

## LONG-TERM SERVICES AND SUPPORTS (LTSS)

### What are LTSS?

LTSS encompass the broad range of paid and unpaid medical and personal care services that assist with activities of daily living (such as eating, bathing, and dressing) and instrumental activities of daily living (such as preparing meals, managing medication, and housekeeping). They are provided to people who need such services because of aging, chronic illness, or disability, and include nursing facility care, adult day health care programs, home health aide services, personal care services, and other care. These services may be provided over a period of several weeks, months, or years, depending on an individual's health care coverage and level of need.

In California, Medi-Cal provides coverage for a broad range of LTSS, including care provided in institutions as well as at home or in the community. Eligibility for Medi-Cal is limited to low-income individuals, and enrollment in LTSS is based on needs assessments that vary by program.

### What is included in Medi-Cal LTSS?

In California, Medi-Cal LTSS includes, but is not limited to, the following:

- » Long-Term Care (LTC), i.e., institutional care
  - Skilled nursing facility (SNF)
  - Adult or pediatric subacute care facility
  - [Intermediate care facility for developmentally disabled \(ICF/DD\)](#)
- » Home- and Community-Based Services (HCBS)
  - [In-Home Supportive Services \(IHSS\)](#)
  - [Regional Center services provided under Medi-Cal \(1915\(i\) State Plan Option\)](#)
  - [Home Health \(HH\)](#)
  - Six 1915(c) HCBS waivers:

1. [Assisted Living Waiver \(ALW\)](#)
  2. [California Self-Determination Program \(SDP\) Waiver for Individuals with Developmental Disabilities](#)
  3. [HCBS Waiver for Individuals with Developmental Disabilities \(HCBS-DD\)](#)
  4. [Home and Community Based Alternatives \(HCBA\) Waiver](#)
  5. [Medi-Cal Waiver Program \(MCWP\)](#)
  6. [Multipurpose Senior Services Program \(MSSP\)](#)
  - [Community-Based Adult Services \(CBAS\)](#)
  - [California Community Transitions \(CCT\)](#)<sup>1</sup>
- » Other LTSS:
- [Program of All-Inclusive Care for the Elderly \(PACE\)](#)

## DASHBOARD

### What is the Medi-Cal LTSS Dashboard?

The Department of Health Care Services' (DHCS) Medi-Cal LTSS Dashboard is one of the deliverables included in the Data Transparency Initiative within California's [Home and Community-Based Services Spending Plan](#). The Department's primary goal in developing the LTSS Dashboard is to provide the public with access to information on the Medi-Cal population receiving LTSS, service utilization, quality of care, and cost data.

The LTSS Dashboard includes statewide data on both LTC and HCBS to make it possible for regulators, policymakers, and the public to remain informed while the state continues to expand, enhance, and improve the quality of LTSS in all home, community, and congregate settings.

### Are there instructions on how to use the LTSS Dashboard?

The "User Guide" provides information on how to navigate through the LTSS Dashboard. The "User Guide" is found on the *LTSS Dashboard landing page* and can be reference by clicking on the "User Guide" button in the upper-right corner of the Dashboard. For more detailed information, please refer to the *training manual*.

### What's included in the latest data refresh?

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<sup>1</sup> CCT is the name of California's Money Follows the Person (MFP) Rebalancing Demonstration.

The LTSS Dashboard was first released in 2021 as an Open Data Portal with 40 enrollment and utilization measures from 2017-2021. The new data refresh in December 2023 will include 2022 data and 16 new measures for home health services, CCT, and regional center consumers utilizing Medi-Cal LTSS. An overview of the new data elements and findings are available in the *LTSS Dashboard Factsheet*.

## VISUALIZATION

### Who is included in the dashboard?

The LTSS Dashboard includes comprehensive data on all Medi-Cal LTSS and allows users to view the data by service(s) and subpopulation(s) receiving LTSS. The horizontal tabs at the top of the dashboard divide the LTSS population by the type(s) of services they use.

LTSS data is divided into subpopulations, as follows:

- » **Medi-Cal:** This tab includes data for all certified eligible Medi-Cal members.
- » **All LTSS:** This tab includes people enrolled in Medi-Cal who utilized LTSS at any point within the selected timeframe, including both institutional care and home- and community-based LTSS, and PACE.
- » **Selected LTSS:** This tab includes people enrolled in Medi-Cal who received selected LTSS, limited to the following:
  - LTC, including long-stay and short-stay
  - IHSS
  - CBAS
  - ALW
  - HCBA
  - MSSP
  - CCT
- » **All HCBS:** This tab includes people enrolled in Medi-Cal who utilized an HCBS at any point within the selected timeframe. HCBS includes:
  - IHSS
  - Regional center services for Medi-Cal Members
  - HH
  - CBAS
  - Six HCBS waivers:
    - ALW
    - SDP
    - HCBS-DD
    - HCBA
    - MCWP
    - MSSP
  - CCT

- » **Selected HCBS:** This tab includes people enrolled in Medi-Cal who received selected HCBS, limited to the following:
  - ALW
  - CBAS
  - CCT
  - HCBA
  - IHSS
  - MSSP
- » **Long-Term Care:** This tab includes people enrolled in Medi-Cal who received services in any of the following care settings, at any point within the selected year(s):
  - SNF
  - Adult or pediatric subacute care facility
  - ICF/DD
- » **1915c:** This tab includes people enrolled in any of the 1915(c) HCBS waivers, at any point in the selected year(s):
  - ALW
  - SDP
  - HCBS-DD
  - HCBA
  - MCWP
  - MSSP
- » **IHSS:** This tab includes people receiving IHSS at any point in the selected year(s)

## What are the measures in the drop-down menu?

Utilization data can be filtered by services members receive which can be found in the “measures” drop down menu. After selecting a population of focus, click on the drop-down menus for a list of measures. You can hover over the “i” icon to view a brief description of the measures.

## Where to find more detailed descriptions of the measures?

For more detailed description of the measures, please refer to the *measure specification*. This will provide an in-depth look at all the measures; how it’s defined; and its components.

## Where does the data come from?

- » Data included in the LTSS Dashboard comes from numerous sources, including:
  - DHCS claims data
  - DHCS Medi-Cal enrollment data

- CDSS Case management, Information, and Payrolling System (CMIPS) for IHSS
- DDS enrollment data for Regional Center programs
- CDA enrollment data for MSSP and CBAS
- » The data is also being used for [DHCS' Gap Analysis and Multi-Year Roadmap initiative](#) to support California's transition to a statewide, fully integrated MLTSS system.

## What are possible causes of data variances?

As mentioned above, the LTSS Dashboard data is compiled from multiple sources, reporting on different services within LTSS. The computation of the data revealed some data variances. Reasons include, but are not limited to, the following:

- » Annual vs. Monthly reporting:
  - Most DHCS LTSS dashboard measures report the annual number of certified eligible Medi-Cal beneficiaries who used LTSS within a year.
  - Other departments report similar data by month, including:
    - CDSS' counts of IHSS recipients/consumers
    - CDA's counts of CBAS Medi-Cal participants
  - DHCS' annual counts of IHSS and CBAS participants are higher than CDSS/CDA's monthly counts because of data source differences and point-in-time data pulls that fluctuate with new enrollments and attrition.
- » Data collection based on calendar year (CY) vs. waiver year (WY)
  - Calendar year: HCBA, MCWP, HCBS-DD
  - Waiver year: ALW, SDP, MSSP
- » Data exclusion:
  - For example, count difference for Medi-Cal members. The LTSS dashboard includes only certified eligible Medi-Cal members in California. It excludes individuals in state-only programs, such as Presumptive Eligibility and individuals enrolled in federal programs administered by the federal Social Security Administration.
- » Data suppression:
  - Some subsets of data need to be suppressed to protect Member anonymity.
  - Data is suppressed when there are fewer than 11 members within a sub-population.
  - Complementary data is suppressed when it can be used to identify another suppressed value.
    - For example, if data for age 0-20 is <11 members, the next lowest numbers are suppressed to preclude subtraction of unsuppressed values from the total to identify the suppressed value).

## **The data queried came back with a count of “0.” Why does the dashboard show “0”?**

“Blank” or “0” values indicate one of the following scenarios:

- 1) the final count does not meet DHCS’ Data De-identification Guidelines v2.2, or
- 2) no data is available for the selected search criteria.

## **Why is the statewide total number of Members different from the sum of all counties or all health plans?**

The statewide total includes the entire statewide Medi-Cal Member population without any data suppression. At the county/health plan level, some sub-sets of data must be suppressed to protect Member anonymity and when there are fewer than 11 members. Therefore, the statewide total will be greater than the sum of all counties/health plans.

## **What is deduplication?**

Data deduplication methodology is the removal of repeated or redundant data to produce accurate counts of a population, service, setting, etc.

Example: To identify the total number of people enrolled in Medi-Cal in a single year, DHCS uses monthly enrollment data; however, the data would be deduplicated so that each person would only be counted once, regardless of how many months they were enrolled in Medi-Cal.

## **What is the line graph showing?**

The line graph depicts the total number of members in the selected population of focus receiving services at any period in the year indicated. Note there are members that could be counted multiple times if enrolled in one service but then disenrolled and re-enrolled in another service in the same year.

## **What years are included?**

The December 2023 release includes LTSS data from 2017 through 2022 with a few exceptions. For example:

- » Data for home health services begins in 2019.
- » Data for CCT is not available for 2022 at this time but will be included in future refreshes.
- » SDP data is not available for 2017 or 2018 because waiver enrollments started on January 1, 2019.

## How can I review LTSS data in my county?

The LTSS Dashboard utilization data can be stratified by the 58 counties in California. Utilization data within counties can be viewed on a map or in a list so users can compare utilization across two or more counties. Click on the arrows to expand the table to view multiple years. You can also hover over a county to see the name of the county and data for the selected population, measure, and year(s).

## What services are included under Managed Care Plans (MCPs)?

The LTSS Dashboard presents utilization data for 31 health plans for the December 2023 release. However, changes to service providers affect the reporting of utilization data.

Under the California Advancing and Innovating Medi-Cal (CalAIM) Waiver, Medi-Cal MCPs became responsible for services that were traditionally provided under fee-for-service, which includes the following:

- » All MCPs became responsible for covering SNF care on January 1, 2023, whereas only some plans covered SNF care previously.
- » MCPs will be responsible for covering ICF services beginning on January 1, 2024.
- » All members dually eligible for Medicare and Medi-Cal were mandatorily enrolled in MCPs statewide effective January 1, 2023.

Also note Cal Medi-Connect (CMC) plans are represented on the Dashboard as one (1) health plan. See below for more information on CMC data.

## What demographics are included in the LTSS Dashboard?

Data can be stratified by demographics: age, primary language, race/ethnicity, and sex.

## How can I view utilization data trends?

The LTSS Dashboard enables users to select more than one year to compare utilization data. After selecting the population of focus, measures, years, counties, health plans, and demographics desired for review, click the trends "Play" button for automatic visualization of data across the selected years.

## How can I compare selected populations and measures?

The "Compare Data" button located in the right upper corner of the dashboard allows users to compare two selected subpopulations and measures, and then stratify the

results by year, county, health plans, and demographics. This powerful tool allows a user to possibly compare, for example, IHSS participants in SNF vs. IHSS participants in HCBS; or LTC in SNF vs. LTC in ICF.

## **What data is available for the Cal MediConnect (CMC) Population? Can I view CMC enrollment data by individual plans?**

Currently, the LTSS data dashboard provides the total number of Medi-Cal Members enrolled in the CMC program and is not separated into individual Plans. The data is aggregated to protect the anonymity of the enrolled Members in alignment with DHCS' Data De-Identification Guidelines v.2.2.

## **What will happen to CMC data with the January 1, 2023 transition of CMC Members to Medicare Medi-Cal (Medi-Medi Plans [MMP])?**

- » CMC data for 2017 – 2022 will remain available on the LTSS data dashboard.
- » Data for 2023 will reflect the transition of CMC members to MMP. MMP is the California-specific program name for Exclusively Aligned Enrollment Dual Eligible Special Needs Plans (EAE D-SNPs).
- » Under exclusively aligned enrollment, beneficiaries can enroll in a D-SNP for Medicare benefits and in a Medi-Cal managed care plan for Medi-Cal benefits, which are both operated by the same parent organization for better care coordination and integration. MMPs offer an integrated approach to care and care coordination that is like CMC. MMPs will work together to deliver all covered benefits to their members, and members will receive integrated member materials, such as one integrated member ID card.

## **Why are the LTSS Dashboard and CalAIM Dashboard separate? Is there any crossover?**

- » Both the California Advancing and Innovating Medi-Cal (CalAIM) and LTSS dashboards align with DHCS' Strategic Plan and Data Transparency Initiative, along with several other dashboards focusing on other populations of interest. There is some crossover between the LTSS and CalAIM dashboards, primarily related to Medi-Cal enrollment, but each dashboard allows users to take deeper dives into the data related to unique services, programs, and populations. For



more information about DHCS' Dashboard Initiative, please visit: [DHCS Dashboard Initiative \(ca.gov\)](#)

## **What's next for LTSS Dashboard?**

In future iterations of the LTSS Dashboard, DHCS will include cost and quality measures; length of stay data; new subpopulations and utilization measures; additional demographics; and improved visualization and analysis capabilities. DHCS will continue to refresh existing data.

## **Who can I contact if I have questions about the LTSS Dashboard?**

If you have questions about the dashboard or would like to provide feedback to DHCS, please send an email to [ltssdashboard@dhcs.ca.gov](mailto:ltssdashboard@dhcs.ca.gov).