Medicaid Long Term Care (MLTC):Redesign and Impact on AAPI Communities

Presented by: Dr. K. Loan Mai

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Basic Information

About

The New York Medicaid Redesign Team (MRT) was tasked by Governor Cuomo to find ways to reduce costs and increase quality and efficiency in the Medicaid program.

Description

New York Medicaid spends more than \$53 billion annually to provide health care to more than 4.7 million people in need. Medicaid is the largest health insurance program in New York State. These costs are supported by state, county and federal taxpayers.

General Information

We want to hear from you...

Attend and play a part in public hearings.

Attend team meetings.

Provide ideas at: http://www.health.ny.gov/medicaidredesign

We have collected over 4,000 ideas through the Medicaid Redesign Website. Once all public feedback has been collected a report will be available at: http://www.health.ny.gov/medicaidredesign.

http://www.facebook.com/NewYorkMRT?sk=info

- Of the older population, about 30% require substantial long-term care needs as defined by three or more ADL impacted limitations.
 - About 25% are 85 years old and older.
 - About 70% report being in fair to poor health.
- In 2000, of the estimated 10 million Americans requiring long term care :
 - About 63% are people aged 65 and older (6.3 million)
 - About 37% are people aged 64 and younger (3.7)
- http://www.caregiver.org/caregiver/jsp/content_node.jsp ?nodeid=440&expandnodeid=384

- As of 2050, the need for paid long-term care (e.g., at home, residential care such as assisted living, or skilled nursing facilities) is anticipated to double from 13 million in 2000, to 27 million.
- This estimate is impacted by growth in the population of older people in need of care.
- Of the older population, 40% with longterm care needs report being poor or near poor with incomes below 150% of the federal poverty level
- http://www.caregiver.org/caregiver/jsp/content_node.jsp?nodeid=440&expandnodeid=384

Calendar Year 2010 Medicaid Populations Identification of Complex Health Home Population Health Home Inclusion (Complex)

Grand

Health Home Inclusion (Complex)							Grand
	White	Black	Hispanic	Asian	Native A.	Other	Total
Developmental Disabilities							
Non Complex	54.6	15.9	14.5	1.9	0.2	12.8	100.0
Complex	62.3	13.8	11.4	1.3	0.2	11.0	100.0
Total	57.9	15.0	13.2	1.7	0.2	12.0	100.0
Long Term Care							
Non Complex	51.5	15.6	16.7	5.6	0.2	10.4	100.0
Complex	48.1	16.9	16.7	5.3	0.2	12.8	100.0
Total	49.1	16.5	16.7	5.3	0.2	12.2	100.0
Mental Health/Substance Ab	ouse						
Non Complex	40.8	21.5	27.0	3.7	0.3	6.7	100.0
Complex	41.2	21.2	25.9	3.5	0.3	7.9	100.0
Total	41.1	21.3	26.4	3.6	0.3	7.3	100.0
All Other							
Non Complex	28.0	21.9	30.0	11.2	0.4	8.6	100.0
Complex	24.6	20.8	27.0	17.1	0.5	10.0	100.0
Total	27.7	21.8	29.8	11.7	0.4	8.7	100.0
Grand Total							
Non Complex	29.6	21.7	29.4	10.5	0.4	8.5	100.0
Complex	37.3	19.9	24.0	8.8	0.3	9.7	100.0
Total	31.0	21.4	28.4	10.2	0.4	8.7	100.0

http://www.health.ny.gov/health_care/managed_care/reports/

Demographics: AAPIs in NY

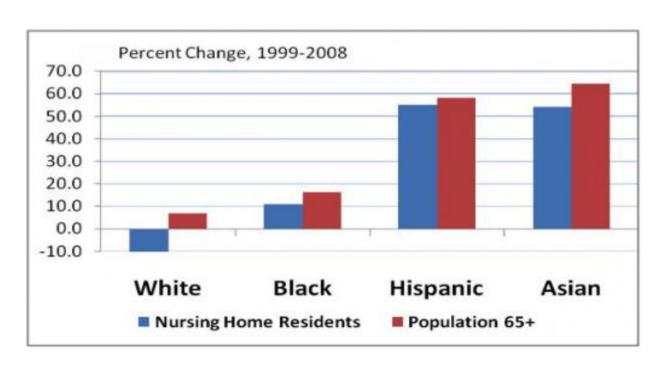
- AAPIs make up 12.7% of NYC and 7.3% of NY state.
- 73% of AAPI elderly self rate as limited English fluency compared to 27% of all NYC adults.
- 24% of AAPI elderly live in poverty compared to 18% of all NYC elders.

 Chinese elderly women, ages 65+ have the highest rate of suicide, ten times higher than white elderly women.

As found on the NY State census report, the Department of Health and Human Services, NIH and Depart for the Aging.

Health Care Management Review: January/ March 2011 - Volume 36 - Issue 1 - pp 47-57. Interaction effect of Medicaid census and nursing home characteristics on quality of psychosocial care for residents (Kang-Yi, Christina D.; Mandell, David S.; Mui, Ada C.; Castle, Nicholas G.)

Found that: nursing homes with a high proportion of ethnic minority residents have lower level of detection rate for psychosocial well-being issues, culturally competent care should be a component of quality improvement plans.



- Zhanlian Feng, assistant professor of community health in the Warren Alpert Medical School of Brown University.
- http://www.blackradionetwork.com/minorities_entering_nursing_homes_in_record numbers

- Between 1999 and 2008 the nation's nursing home population shrank by 6.1 percent to just over 1.2 million people.
- Whites in nursing homes decreased by 10.2 percent nationwide.
- The number of blacks rose 10.8 percent, Hispanics rose by 54.9 percent and the number of Asians rose by 54.1 percent.
- In New York, blacks, Hispanics and Asians, nursing home residents from these groups increased 22 percent, 84 percent and 40 percent, respectively.

- Health care Financing review/Fall 2006/Volume 28, Number .
- Personal Care Satisfaction Among Aged and Physically Disabled Medicaid Beneficiaries

(Galina Khatutsky, M.S., Wayne L. Anderson, Ph.D., and Joshua M. Wiener, Ph.D.)

Analyzed survey data from 2,325 Medicaid home and community-based services (HCBS) beneficiaries in six States to estimate

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New York State Department on Health.

Medicaid Redesign Team (MRT)

Health Disparities Work Group

FINAL RECOMMENDATIONS

Summary Listing of Recommendations:

- 1) Data Collection/Metrics to Measure Disparities
- 2) Improve Language Access to Address Disparities
- 3) Promote Language Accessible Prescriptions
- 4) Promote Population Health Through Medicaid Coverage of Primary and Secondary Community-Based Chronic Disease Preventive Services
- 5) Streamline and Improve Access to Emergency Medicaid
- 6) Address Disparities in Treatment at Teaching Facilities

http://www.health.ny.gov/health_care/medicaid/redesign/health_disparities_workgroup.htm

- 7) Address Disparities Through Targeted Training for NYS' Health Care Workforce
- 8) Enhance Services to Promote Maternal and Child Health
- 9) Enhance Services for Youth in Transition with Psychiatric Disabilities
- 10) Promote Effective Use of Charity Funds
- 11) Promote Hepatitis C Care and Treatment Through Service Integration
- 12)Promote Full Access to Medicaid Mental Health Medications
- 13) Medicaid Coverage of Water Fluoridation
- 14) Medicaid Coverage of Syringe Access and Harm Reduction Activities

http://www.health.ny.gov/health_care/medicaid/redesign/health_disparities_workgroup.htm

Resources on Health Disparities

- National Healthcare Disparities Report, 2010. http://www.ahrq.gov/qual/qrdr10.htm
- Agency for Healthcare Research and Quality:

http://statesnapshots.ahrq.gov/snaps10/dashboard.jsp?menuId=4&state=N Y&level=0

Assuring Health Equity for Minority Persons with Disabilities

http://minorityhealth.hhs.gov/Assets/pdf/Checked/I/ACMHHealthDisparitiesReport.pdf

 American Public Health Association. Evaluating the Economic Causes and Consequences of Racial and Ethnic Health Disparities, November 2008.

http://www.apha.org/NR/rdonlyres/EF3D92F8-4758-4E49-85A1-D6EB8AD8CA8 9/0/Econ2_Disparities_Final.pdf

• Department of Health and Human Services (HHS). Improving Data Collection to Reduce Health Disparities, June 2011.

http://minorityhealth.hhs.gov/npa/files/Plans/HHS/HHS_Plan_complete.pdf