State of the States: Survey Background

- National survey of state LTSS systems – including aging, disability, and Medicaid programs
- Focuses on wide range of LTSS services and supports, such as:
  - Older Americans Act
  - Medicaid HCBS
  - Medicaid State-plan
  - State-funded services
- Also collects information on state administrative structure, staffing issues, policy priorities, and APS-related issues
- Survey administered multiple times over the past several years, last performed in 2015
SOTS Methodology

• The 2017 State of the States consisted of three main elements:
  1. A web-based survey focused specifically on aging and disability agencies
  2. A web-based survey focused on state’s broader LTSS and HCBS systems, including Medicaid-funded services
  3. NASUAD-developed, and state-edited, detailed charts on each state’s structure, LTSS system, services covered, and Medicaid options in place
SOTS Methodology

• The survey was in the field between April and June of 2017
  o All 50 states and the District of Columbia responded to the aging and disabilities survey
  o 46 states and the District responded to the HCBS and LTSS survey
  o 34 states provided edits of the Excel tables
State Agency Priorities Summary
About State Aging and Disability Agency Priorities

- Companion publication to the SOTS survey
- Provided list of 14 topics, with 15th option to provide a separate priority area, and asked agencies to rank their top three
- Rankings were determined via scoring system:
  - 3 points for an agency’s top priority
  - 2 points for the second priority
  - 1 point for the third priority
- Reflective of the State Aging and Disability Agency responses
  - Question was not asked within the broader Statewide LTSS survey
About State Aging and Disability Agency Priorities

• 49 states and D.C. responded to the question
  – One state declined, stating that they could not select only three of the priorities
• There was a wide variety in state rankings:
  – No topic received votes from more than 19 states
  – Eight of the 15 options received votes from at least 11 states
  – 11 topics received votes from at least 9 states
• Resulted in:
  – Lots of ties at the top
  – Natural break between the top seven priorities and the remaining eight
Top Priorities for Aging and Disability Agency Leadership

- Ensuring Compliance with the Medicaid Home and Community-based Services Regulation
- Adult Protective Services and Elder Justice
- Improving Quality Across Programs
- Managed Long-Term Services and Supports
- Implementing the Long-term Care Ombudsman Regulation
- Addressing Senior Hunger, Nutrition, and Food Insecurity
- Services for Individuals with Alzheimer’s and Related Dementia
“Other” State Priorities
Included:

- 1915(k) implementation
- Delivery & payment reform of LTSS
- ADRC reinvigoration
- Advancement of NWD systems
- Data sharing across public programs
- Implementing VDHCBS
State of the States:
Key Themes Identified
State of the States: Themes

• The Move Towards Integrated Health Delivery Continues to Change LTSS Systems
• Major Changes Continue to Significantly Impact HCBS and LTSS Systems
• State Budgets are Recovering but Demographic Trends Drive Expenditure Growth
• Elder Justice Services are a Top Priority for Agencies
• Staffing and Leadership at Agencies Continue to Experience Significant Changes
• Agency Responsibilities are Expanding to Drive Service Integration
Theme 1: The Move Towards Integrated Health Delivery Continues to Change LTSS Systems
State LTSS Care Coordination Activities

<table>
<thead>
<tr>
<th>Activity</th>
<th>Number of States</th>
</tr>
</thead>
<tbody>
<tr>
<td>Health Homes</td>
<td>20</td>
</tr>
<tr>
<td>Contracts with Capitated Health Plans</td>
<td>20</td>
</tr>
<tr>
<td>Medicaid Accountable Care Organizations</td>
<td>10</td>
</tr>
<tr>
<td>State-run Care Coordination</td>
<td>5</td>
</tr>
<tr>
<td>Primary Care Case Management</td>
<td>3</td>
</tr>
<tr>
<td>Provider or physician-led entities</td>
<td>1</td>
</tr>
</tbody>
</table>
Status of MLTSS Programs

Status of MLTSS Programs

<table>
<thead>
<tr>
<th>Status of MLTSS Programs</th>
<th>2015</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>In Operation</td>
<td>25</td>
<td>20</td>
</tr>
<tr>
<td>Under Consideration</td>
<td>15</td>
<td>10</td>
</tr>
<tr>
<td>Do not Plan to Implement</td>
<td>10</td>
<td>12</td>
</tr>
</tbody>
</table>
MLTSS Programs - 2015

Sources: NASUAD Survey; Discussions with States; CMS data
MLTSS Programs - 2017

Source: NASUAD survey; CMS data
Authority Used to Implement MLTSS

<table>
<thead>
<tr>
<th>Authority Used</th>
<th>Number of States</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medicaid §1115 demonstration</td>
<td>13</td>
</tr>
<tr>
<td>Medicaid §1915(b) waiver</td>
<td>8</td>
</tr>
<tr>
<td>Dual eligible Financial Alignment Demonstration</td>
<td>3</td>
</tr>
<tr>
<td>Medicaid §1915(a) waiver</td>
<td>2</td>
</tr>
<tr>
<td>Medicaid §1932(a) state plan</td>
<td>1</td>
</tr>
</tbody>
</table>
Populations Included in MLTSS

<table>
<thead>
<tr>
<th>Population</th>
<th>Number of States</th>
</tr>
</thead>
<tbody>
<tr>
<td>Older Adults</td>
<td>18</td>
</tr>
<tr>
<td>Individuals with physical disabilities</td>
<td>15</td>
</tr>
<tr>
<td>Individuals with traumatic or acquired brain injuries</td>
<td>10</td>
</tr>
<tr>
<td>Individuals with intellectual or developmental disabilities</td>
<td>5</td>
</tr>
<tr>
<td>Individuals with behavioral health conditions</td>
<td>3</td>
</tr>
<tr>
<td>Children with disabilities</td>
<td>2</td>
</tr>
<tr>
<td>Individuals with Autism spectrum disorder</td>
<td>1</td>
</tr>
</tbody>
</table>

Legend:
- Blue: Existing Program
- Red: Planned Program
- Green: Expansion of Existing Program
Services Included in Planned or Existing MLTSS Programs

<table>
<thead>
<tr>
<th>Service</th>
<th>Number of States</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medicaid home and community-based services</td>
<td>20</td>
</tr>
<tr>
<td>Medicaid primary and acute care</td>
<td>20</td>
</tr>
<tr>
<td>Nursing facility services</td>
<td>18</td>
</tr>
<tr>
<td>Self-directed services</td>
<td>18</td>
</tr>
</tbody>
</table>

Legend:
- Blue: Existing or Planned Program
- Red: Planned Expansion of Program
Tool Used to Survey MLTSS Participants

<table>
<thead>
<tr>
<th>Survey Tool</th>
<th>Number of States</th>
</tr>
</thead>
<tbody>
<tr>
<td>MFP Quality of Life Survey</td>
<td>7</td>
</tr>
<tr>
<td>National Core Indicators - Aging and Disability</td>
<td>6</td>
</tr>
<tr>
<td>Participant Experience Survey (PES)</td>
<td>5</td>
</tr>
<tr>
<td>HCBS CAHPS</td>
<td>5</td>
</tr>
<tr>
<td>National Core Indicators</td>
<td>2</td>
</tr>
</tbody>
</table>
Role of CBOs in MLTSS Programs

<table>
<thead>
<tr>
<th>Role of CBOs</th>
<th>Number of States where CBO Provides Service</th>
</tr>
</thead>
<tbody>
<tr>
<td>Choice counseling</td>
<td>10</td>
</tr>
<tr>
<td>Case management</td>
<td>5</td>
</tr>
<tr>
<td>Level of care assessment</td>
<td>3</td>
</tr>
<tr>
<td>Service planning</td>
<td>2</td>
</tr>
<tr>
<td>Enrollee ombudsman</td>
<td>1</td>
</tr>
<tr>
<td>Wait list management</td>
<td>1</td>
</tr>
<tr>
<td>Enrollment broker</td>
<td>1</td>
</tr>
</tbody>
</table>
CBOs Engaged with Integrated Health Entities

Number of States Reporting CBO Engagement

- Not Engaged
- Multiple Integrated Health Entity Types
- No Contracts, but Actively Engaged
- Managed Care Organizations only

Aging | Disability
---|---
Not Engaged | Multiple Integrated Health Entity Types | No Contracts, but Actively Engaged | Managed Care Organizations only
16 | 14 | 12 | 4

Legend: **Aging** | **Disability**
Services Provided to Integrated Health Entities

- **Direct services, such as home delivered meals, transportation, personal care, etc.**
- **Case management**
- **Participant education, training, and support**
- **Comprehensive care management including medical and social supports**
- **Clinical Assessments, such as health risk assessments**

The graph shows the number of states providing services to integrated health entities, with categories for aging (blue) and disability (red).
Strategies for Dual Eligible Care Coordination

Number of States

- PACE: 14
- Financial Alignment Demonstration: 10
- D-SNPs: 8
- Fully-integrated D-SNPs: 6
- Medicaid MCO and MA Plan Coordination: 2
Theme 2: Major Changes Continue to Significantly Impact HCBS and LTSS Systems
State Progress with HCBS Settings Rule Provider Assessments

- Complete: 29
- In progress: 17
- Not begun: 1

Legend:
- Complete
- In progress
- Not begun
Strategies to Assess Provider Compliance with HCBS Rule

- Review of state regulations
- Provider survey (self-assessment)
- Review of state licensure standards
- Survey of beneficiaries receiving services
- On-site review with survey and certification staff
- On-site review with licensure staff
- On-site review with case managers
- MCO assessment of network providers
Residential Settings that May not Meet Requirements

- Assisted living facility: 18 states
- ID/DD group home: 14 states
- Secure memory-care facility: 12 states
- Training center for individuals with disabilities: 8 states
- Adult foster care provider: 6 states
- Group home for seniors: 4 states
- Group home for individuals with physical disabilities: 3 states
- Gated community for individuals with disabilities: 2 states
- Gated community for seniors: 1 state
Non-Residential Settings that May not be Compliant

<table>
<thead>
<tr>
<th>Setting</th>
<th>Number of States</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adult day services facility</td>
<td>14</td>
</tr>
<tr>
<td>Sheltered workshop</td>
<td>12</td>
</tr>
<tr>
<td>Adult day health facility</td>
<td>11</td>
</tr>
<tr>
<td>Habilitation/training center</td>
<td>8</td>
</tr>
<tr>
<td>Prevocational employment Center</td>
<td>6</td>
</tr>
<tr>
<td>Senior center</td>
<td>4</td>
</tr>
<tr>
<td>Behavioral health day program</td>
<td>2</td>
</tr>
<tr>
<td>Educational facility</td>
<td>2</td>
</tr>
</tbody>
</table>
Established limits on the number of hours that any single direct-care employee may work each week

Reduced the maximum number of hours allowed for participants in programs

Reduced HCBS program size (i.e., lowering the number of waiver slots)

Reduced expenditures on other HCBS programs to finance the FLSA required changes

Established more restrictive eligibility requirements for HCBS programs

Eliminated one or more HCBS program(s)
Change in HCBS Expenditures to Comply with DOL Rule

<table>
<thead>
<tr>
<th>Category</th>
<th>Number of States</th>
</tr>
</thead>
<tbody>
<tr>
<td>Did not Increase Expenditures</td>
<td>20</td>
</tr>
<tr>
<td>No Fiscal Impact Analysis Performed</td>
<td>12</td>
</tr>
<tr>
<td>Increased Expenditures</td>
<td>7</td>
</tr>
</tbody>
</table>
Theme 3: State Budgets are Recovering but Demographic Trends Drive Expenditure Growth
Increased by 0-5%
Increased by 5-10%
Increased by 10-20%
Increased by greater than 20%
Increased by greater than 20%
Remained the same
Decreased by 0-5%
Decreased by 5-10%
Decreased by 10-20%
Decreased by more than 20%
Administrative Changes Enacted or Considered

- Eliminated unfilled staff positions
- Established a Hiring Freeze
- None
- Instituted Layoffs
- Implemented Furloughs
- Reduced staff hours
- Reduced staff compensation

Number of States

Implemented FY2016
Under Consideration FY2018
Reduced AAA allotments
Froze or reduced provider rates
Delayed implementation of new programs
Limited services
Adjusted eligibility and limited enrollment
Eliminated programs
Eliminated services
Increased participant cost-sharing
Leverage additional resources via partnerships

Programmatic Reductions Enacted or Considered
Changes in Medicaid HCBS Caseload from FY2015 to FY2016 for Specific Populations

- Children with ID/DD
- Older individuals with ID/DD (age 65+)
- Individuals with Traumatic or Acquired Brain Injuries
- Adults with Behavioral Health Conditions
- Adults with Physical Disabilities
- Older Adults (age 65+)
- Adults with ID/DD
- Adults with Autism Spectrum Disorder
- Alzheimer’s disease and related dementias

Number of States:

- Stayed the Same
- Decreased
- Increased

Number of States: 0 5 10 15 20 25 30 35
Change in Medicaid HCBS Expenditures from FY2015 to FY2016 for Specific Populations

- Children with ID/DD
- Individuals with Traumatic or Acquired Brain Injuries
- Adults with Behavioral Health Conditions
- Adults with Physical Disabilities
- Older Adults (age 65+)
- Adults with ID/DD
- Adults with Autism Spectrum Disorder
- Alzheimer's disease and related dementias

Legend:
- Stayed the Same
- Decreased
- Increased
Theme 4: Elder Justice Services are a Top Priority for Agencies
Change in APS Funding since 2015
(Number of States)

- Increased: 14
- Decreased: 3
- Stayed the same: 10

- Increased
- Decreased
- Stayed the same
Change in APS Reports Since 2015

- Increased
- Decreased
- Stayed the same

Number of States

Reports | Substantiated Reports

- Increased: Report
- Decreased: Report
- Stayed the same: Report
Change in APS Reports by Type of Abuse Since 2015

<table>
<thead>
<tr>
<th>Type of Abuse</th>
<th>Number of States</th>
</tr>
</thead>
<tbody>
<tr>
<td>Self-neglect</td>
<td>Increased</td>
</tr>
<tr>
<td>Neglect by others</td>
<td>Increased</td>
</tr>
<tr>
<td>Physical abuse</td>
<td>Increased</td>
</tr>
<tr>
<td>Emotional abuse</td>
<td>Decreased</td>
</tr>
<tr>
<td>Sexual abuse</td>
<td>Decreased</td>
</tr>
<tr>
<td>Financial exploitation</td>
<td>Increased</td>
</tr>
</tbody>
</table>

Legend:
- Increased
- Decreased
- Stayed the Same
Change in Ombudsman Administration Since 2015

- Stayed the same
- Increased
- Decreased

<table>
<thead>
<tr>
<th>Category</th>
<th>States</th>
<th>Budget</th>
<th>Staffing Levels</th>
<th>Regional/Local Staffing Levels</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stayed the same</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Increased</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Decreased</td>
<td></td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>
Change in Reports made to Ombudsman Program since 2015

- Reports of abuse
- Reports of neglect
- Reports of exploitation
- Substantiated reports of abuse
- Substantiated reports of neglect
- Substantiated reports of exploitation

Number of States

- Increased
- Decreased
- Stayed the Same
Theme 5: Staffing and Leadership at Agencies Continue to Experience Significant Changes
Agency Director Tenure  
2015 v. 2017

2015 Agency Director Tenure

- Less than 1 year: 33%
- Between 1 and 5 years: 24%
- Between 5 and 10 years: 39%
- More than 10 years: 4%

2017 Agency Director Tenure

- Less than 1 year: 27%
- Between 1 and 2 years: 33%
- Between 3 and 5 years: 16%
- Between 5 and 10 years: 16%
- More than 10 years: 8%
How is the Director of the State Agency selected for her/his position?

Count:

- Direct gubernatorial appointment: 27
- Hired by higher ranking official within the agency/department, but serving at the convenience of the Governor: 1
- Appointee of a board or commission: 5
- Merit or civil service selection: 16
- Career, non-appointed, state employee: 2
- Other, please specify:
Percentage of State Agency Staff that Has Retired in the Past Five Years (Number of States)

- Less than 5%: 3
- Between 5% and 10%: 7
- Between 11% and 15%: 12
- Between 16% and 25%: 15
- More than 25%: 11
State Agency Staff Eligible for Retirement

Percentage of State Agency Staff Eligible for Retirement During the Next Five Years

Percent of States

<table>
<thead>
<tr>
<th>Percent of States</th>
<th>2011</th>
<th>2012</th>
<th>2014</th>
<th>2015</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than 5%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Between 5% and 10%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Between 11% and 15%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Between 16% and 25%</td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>More than 25%</td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>
Change in FTEs 2014-2017

Change in Agency FTEs 2014-2017

- The number increased by more than 10%
- The number increased by more than 5% but less than 10%
- The number increased by less than 5%
- The number stayed the same
- The number decreased by less than 5%
- The number decreased by more than 5% but less than 10%
- The number decreased by more than 10%
Theme 6: Agency Responsibilities are Expanding to Drive Service Integration
Populations Served by State Agencies

Percentage of Agencies Serving Population

- Older Adults (age 60+)
- Adults with physical disabilities between age 18-60
- Adults with intellectual/developmental disabilities between age 18-60
- Children with intellectual/developmental disabilities
- Individuals with traumatic or acquired brain injuries
- Individuals with behavioral health conditions
- Individuals with substance use disorders

2014 | 2015 | 2017
---|---|---
100% | 100% | 100%
79% | 76% | 88%
35% | 32% | 49%
22% | 40% | 34%
18% | 35% | 53%
10% | 25% |
Programmatic Responsibilities of the State Agency

- Administer Older Americans Act Title III programs
- Manage State Ombudsman Program
- Administer ADRC programs
- Provide Adult Protective Services
- Provide Medicaid HCBS waiver services
- Administer Medicaid Services to Medicaid Recipients
- Administer Medicaid managed long-term services and supports
- Administer Medicaid Financial Eligibility Determination
- Administer/Operate Institutional Facilities and Services

Number of States
State Agency Policy and Oversight Authority

Number of States

- Manage relationships
- Set statewide aging policy
- Set statewide LTSS policy
- Quality assurance of HCBS
- Set statewide disability policy
- Regulation of home and community-based providers
- Licensure and certification of assisted living services and staff
- Quality assurance for MLTSS
- Regulation of nursing facility services
- Licensure and regulation of HCBS providers
- Establish policy and manage contracts for MLTSS
Percent of Total Agency Budget from OAA

- Less than 1%
- Between 1% and 5%
- Between 5% and 15%
- Between 15% and 30%
- Between 30% and 50%
- Between 50% and 75%
- More than 75%
Update on State Plan HCBS Adoption
Status of State 1915(i) HCBS Benefit Packages

- **State with a 1915(i) benefit in place**
- **State plans to implement a 1915(i) in 2017 or later**
- **A 1915(i) is under consideration**
For more information, please visit: www.nasuad.org

Or call us at: 202-898-2578