

Long-Term Services and Supports (LTSS) Data Budget Proposal

Fact Sheet

Proposal

Funds shall be appropriated to the Health and Human Services Agency and the Department of Health Care Services for the purpose of contracting with UCLA for collection and analysis of data on LTSS access and needs in California by incorporating questions on LTSS access and needs in the California Health Interview Survey (CHIS) in the 2019-20 and 2023-24 survey cycles.

Background

California currently has close to 8 million persons who are either seniors age 65 and over or are persons under age 65 who have disabilities. This population is expected to grow significantly over the next decade, primarily due to the aging of the population, but also due to the growing number of persons with developmental disabilities who are aging out of their systems of care and of persons with traumatic injuries who are surviving their injuries due to advances in medical care. Concurrent with this will be a growing need for long-term services and supports (LTSS). The number of seniors with self-care difficulties who live in the community in California, for example, is projected to double by 2030 (PPIC, 2015).

Despite this unprecedented growth in needs for LTSS, California does not collect the data it needs to accurately track and plan for these needs. While national surveys collect data on the prevalence of disabilities and cognitive and functional impairments, they do not provide state and county level estimates of the population that needs and uses LTSS in California, nor assess the needs for LTSS by income level, age, type of disability, geographic region, or racial or ethnic group.

Studies show lack of access to long-term services and supports contributes to higher health care needs and increased utilization of health care services. For example, significant percentages of Medi-Cal beneficiaries who have unmet LTSS needs indicate they have limited mobility, making it difficult to get to medical appointments and do household chores, they go without groceries, and they make medication mistakes (UCSF and UC Berkeley, 2017). Studies also show that most Medi-Cal beneficiaries experience high rates of utilization of health services before they begin accessing LTSS, which diminish after they begin receiving LTSS (CAMRI, 2014). Without data to identify populations and areas of the state that experience barriers to access to LTSS, the state lacks the ability to develop and target interventions that can improve health status and reduce state expenditures.

Arguments in Support

- A modest investment in developing better and more accurate state and county level data will enable the state to engage in better planning for the LTSS needs of its growing population of seniors and persons with disabilities;
- Better data will enable the state to determine the amount of funding necessary to address the needs of those who will require LTSS in the future, and to develop sustainable funding mechanisms that are not dependent upon the General Fund.
- A portion of the costs of developing and analyzing the data can be matched with federal funds as an allowable Medicaid administrative cost.

Organizations in Support

AARP

Alzheimer's Association

California Association for Adult Day Services

California Association of Area Agencies on Aging

California Commission on Aging

California LTC Ombudsman Association

CalPACE

Caring Across Generations

Congress of California Seniors

Disability Rights California

Disability Rights Education and Defense Fund

Hand in Hand: The Domestic Employers Network

Justice in Aging

LeadingAge California

Service Employees International Union

UDW/AFSCME

Proposed Budget Language

Up to \$1 million shall be appropriated to the California Health and Human Services Agency and to the Department of Health Services to contract with the University of California, Los Angeles to incorporate questions on LTSS needs to the California Health Interview Survey (CHIS) in the 2019-20 and 2023-24 survey cycles. The questions shall be vetted by a working group of researchers and policy experts designated by the Secretary of Health and Human Services and shall be designed to gather data at the state and local level on the prevalence of disabilities, cognitive and functional impairment, need for and use of LTSS, unmet needs, and factors that mitigate or offset needs for LTSS.

Funds appropriated pursuant to this item shall be used to continue the inclusion of questions on caregiver burdens, which are scheduled to be included in the 2019-20 survey cycle and funded by foundation sources, in the 2023-2024 survey cycle; for the analysis of data gathered in the 2019-20 survey cycle on LTSS needs; and to examine health and other impacts associated with LTSS needs.

Funds appropriated to the Department of Health Services shall be used for collection and analysis of data on LTSS needs and usage by Medi-Cal beneficiaries to enable the state to receive federal matching funds as a Medicaid administrative activity.