

Core Standardized Assessment

Public Stakeholder Meeting

December 12, 2011

How Assessments Are Used

- We currently utilize many assessments to determine medical eligibility and referral to appropriate programs.
- Our goal is to transition to a standardized assessment tool with core questions that are applicable to programs in various settings regardless of population or service needs.
- Having a standardized set of questions will help us to organize information and refer individuals to the proper programs.

A Path to a Standardized Assessment

- In 2010, the Long Term Care Reform Workgroup recommended the development of a single standardized assessment instrument to be used across programs.
- An instrument that is evidence-based and tested for validity and reliability will improve the quality of community support plans and reduce the effects of the programmatic silos.
- DHMH has begun the process by:
 - researching and evaluating existing evidence-based instruments
 - hosting public stakeholder meetings to review assessment options with stakeholders
 - ensuring that the new instrument meets the requirements for the Balancing Incentive Payments Program

Balancing Incentive Payments Program (BIPP)

- Incentive for states to rebalance long-term services and supports (LTSS)
- As a provision of the Affordable Health Care Act, it offers an enhanced federal medical assistance percentage for all HCBS covered during the “balancing incentive period” through September 30, 2015
- Enhanced federal payment rates
 - 2% for states with less than 50% of LTSS spending in non-institutional settings
 - 5% for states with less than 25% LTSS spending in non-institutional settings
- Maryland qualifies for the 2% enhanced payment rate and intends to apply in early 2012

BIPP Requirements

- All enhanced federal payments must be used to fund new and expanded Medicaid community-based LTSS
- Within six months, states must initiate “structural changes” to their LTSS systems that include:
 - Creation of a Single Point of Entry system for LTSS
 - Development of a Standardized Assessment Instrument
 - Implementation of Conflict Free Case Management
- By the end of the BIPP period states must:
 - Increase HCBS to 50% of total Medicaid LTSS spending
 - Implement required structural changes

BIPP Process

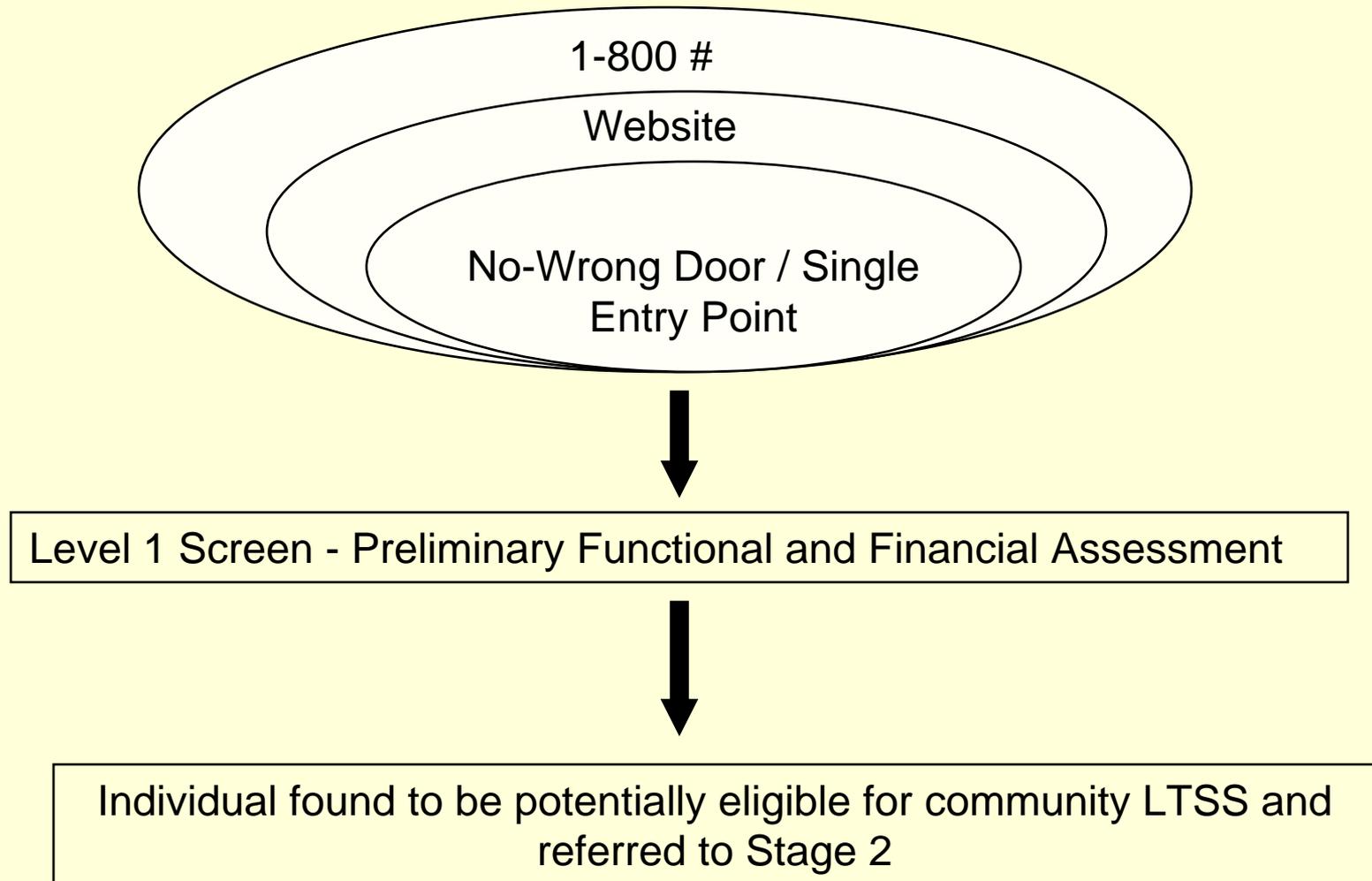
- The submission of the BIPP application is driving the time line.
- An initial decision on a core assessment tool will be included in this application.
- The design of the standardized assessment will happen in two phases:
 - Phase 1 of this process is selecting a tool and designing a computer application to pilot the assessment
 - Phase 2 will be to determine all programs using the tool and adding sets of questions specifically designed for their population.

BIPP Assessment Requirements

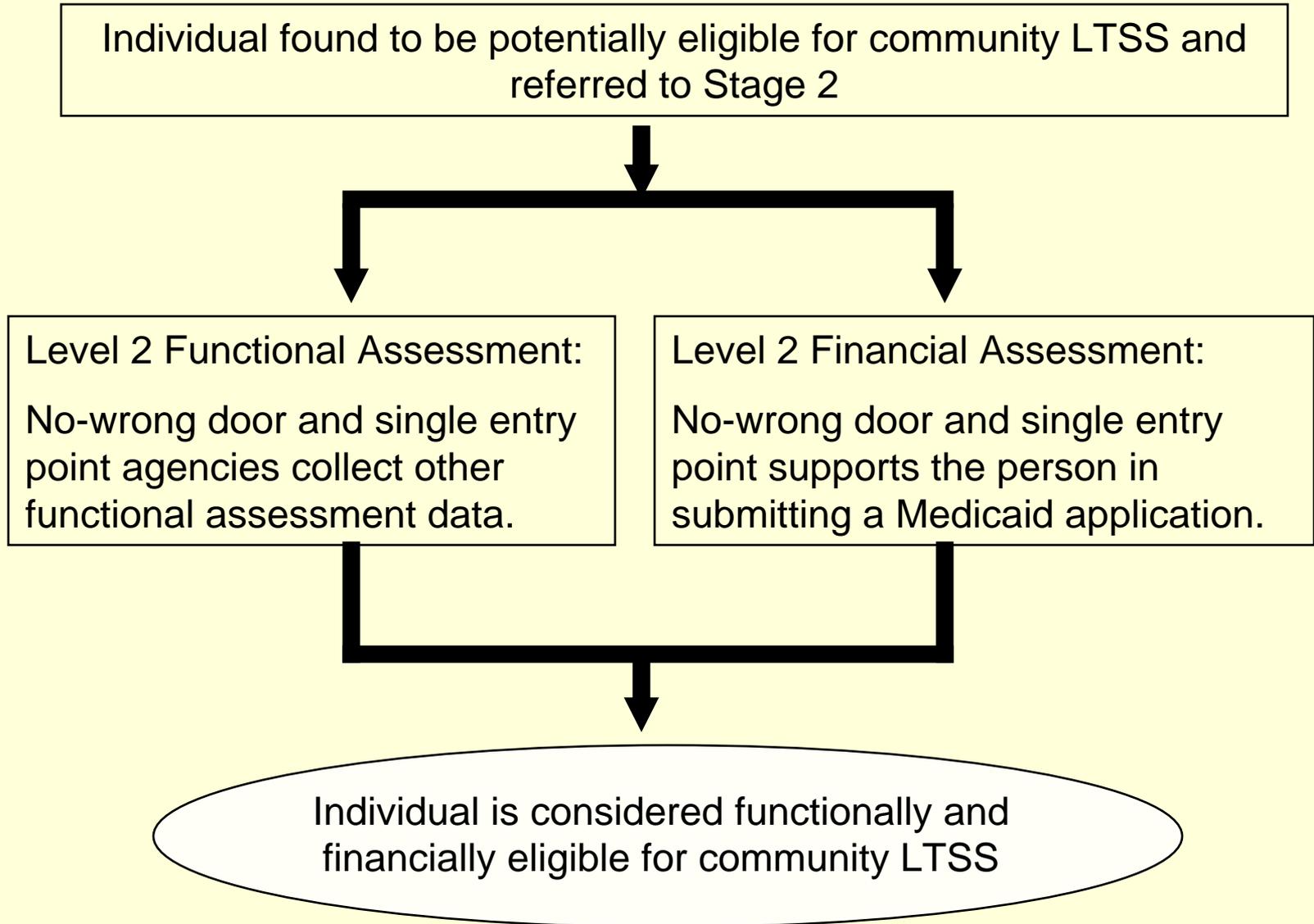
Assessment data

- are captured Statewide for all populations seeking community LTSS.
- include a Level I screen/Level II assessment process across populations.
 - Level I screen is available for completion in person or over the phone.
 - Level II assessment is completed in person, with the assistance of a qualified professional.
- are used to determine eligibility, identify support needs, and inform service planning.

Stage 1 – Initial Entry Point / Level 1 Screen



Stage 2 – Streamlined Eligibility and Enrollment Process



BIPP Assessment Requirements

Required domains

- Activities of Daily Living (ADLs)
- Instrumental Activities of Daily Living (IADLs)
- Cognitive function and memory/learning difficulties
- Medical conditions
- Behavior difficulties

Figure 4-4: Core Dataset: Required Domains and Topics for a CSA

Background Information

1. Activities of Daily Living

Eating	Mobility (in/out of home)
Bathing	Positioning
Dressing	Transferring
Hygiene	Communicating
Toileting	

2. Instrumental Activities of Daily Living *(not required for children)*

Preparing Meals	Housework
Shopping	Managing Money
Transportation	Telephone Use
Managing Medications	Employment

3. Medical Conditions/Diagnoses

4. Cognitive Function and Memory/Learning

Cognitive Function
Judgment/Decision-Making
Memory/Learning

5. Behavior Concerns

Injurious	Uncooperative
Destructive	Other Serious
Socially Offensive	

Financial Information

CMS Recommendations

- Test assessment tools for validity and reliability
- Automate the assessment process
- Evaluate the quality and utility of data collected
- Ensure the assessment
 - Determines eligibility
 - Summarizes an individual's strengths and support needs.
 - Utilizes a strengths or support-based approach
 - Balances the need for data with ease of use
 - Is culturally competent
 - Considers family/caregiver needs
- Involve stakeholders in the design
- Includes financial assessment - employment

BIPP Updates

- CMS evaluated 23 instruments
- Eight of those instruments covered the majority of the required BIPP domains
 - Several of the assessments were based on the Minimum Data Set for Home Care (MDS-HC) (Older version of interRAI - Home Care) but customized for individual states
- Three assessments were identified as most closely matching the BIPP standards for use across populations
 - interRAI Home Care
 - Minnesota MnCHOICES
 - Supports Intensity Scale (SIS)

Pros/Cons - Identified Tools

MN Choices

interRAI Home Care (HC)

Supports Intensity Scale (SIS)

MN Choices – The Homegrown Approach

- Minnesota began with a crosswalk of 24 assessment tools that had been in use in the state
- Decided to create their own tool using questions that were already found within these tools
- Added other questions based on instruments used in other states

MN Choices

3 phases

1. An “initial contact” screening call that captures the reason for referral, the urgency of the person’s needs, and whether a full assessment is needed
2. Assessment of preferences, strengths, and needs
3. Development of the support plan

MN Choices

A. First Contact Triage Intake

B1. Person-Centered Interview –
Ages 14-64

B2. Person-Centered Interview –
Over 65

B3. Person-Centered Interview for
Birth to 13

C. Capacity for Self Direction

D. Initial Trigger Questions

E. Adult Health Assessments

F. Substitute Decision-Making

G. Functional Memory and Cognition

H. Children's Health Functioning

* *BIPP Required Domains*

* Recommended

*I. Sensory Channels and
Communication Skills*

*J. Social Communications and
Friendships*

K. Living Arrangements
Environmental Screening

L. Caregiver Assessment

M. Activities of Daily Living

*N. Instrumental Activities of Daily
Living*

O. Employment Module

P. Support Planning Module

Q. Demographic-Administrative

S. Assessment Conclusion Iteration

MN Choices

Covers all 5 BIPP requirements:

- ADLs – eating, bathing, dressing, hygiene, toileting, mobility (home/community), positioning, transferring, communicating
- IADLs – preparing meals, shopping, transportation, housework, managing medications, managing finances, telephone use, employment
- Medical Conditions
- Cognitive Function and Memory/Learning
- Behavior Concerns

MN Choices – Pros and Cons

Pros

- Stakeholder input
- Customized tool
- Person centered
- Strengths based
- Low Cost
- Brain injury screen
- Covers all BIPP required domains

Cons

- Length of time to establish; automation not yet complete
- No validity/reliability test
- Assessment takes longer (2-3 hours)
- Scoring based on legacy assessment
- Resource Allocation

interRAI-HC

- Developed by group of clinicians and researchers beginning in 1993 as MDS-HC
- Tool contains triggers for Clinical Assessment Protocols (CAPs) allowing for more detailed questions in areas such as Mental Health and Intellectual Disabilities
- InterRAI offers a series of assessment tools designed to work together to form an integrated health information system
 - Home Care
 - Nursing Home and Long-Term Care Facilities
 - Post-Acute Care
 - Institutional Mental Health Care
 - Community Mental Health Care
 - Palliative Care
 - Acute Hospital Care
 - Intellectual Disabilities
- Home Care would be used as the care assessment for receiving home and community based services

interRAI-HC User States

(as of September 2011)

- Arkansas
- Georgia
- Hawaii
- Indiana
- Louisiana
- Massachusetts
- Michigan
- Missouri
- Nebraska
- New Jersey
- New York
- North Carolina
- South Dakota
- Texas
- Utah

interRAI-HC

5 phases:

1. Screening
2. Assessment (interRAI/other)
3. Decision-making (CAPs/other)
4. Care plan development
5. Evaluation

interRAI-HC – Item Guide

A. Identification Information

B. Intake and Initial History

C. Cognition

D. Communication and Vision

E. Mood and Behavior

F. Psychosocial Well-Being

G. Functional Status

H. Continence

I. Disease Diagnoses

J. Health Conditions

* *BIPP Required Domains*

* Recommended

K. Oral and Nutritional Status

L. Skin Conditions

M. Medications

N. Treatments and Procedures

O. Responsibility

P. Social Services

Q. Environmental Assessment

R. Discharge Potential and
Overall Status

S. Discharge

T. Assessment Information

interRAI-HC

Covers all 5 BIPP requirements

- ADLs – bathing, personal hygiene, dressing upper body, dressing lower body, walking, locomotion, transfer toilet, toilet use, bed mobility, eating, communicating
- IADLs – meal preparation, ordinary housework, managing finances, managing medications, phone use, stairs, shopping, transportation
- Medical Conditions
- Cognitive Function and Memory/Learning Behavior Concerns
- Behavior Concerns

interRAI-HC

Pros

- Validity/Reliability tested
- Ability to add to assessment
- Triggers for more focused questions
- Supports resource allocation
- Groups people by level of need
- 1-1½ hours to administer
- Covers all BIPP required domains
- Strength based
- Person centered
- Low cost
- Contains instructions for automation

Cons

- Limited ability to modify questions
- No employment data collected

Supports Intensity Scale (SIS)

- Assessment tool that evaluates practical support requirements of a person with an intellectual disability
- Published 2004; has validity/reliability data
- Available in print and online format
- Version for children coming in 2013
- Multiple states and local communities utilize the SIS

Supports Intensity Scale (SIS)

Section 1. Support Needs Scale:

- A. *Home Living Activities*
- B. *Community Living Activities*
- C. Lifelong Learning Activities
- D. *Employment Activities*
- E. *Health and Safety Activities*
- F. Social Activities

Section 2. Supplemental and Advocacy Scale

Protection and Advocacy Activities

Section 3. Exceptional Medical and Behavioral Support Needs

- A. *Medical Supports Needed*
- B. *Behavioral Supports Needed*

* *BIPP Required Domains*

SIS

Covers 4 BIPP requirements:

- ADLs – eating, bathing, dressing, hygiene, toileting, mobility, positioning, transferring, communicating
- IADLs – preparing meals, housework, shopping, transportation, managing medications, employment, managing money telephone use (not specifically mentioned)
- Medical Conditions/Diagnoses Behavioral Concerns
- Behavior Concerns

SIS

Pros

- Person-centered
- Supports oriented
- Validity/Reliability testing
- Support Resource Allocation
- Automated
- 20 minutes to administer

Cons

- Targeted use - Intellectual Disabilities group
- No Level 1 Screen
- Missing key areas of BIPP requirements
 - Questions pertaining to Cognitive Function and Memory/Learning
 - Missing 2 BIPP recommended ADLs and 3 IADLs

Public Comment

- Topics for discussion
 - Thoughts on pros and cons
 - What is most important for the screen?
 - What is most important for assessment?
 - Overall concerns

	interRAI HC	MnCHOICES	SIS
Background Information			
Demographics	X	X	X
Emergency Contacts		X	
Primary Caregiver	X	X	
Legal Representatives/Documents		X	
Health Insurance		X	
Primary Health Care Provider		X	
Client Report of Functional Status/Needs	X	X	
Support Systems	X	X	X
Current Formal Services and Providers	X	X	X
Living Arrangements	X	X	
Language of Cultural Issues	X	X	X
Interpreter Requires/Present		X	
Citizenship/Vet Status	X	X	
Request for Assistance	X	X	

	interRAI HC	MnCHOICES	SIS
Functional Assessment			
Activities of Daily Living (ADLs)			
Bathing	X	X	X
Personal Hygiene	X	X	X
Dressing	X	X	X
Mobility Outside of Home	X	X	X
Mobility In Home	X	X	X
Transferring	X	X	
Toilet Use	X	X	X
Mobility In Bed	X	X	
Eating	X	X	X
Communication	X	X	X

	interRAI HC	MnCHOICES	SIS
Instrumental Activities of Daily Living (IADLs)			
Meal Preparation	X	X	X
Ordinary Housework	X	X	X
Managing Finances	X	X	X
Managing Medications	X	X	
Phone Use	X	X	
Shopping	X	X	X
Transportation	X	X	
Physical Environment	X	X	

	interRAI HC	MnCHOICES	SIS
Health			
Vital Signs			
Preventive Health (vaccines, breast exams)	X	X	
Medical Condition/Diagnosis	X	X	
Special Treatments, Assistive Devices	X	X	X
Professional Nursing/Therapy Services	X	X	X
Medications	X	X	
Pain or Palliative Care	X	X	
Vision	X	X	
Hearing	X	X	
Nutrition Status/Lifestyle	X	X	X
Skin Condition	X	X	X
Dental Status	X	X	
Alternative Medicine		X	
Potential for Abuse or Neglect		X	X

	interRAI HC	MnCHOICES	SIS
Financial Assessment			
Income			
Assets/Real Estate			
Employment		X	
Cognitive/Social/Emotional/Behavioral			
Cognitive Functioning	X	X	X
Memory Concerns	X	X	
Psychosocial (mental status, stressful events)	X	X	X
Social Participation	X	X	X
Behavior Problems	X	X	X
Other			
Caregiver/Support Person Stress		X	