



The Hilltop Institute

analysis to advance the health of vulnerable populations

Medicaid Long-Term Services and Supports in Maryland: Money Follows the Person Metrics *Institutional Utilization and Transitions*

A Chart Book

October 5, 2010

Prepared for:
Maryland Department of Health and Mental Hygiene



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Introduction

From the Maryland MFP Operational Protocol ...

“The Money Follows the Person Rebalancing Demonstration (MFP), offered through the Centers for Medicare and Medicaid Services (CMS), was created as part of the Deficit Reduction Act of 2005, a law passed by the U.S. Congress. The purpose of the demonstration is to promote a series of rebalancing objectives written in the statute. The term “rebalancing” refers to efforts to reduce or eliminate barriers to receiving long-term care services in home and community settings, rather than in institutional settings.”

Introduction (continued)

Examining the program across time

In order to measure the status and changes of Maryland's Medicaid long-term services and supports (LTSS) over the course of the MFP program, The Hilltop Institute worked with DHMH to develop a set of performance metrics for the program. This chart book, which was originally a presentation to the MFP Stakeholder Advisory Group, focuses on the first set of those metrics:

- To what extent have nursing facility (NF) transitions increased in Maryland since the implementation of MFP on July 1, 2008, compared to prior fiscal years (FYs)?
- How many of the NF transitions since July 1, 2008, were designated MFP participants versus non-MFP participants?
- What Medicaid programs do transitioning individuals participate in?

Data Source

Medicaid Management Information System (MMIS2)

This system contains person-level data for all individuals eligible for Medicaid services in Maryland during the relevant fiscal year, including Medicaid eligibility category and fee-for-service claims. The Hilltop Institute acts as a secondary data repository for these data, and claims and eligibility files for fiscal years 2005 through 2010 were used for this analysis.

Transition Criteria

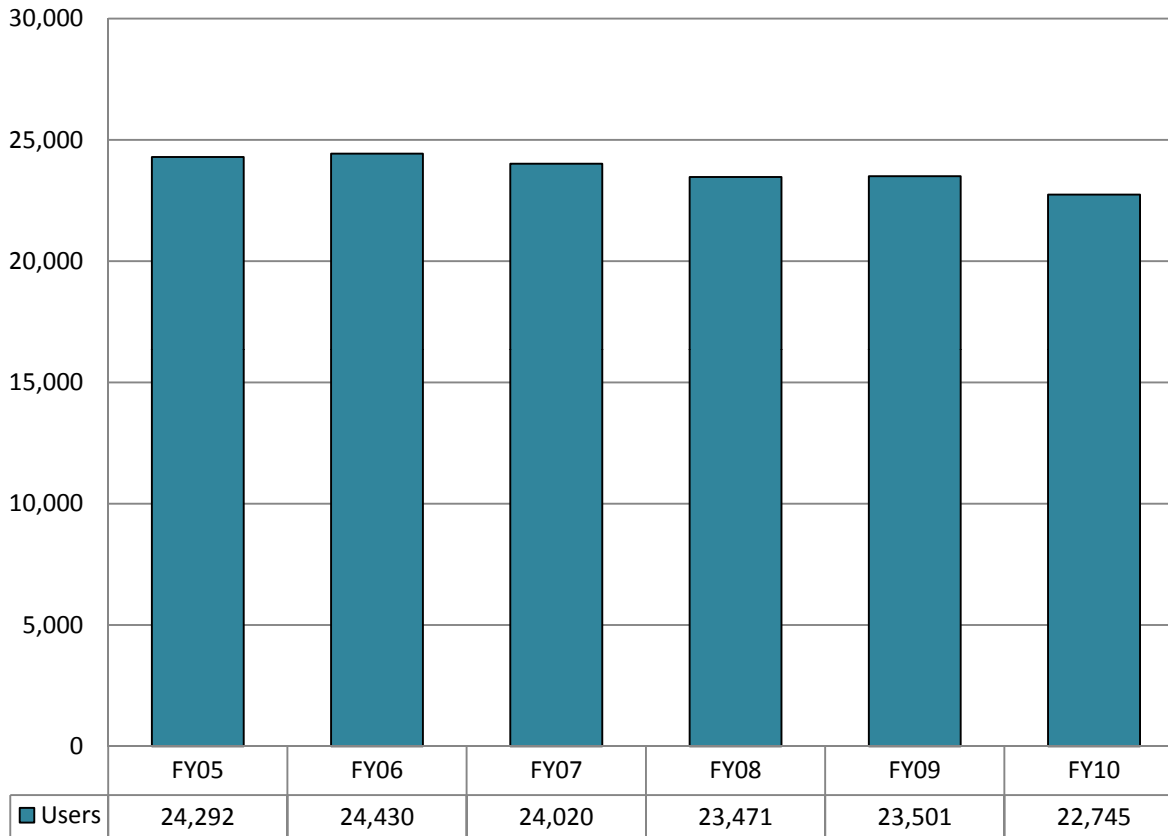
Defining a Transition

In order to retain consistency across the length of the program, “transitioned” individuals were defined as having **at least 30 continuous Medicaid-paid days** in one of the following settings: Nursing Facility (with a valid level of care designation), Chronic Hospital, State Residential Center, or Institute for Mental Disease. The institutional span must have been:

- Followed by at least 30 days of Medicaid eligibility
- Not immediately followed by an inpatient stay of more than 3 days
- Not followed by another LTC institutional stay within 30 days

**Use of
Medicaid Institutional Services
in Maryland
FY 2005 – FY 2010**

Number of Users of Medicaid Institutional Services: All Settings

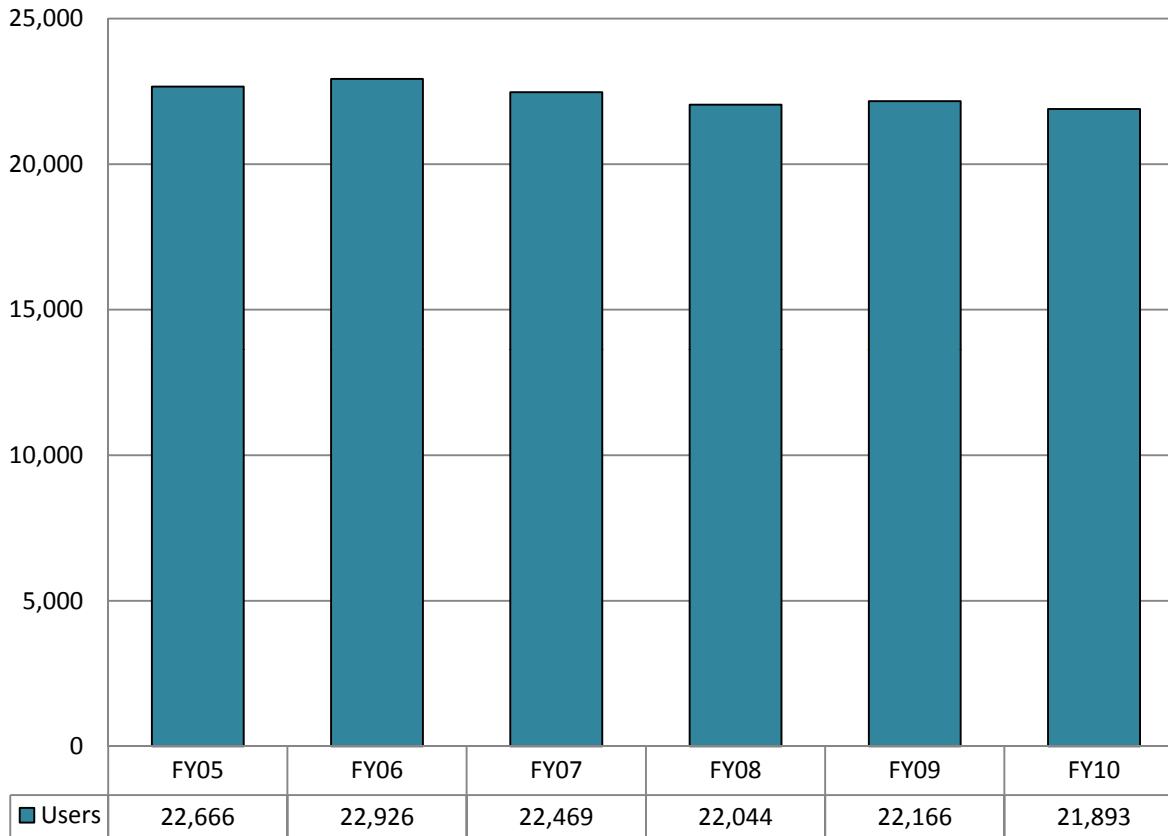


From FY 2006 to FY 2010, the number of individuals using Medicaid institutional services decreased from 24,430 to 22,745—a 6.9% decline.

Note: This chart illustrates the number of individuals who had at least one Medicaid paid day in one of the following settings: Nursing Facility, Chronic Hospital, State Residential Center, or Institute for Mental Disease. Nursing Facility users must have also had a valid Medicaid level of care designation.

Source: Maryland MMIS data as analyzed by The Hilltop Institute, FY 2005 – FY 2010

Number of Users of Medicaid Institutional Services: Nursing Facility

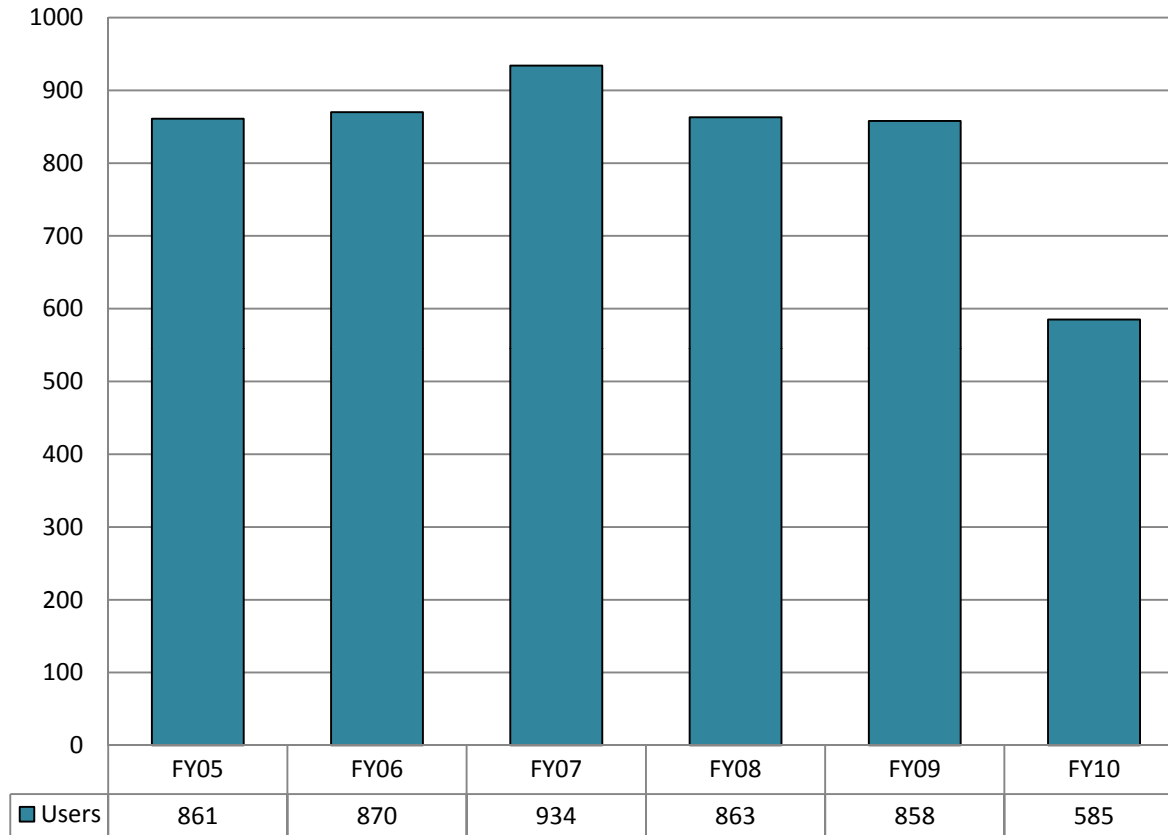


The number of individuals using Medicaid nursing facility services in Maryland has been decreasing fairly steadily since FY 2006, although usage from FY 2008 to FY 2009 showed a slight increase of 0.5% before declining again in FY 2010.

Note: This chart illustrates the number of individuals who had at least one Medicaid paid day of Nursing Facility services and also had a valid Medicaid level of care designation.

Source: Maryland MMIS data as analyzed by The Hilltop Institute, FY 2005 – FY 2010

Number of Users of Medicaid Institutional Services: Chronic Hospital

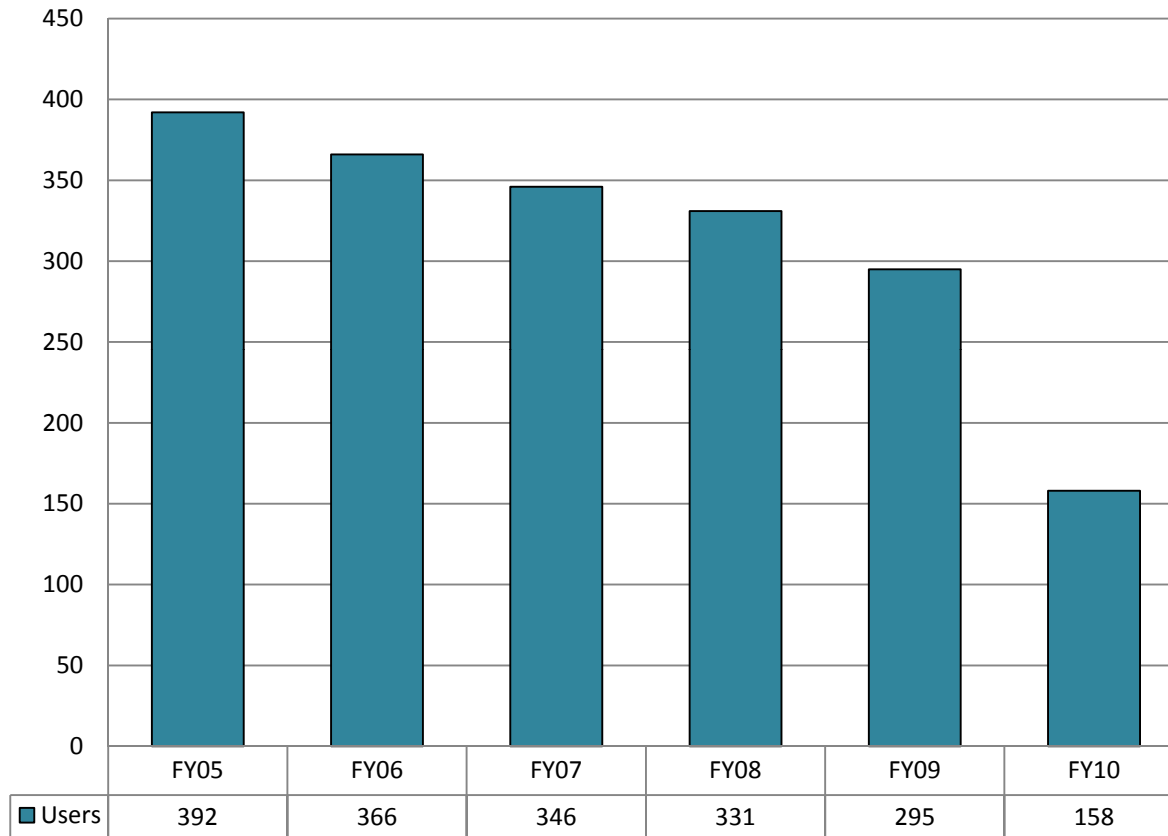


The number of individuals using Medicaid chronic hospital services has been decreasing since FY 2007. From FY 2009 to FY 2010, usage declined by almost one-third.

Note: This chart illustrates the number of individuals who had at least one Medicaid paid day of Chronic Hospital services.

Source: Maryland MMIS data as analyzed by The Hilltop Institute, FY 2005 – FY 2010

Number of Users of Medicaid Institutional Services: State Residential Centers



The number of individuals using Medicaid state residential center services has declined steadily since FY 2005. From FY 2009 to FY 2010, usage declined by 46%.

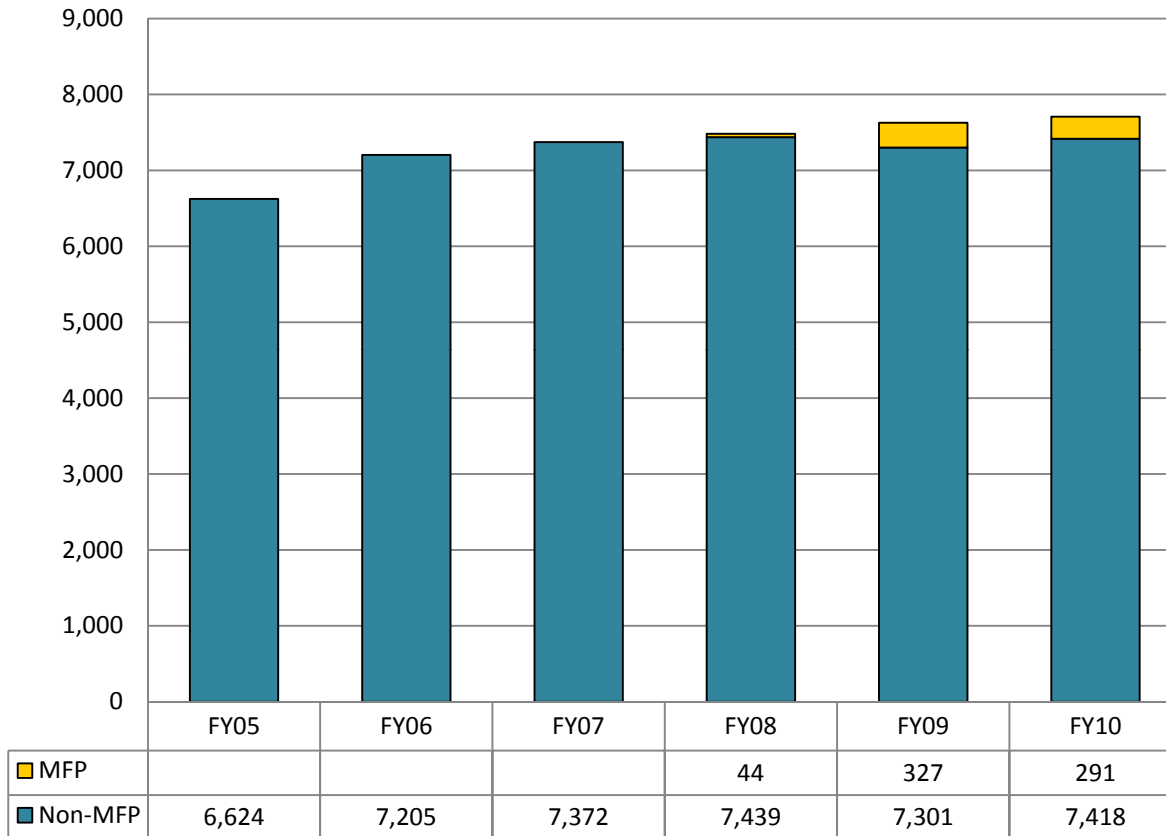
Note: This chart illustrates the number of individuals who had at least one Medicaid paid day of State Residential Center services.

Source: Maryland MMIS data as analyzed by The Hilltop Institute, FY 2005 – FY 2010

Transitions to the Community

FY 2005 – FY 2010

Number of Transitions to the Community: All Institutional Settings

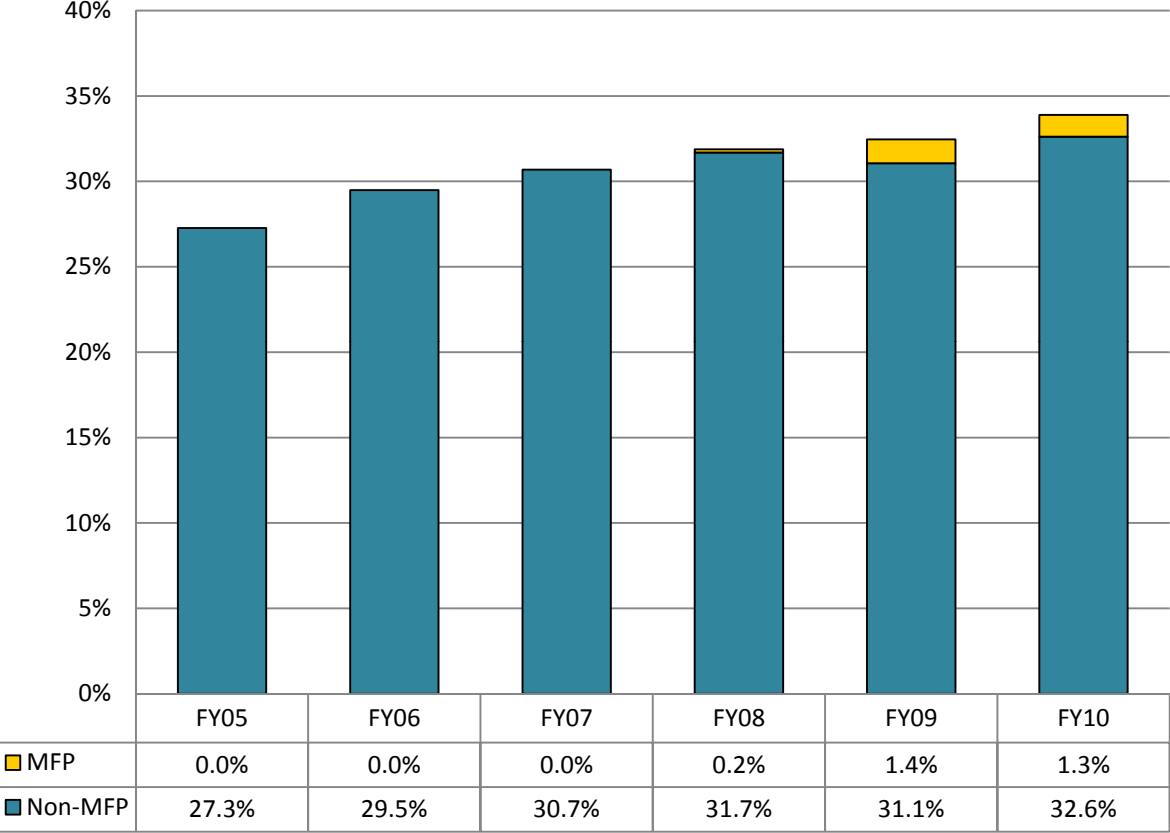


The number of individuals transitioning from institutional settings to the community has been increasing steadily since FY 2005. In FY 2009, 4.3% of transitioning individuals were MFP participants; in FY 2010, 3.8% participated in MFP.

Note: This chart illustrates the number of individuals who had at least 30 continuous Medicaid paid days in one of the following settings: Nursing Facility, Chronic Hospital, State Residential Center, or Institute for Mental Disease. The institutional span must have been followed by at least 30 days of MA eligibility, not immediately followed by an inpatient stay of more than 3 days, and not followed by another LTC institutional stay within 30 days. Nursing Facility users must have also had a valid Medicaid level of care designation.

Source: Maryland MMIS data as analyzed by The Hilltop Institute, FY 2005 – FY 2010

Percentage of Users of Institutional Services Who Transitioned to the Community: All Settings

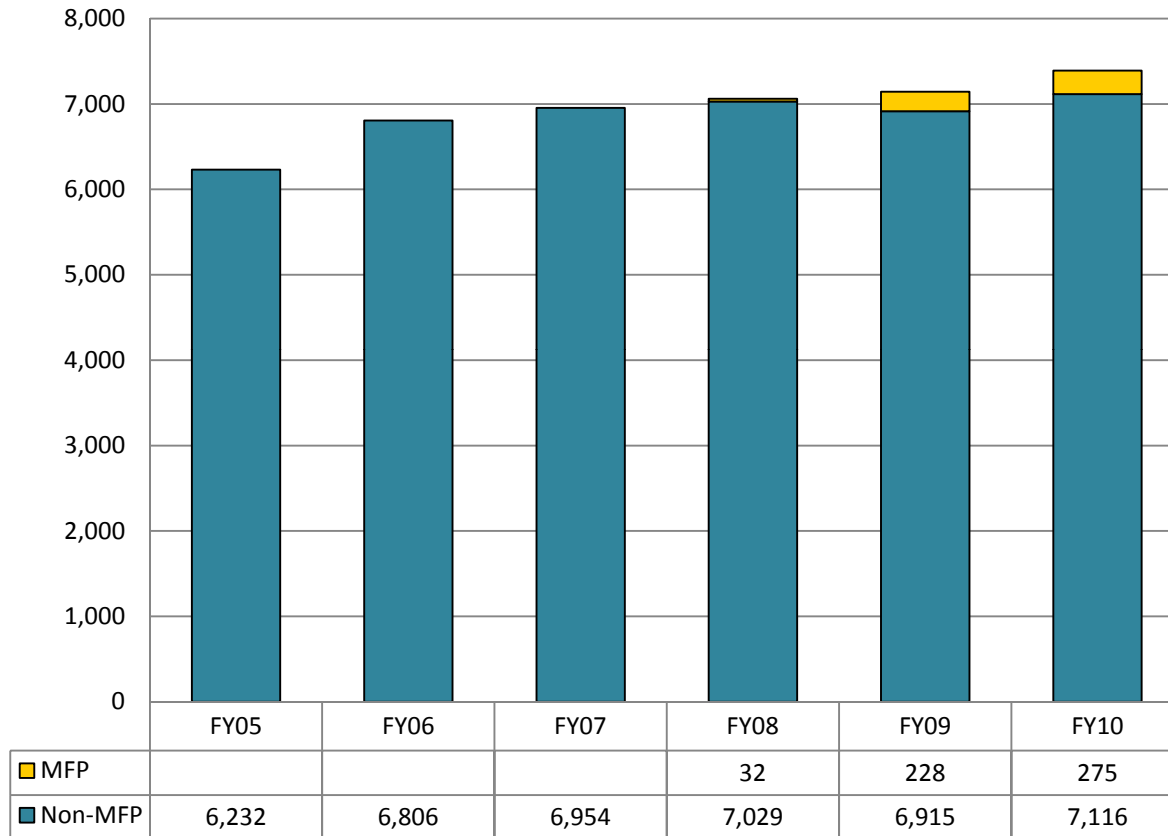


The percentage of users of institutional services in all settings who transitioned to the community has been increasing steadily, from 27.3% in FY 2005 to 32.6% in FY 2010.

Note: This chart illustrates the number of individuals who had at least 30 continuous Medicaid paid days in one of the following settings: Nursing Facility, Chronic Hospital, State Residential Center, or Institute for Mental Disease. The institutional span must have been followed by at least 30 days of MA eligibility, not immediately followed by an inpatient stay of more than 3 days, and not followed by another LTC institutional stay within 30 days. Nursing Facility users must have also had a valid Medicaid level of care designation.

Source: Maryland MMIS data as analyzed by The Hilltop Institute, FY 2005 – FY 2010

Number of Transitions to the Community: Nursing Facility

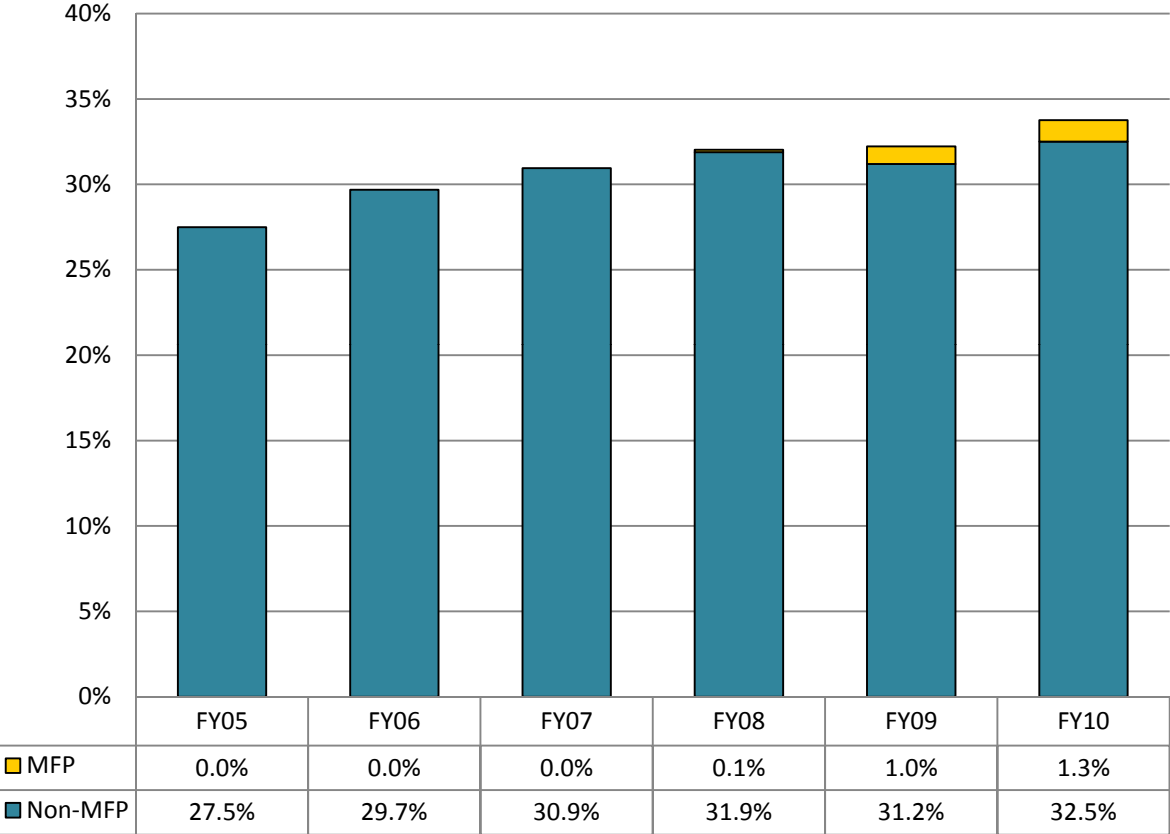


The number of individuals transitioning from Nursing Facilities to the community has been increasing steadily since FY 2005. In FY 2009, 3.2% of transitioning individuals were MFP participants; in FY 2010, 3.7% participated in MFP.

Note: This chart illustrates the number of individuals who had at least 30 continuous Medicaid paid days in a Nursing Facility. The institutional span must have been followed by at least 30 days of MA eligibility, not immediately followed by an inpatient stay of more than 3 days, and not followed by another LTC institutional stay within 30 days. Nursing Facility users must have also had a valid Medicaid level of care designation.

Source: Maryland MMIS data as analyzed by The Hilltop Institute, FY 2005 – FY 2010

Percentage of Users of Institutional Services Who Transitioned to the Community: Nursing Facility

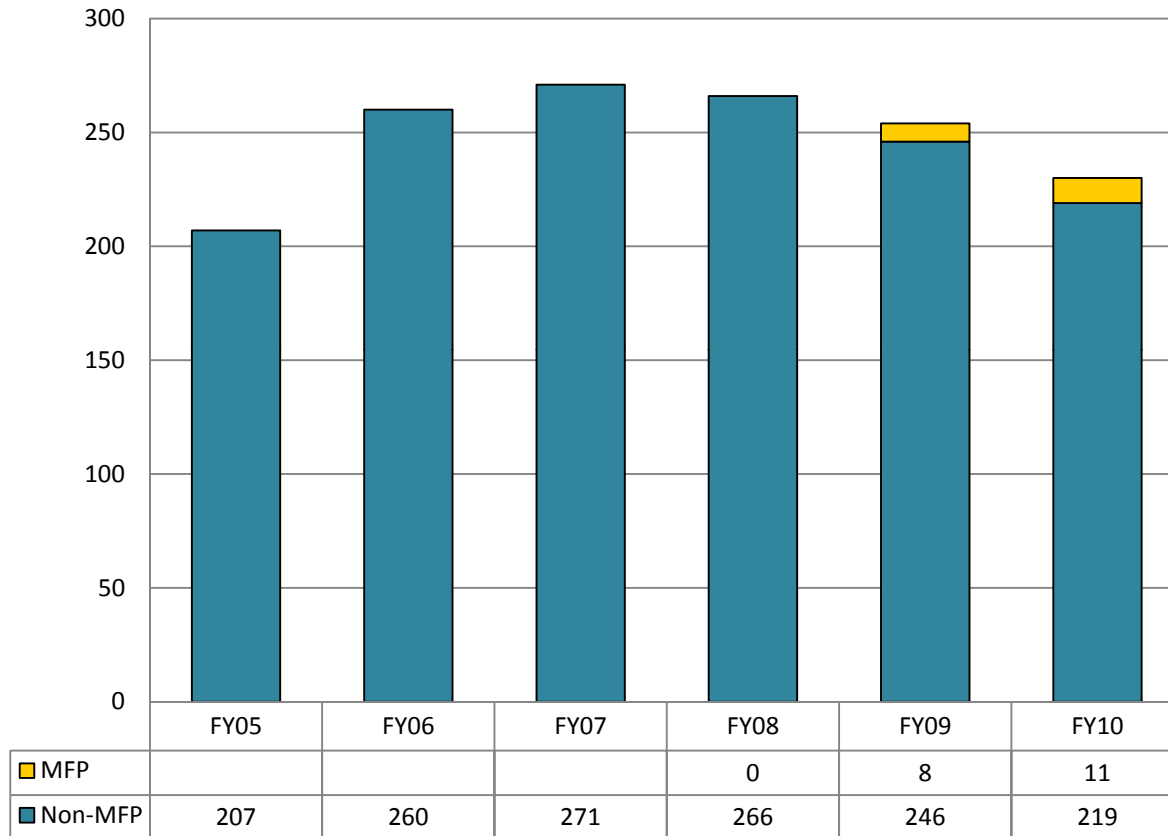


The percentage of Nursing Facility users who transitioned to the community has been increasing steadily, from 27.5% in FY 2005 to 33.8% in FY 2010.

Note: This chart illustrates the number of individuals who had at least 30 continuous Medicaid paid days in a Nursing Facility. The institutional span must have been followed by at least 30 days of MA eligibility, not immediately followed by an inpatient stay of more than 3 days, and not followed by another LTC institutional stay within 30 days. Nursing Facility users must have also had a valid Medicaid level of care designation.

Source: Maryland MMIS data as analyzed by The Hilltop Institute, FY 2005 – FY 2010

Number of Transitions to the Community: Chronic Hospital

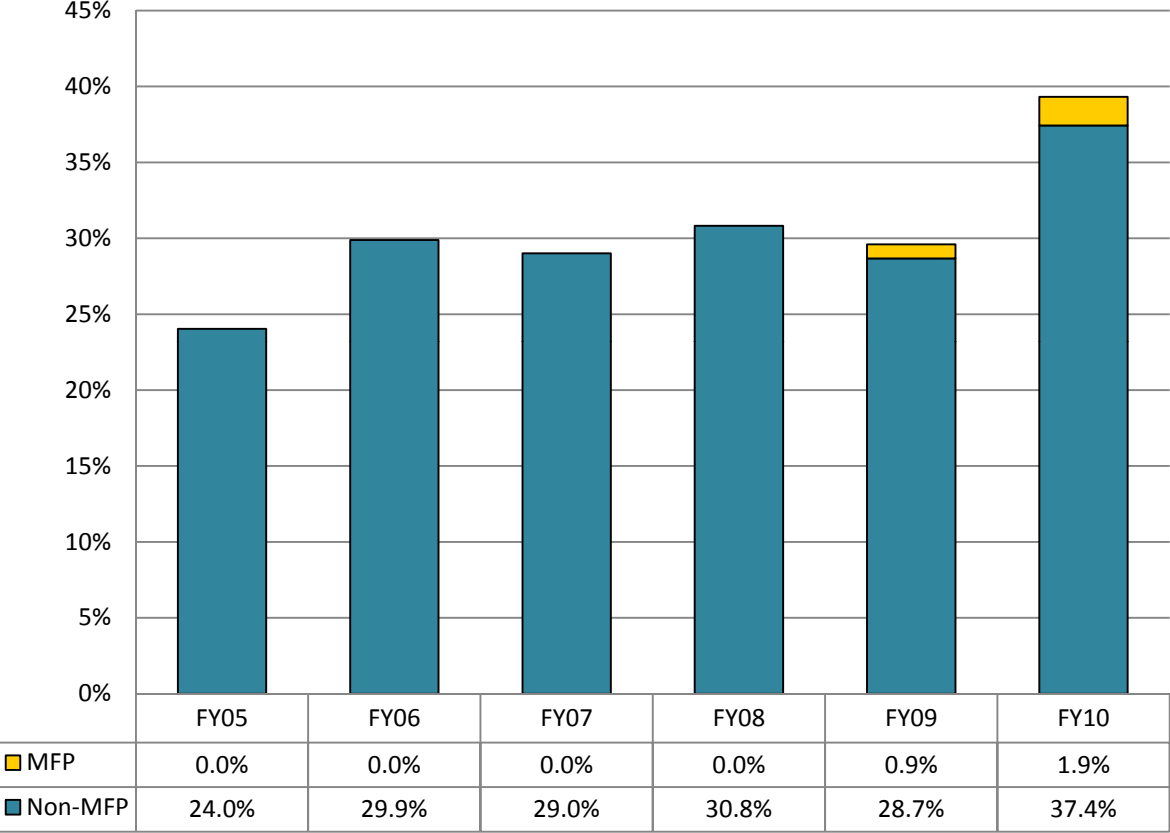


The number of individuals transitioning from Chronic Hospitals to the community has been fluctuating since FY 2005. In FY 2009, 3.2% of transitioning individuals were MFP participants; in FY 2010, 4.9% participated in MFP.

Note: This chart illustrates the number of individuals who had at least 30 continuous Medicaid paid days in a Chronic Hospital. The institutional span must have been followed by at least 30 days of MA eligibility, not immediately followed by an inpatient stay of more than 3 days, and not followed by another LTC institutional stay within 30 days.

Source: Maryland MMIS data as analyzed by The Hilltop Institute, FY 2005 – FY 2010

Percentage of Users of Institutional Services Who Transitioned to the Community: Chronic Hospital

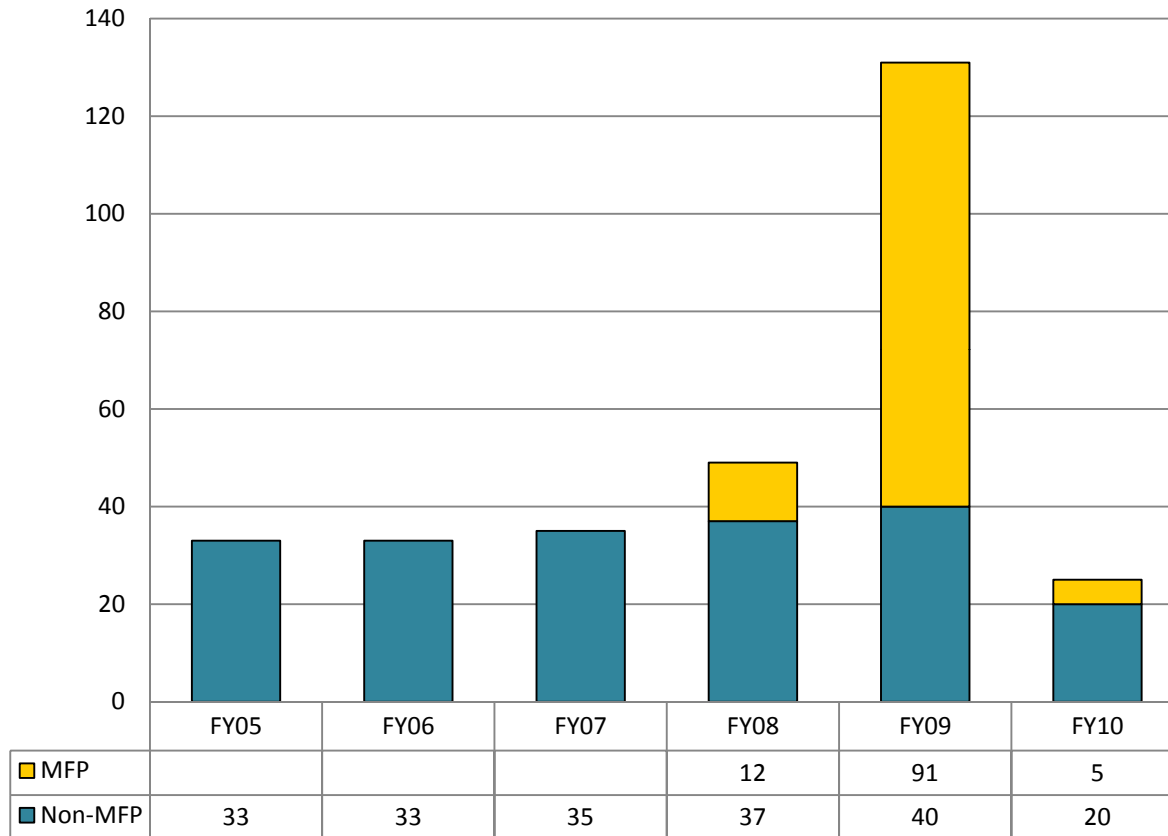


The percentage of Chronic Hospital users who transitioned to the community has generally increased, from 24.0% in FY 2005 to 39.3% in FY 2010.

Note: This chart illustrates the number of individuals who had at least 30 continuous Medicaid paid days in a Chronic Hospital. The institutional span must have been followed by at least 30 days of MA eligibility, not immediately followed by an inpatient stay of more than 3 days, and not followed by another LTC institutional stay within 30 days.

Source: Maryland MMIS data as analyzed by The Hilltop Institute, FY 2005 – FY 2010

Number of Transitions to the Community: State Residential Center

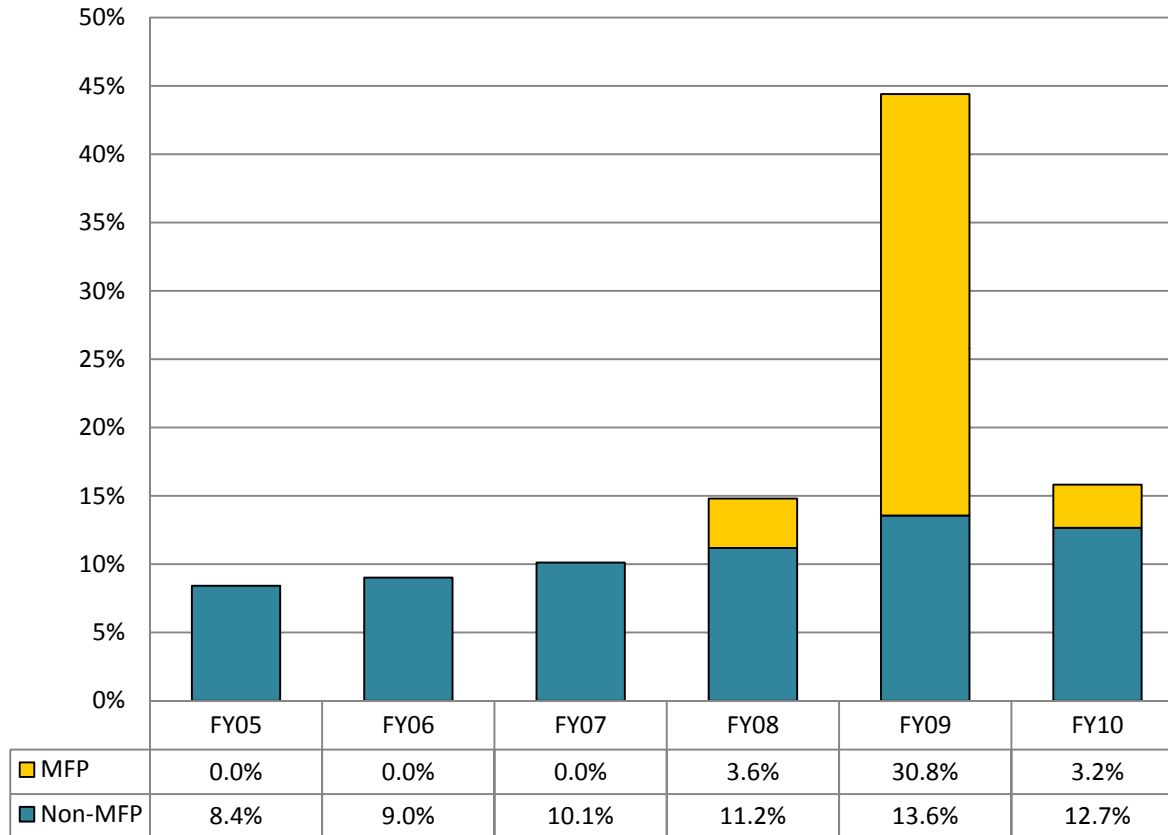


The number of individuals transitioning from State Residential Centers to the community has been increasing since FY 2005, with a spike in FY 2009. In FY 2009, 69.5% of transitioning individuals were MFP participants; in FY 2010, 20.0% participated in MFP.

Note: This chart illustrates the number of individuals who had at least 30 continuous Medicaid paid days in a State Residential Center. The institutional span must have been followed by at least 30 days of MA eligibility, not immediately followed by an inpatient stay of more than 3 days, and not followed by another LTC institutional stay within 30 days.

Source: Maryland MMIS data as analyzed by The Hilltop Institute, FY 2005 – FY 2010

Percentage of Users of Institutional Services Who Transitioned to the Community : State Residential Center



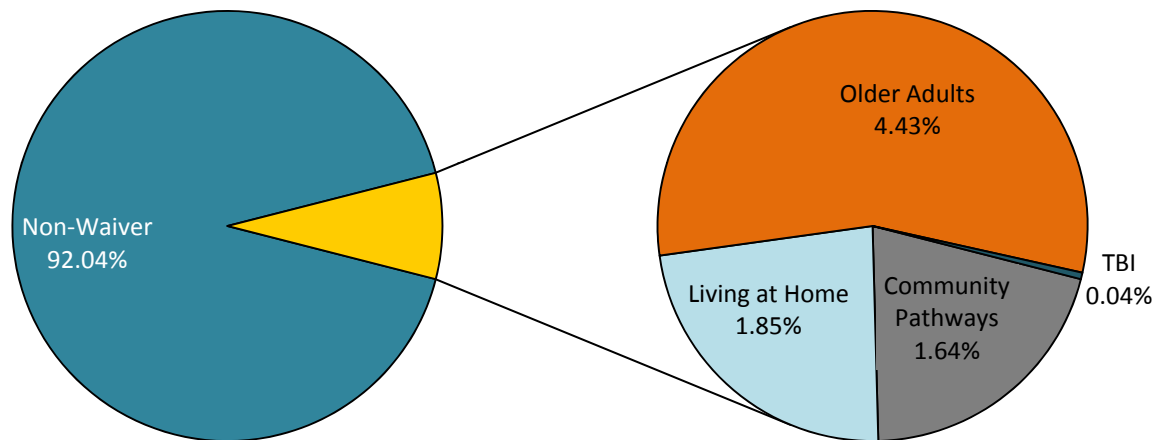
The percentage of State Residential Center users who transitioned to the community has been generally increasing, from 8.4% in FY 2005 to 15.9% in FY 2010. There was a spike in FY 2009, when 44.4% of all users transitioned.

Note: This chart illustrates the number of individuals who had at least 30 continuous Medicaid paid days in a State Residential Center. The institutional span must have been followed by at least 30 days of MA eligibility, not immediately followed by an inpatient stay of more than 3 days, and not followed by another LTC institutional stay within 30 days.

Source: Maryland MMIS data as analyzed by The Hilltop Institute, FY 2005 – FY 2010

Waiver Enrollment for Transitioned Individuals

FY 2009 Transition Destinations by Waiver: All Institutional Settings



In FY 2009, the vast majority of individuals who transitioned to the community did not enroll in a waiver program. Of those who did, 65.4% enrolled in the Older Adults Waiver (OAW), 27.3% enrolled in the Living at Home Waiver (LAH), 24.2% enrolled in Community Pathways, and 0.6% enrolled in the Traumatic Brain Injury (TBI) Waiver.

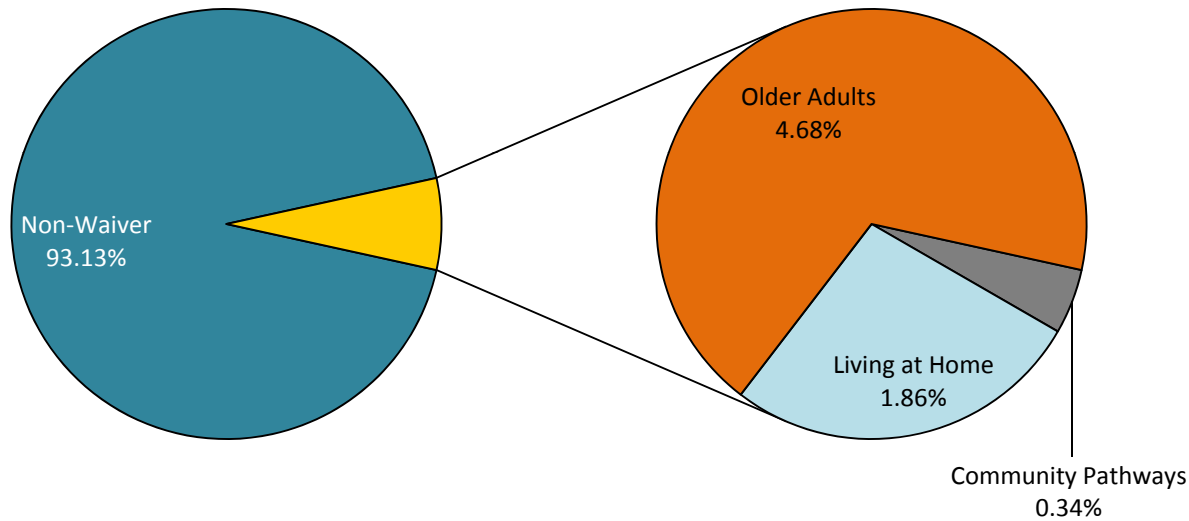
MFP participants made up 52.8% of all individuals who transitioned from any institutional setting into a waiver, and comprised 31.4% of OAW, 82.3% of LAH, 77.6% of Community Pathways, and 100% of the TBI Waiver.

Note: Other possible destinations, such as receiving Medicaid personal care or adult day care, will be broken out in the next analysis.

Note: This chart illustrates the number of individuals who had at least 30 continuous Medicaid paid days in one of the following settings: Nursing Facility, Chronic Hospital, State Residential Center, or Institute for Mental Disease. The institutional span must have been followed by at least 30 days of MA eligibility, not immediately followed by an inpatient stay of more than 3 days, and not followed by another LTC institutional stay within 30 days. Nursing Facility users must have also had a valid Medicaid level of care designation.

Source: Maryland MMIS data as analyzed by The Hilltop Institute, FY 2005 – FY 2010

FY 2009 Transition Destinations by Waiver: Nursing Facility



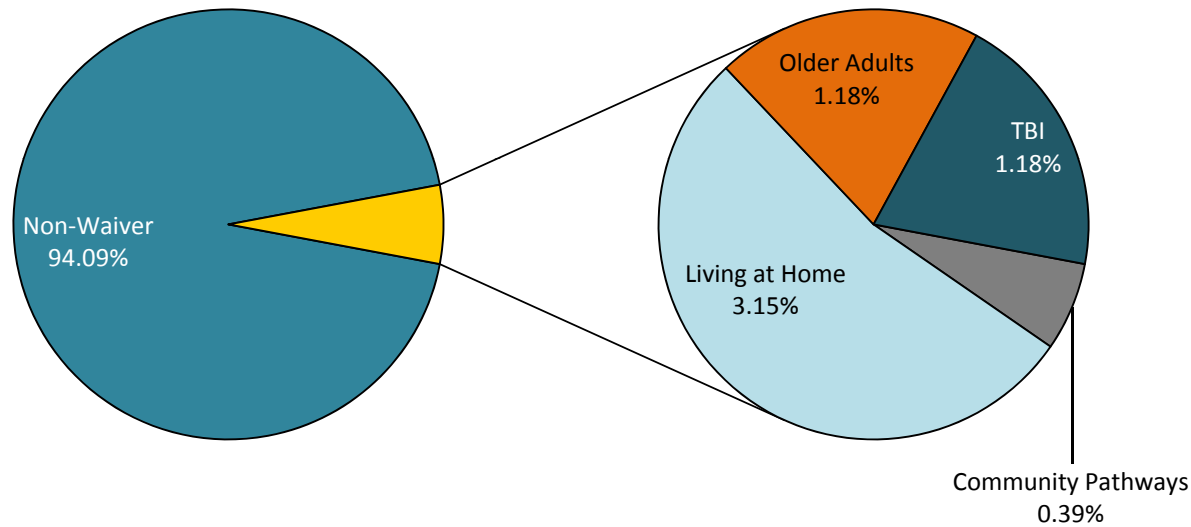
In FY 2009, 93% of the individuals who transitioned to the community from a nursing facility did not enroll in a waiver program. Of those who did, 68.0% enrolled in OAW, 27.1% enrolled in LAH, and 4.9% enrolled in Community Pathways.

MFP participants made up 45.8% of all individuals who transitioned from a nursing facility into a waiver, and comprised 31.7% of OAW, 83.5% of LAH, and 33.3% of Community Pathways.

Note: This chart illustrates the number of individuals who had at least 30 continuous Medicaid paid days in a Nursing Facility. The institutional span must have been followed by at least 30 days of MA eligibility, not immediately followed by an inpatient stay of more than 3 days, and not followed by another LTC institutional stay within 30 days. Nursing Facility users must have also had a valid Medicaid level of care designation.

Source: Maryland MMIS data as analyzed by The Hilltop Institute, FY 2005 – FY 2010

FY 2009 Transition Destinations by Waiver: Chronic Hospital



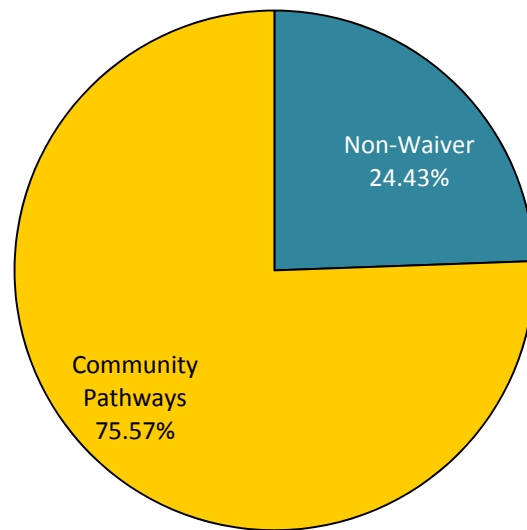
In FY 2009, 94% of individuals who transitioned to the community from a chronic hospital did not enroll in a waiver program. Of those who did, 57.1% enrolled in LAH, 21.4% enrolled in OAW, 21.4% enrolled in the TBI Waiver, and 7.1% enrolled in Community Pathways.

MFP participants made up 53.3% of all individuals who transitioned from a chronic hospital into a waiver, and comprised 62.5% of LAH, 0% of the OAW, 100% of the TBI Waiver, and 0% of Community Pathways.

Note: This chart illustrates the number of individuals who had at least 30 continuous Medicaid paid days in a Chronic Hospital. The institutional span must have been followed by at least 30 days of MA eligibility, not immediately followed by an inpatient stay of more than 3 days, and not followed by another LTC institutional stay within 30 days.

Source: Maryland MMIS data as analyzed by The Hilltop Institute, FY 2005 – FY 2010

FY 2009 Transition Destinations by Waiver: State Residential Centers



In FY 2009, more than three-quarters of the individuals who transitioned to the community from a state residential center enrolled in Community Pathways, with MFP participants making up 89.8% of those individuals.

Note: This chart illustrates the number of individuals who had at least 30 continuous Medicaid paid days in a State Residential Center. The institutional span must have been followed by at least 30 days of MA eligibility, not immediately followed by an inpatient stay of more than 3 days, and not followed by another LTC institutional stay within 30 days.

Source: Maryland MMIS data as analyzed by The Hilltop Institute, FY 2005 – FY 2010

Next Steps

In the coming months, Hilltop will be examining the following aspects of Maryland's transitioning population:

- The utilization rates of personal care and adult day care
- The personal traits of transitioning individuals, including level of care and length of stay
- The destination of those who transition
- Medicaid service utilization of those who transition, including reinstitutionalization rates and expenditure data
- Quality of Life survey findings



The Hilltop Institute

University of Maryland, Baltimore County
Sondheim Hall, 3rd Floor
1000 Hilltop Circle
Baltimore, MD 21250

www.hilltopinstitute.org