HCBS STRATEGIES, INC.
Improving Home and Community Based Systems
www.hcbs.info   410-366-HCBS (4227)
info@hcbs.info

Level of Care (LOC) Pilot Reliability and LOC Analyses Discussion Stakeholder Meeting

10.2.19		In-person
Note taker	Andrew Cieslinski	
Attendees	Chris Russel (Family Member & Aveanna Home Care), David Bolin (Accent On Independence Homecare), Bill Levis (AARP & Family Member/Guardian), Melissa Emery (Rocky Mountain Human Services), Lauren Swenson (Department), Glenna Massey (UC Denver), Alicia Metcalf (UC Denver), Lee Ray (Advocate-ARC of Arapahoe and Douglas), Carol Meredith (Advocate-ARC of Arapahoe and Douglas), Shannon Seacrest (Family Member), Marsha Unruh (Independence Center & Guardian), Gerrie Frohne (Family Member), Brittani Trujillo (Department), Ravi Teja Gorti (Department), Meg Kahney (UC Denver), Tomas Abrate (Optumas), Jennifer Giurgila (Jefferson County Options for Long Term Care), Seth Aters (Optumas), Amanda Lofgren (Department), Allie Shepard	

Introduction & Overview
- Because of the complex nature of the discussions that are centered around the LOC modeling spreadsheets, the minutes only reflect stakeholder input. For a full review of the meeting discussion you may view the recording found at: https://drive.google.com/file/d/1la8lblAgJgkCagI8u2FhSgA9oZQFE40t/view?usp=sharing
- The presentation that was used to facilitate the stakeholder discussion can be found at:
- https://drive.google.com/file/d/1G26p6QFCI7TpRowZDIoC7EHiHizEp8ho/view?usp=sharing
- Using slides 3 and 4, Steve Lutzky provided an overview of the October 2-3, 2019 stakeholder meeting agendas.
  o The group did not have any additional items to add to the agenda.

Discussion of Pilot Progress and Challenges
- David Bolin theorized that the low number of CLLI assessments was likely due to Colorado Access, the agency that oversees the majority of CLLI clients, was not participating in the pilot. He said the Department should mandate their participation in this and future efforts where CLLI participants are needed.
  o Lauren Swenson clarified that the Department has done targeted outreach to CLLI families and pilot case managers have been working directly with families to conduct the assessments.
- David asked whether there would be an opportunity for stakeholders to view the presentation or feedback from the bi-weekly meetings with pilot case managers.
  o Steve Lutzky suggested sharing the presentation from the check-in meetings with the stakeholders. The Department approved this suggested.

Colorado Stakeholder Meeting Minutes

Updates on the Automation
- Chris Russel asked whether there will be proficiency testing when the assessment and support planning process is rolled out statewide.
  - Steve Lutzky said that the University of Colorado will be responsible for the ongoing training and they are discussing including competency testing.
- Referring to Slide 14, Steve Lutzky explained that the primary purpose of the next pilots is to test the process that will be used in the field and it will not be possible to do so until the CarePlanner360 system meets all the requirements specified by the Department and stakeholders.
- Chris Russel asked what the Department can do to ensure that the IT vendor will deliver.
  - Amanda Lofgren explained that the Department has been having frequent, direct discussions with the IT vendor about how this is impacting current and future efforts.

Review of Next Pilot Phases
- Andrew Cieslinski noted that on slide 16 there are also 4 case managers for the adult IDD population that are not included in this slide. HCBS Strategies will update the slide to reflect this change.
- Carol Meredith asked how participants are selected to participate in the current and future pilots. Her concern was that the large variety of support needs within each population may not be adequately captured if case managers were selectively picking individuals.
  - Lauren Swenson explained that the Department has instructed case managers to offer the pilot assessment to all individuals who have an upcoming 100.2 assessment. The Department has been very intentional in working with case managers to have a random sample that is more likely to be representative.

Updates to the Stakeholder Meeting Schedule
- The group identified that there were not any major conflicts with the new proposed December 4 and 5 stakeholder meeting dates. The November 6 and 7 dates were shared with the stakeholders several months ago and there were no identified issues with these dates.

Reliability Analysis Discussion
- Steve Lutzky shared that the FASI researchers found that 30 paired assessments provide strong samples for data analyses, hence on Slide 27 all adult populations have 30 completed assessments for these analyses.
- Chris Russel said that there needs to be consideration for a wide variety of abilities when thinking of the LOC items to remove and keep.
- David Bolin said that the amount of time to complete the activity should be a factor in the scoring of ADLs and IADLs.
  - Steve Lutzky said that rather than focusing on time when scoring, assessors were trained to focus on whether the activity could be done safely. If it takes a long time to complete an activity, the participant may become fatigued and more likely to have an injury. This should influence scoring.
- Chris Russel had a concern about how ADLs would be documented for individuals who vary in their support needs over the course of a week, month, or year.
  - Steve Lutzky explained that the ADL items capture both the last 3 and 30 days. Case managers also have the ability to note nuances not captured in individual items and should reflect these nuances in the Support Plan.
  - Carol Meredith said that she does not believe that there will be a tool that will capture all data for all outliers, however using cluster analyses to decide which items to remove may detract from having a complete Support Plan.

- Andrew Cieslinski explained that looking at items with low reliability will also be used to inform Level of Care and will be a major part of the ongoing discussions. If an item has low reliability and has no or minimal impact on LOC it should be considered for removal.
- Marsha Unruh said that the transfer item roll left and right is so critical for many populations and suggested that it not be removed.
  - Chris Russell said the transfer item roll left and right is the only item that gets at positioning. She said that if someone needs help with positioning this item would determine if they need support during the night to prevent pressure wounds.
  - Andrew Cieslinski said that it is likely that individuals who require support rolling left and right will also require support with other transferring elements. He said HCBS Strategies will evaluate whether it is needed for LOC and if not, whether to include it to collect additional information for Support Planning.
- Marsha said that car transfer also provides information about the ability of the participant to pivot and move their legs/shoulders.
- Andrew Cieslinski explained that if any of the items within the ADL categories are met then the participant meets LOC for that entire category. To meet LOC, the participant must meet at least one item in two or more ADL categories or one or more item in the behaviors and/or memory and cognition categories.

Adult NF LOC Initial Discussion
- Steve Lutzky provided an overview of the Level of Care (LOC) analyses using slides 76-81. He provided an overview of the layout of the LOC analyses sheet using Scenario 1, found at: https://drive.google.com/file/d/16m65u4SJqIjv0-JgLDhvcMMftFMj5ZYl/view
- Chris Russel asked whether EQ Health would still be doing reviews under the new assessment process.
  - Lauren Swenson said that while the new assessment should be more valid and reliable, the Department will need to have additional discussions to determine how this flow will occur.
  - Chris said that she does not think that EQ Health needs to do any review because they do not meet in-person with the participant and have no understanding of what the participant needs.
  - Carol Meredith said that given the expertise of the case managers having EQ Health double check the assessment made sense, however the subjectivity within the new assessment is significantly reduced and may not require additional scrutiny.
  - David Bolin said that his experience has been that EQ Health is more inconsistent than other utilization management (UM) contractors.
  - Carol said that consistency in assessment results is another reason why the reliability discussion is so important.