NCI-AD

NATIONAL CORE INDICATORS-
Aging and Disabilities

NCI-AD WEBINAR:
WORKING WITH YOUR MEDICAID OFFICE

Thursday, September 4th from 3-4 p.m. EST

To join the audio conference:
Dial   888-346-3659
Access Code   33688#

9/4/2014

NASUAD
National Association of States
United for Aging and Disabilities

Desired Outcome

To establish a state-wide strategy to gauge the impact of the long-term services and supports systems on of life of seniors, adults with physical disabilities and their caregivers, *from their perspective,* regardless of setting or funding source, the effectiveness.

Ohio | Department of Aging

Pilot Overview

Sample

○ **Individuals receiving one or more Older Americans Act services and care coordination; and**

○ **Individuals, age 21 and up, enrolled on a 1915(c) and receiving one or more waiver service and case management**

○ **Sample Size: 1200+**

Status

Vendor: Vital Research

405 interviews were completed in 6 weeks

Staff

○ **Designated project manager to guide the vendor selection, initial data gathering, vendor training**

○ **Cross agency collaboration (policy, program, and data)**

○ **Approximately .5 FTE commitment total**

Ohio | Department of Aging

How does the state envision using the NCI-AD data?

Support policy and resource allocation decision-making;

Support implementation of the state's BIP work plan;

Data source for 1915(c) waiver public input requirements;

Olmstead Planning;

Demonstrate compliance with the CMS HCBS regulation.

Federal Financial Participation What

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- Each State is able to get Federal funds for some of the administrative costs it incurs for operating the Medicaid program

- With 'administrative match' claiming, every State can get 50% of the costs reimbursed.

- However, the State must show that costs are related to the State's operation of the Medicaid program.

- Federal funds for non-Medicaid activities IS NOT AVAILABLE

Federal Financial Participation How (part 1)

- The state must demonstrate that expenditures are necessary for the 'proper and efficient' administration of the Medicaid State plan

- Administering NCI-AD survey to Medicaid beneficiaries can be considered proper and efficient administrative costs

BUT

- The State Medicaid agency must make the request for Federal funds and ensure that all proper paperwork is in order

Federal Financial Participation How (part 2)

- Paperwork can include:

  1. An interagency agreement between the Medicaid agency and the survey-sponsoring agency.
     - The agreement should describe the NCI-AD activities
  2. Possible modification of the State's approved Public Assistance Cost Allocation Plan (42 CFR 433.34)
  3. A methodology to assign costs of the survey administration between Medicaid and other programs (especially important if surveyed individuals will include both Medicaid beneficiaries and AoA recipients)

Federal Financial Participation How (part 2)

- States that use health plans to deliver any Medicaid benefits have an additional tool for getting Federal funds for NCI-AD activities.

- Each state which uses health plans is required by Federal law to have an independent entity assess the quality of the managed care program.

- If the State's independent entity (called a 'external quality review organization' or EQRO) conducts the survey, the State may claim 75% of the costs for administering the survey to Medicaid beneficiaries.

Federal Financial Participation How (part 3)

Key Steps:

1. Discuss NCI-AD with the Medicaid agency

2. Explain its value in meeting CMS' quality requirements (both FFS and managed care)

3. Evaluate the possibilities for Federal funds claiming

NATIONAL CORE INDICATORS

A Collaboration of

the National Association of State Directors of

Developmental Disabilities Services

and Human Services Research Institute

NCI Performance Indicators: Evidence for New HCBS Requirements and Revised HCBS Assurances

Practical Tools for States

Prepared by Elizabeth Pell, MSW, LICSW
Human Services Research Institute

May 29, 2014

National Core Indicators Publication   www.nationalcoreindicators.org

Organization of the Guide

- **I. New HCBS Requirements and NCI Data**

- **II. New HCBS Requirements and NCI Data: Quick View Tables**

- **III. Revised HCBS Assurances and Sub-assurances and NCI Performance Indicators**

SECTION 1: New HCBS Requirements and NCI Data

- New HCBS Setting Requirements (Residential and Day Services)

- New HCBS Setting Requirements for Provider Owned/Operated Residential Settings

- New HCBS Person-centered Service Plan Process Requirements

- New HCBS Person-centered Service Plan Documentation Requirements

Requirement: Is integrated in and supports access to the greater community

NCI ACS Data:

- Where person lives

- If person interacts with neighbors (ACS, Home)

- Extent to which (frequency and with whom) people do certain activities in the community: shopping, errands, religious practice, entertainment, exercise, vacations, meetings (ACS, Community Integration)

- If people are supported to see friends and family when they want (ACS, Relationships)

- If people have a way to get places they want to go (ACS, Access)

- Whether the individual has friends or relationships with persons other than paid staff or family?

- If person has a paid job in the community. (ACS, Background Info)

Requirement: Ensures right to privacy, dignity and respect and freedom from coercion and restraint

NCI Data:

- If person has been treated with respect by paid providers/staff (ACS, Satisfaction with Services)

- Does person have enough privacy, can be alone with guests, whether mail/email is read without permission, if the person can use the phone/internet without restriction, and whether people ask before entering the home or bedroom. (ACS, Rights)

- Does person feel safe at home? At work/day program? In neighborhood? If person does not feel safe, is there someone to talk to?(ACS, Safety)

Requirement: Privacy in their unit including entrances lockable by the individual (staff have keys as needed

NCI data are useful in part for demonstrating compliance. NCI does not cover lockable entrances or control of keys.

NCI Data:

- If others announce themselves before entering home (ACS, Home)

- If others announce themselves before entering bedroom? (ACS, Home)

- If person has enough privacy (ACS, Home)

II. New HCBS Requirements and NCI Data: Quick View Tables

HCBS Setting Requirements	NCI - System Level Data
Is integrated in and supports access to the greater community	X
Provides opportunities to seek employment and work in competitive integrated settings, engage in community life, and control personal resources	X
Ensures the individual receives services in the community with the same degree of access as individuals not receiving Medicaid HCBS	--
Allows full access to the greater community	X
Is chosen by the individual from among residential and day options that include generic settings (Choice of provider in provider owned and operated settings guidance– CMS clarified that choice of provider is intrinsic to the setting.)	X (in part)

III. Revised HCBS Assurances and NCI Performance Indicators

Service Plan Sub-assurances	NCI Performance Indicators
i. Service plans address all members' assessed needs (including health and safety risk factors) and personal goals, either by the provision of waiver services or through other means.	NCI data sources contribute in part to meeting this sub-assurance. Sub-assurance has two components: 1) whether plans include an individual's personal goals and 2) if the individual's assessed needs are addressed in the plan. Adult Consumer Survey • Proportion of individuals who report that they do not get the services that they need • Proportion of people reporting that service coordinators ask them what they want. • Proportion of people reporting that service coordinators help them get what they need. Family Surveys • Proportion of families who report their family member has a service plan that the family and/ or family member helped create, the plan meets the needs of the family/individual, and includes things that are important to the family. • Proportion of families who report that services/supports are available when needed and meet the family's needs, including in a crisis.

Full document:

http://www.nationalcoreindicators.org/upload/core-indicators/HCBS_Reqmts_and_CMS_Assurances_Crosswalk_with_NCI_May_2014_FINAL.pdf

Indiana Transition Plan:

http://www.in.gov/fssa/files/HCBS_Transition_Plan_FINAL_7_3_2014.pdf