FY 2016 Proposed Changes to the Determination of Need Assessment Tool: An overview
What is the DON?

- An assessment tool that determines eligibility for
  - placement in a nursing facility or supportive living facility
  - Home- and community-based services through the Home Services Program and the Community Care Program
- The DON produces a score from 0 to 100. The higher the score the higher the demonstrated need.
How is the DON used?

- **Service eligibility**: the DON is used for functional eligibility
  - Does the individual meet a threshold level for the number of ADL and IADL deficits and need assistance to meet those deficits (e.g. does s/he have a family caregiver or other existing support)?

- **Service Cost Maximum**: The DON score is also used to determine the maximum allocation of service dollars to provide the individual with the services and supports s/he needs.
A note on 1915(c) waivers

- Illinois uses 1915(c) waivers to provide HCBS
- Those waivers are designed to provide an alternative to institutions, so the expectation is that HCBS clients would otherwise be served in nursing facilities
- Federal rules for 1915(c) waivers requires HCBS recipients to meet a ‘nursing home level of care’
- So the DON requirement for HCBS waivers can’t be lower than it is for nursing homes
What about the UAT?

- The DON is an old tool from the 1980s, some say ‘outdated’
- It has a limited, clinical focus that doesn’t account for social determinants of health or broader psycho-social factors
- Through the Balancing Incentive Program, Illinois is contracting with FEi Systems to replace the DON with a Uniform Assessment Tool
- The UAT would combine and streamline the collection of functional and financial eligibility data
In the meantime, the Governor has proposed changing the DON score threshold.

Currently an individual must have a 29 DON score or higher to be eligible for Medicaid waiver services.

The FY2016 budget would raise that to 37.

The proposed budget also includes a one hour/week hour reduction and a new income threshold of $17,500 for CCP.
Impact on CCP and HSP

- Community Care Program—approximately 24,000 older adults would lose services and 16,000 would be denied entry to the program who would have qualified under the current DON threshold.

- Home Services Program—approximately 10,000 people with disabilities would lose services.

- Cuts to eligibility and hours also mean cuts to provider revenue—how many providers will face insolvency before they can even test a UAT?
What does it mean for the DON score threshold to be increased to 37?

Consider an individual who is homeless, has multiple chronic physical and mental health conditions, and no family supports. She is found living in a storage locker and assessed for LTSS needs. She scores a 33. She would NOT be eligible for Medicaid HCBS waiver services under the proposed budget!
Think of the clients you work with....

- If they have moderate needs, maybe they can get by in their own homes without help, maybe they won’t end up in a nursing home right away...

- but are they more likely to maintain their functional status and independence if they have support for those moderate needs?

- Can we help prevent them from becoming ‘high need’ if we intervene early?
The wrong direction

- Are we already intervening too late to optimize the independence and quality of life for older adults and people with disabilities?

- If we demand that an older adult or person with a disability be so impaired that they score a 37 or higher on the DON, how can we claim to be building a high quality, person-centered system?