



In order to report on the most meaningful performance indicators associated with the ND US Department of Justice Settlement Agreement (US DOJ SA), the State will report, on a quarterly basis, the Key Performance Indicators (KPIs) included in this presentation. The KPIs have been revised and reduced in number from previous years to focus on the most relevant indicators of performance.

The report contains data points and notes that highlight the State's progress as well as challenges and will be posted on the ND Department of Health and Human Service's (HHS) website. Data collection methods have been developed to track the critical issues facing Target Population Members (TPMs) who want to receive care in the most integrated setting appropriate to their needs.

HOME AND COMMUNITY BASED SERVICES (HCBS) CASE MANAGEMENT

913

INDIVIDUALS REFERRED TO
HCBS CASE MANAGEMENT IN **QUARTERS 1 & 2 OF 2024**

ANNUAL COMPARISON DATA

2023 – **1,592**

2022 – **1,854**

2021 – **1,893**

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There were 913 referrals to HCBS in the first two quarters of 2024. Fifty-seven (57) percent or 522 of the referrals sent to the HCBS Case Managers during this timeframe became an open case.

The Aging and Disability Resource Link (ADRL) centralized intake system continues to be an efficient and effective way to provide information and apply for HCBS in ND.

CASE MANAGEMENT CASE LOADS

114

AVERAGE MONTHLY
WEIGHTED CASELOAD
PER HCBS CASE MANAGER IN
QUARTER 2 OF 2024

ANNUAL COMPARISON DATA

2023 – 119

2022 – 117

2021 – 110

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There are 70 HCBS Case Managers who carry an average weighted caseload of 114 cases. The average weighted caseload of each case manager went down from an average of 119 in 2023.

The State hired (3) new staff to provide case management for Medicaid eligible individuals living in Basic Care. Basic Care cases were removed from the other HCBS Case Managers caseloads. The change was made to free up time for the HCBS Case Managers to provide additional case management to individuals with complex needs. As expected, this staffing change has helped reduce the average weighted caseload for HCBS Case Managers.

TARGET POPULATION MEMBERS (TPMS) IN A SKILLED NURSING FACILITY (SNF)

2,180

TPMs SERVED IN A SNF in
APRIL of 2024

ANNUAL COMPARISON DATA

2023 – **2,412**

2022 – **2,438**

2021 – **2,376**

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There were 2,180 Medicaid eligible individuals who received services in a skilled nursing facility in the second quarter of 2024. This number includes all Medicaid eligible individuals who were approved for a short or long-term stay. Individuals who receive care in a skilled nursing facility for less than 90 days are not considered a Target Population Member under the Settlement Agreement.

TPMS WHO TRANSITIONED TO AN INTEGRATED SETTING

75

TPMs TRANSITIONED IN
QUARTERS 1 & 2 OF 2024

ANNUAL COMPARISON DATA

2023 – **118**

2022 – **121**

2021 – **91**

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In the second quarter of 2024, 38 TPMs have moved back to the community for a total of 75 TPMs in the first two quarters. The US DOJ SA requires that TPMs be transitioned within 120 days of requesting transition support services. In the second quarter, twenty-nine (29) or 76% of the 38 TPMs were transitioned within that time frame. In the first two quarters, fifty-two (52) or 69% of the 75 TPMs were transitioned within that time frame. Some transitions take more time because there are significant barriers that must be overcome before a TPM is ready to move to the community. The State staffs transitions that have been pending for 90 or more days with transition team members i.e., Transition Coordinator, HCBS Case Manager and the Housing Facilitator, to ensure that all steps are taken to allow for a safe and efficient move back to the community.

The State is committed to helping eligible TPMs transition back to the community, however long it takes, if that is their preference and not until a transition plan is in place to ensure safe transition. The State is developing and implementing additional strategies to

further address these issues.

TPMS UTILIZING STATE OR FEDERALLY FUNDED HCBS

943

TOTAL OF
UNDUPLICATED TPMS
SERVED IN **QUARTER 2 OF 2024**

ANNUAL COMPARISON DATA

2023 – **666**

2022 – **494**

2021 – **273**

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There are 943 unduplicated TPMS who are currently receiving HCBS. This appears to be a large increase from 2023 but there was a change in the way data is collected that more accurately reflects the number of TPMS being served.

All 943 individuals meet the functional requirements to receive care in the nursing home and are Medicaid eligible but choose to receive care in the most integrated setting that meets their needs. The State strives to divert as many TPMS as possible, so they can avoid institutional placement, even for a short period of time.

TPMS UTILIZING STATE OR FEDERALLY FUNDED HCBS

187

NEW UNDUPLICATED HCBS TPMs WERE DIVERTED AND SERVED IN **QUARTERS 1 & 2 OF 2024**

- 51 DIVERTED FROM A SNF ON SPED
- 151 DIVERTED FROM A SNF ON MW
- 55 DIVERTED FROM A SNF ON MSP B OR C

ANNUAL COMPARISON DATA

2023 – 321 (52 ON SPED, 250 ON MW, 89 ON MSP B OR C)

2022 – 308 (92 ON SPED, 221 ON MW, 52 SNF ON MSP B OR C)

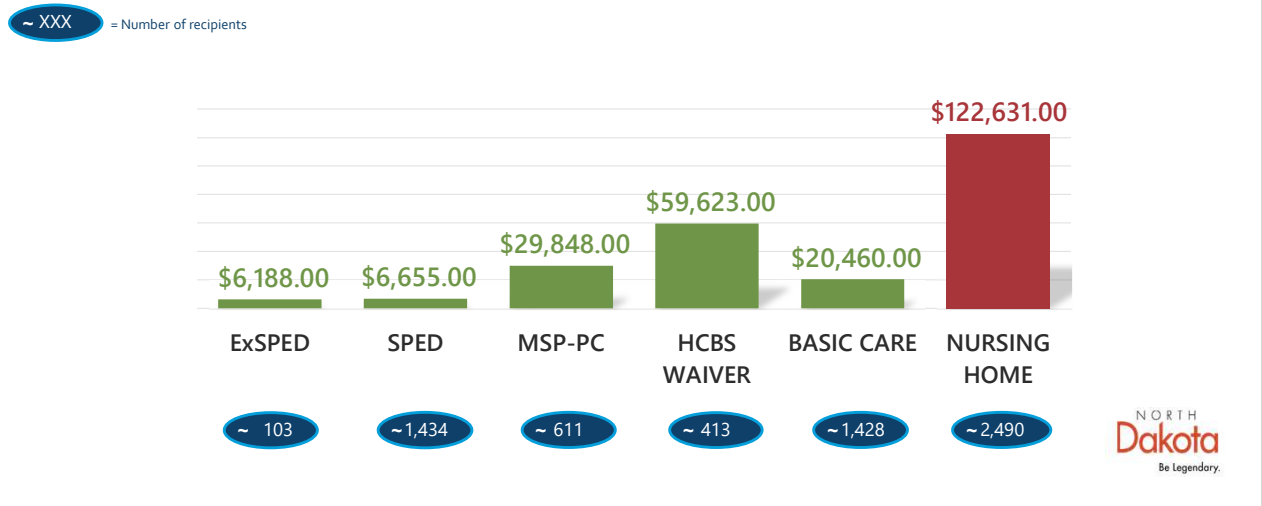
2021 – 273 (104 ON SPED, 144 ON MW, 65 ON MSP B OR C)

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In the first two quarters of 2024, 187 new TPMs were diverted from a skilled nursing facility and are receiving necessary care in the home. The number diverted by funding source reflects that TPMs may receive services under more than one program. The HCBS 1915(c) Medicaid waiver continues to be the most utilized service for newly diverted TPMs. The State is closely monitoring the number of people utilizing the waiver to accurately project the number of people we may need to serve in the future on the waiver to meet the growing demand for this service.

SFY23 AVERAGE ANNUAL INDIVIDUAL COST COMPARISON BY HCBS FUNDING SOURCE AND AVERAGE ANNUAL COST OF SNF CARE



There are many benefits to providing HCBS. HCBS is the preferred option of most people who require some type of long term services and support (LTSS) to live safely and take care of their daily needs. It is also generally cheaper and takes fewer federal and state resources to provide.

The high cost of skilled nursing facility care is part of the reason that approximately 50% of the residents of skilled nursing facilities are Medicaid beneficiaries. If an individual needs services long-term, it does not take long for the average citizen to spend down their resources and need financial support to pay for their care in a skilled nursing facility.

HCBS QUALIFIED SERVICE PROVIDERS (QSP)

8 days

AVERAGE LENGTH OF TIME TO
APPROVE QSP APPLICATIONS IN
QUARTER 2 OF 2024

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The State moved the QSP enrollment process in-house and state staff are now responsible to enroll and revalidate QSPs. In January 2024, the State began using an online QSP portal to enroll QSPs. State staff use the online portal to receive and process applications. These changes have decreased the amount of time it takes to process complete applications to less than 2 weeks.

The system replaced a paper-based process. It asks a series of questions, and then intuitively guides the user to the services they are eligible to provide. The portal allows applicants to enter and save their information eliminating the need to provide information multiple times.

The system includes short video tutorials and tool tips to help answer questions quickly which will increase the likelihood of completing the application process in the first attempt. All required enrollment training such as the QSP Fraud Waste and Abuse training and the QSP orientation is contained within the system.

The system will also be used for reenrollment and to add or

change a provider's personal information, service array, or service territory.

HCBS INDIVIDUAL QUALIFIED SERVICE PROVIDERS (QSP)

77

NEW INDIVIDUAL QSPs
ENROLLED IN **QUARTER 2**
OF **2024**

1,208

TOTAL ENROLLED INDIVIDUAL QSPs
IN **QUARTER 2 OF 2024**

ANNUAL
COMPARISON DATA
2023 – **280**
2022 – **441**

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Access to an adequate supply of available qualified service providers (QSPs) is critical to serving people in the home. At a minimum it takes at least one person to provide care for every unduplicated individual served under HCBS. TPMs who require 24-hour support to reside in the community require at least five (5) people to ensure their care needs are met every day of the year.

In 2023 the State implemented various recruitment and retention strategies to encourage individuals and agencies to enroll to be a QSP. This included, contracting for a QSP Information and Assistance Hub, providing recruitment and retention funds directly to providers, awarding incentive grants to start or expand a QSP agency, and improving the QSP enrollment process.

HCBS AGENCY QUALIFIED SERVICE PROVIDERS (QSP)

15

NEW AGENCY QSPs
ENROLLED IN
QUARTER 2 OF 2024

193

TOTAL ENROLLED AGENCY QSPs IN
QUARTER 2 OF 2024

ANNUAL COMPARISON
DATA

2023 – **34**

2022 – **11**

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In 2023, the State saw an increase in the number of QSP agencies who enrolled with HHS to provide care to eligible individuals. Agencies choose their service territory and the type of services they want to provide. Agencies will be able to better market their services to the citizens of North Dakota by using the new QSP registry that was recently launched. The new registry is called Connect to Care ND and is available on the HHS website as a tool to assist people in finding an HCBS provider.

HCBS QUALIFIED SERVICE PROVIDERS (QSP)

2

AGENCY

46

INDIVIDUAL

NUMBER OF QSP CLOSURES IN
QUARTER 1 & 2 OF 2024

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The number of individual and agency QSPs enrolled each month can vary. Many of the individual QSPs are caring for someone they had a close personal relationship with prior to them needing care. If that person is no longer receiving services, the individual QSPs often close their QSP status. The State is working on a plan to educate these QSPs about the need for direct care staff in North Dakota and encourage them to maintain their enrollment and consider helping others. The effort will be targeted at certain communities where qualified providers are hard to find.

HCBS QUALIFIED SERVICE PROVIDERS (QSP)

14

QSP AGENCIES PROVIDING
24/7 CARE IN **QUARTER 2 OF**
2024

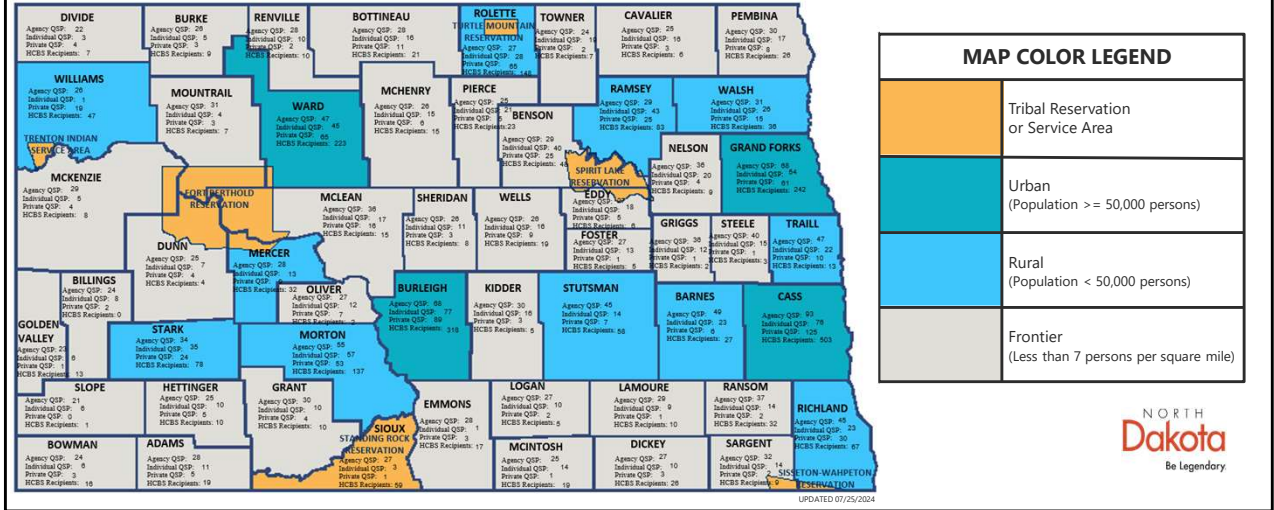
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Sixty-six (66) Medicaid eligible individuals are receiving 24/7 supports under residential habilitation or community support services. These services are provided by 14 QSP agencies who employ qualified staff who provide the direct care. Residential habilitation and community support recipients meet a nursing facility level of care but have chosen to live in the community and receive in-home care.

The ability to provide 24/7 support is a critical part of the service delivery system. Providing this level of support often involves at least 5 individual staff for each person served.

HCBS QUALIFIED SERVICE PROVIDER (QSP) TOTALS BY COUNTY



There is an agency or individual QSP enrolled to serve every county. There are some parts of ND where it is difficult to find enough QSPs to meet the demand for services. In some areas of western ND, the Government run Human Services Zone acts as one of the only agency QSPs in the area that have employees to provide care. The State is hopeful that the new enrollment portal and other workforce initiatives will increase the number of qualified providers in ND.