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Collector: Web Link 1 (Web Link)
Started: Friday, December 13, 2019 1:39:52 PM
Last Modified: Friday, December 13, 2019 2:34:03 PM
Time Spent: 00:54:10
IP Address: 108.203.50.189

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Q1 Issue Statement: [State the problem your recommendation will address. Insert links to reports where appropriate.]

Individuals should have easy access to current federal and state information regarding the availability and quality of all licensed long term care providers in the state through one single website portal.

Q2 MPA Framework Goal #: [Check which goal/s this recommendation addresses. View MPA Framework document]

Goal 1: Services & Supports. We will live where we choose as we age and have the help we and our families need to do so.

Q3 MPA Framework Objective #: [Check which objective/s this recommendation addresses. View MPA Framework document]

Objective 1.1: Californians will have access to the help we need to live in the homes and communities we choose as we age.

Q4 Recommendation: [Explain your recommendation in one to two sentences.]

www.CalQualityCare.org should be given state financial support to ensure access to comprehensive information on availability, quality ratings and cost information about the services of all 20,000 licensed California LTSS providers: nursing homes, hospice, home health, assisted living and residential care, adult day care, and adult day health care.

Q5 Target Population and Numbers: [Describe groups of Californians impacted by this recommendation, with numbers if available.]

Almost 2 million Californians use formal long term care services and supports. These individuals, their families, and caregivers need access to accurate information along with care managers, discharge planners, and health care providers including hospitals, health plans, and physician groups and clinic providers.

Q6 Detailed Recommendation: [Insert detailed bullet points describing your recommendation.]

The state should allocate state funding for the annual operation of the www.calqualitycare.org website and to improve and expand the website information. The state should link the website with other state and local websites that provide information on long term care services and supports.

Master Plan for Aging (MPA) Recommendation Form

Q7 Evidence that supports the recommendation: [Add links or summaries of research evidence that support the recommendation. Provide links or summaries of research evidence that support your recommendation]

The research shows that the use of quality report cards empower individuals to make choices and that individuals who choose higher quality nursing homes have shorter lengths of hospital stays, lower rehospitalization rates, and even lower mortality. Also some health plans are not contracting with the highest quality nursing home providers which puts the care of patients at risk.

1. Cornell, PY, Grabowski, DC, Norton, EC, and Rahman, M. 2019. Do report cards predict future quality? The case of skilled nursing facilities. *J. of Health Economics*. 66:208-221.
2. Harrington, C., Ross, L, and Newman, J. 2017. Using Post Acute and Long Term Care Quality Report Cards. *The Hospitalist*, December 7:1-4.
3. Mukamel DB, Amin A, Weimer DL, Ladd H, Sharit J, Schwarzkopf R, Sorkin DH. Personalizing nursing home compare and the discharge from hospitals to nursing homes. *Health Serv Res*. 2016; 1(6):2076-2094.
4. Werner, RM, Knoetzka, RT, and Polsky, D. Changes in consumer demand following public reporting of summary quality ratings: An evaluation in nursing homes. *Health Serv Res*. 2016; 51 Supple 2:1291-309.
5. Graham, C., Ross, L, Bueno, E.B., and Harrington, C. 2018. Assessing the quality of nursing homes in managed care organizations integrating LTSS for dually eligible beneficiaries. *Inquiry*. 55:1-10.

Q8 Examples of local, state or national initiatives that can be used as an example of a best practice: [Provide any available links and sources.] Local: State: National: Other:

www.CalQualityCare.org is a website that provides this LTSS information for California but it needs state funding to make it available to the public on an on-going basis. This website combines access to state Department of Public Health, Department of Social Services, the Office of Statewide Health Planning and Development, and the Centers for Medicare and Medicaid Services into one user-friendly site. It is a national model for other states.

Q9 Implementation: [Insert actions state agencies, legislators, counties, local government, or philanthropy can take to move this recommendation forward. Some of the entities listed below may or may not be applicable to each recommendation.] State Agencies/Departments: [action to be taken by Governor or specific state agencies] State Legislature: [legislation needed to implement recommendation] Local Government: Federal Government: Private Sector: Community-Based Organizations: Philanthropy: Other:

State and local governments should cooperate by providing data to the www.calqualitycare.org website as well as linkages that can facilitate consumer access to a wide range of services and supports.

Q10 Person-Centered Metrics: [Individual measures of inputs or outcomes that can be used to measure the recommended action's impact on people.]

Website user rates can show how many individuals are using the website and for how long. Surveys of discharge planners and care coordinators as well as ombudsman and caregiver organizations and determine the usefulness of the website. Consumer and provider feedback can be incorporated into the website to obtain user information.

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Q11 Measuring Success: [Describe specific metrics that could be used to empirically measure the effectiveness of your recommendation]

It is expected that the website will have widespread state use which can be measured by user metrics as well as qualitative feedback from users. The website should stimulate providers to compete on quality so that graduate improvements in LTSS provider quality can be measured. More users should be selecting higher quality providers even if they have to travel further to obtain services. Moreover, user reductions in hospital lengths of stay, reductions in hospital readmission rates, and mortality rates are expected. More individuals should be able to receive care in the community and their own homes rather than in nursing homes and institutions.

Q12 Measuring Success: [How would we know that the implementation of your recommendation is successful?]

Short term: By 2020...

User rates will go to 200,000 per year

Mid term: By 2025...

User rates will go to 500,000 per year

Long term: by 2030...

User rates will go to 750,000 per year

Q13 Data Sources: [What existing data can be used to measure success or progress?]: Existing data sources: [specify datasets, variables, and data owner/location] Suggestions for data collection to evaluate implementation of this goal when no data sources exist:

www.calqualitycare.org obtains its datasets from the CA Dept of Public Health, Dept of Social Services, and OSHPD as well as CMS. The variables have already be developed and the website is constructed. It could be expanded and improved.

Q14 Potential Costs/Savings: [insert any research, actuarial analysis or other evidence of the cost of this recommendation or potential savings]

There are large potential savings that can be obtained through reductions in hospital lengths of stay and readmission rates when consumers are able to select higher quality LTSS providers in a timely way.

Q15 Prioritization: [How would you prioritize your recommendation relative to other needs/priorities?]

High

Q16 Contact information:

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