





PICKING UPTHE PACE OF CHANGE

A State Scorecard on Long-Term Services and Supports for Older Adults, People with Physical Disabilities, and Family Caregivers









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AARP PUBLIC POLICY INSTITUTE

longtermscorecard.org









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From the Authors: The Highlights

The Long-Term Services and Supports (LTSS) State *Scorecard*—a compilation of state data and analysis—finds that progress toward better support for our rapidly increasing populations that are aging and living with disabilities is slow and uneven, with great variation among states. Still, states made significant improvements in supporting family caregivers, providing more home- and community-based services, and reducing burdensome care transitions from one care setting or provider to another.

The two areas with the most significant progress are reduction in the use of antipsychotic medications that are given "off label" for nursing home residents whose conditions do not support their use (48 states) and movement toward person- and family-centered practices that support family caregivers (42 states). The two areas with the most significant declines are employment for working-age people with disabilities (21 states) and long-stay nursing home residents moving back to the community (21 states).

Although states have improved more than they have declined, this progress is not enough. Each year, for example, states inch toward spending a greater proportion of Medicaid and state LTSS funding on home- and community-based services—a positive trend because it both enables greater independence and is cost-effective. At the current national rate of change, however, it will take 36 years for the average of the bottom 5 states (17 percent toward home- and community-based services) to reach the level of the median state today (33 percent), and another 51 years for the median state to reach the level of the average of the top 5 states (64 percent). To hit these benchmarks by 2026—the year when baby boomers begin to turn 80 and begin to experience a greater need for LTSS—the rate of improvement must triple and quadruple, respectively.

It is time to pick up the pace of change.

State and federal officials, providers, advocates, and other stakeholders can use the data analytics in this *Scorecard* to see how their state compares with others and to assess both their successes and areas in need of reform in order to improve support for older people, adults with physical disabilities, and their family caregivers.

Table of Contents

List of Exhibits	4
Purpose	5
About the Scorecard	5
The Vision: A High-Performing LTSS System	6
State Rankings, 2017	8
Major Findings	9
Reflections	19
How Does Your State Rank on Each Measure?	21
Key Findings by Dimension	22
Dimension 1: Affordability and Access	22
Dimension 2: Choice of Setting and Provider	24
Dimension 3: Quality of Life and Quality of Care	26
Dimension 4: Support for Family Caregivers	28
Dimension 5: Effective Transitions	31
Acknowledgments	33
Appendix A	35

List of Exhibits

Exhibit 1	Framework for Assessing LTSS System Performance
Exhibit 2	State Scorecard Summary of LTSS System Performance across Dimensions
Exhibit 3	Change in State Performance on 23 Indicators from the 2014 to 2017 Scorecards
Exhibit 4	Top Five States and Improvements Needed
Exhibit 5	Top- and Bottom-Ranked States across All Three Editions of the LTSS State Scorecard
Exhibit 6	Change in State Performance by Indicator: Percentage of States
Exhibit 7	Subsidized Housing Opportunities and Demand, as a Percentage of All Housing Units, by State
Exhibit 8	State Variation: Nursing Home Residents with Low Care Needs
Exhibit 9	State Variation: Medicaid LTSS Spending Balance
Exhibit 10	National Cumulative Impact if All States Achieved Top State Rates

2017 Long-Term Services and Supports Scorecard

PICKING UP THE PACE OF CHANGE

A STATE SCORECARD ON LONG-TERM SERVICES AND SUPPORTS FOR OLDER ADULTS, PEOPLE WITH PHYSICAL DISABILITIES, AND FAMILY CAREGIVERS

Purpose

The Long-Term Services and Supports (LTSS) State Scorecard aims to pick up the pace of improving LTSS by providing comparable state data to:

- Benchmark performance,
- Measure progress,
- Identify areas for improvement, and
- Improve lives.

The numbers give comprehensive multidimensional insight into LTSS in our country. Our goal is for the Scorecard to stimulate a dialogue among key stakeholders, encouraging them to collaborate on strategies for improving a given state's LTSS system.

About the Scorecard

Everyone faces a risk, but not a certainty, of needing LTSS. About 52 percent of people turning 65 today will at some point develop a severe disability that will require LTSS. LTSS consist of a broad range of day-to-day help needed by people with long-term conditions, disabilities, or frailty. This can include personal care (bathing, dressing, toileting); complex care (medications, wound care); help with housekeeping, transportation, paying bills, and meals; and other ongoing social services. LTSS may be provided in the home, in assisted living and other supportive housing settings, in nursing facilities, and in integrated settings such as those that provide both health care and supportive services. LTSS also include supportive services provided to family members and other unpaid caregivers.1

The Scorecard showcases measures of state performance for creating a highquality system of care in order to drive progress toward improvement in services for older adults and people with physical disabilities, and their family caregivers. The focus is on state-level data because our country does not have a single national system to address LTSS needs.

The Scorecard showcases measures of state performance for creating a highquality system of care.

^{1.} For a complete definition of LTSS, see page 20 of the 2014 Scorecard at http://longtermscorecard.org.

Consistent, comparable, and reliable state data are more critical than ever given the:

- Demographics of our aging society,
- Increasing numbers of people living with disabilities,
- Consumer preferences for living in the community,
- High cost of care,
- Great state variation in LTSS, and
- Evolving political environment.

THIRD EDITION OF THE SCORECARD

This 2017 Long-Term Services and Supports State *Scorecard* is the third edition in an ongoing series. Previous *Scorecard*s were published in 2011 and 2014. All 50 states and the District of Columbia are ranked on 25 indicators across 5 dimensions.

The authors and funders are grateful to the *Scorecard* National Advisory Panel and many other experts for guiding this project over the past eight years.

The Vision: A High-Performing LTSS System

The Scorecard measures across five dimensions of LTSS system performance:

1. Affordability and Access

Consumers can easily find and afford services, with a safety net for those who cannot afford services.

2. Choice of Setting and Provider

A person-centered approach allows for consumer choice and control of services.

3. Quality of Life and Quality of Care

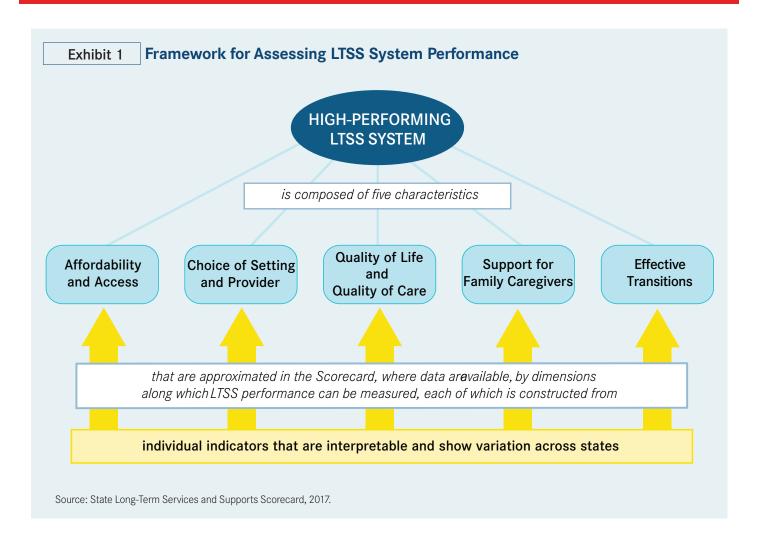
Consumers are treated with respect and preferences are honored when possible, with services maximizing positive outcomes.

4. Support for Family Caregivers

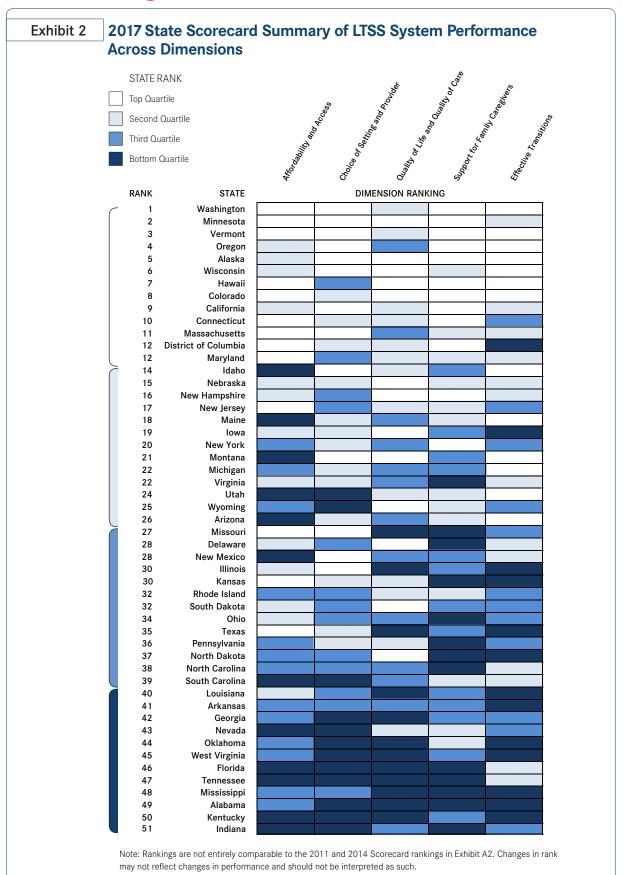
Family caregivers' needs are assessed and addressed, so they can receive the support they need to continue their essential roles.

5. Effective Transitions

Integration of health, LTSS, and social services minimizes disruptions such as unnecessary hospitalizations, institutionalizations, and transitions between settings.



State Rankings



Source: State Long-Term Services and Supports Scorecard, 2017.

Major Findings

Overall, states have made incremental improvements, but must pick up the pace of change to meet the needs of a growing number of people aging and living with disabilities.

The pace of change on most indicators has been slow and uneven.² While there has been more improvement than decline, few states achieved meaningful change—typically defined here as 10 percent or more over the past two to four years—on most of the 23 measures that can be tracked over time.³

Most notably, the majority of states had no meaningful change in each of the five measures in the Affordability and Access dimension. The cost of LTSS over time remains much higher than what middle-income families can afford, and most adults do not have private long-term care insurance.

There are, however, some areas of progress. In four out of the five dimensions, there was at least one indicator on which most states showed significant improvement.

This slow pace of change is juxtaposed with the increasing number of adults with disabilities seeking greater independence in their communities and the older population, with 10,000 people in the United States turning age 65 every day. More of our nation's population will live well into their 80s—an age at which there is considerable demand for LTSS.

The cost of LTSS over time remains much higher than what middle-income families can afford, and most adults do not have private long-term care insurance.

^{2.} See a detailed discussion of measuring change over time and thresholds for significance for each indicator at http://longtermscorecard.org.

^{3.} Out of the 25 total measures, 2 of them—No Wrong Door/Aging and Disability Resource Center and Participant Directed Services—could not be followed over time because of methodology and programmatic changes.

Exhibit 3 Change in State Performance on 23 Indicators from the 2014 to 2017 Scorecards

Indicator	lm nuovom ont	Performance	No Significant	Missing Data
indicator	Improvement	Decline	Change	Missing Data
	Affordability and	d Access		
Nursing Home Cost	5	4	42	0
Home Care Cost	5	0	46	0
Long-Term Care Insurance	0	3	47	1
Low-Income People with Disabilities with Medicaid	15	4	32	0
People with Disabilities with Medicaid LTSS	4	5	39	3
	Choice of Settin	ng and Provider		
Medicaid LTSS Balance: Spending	17	7	27	0
Medicaid LTSS Balance: New Users	29	10	11	1
Home Health Aide Supply	24	6	21	0
Assisted Living Supply	7	7	32	5
Subsidized Housing Opportunities	28	0	23	0
Quality of Life and Quality of Care				
People with Disabilities Rate of Employment	5	21	25	0
Nursing Home Pressure Sores	14	2	35	0
Nursing Home Antipsychotic Use	48	1	2	0
Support for Family Caregivers				
Supporting Working Caregivers	9	1	41	0
Person- and Family-Centered Care	42	2	7	0
Nurse Delegation and Scope of Practice	24	1	26	0
Transportation Policies	3	10	38	0
Effective Transitions				
Nursing Home Low Care Needs	9	6	34	2
Home Health Hospital Admissions	10	1	40	0
Nursing Home Hospital Admissions	20	2	26	3
Burdensome Transitions	29	4	18	0
Long Nursing Home Stays	35	1	15	0
Transitions Back to Community	5	21	25	0

Source: State Long-Term Services and Supports Scorecard, 2017.

The new #1 ranked state is Washington, but even top-ranked states can improve performance.

Washington and Minnesota have ranked as the top 2 states in every *Scorecard*. In the previous two *Scorecards*, Minnesota was ranked #1, with Washington #2. In this third *Scorecard*, Washington edges out Minnesota for the top slot, followed by Vermont, Oregon, and Alaska.

The three *Scorecards* all have somewhat different methodologies and indicator sets, due primarily to changes in data availability. Ranks are not directly comparable between years, but the results across all three editions of the *Scorecard* indicate that Washington and Minnesota are consistently leading the pack.

Despite this progress, all of the states-including those at the top-can improve on one or more of the five dimensions of performance.

	Exhibit 4	Top Five States a	and Improvements	Needed
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Rank	State	Improvement Needed	
1	Washington	#15 in Quality of Life and Quality of Care	
2	Minnesota	#19 in Effective Transitions	
3	Vermont	#19 in Quality of Life and Quality of Care	
4	Overen	#20 in Affordability and Access	
4	Oregon	#27 in Quality of Life and Quality of Care	
5	Alaska	#23 in Affordability and Access	

Source: State Long-Term Services and Supports Scorecard, 2017.

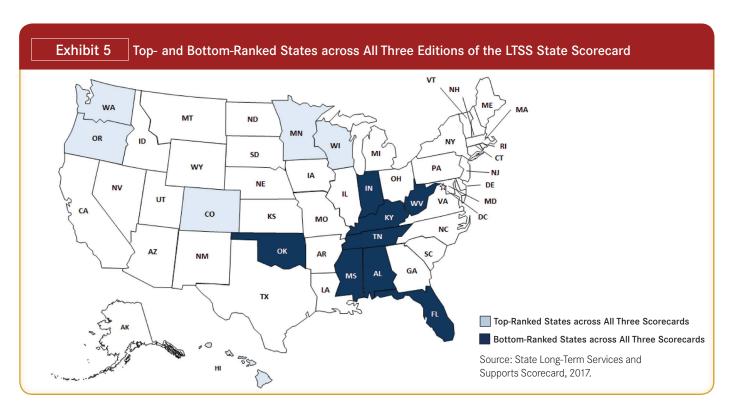
The states with the greatest improvement are Tennessee and New York.

These are the only two states that improved significantly on more than half of the indicators for which performance could be tracked over time. Tennessee improved on 13 of 23 such indicators, and New York on 12 out of the 23.

Despite these improvements, the overall ranking of New York went up from #25 in the 2014 *Scorecard* to #20, and Tennessee increased only from #48 to #47. The main reason for this is that LTSS system performance varies dramatically between states. Even the most-improved states must significantly pick up the pace of change to achieve the level of performance demonstrated by Washington, Minnesota, and other high-performing states.

Top- and bottom-ranked states generally have stayed the same over time.

Washington, Minnesota, Oregon, Wisconsin, Hawaii, and Colorado have stayed in the top 10 across all three editions of the *Scorecard*. Indiana, Kentucky, Alabama, Mississippi, Tennessee, Florida, West Virginia, and Oklahoma have remained in the bottom 10 across the three *Scorecards*. Geographically, the high-performing states are spread throughout the Pacific, West, and Upper Midwest while the poor-performing states are concentrated in the South.



States showed the most progress in five areas:

Inappropriate Antipsychotic Use. Almost all states (48) significantly reduced the use of antipsychotic medications that are given "off label" for nursing home residents who do not have the appropriate conditions for their use. Although these are positive results, antipsychotics are still potentially prescribed inappropriately to more than one out of six nursing home residents.

Person- and Family-Centered Care. Most states (42) improved significantly on this composite measure—a positive signal, recognizing that family caregivers provide the majority of LTSS nationwide. This indicator looks at whether:

- Family caregivers are assessed for their own needs;
- States have adopted spousal impoverishment provisions in Medicaid home- and community-based services; and
- States have enacted the Caregiver Advise, Record, and Enable (CARE) Act to notify the family caregiver before the person is discharged from the hospital and to instruct the caregiver on how to perform follow-up medical/nursing tasks.

Most of the progress has been around passage of the CARE Act and caregiver assessments—that is, asking questions of the family member about his or her own health and well-being and any services or support he or she may need to be better prepared for caregiving. At the time of writing, 35 states and territories⁴ had passed the CARE Act. Since 2013, 15 additional states implemented family caregiver assessments, bringing the total to 33 states. However, only 7 states permit a spouse who lives in the community to keep the maximum Medicaid amount of income and assets per month allowable under federal guidelines.

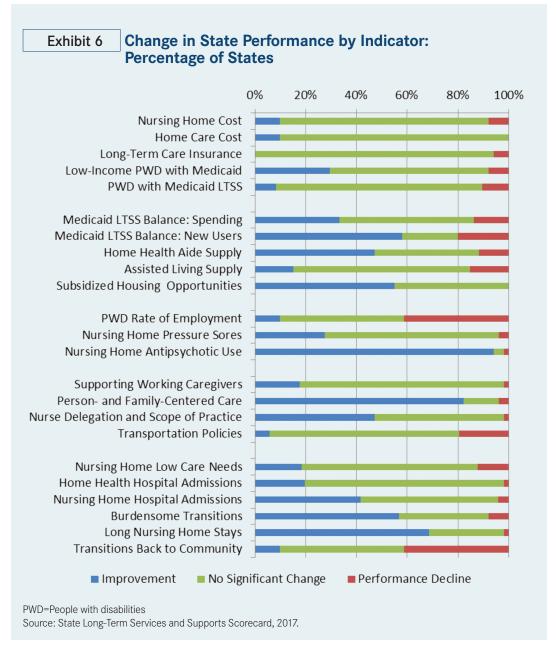
Long-Term Nursing Home Stays. Most people who leave nursing homes do so in the first few weeks of admission. Once individuals stay in a nursing home for 100 days or longer, they are likely to become permanently institutionalized. About two-thirds of states (35) improved significantly in reducing the percentage of long-term nursing home stays of Medicare beneficiaries that last 100 days or more. There is significant variation between states, ranging from 11 percent of people entering nursing homes in the top 5 states to 27 percent in the bottom 5 states.

New Medicaid Beneficiaries First Receiving Home- and Community-Based Services. Because many people who enter nursing homes never return home, it is important for state Medicaid programs to provide LTSS to beneficiaries first in their homes and communities if possible, rather than waiting until they go into nursing homes. More than half of the states (29) showed significant improvement in the percentage of new LTSS users who first received services in the community. The 8 states with the greatest improvement were Montana, Pennsylvania, Maryland, Iowa, Delaware, Louisiana, Vermont, and Nebraska. However, 30 percent of new Medicaid beneficiaries first receive services in their homes and communities in the bottom 5 states compared with 80 percent in the top 5 states.

Nursing Home Residents with a Burdensome Transition at the End of Life. One out of four nursing home residents was hospitalized at least once at the end of his or her life in 2013. While more work needs to be done, more than half of the states (29) made significant improvements in reducing potentially burdensome transitions for people who die in nursing homes. The top-performing states are Alaska, Idaho, Vermont, Wyoming, and Hawaii. Louisiana improved the most, with a 14 percentage point reduction.

Because many people who enter nursing homes never return home, it is important to provide LTSS to Medicaid beneficiaries first in their homes and communities if possible.

^{4.} In addition to the 32 states and Washington, DC (see exhibit A16), that have passed the CARE Act as of February 28, 2017, it has also been enacted in Puerto Rico and the Virgin Islands.



States showed a significant performance decline in two areas:

Employment for Working-Age People with Disabilities. Jobs bring income and meaning to peoples' lives. Adults with disabilities are much less likely to be employed than people without disabilities. Even among the top-ranked states in this area (Nevada, Rhode Island, Wyoming, West Virginia, and Oregon), the employment rate was just one-third of the employment rate for all working-age adults.

Long-Stay Nursing Home Residents Transitioning Back to the Community. State and federal initiatives have aimed to help long-stay nursing home residents of 90 or more days move back into the community. The top 5 states were Utah, Oregon, Washington, Arizona, and Idaho, in which an average of 12 percent of long-stay nursing home residents transitioned back to the community.

By contrast, the average rate of transitions was just 5 percent in the bottom 5 states. Since the last *Scorecard*, 21 states have seen a significant decline in the rate of these transitions.

There are no national, uniform measures of quality in homeand community-based services across the states.

Millions of people receive services at home or in communities, but little is known about their quality of care or quality of life. Although many efforts to identify, propose, and develop consistent quality measures are ongoing, there is no uniform, consistent, and reliable source of data across all states for homeand community-based quality.

The quality dimension in this year's *Scorecard* is down to just three measures due to discontinuation of past measures and unreliability of data for others. Remaining measures include two for nursing homes and one for the employment rate of people with disabilities. With these limitations, the dimension is given only half the weight as the other dimensions in calculating overall LTSS performance.

More affordable and accessible housing and transportation are needed to help people remain in their homes and communities.

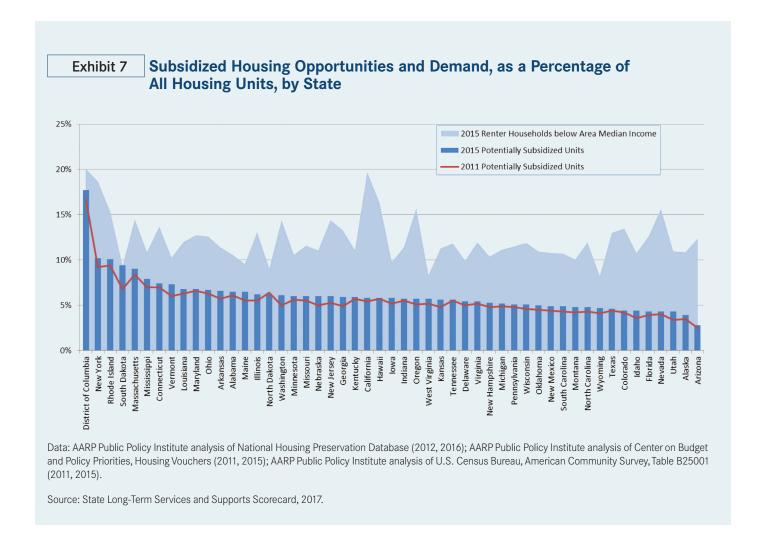
Lack of access to affordable housing and transportation options are substantial barriers to being able to live in the community. For the first time, this *Scorecard* has housing and transportation measures.

Subsidized Housing Opportunities. This new measure captures the total amount of subsidized housing opportunities—including Low-Income Housing Tax Credits, HOME funds, Housing Choice Vouchers, and loans and subsidies—divided by the total number of housing units in a state. Since 2011, more than half of the states (28) significantly increased the percentage of housing units that can potentially be subsidized. The top performers were the District of Columbia, New York, Rhode Island, South Dakota, and Massachusetts. Despite the significant increase in 28 states, there is still an affordable housing crisis in our country.

The total number of subsidized housing opportunities has risen since 2011 due to slow growth of the overall housing market and the increased use of vouchers, tax credits, and other financing mechanisms. However, it still falls short of current and future needs. Nationally, there are more than 18 million renters (most of whom are cost-burdened by housing) and fewer than 8 million potentially subsidized units.

For people with substantial LTSS needs, simply having a relatively high number of affordable units is not enough. Housing also needs to be accessible to meet the needs of people with disabilities.

Millions of people receive services at home and in communities, but little is known about the quality.



Transportation Policies. Access to transportation is one of the biggest barriers for people who do not drive but want to live at home and in the community. Access to transportation ensures that people with LTSS needs are able to get to medical appointments, shop for food and other necessities, and see friends and family.

When an adult is no longer able to drive, it is life changing not only for the individual but also for the family caregiver. In addition to other tasks, family caregivers provide transportation for a range of activities that help family members remain independent for as long as possible. Therefore, this transportation indicator falls into the family caregiver dimension. This composite indicator examines state transportation policies regarding:

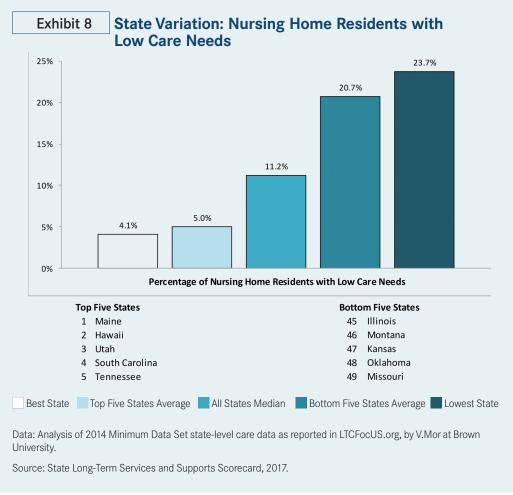
- Expanding volunteer driver programs through encouraging volunteerism and removing regulatory barriers;
- Increasing access to nonmedical, community transportation for low-income Medicaid beneficiaries with disabilities; and
- Coordinating community transportation at all levels of government through human services councils that work together to reduce duplication and better serve the community.

The top-performing states are Colorado, South Carolina, California, Massachusetts, and Washington.

Where you live matters because states vary greatly in how long-term services and supports are provided.

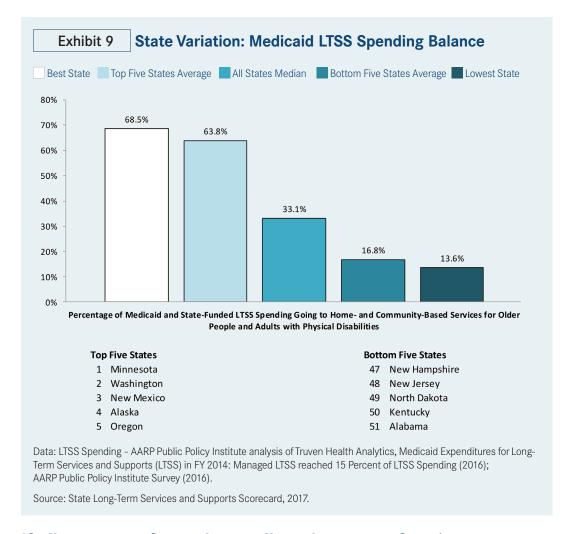
Disparities across the states persist between the top- and bottom-ranked states for many measures. Here are just two examples:

Nursing Home Residents with Low Care Needs. States having a high proportion of nursing home residents with low care needs suggests that more must be done to transition these individuals to less-restrictive settings or divert them from institutional care. In the top 5 states, 5 percent of nursing home residents had low care needs compared with the bottom 5 states, in which 21 percent of residents—four times as many—had low care needs.



Medicaid LTSS Balance. Despite overwhelming preference among people with disabilities to receive services in their homes and communities, the majority of Medicaid LTSS spending for older people and adults with physical disabilities goes to nursing homes. The median state spent twice as much on nursing homes as on home- and community-based services, and only 10 states spent more on home- and community-based services than on nursing homes. States varied considerably on this measure: the percentage of funding going to home- and community-based services in the top-ranking state (Minnesota, 69 percent) was almost five times that of the bottom-ranking state (Alabama, 14 percent).

Only 10 states spent more on home-and community-based services than on nursing homes for older people and adults with physical disabilities.



If all states performed as well as the top-performing state or even an average of the top five states, millions of people with self-care needs would have additional options and support.

Exhibit 10 shows how many more people with LTSS needs would be served if all states performed as well as the top states for just two indicators: Home Health Aide Supply and Low-Income People with Disabilities with Medicaid.

Exhibit 10 National Cumulative Impact if All States Achieved Top
State Rates

If All States Improved Their Performance to the Level of the Best-Performing States:			
	Improving to Top- Ranked State	Improving to Average of Top Five States	
Home Health Aide Supply	1,504,872	964,534	More home health and personal care aides would be available to provide care in the community.
Low-Income People with Disabilities with Medicaid	1,300,264	838,126	More low- or moderate-income (< 250% poverty) adults ages 21+ with disabilities would have Medicaid coverage.

Reflections

Even where progress is being made, the current pace of change is often insufficient.

Although most states have experienced modest improvement over time, the pace of change is not keeping up with demographic demands. For instance, the shortage of direct care workers is not meeting the demands of people with disabilities and older adults who are primarily living at home and in the community. Although nearly half of the states (24) have significantly increased the number of home health and personal care aides, at the current national rate of change it would take 34 years for the average of the bottom 5 states (11 aides per 100 adults with disabilities) to reach the level of the median state today (19 aides per 100), and another 34 years for the median state to reach the level of the average of top 5 states (33 aides per 100). To reach these benchmarks by the year 2026, when the baby boomers begin to turn 80, the age that starts the period of peak need for LTSS, the rate of improvement must triple.

States have made steady but slow progress in increasing the proportion of Medicaid spending going toward home- and community-based services from 39 percent in 2011 to 41 percent in 2014, the most current year of available data across the states. At the current national rate of change, it would take 36 years for the average of the bottom 5 states (17 percent toward home- and community-based services) to reach the level of the median state today (33 percent), and another 51 years for the median state to reach the level of the average of the top 5 states (64 percent). To reach these benchmarks by the year 2026, the rate of improvement must triple and quadruple, respectively.

Measurement, federal and state initiatives, and stakeholder engagement can accelerate the pace of change.

The measures that showed the most improvement came in areas in which a range of stakeholders as well as federal and state agencies have worked together to improve care and access to needed services. A reason for the improvement in antipsychotic use in nursing homes, for example, was that the US Centers for Medicare & Medicaid Services partnered with other federal and state agencies, state coalitions, nursing homes, and consumer groups to reduce its use, monitor progress, and report the results publicly.

Another example is around person- and family-centered practices that support family caregivers. Consumer and family caregiver engagement as well as national and state attention led to more states assessing family caregivers for their own needs and enacting the CARE Act to support individuals upon discharge from a hospital.

Medicaid is a major driver of change.

States with Medicaid programs that provide coverage for more low- to middle-income Americans with disabilities as well as a greater balance of home- and community-based services have higher-performing LTSS systems.

Because Medicaid is the largest public payer for LTSS, it can stimulate market change. In the absence of a broad public program to ensure access to affordable LTSS, Medicaid remains the program of last resort for middle-income Americans. However, most people who need LTSS are not on Medicaid; still even those who are not can benefit from the LTSS infrastructure that develops around strong Medicaid programs.

State officials have great flexibility regarding Medicaid policies in the current environment, and this determines the types of LTSS offered and the settings in which they are provided. They establish the eligibility standards for Medicaid coverage. Their decisions can directly affect access to home- and community-based services and choice of services and providers.

Consistent and reliable quality data-particularly in homeand community-based care-is imperative.

A high-performing system should focus on outcomes and help individuals experience quality of life and satisfaction with services. Over time, the delivery of LTSS has shifted toward more home- and community-based services. However, the lack of nationally comparable sources of quality data on homeand community-based services is the largest data gap in the *Scorecard*.

While states are making progress, it is time to accelerate these positive gains to meet the growing demand for highquality LTSS in all communities.

As people with disabilities live longer and baby boomers grow older, the need for LTSS will increase significantly, both in numbers and as a percentage of the US population. Older adults and individuals with disabilities want to be independent, have control over their own decisions, and receive assistance to maximize their functioning and independence in their own homes and communities. However, the experience of people with LTSS needs and their families varies widely depending on where they live. Every state—even the topranked state—has room to improve.

State officials have a variety of legislative, regulatory, budgetary, and programmatic levers to drive needed reforms. State administrators, stakeholders, and others can use this information about their state's performance to pick up the pace on creating and sustaining a high-performing system of care for older people and adults with disabilities, and their family caregivers who assist them.

A high-performing system should focus on outcomes and help individuals experience quality of life and satisfaction with services.

How Does Your State Rank on Each Measure?

Full results, methodology, and more are on the LTSS State *Scorecard* interactive website. Go to http://www.longtermscorecard.org for the following:

1. State Data and Fact Sheets

Get state-specific data, compare state performance or rankings, and download fact sheets for each state.

2. Maps, Graphics, and Tools

Customize the data with easy-to-use maps and tools.

3. Infographics

Visualize the findings in each dimension.

4. Data Documentation

Understand the data sources and methodology.

5. Videos

Watch the impact of the *Scorecard* and programs for people with LTSS needs.

6. Promising Practices and Toolkits

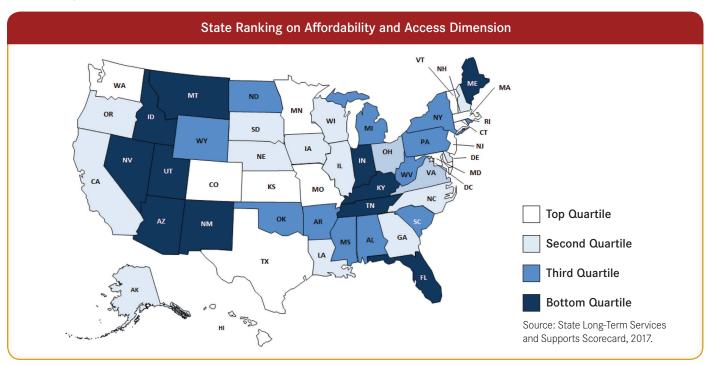
Download papers that provide concrete examples of programs and policies from states that have performed well in a specific area; each paper includes a toolkit of resources and contacts for states to learn more and replicate these practices.

7. Emerging Innovations

Learn what LTSS innovations states are developing, piloting, or testing.

Affordability and Access

This dimension contains six indicators. These indicators for measuring affordability and access and the key findings are listed below.



INDICATOR1: Nursing Home Cost

KEY FINDING. The cost of nursing home care—more than \$90,000 a year—is far out of reach for most middle-income Americans in every state.
With this high cost of care over time, people too often "spend down" their own resources and subsequently need to rely on Medicaid to cover their care.

INDICATOR 2: Home Care Cost

• KEY FINDING. Although home care is more affordable than nursing home care, its cost—more than \$30,000 a year for a home health aide for 30 hours a week at \$20 per hour—would still consume nearly the entire income of the typical older middle-income family in most states. For the same cost as a nursing home, one could pay for three people to receive 30 hours per week of home care, which is a typical amount.



INDICATOR3: Long-Term Care Insurance

• KEY FINDING. Despite the rising demand for LTSS, relatively few adults have private long-term care insurance. There was a decline of 222,298 policies (3 percent) in effect between 2012 and 2015. The complexity of private long-term care insurance and concerns about rising premiums are just some factors affecting working families' abilities to plan and act for their future.

INDICATOR 4: Low-Income Adults with Disabilities Receiving Medicaid

• KEY FINDING. Nearly a third (15) of the states significantly increased the number of low-income adults with disabilities on Medicaid, largely because of Medicaid expansion under the Affordable Care Act. States range from a high of 78 percent (District of Columbia) to a low of 39 percent (Oklahoma).

INDICATOR 5: Adults with Disabilities with Medicaid Coverage of Long-Term Services and Supports

• KEY FINDING. In the 5 highest-performing states, there was an average of 94 Medicaid LTSS participants for every 100 people with self-care

disabilities. The bottom 5 states had an average of only 28 LTSS users for every 100 people with self-care disabilities—more than a threefold difference.

INDICATOR 6: Aging and Disability Resource Centers or "No Wrong Door" Functions

• KEY FINDING. All states have "one-stop-shopping" models to help consumers and their families

access public and private services regardless of which organization they contact. However, the operations and functions of each organization in a "no wrong door" model vary greatly, with improvements needed in streamlining eligibility for programs, moving toward person- and family-centered care, and increasing public outreach (so consumers know about these important information resources).

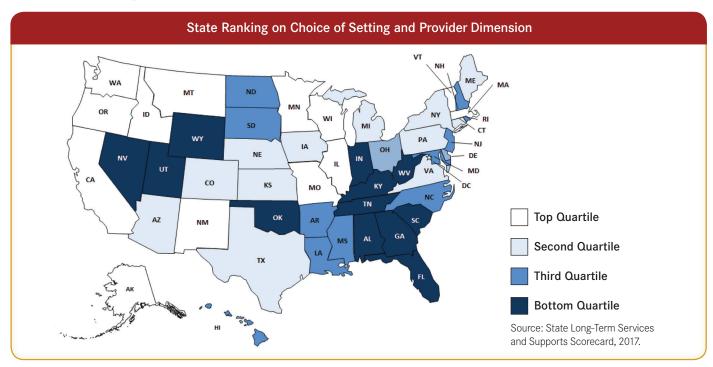
Picking Up the Pace for Affordability and Access

Given these findings, the pace of change must pick up through the following:

- **Financing** that makes services more affordable to individuals and society—with shared responsibility among the government and private sectors and individuals—because LTSS is everybody's business
- A strong safety net so Medicaid can cover social services for low-income adults with disabilities
- A "no wrong door" system in which consumers of all incomes and their families can find information about a broad array of services and how to access them

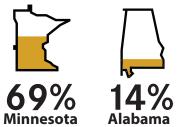
Choice of Setting and Provider

This dimension contains six indicators. These indicators for measuring choice of setting and provider and the key findings are listed below.



INDICATOR 1: Medicaid and State Spending on Home- and Community-Based Services

• KEY FINDING. One-third (17) of the states significantly improved the balance of Medicaid and state LTSS spending for older people and adults with disabilities toward more home- and community-based services from 2011 to 2014. However, the range is very wide, from a high of 69 percent of spending going to home- and community-based services (Minnesota) to a low of 14 percent (Alabama).



 KEY FINDING. Most states provide some non-Medicaid, state-only funding for home- and community-based services. The funding is typically very small and limited compared with Medicaid, but can be significant in some states. State-only funding can be used to reach the near poor—who may not yet qualify for Medicaid—to prevent impoverishment and more expensive nursing home care.

INDICATOR 2: New Medicaid Beneficiaries Receiving Home- and Community-Based Services

• KEY FINDING. More than half (29) of the states significantly improved in the percentage of Medicaid beneficiaries first receiving services in home- and community-based settings rather than in nursing homes. However, 30 percent of new Medicaid beneficiaries first receive services in their homes and communities in the bottom 5 states compared with 80 percent in the top 5 states.

INDICATOR 3: Participant-Directed Services

• KEY FINDING. People who pay for LTSS privately hire the person who provides their services, but Medicaid beneficiaries have this option only if they live in certain states. California leads the nation, while several states have no or almost no participant-directed options.

INDICATOR 4: Home Health and Personal Care Aides

 KEY FINDING. Nearly half (24) of the states have significantly increased the supply of direct care workers. The increase will begin to help meet the projected demand for their services, but low pay, lack of benefits and training, and high turnover plague this industry.

INDICATOR 5: Assisted Living and Residential Care

• KEY FINDING. The number of assisted living units ranges greatly, from a high of 121 units per 1,000 people ages 75+ (Oregon) to a low of 20

units (Louisiana). Although some state Medicaid programs pay for assisted living, it is generally an option for older adults who can afford to pay privately. The costs for assisted living vary but can average over \$40,000 a year.

INDICATOR 6 Subsidized Housing Opportunities

KEY FINDING. Nationally, there are more than 18 million renters (most of whom are cost-burdened by housing) and fewer than 8 million potentially subsidized units. While the supply of subsidized units and/or vouchers increased significantly in 28 states, demand continues to overwhelm the supply.

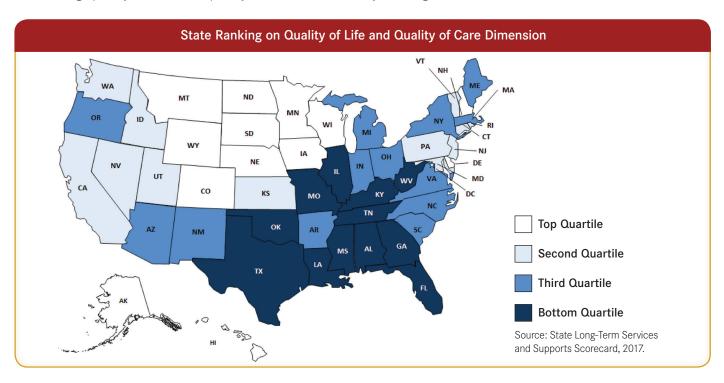
Picking Up the Pace in Choice of Setting and Provider

Because of these findings, the pace of change must pick up through the following:

- A greater proportion of Medicaid and state-only funding for home- and community-based services, because, on average, funding can pay for three people in home- and community-based care for the cost of one person in a nursing home
- More new Medicaid beneficiaries who first receive LTSS in the community, because it is more difficult to return home after a nursing home admission
- Participant-directed services to enable consumers and their families to decide how, when, and by whom care is provided—for example, by allowing consumers to manage their own publicly funded budgets for care, or paying family caregivers with public funding
- Access to home care workers so consumers with disabilities can live in their homes and communities
- Residential care options for when living at home is no longer viable
- Affordable housing by providing subsidies for lower-income individuals and investing in low-income rental units, especially for people with LTSS needs, who typically have lower incomes and higher costs for health care and supportive services

DIMENSION 3 Quality of Life and Quality of Care

This dimension contains only three indicators because there are no uniform, national quality measures in home- and community-based care. This dearth is the biggest data gap in LTSS. These indicators for measuring quality of life and quality of care and the key findings are listed below.



INDICATOR 1: Rate of Employment for Working-Age Adults with Disabilities

 KEY FINDING. Jobs can bring quality of life and meaning to our lives; however, only about one out of five working-age adults with disabilities who need assistance with personal care has a job, and 21 states had significant reductions in rates of employment in recent years.



INDICATOR 2: Nursing Home Residents with Pressure Sores

 KEY FINDING. Three percent to 9 percent of nursing homes residents, depending on the state, have pressure sores—areas of damaged skin resulting from staying in one position for too long. While these percentages sound low, tens of thousands of nursing home residents are suffering from these painful and preventable conditions, which can lead to serious infections.

INDICATOR 3: Potentially Inappropriate Use of Antipsychotic Medications for Nursing Home Residents

• KEY FINDING. Although nearly all states (48) significantly reduced this off-label use from 2013 to 2015, more than one out of six long-stay nursing home residents without a psychiatric diagnosis are sedated with antipsychotic medications.



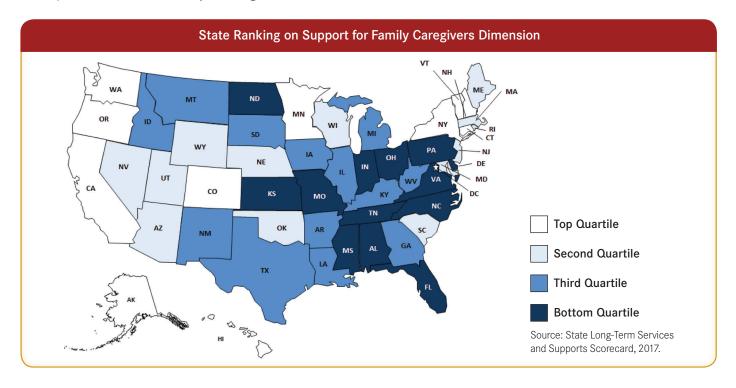
Picking Up the Pace in Quality of Life and Quality of Care

Given these findings, the pace of change must pick up through the following:

- Measurement of quality of care and outcomes, because most people with self-care needs live at home or in the community, but without national measures or evidence-based outcomes, little is known about their quality of care or quality of life
- Initiatives to employ working-age adults with disabilities, because their rates of employment are far below those without disabilities
- Enforcement of quality in nursing homes, with particular attention to:
 - Preventing pressure sores, because no one should have to suffer from this preventable condition, and
 - Ending inappropriate use of antipsychotic medications, which should never be administered in order to sedate nursing home residents with dementia; medical professionals should be held accountable for this inappropriate prescribing

DIMENSION 4 Support for Family Caregivers

This dimension contains policies that support family caregivers in four main areas: Support for Working Family Caregivers, Person- and Family-Centered Care, Nurse Delegation and Scope of Practice, and Transportation Policies. Key findings in each of the four areas are listed below.



INDICATOR1: Support for Working Family Caregivers

This indicator measures performance on four types of policies: (a) family medical leave, (b) mandatory paid family leave and sick days, (c) unemployment insurance, and (d) policies that protect family caregivers from employment discrimination.

- KEY FINDING. What employed family caregivers often need is to take time off from work to care for their family members. Since 2014, 4 states (California, Massachusetts, Oregon, and Vermont) enacted legislation and local jurisdictions within 2 states (Maryland and Pennsylvania) passed ordinances to mandate paid sick days. In total, 11 states have statewide legislation or local ordinances requiring paid sick days.
- KEY FINDING. States can go beyond the federal Family and Medical Leave Act (FMLA)—which provides for up to 12 weeks of *unpaid* leave for certain employees per year—by covering family members who are outside of the scope of the federal law, such as a grandparent, in-law, or stepparent; extending the length of the leave; and

having it apply to smaller employers. Nearly onefourth of states (12) have exceeded FMLA's floor of protections, with the District of Columbia leading the nation with the most progressive coverage.

- KEY FINDING. Half of the states (25) provide temporary financial assistance to family caregivers through state unemployment insurance programs if there is "good cause" for job loss due to an illness or disability of a member of the individual's immediate family.
- KEY FINDING. Only 4 states (Connecticut, Delaware, District of Columbia, and Minnesota) specifically protect family caregivers from discrimination as a protected classification under law.

INDICATOR 2: Person- and Family-Centered Care

This indicator measures performance on three types of policies: (a) state policies on financial protection for spouses of Medicaid beneficiaries who receive home- and community-based services, (b) assessment of family caregivers' own needs, and (c) enactment of the CARE Act.

- KEY FINDING. Policies differ among states on the financial protections for people who are married to Medicaid beneficiaries receiving home- and community-based services. Only 7 states permit the spouse who lives in the community to keep the maximum Medicaid amount of income and assets per month allowable under federal guidelines. These policies help to prevent these spouses from bankrupting themselves.
- KEY FINDING. An increasing number of states
 (15 additional states since 2013) are conducting assessments of family caregivers about their own health and well-being when their family members are assessed for LTSS, bringing the total to 33 states. However, most of these family caregiver assessments occur in the smaller family caregiver support programs rather than in the larger Medicaid programs.
- KEY FINDING. At the time of writing, 35 states and territories⁵ have enacted the CARE Act to notify the family caregiver before the patient is discharged from the hospital and to teach the caregiver how to perform complex care tasks for the family member.

INDICATOR 3: Nurse Delegation and Scope of Practice

This indicator measures performance on two types of policies: (a) number of health maintenance tasks that can be delegated to direct care workers, and (b) nurse practitioner scope of practice.

- KEY FINDING. State nurse practice acts determine which tasks—such as administering medications—a registered nurse (RN) can delegate to an aide to provide; this practice is known as "nurse delegation." Nearly half of the states (24) have significantly improved, with about one-third (16) allowing RNs to delegate a full range of a sample set of 16 tasks to aides. When states restrict RNs from delegating tasks to aides, it can result in more expensive care and increased family caregiver stress, especially for employed family caregivers, who may have to leave work to perform these routine tasks.
- KEY FINDING. Nurse practitioners in 21 states are allowed to fully and independently work as defined by their education and certification to treat a wide range of health and chronic conditions.

 KEY FINDING. Nurse delegation and scope of practice are strongly related, with 11 states delegating all 16 sample tasks and permitting nurse practitioners to have a full scope of practice.

INDICATOR 4: Transportation Policies

This new indicator is constructed with three measures: (a) volunteer driver policies, (b) statewide human services transportation coordinating councils, and (c) Medicaid nonmedical transportation.

- KEY FINDING. Transportation is one of the biggest obstacles for people who no longer drive but want to live at home and in the community. Transportation is the single service most frequently provided by family caregivers.
- KEY FINDING. States can expand the number of volunteer drivers through public policy, but few do. Only 6 states provide protection from unreasonable or unfair increases in liability or insurance rates, 8 states exempt volunteer drivers from taxi "livery" laws, and 5 states facilitate private investment in volunteer driver programs.
- KEY FINDING. Eighteen states have councils that coordinate specialized transportation planning and service delivery across all agencies that fund transportation. Half of the states (25) had established councils, but seven state councils were repealed in recent years or are now defunct or inactive.
- KEY FINDING. Medicaid funding for nonmedical transportation in the community is nonexistent in some states and in other states is very restricted and targeted to specific populations with mobility needs.

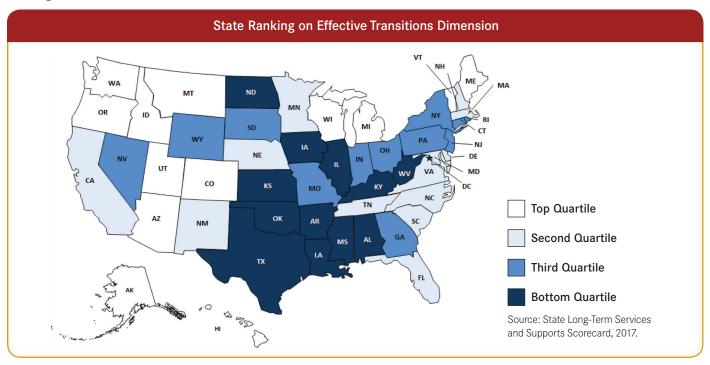
Picking Up the Pace for Family Caregiver Support

Given these findings, the pace of change must pick up through the following:

- More recognition and support for family caregivers so they can provide this care without
 experiencing caregiver burnout, need to quit their jobs, or jeopardize their own health and
 economic security
- Employment supports because many family caregivers are employed when providing care by:
 - Having paid family leave and sick days since many caregivers cannot afford to miss a
 paycheck and do not have paid sick days;
 - Having unemployment insurance for family caregivers if they lose their jobs due to a family member's illness or disability; and
 - Defending family caregivers from employment discrimination as a protected classification under law
- Financial protection from spouses having to impoverish themselves when their husband or wife receives Medicaid home- and community-based services
- Family caregiver assessments for their own needs, because many caregivers endure physical and emotional stress
- **Instruction for family caregivers** to better enable them to provide increasingly complex medical/nursing tasks, especially upon discharge from a hospital
- Removal of workforce barriers by allowing aides to perform routine tasks under nurse supervision that family caregivers are often called on to perform and by allowing nurse practitioners to fully care for people according to their qualifications and licensure
- **Greater access to affordable, timely, convenient transportation** for people who do not drive and have mobility limitations by:
 - Increasing the number of volunteer drivers by encouraging investment in volunteer driver programs and removing regulatory barriers;
 - Coordinating community transportation through human services councils to work together, reduce duplication, and better meet the needs of the community; and
 - Expanding access to nonmedical, community transportation for low-income Medicaid beneficiaries with disabilities

Effective Transitions

This dimension contains six indicators. These indicators for measuring effective transitions and the key findings are listed below.



INDICATOR 1: Long-Term Nursing Home Residents with Low Care Needs

 KEY FINDING. These residents can generally manage their daily needs in less-restrictive settings after a short-term stay. Therefore, in the bottom 5 states, as many as one out of five nursing home residents with low care needs could potentially transition to noninstitutional options.

INDICATOR 2: Home Health Patients with a Hospital Admission

 KEY FINDING. Hospital admissions among patients receiving home health services declined by 7 percent since 2012, but roughly one out of four home health patients, on average, was hospitalized.

One out of four nursing home residents at the end of life, on average, experienced potentially unnecessary and costly hospitalizations.

INDICATOR 3: Nursing Home Residents with a Hospital Admission

• KEY FINDING. Moving back and forth from nursing homes to hospitals is disruptive and costly. Twenty states significantly improved in reducing hospital admission rates of nursing home residents, but states range from a low of 5 percent (Hawaii) to a high of 28 percent (Mississippi)—almost six times as many.

INDICATOR 4: Nursing Home Residents with a Burdensome Transition at the End of Life

 KEY FINDING. Although more than half of the states (29) have made significant improvements in reducing burdensome transitions for people who die in a nursing home, one out of four nursing home residents at the end of life, on average, experienced potentially unnecessary and costly hospitalizations.

INDICATOR 5: Long Nursing Home Stays

• KEY FINDING. Most Medicare beneficiaries discharged from a hospital to a nursing home can expect to return to the community within a few weeks. However, anywhere from 9 percent (Arizona) to 35 percent (Louisiana) stay in the nursing home 100 days or more, usually leading to long-term institutionalization.

INDICATOR 6: Long-Term Nursing Home Residents Transitioning Back to Community

• KEY FINDING. Many residents who have been in a nursing home for 90 days or more want to move back into the community, yet most never do; the low is 4 percent (Iowa) and the high is 15 percent (Utah).

Picking Up the Pace for Effective Transitions

Because of these findings, the pace of change must pick up through the following:

- **Improving care transitions** when people move between one care setting or provider to another
- Reducing the reliance on nursing homes by:
 - Diverting people from nursing home care either before admission or shortly thereafter, so
 they can live at home or in a place that feels like home; and
 - Creating or expanding nursing home transition programs to move people out of nursing homes if they have a desire to do so
- Preventing unnecessary hospitalizations by:
 - Reducing hospital readmissions among high-risk Medicare beneficiaries by averting
 hospitalizations of people in nursing homes and in home health, especially for those with
 dementia or at the end of life; and
 - Providing more home- and facility-based palliative care to give options beyond overly aggressive treatment at the end of life

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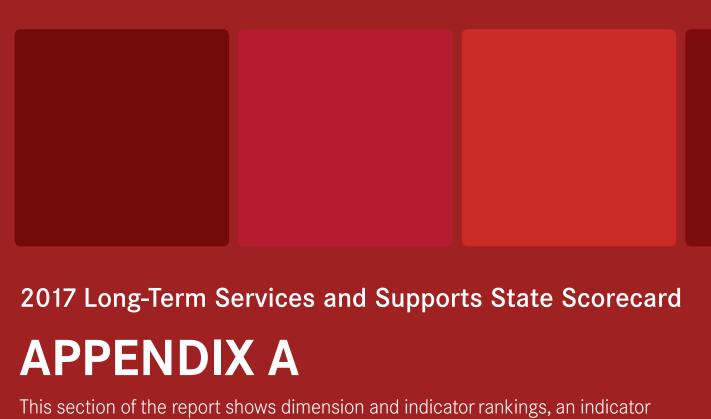
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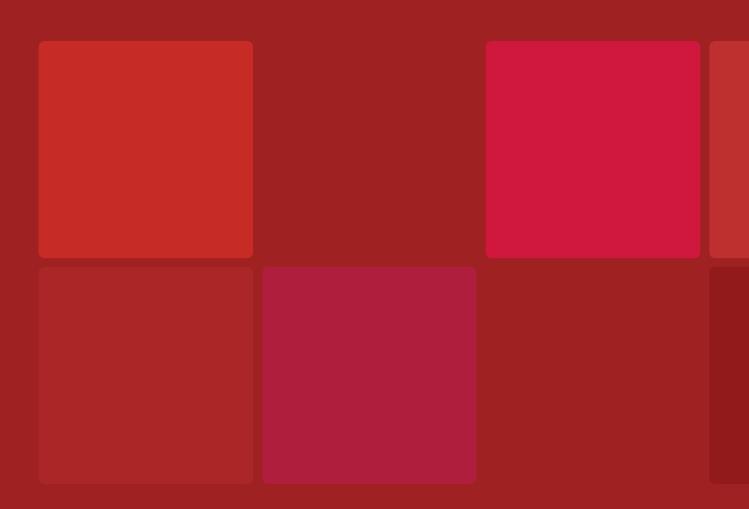
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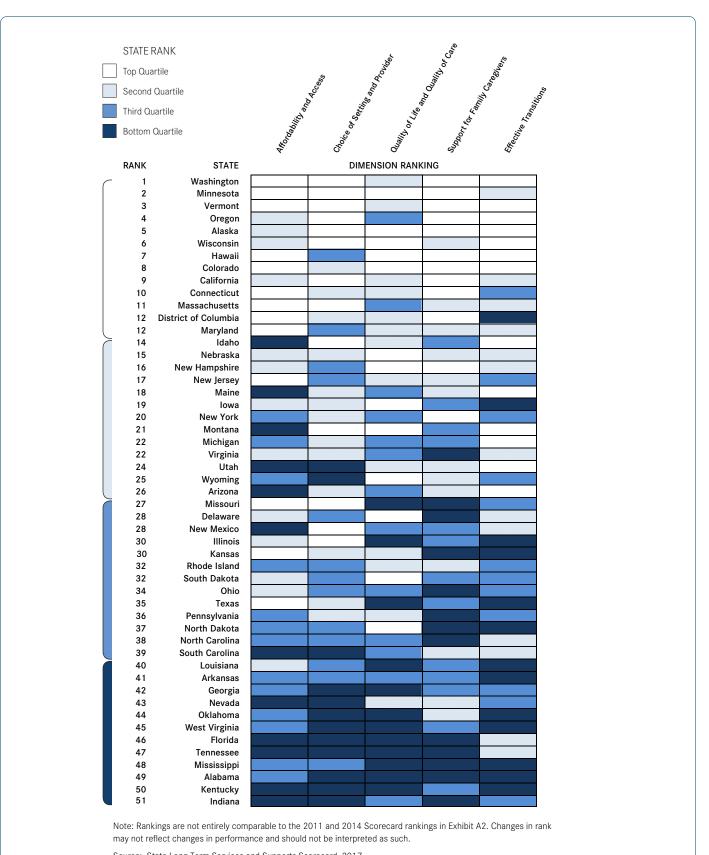
This section of the report shows dimension and indicator rankings, an indicator list, and data tables. For additional appendices and data visualizations, please go to the *Scorecard* website at http://www.longtermscorecard.org.



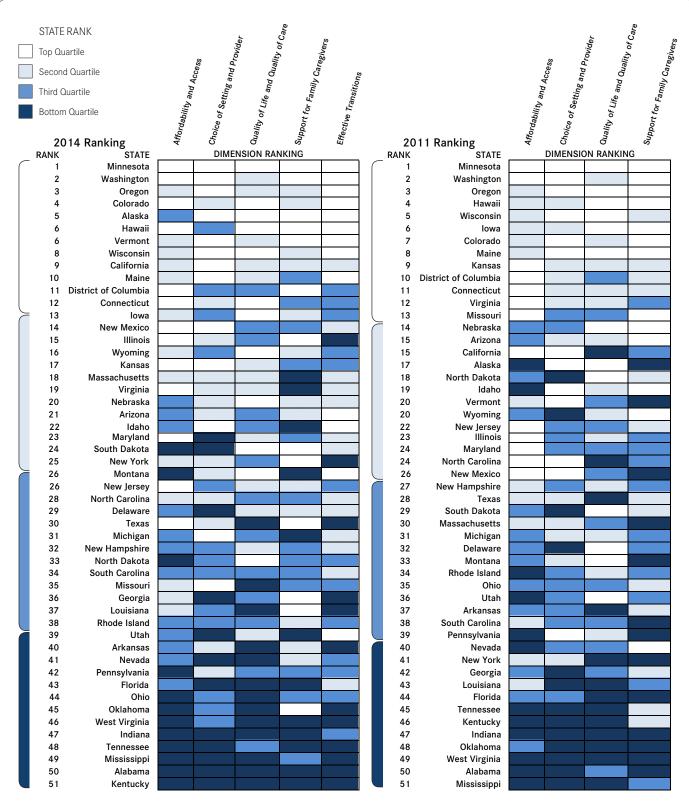
Appendix A

Exhibit A1	2017 State Scorecard Summary of LTSS System Performance Across Dimensions
Exhibit A2	2014 and 2011 State Scorecard Summary of LTSS System Performance Across Dimensions
Exhibit A3	List of Indicators in 2017 State Scorecard
Exhibit A4	Affordability and Access: Dimension and Indicator Ranking
Exhibit A5	Affordability and Access: Indicator Performance, Ranking, and Change
Exhibit A6	Income, Private Pay Cost, and LTSS Affordability
Exhibit A7	ADRC/NWD Functions: Composite Indicator Rank and Component Scores
Exhibit A8	Choice of Setting and Provider: Dimension and Indicator Ranking
Exhibit A9	Choice of Setting and Provider: Indicator Performance, Ranking, and Change
Exhibit A10	Choice of Setting and Provider: Subsidized Housing Units, Vouchers, and Renters with Cost Burden
Exhibit A11	Quality of Life and Quality of Care: Dimension and Indicator Ranking
Exhibit A12	Quality of Life and Quality of Care: Indicator Performance, Ranking, and Change
Exhibit A13	Support for Family Caregivers: Dimension and Indicator Ranking
Exhibit A14	Support for Family Caregivers: Indicator Performance, Ranking, and Change
Exhibit A15	Supporting Working Family Caregivers: Composite Indicator Rank, Component Scores, and Change
Exhibit A16	Person- and Family-Centered Care: Composite Indicator Rank, Component Scores, and Change
Exhibit A 17	Health Maintenance Tasks Able to be Delegated to LTSS Workers and Nurse Practitioner Scope of Practice: Rank, Component Scores, and Change
Exhibit A 18	Transportation Policies: Composite Indicator Rank, Component Scores, and Change
Exhibit A 19	Effective Transitions: Dimension and Indicator Ranking
Exhibit A20	Effective Transitions: Indicator Performance, Ranking, and Change
Exhibit A21	2017 State Ranking on LTSS System Performance by Dimension and Overall Rank
	·

2017 State Scorecard Summary of LTSS System Performance Across Dimensions



2014 and 2011 State Scorecard Summaries of LTSS System Performance Across Dimensions



Note: Because of changes in the indicator set, rankings from the 2014 and 2011 Scorecards are not entirely comparable to the current Scorecard rankings. Changes in rank may not reflect changes in performance and should not be interpreted as such.

Source: State Long-Term Services and Supports Scorecard, 2014; State Long-Term Services and Supports Scorecard, 2011.

Exhibit A3 List of Indicators in 2017 State Scorecard

Complete descriptions and references are provided at http://longtermscorecard.org

Affordability and Access Indicators

- 1. **Nursing Home Affordability** (Current Year 2015-16; Baseline Year 2012-13): Median annual nursing home private pay cost as a percentage of median household income ages 65 and older.
- 2. **Home Health Affordability** (Current Year 2015-16; Baseline Year 2012-13): Median annual home care private pay cost (based on 30 hours of care per week) as a percentage of median household income ages 65 and older.
- 3. **Long-Term Care Insurance** (Current Year 2015; Baseline Year 2012): Number of individual and group standalone and hybrid long-term care insurance policies per 1,000 people ages 40 or older in the state.
- 4. Low Income Adults with Disabilities with Medicaid (Current Year 2014-15; Baseline Year 2011-12): Percent of adults ages 21 and older with ADL disability at or below 250% of poverty receiving Medicaid or other government assistance health insurance.
- 5. **People with Disabilities with Medicaid LTSS** (Current Year 2012; Baseline Year 2010): Unduplicated count of Medicaid LTSS beneficiaries of all ages per 100 people of all ages with ADL disability.
- 6. **ADRC/NWD Functions** (Current Year 2016; Baseline Year Not Available): Aging and Disability Resource Center/No Wrong Door Functions (composite indicator, scale 0 100 percent) rates states progress toward developing a single statewide NWD system using 41 criteria across the following five areas:
 - 1. State Governance and Administration (10 criteria)
 - 2. Target Populations (5 criteria)
 - 3. Public Outreach and Coordination with Key Referral Sources (8 criteria)
 - 4. Person-Centered Counseling (9 criteria)
 - 5. Streamlined Eligibility for Public Programs (9 criteria)

Choice of Setting and Provider Indicators

- 7. Medicaid Spending on Home- and Community-Based Services (Current Year 2014; Baseline Year 2011): Percent of Medicaid and state-funded LTSS spending going to home- and community-based services for older people and adults with physical disabilities.
- 8. New Medicaid Beneficiaries Receiving Home and Community-Based Services (Current Year 2012; Baseline Year 2009): Percent of new Medicaid aged/disabled LTSS users first receiving services in the community.
- 9. **Participant Direction** (Current Year 2016; Baseline Year Not Available): Number of people receiving participant-directing services per 1,000 people (all ages) with any disability.
- 10. Home Health and Personal Care Aide Supply (Current Year 2013-15; Baseline Year 2010-12): Number of home health and personal care aides per 100 people ages 18 and older with an ADL disability.
- 11. **Assisted Living and Residential Care Supply** (Current Year 2014; Baseline Year 2010): Assisted living and residential care units per 1,000 people ages 75 and older.
- 12. **Subsidized Housing Opportunities** (Current Year 2015; Baseline Year 2011): Subsidized housing opportunities including place-based subsidized units and vouchers as a percentage of all housing units.

Quality of Life and Quality of Care Indicators

- 13. **People with Disabilities Rate of Employment** (Current Year 2014-15; Baseline Year 2011-12): Rate of employment (full or part-time) for people with an ADL disability ages 18 to 64 relative to the rate of employment for people ages 18 to 64 without an ADL disability.
- 14. Nursing Home Pressure Sores (Current Year 2015-16; Baseline Year 2013): Percent of high-risk long-stay nursing home residents impaired in bed mobility or transfer, comatose, or suffering malnutrition who have pressure sores.
- 15. **Nursing Home Use of Antipsychotic Medications** (Current Year 2015; Baseline Year 2013): Percent of long-stay nursing home residents who inappropriately receive antipsychotic medication.

Support for Family Caregivers Indicators

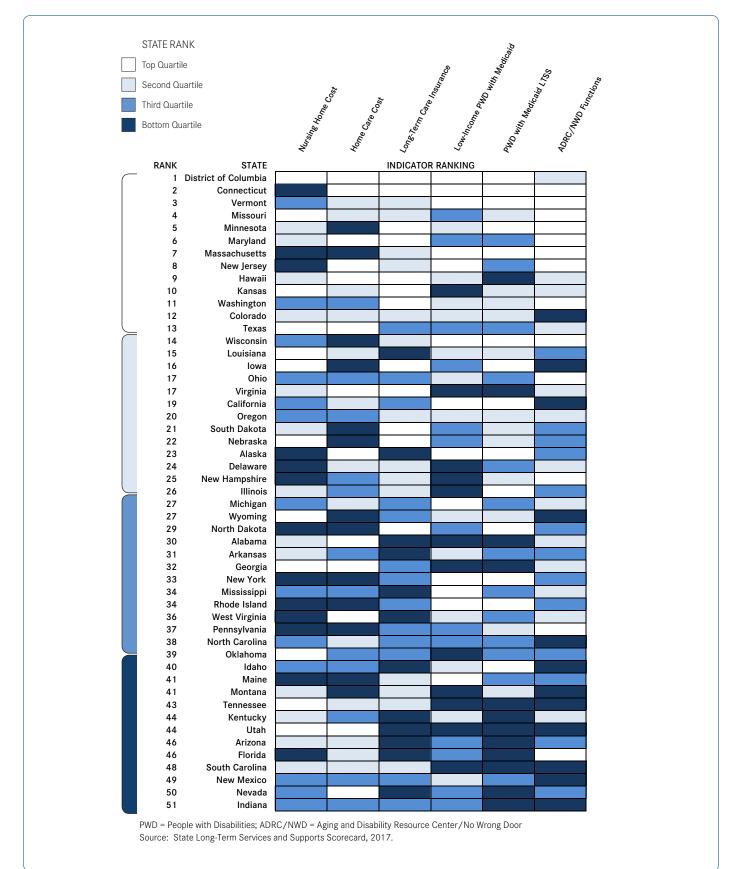
- 16. **Supporting Working Family Caregivers** (Current Year 2014-16; Baseline Year 2012-13): Supporting working family caregivers (composite indicator, total scale 0 9.0) is constructed along four components:
 - 1. Family Medical Leave (scale 0 4.0). Evaluates the extent to which states exceed the federal FMLA requirements for covered employers, covered employee eligibility, length of leave, and type of leave allowed.
 - 2. Mandatory Paid Family Leave and Sick Days (scale 0 3.0). Evaluates the extent to which states offer additional benefits beyond FMLA to family caregivers, including requirements that employers provide paid family leave and mandate the provision of paid sick days.
 - 3. **Unemployment Insurance** (scale 0 1.0). The extent to which state unemployment insurance laws or regulations address "good cause" for job loss due to an illness or disability of a member of the individual's immediate family.
 - 4. **State Policies that Protect Family Caregivers from Employment Discrimination** (scale 0 1.0). The extent to which a state (or locality) law expressly includes family responsibilities, including care provided to aging parents or ill or disabled spouses of family members, as a protected classification in the context that prohibits discrimination against employees who have family responsibilities.
- 17. **Person- and Family-Centered Care** (Current Year 2016; Baseline Year 2012-13): Person and family-centered care (composite indicator, total scale 0 5.5) is constructed along three components:
 - 1. State Policies on Financial Protection for Spouses of Medicaid Beneficiaries who Receive LTSS (scale 0 2.0). The extent to which the state uses the federal minimum or maximum income and asset protection limits for spouses.
 - 2. State Assessment of Family Caregiver Needs (scale 0 2.5). The extent to which a state conducts a mandatory or optional assessment of family caregivers for their own needs when an older adult or adult with physical disabilities for whom they are caring is being assessed for one or more LTSS programs.
 - 3. CARE Act (scale 0 1.0). Evaluates the extent to which a state passed Caregiver Advise, Record, Enable (CARE) Act legislation and the Bill is signed into law.
- 18. **Nurse Delegation and Scope of Practice** (Current Year 2016; Baseline Year 2013): Nurse delegation and nurse practitioner scope of practice (composite indicator, total scale 0 5.0) is constructed along two components:
 - 1. Number of Health Maintenance Tasks Able to be Delegated to LTSS Workers (scale 0 4.0) Number of 16 health maintenance tasks that can be delegated by a registered nurse to an LTSS direct care worker assisting in home setting.

- 2. Nurse Practitioner Scope of Practice (scale 0 1.0). The extent to which state practice and licensure laws permit a nurse practitioner to be able to practice to the fullest extent of their education and training. Scope of practice includes three levels of authority: (1) full practice authority; (2) reduced practice; and (3) restricted practice.
- 19. **Transportation Policies** (Current Year 2012-16; Baseline Year 2010-12): Transportation policies (composite indicator, total scale 0 5.0) is constructed along three components:
 - 1. **Volunteer Driver Policies** (scale 0 3.0). The extent to which state volunteer driver polices: (1) Provide protection from unreasonable or unfair increases in liability or insurance rates; (2) Include nonprofit volunteer driver programs that are exempted from livery laws; and (3) State laws facilitate private investment in volunteer driver programs.
 - 2. **Statewide Human Services Transportation Coordinating Councils** (scale 0 1.0). Whether the state has an active council to enhance services and improve efficiency.
 - 3. **Medicaid Non-medical Transportation** (scale 0 1.0). Whether the state offers non medical transportation as an HCBS waiver benefit, and the total amount of the benefit.

Effective Transitions Indicators

- 20. Nursing Home Residents with Low Care Needs (Current Year 2014; Baseline Year 2012): Percentage of nursing home residents ages 65 and older who met the criteria of having low care needs. Low care status is generally met if a resident does not require physical assistance in any of the four late-loss ADLs (bed mobility, transferring, using the toilet, and eating).
- 21. **Home Health Patients with a Hospital Admission** (Current Year 2015; Baseline Year 2012): Percent of patients who were admitted to an acute care hospital for at least 24 hours while a home health care patient.
- 22. Nursing Home Residents with a Hospital Admission (Current Year 2014; Baseline Year 2012): Percent of long-stay nursing home residents (residing in a nursing home relatively continuously for 100 days) who were ever hospitalized within 6 months of baseline assessment.
- 23. **Burdensome Transitions** (Current Year 2013; Baseline Year 2011): Percent of nursing home residents with one or more potentially burdensome transitions at end of life. A potentially burdensome transition is defined as: (1) any transfer in the last 3 days of life; (2) lack of continuity of a nursing home before and after a hospitalization in the last 120 days of life; and (3) multiple hospitalizations for any reason in the last 120 days of life.
- 24. **Long Nursing Home Stays** (Current Year 2012; Baseline Year 2009): A measure of the proportion of new nursing home residents in a given year whose stay lasts 100 days or more.
- 25. **Transitions to the Community** (Current Year 2012; Baseline Year 2009): A measure of the proportion of Medicare beneficiaries of all ages with 90 or more day nursing stays who successfully transition back to the community. Medicare beneficiaries include those who are only eligible to receive Medicare as well as those who are dually eligible to receive Medicare and Medicaid.

AFFORDABILITY AND ACCESS Affordability and Access: Dimension and Indicator Ranking



AFFORDABILITY AND ACCESS Indicator Performance, Ranking, and Change

	Pay	an Annual Nu Cost as a Per Household Inc	centage o	f Median	Pay C	ian Annual Ho ost as a Perco ousehold Inco	entage of	f Median	Private Long-Term Care Insurance Policies in Effect per 1,000 Population Ages 40+			
State	2012-13	2015-16	Rank	Change in Performance	2012-13	2015-16	Rank	Change in Performance	2012	2015	Rank	Change in Performance
United States	247%	243%		↔	84%	79%		↔	53	50		↔
Alabama	214%	205%	14	↔	79%	72%	9	↔	40	37	40	↔
Alaska	458%	475%	51	↔	82%	71%	6	1	31	30	49	↔
Arizona	224%	220%	20	↔	80%	76%	15	↔	40	35	45	×
Arkansas	195%	204%	13	↔	84%	83%	27	↔	34	32	48	↔
California	243%	249%	34	↔	82%	77%	19	↔	49	46	27	↔
Colorado	212%	206%	16	↔	81%	78%	22	↔	65	61	15	↔
Connecticut	359%	334%	49	↔	77%	71%	6	↔	67	67	11	↔
Delaware	277%	265%	39	↔	84%	76%	15	→	68	62	13	↔
District of Columbia	169%	199%	9	×	47%	46%	1	↔	171	164	1	↔
Florida	272%	273%	41	↔	78%	78%	22	→	42	37	40	×
Georgia	181%	202%	12	×	75%	72%	9	→	41	39	36	~
Hawaii	263%	225%	23	~	71%	64%	4	↔	125	121	3	↔
Idaho	238%	233%	26	↔	82%	83%	27	↔	38	35	45	↔
Illinois	198%	209%	18	→	88%	84%	32	↔	59	58	17	\
			28									
Indiana	241%	237% 171%	3	↔	87% 95%	83% 88%	27 39	↔	40 110	38 104	39	↔
lowa	185%			→				↔			6	↔
Kansas	175%	174%	4	→	85%	77%	19	→	92	87	7	↔
Kentucky	268%	231%	25	1	92%	85%	35	→	40	37	40	↔
Louisiana	189%	191%	7	↔	76%	75%	14	+	37	37	40	↔
Maine	303%	312%	46	↔	96%	102%	50	↔	*	57	20	*
Maryland	223%	230%	24	↔	65%	59%	2	↔	69	65	12	↔
Massachusetts	346%	319%	47	→	97%	89%	41	↔	59	58	17	↔
Michigan	262%	243%	32	↔	86%	81%	25	↔	43	39	36	↔
Minnesota	211%	224%	22	↔	100%	97%	48	↔	87	86	8	↔
Mississippi	250%	238%	30	↔	89%	84%	32	↔	37	34	47	↔
Missouri	175%	170%	2	+	86%	80%	24	↔	66	62	13	↔
Montana	234%	222%	21	↔	94%	93%	45	↔	60	58	17	+
Nebraska	198%	199%	9	↔	95%	93%	45	↔	124	118	5	+
Nevada	218%	257%	37	×	76%	74%	13	↔	27	25	51	↔
New Hampshire	302%	268%	40	1	93%	83%	27	1	50	49	23	↔
New Jersey	303%	290%	43	↔	76%	72%	9	↔	54	52	22	↔
New Mexico	223%	243%	32	↔	82%	85%	35	↔	43	46	27	↔
New York	396%	374%	50	↔	92%	89%	41	↔	46	45	31	↔
North Carolina	231%	233%	26	↔	82%	76%	15	↔	47	45	31	↔
North Dakota	249%	333%	48	X	106%	97%	48	↔	131	121	3	↔
Ohio	246%	237%	28	→	87%	83%	27	↔	48	46	27	↔
	168%	164%	1	↔	86%	85%	35	↔	41	39	36	→
Oklahoma		254%	36		86%	84%	32	↔	51	48	24	↔
Oregon	244%	305%	45	↔	93%	88%	39		48	48	33	
Pennsylvania	311%		1	↔				↔			1	↔
Rhode Island	352%	303%	44	√	111%	102%	50	↔	44	41	35	↔
South Carolina	222%	212%	19	↔	81%	77%	19	→	48	48	24	↔
South Dakota	215%	205%	14	↔	95%	95%	47	↔	129	122	2	↔
Tennessee	221%	201%	11	↔	82%	76%	15	↔	51	48	24	↔
Texas	181%	184%	6	↔	77%	71%	6	↔	46	42	34	↔
Utah	170%	174%	4	↔	78%	69%	5	1	42	37	40	×
Vermont	300%	240%	31	1	99%	81%	25	1	54	53	21	+
Virginia	198%	208%	17	↔	65%	61%	3	↔	78	74	9	+
Washington	246%	252%	35	↔	88%	86%	38	+	73	71	10	+
West Virginia	290%	275%	42	↔	83%	73%	12	1	30	29	50	↔
Wisconsin	279%	258%	38	↔	95%	89%	41	+	62	59	16	↔
Wyoming	214%	197%	8	↔	84%	92%	44	↔	48	46	27	↔

 $^{^{\}star} \ \ \, \text{Data not available; for change over time, data from both current and baseline years must be available.}$

Data: See the Methodology and Detailed Indicator Descriptions available on www.longtermscorecard.org for a full description of each indicator.

[✓] Represents an improvement in performance.

 $[\]begin{tabular}{l} \longleftrightarrow \end{tabular}$ Represents little or no change in performance.

 $igstyle \operatorname{\mathsf{Represents}}$ a decline in performance.

AFFORDABILITY AND ACCESS Indicator Performance, Ranking, and Change (continued)

		of Poverty Re	ceiving Me		Medicaid LT			100 People with		_	Door Functions
	Govern	ment Assistan	ce Health	Insurance		ADL D	isability		(Composit	e Indicato	or, scale 0-1009
State	2011-12	2014-15	Rank	Change in Performance	2010	2012	Rank	Change in Performance	2016	Rank	Change in Performance
United States	53.7%	55.2%		↔	55	54		↔	60%		*
Alabama	46.4%	46.9%	46	↔	39	38	40	↔	78%	14	*
Alaska	64.5%	69.1%	2	1	72	75	6	↔	46%	39	*
Arizona	48.4%	49.9%	37	↔	39	37	42	+	51%	33	*
Arkansas	52.1%	55.8%	21	1	51	51	28	↔	56%	28	*
California	62.8%	66.8%	6	1	80	76	5	+	0%	50	*
Colorado	58.2%	57.2%	15	↔	55	55	20	**	45%	40	*
Connecticut	60.7%	62.8%	8	↔	71	72	11	+	87%	5	*
Delaware	53.2%	49.2%	40	×	40	46	32	1	73%	17	*
District of Columbia	78.1%	78.1%	1	+	111	111	1 1	**	74%	16	*
Florida	48.8%	50.1%	35	↔	33	32	47	↔	82%	7	*
Georgia	47.1%	47.9%	43	↔	32	32	47	↔	70%	22	*
Hawaii	54.4%	56.6%	19	↔	24	23	51	↔	68%	24	*
Idaho	51.8%	54.1%	25	↔	68	68	13	**	38%	44	*
Illinois	49.9%	48.7%	41	↔	67	68	13	↔	47%	38	*
Indiana	49.1%	49.8%	38	→	37	38	40		41%	42	*
lowa	49.7%	50.5%	34	↔	86	75	6	×	0%	50	*
	48.4%	48.6%	42	→	56	54	25	→	60%	26	*
Kansas	50.2%	53.4%	26	1	39	34	46			19	*
Kentucky	53.0%	54.4%	24	→	62	59	17	X	72%	31	*
Louisiana			7	↔	48	46	32	↔	52%	33	*
Maine	63.2%	63.6%		ļ				↔	51%		
Maryland	51.0%	51.4%	31	↔	41	42	39	+	80%	10	*
Massachusetts	67.4%	67.7%	3	↔	71	74	9	↔	88%	2	*
Michigan	55.6%	60.0%	10	√	47	44	37	+	70%	22	*
Minnesota	54.5%	55.9%	20	↔	108	109	2	+	88%	2	*
Mississippi	58.5%	57.9%	11	↔	50	46	32	+	72%	19	*
Missouri	47.3%	50.0%	36	1	57	60	16	↔	81%	9	*
Montana	52.9%	43.4%	49	×	69	63	15	+	41%	42	*
Nebraska	49.5%	50.9%	33	↔	52	58	19	✓	48%	37	*
Nevada	47.3%	49.6%	39	↔	35	37	42	↔	56%	28	*
New Hampshire	49.4%	47.4%	44	↔	54	55	20	↔	88%	2	*
New Jersey	56.1%	57.4%	13	↔	55	51	28	+	82%	7	*
New Mexico	51.4%	54.7%	23	✓	47	43	38	↔	29%	48	*
New York	65.8%	67.4%	4	↔	77	74	9	↔	50%	36	*
North Carolina	50.7%	51.4%	31	↔	57	50	30	×	30%	46	*
North Dakota	46.1%	51.8%	30	1	87	84	4	+	52%	31	*
Ohio	51.1%	55.0%	22	1	57	52	27	+	86%	6	*
Oklahoma	43.2%	38.8%	51	×	49	47	31	+	59%	27	*
Oregon	49.9%	57.3%	14	1	51	55	20	+	77%	15	*
Pennsylvania	51.6%	52.6%	29	↔	51	55	20	\leftrightarrow	79%	11	*
Rhode Island	55.3%	60.1%	9	1	75	75	6	↔	56%	28	*
South Carolina	46.3%	44.7%	47	→	41	36	44	×	44%	41	*
South Dakota	42.3%	53.2%	27	1	55	55	20	↔	51%	33	*
Tennessee	48.1%	47.0%	45	↔	22	25	50	1	33%	45	*
Texas	52.9%	52.9%	28	↔	47	45	36	↔	72%	19	*
Utah	51.0%	44.3%	48	×	26	29	49	1	30%	46	*
Vermont	60.8%	67.4%	4	7	85	88	3		79%	11	*
Virginia	42.5%	43.1%	50	→	38	36	44	↔	73%	17	*
Washington	57.1%	56.8%	16	↔	58	54	25	↔	92%	1	*
West Virginia	50.6%	56.7%	17	V	46	46	32	↔	61%	25	*
Wisconsin	57.0%	57.7%	12	→	78	71	12	→	79%	11	*
AA19COH9HI	37.070	57.770	12		, 0	/ 1	12	×	1976	1 ''	*

^{*} Data not available; for change over time, data from both current and baseline years must be available.

Data: See the Methodology and Detailed Indicator Descriptions available on www.longtermscorecard.org for a full description of each indicator.

^{**} Current year data not available. Baseline data were repeated for current year in order to rank state. No trend can be measured.

 $[\]checkmark$ Represents an improvement in performance.

 $[\]begin{tabular}{ll} \longleftrightarrow \end{tabular}$ Represents little or no change in performance.

X Represents a decline in performance.

AFFORDABILITY AND ACCESS Income, Private Pay Cost, and LTSS Affordability

		Median Annu	al Cost of Care		s a Percentage of sehold Income*
	Median Household Income Age 65+	Nursing Home Private Room	30 Hours/Week of Home Care	Nursing Home Private Room	30 Hours/Week of Home Care
United States	\$40,971	\$92,378	\$31,590	243%	79%
Alabama	\$35,709	\$75,190	\$24,960	205%	72%
Alaska	\$56,421	\$297,840	\$40,560	475%	71%
Arizona	\$42,295	\$93,075	\$31,200	220%	76%
Arkansas	\$33,276	\$70,343	\$28,080	204%	83%
California	\$47,779	\$112,055	\$35,880	249%	77%
Colorado	\$46,946	\$97,546	\$35,100	206%	78%
Connecticut	\$49,209	\$160,600	\$31,200	334%	71%
Delaware	\$47,173	\$118,808	\$34.320	265%	76%
District of Columbia	\$48,571	\$137,058	\$24,960	199%	46%
Florida	\$39,896	\$100,375	\$28,860	273%	78%
Georgia	\$39,534	\$74,095	\$28,080	202%	72%
Hawaii	\$62,885	\$141,310	\$37,440	225%	64%
Idaho	\$37,321	\$88,878	\$31,200	233%	83%
Illinois	\$40,865	\$74.825	\$32.963	209%	84%
Indiana	\$37,840	\$91,980	\$30,420	237%	83%
Iowa	\$40,144	\$73,000	\$32,760	171%	88%
Kansas	\$41,000	\$67,525	\$31,200	174%	77%
Kentucky	\$34,909	\$83,768	\$28,080	231%	85%
Louisiana	\$32,870	\$61,663	\$23,790	191%	75%
Maine	\$37,042	\$108,223		312%	102%
Maryland	\$53,401		\$34,320	230%	59%
Massachusetts	\$44,237	\$113,333	\$31,013		
	\$40,304	\$144,175	\$38,766	319%	89%
Michigan Minnesota	\$42,316	\$98,185	\$31,590	243%	81%
	\$31,744	\$97,032	\$37,440	224%	97%
Mississippi	\$37,837	\$79,030	\$26,520	238%	84%
Missouri Montana	\$37,896	\$63,171	\$29,048	170%	80%
		\$83,220	\$35,880	222%	93%
Nebraska	\$39,112	\$76,833	\$35,880	199%	93%
Nevada	\$42,181	\$103,773	\$33,150	257%	74%
New Hampshire	\$47,398	\$123,370	\$37,440	268%	83%
New Jersey	\$47,355	\$133,835	\$32,760	290%	72%
New Mexico	\$38,297	\$86,742	\$32,354	243%	85%
New York	\$40,918	\$135,963	\$34,320	374%	89%
North Carolina	\$37,468	\$89,425	\$27,690	233%	76%
North Dakota	\$36,971	\$129,276	\$43,617	333%	97%
Ohio	\$37,720	\$87,600	\$30,420	237%	83%
Oklahoma	\$38,319	\$60,225	\$31,200	164%	85%
Oregon	\$42,040	\$107,310	\$35,880	254%	84%
Pennsylvania	\$38,060	\$116,800	\$33,540	305%	88%
Rhode Island	\$38,571	\$114,975	\$35,880	303%	102%
South Carolina	\$38,695	\$79,147	\$28,080	212%	77%
South Dakota	\$37,896	\$78,110	\$35,896	205%	95%
Tennessee	\$36,692	\$75,719	\$28,080	201%	76%
Texas	\$41,170	\$71,175	\$29,562	184%	71%
Utah	\$46,444	\$76,650	\$32,760	174%	69%
Vermont	\$42,213	\$106,763	\$34,320	240%	81%
Virginia	\$47,402	\$89,060	\$29,640	208%	61%
Washington	\$46,144	\$107,675	\$38,750	252%	86%
West Virginia	\$33,604	\$104,390	\$24,773	275%	73%
Wisconsin	\$38,643	\$102,200	\$35,100	258%	89%
Wyoming	\$41,057	\$88,505	\$40,560	197%	92%

^{*} These ratios are calculated at the market, not state level, and may not be exactly equal to the ratio of state median cost to state median income. Data: Genworth 2016 Cost of Care Survey; 2015 American Community Survey Public Use Microdata Sample.

Source: State Long-Term Services and Supports Scorecard, 2017.

Exhibit A7

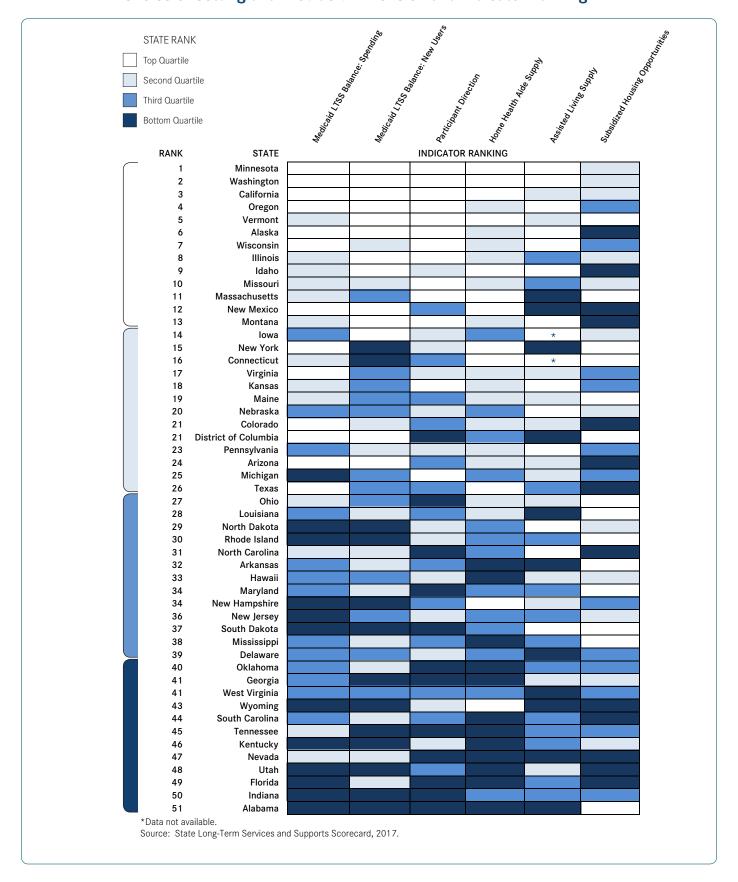
AFFORDABILITY AND ACCESS ADRC/NWD Functions: Composite Indicator Rank and Component Scores

	State Governance and Administration (10 criteria)	Target Populations (5 criteria)	Public Outreach and Coordination (8 criteria)	Person-Centered Counseling (9 criteria)	Streamlined Eligibility for Public Programs (9 criteria)	Overall Percent Score	Rank
United States	55%	67%	63%	69%	50%	60%	
Alabama	87%	87%	83%	71%	67%	78%	14
Alaska	39%	67%	54%	59%	22%	46%	39
Arizona	31%	67%	58%	69%	41%	51%	33
Arkansas	19%	67%	67%	91%	46%	56%	28
California	0%	0%	0%	0%	0%	0%	50
Colorado	33%	53%	56%	56%	31%	45%	40
Connecticut	76%	100%	98%	90%	78%	87%	5
Delaware	46%	87%	88%	74%	83%	73%	17
District of Columbia	79%	73%	75%	80%	63%	74%	16
Florida	69%	100%	63%	96%	89%	82%	7
Georgia	62%	100%	56%	95%	50%	70%	22
Hawaii	79%	67%	67%	69%	57%	68%	24
Idaho	44%	33%	50%	31%	31%	38%	44
Illinois	60%	33%	42%	37%	56%	47%	38
Indiana	45%	40%	52%	42%	28%	41%	42
lowa	0%	0%	0%	0%	0%	0%	50
Kansas	43%	93%	65%	69%	48%	60%	26
Kentucky	84%	100%	56%	61%	67%	72%	19
Louisiana	43%	67%	52%	66%	41%	52%	31
Maine	24%	80%	54%	63%	48%	51%	33
Maryland	67%	80%	83%	98%	76%	80%	10
Massachusetts	90%	87%	81%	99%	81%	88%	2
Michigan	63%	87%	71%	75%	61%	70%	22
Minnesota	84%	87%	96%	98%	76%	88%	2
Mississippi	71%	93%	50%	94%	59%	72%	19
Missouri	79%	100%	65%	100%	70%	81%	9
Montana	16%	67%	50%	57%	31%	41%	42
Nebraska	49%	73%	63%	42%	26%	48%	37
Nevada	55%	60%	63%	62%	43%	56%	28
New Hampshire	83%	100%	92%	79%	93%	88%	2
New Jersey	89%	67%	65%	97%	81%	82%	7
New Mexico	2%	33%	25%	69%	19%	29%	48
New York	48%	53%	54%	48%	46%	50%	36
North Carolina	28%	47%	38%	45%	0%	30%	46
North Dakota	40%	53%	63%	59%	50%	52%	31
Ohio	93%	80%	73%	84%	96%	86%	6
Oklahoma	61%	47%	54%	71%	56%	59%	27
Oregon	76%	100%	75%	76%	70%	77%	15
Pennsylvania	77%	100%	69%	99%	59%	79%	11
Rhode Island	54%	87%	52%	60%	39%	56%	28
South Carolina	8%	53%	75%	69%	26%	44%	41
South Carolina South Dakota	52%	60%	44%	53%	50%	51%	33
Tennessee	40% 73%	60%	52%	15%	11%	33%	45
Texas			83%	59%	78%	72%	19
Utah	34%	27%	25%	35%	26%	30%	46
Vermont	62%	73%	85%	93%	81%	79%	11
Virginia	81%	67%	73%	83%	59%	73%	17
Washington	86%	100%	98%	93%	89%	92%	1
West Virginia	56%	100%	58%	76%	33%	61%	25
Wisconsin Wyoming	54% 28%	80% 27%	85% 25%	100% 26%	80%	79% 21%	11 49

Note: ADRC/NWD Functions = Aging and Disability Resource Center/No Wrong Door Functions. California and Iowa did not respond to the survey.

Data: AARP PPI (2016). State LTSS Scorecard ADRC/NWD Survey (unpublished). Washington, DC: AARP Public Policy Institute.

Exhibit A8 CHOICE
Choice of Setting and Provider: Dimension and Indicator Ranking



CHOICE OF SETTING AND PROVIDER Indicator Performance, Ranking, and Change

	LTSS Spe		g to HCBS	ate-Funded for Older People Disabilities				t Receiving	Number of People Participant- Directing Services per 1,000 Population with Disabilities			
State	2011	2014	Rank	Change in Performance	2009	2012	Rank	Change in Performance	2016	Rank	Change in Performance	
United States	39.4%	41.2%		↔	53%	58%		1	26.5		*	
Alabama	18.1%	13.6%	51	×	34.1%	28.8%	49	×	0.3	51	*	
Alaska	61.6%	62.8%	4	↔	81.9%	82.5%†	2	↔	45.9	7	*	
Arizona	45.3%	46.0%	13	↔	67.7%†	68.2%†	10	↔	4.6	39	*	
Arkansas	32.1%	32.7%	27	↔	64.1%	64.8%	17	↔	7.3	32	*	
California	56.1%	58.4%	6	↔	67.6%	74.6%	6	1	131.9	1	*	
Colorado	50.9%	54.4%	8	1	62.0%	66.4%†	15	1	7.9	30	*	
Connecticut	28.5%	33.3%	25	1	39.9%	40.5%	40	↔	9.4	27	*	
Delaware	18.0%	27.7%	35	1	30.9%	43.9%	35	1	12.3	24	*	
District of Columbia	45.7%	51.7%	10	1	74.2%	77.2%†	4	1	0.4	49	*	
Florida	23.5%	22.6%	43	↔	59.0%	62.7%	18	1	1.2	45	*	
Georgia	30.3%	28.6%	34	↔	31.9%†	40.7%	39	1	3.1	40	*	
Hawaii	21.5%	26.5%	37	1	40.5%†	43.8%†	36	1	20.0	16	*	
Idaho	47.0%	45.6%	14	→	73.0%	69.2%†	9	×	9.6	26	*	
Illinois	40.2%	40.3%	19	↔	69.6%	77.0%	5	√	26.2	12	*	
Indiana	23.6%	19.4%	46	×	32.0%	28.0%	50	×	0.4	49	*	
lowa	27.7%	31.4%	28	7	57.1%	72.8%	8	1	22.9	14	*	
Kansas	36.5%	33.1%	26	×	51.9%	50.7%†	29	↔	28.2	11	*	
Kentucky	22.6%	15.3%	50	×	28.4%	30.8%	48	1	14.5	21	*	
Louisiana	30.3%	31.2%	29	→	45.0%	58.2%	23	-	7.2	34	*	
Maine	35.8%	35.8%	22	↔	38.1%†	43.7%†	37	4	5.0	37	*	
		26.4%	38	↔	39.5%	58.3%	22	4	0.9	47	*	
Maryland Massachusetts	25.1%	45.5%	15	X	39.9%	46.5%	34	1	53.0	47	*	
	48.7%	24.6%	40	+	52.6%	54.9%	27	<u> </u>	51.1	5	*	
Michigan	23.1%	68.5%	1	↔	80.3%	83.6%	1	↔	30.1		*	
Minnesota	65.2%	25.3%	39	-	48.1%	55.4%	26	V	7.3	10	*	
Mississippi	19.1%	40.6%	18	V	60.1%	65.2%	16	1	33.7	32	*	
Missouri	38.5%			↔	43.3%	67.7%		1		9	*	
Montana	37.0%	36.6%	21	↔			11	V	24.3	13		
Nebraska	28.4%	28.8%	33	↔	37.1%	49.5%	30	/	17.0	17	*	
Nevada	41.4%	38.4%	20	×	59.0%	56.4%	25	×	1.5	43	*	
New Hampshire	18.9%	19.3%	47	↔	35.0%	34.7%	46	→	8.5	28	*	
New Jersey	17.6%	18.3%	48	↔	51.4%	48.9%†	32	↔	16.7	18	*	
New Mexico	65.4%	64.1%	3	↔	78.8%	78.8%	3	**	8.3	29	*	
New York	43.1%	47.5%	12	1	45.9%	37.3%	43	×	13.8	22	*	
North Carolina	41.3%	44.7%	16	√	68.7%	56.8%	24	×	1.4	44	*	
North Dakota	16.6%	17.4%	49	↔	35.7%	35.4%	45	↔	15.6	19	*	
Ohio	31.5%	34.3%	24	1	40.2%	46.6%	33	1	0.9	47	*	
Oklahoma	32.0%	30.4%	31	+	59.6%	60.3%	19	↔	2.1	42	*	
Oregon	57.4%	58.6%	5	↔	71.2%	73.4%	7	1	49.6	6	*	
Pennsylvania	24.8%	31.0%	30	√	39.1%	59.3%	21	1	11.5	25	*	
Rhode Island	18.5%	21.7%	44	✓	37.6%	38.5%†	42	↔	15.0	20	*	
South Carolina	28.5%	27.5%	36	+	50.7%	59.9%	20	1	4.8	38	*	
South Dakota	19.0%	20.5%	45	↔	26.8%	32.9%	47	1	1.0	46	*	
Tennessee	25.5%	35.1%	23	1	21.6%	27.1%†	51	1	2.8	41	*	
Texas	53.7%	55.4%	7	↔	54.7%†	49.1%	31	×	7.9	30	*	
Utah	22.2%	23.8%	41	↔	35.4%†	39.2%	41	1	7.1	35	*	
Vermont	44.5%	43.7%	17	↔	54.9%	67.2%	12	1	55.2	2	*	
Virginia	41.1%	48.3%	11	1	48.8%†	53.1%	28	1	20.9	15	*	
Washington	62.4%	64.9%	2	1	70.4%	67.0%	13	×	53.4	3	*	
West Virginia	30.5%	29.0%	32	↔	51.8%	43.0%	38	×	6.4	36	*	
Wisconsin	48.1%	53.1%	9	1	61.2%†	66.6%†	14	1	35.6	8	*	
Wyoming	26.3%	23.2%	42	×	47.7%	37.2%	44	×	13.0	23	*	

^{*} Data not available; for change over time, data from both current and baseline years must be available.

Data: See the Methodology and Detailed Indicator Descriptions available on www.longtermscorecard.org for a full description of each indicator. Source: State Long-Term Services and Supports Scorecard, 2017.

^{**} Current year data not available. Baseline data were repeated for current year in order to rank state. No trend can be measured.

[†] Data are modeled based on multiple sources.

[✓] Represents an improvement in performance.

 $[\]longleftrightarrow$ Represents little or no change in performance.

igstar Represents a decline in performance.

CHOICE OF SETTING AND PROVIDER Indicator Performance, Ranking, and Change (continued)

		e Health and 0 Population			Assiste	_	nd Reside People A	ntial Care Units ges 75+	Subsidized Housing Opportunities (Place-Based and Vouchers) As a Percentage of All Housing Units				
State	2010-12	2013-15	Rank	Change in Performance	2010	2014	Rank	Change in Performance	2011	2015	Rank	Change in Performance	
United States	20	21		↔	54	52		↔	5.4%	5.9%		+	
Alabama	7	10	49	1	35	31	41	×	6.1%	6.5%	13	↔	
Alaska	20	23	13	1	97	80	9	X	3.5%	3.9%	50	1	
Arizona	18	20	22	1	61	56	17	↔	2.5%	2.8%	51	1	
Arkansas	15	13	40	X	25	29	43	1	5.7%	6.6%	12	1	
California	27	28	8	↔	72	59	15	X	5.4%	5.8%	24	↔	
Colorado	21	20	22	↔	54	54	21	↔	4.2%	4.4%	45	↔	
Connecticut	25	29	6	1	*	*	*	*	7.0%	7.4%	7	↔	
Delaware	15	14	37	↔	36	33	39	+	5.0%	5.4%	32	↔	
District of Columbia	18	16	31	×	23	21	48	+	16.6%	17.7%	1	↔	
Florida	11	13	40	1	*	44	31	*	3.9%	4.3%	47	1	
Georgia	10	11	48	1	63	52	24	X	4.9%	5.9%	22	1	
Hawaii	13	13	40	→	51	52	24	↔	5.7%	5.8%	24	→	
Idaho	22	30	4	1	86	88	6	↔	3.6%	4.4%	45	1	
Illinois	18	22	15	7	*	39	35	*	5.5%	6.2%	15	/	
Indiana	13	15	34	7	48	50	28	↔	5.5%	5.7%	27	↔	
lowa	14	18	27	7	*	*	*	*	5.2%	5.8%	24	1	
Kansas	21	21	19	↔	60	64	12	↔	4.8%	5.6%	30	1	
	8	10	49	7	50	47	30	↔	5.7%	5.9%	22	₩ ↔	
Kentucky	20	21	19	↔	19	20	49	↔		6.8%	9	↔	
Louisiana	27	23	13		68	63	14	↔	6.3%		<u> </u>	ļ	
Maine	13	14	37	×	51	51	26	↔	5.5%	6.5%	13	✓	
Maryland	22	25			31	30	42		6.6%	6.8%	9		
Massachusetts		17	11	/	57	l	17	↔	8.4%	9.0%	5	↔	
Michigan	17		30	↔	*	56		*	4.9%	5.2%	35	↔	
Minnesota	32	33	2	↔		88	6		5.6%	6.0%	18	→	
Mississippi	9	10	49	1	33	36	37	↔	7.0%	7.9%	6	√	
Missouri	20	22	15	✓	51	49	29	+	5.5%	6.0%	18	→	
Montana	20	19	26	↔	80	83	8	+	4.2%	4.8%	41	1	
Nebraska	18	15	34	×	83	90	5	↔	5.0%	6.0%	18	1	
Nevada	10	12	46	√	30	28	44	+	4.0%	4.3%	47	↔	
New Hampshire	18	29	6	√	55	55	20	+	4.8%	5.3%	34	√	
New Jersey	18	18	27	↔	41	36	37	×	5.3%	6.0%	18	1	
New Mexico	28	33	2	✓	35	32	40	↔	4.4%	4.9%	39	✓	
New York	43	41	1	↔	25	28	44	✓	9.2%	10.2%	2	1	
North Carolina	16	16	31	→	73	65	11	×	4.3%	4.8%	41	1	
North Dakota	26	15	34	×	109	105	2	+	6.4%	6.2%	15	+	
Ohio	20	20	22	↔	49	54	21	1	6.3%	6.7%	11	+	
Oklahoma	16	13	40	×	38	44	31	1	4.5%	5.0%	38	1	
Oregon	21	22	15	↔	127	121	1	↔	5.1%	5.7%	27	1	
Pennsylvania	19	21	19	1	62	64	12	↔	4.8%	5.1%	36	↔	
Rhode Island	17	16	31	↔	45	51	26	1	9.4%	10.1%	3	↔	
South Carolina	13	13	40	↔	47	42	34	×	4.3%	4.9%	39	1	
South Dakota	8	14	37	1	72	76	10	+	6.8%	9.4%	4	1	
Tennessee	10	13	40	1	41	44	31	+	5.5%	5.6%	30	↔	
Texas	23	26	9	1	37	39	35	↔	4.4%	4.6%	44	↔	
Utah	13	12	46	↔	55	58	16	+	3.4%	4.3%	47	1	
Vermont	33	30	4	→	54	54	21	↔	6.0%	7.3%	8	7	
Virginia	16	20	22	1	62	56	17	↔	5.2%	5.4%	32	↔	
Washington	24	25	11	↔	111	103	3	↔	5.0%	6.1%	17	√	
West Virginia	19	18	27	↔	27	26	46	↔	5.2%	5.7%	27	/	
Wisconsin	20	22	15	7	80	92	4	√	4.6%	5.1%	36	-	
Wyoming	19	26	9	1	22	25	47	/	4.0%	4.7%	43	/	

^{*} Data not available; for change over time, data from both current and baseline years must be available.

[✓] Represents an improvement in performance.

[←] Represents little or no change in performance.

[×] Represents a decline in performance.

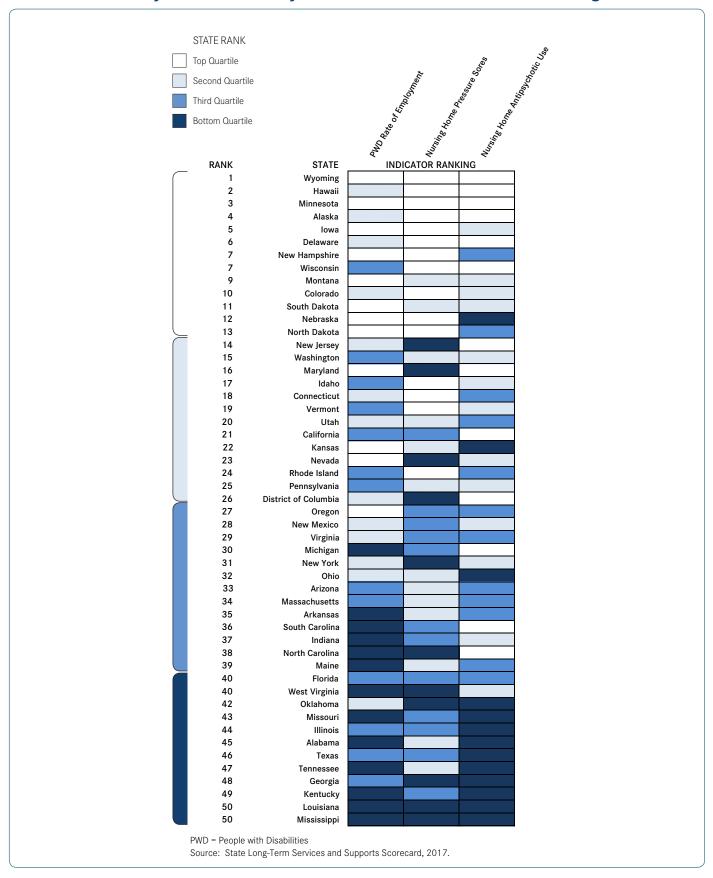
Data: See the Methodology and Detailed Indicator Descriptions available on www.longtermscorecard.org for a full description of each indicator.

Exhibit A10 CHOICE OF SETTING AND PROVIDER **Subsidized Housing Units, Vouchers, and Cost Burden**

State	Place-Based Units	Authorized Vouchers	Total Potentially Subsidized Units	Percent of Housing Units Potentially Subsidized	Renter Households under 100% Area Median Income (HAMFI) with Cost Burden	Percent of Renters under 100% Area Median Income that are Cost Burdened
United States	2,376,027	5,539,039	7,915,066	5.9%	18,119,428	61.5%
Alabama	34,501	110,116	144,617	6.5%	234,275	56.2%
Alaska	4,672	7,425	12,097	3.9%	33,600	56.2%
Arizona	22,879	58,997	81,876	2.8%	362,315	65.8%
Arkansas	23,580	65,313	88,893	6.6%	153,625	54.3%
California	324,962	479,682	804,644	5.8%	2,754,390	69.6%
Colorado	32,235	69,754	101,989	4.4%	311,000	62.1%
Connecticut	39,883	71,371	111,254	7.4%	204,825	60.9%
Delaware	4,905	17,667	22,572	5.4%	41,795	63.2%
District of Columbia	14,671	40,048	54,719	17.7%	62,115	64.0%
Florida	105,968	290,179	396,147	4.3%	1,161,225	71.6%
Georgia	63,178	182,273	245,451	5.9%	555,270	62.8%
Hawaii	12,888	18,232	31,120	5.8%	86,865	63.8%
Idaho	7,131	23,271	30,402	4.4%	74,495	56.7%
Illinois	100,480	229,845	330,325	6.2%	694,230	59.4%
Indiana	39,952	121,891	161,843	5.7%	324,430	56.4%
lowa	22,914	56,211	79,125	5.8%	133,510	49.3%
Kansas						
	13,054	56,546	69,600	5.6%	141,455	52.4%
Kentucky	35,587	79,911	115,498	5.9%	216,435	52.1%
Louisiana	55,047	82,675	137,722	6.8%	243,000	59.5%
Maine	12,840	34,513	47,353	6.5%	69,650	57.0%
Maryland	53,293	112,545	165,838	6.8%	309,765	65.2%
Massachusetts	82,811	172,483	255,294	9.0%	411,825	59.4%
Michigan	59,719	178,550	238,269	5.2%	506,585	61.4%
Minnesota	32,785	109,926	142,711	6.0%	253,010	54.6%
Mississippi	24,170	78,934	103,104	7.9%	140,915	57.6%
Missouri	43,685	122,298	165,983	6.0%	318,035	55.1%
Montana	6,437	17,068	23,505	4.8%	49,685	50.3%
Nebraska	12,554	36,632	49,186	6.0%	90,720	48.6%
Nevada	14,803	36,802	51,605	4.3%	189,030	70.4%
New Hampshire	9,836	22,887	32,723	5.3%	64,505	57.9%
New Jersey	72,734	143,366	216,100	6.0%	517,545	66.7%
New Mexico	14,834	29,900	44,734	4.9%	98,575	60.4%
New York	251,243	582,593	833,836	10.2%	1,529,445	63.5%
North Carolina	59,128	156,964	216,092	4.8%	536,035	58.7%
North Dakota	8,189	14,295	22,484	6.2%	32,785	43.0%
Ohio	96,701	249,712	346,413	6.7%	649,080	56.9%
Oklahoma	24,757	60,279	85,036	5.0%	186,925	52.2%
Oregon	35,080	62,701	97,781	5.7%	269,110	66.0%
Pennsylvania	88,670	196,783	285,453	5.1%	643,885	57.0%
Rhode Island	10,502	36,239	46,741	10.1%	70,685	57.9%
South Carolina	26,394	82,458	108,852	4.9%	236,475	59.2%
South Dakota	6,453	29,125	35,578	9.4%	35,390	43.4%
Tennessee	36,280	124,912	161,192	5.6%	341,895	57.0%
Texas	162,980	320,324				59.4%
Utah			483,304	4.6%	1,376,135	
Vermont	11,267	33,620	44,887	4.3%	113,645	56.2%
	6,628	17,207	23,835	7.3%	33,514	58.4%
Virginia	50,892	135,769	186,661	5.4%	414,420	63.3%
Washington	53,457	129,226	182,683	6.1%	430,140	62.5%
West Virginia	15,495	34,726	50,221	5.7%	73,455	49.0%
Wisconsin	30,310	104,619	134,929	5.1%	315,610	55.4%
Wyoming	2,613	10,176	12,789	4.7%	22,099	44.7%

Data: AARP Public Policy, National and State Housing Fact Sheets & Data; 2015 American Community Survey.

Exhibit A11 QUALITY Quality of Life and Quality of Care: Dimension and Indicator Ranking



QUALITY OF LIFE AND QUALITY OF CARE Indicator Performance, Ranking, and Change

Rate of Employment for Adults with ADL Disability Percent of High-Risk Nursing Percent of Long-Stay Nursing Home Ages 18-64 Relative to Rate of Employment for Home Residents with Residents Who are Receiving an Adults Without ADL Disability Ages 18-64 Antipsychotic Medication **Pressure Sores** Change in Change in Change in 2011-12 2015-16 Rank 2013 2015 Rank Performance State 2014-15 Rank Performance 2013 Performance 5.8% 21.3% 17.3% **United States** 22.8% 21.4% 6.3% \leftrightarrow 45 5.5% 5.5% 24 22.7% 19.9% 44 17.8% 18.1% Alabama \leftrightarrow \leftrightarrow Alaska 30.5% 24.8% 13 5.8% 3 7% 3 13 1% 14.5% 13 29 24 17.4% 32 21.6% 6.1% 5.5% 20.5% 24.5% Arizona 19.9% 39 6.8% 5.5% 24 24.6% 16.9% 27 21.0% Arkansas \leftrightarrow 22.6% 20.9% 35 6.4% 5 9% 17.4% 13 2% California 23.2% 17.6% 15.4% 15 4.9% 4.4% Colorado 31.5% 22.2% 23 4.7% 4.3% 10 21.9% 17.3% 31 Connecticut 30.7% \leftrightarrow 21.1% 22.0% 25 5.8% 3 9% 4 17 4% 13.3% 6 Delaware District of Columbia 24.3% 17 8.9% 8.6% 17.0% 13.3% 6 24.0% \leftrightarrow 20.2% 38 6.4% 5.9% 31 22.2% 17.5% 34 Florida 19.5% 19.8% 20.3% 6.9% 6.8% 43 22.1% 42 Georgia 22.8% 24.6% 16 3.0% 3.9% 4 11.9% 8.0% 22.9% Hawaii \leftrightarrow 23.4% 20.8% 36 4 4% 3 4% 21 2% 16.8% Idaho 27 25.1% 20.3% 48 21.7% 7.0% 6.3% 36 Illinois 24.4% 6.8% 19.2% 41 6.3% 36 21.3% 16.4% 19 Indiana 22.3% \leftrightarrow 27.8% 28.9% 4.8% 4 0% 19 9% 16.5% Iowa 27.9% 5.4% 5.2% 22.7% 19.9% 44 Kansas 29.2% 6 \leftrightarrow \leftrightarrow 15.5% 50 6.8% 6.5% 39 22.4% 20.2% 47 16.1% Kentucky \leftrightarrow \leftrightarrow 45 49 51 22.7% 18 1% 9.0% 7.5% 27.6% 21.5% Louisiana 16.6% 48 4.9% 4.7% 16 21.6% 17.8% Maine 21.5% 26.9% 8 7.2% 6.8% 43 16.7% 14.1% 10 Maryland 30.3% \leftrightarrow Massachusetts 26.8% 21.0% 34 5.1% 4.7% 16 22.2% 18.9% 38 47 17.9% 6.1% 5.8% 29 14.9% 13.4% 8 19.3% Michigan \leftrightarrow \leftrightarrow Minnesota 31.0% 32.4% 4 2% 4 4% 12 17.0% 13.5% ō \leftrightarrow 16 2% 49 7 6% 7 4% 46 24 7% 21.1% 50 Mississippi 19.2% 6.1% 18.7% 42 5.8% 29 24.4% 19.4% 39 Missouri 22.5% **→** 30.2% 30.8% 4 4.8% 5.6% 28 18.9% 15.0% 14 Montana 27.8% 19.4% 4.4% 3.9% 22.7% Nebraska 26.9% \leftrightarrow 43.3% 6.9% 7.5% 49 20.7% 16.6% 22 27.8% Nevada \leftrightarrow New Hampshire 27.3% 25.6% 10 3.8% 3 6% 2 22.0% 17 2% 29 24.8% 13 8.1% 41 12.9% New Jersey 6.6% 16.1% 3 24 9% 22.2% 23 6.4% 6.2% 34 19.9% 16.6% New Mexico 22.3% \leftrightarrow New York 24.5% 22.8% 7.8% 7.4% 46 19.1% 15.6% 16 19.9% 39 7.2% 7.4% 46 16.4% 14.4% 12 North Carolina 20.7% \leftrightarrow \leftrightarrow 25.3% 4.4% 4.1% 8 18.6% 18.5% 37 North Dakota 30.2% \leftrightarrow \leftrightarrow 19 24 23.3% 5 7% 5.5% 23.5% 19.6% 41 Ohio 23.6% 24.3% 17 7.7% 7.3% 45 23.0% 19.8% 42 23.0% Oklahoma -Oregon 22.6% 25.4% 6.6% 6.2% 34 18.7% 17.4% 32 \leftrightarrow 19.9% 16.4% Pennsylvania 21.9% 21.1% 5.7% 5.2% 21 19 30 29 13.8% 21.3% 5.7% 4.4% 12 19.4% 17.2% Rhode Island 19.3% 18 7% 42 6.5% 6.5% 39 171% 14 2% South Carolina 26.8% 9 4.8% 4.7% 16 19.0% 16.7% 24 South Dakota 37.2% 17.5% 15.5% 50 5.4% 5.3% 23 24.8% 20.0% 46 Tennessee \leftrightarrow 32 27.6% 40 24.1% 21.2% 6.9% 6.4% 38 20.8% Texas 24.8% 5.3% 5.0% 20 25.5% 17.9% 36 Utah 23.4% \leftrightarrow **+** 21.3% 30 4.4% 12 20.2% 16.8% 23.4% 4.6% Vermont \leftrightarrow 24.8% 22 9% 6 4% 6.1% 21.3% 17.1% 28 Virginia 21.9% 26 5.9% 4.7% 16 20.1% 16.1% 17 24.2% Washington West Virginia 15.0% 18.6% 44 6.9% 6.7% 42 19.4% 16.1% 17 \leftrightarrow 27 17.2% Wisconsin 23.8% 21.7% 4.4% 4.3% 12.9% 3 5.1% 4.1% 17.4% 12.4% Wyoming

Data: See the Methodology and Detailed Indicator Descriptions available on www.longtermscorecard.org for a full description of each indicator.

Represents an improvement in performance.

[→] Represents little or no change in performance.

X Represents a decline in performance

Exhibit A 13 SUPPORT FOR FAMILY CAREGIVERS Support for Family Caregivers: Dimension and Indicator Ranking

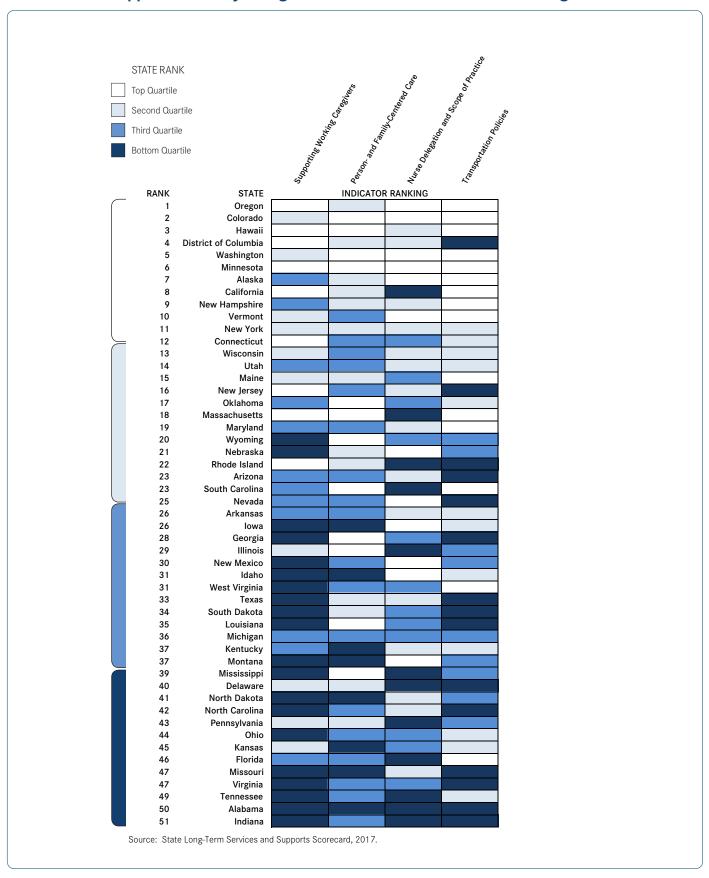


Exhibit A14 | SUPPORT FOR FAMILY CAREGIVERS Indicator Performance, Ranking, and Change

	Sup	porting Wo	rking Ca	ıregivers	Persor	n- and Fam	ily- Cen	tered Care	Nurse D	elegation a	nd Scop	e of Practice		Transporta	tion Pol	icies
State	2012-13	2014-16	Rank	Change in Performance	2012-13	2016	Rank	Change in Performance	2013	2016	Rank	Change in Performance	2010-12	2012-16	Rank	Change in Performance
United States	1.12	1.22		↔	1.26	2.33		√	2.68	3.31		/	1.18	1.04		X
Alabama	0.00	0.00	32	↔	0.52	1.41	44	1	1.00	1.00	42	↔	0.00	0.00	37	↔
Alaska	1.00	1.00	20	↔	1.75	3.00	14	1	5.00	5.00	1	↔	2.00	2.00	6	↔
Arizona	1.00	1.00	20	↔	2.40	2.10	29	×	2.25	4.50	13	1	0.00	0.00	37	↔
Arkansas	1.00	1.00	20	↔	0.50	1.50	34	1	4.00	4.00	20	↔	1.00	1.00	20	↔
California	4.05	4.75	3	1	2.00	3.00	14	1	0.50	0.50	45	↔	2.50	2.50	3	↔
Colorado	1.30	1.30	17	↔	1.50	3.50	8	1	5.00	5.00	1	↔	4.00	4.00	1	↔
Connecticut	5.00	5.00	2	↔	0.50	1.50	34	1	1.75	2.25	37	1	1.00	1.00	20	↔
Delaware	1.00	2.00	10	1	0.82	2.71	18	1	1.25	1.25	41	+	0.00	0.00	37	↔
District of Columbia	6.50	6.50	1	+	1.00	2.90	17	1	3.50	4.00	20	1	0.00	0.00	37	↔
Florida	0.30	0.30	29	↔	1.80	2.40	27	1	0.00	0.00	51	↔	2.00	2.00	6	↔
Georgia	0.00	0.00	32	↔	2.10	3.90	5	1	3.50	3.50	31	↔	1.00	0.00	37	×
Hawaii	3.00	3.00	7	↔	2.65	4.25	3	1	4.50	4.50	13	↔	2.00	2.00	6	↔
Idaho	0.00	0.00	32	↔	0.50	0.50	48	↔	4.25	5.00	1	1	1.50	1.50	16	↔
Illinois	1.30	1.30	17	↔	2.80	4.30	1	1	1.00	1.00	42	↔	1.50	0.50	28	X
Indiana	0.00	0.00	32	↔	0.50	1.50	34	1	0.50	0.50	45	↔	0.00	0.00	37	↔
lowa	0.00	0.00	32	↔	1.01	1.00	46	↔	5.00	5.00	1	↔	1.50	1.50	16	↔
Kansas	1.30	1.30	17	↔	0.50	0.50	48	↔	1.50	2.00	39	1	2.00	1.00	20	×
Kentucky	0.30	0.30	29	↔	0.50	0.50	48	↔	1.50	4.50	13	7	1.00	1.00	20	↔
Louisiana	0.00	0.00	32	↔	2.30	3.90	5		3.25	2.50	36	×	0.00	0.00	37	↔
Maine	1.50	1.50	16	↔	2.50	2.50	22	↔	3.25	3.25	34	↔	1.00	2.00	6	
Maryland	0.30	0.60	28	1	0.50	1.50	34	1	4.00	4.50	13	1	2.00	2.00	6	↔
Massachusetts	1.30	2.30	9	1	2.40	3.40	9	1	0.50	0.50	45	↔	2.50	2.50	3	↔
Michigan	0.30	0.30	29	↔	0.80	1.80	30	1	0.00	3.75	28	1	0.50	0.50	28	↔
Minnesota	1.50	2.50	8	1	2.19	3.40	9	1	4.50	5.00	1	1	2.00	2.00	6	↔
Mississippi	0.00	0.00	32	↔	2.00	4.00	4	1	1.25	1.75	40	1	0.50	0.50	28	↔
Missouri	0.00	0.00	32	↔	0.50	0.50	48	↔	4.00	4.00	20	↔	1.00	0.00	37	×
Montana	0.00	0.00	32	↔	0.50	0.80	47	1	1.75	5.00	1	1	0.50	0.50	28	↔
Nebraska	0.00	0.00	32	↔	0.50	3.00	14	7	4.50	5.00	+ +		1.50	0.50	28	×
Nevada	1.00	1.00	20	↔	0.50	1.80	30	-	4.75	4.75	12	→	0.00	0.00	37	↔
New Hampshire	1.00	1.00	20	+	0.80	3.10	13	<u>-</u>	4.50	4.50	13	→	2.00	2.00	6	↔
New Jersey	3.60	3.60	6	↔	0.50	1.50	34	7	2.25	4.00	20	7	0.00	0.00	37	↔
New Mexico	0.00	0.00	32	↔	0.59	1.58	33	7	3.00	5.00	1	-	0.50	0.50	28	↔
New York	1.60	1.60	14	↔	1.87	2.53	21	7	3.25	4.25	19		1.50	1.50	16	↔
North Carolina	1.00	0.00	32	X	0.50	1.50	34	7	1.50	4.00	20	7	1.00	0.00	37	X
North Dakota	0.00	0.00	32	→	1.40	1.28	45	↔	3.75	4.00	20	7	0.00	0.50	28	7
Ohio	0.00	0.00	32	↔	0.50	1.80	30	1	2.25	2.25	37	↔	1.00	1.00	20	↔
Oklahoma	1.00	1.00	20	↔	2.62	3.31	12	1	2.25	3.50	31	1	1.00	1.00	20	↔
Oregon	3.85	4.55	4	1	0.50	2.50	22	1	5.00	5.00	1	↔	2.00	2.00	6	↔
Pennsylvania	1.30	1.60	14	1	0.80	2.70	19	√	0.50	0.50	45	↔	0.50	0.50	28	↔
Rhode Island	4.50	4.50	5	↔	0.50	2.50	22	√	1.00	1.00	42	↔	0.00	0.00	37	↔
South Carolina	1.00	1.00	20	↔	2.48	3.35	11	1	0.25	0.25	50	₩ ↔	3.00	3.00	2	↔
South Dakota	0.00	0.00	32	→	1.70	2.70	19	7	3.25	3.75	28	1	1.00	0.00	37	X
Tennessee	0.00	0.00	32	→	0.50	1.50	34		0.50	0.50	45	↔	0.00	1.00	20	-
Texas	0.00	0.00	32	↔	1.00	2.50	22		3.75	4.00	20	7	0.00	0.00	37	↔
Utah	1.00	1.00	20	→	0.50	2.40	27	-	0.75	4.50	13	7	2.00	1.50	16	Y
Vermont	0.75	1.75	13	1	2.10	1.50	34	X	5.00	5.00	1	→	2.00	2.00	6	
Virginia	0.00	0.00	32	→	0.50	1.50	34		0.50	3.00	35	7	0.00	0.00	37	↔
Washington	1.80	1.80	12	→	2.29	3.62	7	7	5.00	5.00	1	₩	2.50	2.50	3	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
West Virginia	0.00	0.00	32	→	0.50	1.50	34	7	3.25	3.50	31	7	2.00	2.00	6	↔
Wisconsin	1.75	2.00	10	-	1.08	2.41	26	7	4.00	4.00	20	₩	2.00	1.00	20	×
			ļ	₩ ↔			 					<u> </u>				×
Wyoming	0.00	0.00	32	-	3.00	4.30	1	✓	3.50	3.75	28	✓	1.50	0.50	28	^

[✓] Represents an improvement in performance.

 $[\]begin{tabular}{l} \longleftrightarrow \text{Represents little or no change in performance}. \end{tabular}$

XRepresents a decline in performance.

Data: See the Methodology and Detailed Indicator Descriptions available on www.longtermscorecard.org for a full description of each indicator.

SUPPORT FOR FAMILY CAREGIVERS Supporting Working Family Caregivers: Composite Indicator Rank, Component Scores, and Change

Most	Current	Year	(2014-16)
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State	Exceeding Federal Minimum FMLA (out of 4.0)	Having Mandatory Paid Family Leave and Sick Days (out of 3.0)	Having State Unemployment Insurance for Family Caregivers (out of 1.0)	Protecting Caregivers from Employment Discrimination (out of 1.0)	Total Score (out of 9.0)	Rank
United States	0.32	0.26	0.49	0.15	1.22	
Alabama	0.32	0.20	0.49	0.15	1.22	32
Alaska			1		1.00	20
Arizona			1		1.00	20
Arkansas						
California	0.75	2.0	1		1.00	20
Colorado	0.75	3.0	1	0.0	4.75	3
Connecticut	2.00	1.0	11	0.3	1.30	17
Delaware	2.00	1.0	11	1.0	5.00	2
District of Columbia	0.50	1.0	11	1.0	2.00	10
	3.50	1.0	1	1.0	6.50	1
Florida				0.3	0.30	29
Georgia						32
Hawaii	2.00		1		3.00	7
Idaho						32
Illinois	ļ		1	0.3	1.30	17
Indiana						32
lowa						32
Kansas			1	0.3	1.30	17
Kentucky				0.3	0.30	29
Louisiana						32
Maine	0.50		1		1.50	16
Maryland		0.3		0.3	0.60	28
Massachusetts		1.0	1	0.3	2.30	9
Michigan				0.3	0.30	29
Minnesota	0.50		1	1.0	2.50	8
Mississippi						32
Missouri						32
Montana						32
Nebraska						32
Nevada			1		1.00	20
New Hampshire			1		1.00	20
New Jersey	1.00	2.3		0.3	3.60	6
New Mexico						32
New York		0.3	1	0.3	1.60	14
North Carolina						32
North Dakota	<u> </u>					32
Ohio	<u> </u>					32
Oklahoma	†		1		1.00	20
Oregon	2.25	1.0	1	0.3	4.55	4
Pennsylvania	2.20	0.3	<u></u> 1	0.3	1.60	14
Rhode Island	1.50	2.0	1	0.0	4.50	<u></u> 5
South Carolina	1.00	2.0	1		1.00	20
South Dakota	 				1.50	32
Tennessee						32
Texas					 	32
Utah	-		1		1.00	20
Vermont	0.75	1.0	I			
	0.75	1.0			1.75	13
Virginia	0.50	0.0			1.00	32
Washington	0.50	0.3	1		1.80	12
West Virginia						32
Wisconsin	1.00		1		2.00	10 32

Note: FMLA = Family and Medical Leave Act.

 \checkmark Represents an improvement in performance.

 $\begin{tabular}{l} \longleftrightarrow \end{tabular}$ Represents little or no change in performance.

igwedge Represents a decline in performance.

Data: See the Methodology and Detailed Indicator Descriptions available on www.longtermscorecard.org for a full description of each indicator.

Exhibit A15 | SUPPORT FOR FAMILY CAREGIVERS Supporting Working Family Caregivers: Composite Indicator Rank, Component Scores, and Change (continued)

	Baseline Year (2012-13)										
State	Exceeding Federal Minimum FMLA (out of 4.0)	Having Mandatory Paid Family Leave and Sick Days (out of 3.0)	Having State Unemployment Insurance for Family Caregivers (out of 1.0)	Protecting Caregivers from Employment Discrimination (out of 1.0)	Total Score (out of 9.0)	Change in	Performance				
United States	0.31	0.19	0.11	0.51	1.12	0.10	+				
Alabama							\leftrightarrow				
Alaska			1		1.00		+				
Arizona			1		1.00		+				
Arkansas			1		1.00		+				
California	0.75	2.3	1		4.05	0.70	<u>/</u>				
Colorado			1	0.3	1.30						
Connecticut	2.00	1.0	1	1.0	5.00		→				
Delaware	2.00	1.0	1	1.0	1.00	1.00					
District of Columbia	3.50	1.0	1	1.0	6.50	1.00	→				
Florida	0.30	1.0		0.3	0.30		←				
				0.3	0.30		↔				
Georgia	2.00	ļ	4		2.00						
Hawaii	2.00	-	1		3.00		↔				
Idaho							↔				
Illinois			1	0.3	1.30		↔				
Indiana							↔				
lowa							↔				
Kansas			1	0.3	1.30		↔				
Kentucky				0.3	0.30		\leftrightarrow				
Louisiana							\leftrightarrow				
Maine	0.50		1		1.50		\leftrightarrow				
Maryland		-		0.3	0.30	0.30	1				
Massachusetts			1	0.3	1.30	1.00					
Michigan				0.3	0.30		↔				
Minnesota	0.50		1		1.50	1.00					
Mississippi	0.00		<u>'</u>		1.00	1.00	↔				
Missouri							↔				
Montana											
Nebraska											
Nevada			1		1.00		↔				
New Hampshire			1		1.00		→				
New Jersey	1.00	2.3		0.3	3.60		→				
New Mexico							↔				
New York		0.3	1	0.3	1.60		↔				
North Carolina			1		1.00	-1.00	×				
North Dakota							+				
Ohio							+				
Oklahoma			1		1.00		+				
Oregon	2.25	0.3	1	0.3	3.85	0.70	√				
Pennsylvania			1	0.3	1.30	0.30	-				
Rhode Island	1.50	2.0	1		4.50						
South Carolina	<u> </u>	<u> </u>	1		1.00		→				
South Dakota			· · · · · · · · · · · · · · · · · · ·				↔				
Tennessee	-	 					↔				
Texas	+	-					→				
Utah	-	-	1		1.00		↔				
	0.75	-	1			1.00					
Vermont	0.75				0.75	1.00	√				
Virginia	ļ	ļ					↔				
Washington	0.50	0.3	1		1.80		↔				
West Virginia							↔				
Wisconsin	0.75		1		1.75	0.25	√				
Wyoming							\leftrightarrow				

Note: FMLA = Family and Medical Leave Act.

✓ Represents an improvement in performance.

 $\begin{tabular}{l} \longleftrightarrow \end{tabular}$ Represents little or no change in performance.

× Represents a decline in performance.

Data: See the Methodology and Detailed Indicator Descriptions available on www.longtermscorecard.org for a full description of each indicator.

SUPPORT FOR FAMILY CAREGIVERS

Person- and Family-Centered Care: Composite Indicator Rank, Components Scores, and Change

Most Current Year (2016)

State	Spousal Impoverishment Provisions for Medicaid HCBS (out of 2.0)	Having a Caregiver Assessment (out of 2.5)	Having CARE Act Legislation (out of 1.0)	Total Score (out of 5.5)	Rank
United States	0.92	0.76	0.65	2.33	
Alabama	0.51	0.9		1.41	44
Alaska	2.00		1.0	3.00	14
Arizona	0.50	1.6		2.10	29
Arkansas	0.50		1.0	1.50	34
California	2.00		1.0	3.00	14
Colorado	1.50	1.0	1.0	3.50	8
Connecticut	0.50		1.0	1.50	34
Delaware	0.51	1.2	1.0	2.71	18
District of Columbia	1.00	0.9	1.0	2.90	17
Florida	1.50	0.9		2.40	27
Georgia	2.00	1.9		3.90	5
Hawaii	1.65	1.6	1.0	4.25	3
Idaho	0.50			0.50	48
Illinois	2.00	1.3	1.0	4.30	1
Indiana	0.50		1.0	1.50	34
lowa	1.00			1.00	46
Kansas	0.50			0.50	48
Kentucky	0.50			0.50	48
Louisiana	2.00	0.9	1.0	3.90	5
Maine	1.50		1.0	2.50	22
Maryland	0.50		1.0	1.50	34
Massachusetts	1.50	0.9	1.0	3.40	9
Michigan	0.50	0.3	1.0	1.80	30
Minnesota	0.60	1.8	1.0	3.40	9
Mississippi	2.00	1.0	1.0	4.00	4
Missouri	0.50	1.0	1.0	0.50	48
Montana	0.50	0.3			48
Nebraska	0.50	1.5	1.0	0.80 3.00	ļ
Nevada	0.50	0.3	1.0		14
	0.50	1.6	1.0	1.80	30
New Hampshire	0.50	1.0	1.0	3.10	13
New Jersey New Mexico	0.58		1.0	1.50	34
New York	1.53		1.0	1.58	33
		1.0	1.0	2.53	21
North Carolina	0.50	1.0		1.50	34
North Dakota	0.28	1.0	1.0	1.28	45
Ohio	0.50		1.0	1.80	30
Oklahoma	1.01	1.3	1.0	3.31	12
Oregon	0.50	1.0	1.0	2.50	22
Pennsylvania	0.50	1.2	1.0	2.70	19
Rhode Island	0.50	1.0	1.0	2.50	22
South Carolina	1.45	1.9		3.35	11
South Dakota	0.50	2.2		2.70	19
Tennessee	0.50	1.0		1.50	34
Texas	1.00	1.5		2.50	22
Utah	0.50	0.9	1.0	2.40	27
Vermont	1.50			1.50	34
Virginia	0.50		1.0	1.50	34
Washington	0.82	1.8	1.0	3.62	7
West Virginia	0.50		1.0	1.50	34
Wisconsin	1.11	1.3		2.41	26
Wyoming	2.00	1.3	1.0	4.30	1

CARE Act = Caregiver Advise, Record, Enable Act.

Data: See the Methodology and Detailed Indicator Descriptions available on www.longtermscorecard.org for a full description of each indicator. Source: State Long-Term Services and Supports Scorecard, 2017.

 $[\]checkmark$ Represents an improvement in performance.

 $[\]begin{tabular}{l} \longleftrightarrow \end{tabular}$ Represents little or no change in performance.

X Represents a decline in performance.

SUPPORT FOR FAMILY CAREGIVERS

Person- and Family-Centered Care: Composite Indicator Rank, Components Scores, and Change (continued)

	Baseline	Year (2012-13)				
State	Spousal Impoverishment Provisions for Medicaid HCBS (out of 2.0)	Having a Caregiver Assessment (out of 2.5)	Having CARE Act Legislation (out of 1.0)	Total Score (out of 5.5)	Change in Pe	rformance
United States	0.9	0.36	0	1.26	1.07	1
Alabama	0.52		-	0.52	0.89	1
Alaska	1.75			1.75	1.25	
Arizona	0.50	1.9		2.40	-0.30	×
Arkansas	0.50	1.7		0.50	1.00	+
California	2.00			2.00	1.00	
Colorado	1.50			1.50	2.00	-
Connecticut	0.50			0.50		'
Delaware	0.50	0.2		0.82	1.00	
	1.00	0.3		1.00	1.89	
District of Columbia Florida	1.50			1.80	1.90	1
		0.3			0.60	1
Georgia	1.50	0.6		2.10	1.80	1
Hawaii	1.65	1.0		2.65	1.60	√
Idaho	0.50			0.50	0.00	→
Illinois	1.50	1.3		2.80	1.50	1
Indiana	0.50			0.50	1.00	/
lowa	1.01			1.01	-0.01	→
Kansas	0.50			0.50	0.00	↔
Kentucky	0.50			0.50	0.00	↔
Louisiana	2.00	0.3		2.30	1.60	√
Maine	1.50	1.0		2.50	0.00	↔
Maryland	0.50			0.50	1.00	/
Massachusetts	1.50	0.9		2.40	1.00	✓
Michigan	0.50	0.3		0.80	1.00	√
Minnesota	0.59	1.6		2.19	1.21	✓
Mississippi	2.00			2.00	2.00	✓
Missouri	0.50			0.50	0.00	↔
Montana	0.50			0.50	0.30	✓
Nebraska	0.50			0.50	2.50	√
Nevada	0.50			0.50	1.30	✓
New Hampshire	0.50	0.3		0.80	2.30	✓
New Jersey	0.50			0.50	1.00	✓
New Mexico	0.59			0.59	0.99	√
New York	1.57	0.3		1.87	0.66	1
North Carolina	0.50			0.50	1.00	√
North Dakota	0.40	1.0		1.40	-0.12	↔
Ohio	0.50			0.50	1.30	√
Oklahoma	1.02	1.6		2.62	0.69	1
Oregon	0.50			0.50	2.00	1
Pennsylvania	0.50	0.3		0.80	1.90	1
Rhode Island	0.50			0.50	2.00	1
South Carolina	1.48	1.0		2.48	0.87	1
South Dakota	0.50	1.2		1.70	1.00	1
Tennessee	0.50			0.50	1.00	1
Texas	1.00			1.00	1.50	1
Utah	0.50			0.50	1.90	1
Vermont	1.50	0.6		2.10	-0.60	×
Virginia	0.50			0.50	1.00	1
Washington	0.79	1.5		2.29	1.33	1
West Virginia	0.50			0.50	1.00	1
Wisconsin	1.08			1.08	1.33	1
Wyoming	2.00	1.0		3.00	1.30	-

CARE Act = Caregiver Advise, Record, Enable Act.

Data: See the Methodology and Detailed Indicator Descriptions available on www.longtermscorecard.org for a full description of each indicator. Source: State Long-Term Services and Supports Scorecard, 2017.

 $[\]checkmark$ Represents an improvement in performance.

 $[\]begin{tabular}{l} \longleftrightarrow \text{Represents little or no change in performance.} \end{tabular}$

X Represents a decline in performance.

SUPPORT FOR FAMILY CAREGIVERS Health Maintenance Tasks Able to be Delegated to LTSS Workers and Nurse Practitioner Scope of Practice: Rank, Component Scores, and Change

					Nurse Dele	gation Tasks (0.25 points each	ı task)				
State	Administer Oral Medications	Administer Medication on an as Needed Basis	Administer Medication via Pre-Filled Insulin or Insulin Pen	Draw up Insulin for Dosage Measurement	Administer Intramuscular Injection Medications	Administer Glucometer Test	Administer Medication through Tubes	Insert Suppository	Administer Eye/Ear Drops	Gastrostomy Tube Feeding	Administer Enema	Perform Intermittent Catheterization
Alabama						Υ	ļ					
Alaska	Υ	Y	Υ	Υ	Y	Y	Y	Y	Y	Y	Y	Y
Arizona	Y+	Y+	Y+	Y+	Y+	Y	 	Y+	Y+	Y+	Y	Y
Arkansas **	Y	Y	Y			Y	Y	Y	Y	Υ	Y	Y
California	 					Y	 		· · · · · · · · · · · · · · · · · · ·		Y	· · · · · · · · · · · · · · · · · · ·
Colorado	Y	Y	Y	Y	Υ Υ	· Y	Y	Y	Y	Y	Y	Y
Connecticut	Y		'		· ·	Y		•	Y	Y	· ·	· · · · ·
Delaware *	<u>'</u>					Y	 		<u> </u>	·		Y
District of Columbia *	Υ	Y	Y	Y+	Y+	Y	Y+	Y	Y		Υ	<u> </u>
Florida	Y	Y	ү	1+	1+		Y+	т	Y		· · · · · ·	
							 			ļ	ļ -	
Georgia	Y	Y	Y	Y		Y	Y	Y	Y	Y	Y	Y
Hawaii	Y	Y	Y		ļ	Y	Y	Y	Y	Y	Y	Y
Idaho	Υ	Y	Y+	Y+	Y+	Y	Υ	Y	Υ	Y	Y	Υ
Illinois **						Y	ļ					
Indiana *												
lowa	Y	Y	Y	Υ	Y	Y	Y	Y	Y	Y	Y	Y
Kansas						Υ		Y	Υ		Υ	Υ
Kentucky *	Y+	Y+	Y+	Y+	Y+	Y	Y+	Y+	Y+	Y	Y	Y+
Louisiana *	_ *					Υ	-*		_*	Y	Υ	Y
Maine	Υ		Υ			Y		Y	Y	Y	Υ	Υ
Maryland	Y	Y	Y	Y		Y	Y	Y	Y	Y	Y	Y
Massachusetts						Y	1					
Michigan *	Y+	Y+	Y+	Y+	Y+	Y+	Y+	Y+	Y+	Y+	Y+	Y+
Minnesota	Y	Y	Υ	Y	Y	Y	Y	Y	Y	Y	Y	Y
Mississippi *						Y				Y+	Y	Y
Missouri	Υ	Y	Υ	Υ	Y	Y	Υ	Y	Y	Y	Y	Υ
Montana *	Y+	Y+	Y+	Y+	Y+	Y+	Y+	Y+	Y+	Υ	Y+	Y+
Nebraska	Υ	Y	Υ	Υ	Y	Υ	Y	Y	Y	Y	Υ	Y
Nevada	Υ	Y	Y	Υ	Y	Υ	Y	Y	Y	Y	Y	Y
New Hampshire	Υ	Y	Υ	Υ	Y	Υ	Υ	Y	Y	Υ	Υ	Υ
New Jersey	Y+	Y+	Y+			Y+	Y+	Y+	Y+	Y	Y	Υ
New Mexico *	Υ	Y+	Υ	Y+	Y+	Υ	Υ	Y	Υ	Y	Y+	Y+
New York	Y	Y	Y	_*	Y	Y	Y	Y+	Y+	Y	Y	Y+
North Carolina	Y+	Y+	Y+	Y+	Y+	Y	Y+	Y+	Y+	Y	Y	Y
North Dakota	Y	Y	Υ	Υ	Y	Y	Y	Y	Y	Y	Y	Y
Ohio						Y		Y	Y	Y	Y	Υ
Oklahoma *	Y	Y	Y+	Y+		Y	Y	Y	Y	Y	Y+	Y+
Oregon	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Υ	Y
Pennsylvania												
Rhode Island												
South Carolina ***											Υ	
South Dakota	Y	Y	Y+	Y+		Y	 	Y	Y	Y	Y	Y
Tennessee	· · · · · · · · · · · · · · · · · · ·	Y			 		 	 	 	 	 	ti
Texas *	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Utah *	Y+	Y+	Y+	Y+	Y+	Y+	Y+	Υ+	Y+	Y+	Y+	Y+
Vermont	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Virginia	Y Y+	Y Y+	Y Y+	Y+	 	Y	 	Y Y+	Y Y+	Y Y+	Y Y+	ł <u>'</u>
					- v		 					V
Washington	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
West Virginia					-							l
Wisconsin	Y	Y	Y	ļ		Y	Y	Y	Y	Y	Y	Y
Wyoming	Y	Y		1	1	Y	Υ	Υ	Υ	Y	Y	1

^{*} Survey responses based upon AARP interpretation of state board of nursing regulations.

^{**} Revised baseline due to state reported error in 2013 nurse delegation survey.

^{***} South Carolina did not provide updated survey data. 2013 data repeated.

Y+ Health maintenance task added to state survey response in 2016.

- * Survey response modified from baseline year due to change in interpretation of state regulation or nurse practice. Source: State Long-Term Services and Supports Scorecard, 2017.

SUPPORT FOR FAMILY CAREGIVERS

Health Maintenance Tasks Able to be Delegated to LTSS Workers and Nurse **Practitioner Scope of Practice: Rank, Component Scores, and Change (continued)**

		Numa	Delegation Teals	(O 2E nainte anah		Scope of		Composite Score				
		inurse	Delegation lasks	(0.25 points each	Lask)	1	(1.0 pts Full, 0.	o pis Reduced)	Composite Score			
State	Perform Ostomy Care Including Skin Care and Changing Appliance	Perform Nebulizer Treatment	Administer Oxygen Therapy	Perform Ventilator Respiratory Care	Total Number of Tasks Able to be Delegated	Change from 2013	Scope of Practice 2016	Change from 2013	2013	2016	Rank 2016	
Alabama	Y				2	-	reduced	-	1.00	1.00	42	
Alaska	Υ	Υ	Y	Y	16	-	FULL	-	5.00	5.00	1	
Arizona	Υ	Y+	Υ		14	+9	FULL	-	2.25	4.50	13	
Arkansas **	Y	Υ	Y	Y	14	-	reduced	-	4.00	4.00	20	
California					2	-	-	-	0.50	0.50	45	
Colorado	Y	Υ	Y	Y	16	-	FULL	-	5.00	5.00	1	
Connecticut	Y		·		5	-	FULL	+0.5	1.75	2.25	37	
Delaware *	Y		 		3	-	reduced	-	1.25	1.25	41	
District of Columbia *	· Y	_ *	Y		12	+2	FULL	-	3.50	4.00	20	
Florida	· · · · · · · · · · · · · · · · · · ·		 		0	-	-	<u> </u>	0.00	0.00	51	
Georgia	Y	Y	Υ Υ		14				3.50	3.50	31	
Hawaii	Y	Y	Y	Y	14		FULL	_	4.50	4.50	13	
Idaho	Y	Y 	Y	Y	16	+3	FULL		4.50	5.00	13	
		Ť	T T	, T	2							
Illinois ** Indiana *	Y		 		0	-	reduced reduced		1.00 0.50	1.00 0.50	42 45	
			ļ			-		-				
lowa	Y	Υ	Y	Y	16	-	FULL	-	5.00	5.00	1	
Kansas			Y		6	-	reduced	+0.5	1.50	2.00	39	
Kentucky *	Y	Y+	Y+	Y+	16	+12	reduced	-	1.50	4.50	13	
Louisiana *	Υ	ΥΥ	Y	Y	8	-3	reduced	-	3.25	2.50	36	
Maine	Y				9	-	FULL	-	3.25	3.25	34	
Maryland	Y	ΥΥ	Y		14	-	FULL	+0.5	4.00	4.50	13	
Massachusetts	Υ		l		2	-	-	-	0.50	0.50	45	
Michigan *	Y+				13	+13	reduced	+0.5	0.00	3.75	28	
Minnesota	Υ	Υ	Υ	Y	16	-	FULL	+0.5	4.50	5.00	1	
Mississippi *	Y+				5	+2	reduced	-	1.25	1.75	40	
Missouri	Y	Υ	Y	Y	16	-	-	-	4.00	4.00	20	
Montana *	Y	Y+	Y	Y+	16	+13	FULL	-	1.75	5.00	1	
Nebraska	Y	Υ	Y	Y	16	-	FULL	+0.5	4.50	5.00	1	
Nevada	Y	Υ	Y		15	-	FULL	-	4.75	4.75	12	
New Hampshire	Y		Y		14	-	FULL	-	4.50	4.50	13	
New Jersey	Υ	Υ	Y	Y	14	+7	reduced	-	2.25	4.00	20	
New Mexico *	Y+	Υ	Y+	Y+	16	+8	FULL	-	3.00	5.00	1	
New York	Υ	Y+	Y	Y+	15	+4	reduced	-	3.25	4.25	19	
North Carolina	Υ	Y+	Y	Y+	16	+10	-	-	1.50	4.00	20	
North Dakota	Y	Y+	· ·		14	+1	reduced	-	3.75	4.00	20	
Ohio	Y		 		7	-	reduced	-	2.25	2.25	37	
Oklahoma *	Y	Υ	Y+		14	+5	-	_	2.25	3.50	31	
Oregon	Y	<u>'</u>	Y	Y	16		FULL	-	5.00	5.00	1	
Pennsylvania	 	<u>-</u>	 	<u> </u>	0	_	reduced		0.50	0.50	45	
Rhode Island			 	 	0	-	FULL	-	1.00	1.00	42	
South Carolina ***			 		1		- 1011		0.25	0.25	50	
South Dakota	Y	Υ	Y		13	+2	reduced		3.25	3.75	28	
Tennessee	 		 		2	- +2	- Teduceu		0.50	0.50	45	
Texas *	Y	Υ	Y	Y+	16	+1	-	-	3.75	4.00	20	
Utah *	Y	Y+	Y+	Y+	16	+15	reduced	-	0.75	4.50	13	
Vermont	Y	Y Y	Y	Y	16	713	FULL	-	5.00	5.00	1	
			4	ļ ^Y		- 10	FULL -				4	
Virginia	Y	Y+	Y+	ļ	12	+10			0.50	3.00	35	
Washington	Y	Υ	Y	Y	16	-	FULL	-	5.00	5.00	1	
West Virginia	Y	Y	1	Y+	12	+1	reduced	-	3.25	3.50	31	
Wisconsin	Y	Y	Y	Y	14	-	reduced	-	4.00	4.00	20	
Wyoming	Υ	Y+	Y		11	+1	FULL	-	3.50	3.75	28	

^{*} Survey responses based upon AARP interpretation of state board of nursing regulations.

^{**} Revised baseline due to state reported error in 2013 nurse delegation survey.

^{***} South Carolina did not provide updated survey data. 2013 data repeated. Y+ Health maintenance task added to state survey response in 2016.

^{- *} Survey response modified from baseline year due to change in interpretation of state regulation or nurse practice. Source: State Long-Term Services and Supports Scorecard, 2017.

SUPPORT FOR FAMILY CAREGIVERS Transportation Policies: Composite Indicator Rank, Component Scores, and Change

		Mos	t Current Year (2012-16)				
	\	Olunteer Driver Policies					
State	Protection from Unreasonable or Unfair Increases in Liability or Insurance Rates (out of 1.0)	Non-Profit Volunteer Driver Programs are Exempt from Livery Laws (out of 1.0)	State Laws Facilitate Private Investment in Volunteer Driver Programs (out of 1.0)	Statewide Transportation Coordinating Council (out of 1.0)	Medicaid Non- Medical Transportation (out of 1.0)	Total Score (out of 5.0)	Rank
United States	0.12	0.16	0.10	0.35	0.31	1.04	
Alabama							37
Alaska				1	1.0	2.0	6
Arizona				· · · · · · · · · · · · · · · · · · ·			37
Arkansas				1		1.0	20
California	1	1			0.5	2.5	3
Colorado	1	1		1	1.0	4.0	1
Connecticut	· · · · · · · · · · · · · · · · · · ·	1		· · · · · · · · · · · · · · · · · · ·		1.0	20
Delaware						1.0	37
District of Columbia							37
Florida	1			1		2.0	6
Georgia	1			'		2.0	37
Hawaii		1	1			2.0	6
Idaho		'	'	1	0.5	1.5	16
Illinois				'	0.5	0.5	28
Indiana					0.5	0.5	37
lowa				1	0.5	1.5	16
		1		<u>'</u>	0.5	1.0	20
Kansas		l l		1			
Kentucky				1		1.0	20
Louisiana							37
Maine	11			1		2.0	6
Maryland		1		1		2.0	6
Massachusetts			1	1	0.5	2.5	3
Michigan					0.5	0.5	28
Minnesota				1	1.0	2.0	6
Mississippi					0.5	0.5	28
Missouri							37
Montana					0.5	0.5	28
Nebraska					0.5	0.5	28
Nevada							37
New Hampshire	1			1		2.0	6
New Jersey							37
New Mexico					0.5	0.5	28
New York			1		0.5	1.5	16
North Carolina							37
North Dakota					0.5	0.5	28
Ohio					1.0	1.0	20
Oklahoma				1		1.0	20
Oregon		1			1.0	2.0	6
Pennsylvania					0.5	0.5	28
Rhode Island							37
South Carolina			1	1	1.0	3.0	2
South Dakota							37
Tennessee				1		1.0	20
Texas						T	37
Utah			1		0.5	1.5	16
Vermont	1			1		2.0	6
Virginia	· · · · · · · · · · · · · · · · · · ·			·		<u> </u>	37
Washington		1		1	0.5	2.5	3
West Virginia		<u> </u>		1	1.0	2.0	6
Wisconsin				·	1.0	1.0	20
Wyoming					0.5	0.5	28

 [✓] Represents an improvement in performance.
 ← Represents little or no change in performance.
 X Represents a decline in performance.
 Data: See the Methodology and Detailed Indicator Descriptions available on www.longtermscorecard.org for a full description of each indicator.
 Source: State Long-Term Services and Supports Scorecard, 2017.

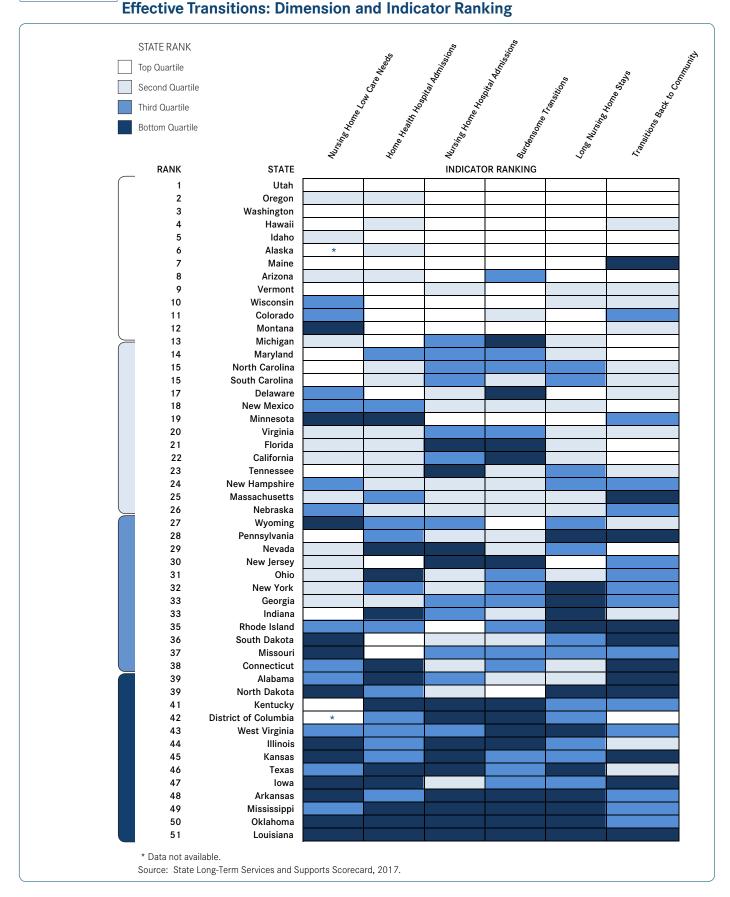
SUPPORT FOR FAMILY CAREGIVERS

Transportation Policies: Composite Indicator Rank, Component Scores, and Change (continued)

		Baselir	ne Year (2010)					
	,	Volunteer Driver Policies						
State	Protection from Unreasonable or Unfair Increases in Liability or Insurance Rates (out of 1.0)	Non-Profit Volunteer Driver Programs are Exempt from Livery Laws (out of 1.0)	State Laws Facilitate Private Investment in Volunteer Driver Programs (out of 1.0)	Statewide Transportation Coordinating Council (out of 1.0)	Medicaid Non- Medical Transportation (out of 1.0)	Total Score (out of 5.0)		nge in mance
United States	0.12	0.16	0.10	0.49	0.31	1.18	-0.14	×
Alabama								↔
Alaska				1	1.0	2.0		↔
Arizona								↔
Arkansas				1		1.0		↔
California	1	1			0.5	2.5		↔
Colorado	1	1		1	1.0	4.0		↔
Connecticut	·	1		<u> </u>		1.0		↔
Delaware		······						→
District of Columbia								↔
Florida	1			1		2.0		↔
Georgia	· · · · · · · · · · · · · · · · · · ·			1		1.0	-1.0	×
Hawaii		1	1			2.0	1.0	→
Idaho		ı		1	0.5	1.5		↔
Illinois				1	0.5	1.5	-1.0	X
Indiana				'	0.3	1.5	-1.0	^
lowa				1	0.5	1.5		₩
					0.5	2.0	-1.0	X
Kansas		1		1			-1.0	<u>^</u>
Kentucky				1		1.0		→
Louisiana								
Maine	1					1.0	1.0	√
Maryland		1		1		2.0		↔
Massachusetts			1	1	0.5	2.5		↔
Michigan					0.5	0.5		↔
Minnesota				1	1.0	2.0		↔
Mississippi					0.5	0.5		↔
Missouri				1		1.0	-1.0	×
Montana					0.5	0.5		→
Nebraska				1	0.5	1.5	-1.0	×
Nevada								→
New Hampshire	1			1		2.0		→
New Jersey								↔
New Mexico					0.5	0.5		↔
New York			1		0.5	1.5		+
North Carolina				1		1.0	-1.0	×
North Dakota							0.5	1
Ohio					1.0	1.0		↔
Oklahoma				1		1.0		↔
Oregon		1			1.0	2.0		↔
Pennsylvania					0.5	0.5		↔
Rhode Island								↔
South Carolina			1	1	1.0	3.0		↔
South Dakota			<u> </u>	1	·	1.0	-1.0	×
Tennessee				<u> </u>			1.0	7
Texas								→
Utah			1		1.0	2.0	-0.5	×
Vermont	1			1	1.0	2.0	·0.J	→
Virginia						∠.∪		↔
-		4			0.5			
Washington		1		1	0.5	2.5		
West Virginia				1	1.0	2.0		↔
Wisconsin				1	1.0	2.0	-1.0	X
Wyoming				1	0.5	1.5	-1.0	×

 [✓] Represents an improvement in performance.
 → Represents little or no change in performance.
 X Represents a decline in performance.
 Data: See the Methodology and Detailed Indicator Descriptions available on www.longtermscorecard.org for a full description of each indicator.
 Source: State Long-Term Services and Supports Scorecard, 2017.

EFFECTIVE TRANSITIONS



EFFECTIVE TRANSITIONS Indicator Performance, Ranking, and Change

	Perce		sing Hon w Care N	ne Residents leeds		ent of Ho		th Patients mission	Percent of Long-Stay Nursing Home Residents Hospitalized within a Six-Month Period			
State	2012	2014	Rank	Change in Performance	2012	2015	Rank	Change in Performance	2012	2014	Rank	Change in Performance
United States	12.1%	11.5%		↔	26.2%	24.9%		↔	18.5%	17.0%		↔
Alabama	12.5%	12.7%	30	↔	28.1%	25.9%	40	1	21.3%	19.0%	37	1
Alaska	*	*	*	*	25.6%	24.4%	26	↔	*	11.1%	7	*
Arizona	11.4%	10.9%	22	↔	24.6%	23.8%	20	↔	8.7%	8.2%	3	↔
Arkansas	16.1%	15.9%	41	↔	28.4%	25.1%	32	1	25.9%	24.3%	49	↔
California	11.2%	10.7%	20	↔	23.6%	23.4%	17	↔	19.9%	18.5%	35	↔
Colorado	12.9%	13.4%	34	↔	24.5%	22.7%	10	↔	9.6%	8.5%	4	1
Connecticut	14.2%	13.5%	36	↔	32.3%	31.6%	51	↔	16.0%	13.9%	20	1
Delaware	12.0%	13.2%	32	×	24.8%	21.6%	3	1	18.8%	15.6%	25	1
District of Columbia	*	*	*	*	26.0%	25.1%	32	↔	*	19.4%	42	*
Florida	8.4%	8.7%	13	↔	23.6%	23.6%	19	↔	22.6%	21.7%	47	↔
Georgia	11.1%	10.0%	19	1	25.9%	24.1%	22	↔	19.2%	17.4%	33	✓
Hawaii	4.6%	4.3%	2	↔	23.2%	23.1%	14	↔	*	5.0%	1	*
Idaho	10.5%	10.8%	21	↔	21.5%	21.8%	4	↔	11.3%	12.1%	13	↔
Illinois	24.8%	18.0%	45	1	26.0%	25.1%	32	↔	22.4%	19.9%	44	✓
Indiana	9.1%	8.1%	11	1	28.2%	27.0%	48	↔	18.7%	17.0%	32	1
Iowa	17.2%	16.8%	43	↔	27.0%	26.1%	42	↔	15.3%	15.2%	23	↔
Kansas	19.3%	20.1%	47	↔	23.6%	24.5%	27	↔	19.9%	19.3%	39	↔
Kentucky	7.3%	7.0%	7	↔	27.9%	26.8%	45	↔	23.6%	21.0%	45	✓
Louisiana	19.5%	16.5%	42	1	31.5%	26.9%	47	1	30.2%	26.8%	50	✓
Maine	3.4%	4.1%	1	×	22.2%	21.9%	5	↔	11.9%	11.9%	11	↔
Maryland	7.1%	7.4%	8	↔	25.8%	24.5%	27	↔	17.1%	15.9%	27	↔
Massachusetts	10.7%	11.0%	23	↔	26.7%	25.7%	39	↔	14.0%	12.6%	14	√
Michigan	10.2%	9.8%	17	↔	23.0%	22.5%	7	↔	17.6%	16.9%	31	↔
Minnesota	14.5%	15.1%	39	↔	27.6%	26.2%	43	↔	6.8%	7.0%	2	↔
Mississippi	15.0%	13.4%	34	1	30.3%	26.8%	45	1	28.7%	28.2%	51	↔
Missouri	22.2%	23.7%	49	↔	23.9%	22.6%	9	↔	19.8%	18.8%	36	↔
Montana	16.5%	18.8%	46	×	21.5%	21.0%	2	↔	12.4%	12.0%	12	↔
Nebraska	14.5%	14.8%	37	↔	24.2%	23.8%	20	↔	15.6%	15.7%	26	↔
Nevada	10.1%	9.8%	17	↔	27.2%	25.9%	40	↔	20.3%	19.4%	40	↔
New Hampshire	13.7%	13.2%	32	↔	25.4%	23.5%	18	↔	13.5%	13.7%	17	↔
New Jersey	10.8%	11.1%	24	↔	24.8%	22.9%	12	→	21.3%	19.7%	43	↔
New Mexico	13.5%	13.0%	31	↔	24.9%	25.4%	37	↔	13.2%	15.0%	22	×
New York	10.0%	8.7%	13	/	29.5%	25.1%	32	-	16.9%	14.1%	21	1
North Carolina	7.1%	6.8%	6	↔	25.5%	24.1%	22	↔	18.2%	16.4%	28	1
North Dakota	16.0%	15.0%	38	↔	24.1%	25.6%	38	↔	15.1%	13.7%	17	1
Ohio	10.8%	11.2%	25	↔	27.9%	26.6%	44	↔	15.0%	13.3%	15	√
Oklahoma	22.4%	22.8%	48	↔	31.5%	28.3%	49	-	23.9%	22.8%	48	↔
Oregon	7.9%	8.7%	13	×	21.4%	23.1%	14	×	8.4%	8.8%	6	↔
Pennsylvania	7.0%	7.4%	8	↔	25.1%	24.8%	31	+	15.5%	13.6%	16	1
Rhode Island	16.3%	12.6%	29	√	25.7%	24.7%	30	↔	9.7%	8.6%	5	√
South Carolina	4.8%	5.2%	4	↔	24.8%	23.3%	16	↔	19.8%	19.0%	37	↔
South Dakota	16.8%	16.8%	43	↔	22.9%	22.9%	12	↔	15.4%	15.5%	24	↔
Tennessee	8.4%	6.4%	5	✓	27.3%	24.2%	24	-	22.1%	19.4%	40	√
Texas	12.7%	12.1%	27	↔	29.4%	28.3%	49	↔	22.9%	21.4%	46	↔
Utah	6.3%	5.0%	3	√	18.9%	18.3%	1	↔	10.9%	11.3%	9	↔
Vermont	7.3%	7.6%	10	↔	24.5%	22.7%	10	↔	14.6%	13.7%	17	↔
Virginia	8.7%	9.1%	16	↔	25.8%	24.3%	25	↔	19.7%	17.6%	34	1
Washington	7.6%	8.4%	12	X	23.3%	21.9%	5	↔	13.1%	11.1%	7	1
West Virginia	11.1%	12.2%	28	×	28.2%	25.2%	36	1	18.8%	16.8%	30	√
Wisconsin	12.5%	11.8%	26	→	25.1%	22.5%	7	-	12.1%	11.7%	10	↔
Wyoming	15.8%	15.2%	40	↔	26.3%	24.6%	29	↔	13.4%	16.4%	28	×

^{*} Data not available; for change over time, data from both current and baseline years must be available.

Data: See the Methodology and Detailed Indicator Descriptions available on www.longtermscorecard.org for a full description of each indicator.

[✓] Represents an improvement in performance.

[←] Represents little or no change in performance.

X Represents a decline in performance.

Exhibit A20 EFFECTIVE TRANSITIONS Indicator Performance, Ranking, and Change (continued)

			Potential	ne Residents Ily Burdensome of Life		Percent of New Nursing Home Stays Lasting 100 Days or More				Percent of People with 90+ Day Nursing Home Stays Successfully Transitioning Back to the Community			
State	2011	2013	Rank	Change in Performance	2010	2012	Rank	Change in Performance	2009	2012	Rank	Change in Performance	
United States	28.0%	24.5%		1	20.6%	18.7%		1	8.1%	7.7%		↔	
Alabama	28.8%	22.4%	21	1	19.3%	17.4%	22	1	5.8%	4.7%	49	×	
Alaska	11.5%	9.1%	1	1	17.6%	14.2%	7	1	10.0%	9.0%	11	×	
Arizona	26.8%	23.8%	26	1	11.4%	8.9%	1	1	12.5%	10.7%	4	×	
Arkansas	34.3%	28.7%	50	1	27.2%	26.8%	50	↔	7.4%	7.2%	28	↔	
California	29.5%	27.0%	44	1	19.0%	18.3%	25	↔	10.7%	10.5%	6	↔	
Colorado	23.1%	19.6%	14	1	16.4%	14.8%	8	1	7.9%	7.0%	31	X	
Connecticut	24.6%	23.9%	27	↔	18.2%	16.3%	17	1	6.7%	5.8%	41	X	
Delaware	26.1%	25.9%	41	↔	18.9%	15.5%	13	1	9.7%	7.9%	24	X	
District of Columbia	38.5%	29.6%	51	1	22.2%	20.6%	38	↔	9.9%	9.0%	11	↔	
Florida	30.3%	27.0%	44	1	16.5%	15.7%	14	↔	10.0%	10.0%	7	↔	
Georgia	31.3%	24.5%	30	1	24.5%	21.1%	40	1	7.3%	6.4%	35	X	
Hawaii	13.4%	16.1%	5	×	19.1%	15.3%	11	1	7.3%	8.6%	14	1	
Idaho	14.9%	12.4%	2	1	16.7%	13.5%	4	1	11.6%	10.6%	5	→	
Illinois	32.7%	28.0%	47	1	20.4%	18.5%	31	1	9.0%	8.6%	14	↔	
Indiana	24.9%	22.9%	23	/	24.4%	23.5%	48	→	8.8%	8.5%	17	→	
lowa	24.2%	25.5%	38	↔	19.2%	18.4%	27	↔	4.8%	4.1%	51	×	
Kansas	26.0%	24.9%	34	↔	20.6%	18.4%	27	√	6.0%	5.8%	41	1	
Kentucky	31.4%	25.8%	39	<u> </u>	22.6%	19.9%	35	-	6.8%	6.8%	34	↔	
	42.7%	28.4%			35.0%	35.0%		√	6.3%	5.6%		↔	
Louisiana	17.4%	16.5%	49	1	14.3%	13.8%	51	↔	7.2%	5.4%	44	X	
Maine			7	↔			5	↔			46	X	
Maryland	30.8%	25.3%	36	1	18.8%	16.5%	18	1	8.8%	8.7%	13	↔	
Massachusetts	25.7%	20.6%	17	1	19.1%	17.1%	20	1	6.5%	5.7%	43	X	
Michigan	27.2%	25.9%	41	↔	20.8%	17.6%	23	1	10.0%	9.4%	9	↔	
Minnesota	19.7%	18.8%	13	↔	16.2%	14.0%	6	1	7.9%	6.0%	38	X	
Mississippi	36.7%	28.3%	48	1	24.6%	21.7%	43	√	7.0%	6.9%	33	↔	
Missouri	28.2%	24.5%	30	1	22.7%	19.7%	34	1	7.8%	7.0%	31	X	
Montana	15.7%	16.3%	6	↔	17.5%	15.4%	12	1	8.0%	7.6%	25	↔	
Nebraska	21.9%	20.0%	16	1	18.8%	16.5%	18	1	6.7%	6.0%	38	×	
Nevada	28.4%	22.7%	22	1	21.3%	19.2%	32	1	11.8%	9.4%	9	×	
New Hampshire	18.2%	19.9%	15	×	17.1%	19.4%	33	×	5.4%	6.0%	38	1	
New Jersey	33.6%	27.3%	46	1	16.4%	15.1%	9	↔	6.5%	6.4%	35	←	
New Mexico	21.8%	21.6%	18	↔	20.7%	17.8%	24	1	9.6%	10.0%	7	↔	
New York	27.3%	25.2%	35	1	25.9%	22.9%	46	1	6.4%	7.1%	30	1	
North Carolina	25.6%	24.3%	28	↔	22.3%	18.4%	27	1	8.6%	8.5%	17	↔	
North Dakota	18.5%	17.4%	9	↔	23.4%	23.1%	47	+	5.1%	4.4%	50	×	
Ohio	28.1%	24.8%	32	1	20.2%	18.3%	25	✓	8.2%	7.2%	28	×	
Oklahoma	31.4%	26.3%	43	1	24.2%	22.3%	45	1	7.2%	7.3%	27	↔	
Oregon	17.9%	17.1%	8	↔	10.3%	9.2%	2	1	13.4%	12.7%	2	↔	
Pennsylvania	26.4%	22.2%	19	1	23.1%	21.6%	42	→	6.1%	5.5%	45	×	
Rhode Island	25.1%	24.3%	28	↔	21.3%	21.7%	43	↔	6.8%	5.4%	46	X	
South Carolina	26.0%	23.2%	24	1	21.8%	18.4%	27	1	8.2%	8.0%	22	↔	
South Dakota	17.9%	22.3%	20	×	19.5%	20.2%	37	↔	5.2%	4.9%	48	↔	
Tennessee	30.7%	23.3%	25	1	24.0%	20.8%	39	1	7.2%	8.5%	17	1	
Texas	33.3%	25.4%	37	1	26.9%	24.7%	49	√	9.0%	8.6%	14	→	
Utah	18.7%	18.5%	11	↔	12.2%	10.5%	3	1	15.8%	14.9%	1	↔	
Vermont	13.7%	15.2%	3	×	16.3%	16.1%	16	↔	8.2%	7.4%	26	×	
Virginia	26.3%	24.8%	32	→	18.7%	16.0%	15		8.5%	8.1%	21		
	19.6%	18.4%		·····	16.7%	15.2%		1	11.8%	12.4%	+	→	
Washington	29.8%	25.8%	10	↔			10	/			3	↔	
West Virginia	_		39	√	23.6%	21.5%	41	1	7.7%	6.3%	37	×	
Wisconsin	18.1%	18.5%	11	↔	20.1%	17.1%	20	↔	8.5%	8.5%	17	↔	
Wyoming	15.7%	15.4%	4	rrent and baseline	19.8%	20.0%	36	•	6.3%	8.0%	22	1	

^{*} Data not available; for change over time, data from both current and baseline years must be available.

Data: See the Methodology and Detailed Indicator Descriptions available on www.longtermscorecard.org for a full description of each indicator.

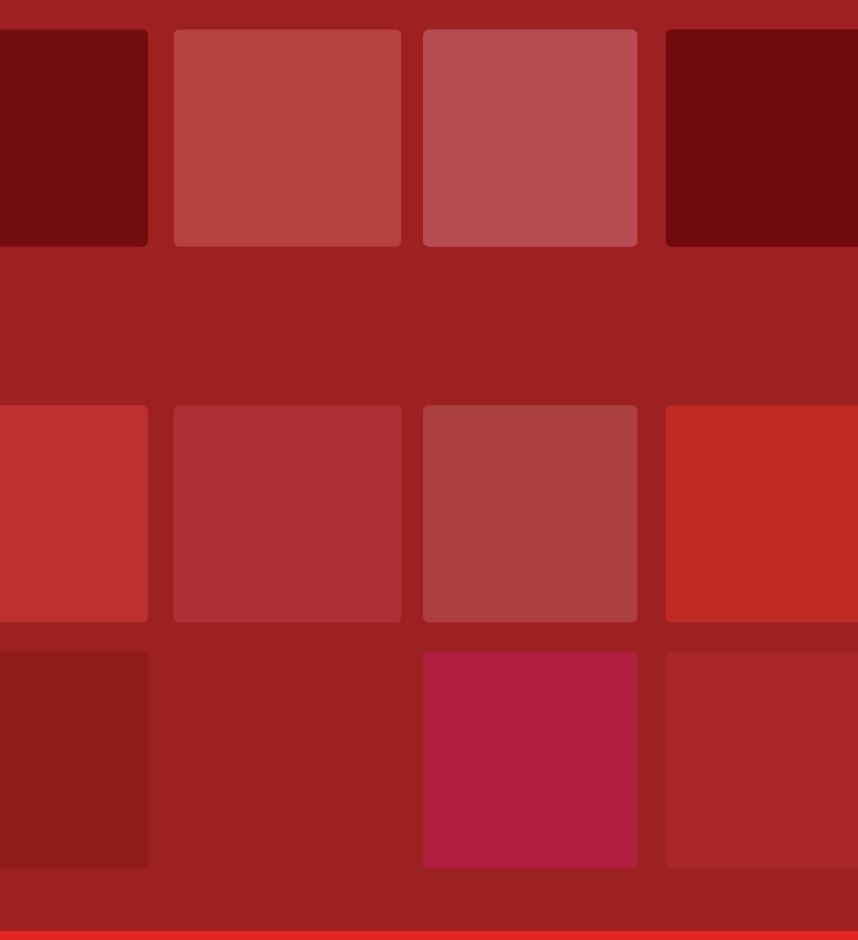
 $[\]checkmark\,$ Represents an improvement in performance.

[←] Represents little or no change in performance.

X Represents a decline in performance.

Exhibit A21 2017 State Ranking on LTSS System Performance by Dimension and Overall Rank

State	Affordability and Access	Choice of Setting and Provider	Quality of Life and Quality of Care	Support for Family Caregivers	Effective Transitions	Overall Rank
Alabama	30	51	45	50	39	49
Alaska	23	6	4	7	6	5
Arizona	46	24	33	23	8	26
Arkansas	31	32	35	26	48	41
California	19	3	21	8	22	9
Colorado	12	21	10	2	11	8
Connecticut	2	16	18	12	38	10
Delaware	24	39	6	40	17	28
District of Columbia	1	21	26	4	42	12
Florida	46	49	40	46	21	46
Georgia	32	41	48	28	33	42
Hawaii	9	33	2	3	4	7
daho	40	9	17	31	5	14
Ilinois	26	8	44	29	44	30
ndiana	51	50	37	51	33	51
owa	16	14	5	26	47	19
Kansas	10	18	22	45	45	30
Kentucky	44	46	49	37	41	50
ouisiana	15	28	50	35	51	40
Maine	41	19	39	15	7	18
Maryland	6	34	16	19	14	12
Massachusetts	7	11	34	18	25	11
Michigan	27	25	30	36	13	22
Minnesota	5	1	3	6	19	2
Mississippi	34	38	50	39	49	48
Missouri	4	10	43	47	37	27
Montana	41	13	9	37	12	21
Nebraska	22	20	12	21	26	15
Nevada	50	47	23	25	29	43
New Hampshire	25	34	7	9	24	16
New Jersey	8	36	14	16	30	17
New Mexico	49	12	28	30	18	28
New York	33	15	31	11	32	20
North Carolina	38	31	38	42	15	38
North Dakota	29	29	13	41	39	37
Ohio	17	27	32	44	31	34
Oklahoma	39	40	42	17	50	44
Oregon	20	4	27	1	2	4
Pennsylvania	37	23	25	43	28	36
Rhode Island	34	30	24	22	35	32
South Carolina	48	44	36	23	15	39
South Dakota	21	37	11	34	36	32
ennessee	43	45	47	49	23	47
exas	13	26	46	33	46	35
Jtah	44	48	20	14	1	24
/ermont	3	5	19	10	9	3
/irginia	17	17	29	47	20	22
Washington	11	2	15	5	3	1
West Virginia	36	41	40	31	43	45
Visconsin	14	7	7	13	10	6
Nyoming	27	43	1	20	27	25



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