Missouri NF LOC Model Framework Draft for Stakeholder Input

July 13, 2018



Begin With The End In Mind

Overarching Goal: Create a new Level of Care (LOC) model that:

- 1. Ensure access to care for most in need of HCBS providing least restrictive community setting as long as safely possible
- 2. Use **limited state resources** on those most in need of HCBS compared to more costly facility placement.
- 3. Ensure individuals able to live in the community are not inappropriately placed in a more restrictive setting.



Which Comes First?



- OR -





What Today Is About...

The Nursing Facility Level of Care New Model **Framework**



What Today Is NOT About...

The Nursing Facility Level of Care New Model **Process**



Session's Agenda

- 1. Refresh memory of material covered in last session
- 2. Share feedback results collected from stakeholder groups
- 3. Offer a first draft of the model framework
- 4. Solicit input on proposed framework
- 5. Invite further comment through online survey







What Are The Criteria Buckets?

- Six Shared Buckets
 - ADLs
 - IADLs
 - Medical
 - Clinical
 - Safety
 - Cognition



Activities of Daily Living Indicators

- Transfers
- Locomotion
- Bed mobility
- Upper dressing
- Lower dressing
- Eating
- Toileting
- Personal care
- Bathing



Instrumental Activities of Daily Living Indicators

- Grocery shopping
- Laundry
- Light housework
- Meal preparation
- Medication management
- Money management
- Personal hygiene

- Transportation
- Using phone to accomplish tasks
- Bill paying
- Scheduling medical appointments
- Other shopping tasks



Medical Indicators

- Medical history
- Mental health history
- Vital signs
- Medications
- Medical conditions
- Diagnoses
- Special treatments or diet



Clinical Indicators

- Assistive devices
- Treatments and procedures
- Rehabilitative services
 - Tube feeding
 - Wound care
 - Occupational therapy
 - Ventilator care
 - Tracheotomy care



Safety Indicators

- Environmental factors/problems
- Living conditions
- Risk evidence



Cognition Indicators

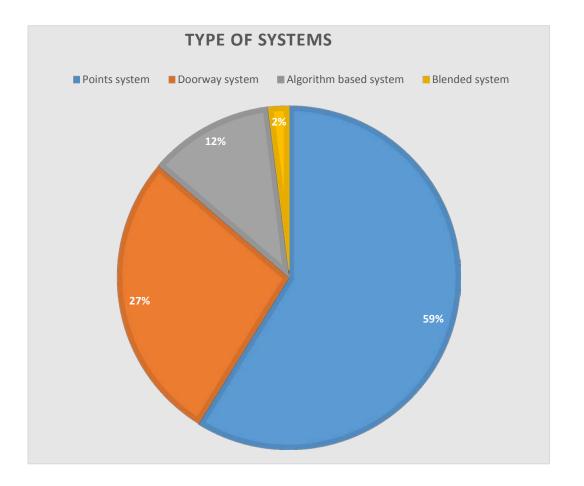
- Memory
- Behavior
- Communication
- Sensory orientation
- Assessment of social situation
- Expression



How Does Someone Meet Eligibility?

Four Framework Systems

- Points
- Doorway
- Algorithm-based
- Blended







Question 1: Identify Challenges

 QUESTION – When thinking about the current LOC criteria and process, what are the three to five most significant challenges or issues experienced by the populations you serve?

- Write one idea per notecard
 - No less than 3 cards
 - No more than 5 cards
 - Please write legibly



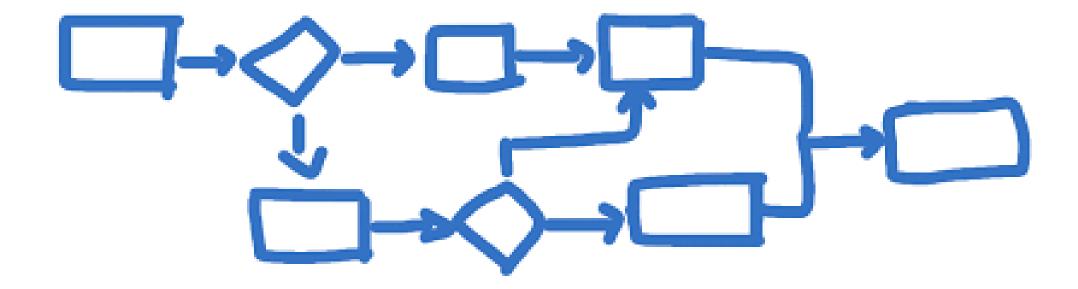


Question 2: The Future State



If you could wiggle your nose and make it magically happen, what changes would you like to see implemented in the LOC process in Missouri?







Feedback From The Field - HCBS

Process Challenges

- Assessor training-inconsistent and different outcomes (20)
- Self report information-verify information, not honest
- NF and HCBS disparity in process

Process Changes

- Role of medical professionals and certified assessors-level of KSAs and consistency (25)
- Assessor, provider, and individual together for assessment
- Validation and verification of assessment
- Need for "unified delivery system" after become NF LOC eligible

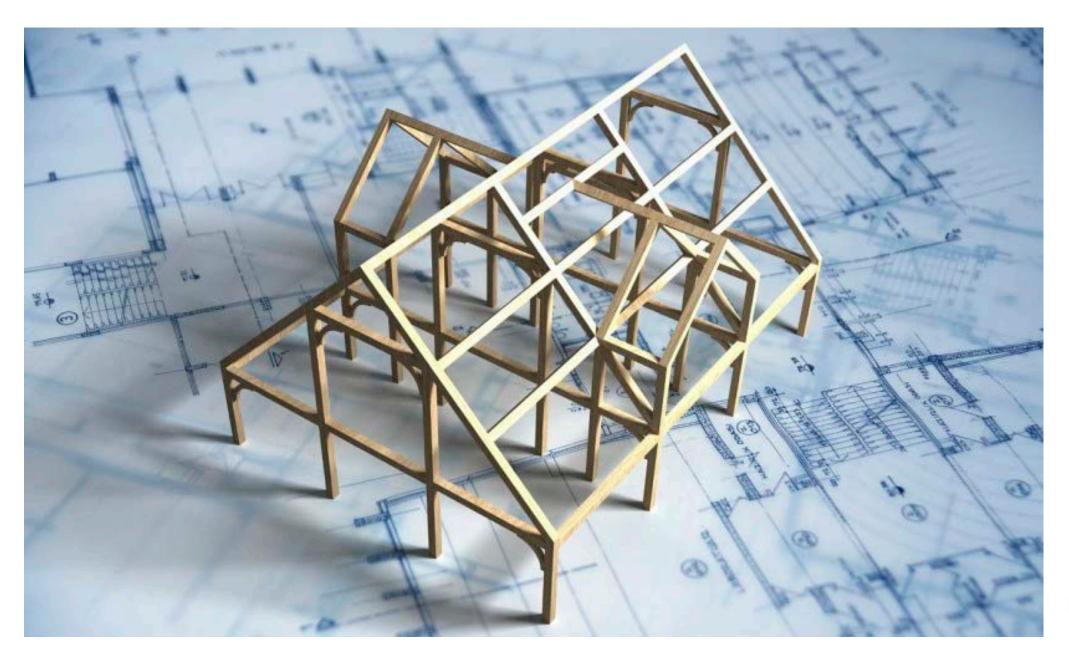
Feedback From The Field - SNFs

Process Challenges

- Slow response after assessment completed ~90 days
- Lack of understanding of assessment (inaccurate/incomplete)
- Backlog/lost forms at COMRU

Process Changes

- Case mix-payment allocation reimbursement
- Certified assessor for consistency





Feedback From The Field - HCBS

Framework Challenges

- Mental Health not adequately addressed in current system (13)
- Point system doesn't work because allows "in" those that should not be, should be age and diagnosis (22)

Framework Changes

 Doorways (Dementia, MI, I/DD, Disabled Adult, Frail Elder, ST Rehab), blended doorway with points-operationalize (47)

Feedback From The Field - SNFs

Framework Challenges

- MDS coding and LOC definitions do not match
- Residents unsafe at home but do not qualify, cognition (MI/Memory challenges and Safety)
- Medication (# of meds) versus diagnosis
- Different assessed needs for mentally ill (MI) young person and MI frail elder, not use the consistent criteria
- Personal care needs not a good scale

Framework Changes

Doorway

Questions on Feedback?



Introduction to Proposed Doorways



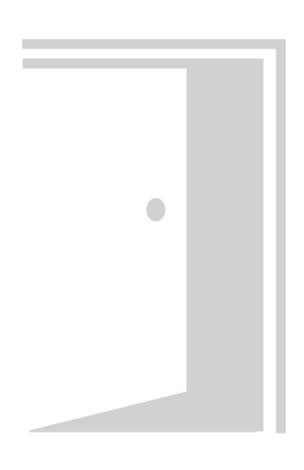


Doorway Design

What *indicators* put someone in a place where they need to receive their care in a nursing home environment?



Doorway 1: Frail Elderly

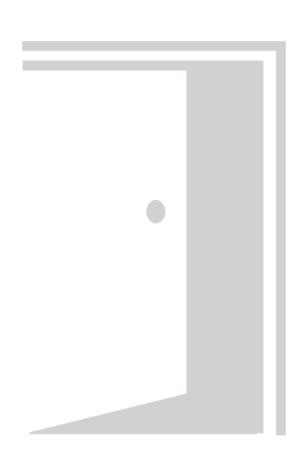


Definition: Individuals age 80 and over with a decreased ability for independent living due to chronic health problems, physical limitations, and/or impaired mental abilities.

- ADL's (Activity of Daily Living) e.g. Bathing, Mobility, Transfers, Dressing, Grooming, Toileting, Eating
- IADLs (Instrumental Activities of Daily Living)-Meal prep
- Safety-ADLs impacting health, Fall risk (bathing, transfers)



Doorway 2: Physical Limitations

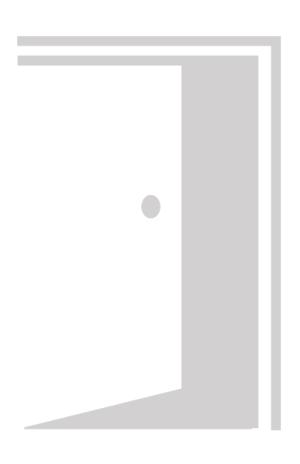


Definition: An individual with a physical limitation, medical diagnosis, and/or chronic condition that leads to the need for physical hands-on care.

- ADLs-Bathing, Mobility, Transfers, Dressing, Grooming, Toileting, Eating
- IADLs-Meal prep
- Safety-ADLs impacting health, Fall risk (bathing, transfers)



Doorway 3: Dementia

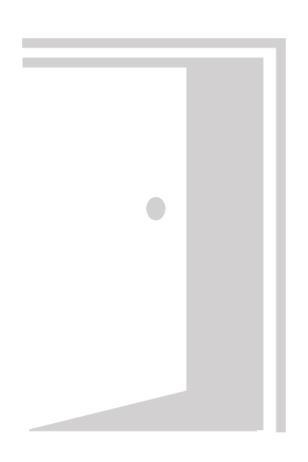


Definition: Professional Dementia Diagnosis required.

- ADLs-Bathing, Mobility, Dressing, Grooming, Toileting, Eating
- IADLs-Grocery Shopping, Laundry, Light Housework, Meal Preparation, Medication Management, Money Management, Personal Hygiene, Transportation, Using Phone to Accomplish Tasks, Bill Paying, Scheduling Medical Appointments, Other Shopping Tasks
- Cognition-Behavior, Expression, Memory
- Safety-Wandering/Exit Seeking, ANE (abuse, neglect, exploitation)



Doorway 4: Mentally Ill

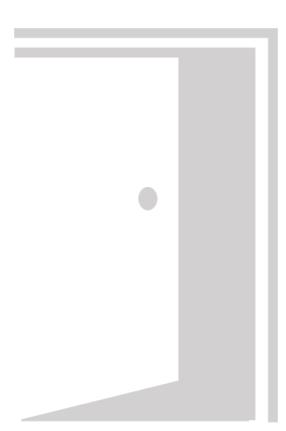


Definition: Professional Mental Health Diagnosis required.

- IADLs-Self care
- Safety-Wandering/Exit seeking, Behavioral, Fall risk



Doorway 5: I/DD (Intellectual or Developmental Disability) or ABI (Adult Brain Injury)

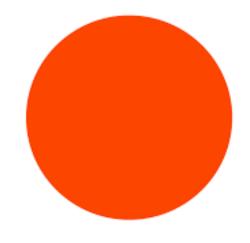


Definition: Professional Diagnosis of I/DD, Acquired Brain Injury or Traumatic Brain Injury as defined in RSMO-192.735.

- IADLs-Self care
- Safety-Wandering/Exit seeking, Behavioral, Fall risk



Activity: Gallery Walk



Place a dot by up to six items which should stay the same in the final framework.



Place up to three post-it notes with ideas for improvement (additions, deletions, changes)



Did We Get It Right?

What *indicators* put someone in a place where they need to receive their care in a nursing home environment?



Scoring Indicators

- How do you score the various indicators listed?
- When looking nationally, the range of options include:
 - oMinimum, moderate, extensive
 - 00, 3, 6, 9 intervals
 - $\circ A + B + C + D$ (must meet all)
 - oMust meet one
- Allowed to have different scoring by doorway
 Not all must be weighted the same



Activity: Establishing a Scoring System

- Break into small groups by doorway
- Use the draft as the basis for your work
- Propose an answer to these dilemmas:

How would your group recommend this doorway be scored?

If validation is needed, how would you do this?



Report Out





Next Steps



Complete Online Survey

Next Meeting in August

Project complete by November

