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· A Report to the Medicaid  
· Long-Term Care Task Force  
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Persons Using Medicaid-Funded  
Nursing Home  
and  
Home and Community-Based  
Waiver Services  
Fiscal Year 2002

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## **About This Report**

This report is designed to give a statewide snapshot of two Medicaid-funded long term care populations: people served in the MI Choice Home and Community Based Services waiver, and Medicaid beneficiaries residing in Michigan nursing facilities. Data used come from two compatible datasets, the Minimum Data Set for Home Care (MDS-HC), and the Minimum Data Set (MDS).

Unlike earlier Participant Profile reports submitted to the Department of Community Health for fiscal years 1999, 2000, and 2001, which provided information about persons at admission, the data here represent a cross-section of persons in each setting in 2002. To create this sample, we used the full assessment record for open cases that was closest to July 2002. Incomplete assessment forms were included only if all variables that are addressed in the analysis were completed. Medicaid eligibility was confirmed by matching assessment records against payment records in the Medicaid Management Information System.

The data were analyzed at the University of Michigan as part of the Long Term Care Data Archive funded by the Department of Community Health.

## **How the Report Is Organized**

The report displays information on selected assessment items, as well as a variety of scales and indices. In most cases, the items and their timeframes for measurement are the same in both the MDS and the MDS-HC. Whenever items are not compatible, we have noted the differences. Explanations for the items/scales are found on the page opposite the data throughout the document.

The report contains seven topic areas: Demographics, Caregiver Status, MI Choice Placement Algorithm, Health/Mental Health Status, Participant Characteristics, Disease Diagnoses, and Prior Service Use.

## **Demographics**

This section captures a general picture of the persons served in each setting. Values in the table represent the percent of individuals in each setting with a particular attribute.

## **Living Arrangements**

Living arrangement refers to the person's permanent living arrangement at the time of the initial assessment. "Group setting" includes a variety of community residential settings, including adult foster care homes and homes for the aged.

## **Caregiver Status**

Caregiver status identifies the unpaid support and assistance received by MI Choice waiver participants. This information is not collected on the nursing home MDS.

### **Participants with 1+ caregiver**

This describes whether the participant has one or more family members, friends, or neighbors who do or would provide assistance to the person.

### **Areas of Help**

This subsection refers to whether or not help was given for either emotional support (listening, "being there" for the person), IADL care such as housework, shopping, or transportation, or or ADL care, such as dressing, bathing or assistance with eating.

The last two characteristics in this section summarize (1) the proportion of those participants who received more than 30 hours of informal help with ADLs or IADLs over the last seven days and (2) the proportion of informal helpers who were unable to continue in care giving activities.

<b>DEMOGRAPHICS</b>		
	<b>MI Choice Waiver</b>	<b>Nursing Home</b>
Persons Served		
Sample Size	9,693	33,584
Gender (% female)	73%	73%
Marital Status (% married)	26%	17%
Living Arrangement		
Lives Alone	44%	25%
Lives With Spouse Only	19%	na
Lives With Others	11%	na
Lives In Group Setting	2%	8%
Age		
Under 65	24%	11%
65-79	36%	27%
80 and over	40%	62%
Race		
White	77%	83%
Black	23%	15%
Other	1%	1%

<b>CAREGIVER STATUS</b>		
	<b>MI Choice Waiver</b>	<b>Nursing Home</b>
Participants with 1+ caregiver	95%	na
Primary caregiver lives with participant	44%	na
Primary caregiver/participant relationship		
Child or Child-in-Law	52%	na
Spouse	19%	na
Other Relative	19%	na
Friend/Neighbor	11%	na
Areas of Help		
Advice or Emotional Support	96%	na
IADL care	88%	na
ADL care	52%	na

## **MI Choice Placement Algorithm**

Under contract to DCH, The University of Michigan developed an algorithm that would predict the care needs of persons seeking long term care assistance. The algorithm predicts five "levels of care" that roughly correspond with the following care modalities:

**nursing home:** the person has extensive medical and personal care needs that require ongoing 24 hour care.

**home care:** the person can be cared for in a home or community based setting but requires intensive skilled nursing care or therapy services (three or more times a week), minimal skilled nursing care or therapy services (one to two times a week), or intensive personal care services (daily assistance for multiple tasks.)

**intermittent personal care:** the person can be cared for in a home or community based setting and requires minimal personal care (less than daily care or daily care for a single task, e.g., bathing.)

**homemaker:** In order to help maintain his or her home, the person needs non-personal assistance, such as meals, housecleaning, transportation, etc.

**information and referral:** the person needs assistance in securing information but does not need any formal (paid) services.

The algorithm does not consider the informal care available to the individual, the person's ability to pay for services needed, the person's preferences for (or refusal of) specific care modalities, the specific formal care options available locally, or concerns about the ability of services to ensure the person's health and safety.

The algorithm is imbedded in the telephone screening instrument used by MI Choice waiver agents. This screen tool is not used by nursing homes and cannot be computed from the MDS, as the MDS does not collect information on IADL needs.

## **Health/Mental Health Status**

Falls: five or more in the last 90 days.

Pain: one or more periods of pain each day over the last seven days.

Weight Loss: either 5% unintended weight loss in the last 30 days or 10% in the last 180 days.

Pressure Ulcers: presence of one or more stage 1 or higher decubitus ulcers.

Bladder Incontinence: daily episodes of incontinence with some control, e.g., during the day, or always incontinent.

Bowel Incontinence: incontinent two or three times a week, or always incontinent.

Indicators of Depression: behavior was exhibited at least once in the last thirty days prior to assessment.

Behavioral Symptoms: behavior occurred daily or almost daily within the last seven days.

Changes in Behavior Symptoms: symptoms have worsened as compared to 30 days ago (waiver) or 90 days ago (nursing home).



## Individual Characteristics

### Cognitive Performance Scale (CPS)

The CPS is a hierarchical index used to rate cognitive status. The CPS has been validated against the Mini Mental State Examination. The nursing home CPS scale uses comatose to identify the most impaired group. Because these types of persons are rarely seen in home care settings, we use a modified CPS for waiver participants based on four assessment items: memory, cognitive skills for daily decision making, expressive communication, and eating.

Intact	(average MMSE of 25)
Borderline intact	(average MMSE of 22)
Mild impairment	(average MMSE of 19)
Moderate impairment	(average MMSE of 15)
Moderate/severe impairment	(average MMSE of 7)
Severe impairment	(average MMSE of 5)
Very severe impairment	(average MMSE of 1)

### ADL Hierarchy

The ADL Hierarchy was derived from assessment items that conceptually measure early ADL loss (dressing, hygiene), intermediate ADL loss (transfer, locomotion, and toileting), and late ADL loss (bed mobility, eating). The Hierarchy combines these ADLs into a comprehensive scale based on the degree of losses and performance level coding:

Independent
Supervision required
Limited impairment
Extensive assistance required (I)
Extensive assistance required (II)
Dependent
Total dependence

### Resource Utilization Groups

Clusters of persons with similar needs can be identified using two related case mix algorithms, the Resource Utilization Group system for nursing homes, RUG-III, and its companion measure, the RUG-III for home care, or RUG-III/HC.

Both systems incorporate multiple dimensions to classify individuals. The first dimension, common to both systems, includes seven clinical categories listed in order of generally decreasing resource use:

Special Rehabilitation
Extensive Services
Special Care
Clinically Complex
Impaired Cognition
Behavior Problems
Reduced Physical Functions

The nursing home case-mix system further subdivides these major hierarchy groups into 44 distinct subgroups. The home care case-mix system creates 23 subgroups. The data here display subcategories for the Reduced Physical Functions category only.

The average case mix measures the average resource use across all persons in each setting. For this report, we did not use a "common" case mix measure, but applied the case mix algorithm unique to each system. Therefore, the average case mix numbers are **not** equivalent.

<b>INDIVIDUAL CHARACTERISTICS</b>		
	<b>MI Choice Waiver</b>	<b>Nursing Home</b>
<b>Cognitive Performance Scale</b>		
Intact	42%	11%
Borderline Intact	22%	9%
Mild Impairment	19%	14%
Moderate Impairment	10%	33%
Moderately Severe Impairment	2%	12%
Severe Impairment	4%	10%
Very Severe Impairment	2%	11%
<b>ADL Hierarchy</b>		
Independent	30%	7%
Supervision	20%	8%
Limited Assistance	23%	16%
Extensive Assistance I	11%	26%
Extensive Assistance II	7%	12%
Dependent	6%	18%
Total Dependence	3%	14%
<b>RUG III-HC</b>		
Special Rehabilitation	1%	4%
Extensive Services	1%	3%
Special Care	5%	9%
Clinically Complex	17%	24%
Impaired Cognition	10%	18%
Behavior Problems	1%	1%
Reduced Physical Functions - E	na	9%
Reduced Physical Functions - D	8%	19%
Reduced Physical Functions - C	3%	2%
Reduced Physical Functions - B	9%	3%
Reduced Physical Functions - A2	26%	8%
Reduced Physical Functions - A1	19%	
<b>Case Mix</b>		
Average Case Mix	0.87	0.79

## **Disease Diagnoses**

Data in this section document the presence of diseases/infections that have a relationship to the individual's current ADL status, cognitive status, behavior status, medical treatments, nurse monitoring, or risk of death. Conditions that have been resolved or no longer affect the individual are not included.

## **Prior Service Use**

Hospital Admissions: any overnight hospitalization in the last 90 days.

Emergency Room Visits: any ER use without an overnight stay in the last 90 days.

Prior Nursing Home Placement: any nursing home stay within the last five years.

Prior Home Care Episode: any focused treatment or monitoring by a home care professional in the last 90 days (waiver) or immediately prior to nursing home entry (nursing home).

<b>DISEASE DIAGNOSES</b>		
	<b>MI Choice Waiver</b>	<b>Nursing Home</b>
<b>Heart/Circulation</b>		
Cerebrovascular Accident (stroke)	28%	24%
Congestive Heart Failure	48%	26%
<b>Neurological</b>		
Alzheimer's	6%	19%
Dementia other than Alzheimer's	13%	48%
Parkinson's	4%	7%
Head Trauma	2%	1%
Multiple Sclerosis	4%	2%
Hemiplegia/Hemiparesis	15%	10%
<b>Musculo_Skeletal</b>		
Hip Fracture	5%	3%
Osteoporosis	22%	21%
<b>Other Diseases</b>		
Cancer (not including skin cancer)	11%	7%
Diabetes	38%	25%
Emphysema/COPD/Asthma	23%	19%
Renal Failure	8%	6%

<b>PRIOR SERVICE USE</b>		
	<b>MI Choice Waiver</b>	<b>Nursing Home</b>
Hospital Admissions	15%	9%
Emergency Room Visits	8%	5%
Emergent Care Visits	5%	na
Prior Nursing Home Placement	16%	40%
Prior Home Care Episode	0%	6%