

## ADRC Contacts: Dakota at Home

Increase the number of contacts to Dakota at Home, South Dakota’s Aging and Disability Resource Center (ADRC); the no wrong door access point from 10,567 in 2016 to 14,000 by end of federal fiscal year 2020.

South Dakota Rate	South Dakota 2020 Target	U.S. Rate
10,567	14,000	

### Significance:

The No Wrong Door approach is a state effort to streamline access to Long Term Services and Support options for all populations and all payers.

Individualization is at the heart of person- and family-centered practice and is an essential component of No Wrong Door Systems, allowing people to have information about their options and facilitate decision making based on individual and family preferences, values, and financial resources.

Awareness of the assistance and resources available through South Dakota’s ADRC, Dakota at Home, is critical to the informed choice of individuals and their families regarding how and where they will receive supports necessary to meet their needs.

Definition: Contacts including phone calls, email or in-person visits to the ADRC center per federal fiscal year.

Data Source: Social Assistance Management System Intake/Referral Data Center

### Statistical Trend:

FFY Oct-Sept	2010*	2011	2012	2013	2014	2015	2016	2017
Number of Contacts	1,094	7,728	9,024	9,205	9,532	9,842	10,567	

\*Partial year of data

## COMMUNITY SERVICES PRIOR TO NURSING FACILITY ADMISSION

South Dakota will increase the number of individuals who received home and community based services (HCBS) before being admitted to a nursing facility from 32.9 % in 2012 to 50% by end of federal fiscal year 2020.

South Dakota Rate	South Dakota 2020 Target	U.S. Rate
32.9%	50%	55.4%*

### Significance:

Access to proper services and supports are effective in delaying or preventing nursing facility admission; resulting in individuals remaining in their preferred community setting.

Measurement of the percentage of people accessing these services prior to nursing facility admission will help inform the general awareness of available services and allow for appropriate education and referrals.

### Definitions:

Home and Community Based Services: Those services and supports available in a community based setting to support individuals in remaining safe and medically stable in their home. These services include, but are not limited to, homemaker services, chore services, personal care, nursing services, emergency response systems, nutritional support, adult day centers, senior centers and assistive technology. These services and supports may be funded by Medicaid and/or other state funded programs.

Data Source: DHS Level of care database

Statistical Trend: In development

\*2017 AARP Scorecard all state median

## PERSON CENTERED PLAN

100% of older individuals and adults with disabilities receiving home and community based services will have a person centered plan by the end of federal fiscal year 2020.

South Dakota Rate	South Dakota 2020 Target
N/A	100%

Significance: For people being supported by services, the developed plan of supports is more likely to improve the life of the person being supported, more likely to be acted on and used, and will take less time and effort in development if the plan is created in coordination with a person who has good skills in person centered thinking and in the value based skills that underlie the planning.

### Definitions:

Number of people with a person-centered care plan

Data Source: Care Plan Database

Statistical Trend: In development

## Percentage of Low Care Needs Recipients

The percentage of people being supported by Medicaid in nursing facilities with low care needs will decrease by 2.7% from 15.7% in 2016 to 13.0% by the end of federal fiscal year 2020.

South Dakota Rate	South Dakota 2020 Target	U.S. Rate
15.7	13.0	11.2%*

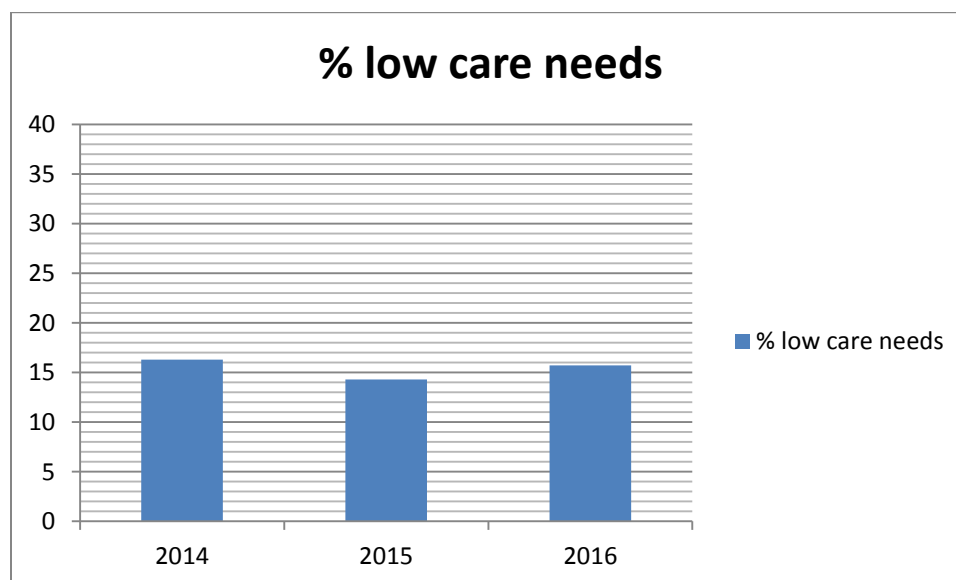
**Significance:** Individuals with low care needs are more likely to be able to be supported in home and community based settings and are more likely to remain successfully in the community than those individuals with very high care needs.

### Definitions:

Low care needs is defined as belonging to one of the 8 low care classification levels (RUGS levels) as determined by the Minimum Data Set (MDS) assessment, a standardized assessment tool required to be completed on every resident of a nursing facility. The specific RUGS levels included are PA1, BA1, PA2, BA2, PB1, PB2, PC1, BB1 and represent a case mix score of 0.87 or less.

Data Source: MDS Data

### Statistical Trend:



\*2017 AARP Scorecard all state median

# Rebalancing of Medicaid Expenditures

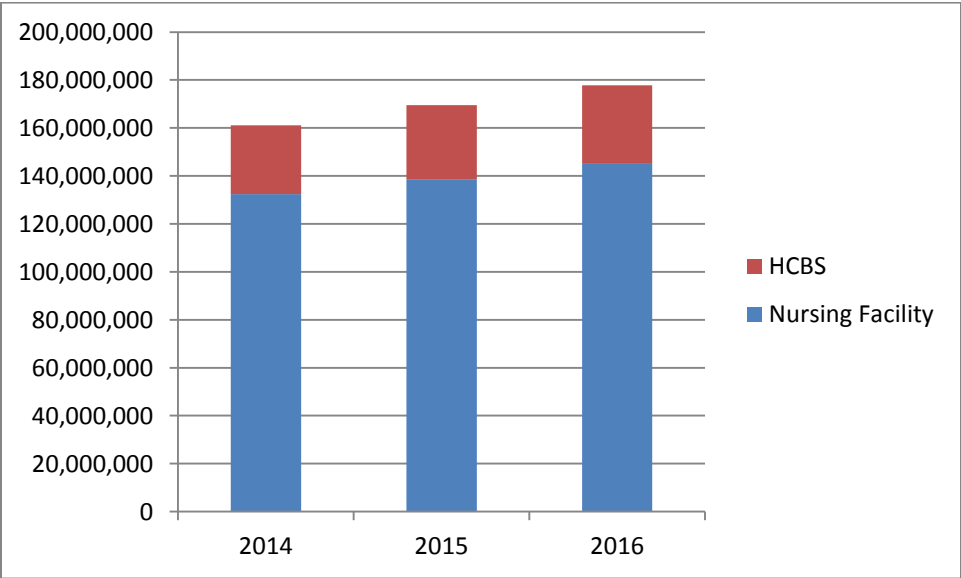
South Dakota will increase the percentage of Medicaid expenditures going to HCBS for older adults and adults with disabilities from 18% in 2016 to 22% by the end of calendar year 2020.

South Dakota Rate	South Dakota 2020 Target	U.S. Rate
18.0	22.0	33.1*

Significance: Despite an overwhelming preference among people to receive services in their home and communities, the majority of Medicaid expenditures continue to be spent on institutional care. As people live longer and grow older, the need for supports will increase significantly. Developing and sustaining a high-performing system of care, complete with robust home and community options, will be imperative for sustainability of the long term services and supports system.

Data Source: Medicaid Expenditure Data, SD Department of Social Services

Statistical Trend:



\*2017 AARP Scorecard all state median