

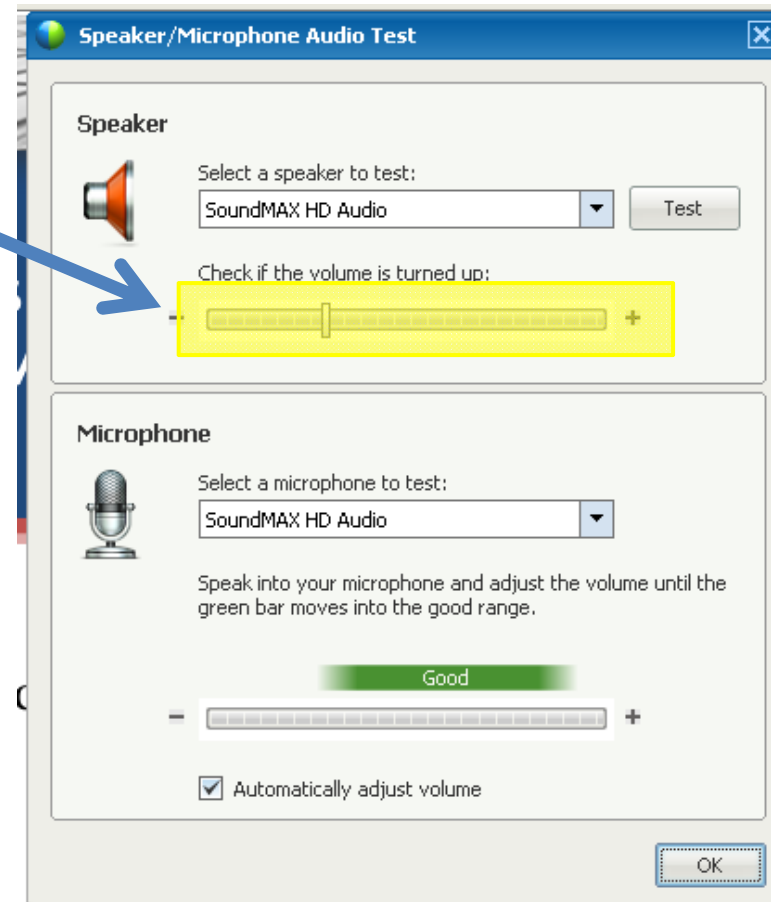
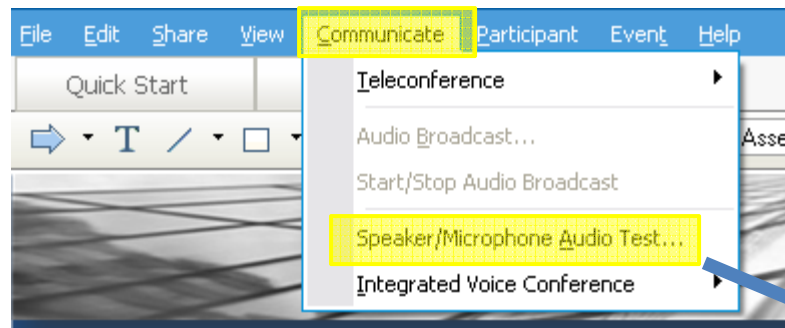


Uniform Assessment System - New York Overview and Status

December 14, 2012



Webinar Basics - Sound Check





Webinar Basics - Question and Answer

The screenshot displays a webinar interface. The main content area shows a slide titled "Uniform Assessment System - New York Overview and Status" with the date "December 14, 2012". On the right side, there is a "Recorder" and "Q&A" panel. The "Q&A" panel has a header "All (0)" and a text input field labeled "Type your question here". Below the input field are two buttons: "Send" and "Send Privately...".

Type your question here.

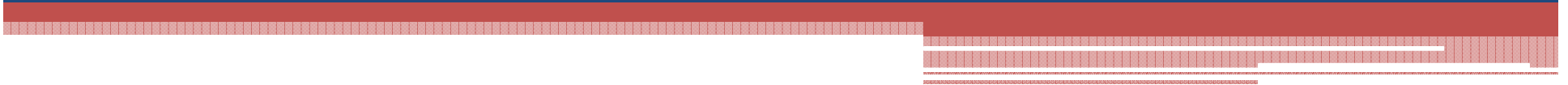
Then click send.



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Uniform Assessment System - New York Overview and Status





Current Environment

- **Multiple screening and assessment tools in current use complicate an already fragmented and poorly coordinated delivery system**
- **Many instruments lack standardization, have not been tested for reliability or validity, and are not automated**
- **Care plans and referrals are open to subjectivity**



GOAL

Medicaid Redesign Team (MRT #69) adopted recommendations to implement a uniform assessment with the following goal:

- Evaluates an individual's health status, strengths, care needs, and preferences
- Guides the development of individualized long term care service plans
- Ensures that individuals with long term care needs receive the right care, within the right setting and at the right time

Initial effort focused on Medicaid State Plan and Home and Community Based Services waivers within the Department of Health



Initial Programs/Plans

- Adult Day Health Care
- Assisted Living Program
- Home and Community Based Services Waiver – Care at Home I/II
- Long Term Home Health Care Program
- Managed Long Term Care and Programs of All Inclusive Care for the Elderly (PACE)
- Nursing Home Transition and Diversion
- Personal Care Services and Consumer Directed Personal Assistance Program
- Traumatic Brain Injury Waiver

This is not a nursing home admission tool.



Objectives

In order to meet MRT #69 Goal the following objectives were established:

- Assess an individual's functional needs and abilities through empirically tested and validated means
- Provide accurate data to develop individualized plans of care that are consumer-driven, build on consumer strengths and offer consumer choice
- Identify level of care
- Assist with care planning and oversight
- Reduce redundancy



Objectives

- Improve the quality, consistency, and accuracy of assessment and care plans
- Enhance the state's capacity for program development and policy decisions that are data-driven
- Increase access to data by multiple providers via electronic means
- Provide compatibility with other data sets and align with existing standards to the extent possible



InterRAI Community Health Assessment Capabilities

- Evaluates an individual's health status, care needs and preferences
- Consistent, standardized, and validated level of care and assessment
- Automatable
- High inter-rater reliability
- Data set can be used across settings with customization for specific settings
- Available for use



Software and Training Development

- Evaluate the interRAI CHA vis-à-vis programs and regulations
- Map the current assessment process in all programs
- Document use of the current assessment
- Identify outcomes and initiate curriculum for assessor education program
- Computer readiness survey of users
- Conduct Beta test
- Develop Web-based training
- Incorporate training tools into software



Scope

- **Assessment:**
 - Community Health Assessment
 - Functional Supplement
 - Mental Health Supplement
 - Scales, Triggers, CAPs, RUG III

- **New York State Adds:**
 - Skilled Nursing Facility Level of Care
 - New York State-Specific Data

- **Summary Output Will Support:**
 - Service Planning
 - Care Planning
 - Case Management



Content

Current UAS-NY Tools:

Community Health Assessment (Home Care)
Functional Supplement
Mental Health Supplement

Other Tools Available Under NYSDOH License:

Community Mental Health
Mental Health
Acute Care
Post-Acute Care
Contact Assessment
Long Term Care Facility
Assisted Living
Emergency Screener for Psychiatry
Palliative Care
Intellectual Disability



UAS-NY Content: Domains and Sub-Categories

Example

Sub-Categories

Domains

Functional Status

- Instrumental Activities of Daily Living (IADLs)
- Activities of Daily Living (ADLs)
- Locomotion/Walking
- Physical Function Improvement Potential

Health Conditions

- Falls
- Dyspnea
- Pain Symptoms
- Tobacco, Alcohol and Substance Abuse
- Balance
- Pulmonary
- Neurological
- Instability of Conditions

Cognition

- Skills for Daily Decision Making
- Memory Recall Ability
- Change in Decision Making
- Periodic Disordered Thinking or Awareness
- Acute Change in Mental Status from Usual Functioning



Assessment Outcomes

- Level of Care
- Clinical Assessment Protocols
- Quality Indicators
- Care Planning Assistance
- Aggregate Reports
- Ad Hoc Reporting
- Resource Utilization Groups



Benefits

- **Establish uniformity of assessment data across assessors**
- **Utilize assessment outcomes to guide care planning**
- **Utilize assessment history data to guide program and service planning**
- **Support Quality Improvement and Management Efforts**



Software

- **Web-based software application**
 - Captures all assessment and care planning information in one location
 - Provides immediate access to assessment outcomes and results
 - Enables information to be shared among providers
- **Health Commerce System (HCS) Web Portal Integration**
 - HCS User Login
 - System Security
 - Role-based system
- **On-line and Off-line capabilities**
 - On-line: access from any computer that has internet access and approved browser
 - Off-line: from a laptop computer if internet not available



Beta Test - Summer 2012

- Provide insight into system technical stability
- Inform statewide roll-out strategy
- Provide insight into organizational ability to integrate UAS-NY into business practices
- Provide insight on UAS-NY impact on assessed individuals



Participant Activities

- Identify a UAS-NY Coordinator
- Assess IT infrastructure
- Establish HCS accounts
- Assess staff computer proficiency
- 42 Organizations participated
- 175 Assessors, managers, and other staff participated in the online training
- More than 60 assessors conducted over 400 assessments



Internal Observation

- Local staff turnover and transition
- Complexity due to Medicaid takeover and shift to Managed Care changing LDSS role
- Lack of access to up-to-date computers including laptop computers
- Level of staff computer proficiency



Participant Observation

- **Training Environment:**
 - **Flexible access and comprehensive**
 - **More information needed in specific areas**
 - **Required a significant time commitment**
 - **Course navigation challenge**
 - **Preference for face-to-face**



Participant Observation

- **Web-based Application:**
 - Easy to navigate; comfort and familiarity increased with each assessment
 - Recommendations for enhancements:
 - Navigation
 - Skip Logic
 - Data Entry



Participant Observation

- **UAS-NY Community Assessment:**
 - Comprehensive and detail-oriented
 - Longer to complete than current assessment
 - Perceived redundancy related to triggered supplements
 - Individuals being assessed became tired or distracted due to dual assessment use during beta
- **Technical:**
 - Internet connection
 - Initial access to HCS and UAS-NY
 - Initial challenges with offline application



Recommendations and Next Steps

- **Training Environment:**
 - Reduce time to complete courses
 - Resolve course navigation issues
 - Emphasize assessor proficiency and fluency
 - Determine feasibility for optional pre-sessions that include instructor-led webinars



Recommendations and Next Steps

- **UAS-NY Web-based Application:**
 - Reorder navigation panel (includes assessment and supplements)
 - Update and validate medications and disease diagnosis tables
- **Explore:**
 - Provide additional “set” buttons
 - Modify medication and disease code sections
 - Mechanism to easily determine completion status
 - Improve skip logic



Recommendations and Next Steps

- **UAS-NY Community Assessment:**
 - Explore strategies for in-home versus in-office activities
 - Explore strategies to address fatigue of individual being assessed (one time length issues)
 - Complete Development of Pediatric Assessment



Recommendations and Next Steps

- **Technical:**
 - Enhance supporting technical information
 - Provide additional guidance on web-based and offline applications
 - Identify mechanism/strategy to interface with organization's proprietary software
- **Pilot and Statewide Implementation:**
 - Prepare detailed implementation plan
 - Explore optional webinar or face-to-face training sessions
 - Identify and develop additional materials



Statewide Implementation Timeline

Complete Development of Software Application	December 2012
Conduct Final Candidate Cycle and System Acceptance	February 2013
Begin Pilot and Statewide Implementation (<i>Live Data</i>)	March 2013
Complete Transition to UAS-NY	Spring 2014



Opportunities for Policy

- Policy development
- Rate setting
- Compliance
- Surveillance
- Professional Development
- Quality Improvement
- Research



Opportunities for Service Providers

- Establish uniformity of assessment across assessors
- Utilize assessment outcomes to guide care planning
- Utilize consumer assessment history data to guide program and service planning
- Services developed from a strengths- based perspective
- Support Quality Improvement
- Support improved management activities
- Increase information available to the consumer



QUESTIONS?

**Additional information can be found on DOH
Website at:**

http://www.health.ny.gov/facilities/long_term_care/#uas_ny

Questions can also be emailed to:

uasny@health.state.ny.us

Or Call 518-408-1833