Research Design for the Money Follows the Person Evaluation

Carol Irvin
Randall Brown
Sam Simon
Today’s Presentation

- Overview of planned analyses
- Implementation analysis
- Impact analysis
- Outcomes analysis
- Challenges
- Next steps
Overview of Planned Analyses

- Implementation analysis
  - Program description
  - Key program performance indicators
  - System changes

- Impact analysis
  - Institutionalized beneficiaries
  - MFP participants
  - States

- Outcomes analysis
  - MFP participant quality of life
Limitations of the Research Design

- Random assignment not an option
  - Don’t know what would have happened to participants in MFP’s absence
  - Experience of non-participants may not be a valid indicator
  - As a result, estimates of MFP’s impacts will be subject to doubt
- Some data are not uniform across states
- No site visits or interviews with states
Data Sources

- Semi-annual web-based progress reports
- Medicaid claims (MAX and MSIS)
- Medicare claims
- Quality of life data
- Other
  - Nursing home minimum data set, state financial reports, and OSCAR
MFP Implementation Analysis

Implementation Analysis

- Program Description
- Program Performance Indicators
- System Changes
Implementation Analysis: Program Description Questions

1. What populations are targeted by grantees?
2. To whom is MFP offered? How identified?
3. What are the key features of MFP programs?
4. What is the level of consumer involvement in program design and service delivery?
5. How are the health and safety of participants assured while consumer choice is promoted?
6. How are enhanced FMAP funds used to rebalance LTC systems?
Implementation Analysis: Program Performance Indicators

1. **Number of participants transitioned**
   - Does the rate of transitions increase under MFP?

2. **Number of participants re-institutionalized**
   - Does the re-institutionalization rate decrease?

3. **Volume of HCB services provided**
   - Does the use of HCB services increase?
Implementation Analysis:
Program Performance Indicators (cont)

4. Ratio of HCBS to institutional LTC expenditures
   - How do year-to-year trends in HCBS and institutional spending change?

5. Cost to transition MFP participants
Implementation Analysis:
System Changes Questions

1. What LTC system and policy changes are made to *transition* participants?
   - Are these changes sustainable?
2. What policy and system changes are implemented to *maintain* participants in the community?
   - Are these changes sustainable?
3. How does interagency collaboration change as a result of MFP?
IMPACT ANALYSES
Impacts versus Outcomes

“Impacts” are estimates of difference between actual experiences under MFP vs. what would have occurred without MFP for:

- Medicaid beneficiaries receiving institutional care
- Participants in MFP
- State Medicaid programs

“Outcome analysis” describes experiences of MFP participants
Impacts on Beneficiaries: Key Research Questions

- On institutional residents (by state and target group):
  - Probability of transition to the community

- On participants (by state and target group):
  - Probability of re-institutionalization
  - Service utilization
  - Medicare and Medicaid costs
  - Quality of care

- For what types of beneficiaries does MFP work best?

- What program types/features work best?
Impacts on Institutional Residents: Comparison Methodology

- For institutionalized beneficiaries’ probability of transition:
  - Estimate pre-MFP to post-MFP changes in probability of transition for institutional residents
Impacts on Institutional Residents: Transition Outcome Measures

- Whether transitioned to community
- Characteristics associated with transition
- Status 1 and 2 years after transitioning
  - Home w/HCBS, home w/o HCBS, nursing home, moved away, deceased
- Whether re-admitted to institution
- Length of time until readmission
- Characteristics associated with readmission
- Reasons for readmission
Impacts on Participants: Comparison Methodology

For MFP participants’ service use, costs, and quality:

- **Lower bound:** Compare pre-transition to post-transition changes for participants to analogous changes for those transitioning before MFP.

- **Upper bound:** Compare pre-post transition changes for participants to changes over time for matched group in pre-MFP period who didn’t transition but might have if MFP existed.

- Construct weighted average of these bounds.
Impacts on Participants: Service Use Outcomes

By year since transition

- Hospital use (admissions, days)
- Nursing home admissions, days
- Personal care visits
- Other HCBS services
Impacts on Participants: Expenditures

- Total Medicare expenditures (for duals)
- Total Medicaid expenditures
- Expenditures by type of service
  - Acute (hospital, other)
  - Long term care (institution, home health, personal care, other waiver services)
Impacts on Participants:
Quality of Care Outcomes

- Preventable hospitalizations (AHRQ)
- Treatment for adverse events possibly due to inadequate home care
  - Falls, pressure ulcers, wounds, muscle seizures, infections, fractures
  - Depression
  - Death
Impacts on Beneficiaries: Subgroups to be Examined

- Beneficiary pre-enrollment characteristics
  - Eligibility group
  - Length of time in institution
  - Functioning, mental health measures
  - Demographic characteristics

- Institutional characteristics
  - Nursing Home Compare quality rating
  - Structural characteristics
Association of Impacts with State Characteristics

- Supply of service workers
- Consumer involvement in design
- Generosity of regular HCBS benefits
- Degree of self-direction allowed
- Collaboration with housing authority
- Other program-reported factors?
Impacts on Beneficiaries: Estimation Methods

- Regression analysis of pre-post difference in outcomes
- Control for:
  - Age, race, gender, county
  - Time in institution
  - Physical functioning (from MDS)
  - Cognitive functioning (MDS)
  - Prior Medicaid and Medicare service use
- Estimate impacts by year since enrollment
Impacts on States:
Key Outcomes

- LTC costs per LTC recipient
  - Includes institutional and HCBS (waivers, home health, and state plan services)

- Service use per Medicaid beneficiary
  - Probability of receiving institutional care
  - Probability of receiving HCBS
  - Days of service for each
Impacts on States: Comparison Methodology

- Use beneficiary-level Medicaid data for years 2004 to 2010 for all LTC recipients
- Regress outcomes on control variables and year indicators
- Test whether change in trend from pre-MFP to post-MFP is statistically significant
- Assess other possible explanations for change in trend
Outcomes Analysis

- How do MFP participants fare living in the community?
  - Access to personal care services
  - Choice and control
  - Respect and dignity
  - Community integration/inclusion
  - Satisfaction
  - Employment

- Which types of MFP participants appear to have the highest or lowest quality of life?

- Does quality of life vary by key program characteristics?
Data Sources for Quality of Life Information

- Self-reported information collected by the states
  - Collected at discharge, 12, and 24 months
  - On all MFP participants

- MPR survey
  - Telephone survey
  - Collected 18 to 24 months after transition
  - Sample of MFP participants
Sample Quality of Life Questions

- **Access to personal care services**
  - Is there any special help that you need to take a bath or shower (get out of bed, use the bathroom)?
  - Do you ever go without a bath or shower when you need one?
  - Is this usually because there is no one there to help you?

- **Choice and control**
  - Do you receive a cash benefit to spend on services, supplies, help, or equipment?
  - What have you used your cash benefit for?
  - Can you be alone if you want to?
Sample Quality of Life Questions (continued)

- **Respect and dignity**
  - Do the people paid to help you treat you respectfully in your home?

- **Community integration**
  - Can you always get to the places you need to go, like work, shopping, the doctors’ office, or a friend’s house?
  - Do you miss things or have to change plans because of transportation?

- **Satisfaction**
  - Overall, how satisfied are you with the way you are spending your life these days?
  - As a direct result of moving here, my housing situation has improved. (strongly agree... strongly disagree)
Challenges for the Evaluation: Data Issues

- Problems with administrative data
  - Getting timely MSIS data
  - Variation in definitions of HCBS across states
  - Lack of MDS data for MI, ICF-MR populations
  - Obtaining good data on service use, cost, and quality from managed care plans
- States may collect quality of life data differently
- Lack of site visit data
Challenges for the Evaluation: Methodological Issues

- Distinguishing effects of MFP from effects of concurrent changes in other key factors
  - Comparison states are not an option now
  - Many other factors affect expenditures on institutional and community LTC

- Small MFP sample sizes for some target populations in some states

29
What’s Next?

- Comprehensive design report—Dec. ‘07
- Interim evaluation findings—Dec. ‘09, ‘10, ‘11
- Final evaluation findings—Dec. ‘12