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Improving Home and Community Based Systems
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July 16 Stakeholder Meeting		
7.16.2014		Web-enabled
Note taker	Andrew Cieslinski	
Attendees	Tim Cortez, Brittani Trujillo, George Culpepper, Anaya Robinson, Barb Wilkins-Crowder, Carol Meredith, Carrie Schillinger, Chandra Matthews, Charlene Willey, Cordelia Rosenberg, David Bolin, Danielle Dunaway, Dyann Walt, Gary Montrose, Joe Gaizutis, Julie Farrar, Patricia Cook, Sarah Avrin, Mary Jo, Robin Bolduc	

Overview
- This meeting did not include a PowerPoint presentation; each of the tools was displayed and discussed. To access these tools please click here. The notes primarily capture stakeholders' feedback and input about the various tools.
- There have been no decisions made regarding which tool(s) should be adopted for use in Colorado.
- The purpose of today's meeting was to familiarize stakeholders with the ADL, IADL, and Health modules across tools and to obtain feedback. Additional modules, such as employment modules or person-centered interviews, will be reviewed as the tool development process moves forward.

Continuity Assessment Record and Evaluation (CARE)
- CARE tool is under review as part of the TEFT grant. Tim Cortez said that as part of this effort, CMS is looking to develop a library of questions from which states could pull assessment items rather than having to use the entire set of questions.
- Julie Farrar had a concern that the way the tool assesses cognitive skills is not broad enough to capture a person's needs or capabilities.
- Gary Montrose said that he had concerns about how heavily medical this assessment is, and Patricia Cook reflected this concern.

MnCHOICES (Minnesota's Uniform Assessment Tool)
- Gary Montrose said that the group really likes the structure of the tool in how it captures information about challenges/strengths/preferences, and that it is the person-centered component they have been looking for. Steve Lutzky said that this person-centered style could be pulled into any tool as part of the overall assessment.
  - o Steve suggested that instead of having all of the check boxes for each of the ADL and IADL components, there might be a text box within each of the sections in which person-centered information could be captured.
- Tim Cortez said that when looking at wavier simplification, independent living skills training could then be built in to the assessment. For example, a question like, "*Is training/skill building needed to increase Independence*" could be utilized.
- There was a question about whether the tool was used to calculate a score that determined eligibility. Shirley pointed out that the tool was designed to be used for determining program eligibility, resource allocation, and support planning needs for several different programs. The tool was constructed to include items necessary to make multiple determinations. Therefore, there are multiple algorithms that are calculated.
- Gary asked how extensively the MnCHOICES tool has been used. Steve Lutzky said that it was rolled out in late 2013, and that no statewide reports have been generated. Automation was done in-house; program was not purchased off the shelf.
- Gary Montrose said he has a question around the degree to which there are funds and capacity for the training around the tool. Gary said that he likes MnCHOICES because it does seem relatively simple compared to some of the other tools and may be more cost efficient in terms of training.
  - o Chandra Matthews said that while she agreed it was simpler to understand, she had concerns about the length of time it would take to assess. Shirley York said that MnCHOICES takes about 2-3 hours, but as workers get used to the tools the time does decrease. It also takes less time for reassessment
  - o Gary said that this tool may help make the argument that there should be more compensation for completing the assessment. Tim Cortez said that he agrees that there does need to be a reexamination of the compensation and case management support regardless of the tool selected.
  - o Gary Montrose suggested that the RCCO tool and whatever tool is determined under this initiative should meet and work cooperatively.
- Robin Bolduc said that MnCHOICES seems easy to manage and that individuals have a large amount of input.
- Julie Farrar said that being able to adapt throughout the pilot will be a very important part of whatever tool is selected.

- Tim Cortez said that his concern around MnCHOICES was the time it took to develop and implement the tool and that starting a tool from scratch also means more money to customize, train, and automate. Need to be considering resource requirements and whether there is capacity to build the tool in-house.
  - Gary Montrose asked if there could be more guidance around cost-benefit analysis for each tool. Tim Cortez said that there may not be exact financial values, but HCBS Strategies may be able to come up with some figures.
  - Steve Lutzky said that Washington CARE cost $8.5 million total and that MnCHOICES cost $5 million on initial automation effort before determining it would be done in house.
- Steve Lutzky requested that the group consider the components of MnCHOICES that they liked that they would like to see in the final assessment.

Wisconsin Functional Screen
- All ADRC's across Wisconsin use this tool to screen individuals for program eligibility. When this tool is completed the ADRC does options counseling with the individual to determine what programs or services they are interested in. ADRC then refers the individual to a care coordinator or case manager who may complete a supplemental assessment to develop a support plan.
- Does not include components for support planning.
- Wisconsin has several tools that are specific to adults, children, mental health, and other populations. The ADRC triggers the appropriate tool based on initial conversation with client.
- The Screen is a state specific tool, but does have strong inter-rater reliability.
- Robin Bolduc said that she really does not think this tool is doing anything beyond what the ULTC 100.2 does.
- Julie Farrar said that she has concerns about relying too heavily on natural supports, or even having the availability of natural supports count against the individual receiving services. She wants to ensure that the process is following the intent of CMS to include natural supports as part of a comprehensive planning process, but that concern remains.

Washington Comprehensive Assessment Reporting Evaluation (CARE)
- Washington CARE was adapted from Oregon and Minnesota tools.
- Gary Montrose liked the availability of the notes and how the tool collects status information.

interRAI-HC
- The tool offers a minimum dataset; the State could add items from other tools that stakeholders like and have interRAI as the core.
- The Home Care (HC) module focuses primarily on older adults and adults with physical disabilities with LTSS needs, and there are other tools in the suite that collect diagnosis/condition information specific to other populations, such as IDD.
- There was concern that the tool only asks about the previous 3 days for ADL/IADL.
- There was concern about individuals being penalized for doing well and not being able to take into account the need to maintain their current status.
- Carol Meredith had a concern about the tools not taking into account hypermobility, or unsafe mobility.
- There was a question about the time it takes to conduct the assessments, as there are concerns about client fatigue. Steve Lutzky said that interRAI would take about 1.5 hours, MnCHOICES could take 2-4 hours, and HI uses the interRAI HC with person centered components and this takes 2-3 hours. He noted that the experience from other states suggests that in most cases it can be done in one session, however, if a client is easily fatigued, more than one session may be necessary.
- Charlene Willey said that she would like a tool that supports individuals in planning how they want to live and that works towards improving quality of life. She said that she sees that there is a struggle between establishing a budget and assessing need/supporting an individual, and that they may be trying to do too much with the tool.

Additional Input and Next Steps
- Steve Lutzky asked the group to provide specific feedback to George Culpepper and HCBS Strategies about what they like about each tool and what they do not like.
- Gary Montrose felt that this process of seeing the tools side by side really helped to get a better feel for what the different tools have to offer.
- Steve noted that he has heard requests for both a short and concise tool and a tool that will provide a more comprehensive review of an individual's strengths, objectives, needs and challenges. These desires appear to be contradictory.
  - Mary Jo said that brevity for the sake of brevity is one thing, but the goal may be to have brevity in so far as the instrument collects enough information to develop a quality support plans and truly paints a picture of individuals.
- There was feedback that while there is the desire to collect complete client information, case management agencies will need to have sustainable funds to conduct the assessments and additionally will need funding available to actually deliver those services.
- SEP/CCB representatives stated that they strongly support a comprehensive assessment but they have concerns about a lengthier assessment and how it may effect reimbursement and caseloads.