

PHI's Response to Long-Term Care Value-Based Payment Recommendation Report

PHI works to transform eldercare and disability services. We foster dignity, respect, and independence—for all who receive care and all who provide it. The nation's leading authority on the direct-care workforce, PHI promotes quality direct-care jobs as the foundation for quality care. PHI has helped organizations, advocates, and policymakers across the U.S. to improve the quality of long-term care since 1991 through work such as workforce and curriculum development, coaching and consulting services, and policy and research efforts.

PHI greatly appreciates the opportunity to provide comments on “Long-Term Care: Value-Based Payment Recommendation Report,” issued by the Managed Long-Term Care (MLTC) Clinical Advisory Group. We applaud the state's effort to create clear measures to use for the transition of the Medicaid system into value-based payments (VBP). However, the report's recommended measures largely omit measures related to a key determinant of quality and value: the direct care worker. Direct care workers, including personal care aides, home health aides, and certified nursing assistants, spend the most time providing hands-on care and, therefore, have the greatest impact on quality of care and quality of life for enrollees. A value-based payment system would be incomplete without the inclusion of more substantial workforce measures.

Home Care Measures

The two home care workforce measures included in the recommendations are existing MLTC measures: whether an aide arrives on time and whether the client is satisfied with the quality of the aide. While these might be important (especially the satisfaction measure), they are not sufficient alone to determine quality and value.

The National Quality Forum (NQF) recently compiled a list of measures that could be used to determine quality in home and community-based settings.¹ The NQF report includes a section dedicated to workforce measures, two of which are particularly relevant to NY's development of VBP measures: demonstrated competencies and a sufficient workforce. Demonstrated competencies are “the level to which the workforce is able to demonstrate that services are provided in a skilled and competent manner. These skills and competencies are fostered in the workforce through the use of competency-based approaches to training and skill development.” One example of demonstrated competency – which NY already collects – is the proportion of direct support professionals that meet competencies. A sufficient workforce is “the level to which the supply of and the demand for the HCBS workforce are aligned in terms of numbers, geographic dispersion, and availability.” One example of a sufficiency measure is the difficulty an enrollee had in finding a qualified direct-care worker. PHI strongly believes it is important for VBP determinations to, at a minimum, include measures related to these two workforce areas and that the measures outlined in the NQF report should be seriously considered.

¹ NQF (September 2016), “Quality in Home and Community-Based Services to Support Community Living: Addressing Gaps in Performance Measurement.” Accessed at: http://www.qualityforum.org/Publications/2016/09/Quality_in_Home_and_Community-Based_Services_to_Support_Community_Living_Addressing_Gaps_in_Performance_Measurement.aspx

Further, including a measure related to retention or turnover of staff is important for both home care workers and nursing assistants. Research has shown that aspects of a quality job, such as quality training,² sufficient wages and benefits,^{3,4} and quality supervisors decrease aides' intent to leave their job (also known as staff turnover).⁵ Separate research has shown that increased staff turnover negatively affects care quality.^{6,7} These findings suggest that retention or turnover, as well as other job quality measures could be used as proxy measures (that are easier to quantify) when determining quality of care.

Nursing Home Care Measures

The only nursing home workforce measure considered in the report is the five-star quality rating for staffing. This measure is important because adequate staffing levels are associated with quality.⁸ However, this measure is insufficient on its own.

At least two additional measures should be considered: turnover and consistent assignment. As described above, turnover is linked to care quality. Further, consistent assignment of aides to residents has been shown to positively affect quality of care.⁹ Combined, these measures would help to provide a more accurate picture of quality for VBP allocations.

Conclusion

PHI appreciates the opportunity to share information and recommendations on VBP measures. In subsequent years, we hope to see measures for other long-term care settings such as assisted living facilities and adult day health programs when determining value-based payments. We look forward to participating in future discussions on these topics. If you have any questions or would like to further discuss these comments, please contact Robert Espinoza, Vice President of Policy, PHI at respinoza@PHINational.org or at (718) 928-2085.

² Luz & Hanson (May 4, 2015). "Filling the Care Gap: Personal Home Care Worker Training Improves Job Skills, Status, and Satisfaction." *Home Health Care Management & Practice*.

³ Morris (2009) Quits and Job Changes Among Home Care Workers in Maine. *The Gerontologist*, 49(5):635-50.

⁴ Banijamali, Hagopian, & Jacoby (2012), "Why They Leave: Turnover Among Washington's Home Care Workers." Seattle, WA: SEIU Healthcare 775NW. Accessed at: <http://seiu775.org/report-turnover-among-wa-home-care-workers/>

⁵ Navaie-Waliser et al. (2004), "Increasing Job Satisfaction, Quality Care, and Coordination in Home Health." *Journal of Nursing Administration*. 34(2), p 88-92.

⁶ Navaie-Waliser et al. (2004)

⁷ Castle & Engberg (2005), "Staff Turnover and Quality of Care in Nursing Homes." *Medical Care*. 43(6), p 616-626.

⁸ Castle (2008), "Nursing Home Caregiver Staffing Levels and Quality of Care: A Literature Review." *Journal of Applied Gerontology*. 27(4), p 375-405.

⁹ Castle (2011), "The Influence of Consistent Assignment on Nursing Home Deficiency Citations." *The Gerontologist*. 51(6), p 750-760.