



LTSS Assessments: Opportunities to Consider

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Uses for LTSS Assessments

- Screening
- Level of care determination for Medicaid 1915(c) waiver and other Medicaid authorities eligibility
- Support plan development
- Resource/budget allocation
- Quality/outcomes

Assessment Domains

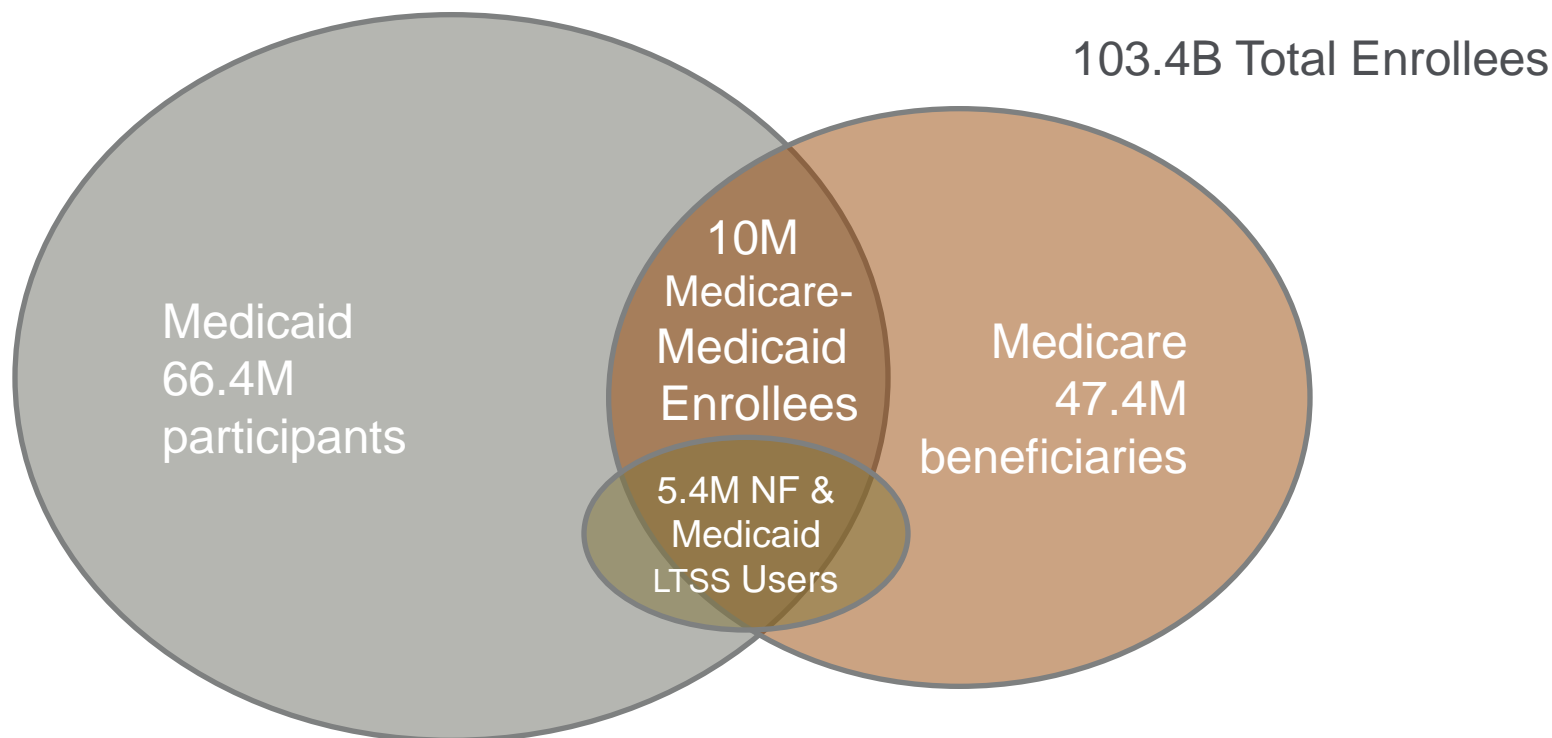
Domains Usually Covered

- Physical Health
- Mental Health
- Functioning
- Social Resources
- Economic Resources
- Physical Environment

Balancing Incentive Program Domains

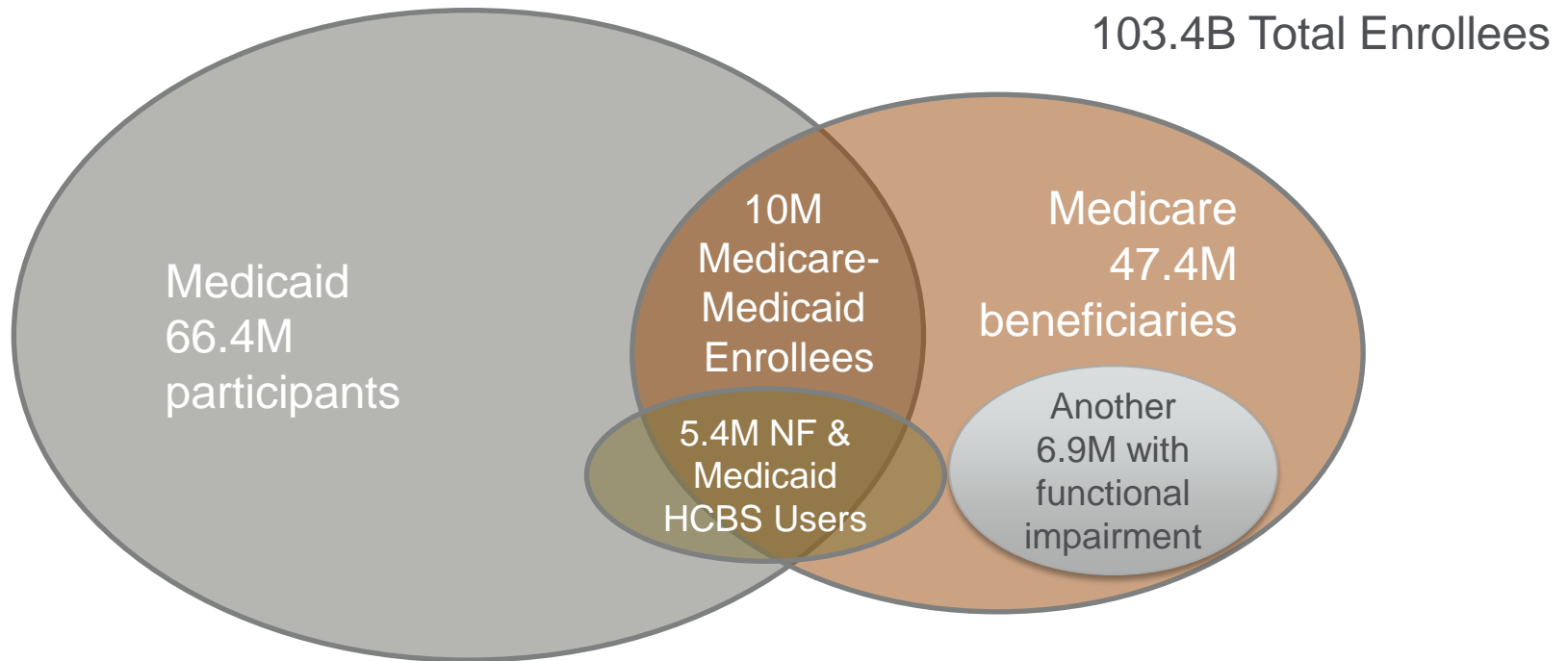
- Activities of Daily Living
 - e.g., eating, bathing
- Instrumental Activities of Daily Living
 - e.g., housework, preparing meals
- Medical Conditions/Diagnoses
- Cognitive Function and Memory/Learning
- Behavior Concerns
- Background and Financial Information Not Required

Nursing Facility and Medicaid HCBS Users Represent 5% of combined Medicare and Medicaid Enrollees and Nearly 1/3rd of Spending



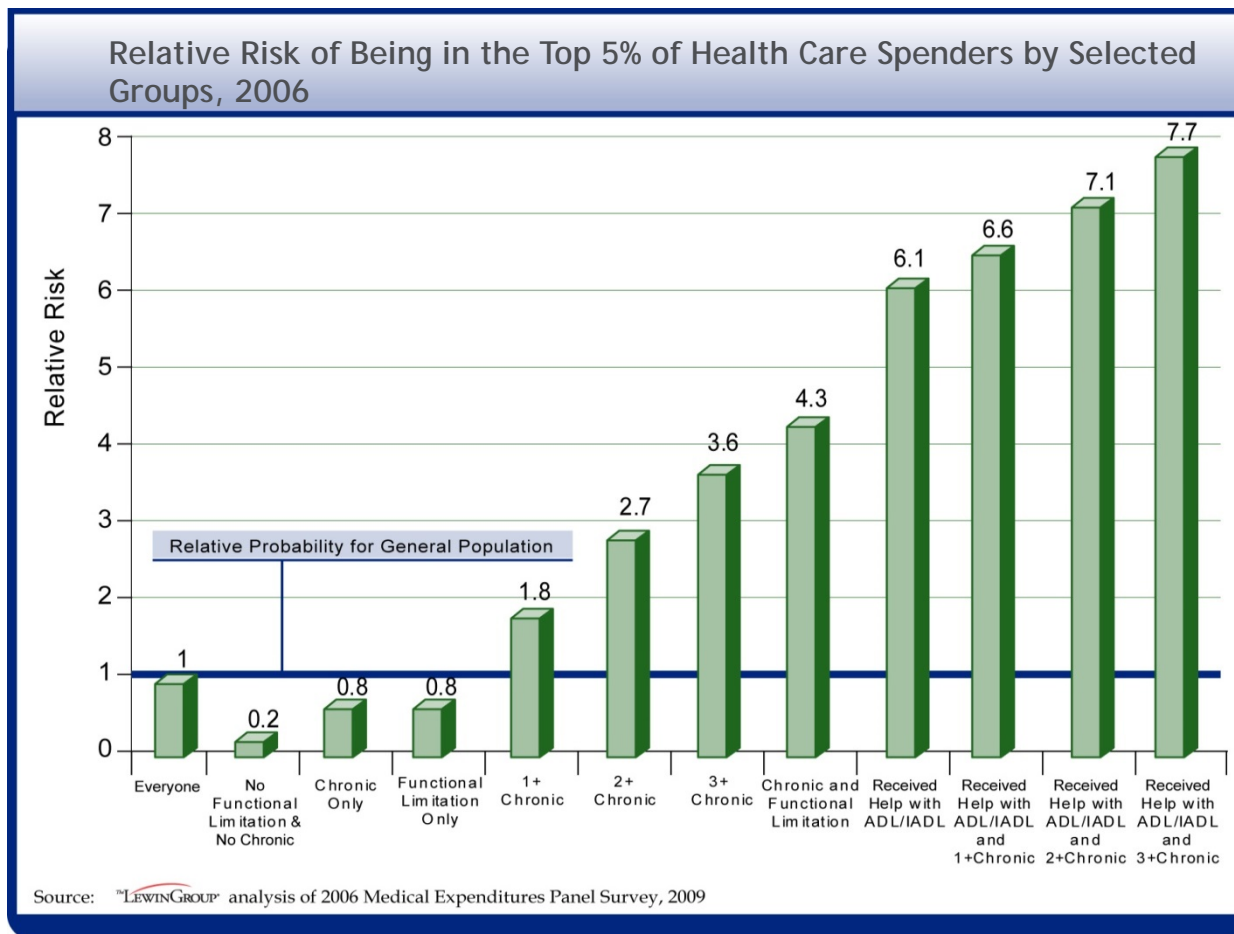
- NF and Medicaid LTSS Users represent 5% of total combined Medicare and Medicaid enrollees
 - Account for nearly 1/3rd of Medicare and Medicaid spending
 - 40% of LTSS Users spending goes to LTSS
 - Account for 21% of Non-LTSS Medicare and Medicaid spending
- Medicaid LTSS Users represent 6% of Medicaid participants
 - Account for about half of Medicaid spending
 - Constitute 27% of Medicare-Medicaid Enrollees (46% of full MMEs)

Additional Individuals Need Supports and Coordination



- Another 15% of Medicare beneficiaries have functional impairments, but do not receive Medicaid HCBS or use a nursing facility or ICF-I/DD.
 - Primarily receive support from family and friends, but a small percentage benefit from state funded or Older American's Act services.
 - Medicare spending for these individuals runs 2.5 times Medicare community residents without functional impairment.

Need to Identify Functional Status Beyond LTSS

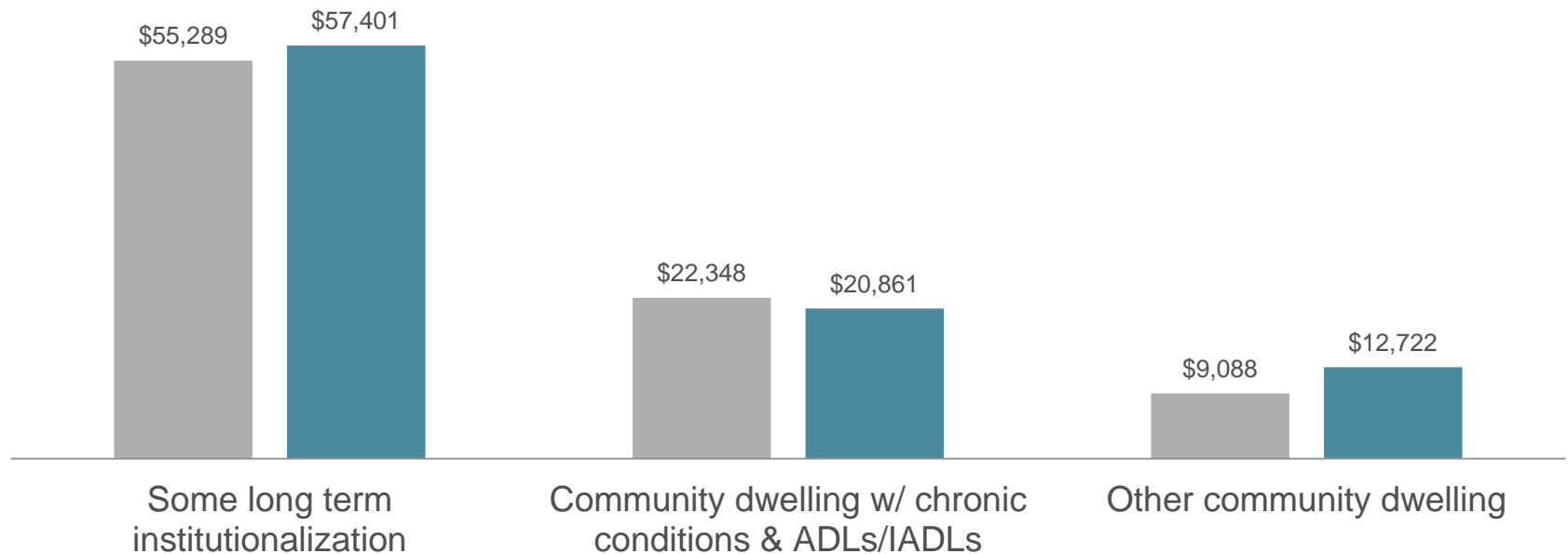


People with Chronic Conditions & Functional Limitations are 4 to 7 Times More Likely to Reach the Top 5% of Health Spenders

Individuals with Functional & Cognitive Impairments Need to Serve as the Touchstone for Systems Transformation

Among Medicare Beneficiaries, Functional Impairment Drives Health Spending Regardless of Funding Source

■ Medicare with No Medicaid ■ Medicare-Medicaid Enrollees



Source: The Lewin Group analysis of the Medicare Current Beneficiary Survey, Cost and Use, 2006.

Recommendations

- Chart a path to a nationwide uniform electronic LTSS assessment
 - Use of modules as necessary for additional detail
- Include at least minimal functional status information as part of claims
 - Would allow more pro-active approach to interventions
- Develop evidence base for linking LTSS resources (both types of services and intensity) to desired outcomes
 - Historical allocation patterns and lack of assessment and outcome data make this very difficult; may not reflect optimal service mix and intensity
 - May require a demonstration
- Continue momentum toward a person-centered, inter-disciplinary team approach to integrating LTSS, behavioral health, and acute care