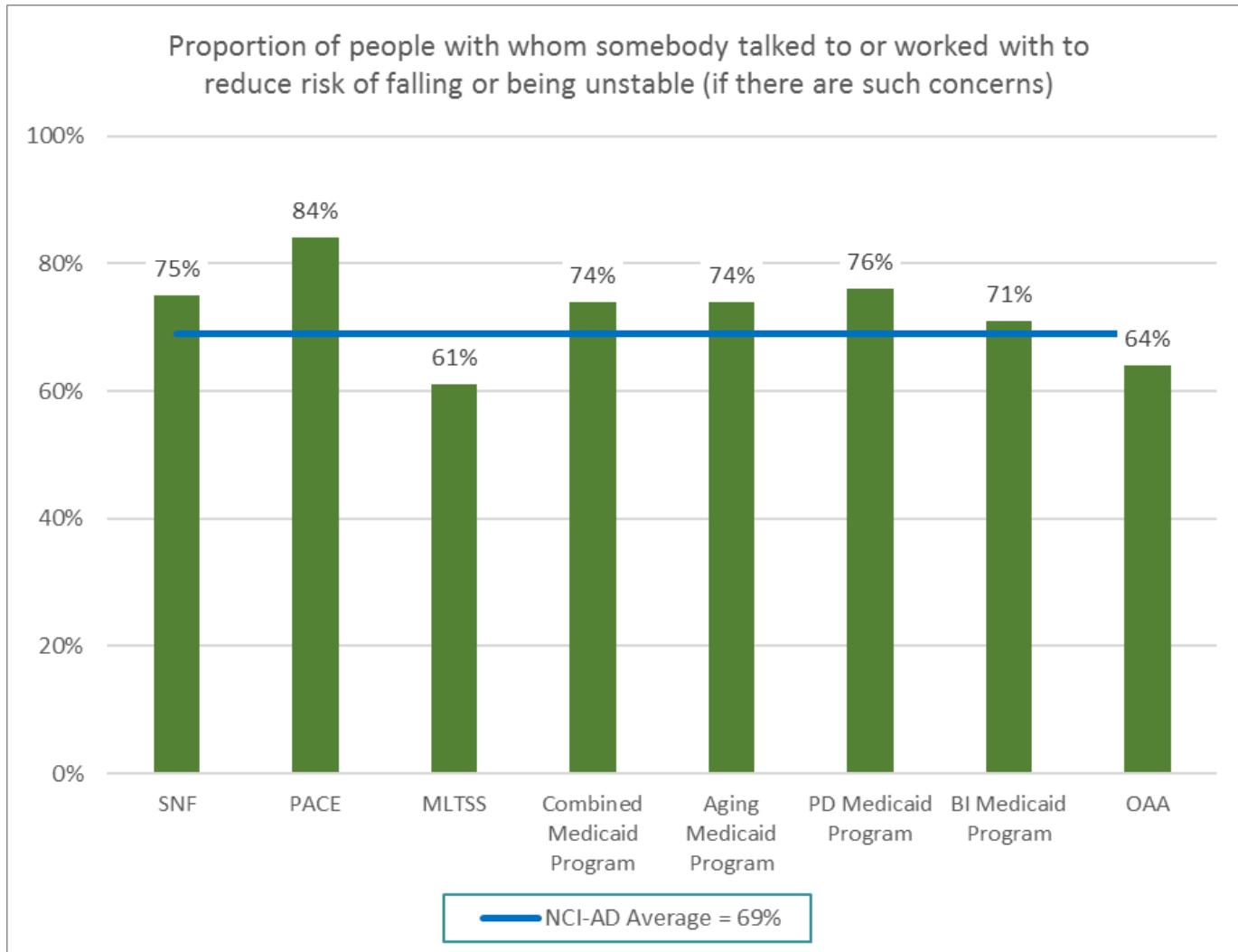


Care Coordination

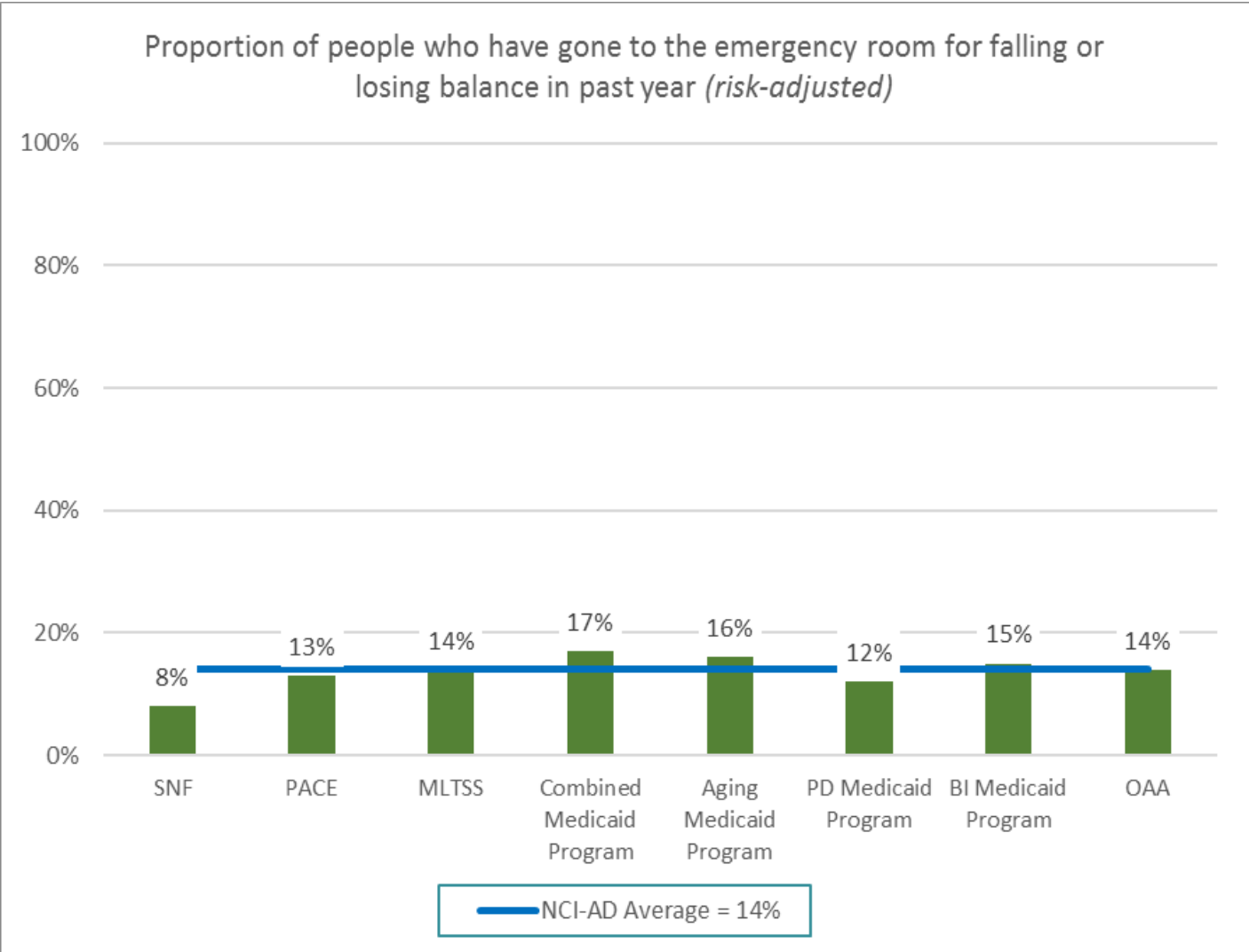


- Set goals to increase the number of people who can reach their care coordinator.
- Conduct root cause analysis for lack of follow-up after hospitalization.
 - ▣ Delay in identifying discharge?
 - ▣ Lack of knowledge about needed follow-up
- Use as benchmarks prior to system redesign (ie. move to MLTSS).
- Use as a compliance tool with the HCBS regulation.

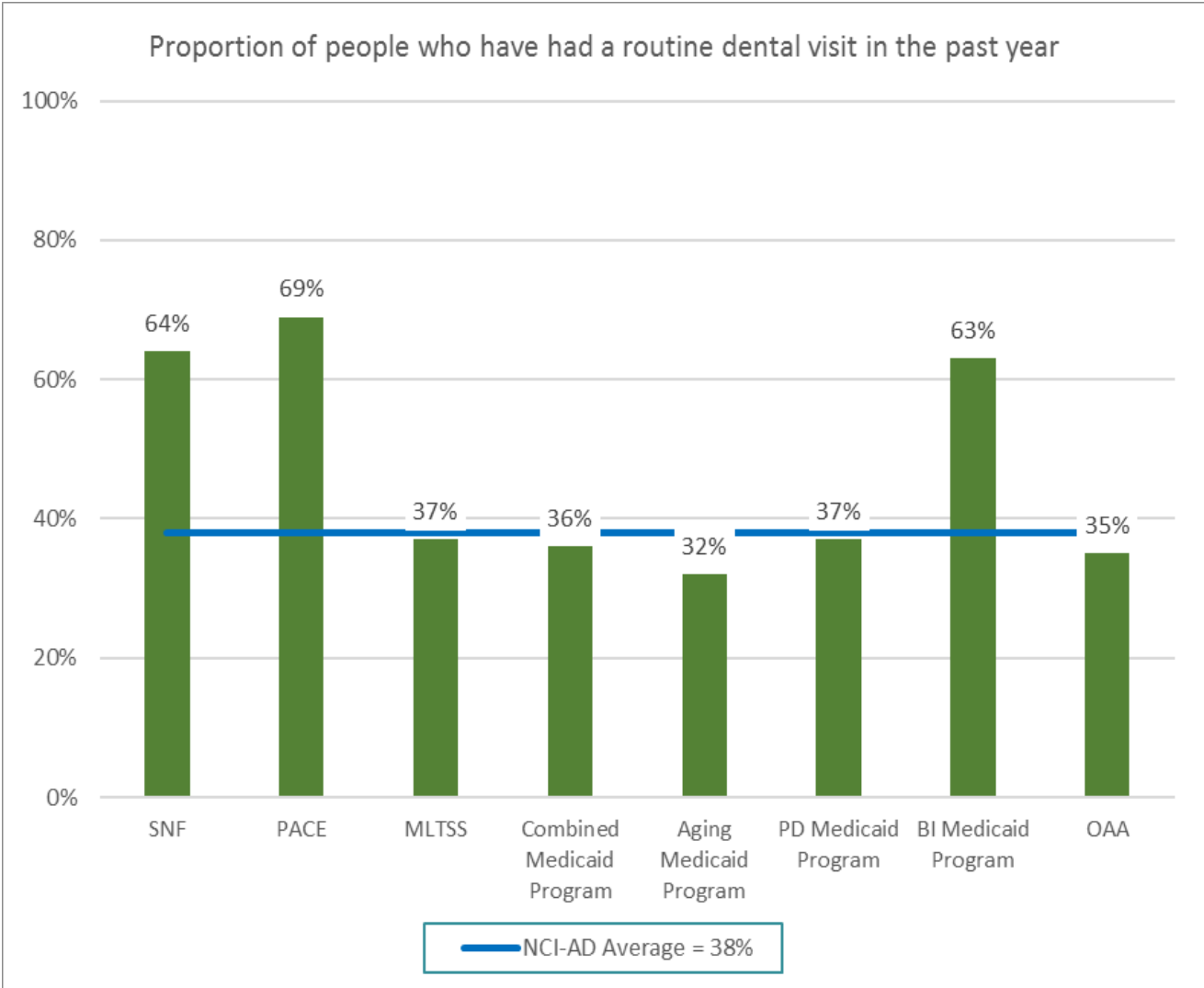




Healthcare

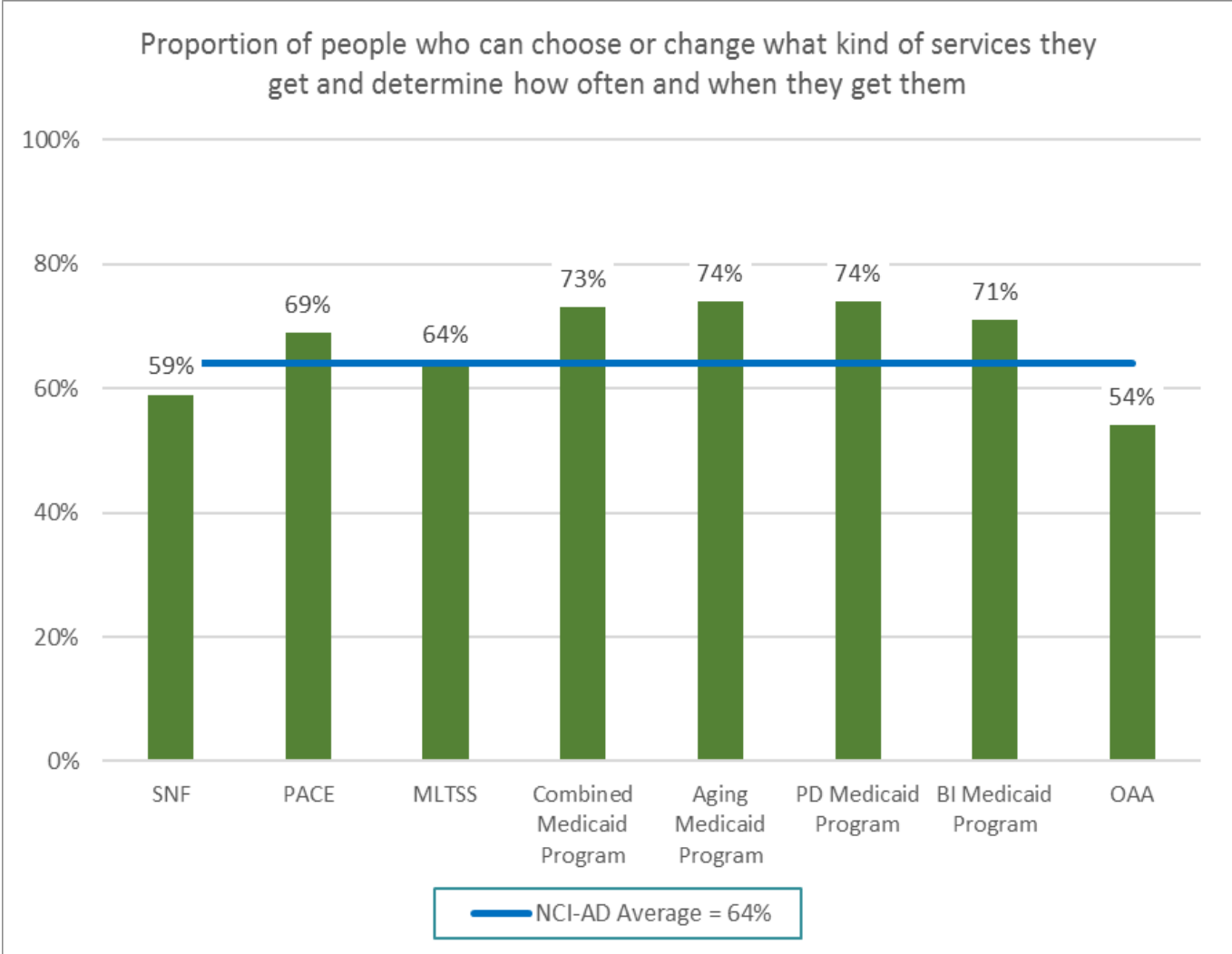


Healthcare

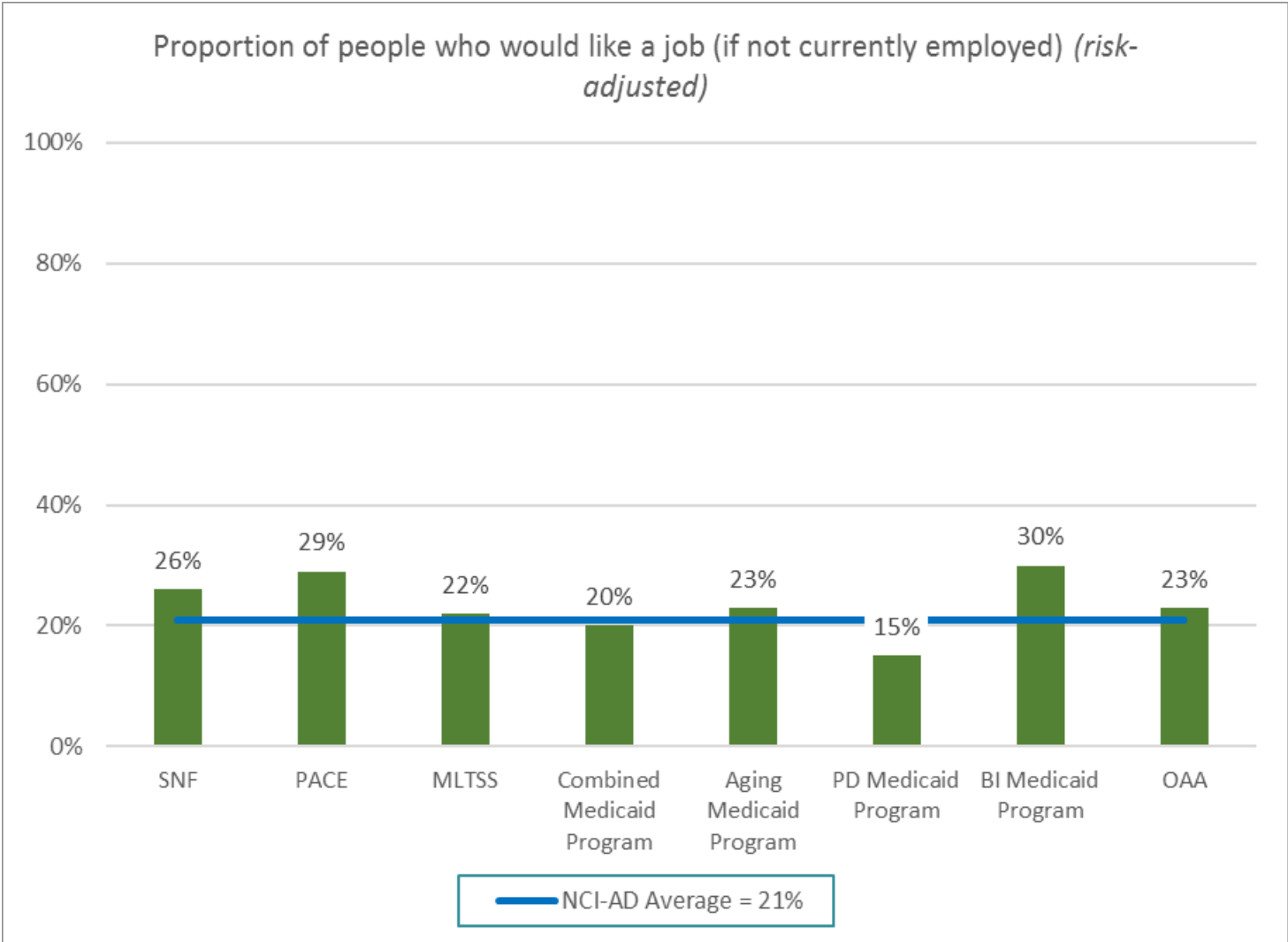


- This data can/should be used as baseline data for Falls Prevention activity.
 - ▣ Ex: Setting service coordination goals for MLTSS plans to discuss fall prevention with more consumers
 - ▣ Review care planning tool to ensure falls risk is incorporated and monitored
- Education intervention on options for accessing dental care.

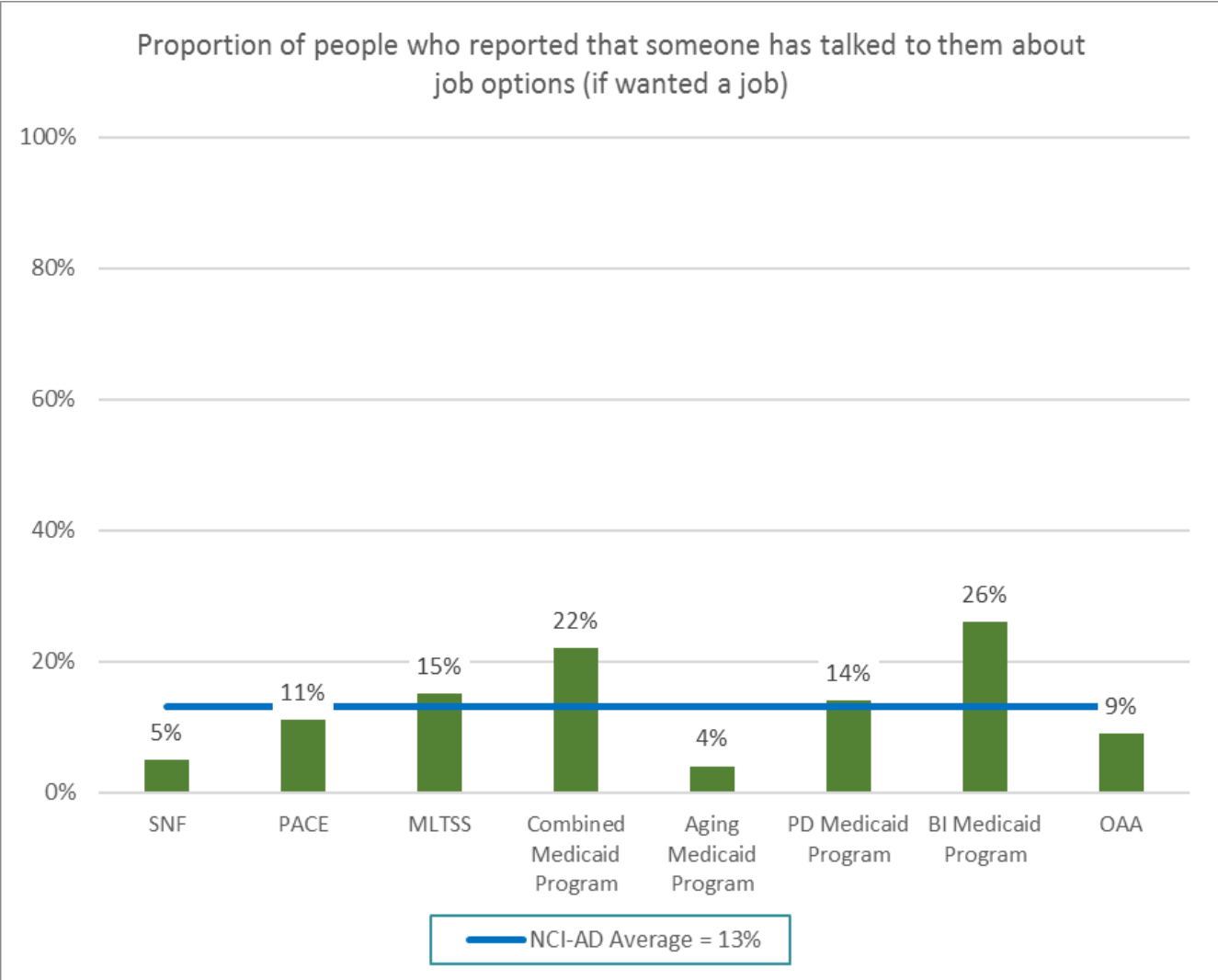
Self-Direction



Employment



Employment

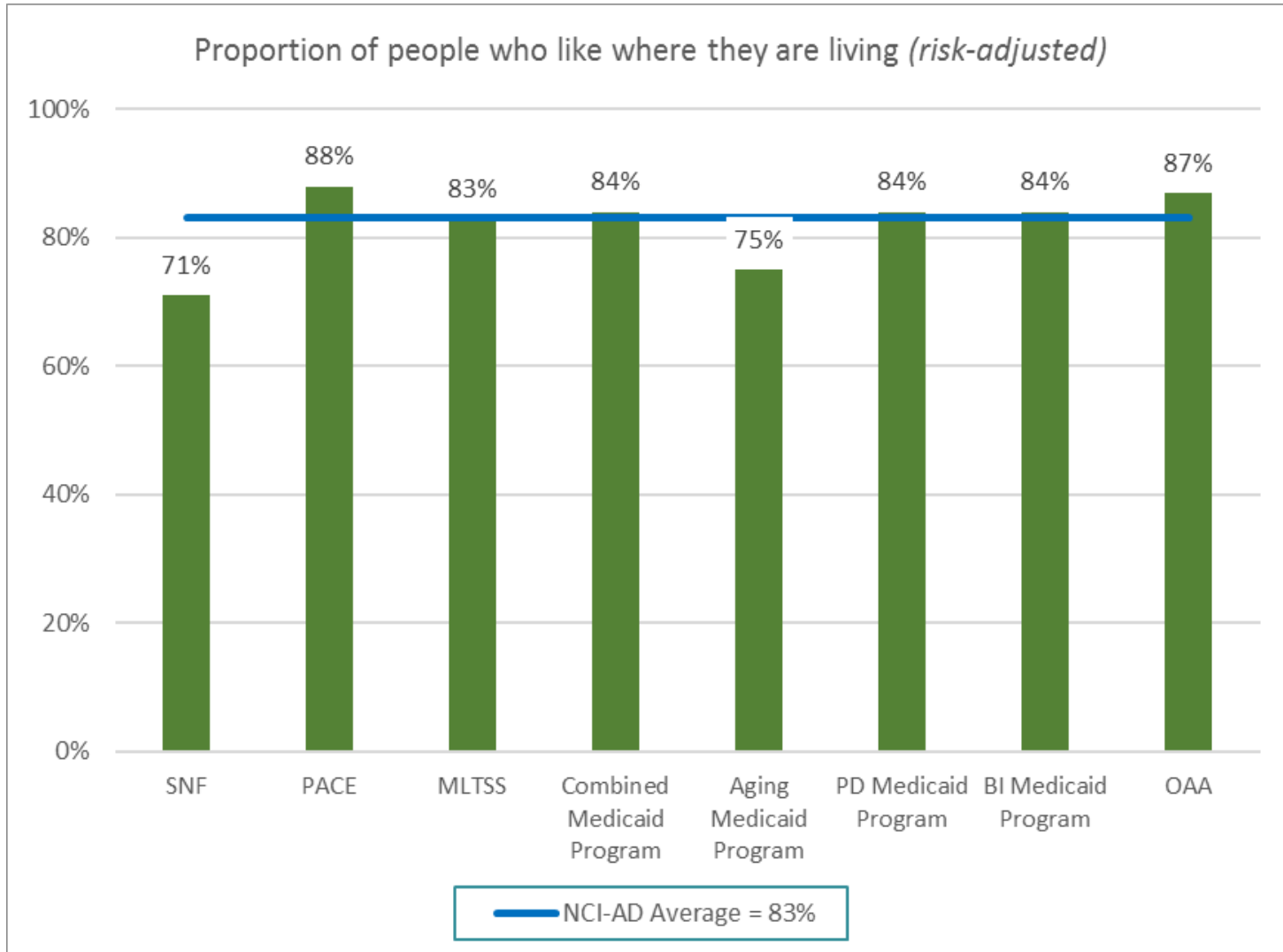


Implications for QI

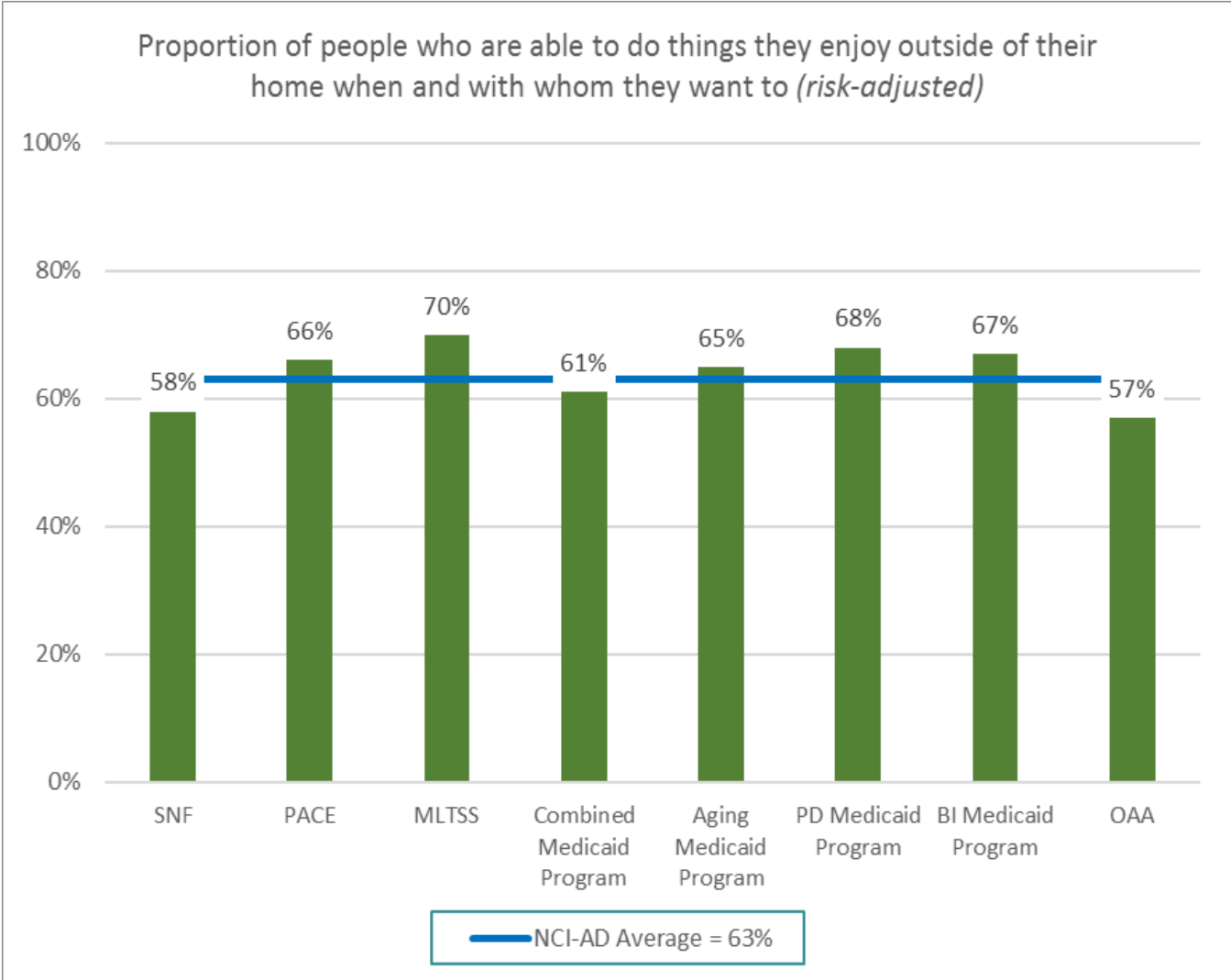
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- Provide additional training on person-centered planning techniques to better activate consumer engagement
- Review training for care managers on employment exploration during care plan development

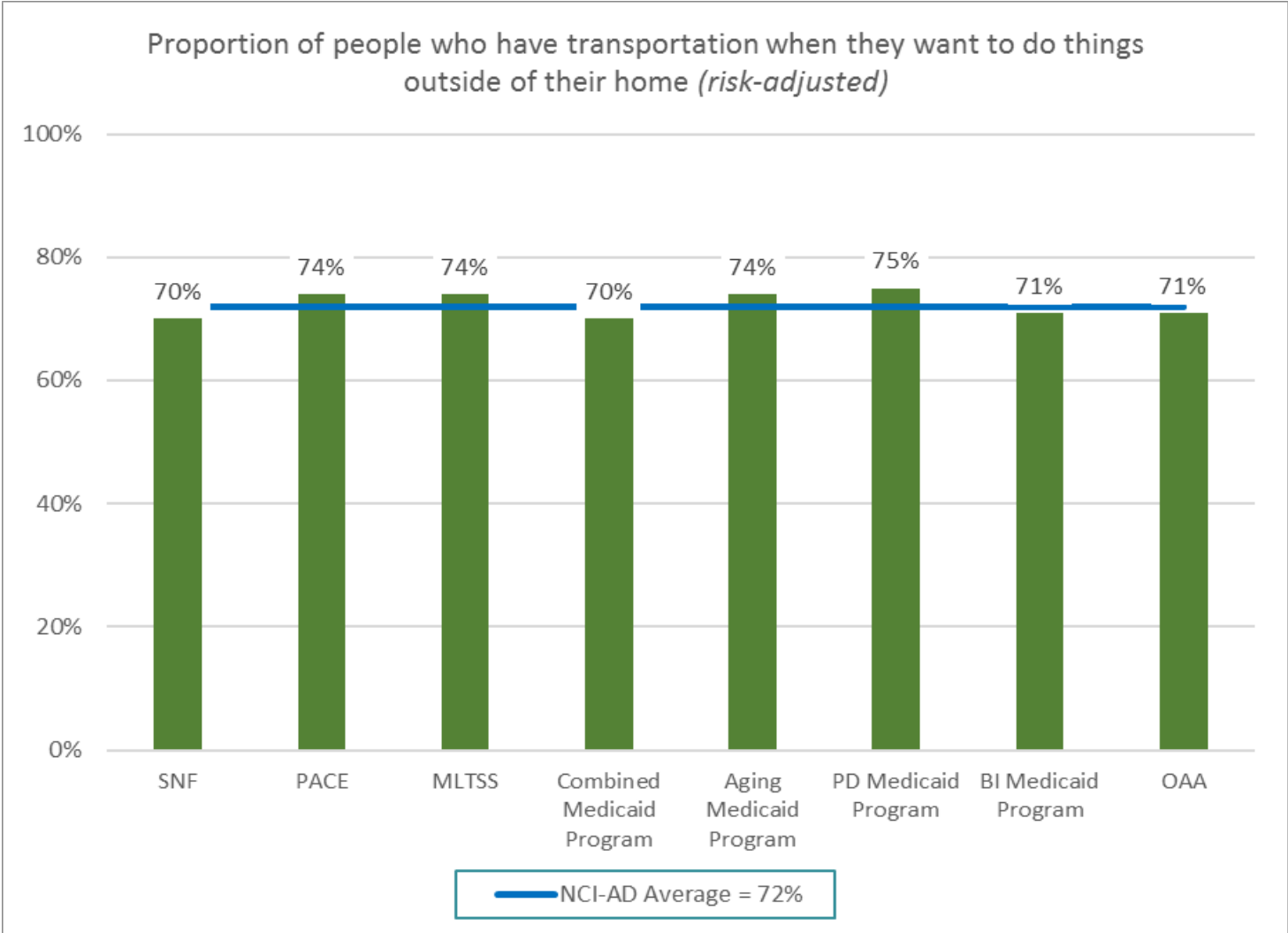
Satisfaction



Community Participation



Access to Community



- In MLTSS program, any of these indicators can be used – if sampling frame permits – to set benchmarks and compare health plans to each other.
- States can use high interest in employment data as justification to review and/or explore ‘employment first’ policies
- Use with elected officials to demonstrate value or justify appropriations requests.
 - ▣ The data tells a story
 - ▣ Identifying trends over multiple years

What Sets NCI-AD Apart?

- State owns—and has immediate access to—their own data
- Can be used across settings and funding sources
- Can provide state, program, and regional comparisons
 - Crosswalks to NCI (ID/DD) measures
- Focuses on how services impact consumers' quality of life
 - Goes beyond service satisfaction
- Provides transparency and accountability
 - State and national reports are publicly available online
- Provides timely and actionable data over time
- States can add questions to the survey tool

Other Uses for NCI-AD Data

- Compliance – Olmstead planning, BIP, MFP
- Support for new HCBS and Person-Centered Planning Requirements
- Benchmarking and comparing data nationally
- Identifying service needs and gaps
- Allocating services
- Communicating with family and advocates

Current Activities

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- Enrollment of states for 2017-2018 (3rd year) and 2018-2019 (4th year) data collection cycle
- Analysis of 2016-2017 data
- Submission of selected measures for NQF endorsement
- Development of optional PCP module

Optional PCP module






NCI-AD 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) Did the (service/care planning) meeting take place at a time that was convenient to you?
- 3) Did the (service/care planning) meeting take place at a location that was convenient for you?
- 4) Did the (service/care planning) meeting include the people you wanted to be there?
- 5) As your service plan/plan of care was discussed during the meeting, did you feel that your preferences and needs were being heard?
- 6) Did you receive a copy of you service plan/plan of care after the meeting?
- 7) Does your service plan/plan of care include what was discussed in the meeting?
- 8) Are your preferences and choices reflected in your service plan/plan of care?
- 9) Do the care supports and services you receive help you live a better life? *A life you want?*



www.nci-ad.org

Houses:

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

Data powered by HSRI

Project managed by NASUAD

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