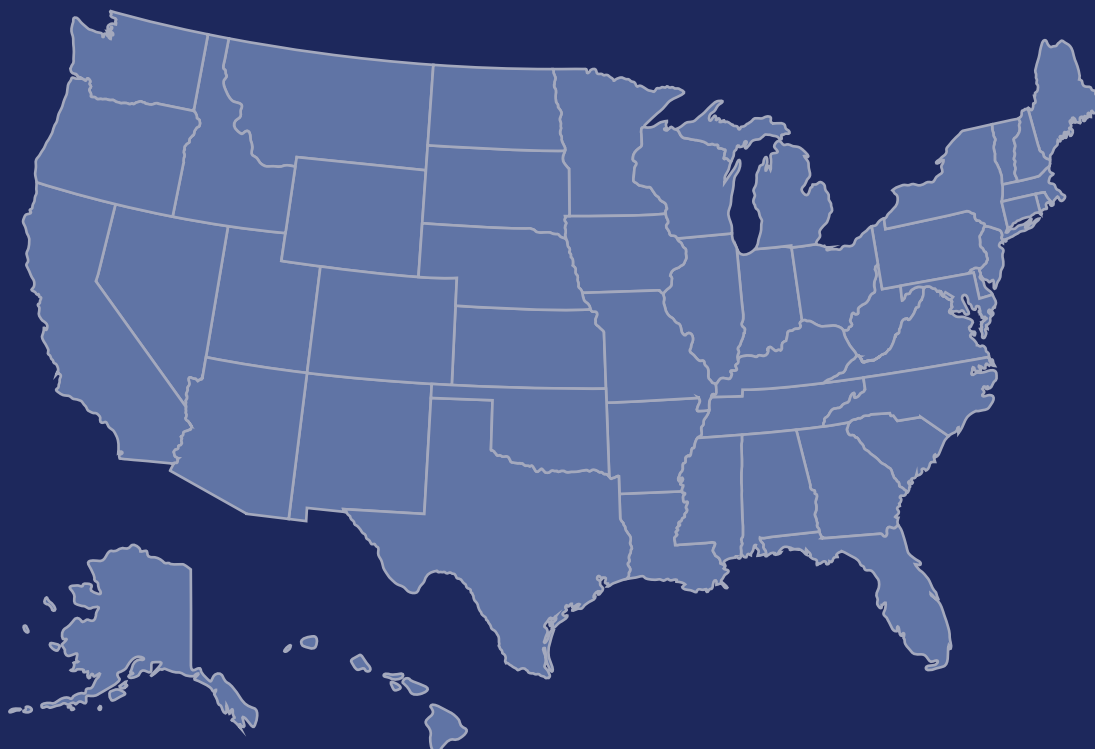


Long-Term Services and Supports State Scorecard  
2020 Edition

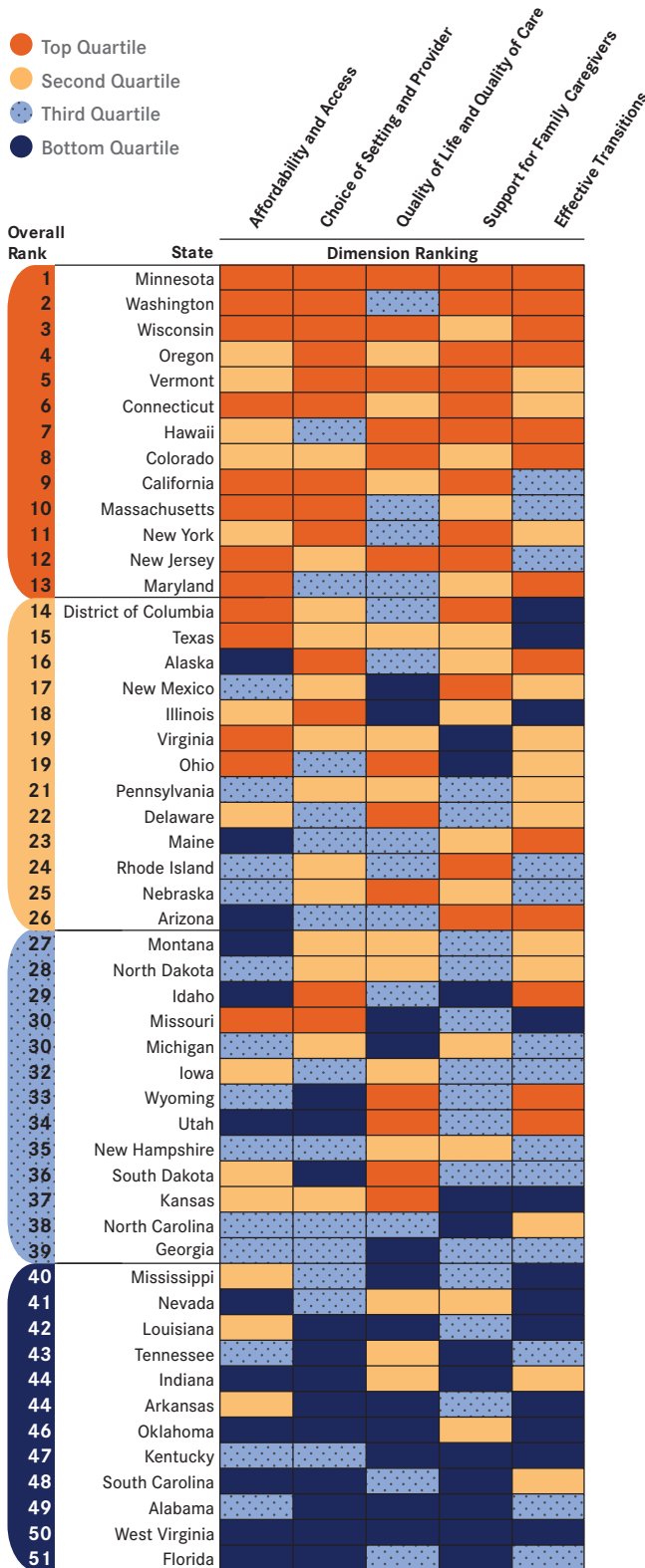
# APPENDICES



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## EXHIBIT A1 Matrix Heat Map: Overall Ranking



### How to Read the Heat Maps

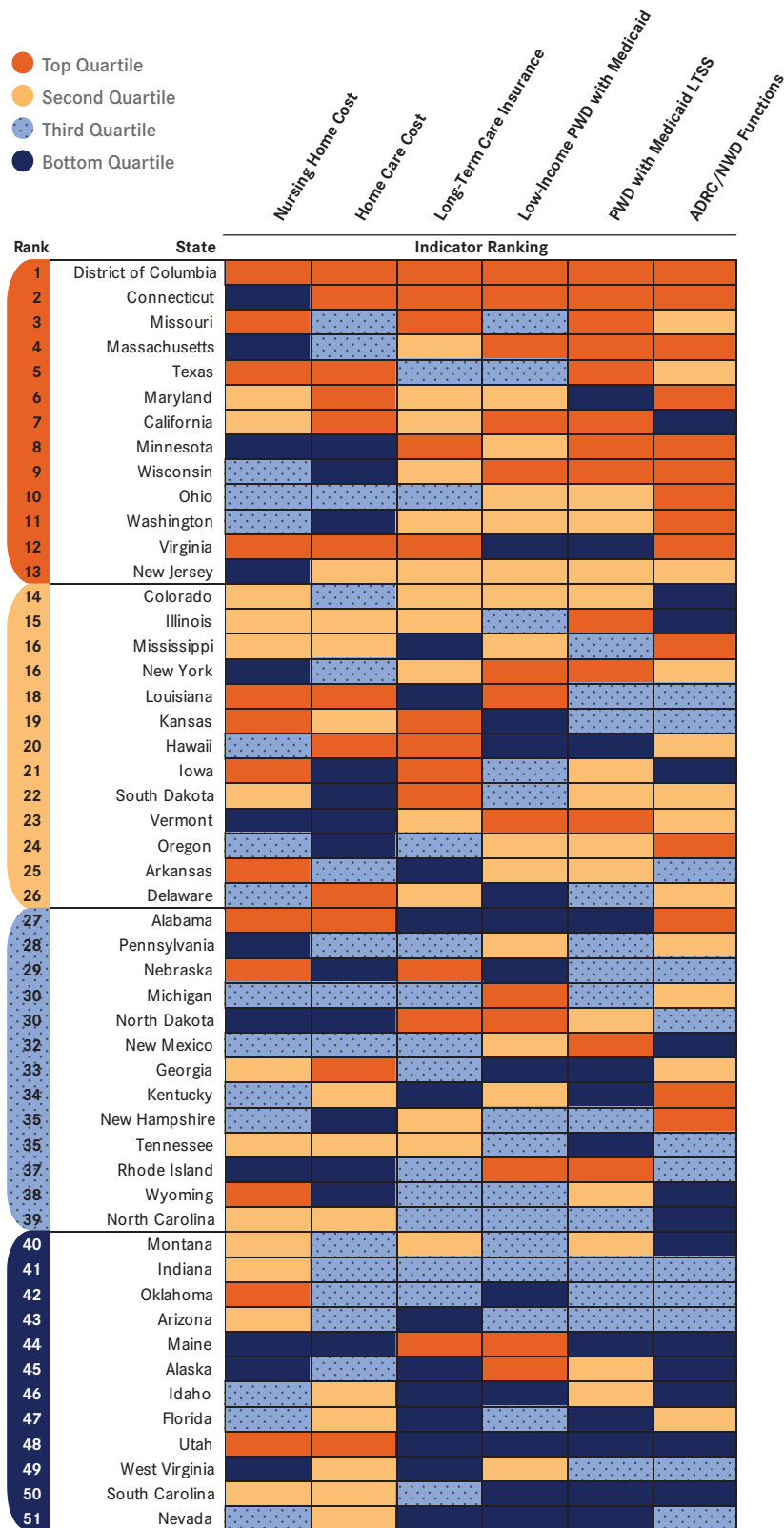
Matrix heat maps are our preferred method to visualize LTSS system performance multiple indicators or multiple dimensions in one image.

Like the geographic heat maps used within the report, the data are broken down into color-coded tiers of performance (usually quartiles, except for the Support for Family Caregivers dimension matrix heat map in Exhibit A5). Multiple columns show performance across indicators or dimension, and states are ordered from highest to lowest overall performance.

These heat maps use a divergent color scheme with two colors. This calls attention to both high and low performance. Dark shades identify the extremes of the performance spectrum (orange for high performance, and blue for poor), while light shades indicate an intermediate level of performance.

Source: Long-Term Services and Supports State Scorecard, 2020.

## EXHIBIT A2 Matrix Heat Map: Affordability and Access

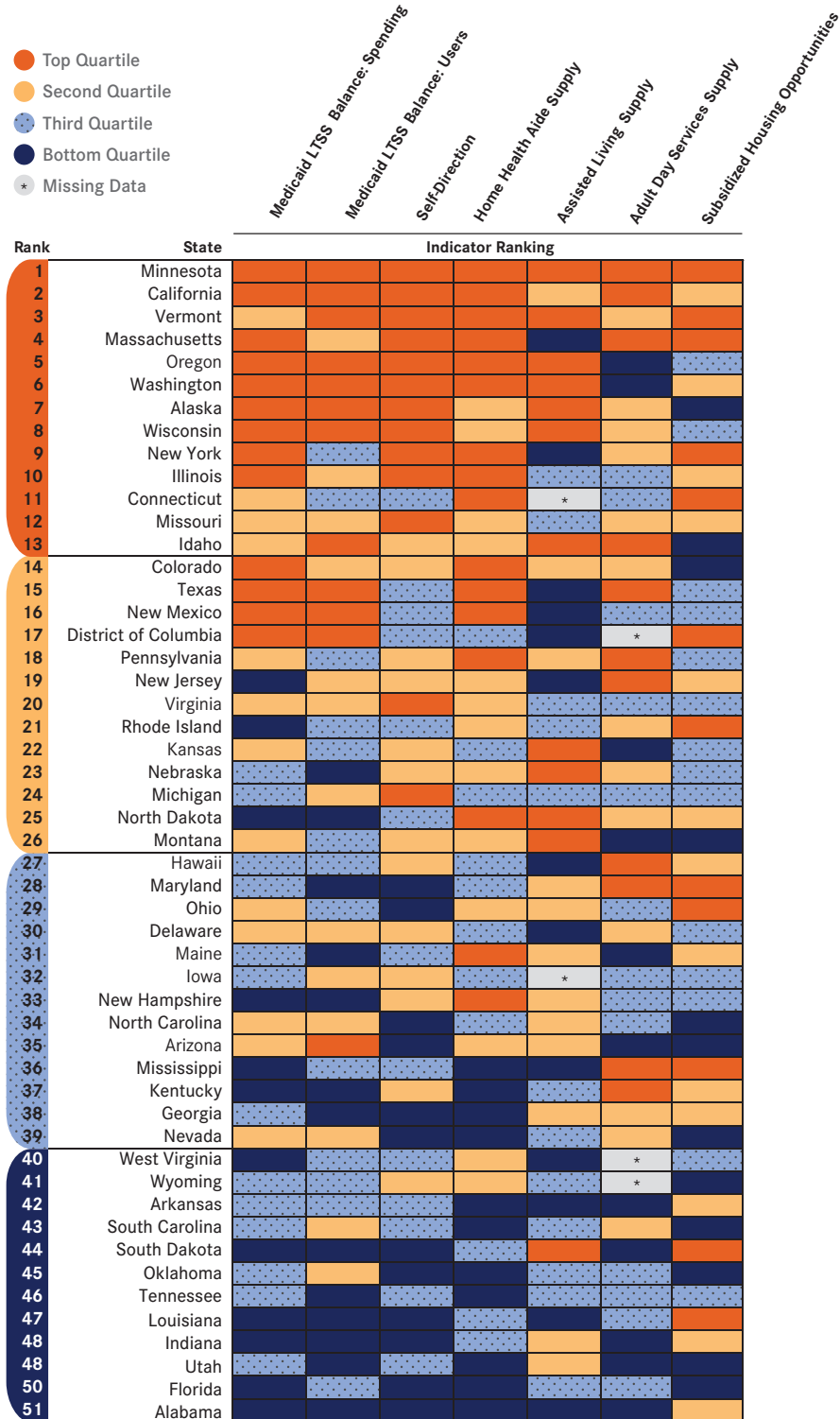


PWD = People with Disabilities.

ADRC/NWD = Aging and Disability Resource Center/No Wrong Door.

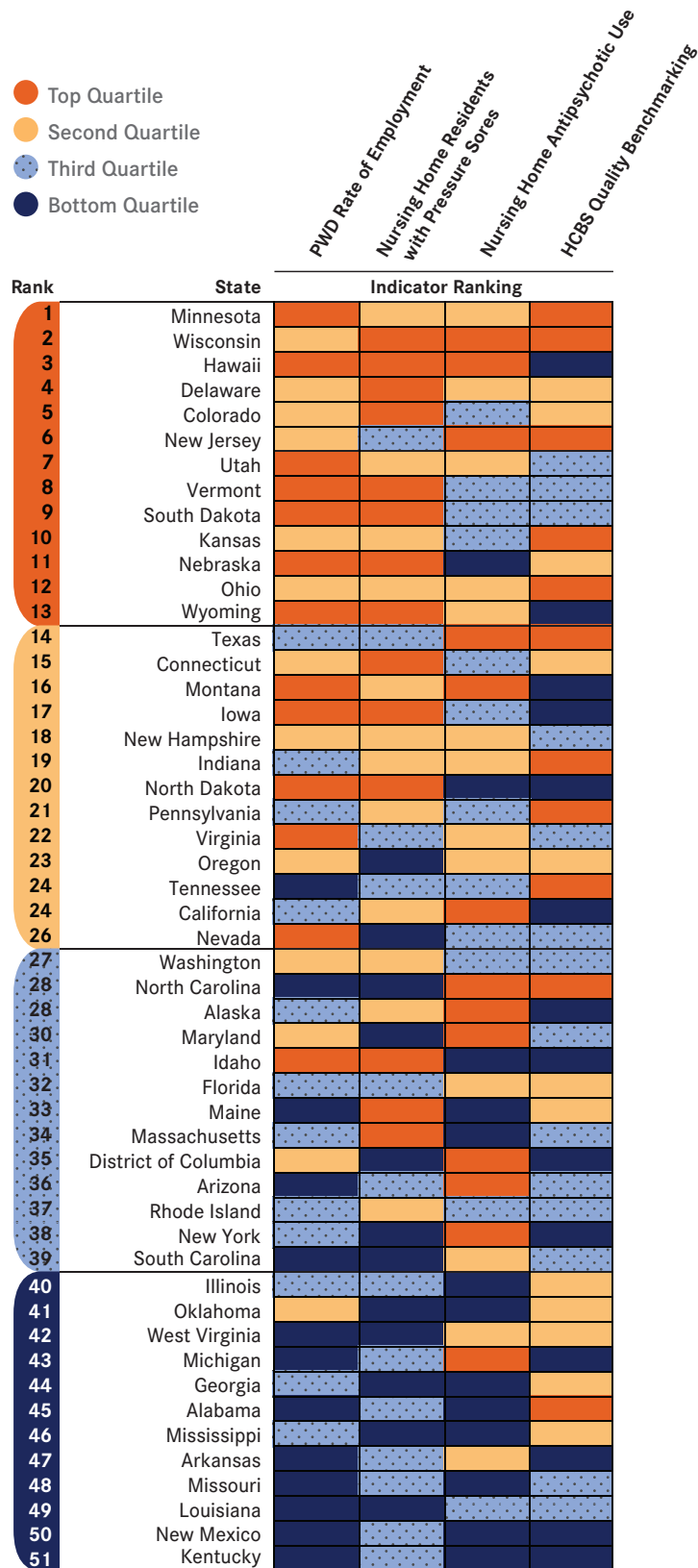
Source: Long-Term Services and Supports State Scorecard, 2020.

## EXHIBIT A3 Matrix Heat Map: Choice of Setting and Provider



Source: Long-Term Services and Supports State Scorecard, 2020.

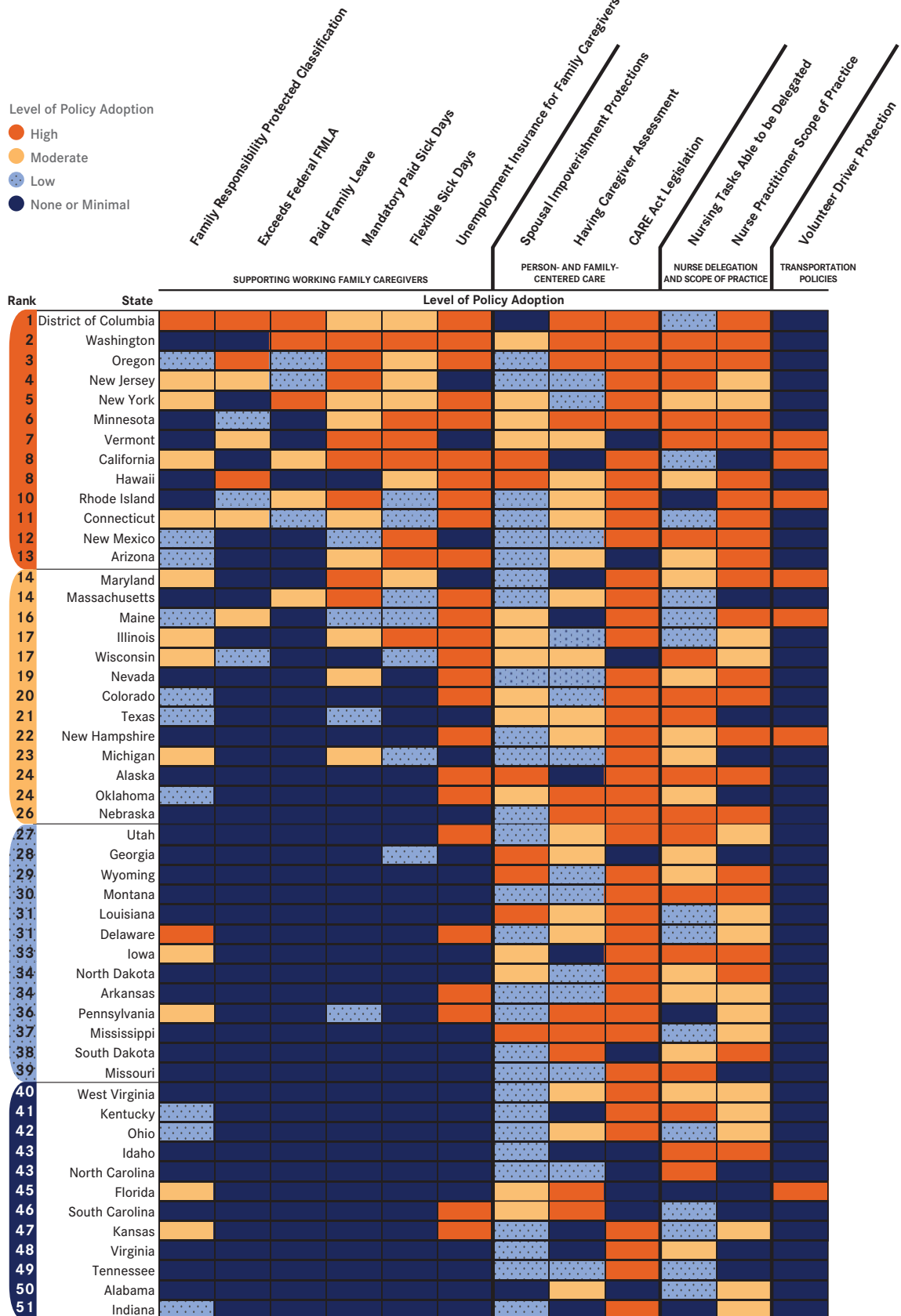
## EXHIBIT A4 Matrix Heat Map: Quality of Life and Quality of Care



PWD = People with Disabilities

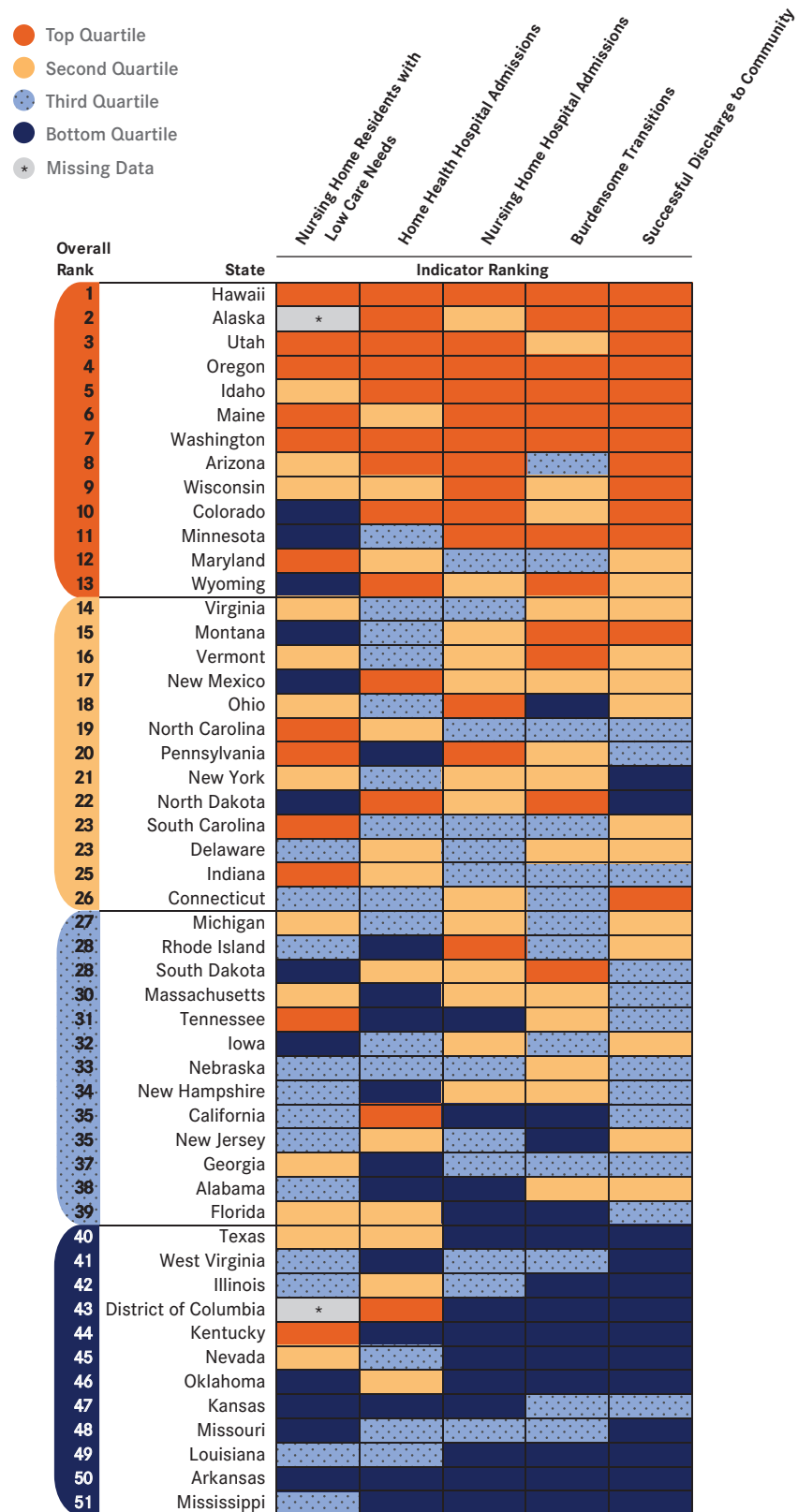
Source: Long-Term Services and Supports State Scorecard, 2020.

## EXHIBIT A5 Matrix Heat Map: Support for Family Caregivers



Source: Long-Term Services and Supports State Scorecard, 2020.

## EXHIBIT A6 Matrix Heat Map: Effective Transitions



Source: Long-Term Services and Supports State Scorecard, 2020.



## EXHIBIT A7 Change in State Performance: Number of States

Indicator	Performance Improvement	Performance Decline	No Significant Change	Missing Data
<b>Affordability and Access</b>				
Nursing Home Cost	1	6	44	0
Home Care Cost	0	6	45	0
Long-Term Care Insurance	0	24	27	0
Low-Income PWD with Medicaid	8	2	41	0
PWD with Medicaid LTSS	7	0	44	0
ADRC/NWD Functions	33	4	12	2
<b>Choice of Setting and Provider</b>				
Medicaid LTSS Balance: Spending	25	9	17	0
Medicaid LTSS Balance: Users	12	1	31	7
Home Health Aide Supply	5	3	43	0
Assisted Living Supply	3	1	43	4
Adult Day Services Supply	4	8	33	6
Subsidized Housing Opportunities	9	2	40	0
<b>Quality of Life and Quality of Care</b>				
PWD Rate of Employment	5	2	44	0
Nursing Home Antipsychotic Use	28	1	22	0
<b>Support for Family Caregivers</b>				
Supporting Working Family Caregivers	23	0	28	0
Person- and Family-Centered Care	29	5	17	0
Nurse Delegation and Scope of Practice	6	0	45	0
Transportation Policies	2	0	49	0
<b>Effective Transitions</b>				
Home Health Hospital Admissions	3	1	47	0
Nursing Home Hospital Admissions	8	1	42	0
Burdensome Transitions	15	3	33	0

Improvement or decline means a significant change (usually +/- 10% or equivalent) since a reference data year (usually three years prior). For some measures, a revised baseline is used, as the indicator definition or data source may have changed since the last Scorecard.

Source: Long-Term Services and Supports State Scorecard, 2020.

# EXHIBIT A8 Indicator Data: Affordability and Access

Median Annual Nursing Home Private Pay Cost as a Percentage of Median Household Income Ages 65+					Median Annual Home Care Private Pay Cost as a Percentage of Median Household Income Ages 65+				Private Long-Term Care Insurance Policies in Effect per 1,000 Population Ages 40+			
State	2015–16	2018–19	Rank	Change	2015–16	2018–19	Rank	Change	2015	2018	Rank	Change
<b>United States</b>	<b>243%</b>	<b>245%</b>		↔	<b>79%</b>	<b>80%</b>		↔	<b>47</b>	<b>43</b>		↔
Alabama	205%	208%	11	↔	72%	72%	9	↔	34	31	42	↔
Alaska	475%	638%	51	✗	71%	82%	25	✗	26	24	49	↔
Arizona	220%	224%	20	↔	76%	85%	32	✗	33	28	45	✗
Arkansas	204%	202%	9	↔	83%	82%	25	↔	31	27	48	✗
California	249%	232%	25	↔	77%	71%	7	↔	45	42	24	↔
Colorado	206%	216%	14	↔	78%	82%	25	↔	58	52	15	✗
Connecticut	334%	324%	45	↔	71%	70%	6	↔	66	63	9	↔
Delaware	265%	254%	32	↔	76%	76%	11	↔	59	51	17	✗
District of Columbia	199%	196%	8	↔	46%	51%	1	✗	146	138	1	↔
Florida	273%	281%	39	↔	78%	79%	18	↔	35	29	43	✗
Georgia	202%	222%	18	↔	72%	76%	11	↔	37	33	38	✗
Hawaii	225%	241%	30	↔	64%	67%	3	↔	114	110	3	↔
Idaho	233%	248%	31	↔	83%	78%	16	↔	33	28	45	✗
Illinois	209%	218%	15	↔	84%	81%	22	↔	57	53	13	↔
Indiana	237%	232%	25	↔	83%	85%	32	↔	38	34	37	✗
Iowa	171%	194%	7	✗	88%	91%	39	↔	102	91	6	✗
Kansas	174%	172%	2	↔	77%	81%	22	↔	85	78	8	↔
Kentucky	231%	239%	29	↔	85%	81%	22	↔	36	32	40	✗
Louisiana	191%	187%	6	↔	75%	71%	7	↔	36	32	40	✗
Maine	312%	325%	47	↔	102%	105%	50	↔	56	55	11	↔
Maryland	230%	222%	18	↔	59%	64%	2	↔	54	50	19	↔
Massachusetts	319%	311%	43	↔	89%	87%	35	↔	57	53	13	↔
Michigan	243%	267%	34	↔	81%	87%	35	↔	38	36	35	↔
Minnesota	224%	287%	40	✗	97%	103%	47	↔	85	79	7	↔
Mississippi	238%	229%	24	↔	84%	77%	13	↔	33	29	43	✗
Missouri	170%	168%	1	↔	80%	84%	30	↔	60	55	11	↔
Montana	222%	226%	21	↔	93%	89%	38	↔	56	50	19	✗
Nebraska	199%	209%	12	↔	93%	93%	41	↔	116	103	5	✗
Nevada	257%	236%	28	↔	74%	77%	13	↔	23	24	49	↔
New Hampshire	268%	280%	38	↔	83%	91%	39	↔	47	43	23	↔
New Jersey	290%	310%	42	↔	72%	78%	16	↔	51	48	21	↔
New Mexico	243%	270%	36	✗	85%	87%	35	↔	43	41	27	↔
New York	374%	324%	45	✓	89%	84%	30	↔	44	42	24	↔
North Carolina	233%	226%	21	↔	76%	77%	13	↔	43	38	32	✗
North Dakota	333%	328%	48	↔	97%	99%	46	↔	119	106	4	✗
Ohio	237%	234%	27	↔	83%	82%	25	↔	45	41	27	↔
Oklahoma	164%	177%	3	↔	85%	82%	25	↔	37	33	38	✗
Oregon	254%	269%	35	↔	84%	93%	41	✗	46	40	30	✗
Pennsylvania	305%	301%	41	↔	88%	86%	34	↔	43	39	31	↔
Rhode Island	303%	321%	44	↔	102%	104%	48	↔	40	38	32	↔
South Carolina	212%	226%	21	↔	77%	79%	18	↔	47	37	34	✗
South Dakota	205%	220%	16	↔	95%	116%	51	✗	120	111	2	↔
Tennessee	201%	220%	16	↔	76%	79%	18	↔	46	42	24	↔
Texas	184%	182%	5	↔	71%	73%	10	↔	41	35	36	✗
Utah	174%	181%	4	↔	69%	69%	4	↔	36	28	45	✗
Vermont	300%	338%	49	✗	99%	104%	48	↔	52	47	22	↔
Virginia	208%	211%	13	↔	61%	69%	4	✗	64	59	10	↔
Washington	252%	258%	33	↔	86%	94%	43	↔	69	51	17	✗
West Virginia	275%	354%	50	✗	73%	80%	21	↔	27	24	49	✗
Wisconsin	258%	277%	37	↔	89%	97%	45	↔	58	52	15	✗
Wyoming	197%	205%	10	↔	92%	96%	44	↔	44	41	27	↔

Key for Change: ✓ Performance improvement ↔ Little or no change in performance ✗ Performance decline \* No trend available

Source: Long-Term Services and Supports State Scorecard, 2020.

# EXHIBIT A8 Indicator Data: Affordability and Access (continued)

State	Percentage of Adults Ages 21+ with ADL Disability at or Below 250% of Poverty Receiving Medicaid or Other Government Assistance Health Insurance				Estimated Medicaid LTSS Users per 100 Population with ADL Disability				ADRC/No Wrong Door Functions (Composite Indicator, scale 0-100%)			
	2014–15	2016–18	Rank	Change	2014	2017	Rank	Change	2016	2019	Rank	Change
<b>United States</b>	<b>55.2%</b>	<b>56.7%</b>		↔	<b>44</b>	<b>46</b>		↔	<b>60%</b>	<b>66%</b>		✓
Alabama	46.9%	47.7%	46	↔	21	21	49	↔	78%	89%	8	✓
Alaska	69.1%	70.4%	2	↔	49	42	21	↔	46%	41%	46	✗
Arizona	49.9%	53.8%	29	↔	30	34	34	↔	51%	64%	28	✓
Arkansas	55.8%	57.5%	17	↔	45	42	21	↔	56%	57%	34	↔
California	66.8%	66.5%	6	↔	57	60	8	↔	0%	37%	47	*
Colorado	57.2%	56.9%	22	↔	45	49	16	↔	45%	52%	39	✓
Connecticut	62.8%	67.1%	5	✓	71	80	4	↔	87%	90%	7	✓
Delaware	49.2%	45.2%	49	↔	36	36	32	↔	73%	77%	22	✓
District of Columbia	78.1%	79.2%	1	↔	97	88	2	↔	74%	86%	10	✓
Florida	50.1%	51.1%	34	↔	24	24	47	↔	82%	82%	15	↔
Georgia	47.9%	48.7%	41	↔	24	27	45	↔	70%	81%	19	✓
Hawaii	56.6%	48.4%	43	✗	16	28	43	✓	68%	79%	20	✓
Idaho	54.1%	48.4%	43	✗	44	46	17	↔	38%	43%	44	✓
Illinois	48.7%	51.5%	32	↔	46	58	10	✓	47%	46%	41	↔
Indiana	49.8%	55.2%	27	✓	32	36	32	↔	41%	57%	34	✓
Iowa	50.5%	50.8%	35	↔	48	51	14	↔	0%	43%	44	*
Kansas	48.6%	48.2%	45	↔	36	34	34	↔	60%	63%	29	✓
Kentucky	53.4%	56.5%	25	↔	29	28	43	↔	72%	83%	12	✓
Louisiana	54.4%	59.0%	13	✓	32	33	38	↔	52%	56%	36	✓
Maine	63.6%	66.2%	7	↔	33	31	40	↔	51%	52%	39	↔
Maryland	51.4%	56.5%	25	✓	29	30	41	↔	80%	84%	11	✓
Massachusetts	67.7%	67.8%	4	↔	70	77	5	↔	88%	93%	3	✓
Michigan	60.0%	60.9%	10	↔	37	37	30	↔	70%	70%	26	↔
Minnesota	55.9%	57.5%	17	↔	81	83	3	↔	88%	92%	5	✓
Mississippi	57.9%	58.0%	16	↔	40	38	29	↔	72%	83%	12	✓
Missouri	50.0%	50.2%	37	↔	57	61	7	↔	81%	82%	15	↔
Montana	43.4%	49.4%	39	✓	33	40	26	✓	41%	44%	43	✓
Nebraska	50.9%	47.3%	47	↔	41	39	27	↔	48%	53%	38	✓
Nevada	49.6%	48.7%	41	↔	19	25	46	✓	56%	66%	27	✓
New Hampshire	47.4%	49.6%	38	↔	32	34	34	↔	88%	95%	2	✓
New Jersey	57.4%	56.9%	22	↔	46	51	14	↔	82%	82%	15	↔
New Mexico	54.7%	58.6%	14	↔	53	55	11	↔	29%	33%	48	✓
New York	67.4%	70.1%	3	↔	57	54	12	↔	50%	75%	23	✓
North Carolina	51.4%	52.4%	31	↔	34	34	34	↔	30%	24%	50	✗
North Dakota	51.8%	59.1%	12	✓	43	41	24	↔	52%	54%	37	↔
Ohio	55.0%	56.6%	24	↔	45	45	18	↔	86%	96%	1	✓
Oklahoma	38.8%	41.4%	51	↔	36	33	38	↔	59%	60%	32	↔
Oregon	57.3%	57.2%	19	↔	37	42	21	↔	77%	88%	9	✓
Pennsylvania	52.6%	57.2%	19	✓	37	39	27	↔	79%	82%	15	✓
Rhode Island	60.1%	65.7%	9	✓	54	54	12	↔	56%	62%	30	✓
South Carolina	44.7%	49.0%	40	↔	19	24	47	✓	44%	46%	41	↔
South Dakota	53.2%	50.8%	35	↔	38	41	24	↔	51%	78%	21	✓
Tennessee	47.0%	51.2%	33	↔	22	21	49	↔	33%	58%	33	✓
Texas	52.9%	52.9%	30	↔	73	71	6	↔	72%	74%	24	✓
Utah	44.3%	46.0%	48	↔	21	19	51	↔	30%	28%	49	↔
Vermont	67.4%	66.2%	7	↔	93	100	1	↔	79%	73%	25	✗
Virginia	43.1%	45.1%	50	↔	29	29	42	↔	73%	83%	12	✓
Washington	56.8%	58.2%	15	↔	39	44	19	↔	92%	93%	3	✓
West Virginia	56.7%	57.0%	21	↔	30	37	30	✓	61%	62%	30	↔
Wisconsin	57.7%	59.2%	11	↔	59	60	8	↔	79%	92%	5	✓
Wyoming	56.7%	54.4%	28	↔	35	43	20	✓	21%	13%	51	✗

Key for Change: ✓ Performance improvement ↔ Little or no change in performance ✗ Performance decline \* No trend available

Source: Long-Term Services and Supports State Scorecard, 2020.

# EXHIBIT A9 Indicator Data: Choice of Setting and Provider

State	Percentage of Medicaid- and State-Funded LTSS Spending Going to HCBS for Older People and Adults with Physical Disabilities				Estimated Percentage of Medicaid Aged/Disabled LTSS Users Receiving HCBS				Number of People Self-Directing Services per 1,000 Population with Disabilities		
	2013	2016	Rank	Change	2014	2017	Rank	Change	2019	Rank	Change
<b>United States</b>	<b>41.3%</b>	<b>45.1%</b>		✓	<b>61.7%</b>	<b>64.2%</b>		↔	<b>30.4</b>		*
Alabama	15.2%	14.8%	49	↔	31.2%	31.9%	50	↔	2.6	44	*
Alaska	63.2%	63.4%	6	↔	86.3%	83.9%	1	↔	35.2	12	*
Arizona	44.9%	44.7%	16	↔	76.6%	78.2%	10	↔	3.5	40	*
Arkansas	33.0%	33.9%	28	↔	52.4%	53.2%	31	↔	5.7	34	*
California	57.4%	57.0%	8	↔	78.7%	80.2%	7	↔	149.1	1	*
Colorado	47.8%	58.7%	7	✓	65.2%	68.5%	16	↔	15.0	19	*
Connecticut	29.8%	41.1%	20	✓	53.0%	54.6%	26	↔	8.0	30	*
Delaware	24.7%	35.6%	26	✓	*	55.5%	24	*	12.9	23	*
District of Columbia	57.7%	49.7%	13	✗	77.9%	80.4%	5	↔	8.0	30	*
Florida	25.6%	23.6%	44	✗	42.6%	47.0%	38	↔	1.7	47	*
Georgia	26.2%	29.6%	32	✓	49.7%	46.8%	39	↔	2.7	41	*
Hawaii	23.6%	27.8%	36	✓	*	54.3%	28	*	23.1	16	*
Idaho	44.1%	44.6%	17	↔	71.4%	80.0%	8	✓	11.6	26	*
Illinois	42.9%	54.6%	10	✓	58.9%	69.8%	13	✓	46.5	8	*
Indiana	20.0%	18.4%	47	↔	34.9%	38.1%	47	↔	0.4	51	*
Iowa	30.7%	26.4%	39	✗	51.8%	59.5%	21	✓	26.5	14	*
Kansas	40.8%	39.5%	21	↔	50.6%	54.2%	29	↔	24.4	15	*
Kentucky	15.6%	13.5%	51	✗	41.5%	41.1%	44	↔	13.7	21	*
Louisiana	30.2%	24.1%	43	✗	46.7%	40.0%	46	✗	1.9	46	*
Maine	34.2%	28.5%	34	✗	37.7%	36.8%	49	↔	5.5	36	*
Maryland	24.6%	28.5%	34	✓	38.5%	42.4%	43	↔	1.6	48	*
Massachusetts	52.0%	64.2%	5	✓	65.4%	68.6%	15	↔	49.2	6	*
Michigan	24.8%	31.5%	29	✓	63.2%	61.6%	19	↔	36.1	11	*
Minnesota	66.8%	69.9%	3	✓	77.4%	80.5%	4	✓	60.6	3	*
Mississippi	23.1%	25.5%	41	✓	51.0%	50.7%	34	↔	6.8	33	*
Missouri	39.3%	42.7%	18	✓	63.8%	65.2%	18	↔	47.2	7	*
Montana	36.8%	38.2%	24	↔	47.5%	54.4%	27	✓	16.2	18	*
Nebraska	27.7%	29.6%	32	↔	44.9%	45.5%	42	↔	12.8	24	*
Nevada	37.8%	38.4%	22	↔	67.0%	69.2%	14	↔	2.7	41	*
New Hampshire	19.0%	14.0%	50	✗	33.8%	41.0%	45	✓	12.6	25	*
New Jersey	18.2%	21.0%	46	✓	55.8%	65.3%	17	✓	20.6	17	*
New Mexico	64.4%	73.5%	1	✓	*	81.3%	2	*	10.9	27	*
New York	47.6%	53.3%	11	✓	43.9%	51.0%	33	✓	38.0	10	*
North Carolina	46.2%	41.9%	19	✗	64.8%	61.5%	20	↔	2.6	44	*
North Dakota	17.1%	17.3%	48	↔	29.1%	27.7%	51	↔	5.6	35	*
Ohio	33.3%	37.1%	25	✓	48.3%	49.3%	36	↔	1.5	50	*
Oklahoma	28.1%	30.4%	31	✓	54.2%	55.1%	25	↔	2.7	41	*
Oregon	62.1%	64.7%	4	✓	79.7%	80.3%	6	↔	49.6	5	*
Pennsylvania	28.9%	38.3%	23	✓	42.6%	47.7%	37	✓	13.3	22	*
Rhode Island	21.8%	24.4%	42	✓	*	50.6%	35	*	10.8	28	*
South Carolina	27.8%	31.2%	30	✓	55.5%	56.3%	23	↔	4.0	38	*
South Dakota	19.5%	21.9%	45	✓	35.2%	37.4%	48	↔	1.6	48	*
Tennessee	33.3%	35.0%	27	↔	*	46.2%	40	*	4.0	38	*
Texas	55.5%	55.8%	9	↔	*	79.4%	9	*	4.4	37	*
Utah	25.6%	26.6%	38	↔	46.1%	45.6%	41	↔	8.9	29	*
Vermont	44.5%	45.7%	15	↔	*	81.1%	3	*	51.3	4	*
Virginia	45.6%	48.6%	14	✓	55.3%	57.0%	22	↔	27.0	13	*
Washington	62.6%	71.5%	2	✓	73.5%	77.0%	11	✓	43.2	9	*
West Virginia	30.1%	26.3%	40	✗	49.8%	54.2%	29	↔	8.0	30	*
Wisconsin	51.9%	52.5%	12	↔	71.4%	75.5%	12	✓	64.0	2	*
Wyoming	21.8%	27.5%	37	✓	45.8%	51.3%	32	✓	14.5	20	*

Key for Change: ✓ Performance improvement ↔ Little or no change in performance ✗ Performance decline \* No trend available

Source: Long-Term Services and Supports State Scorecard, 2020.

# EXHIBIT A9 Indicator Data: Choice of Setting and Provider (continued)

Home Health and Personal Care Aides per 100 Population Ages 18+ with an ADL Disability					Assisted Living and Residential Care Units per 1,000 Population Ages 75+				Adult Day Services Total Licensed Capacity per 10,000 Population Ages 65+				Subsidized Housing Opportunities as a Percentage of All Housing Units			
State	2013–15	2016–18	Rank	Change	2014	2016	Rank	Change	2014	2016	Rank	Change	2015	2017–18	Rank	Change
United States	22	22		↔	51	49		↔	64	61		↔	5.9%	6.2%		↔
Alabama	10	8	51	✗	31	26	45	↔	10	9	43	↔	6.5%	6.5%	16	↔
Alaska	24	22	21	↔	80	89	4	↔	62	52	16	↔	3.9%	4.0%	49	↔
Arizona	20	20	23	↔	56	51	24	↔	11	8	44	✗	2.8%	2.9%	51	↔
Arkansas	13	14	41	↔	29	35	37	✓	24	14	41	✗	6.6%	6.5%	16	↔
California	28	29	5	↔	59	60	14	↔	178	171	1	↔	5.8%	6.1%	21	↔
Colorado	21	24	14	↔	54	52	22	↔	71	53	15	✗	4.4%	4.9%	41	✓
Connecticut	30	33	2	↔	*	*	*	*	42	34	25	↔	7.4%	8.6%	5	✓
Delaware	14	19	30	✓	33	30	43	↔	39	39	21	↔	5.4%	5.3%	35	↔
District of Columbia	17	16	37	↔	21	23	48	↔	*	*	*	*	17.7%	18.6%	1	↔
Florida	13	13	43	↔	44	47	27	↔	30	31	29	↔	4.3%	4.7%	43	↔
Georgia	11	11	47	↔	52	55	20	↔	38	38	22	↔	5.9%	6.2%	19	↔
Hawaii	13	15	39	↔	*	26	45	*	78	98	6	✓	5.8%	6.3%	18	↔
Idaho	31	23	17	✗	88	82	8	↔	*	71	8	*	4.4%	3.8%	50	✗
Illinois	23	24	14	↔	39	41	30	↔	28	21	34	✗	6.2%	6.6%	13	↔
Indiana	15	15	39	↔	50	52	22	↔	15	17	39	↔	5.7%	6.1%	21	↔
Iowa	19	16	37	↔	*	*	*	*	23	21	34	↔	5.8%	5.6%	31	↔
Kansas	21	19	30	↔	64	87	5	✓	*	8	44	*	5.6%	5.7%	29	↔
Kentucky	10	9	50	↔	47	39	32	↔	94	72	7	✗	5.9%	6.6%	13	✓
Louisiana	21	19	30	↔	20	20	49	↔	35	34	25	↔	6.8%	7.7%	7	✓
Maine	23	26	10	↔	63	61	13	↔	27	16	40	✗	6.5%	6.1%	21	↔
Maryland	14	18	33	✓	51	58	17	↔	128	122	4	↔	6.8%	7.6%	8	✓
Massachusetts	25	28	6	↔	30	34	39	↔	90	99	5	↔	9.0%	10.1%	4	✓
Michigan	17	18	33	↔	56	48	26	↔	20	23	32	↔	5.2%	5.5%	34	↔
Minnesota	34	33	2	↔	88	90	3	↔	79	66	10	↔	6.0%	6.9%	11	✓
Mississippi	10	10	49	↔	36	33	41	↔	120	67	9	✗	7.9%	7.8%	6	↔
Missouri	22	23	17	↔	49	43	29	↔	44	44	20	↔	6.0%	6.2%	19	↔
Montana	20	23	17	↔	83	80	9	↔	6	7	46	↔	4.8%	4.6%	45	↔
Nebraska	16	20	23	✓	90	73	10	↔	72	59	14	↔	6.0%	5.9%	28	↔
Nevada	13	12	45	↔	28	38	34	✓	40	36	24	↔	4.3%	4.7%	43	↔
New Hampshire	29	26	10	↔	55	59	15	↔	24	23	32	↔	5.3%	5.6%	31	↔
New Jersey	19	20	23	↔	36	35	37	↔	123	134	2	↔	6.0%	6.6%	13	✓
New Mexico	34	32	4	↔	32	34	39	↔	13	20	36	✓	4.9%	5.2%	38	↔
New York	42	47	1	↔	28	27	44	↔	40	45	19	↔	10.2%	10.5%	2	↔
North Carolina	16	17	35	↔	65	53	21	↔	33	31	29	↔	4.8%	4.9%	41	↔
North Dakota	16	25	12	✓	105	102	1	↔	10	48	17	✓	6.2%	6.1%	21	↔
Ohio	21	20	23	↔	54	59	15	↔	30	26	31	↔	6.7%	6.9%	11	↔
Oklahoma	14	12	45	↔	44	39	32	↔	33	34	25	↔	5.0%	5.1%	40	↔
Oregon	23	25	12	↔	121	95	2	✗	5	6	47	✓	5.7%	5.7%	29	↔
Pennsylvania	22	27	7	✓	64	58	17	↔	71	66	10	↔	5.1%	5.2%	38	↔
Rhode Island	17	20	23	↔	51	49	25	↔	57	61	12	↔	10.1%	10.4%	3	↔
South Carolina	13	14	41	↔	42	37	35	↔	47	46	18	↔	4.9%	4.6%	45	↔
South Dakota	15	17	35	↔	76	72	11	↔	29	18	38	✗	9.4%	7.6%	8	✗
Tennessee	13	13	43	↔	44	41	30	↔	17	20	36	↔	5.6%	6.0%	26	↔
Texas	27	27	7	↔	39	33	41	↔	130	125	3	↔	4.6%	5.3%	35	✓
Utah	12	11	47	↔	58	58	17	↔	*	6	47	*	4.3%	4.4%	48	↔
Vermont	31	27	7	↔	54	62	12	↔	63	61	12	↔	7.3%	7.2%	10	↔
Virginia	21	20	23	↔	56	45	28	↔	33	32	28	↔	5.4%	5.6%	31	↔
Washington	25	24	14	↔	103	85	6	↔	13	12	42	↔	6.1%	6.1%	21	↔
West Virginia	19	21	22	↔	26	24	47	↔	*	*	*	*	5.7%	6.0%	26	↔
Wisconsin	22	23	17	↔	92	84	7	↔	41	38	22	↔	5.1%	5.3%	35	↔
Wyoming	27	20	23	✗	*	37	35	*	*	*	*	*	4.7%	4.5%	47	↔

Key for Change: ✓ Performance improvement ↔ Little or no change in performance ✗ Performance decline \* No trend available

Source: Long-Term Services and Supports State Scorecard, 2020.

# EXHIBIT A10 Indicator Data: Quality of Life and Quality of Care

State	Rate of Employment for Adults with ADL Disability Ages 18-64 Relative to Rate of Employment for Adults without ADL Disability Ages 18-64				Percentage of High-Risk Nursing Home Residents with Pressure Sores		
	2013–15	2016–18	Rank	Change	2018	Rank	Change
<b>United States</b>	<b>21.4%</b>	<b>21.4%</b>		↔	<b>7.3%</b>		*
Alabama	18.4%	15.5%	51	↔	7.5%	27	*
Alaska	29.0%	19.6%	38	✗	5.9%	15	*
Arizona	21.1%	17.8%	46	↔	7.7%	32	*
Arkansas	17.9%	16.5%	49	↔	7.7%	32	*
California	21.4%	21.5%	27	↔	7.0%	25	*
Colorado	22.9%	24.9%	15	↔	5.6%	10	*
Connecticut	25.2%	23.5%	21	↔	5.3%	3	*
Delaware	20.8%	22.8%	24	↔	5.4%	6	*
District of Columbia	20.4%	23.5%	21	↔	13.0%	51	*
Florida	19.8%	20.6%	33	↔	7.9%	35	*
Georgia	20.0%	21.3%	28	↔	9.0%	47	*
Hawaii	26.0%	26.9%	11	↔	5.2%	2	*
Idaho	18.6%	28.4%	8	✓	5.8%	13	*
Illinois	22.4%	21.1%	32	↔	7.5%	27	*
Indiana	20.3%	21.3%	28	↔	7.1%	26	*
Iowa	30.0%	26.6%	12	↔	5.3%	3	*
Kansas	28.1%	25.5%	14	↔	6.1%	17	*
Kentucky	15.7%	16.9%	48	↔	8.3%	37	*
Louisiana	17.4%	19.2%	39	↔	8.8%	44	*
Maine	18.9%	17.6%	47	↔	5.4%	6	*
Maryland	28.3%	24.3%	18	↔	8.9%	46	*
Massachusetts	21.3%	21.3%	28	↔	5.7%	12	*
Michigan	18.1%	18.6%	44	↔	7.7%	32	*
Minnesota	33.3%	31.1%	4	↔	5.9%	15	*
Mississippi	16.5%	19.8%	37	✓	9.3%	48	*
Missouri	18.8%	18.9%	41	↔	7.9%	35	*
Montana	30.4%	27.1%	10	↔	6.3%	19	*
Nebraska	28.4%	27.7%	9	↔	5.6%	10	*
Nevada	36.5%	34.9%	2	↔	8.6%	41	*
New Hampshire	24.7%	24.7%	16	↔	6.1%	17	*
New Jersey	24.2%	23.6%	19	↔	8.3%	37	*
New Mexico	22.1%	19.2%	39	↔	8.3%	37	*
New York	22.4%	20.3%	36	↔	8.6%	41	*
North Carolina	19.5%	18.8%	42	↔	9.8%	50	*
North Dakota	25.3%	38.1%	1	✓	4.8%	1	*
Ohio	23.0%	21.9%	26	↔	6.7%	23	*
Oklahoma	24.3%	24.7%	16	↔	9.6%	49	*
Oregon	23.8%	23.6%	19	↔	8.5%	40	*
Pennsylvania	20.5%	20.6%	33	↔	6.9%	24	*
Rhode Island	20.6%	20.4%	35	↔	6.4%	20	*
South Carolina	19.6%	18.1%	45	↔	8.6%	41	*
South Dakota	29.6%	32.6%	3	↔	5.5%	9	*
Tennessee	16.1%	18.7%	43	↔	7.5%	27	*
Texas	21.4%	21.3%	28	↔	7.6%	31	*
Utah	27.7%	30.2%	6	↔	6.4%	20	*
Vermont	19.3%	30.8%	5	✓	5.4%	6	*
Virginia	22.2%	26.3%	13	✓	7.5%	27	*
Washington	22.6%	23.4%	23	↔	6.6%	22	*
West Virginia	18.6%	16.4%	50	↔	8.8%	44	*
Wisconsin	22.7%	22.1%	25	↔	5.8%	13	*
Wyoming	34.1%	29.2%	7	✗	5.3%	3	*

Key for Change: ✓ Performance improvement ↔ Little or no change in performance ✗ Performance decline \* No trend available

Source: Long-Term Services and Supports State Scorecard, 2020.

# EXHIBIT A10 Indicator Data: Quality of Life and Quality of Care (continued)

Percentage of Long-Stay Nursing Home Residents Who Inappropriately Receive Antipsychotic Medication					HCBS Quality Cross-State Benchmarking Capability		
State	2015	2018	Rank	Change	2015–19	Rank	Change
United States	17.3%	14.6%		✓	1.3		*
Alabama	19.9%	20.2%	51	↔	2.2	11	*
Alaska	14.5%	11.6%	6	✓	0	38	*
Arizona	17.4%	12.5%	10	✓	1.0	31	*
Arkansas	16.9%	14.0%	19	✓	0	38	*
California	13.2%	10.8%	4	✓	0	38	*
Colorado	15.4%	15.0%	29	↔	2.0	12	*
Connecticut	17.3%	16.5%	37	↔	1.5	20	*
Delaware	13.3%	13.6%	15	↔	1.6	16	*
District of Columbia	13.3%	10.0%	3	✓	0	38	*
Florida	17.5%	14.0%	19	✓	1.5	20	*
Georgia	19.8%	18.1%	46	✓	2.0	12	*
Hawaii	8.0%	7.8%	1	↔	0	38	*
Idaho	16.8%	17.7%	43	↔	0	38	*
Illinois	20.3%	18.7%	48	↔	1.5	20	*
Indiana	16.4%	14.4%	24	✓	2.5	8	*
Iowa	16.5%	14.6%	27	✓	0	38	*
Kansas	19.9%	16.5%	37	✓	2.7	6	*
Kentucky	20.2%	17.3%	39	✓	0	38	*
Louisiana	21.5%	15.8%	34	✓	0.6	37	*
Maine	17.8%	17.4%	42	↔	1.6	16	*
Maryland	14.1%	12.2%	8	✓	1.0	31	*
Massachusetts	18.9%	17.8%	44	↔	1.0	31	*
Michigan	13.4%	13.0%	13	↔	0	38	*
Minnesota	13.5%	13.3%	14	↔	3.5	2	*
Mississippi	21.1%	18.2%	47	✓	2.0	12	*
Missouri	19.4%	18.8%	49	↔	1.2	24	*
Montana	15.0%	12.8%	11	✓	0	38	*
Nebraska	19.4%	17.3%	39	✓	1.6	16	*
Nevada	16.6%	15.1%	30	✓	1.2	24	*
New Hampshire	17.2%	14.1%	21	✓	1.0	31	*
New Jersey	12.9%	9.6%	2	✓	2.5	8	*
New Mexico	16.6%	17.3%	39	↔	0	38	*
New York	15.6%	11.2%	5	✓	0	38	*
North Carolina	14.4%	12.0%	7	✓	3.0	5	*
North Dakota	18.5%	17.8%	44	↔	0	38	*
Ohio	19.6%	14.4%	24	✓	3.1	3	*
Oklahoma	19.8%	18.9%	50	↔	1.8	15	*
Oregon	17.4%	14.3%	23	✓	1.6	16	*
Pennsylvania	16.4%	15.5%	32	↔	2.7	6	*
Rhode Island	17.2%	16.1%	35	↔	0.8	36	*
South Carolina	14.2%	13.6%	15	↔	1.2	24	*
South Dakota	16.7%	16.3%	36	↔	1.2	24	*
Tennessee	20.0%	14.9%	28	✓	3.6	1	*
Texas	20.8%	12.8%	11	✓	2.5	8	*
Utah	17.9%	13.7%	17	✓	1.2	24	*
Vermont	16.8%	15.7%	33	↔	1.2	24	*
Virginia	17.1%	14.2%	22	✓	1.0	31	*
Washington	16.1%	15.1%	30	↔	1.2	24	*
West Virginia	16.1%	13.9%	18	✓	1.5	20	*
Wisconsin	12.9%	12.2%	8	↔	3.1	3	*
Wyoming	12.4%	14.4%	24	✗	0	38	*

Key for Change: ✓ Performance improvement ↔ Little or no change in performance ✗ Performance decline \* No trend available

Source: Long-Term Services and Supports State Scorecard, 2020.

# EXHIBIT A 11 Indicator Data: Support for Family Caregivers (Policy-Level Scores)

Supporting Working Family Caregivers												
Family Responsibility Protected Classification (out of 2.0)		Exceeds Federal FMLA (out of 4.0)		Paid Family Leave (out of 4.0)		Mandatory Paid Sick Days (out of 3.0)		Flexible Sick Days (out of 3.0)		Unemployment Insurance for Family Caregivers (out of 1.0)		
State	2014	2019	2016	2019	2016	2019	2016	2019	2016	2019	2016	2019
United States	0.23	0.29	0.29	0.29	0.25	0.50	0.51	0.85	0.58	0.75	0.49	0.49
Alabama	0	0	0	0	0	0	0	0	0	0	0	0
Alaska	0	0	0	0	0	0	0	0	0	0	1.00	1.00
Arizona	0	0.30	0	0	0	0	1.00	2.00	1.13	2.25	1.00	1.00
Arkansas	0	0	0	0	0	0	0	0	0	0	1.00	1.00
California	0	0.60	0.75	0	3.25	3.25	2.50	2.50	2.25	2.25	1.00	1.00
Colorado	0.30	0.30	0	0	0	0	0	0	0	0	1.00	1.00
Connecticut	1.00	1.00	1.75	1.75	0	2.00	2.00	2.00	1.00	1.00	1.00	1.00
Delaware	2.00	2.00	0	0	0	0	0	0	0	0	1.00	1.00
District of Columbia	2.00	2.00	3.00	3.00	1.75	3.50	2.00	2.00	2.00	2.00	1.00	1.00
Florida	0.60	0.60	0	0	0	0	0	0	0	0	0	0
Georgia	0	0	0	0	0	0	0	0	0.63	1.25	0	0
Hawaii	0	0	2.00	2.00	0	0	0	0	2.00	2.00	1.00	1.00
Idaho	0	0	0	0	0	0	0	0	0	0	0	0
Illinois	0.60	0.60	0	0	0	0	1.00	2.00	2.25	2.25	1.00	1.00
Indiana	0	0.30	0	0	0	0	0	0	0	0	0	0
Iowa	0	0.60	0	0	0	0	0	0	0	0	0	0
Kansas	0.60	0.60	0	0	0	0	0	0	0	0	1.00	1.00
Kentucky	0.30	0.30	0	0	0	0	0	0	0	0	0	0
Louisiana	0	0	0	0	0	0	0	0	0	0	0	0
Maine	0.30	0.30	1.25	1.25	0	0	0	1.50	1.00	1.00	1.00	1.00
Maryland	0.60	0.60	0	0	0	0	1.50	2.50	2.00	2.00	0	0
Massachusetts	0	0	0	0	0	3.25	2.50	2.50	1.75	1.75	1.00	1.00
Michigan	0.60	0.60	0	0	0	0	0	2.00	0	1.00	0	0
Minnesota	0	0	0.50	0.50	0	0	1.00	2.00	2.25	2.25	1.00	1.00
Mississippi	0	0	0	0	0	0	0	0	0	0	0	0
Missouri	0	0	0	0	0	0	0	0	0	0	0	0
Montana	0	0	0	0	0	0	0	0	0	0	0	0
Nebraska	0	0	0	0	0	0	0	0	0	0	0	0
Nevada	0	0	0	0	0	0	0	2.00	0	0	1.00	1.00
New Hampshire	0	0	0	0	0	0	0	0	0	0	1.00	1.00
New Jersey	0.60	0.60	0.50	1.75	1.50	2.50	2.00	3.00	2.00	2.00	0	0
New Mexico	0	0.30	0	0	0	0	0	1.50	0	3.00	0	0
New York	0.60	0.60	0	0	1.50	3.50	2.00	2.00	1.00	2.00	1.00	1.00
North Carolina	0	0	0	0	0	0	0	0	0	0	0	0
North Dakota	0	0	0	0	0	0	0	0	0	0	0	0
Ohio	0.30	0.30	0	0	0	0	0	0	0	0	0	0
Oklahoma	0	0.30	0	0	0	0	0	0	0	0	1.00	1.00
Oregon	0.30	0.30	2.00	2.00	0	1.50	2.50	2.50	2.00	2.00	1.00	1.00
Pennsylvania	0.60	0.60	0	0	0	0	1.50	1.50	0	0	1.00	1.00
Rhode Island	0	0	0.50	0.50	2.75	2.75	0	2.50	0	1.75	1.00	1.00
South Carolina	0	0	0	0	0	0	0	0	0	0	1.00	1.00
South Dakota	0	0	0	0	0	0	0	0	0	0	0	0
Tennessee	0	0	0	0	0	0	0	0	0	0	0	0
Texas	0.30	0.30	0	0	0	0	0	1.50	0	0	0	0
Utah	0	0	0	0	0	0	0	0	0	0	1.00	1.00
Vermont	0	0	1.25	1.25	0	0	2.50	3.00	2.25	2.25	0	0
Virginia	0	0	0	0	0	0	0	0	0	0	0	0
Washington	0	0	0.75	0	1.75	3.50	2.00	3.00	2.75	2.75	1.00	1.00
West Virginia	0	0	0	0	0	0	0	0	0	0	0	0
Wisconsin	0	0.60	0.75	0.75	0	0	0	0	1.25	1.25	1.00	1.00
Wyoming	0	0	0	0	0	0	0	0	0	0	0	0

Source: Long-Term Services and Supports State Scorecard, 2020.



# **EXHIBIT A11** Indicator Data: Support for Family Caregivers (Policy-Level Scores) (continued)

Person- and Family-Centered Care							Nurse Delegation and Scope of Practice				Transportation Policies	
	Spousal Impoverishment Protections (out of 2.0)		Having Caregiver Assessment (out of 2.5)		CARE Act Legislation (out of 1.0)		Nursing Tasks Able to be Delegated (out of 4.0)		Nurse Practitioner Scope of Practice (out of 1.0)		Volunteer Driver Protection (out of 1.0)	
State	2016	2019	2016	2019	2016	2019	2016	2019	2016	2019	2015-16	2019
United States	0.92	0.90	0.97	1.34	0.63	0.80	2.66	2.69	0.59	0.61	0.10	0.14
Alabama	0.51	0	1.60	1.60	0	0	0.50	0.50	0.50	0.50	0	0
Alaska	2.00	2.00	0	0	1.00	1.00	4.00	4.00	1.00	1.00	0	0
Arizona	0.50	0.50	1.60	1.60	0	0	3.50	3.50	1.00	1.00	0	0
Arkansas	0.50	0.50	0	1.00	1.00	1.00	3.50	3.50	0.50	0.50	0	0
California	2.00	2.00	0	0	1.00	1.00	0.50	0.50	0	0	1.00	1.00
Colorado	1.50	1.50	1.00	1.00	1.00	1.00	4.00	4.00	1.00	1.00	0	0
Connecticut	0.50	0.50	0	1.60	1.00	1.00	0.50	0.50	1.00	1.00	0	0
Delaware	0.51	0.50	1.90	1.90	1.00	1.00	0.75	0.75	0.50	0.50	0	0
District of Columbia	1.00	0	1.60	2.20	1.00	1.00	2.50	2.50	1.00	1.00	0	0
Florida	1.50	1.50	1.60	2.20	0	0	0	0	0	0	1.00	1.00
Georgia	2.00	2.00	1.90	1.60	0	0	3.50	3.50	0	0	0	0
Hawaii	1.65	2.00	1.60	1.60	1.00	1.00	3.50	3.50	1.00	1.00	0	0
Idaho	0.50	0.50	0	0	0	0	4.00	4.00	1.00	1.00	0	0
Illinois	2.00	1.63	1.30	1.30	1.00	1.00	0.50	0.50	0.50	0.50	0	0
Indiana	0.50	0.50	0	0	1.00	1.00	0	0	0.50	0.50	0	0
Iowa	1.00	1.00	0	0	0	1.00	4.00	4.00	1.00	1.00	0	0
Kansas	0.50	0.50	0	0	0	1.00	1.50	1.50	0.50	0.50	0	0
Kentucky	0.50	0.50	0	0	0	1.00	4.00	4.00	0.50	0.50	0	0
Louisiana	2.00	2.00	1.60	1.90	1.00	1.00	2.00	2.25	0.50	0.50	0	0
Maine	1.50	1.50	0	0	1.00	1.00	2.25	2.25	1.00	1.00	1.00	1.00
Maryland	0.50	0.50	0	0	1.00	1.00	3.50	3.50	1.00	1.00	0	1.00
Massachusetts	1.50	0.50	1.60	1.60	1.00	1.00	0.50	0.50	0	0	0	0
Michigan	0.50	0.50	1.00	1.00	1.00	1.00	3.25	3.25	0	0	0	0
Minnesota	0.60	1.50	2.20	2.50	1.00	1.00	4.00	4.00	1.00	1.00	0	0
Mississippi	2.00	2.00	1.00	2.50	1.00	1.00	1.25	1.25	0.50	0.50	0	0
Missouri	0.50	0.50	0	1.30	0	1.00	4.00	4.00	0	0	0	0
Montana	0.50	0.50	1.00	1.30	0	1.00	4.00	4.00	1.00	1.00	0	0
Nebraska	0.50	0.50	2.20	2.20	1.00	1.00	4.00	4.00	1.00	1.00	0	0
Nevada	0.50	0.50	1.00	1.30	1.00	1.00	3.75	3.75	1.00	1.00	0	0
New Hampshire	0.50	0.50	1.60	1.90	1.00	1.00	3.25	3.25	1.00	1.00	1.00	1.00
New Jersey	0.50	0.50	0	1.30	1.00	1.00	3.50	4.00	0.50	0.50	0	0
New Mexico	0.58	0.53	0	1.00	1.00	1.00	4.00	4.00	1.00	1.00	0	0
New York	1.53	1.49	0	1.00	1.00	1.00	2.75	2.75	0.50	0.50	0	0
North Carolina	0.50	0.50	1.00	1.00	0	0	4.00	4.00	0	0	0	0
North Dakota	0.28	1.00	1.00	1.00	0	1.00	3.50	3.50	0.50	1.00	0	0
Ohio	0.50	0.50	1.00	1.60	0	1.00	1.75	1.75	0.50	0.50	0	0
Oklahoma	1.01	1.00	1.30	2.20	1.00	1.00	3.50	3.50	0	0	0	0
Oregon	0.50	0.50	1.00	2.50	1.00	1.00	4.00	4.00	1.00	1.00	0	0
Pennsylvania	0.50	0.50	1.90	2.20	1.00	1.00	0	0	0.50	0.50	0	0
Rhode Island	0.50	0.50	1.00	1.60	1.00	1.00	0	0	1.00	1.00	0	1.00
South Carolina	1.45	1.41	1.90	2.20	0	0	0.25	0.50	0	0	0	0
South Dakota	0.50	0.50	2.20	2.20	0	0	3.25	3.25	0.50	1.00	0	0
Tennessee	0.50	0.50	1.00	1.30	0	1.00	0.50	0.50	0	0	0	0
Texas	1.00	1.00	2.20	1.90	0	1.00	4.00	4.00	0	0	0	0
Utah	0.50	0.50	1.60	1.60	1.00	1.00	4.00	4.00	0.50	0.50	0	0
Vermont	1.50	1.47	0	1.60	0	0	4.00	4.00	1.00	1.00	1.00	1.00
Virginia	0.50	0.50	0	0	1.00	1.00	3.00	3.00	0	0	0	0
Washington	0.82	0.80	2.50	2.50	1.00	1.00	4.00	4.00	1.00	1.00	0	0
West Virginia	0.50	0.50	0	1.60	1.00	1.00	3.00	3.00	0.50	0.50	0	0
Wisconsin	1.11	1.08	1.30	1.60	0	0	3.50	4.00	0.50	0.50	0	0
Wyoming	2.00	2.00	1.30	1.30	1.00	1.00	2.75	2.75	1.00	1.00	0	0

Source: Long-Term Services and Supports State Scorecard, 2020.

# EXHIBIT A12 Indicator Data: Support for Family Caregivers (Category Totals)

Supporting Working Family Caregivers				Person- and Family-Centered Care			Nurse Delegation and Scope of Practice		
State	2014–16	2019	Change	2016	2019	Change	2016	2019	Change
<b>United States</b>	<b>2.35</b>	<b>3.17</b>	<b>✓</b>	<b>2.52</b>	<b>3.04</b>	<b>✓</b>	<b>3.25</b>	<b>3.30</b>	<b>↔</b>
Alabama	0	0	↔	2.11	1.60	✗	1.00	1.00	↔
Alaska	1.00	1.00	↔	3.00	3.00	↔	5.00	5.00	↔
Arizona	3.13	5.55	✓	2.10	2.10	↔	4.50	4.50	↔
Arkansas	1.00	1.00	↔	1.50	2.50	✓	4.00	4.00	↔
California	9.75	9.60	↔	3.00	3.00	↔	0.50	0.50	↔
Colorado	1.30	1.30	↔	3.50	3.50	↔	5.00	5.00	↔
Connecticut	6.75	8.75	✓	1.50	3.10	✓	1.50	1.50	↔
Delaware	3.00	3.00	↔	3.41	3.40	↔	1.25	1.25	↔
District of Columbia	11.75	13.50	✓	3.60	3.20	✗	3.50	3.50	↔
Florida	0.60	0.60	↔	3.10	3.70	✓	0	0	↔
Georgia	0.63	1.25	✓	3.90	3.60	✗	3.50	3.50	↔
Hawaii	5.00	5.00	↔	4.25	4.60	✓	4.50	4.50	↔
Idaho	0	0	↔	0.50	0.50	↔	5.00	5.00	↔
Illinois	4.85	5.85	✓	4.30	3.93	✗	1.00	1.00	↔
Indiana	0	0.30	✓	1.50	1.50	↔	0.50	0.50	↔
Iowa	0	0.60	✓	1.00	2.00	✓	5.00	5.00	↔
Kansas	1.60	1.60	↔	0.50	1.50	✓	2.00	2.00	↔
Kentucky	0.30	0.30	↔	0.50	1.50	✓	4.50	4.50	↔
Louisiana	0	0	↔	4.60	4.90	✓	2.50	2.75	✓
Maine	3.55	5.05	✓	2.50	2.50	↔	3.25	3.25	↔
Maryland	4.10	5.10	✓	1.50	1.50	↔	4.50	4.50	↔
Massachusetts	5.25	8.50	✓	4.10	3.10	✗	0.50	0.50	↔
Michigan	0.60	3.60	✓	2.50	2.50	↔	3.25	3.25	↔
Minnesota	4.75	5.75	✓	3.80	5.00	✓	5.00	5.00	↔
Mississippi	0	0	↔	4.00	5.50	✓	1.75	1.75	↔
Missouri	0	0	↔	0.50	2.80	✓	4.00	4.00	↔
Montana	0	0	↔	1.50	2.80	✓	5.00	5.00	↔
Nebraska	0	0	↔	3.70	3.70	↔	5.00	5.00	↔
Nevada	1.00	3.00	✓	2.50	2.80	✓	4.75	4.75	↔
New Hampshire	1.00	1.00	↔	3.10	3.40	✓	4.25	4.25	↔
New Jersey	6.60	9.85	✓	1.50	2.80	✓	4.00	4.50	✓
New Mexico	0	4.80	✓	1.58	2.53	✓	5.00	5.00	↔
New York	6.10	9.10	✓	2.53	3.49	✓	3.25	3.25	↔
North Carolina	0	0	↔	1.50	1.50	↔	4.00	4.00	↔
North Dakota	0	0	↔	1.28	3.00	✓	4.00	4.50	✓
Ohio	0.30	0.30	↔	1.50	3.10	✓	2.25	2.25	↔
Oklahoma	1.00	1.30	✓	3.31	4.20	✓	3.50	3.50	↔
Oregon	7.80	9.30	✓	2.50	4.00	✓	5.00	5.00	↔
Pennsylvania	3.10	3.10	↔	3.40	3.70	✓	0.50	0.50	↔
Rhode Island	4.25	8.50	✓	2.50	3.10	✓	1.00	1.00	↔
South Carolina	1.00	1.00	↔	3.35	3.61	✓	0.25	0.50	✓
South Dakota	0	0	↔	2.70	2.70	↔	3.75	4.25	✓
Tennessee	0	0	↔	1.50	2.80	✓	0.50	0.50	↔
Texas	0.30	1.80	✓	3.20	3.90	✓	4.00	4.00	↔
Utah	1.00	1.00	↔	3.10	3.10	↔	4.50	4.50	↔
Vermont	6.00	6.50	✓	1.50	3.07	✓	5.00	5.00	↔
Virginia	0	0	↔	1.50	1.50	↔	3.00	3.00	↔
Washington	8.25	10.25	✓	4.32	4.30	↔	5.00	5.00	↔
West Virginia	0	0	↔	1.50	3.10	✓	3.50	3.50	↔
Wisconsin	3.00	3.60	✓	2.41	2.68	✓	4.00	4.50	✓
Wyoming	0	0	↔	4.30	4.30	↔	3.75	3.75	↔

Key for Change: ✓ Performance improvement ↔ Little or no change in performance ✗ Performance decline

Source: Long-Term Services and Supports State Scorecard, 2020.

# EXHIBIT A12 Indicator Data: Support for Family Caregivers (Category Totals) (continued)

Transportation Policies				Support for Family Caregivers Dimension Total Composite Score			
State	2015–16	2019	Change	2017	2020	Rank	Change
<b>United States</b>	<b>0.10</b>	<b>0.14</b>	↔	<b>8.22</b>	<b>9.65</b>		✓
Alabama	0	0	↔	3.11	2.60	50	✗
Alaska	0	0	↔	9.00	9.00	24	↔
Arizona	0	0	↔	9.73	12.15	13	✓
Arkansas	0	0	↔	6.50	7.50	34	✓
California	1.00	1.00	↔	14.25	14.10	8	↔
Colorado	0	0	↔	9.80	9.80	20	↔
Connecticut	0	0	↔	9.75	13.35	11	✓
Delaware	0	0	↔	7.66	7.65	31	↔
District of Columbia	0	0	↔	18.85	20.20	1	✓
Florida	1.00	1.00	↔	4.70	5.30	45	✓
Georgia	0	0	↔	8.03	8.35	28	✓
Hawaii	0	0	↔	13.75	14.10	8	✓
Idaho	0	0	↔	5.50	5.50	43	↔
Illinois	0	0	↔	10.15	10.78	17	✓
Indiana	0	0	↔	2.00	2.30	51	✓
Iowa	0	0	↔	6.00	7.60	33	✓
Kansas	0	0	↔	4.10	5.10	47	✓
Kentucky	0	0	↔	5.30	6.30	41	✓
Louisiana	0	0	↔	7.10	7.65	31	✓
Maine	1.00	1.00	↔	10.30	11.80	16	✓
Maryland	0	1.00	✓	10.10	12.10	14	✓
Massachusetts	0	0	↔	9.85	12.10	14	✓
Michigan	0	0	↔	6.35	9.35	23	✓
Minnesota	0	0	↔	13.55	15.75	6	✓
Mississippi	0	0	↔	5.75	7.25	37	✓
Missouri	0	0	↔	4.50	6.80	39	✓
Montana	0	0	↔	6.50	7.80	30	✓
Nebraska	0	0	↔	8.70	8.70	26	↔
Nevada	0	0	↔	8.25	10.55	19	✓
New Hampshire	1.00	1.00	↔	9.35	9.65	22	✓
New Jersey	0	0	↔	12.10	17.15	4	✓
New Mexico	0	0	↔	6.58	12.33	12	✓
New York	0	0	↔	11.88	15.84	5	✓
North Carolina	0	0	↔	5.50	5.50	43	↔
North Dakota	0	0	↔	5.28	7.50	34	✓
Ohio	0	0	↔	4.05	5.65	42	✓
Oklahoma	0	0	↔	7.81	9.00	24	✓
Oregon	0	0	↔	15.30	18.30	3	✓
Pennsylvania	0	0	↔	7.00	7.30	36	✓
Rhode Island	0	1.00	✓	7.75	13.60	10	✓
South Carolina	0	0	↔	4.60	5.11	46	✓
South Dakota	0	0	↔	6.45	6.95	38	✓
Tennessee	0	0	↔	2.00	3.30	49	✓
Texas	0	0	↔	7.50	9.70	21	✓
Utah	0	0	↔	8.60	8.60	27	↔
Vermont	1.00	1.00	↔	13.50	15.57	7	✓
Virginia	0	0	↔	4.50	4.50	48	↔
Washington	0	0	↔	17.57	19.55	2	✓
West Virginia	0	0	↔	5.00	6.60	40	✓
Wisconsin	0	0	↔	9.41	10.78	17	✓
Wyoming	0	0	↔	8.05	8.05	29	↔

Key for Change: ✓ Performance improvement ↔ Little or no change in performance ✗ Performance decline

Source: Long-Term Services and Supports State Scorecard, 2020.

# EXHIBIT A13 Indicator Data: Effective Transitions

State	Percentage of Nursing Home Residents with Low Care Needs			Percentage of Home Health Patients with a Hospital Admission				Percentage of Long-Stay Nursing Home Residents Hospitalized within a Six-Month Period			
	2017	Rank	Change	2014	2017	Rank	Change	2014	2016	Rank	Change
United States	8.9%		*	15.9%	15.8%		↔	17.6%	16.8%		↔
Alabama	11.1%	32	*	17.1%	17.4%	50	↔	19.0%	18.7%	40	↔
Alaska	*	*	*	12.3%	13.8%	1	✗	11.1%	13.0%	18	✗
Arizona	7.1%	14	*	14.9%	14.8%	10	↔	8.2%	7.2%	2	✓
Arkansas	14.5%	43	*	17.4%	17.0%	47	↔	24.3%	23.4%	49	↔
California	9.3%	26	*	14.5%	14.4%	3	↔	18.5%	18.8%	41	↔
Colorado	13.1%	41	*	14.5%	14.5%	5	↔	8.5%	8.8%	5	↔
Connecticut	12.3%	37	*	16.8%	16.4%	38	↔	13.9%	12.7%	16	↔
Delaware	10.0%	28	*	17.1%	15.8%	22	↔	15.6%	16.0%	30	↔
District of Columbia	*	*	*	16.7%	15.1%	12	✓	19.4%	19.4%	43	↔
Florida	7.2%	15	*	15.3%	15.4%	18	↔	21.7%	21.4%	47	↔
Georgia	8.4%	23	*	16.4%	16.7%	41	↔	17.4%	16.2%	32	↔
Hawaii	3.0%	3	*	14.6%	14.5%	5	↔	5.1%	4.7%	1	↔
Idaho	8.0%	18	*	14.4%	14.4%	3	↔	12.1%	11.2%	9	↔
Illinois	10.0%	28	*	15.7%	15.7%	21	↔	19.9%	17.3%	35	✓
Indiana	5.2%	7	*	16.4%	15.8%	22	↔	17.0%	17.2%	34	↔
Iowa	15.9%	45	*	16.7%	16.0%	29	↔	15.2%	14.2%	21	↔
Kansas	18.2%	47	*	17.3%	16.7%	41	↔	19.3%	18.6%	39	↔
Kentucky	5.6%	10	*	17.2%	16.8%	44	↔	21.0%	20.7%	46	↔
Louisiana	12.2%	35	*	15.9%	16.1%	31	↔	26.8%	26.3%	50	↔
Maine	2.1%	1	*	16.4%	15.5%	19	↔	11.9%	12.2%	12	↔
Maryland	5.1%	6	*	16.4%	15.3%	16	↔	15.9%	15.5%	28	↔
Massachusetts	9.1%	24	*	16.9%	16.9%	46	↔	12.6%	12.9%	17	↔
Michigan	8.3%	20	*	15.9%	15.9%	26	↔	16.9%	15.3%	25	✓
Minnesota	12.8%	38	*	16.5%	16.2%	36	↔	7.0%	7.2%	2	↔
Mississippi	11.8%	34	*	17.2%	16.8%	44	↔	28.2%	28.0%	51	↔
Missouri	24.0%	49	*	16.5%	16.1%	31	↔	18.8%	17.5%	36	↔
Montana	14.8%	44	*	14.8%	16.0%	29	↔	12.0%	12.6%	14	↔
Nebraska	12.2%	35	*	16.6%	16.1%	31	↔	15.7%	15.8%	29	↔
Nevada	9.1%	24	*	15.4%	16.1%	31	↔	19.4%	19.9%	45	↔
New Hampshire	11.5%	33	*	16.5%	17.5%	51	↔	13.7%	13.4%	20	↔
New Jersey	10.6%	31	*	16.0%	15.8%	22	↔	19.7%	18.2%	38	↔
New Mexico	13.0%	40	*	15.1%	14.7%	7	↔	15.0%	13.1%	19	✓
New York	6.8%	13	*	16.4%	16.4%	38	↔	14.1%	12.6%	14	✓
North Carolina	4.7%	4	*	16.1%	15.6%	20	↔	16.4%	16.1%	31	↔
North Dakota	13.1%	41	*	17.6%	14.7%	7	✓	13.8%	14.4%	22	↔
Ohio	7.3%	16	*	16.0%	15.9%	26	↔	13.4%	11.9%	11	✓
Oklahoma	20.7%	48	*	15.5%	15.2%	14	↔	22.8%	23.3%	48	↔
Oregon	5.5%	9	*	14.7%	14.7%	7	↔	8.8%	9.4%	6	↔
Pennsylvania	5.9%	11	*	16.7%	16.7%	41	↔	13.6%	12.5%	13	↔
Rhode Island	10.5%	30	*	15.9%	17.0%	47	↔	8.6%	8.2%	4	↔
South Carolina	5.2%	7	*	16.1%	16.3%	37	↔	19.0%	18.0%	37	↔
South Dakota	16.2%	46	*	14.9%	15.8%	22	↔	15.5%	15.3%	25	↔
Tennessee	4.7%	4	*	16.9%	17.0%	47	↔	19.4%	18.8%	41	↔
Texas	8.3%	20	*	14.8%	15.2%	14	↔	21.4%	19.6%	44	✓
Utah	2.9%	2	*	13.7%	14.1%	2	↔	11.3%	10.3%	7	↔
Vermont	8.2%	19	*	16.1%	16.1%	31	↔	13.7%	14.8%	23	↔
Virginia	7.6%	17	*	16.7%	15.9%	26	↔	17.6%	15.4%	27	✓
Washington	6.2%	12	*	14.9%	14.8%	10	↔	11.1%	11.6%	10	↔
West Virginia	9.3%	26	*	17.6%	16.5%	40	↔	16.8%	16.5%	33	↔
Wisconsin	8.3%	20	*	16.6%	15.3%	16	↔	11.7%	11.1%	8	↔
Wyoming	12.8%	38	*	16.8%	15.1%	12	✓	16.4%	15.1%	24	↔

Key for Change: ✓ Performance improvement ↔ Little or no change in performance ✗ Performance decline \* No trend available

Source: Long-Term Services and Supports State Scorecard, 2020.

# EXHIBIT A13 Indicator Data: Effective Transitions (continued)

State	Percentage of Nursing Home Residents with One or More Potentially Burdensome Transitions at End of Life				Percentage of Short-Stay Residents Who were Successfully Discharged to the Community		
	2013	2016	Rank	Change	2017–18	Rank	Change
<b>United States</b>	<b>29.8%</b>	<b>28.6%</b>		↔	<b>53.9%</b>		*
Alabama	28.9%	24.7%	18	✓	55.2%	26	*
Alaska	14.0%	18.6%	3	✗	62.6%	3	*
Arizona	26.5%	26.8%	32	↔	60.9%	5	*
Arkansas	33.6%	31.6%	44	↔	50.7%	45	*
California	33.9%	33.4%	47	↔	52.0%	37	*
Colorado	23.7%	23.8%	13	↔	58.6%	9	*
Connecticut	28.4%	26.0%	26	✓	57.8%	12	*
Delaware	28.7%	25.8%	24	✓	55.7%	20	*
District of Columbia	33.0%	33.3%	46	↔	51.7%	39	*
Florida	40.6%	39.2%	51	↔	51.9%	38	*
Georgia	29.5%	26.9%	33	✓	54.3%	30	*
Hawaii	15.5%	16.2%	1	↔	68.5%	1	*
Idaho	17.3%	17.9%	2	↔	59.8%	7	*
Illinois	33.4%	30.2%	41	✓	49.9%	48	*
Indiana	26.0%	26.5%	28	↔	52.7%	36	*
Iowa	27.7%	27.3%	34	↔	55.7%	20	*
Kansas	30.6%	28.2%	38	✓	53.9%	31	*
Kentucky	28.4%	29.6%	40	↔	51.0%	44	*
Louisiana	36.7%	33.6%	48	✓	43.8%	51	*
Maine	21.9%	21.8%	9	↔	58.6%	9	*
Maryland	27.2%	26.7%	31	↔	57.0%	15	*
Massachusetts	25.3%	25.7%	23	↔	55.0%	27	*
Michigan	27.6%	27.8%	36	↔	55.3%	23	*
Minnesota	21.8%	23.2%	12	↔	59.9%	6	*
Mississippi	36.9%	35.7%	50	↔	49.7%	50	*
Missouri	27.6%	27.7%	35	↔	50.0%	47	*
Montana	20.2%	20.7%	6	↔	59.2%	8	*
Nebraska	25.0%	25.1%	22	↔	53.7%	32	*
Nevada	28.2%	31.0%	43	✗	51.7%	39	*
New Hampshire	24.2%	24.3%	16	↔	53.4%	33	*
New Jersey	29.8%	29.4%	39	↔	55.3%	23	*
New Mexico	23.9%	24.8%	19	↔	55.8%	19	*
New York	26.5%	24.2%	15	✓	51.3%	43	*
North Carolina	28.7%	27.8%	36	↔	55.0%	27	*
North Dakota	19.2%	20.1%	5	↔	49.9%	48	*
Ohio	34.3%	31.8%	45	✓	56.8%	16	*
Oklahoma	32.7%	30.4%	42	✓	51.4%	41	*
Oregon	22.5%	21.0%	8	↔	61.4%	4	*
Pennsylvania	27.3%	24.8%	19	✓	53.1%	34	*
Rhode Island	34.5%	26.6%	30	✓	55.3%	23	*
South Carolina	28.3%	26.5%	28	↔	56.0%	17	*
South Dakota	23.1%	20.7%	6	✓	53.1%	34	*
Tennessee	26.8%	25.8%	24	↔	54.4%	29	*
Texas	35.4%	34.0%	49	↔	51.4%	41	*
Utah	28.3%	25.0%	21	✓	63.1%	2	*
Vermont	15.4%	21.9%	10	✗	55.9%	18	*
Virginia	26.6%	24.4%	17	✓	57.5%	14	*
Washington	21.3%	22.8%	11	↔	57.8%	12	*
West Virginia	28.0%	26.2%	27	↔	50.6%	46	*
Wisconsin	22.9%	23.8%	13	↔	58.2%	11	*
Wyoming	20.9%	19.3%	4	↔	55.5%	22	*

Key for Change: ✓ Performance improvement ↔ Little or no change in performance ✗ Performance decline \* No trend available

Source: Long-Term Services and Supports State Scorecard, 2020.

# EXHIBIT A14 Detailed Indicator Data: Private Pay Affordability

State	Median Household Income Ages 65+, 2018	Median Annual Cost of Care, 2019		Median Cost as a Percentage of Median Household Income*	
		Nursing Home Private Room	30 Hours/Week of Home Care	Nursing Home Private Room	30 Hours/Week of Home Care
<b>United States</b>	<b>\$44,992</b>	<b>\$102,200</b>	<b>\$35,880</b>	<b>245%</b>	<b>80%</b>
Alabama	\$37,977	\$81,395	\$28,080	208%	72%
Alaska	\$59,339	\$362,628	\$46,769	638%	82%
Arizona	\$46,152	\$97,638	\$39,000	224%	85%
Arkansas	\$37,762	\$73,000	\$29,640	202%	82%
California	\$54,272	\$127,750	\$43,680	232%	71%
Colorado	\$51,537	\$113,150	\$40,560	216%	82%
Connecticut	\$54,629	\$166,988	\$37,440	324%	70%
Delaware	\$54,744	\$136,328	\$38,220	254%	76%
District of Columbia	\$50,873	\$127,750	\$42,900	196%	51%
Florida	\$43,804	\$112,639	\$34,320	281%	79%
Georgia	\$42,781	\$85,775	\$31,980	222%	76%
Hawaii	\$65,078	\$160,418	\$42,713	241%	67%
Idaho	\$42,678	\$102,748	\$35,100	248%	78%
Illinois	\$44,955	\$82,125	\$37,440	218%	81%
Indiana	\$41,342	\$102,200	\$35,880	232%	85%
Iowa	\$42,995	\$82,537	\$39,000	194%	91%
Kansas	\$42,989	\$74,095	\$34,320	172%	81%
Kentucky	\$38,254	\$91,250	\$31,200	239%	81%
Louisiana	\$36,345	\$68,109	\$26,520	187%	71%
Maine	\$40,435	\$125,925	\$41,870	325%	105%
Maryland	\$59,536	\$120,085	\$37,440	222%	64%
Massachusetts	\$49,756	\$158,545	\$42,900	311%	87%
Michigan	\$42,816	\$111,508	\$36,660	267%	87%
Minnesota	\$47,054	\$132,448	\$47,580	287%	103%
Mississippi	\$36,415	\$85,045	\$28,860	229%	77%
Missouri	\$41,038	\$68,255	\$34,320	168%	84%
Montana	\$42,745	\$92,608	\$37,440	226%	89%
Nebraska	\$42,851	\$92,345	\$40,560	209%	93%
Nevada	\$46,406	\$111,325	\$35,100	236%	77%
New Hampshire	\$50,240	\$125,925	\$44,070	280%	91%
New Jersey	\$53,637	\$139,795	\$39,000	310%	78%
New Mexico	\$39,989	\$96,725	\$35,100	270%	87%
New York	\$45,302	\$148,190	\$40,560	324%	84%
North Carolina	\$41,169	\$91,980	\$31,200	226%	77%
North Dakota	\$44,824	\$143,832	\$43,618	328%	99%
Ohio	\$41,406	\$93,805	\$35,880	234%	82%
Oklahoma	\$40,928	\$67,525	\$34,710	177%	82%
Oregon	\$47,314	\$124,100	\$43,680	269%	93%
Pennsylvania	\$41,762	\$124,830	\$36,660	301%	86%
Rhode Island	\$42,424	\$127,750	\$42,120	321%	104%
South Carolina	\$42,161	\$91,250	\$32,729	226%	79%
South Dakota	\$42,361	\$86,323	\$43,680	220%	116%
Tennessee	\$39,933	\$87,600	\$31,840	220%	79%
Texas	\$44,319	\$77,015	\$32,760	182%	73%
Utah	\$53,670	\$91,250	\$37,440	181%	69%
Vermont	\$44,302	\$135,415	\$42,510	338%	104%
Virginia	\$51,401	\$98,550	\$35,849	211%	69%
Washington	\$52,150	\$119,173	\$47,580	258%	94%
West Virginia	\$36,147	\$138,335	\$28,080	354%	80%
Wisconsin	\$41,362	\$112,785	\$39,000	277%	97%
Wyoming	\$44,870	\$96,360	\$44,054	205%	96%

\*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 2019 Cost of Care Survey; 2018 American Community Survey, Table B19049.

Source: Long-Term Services and Supports State Scorecard, 2020.

# EXHIBIT A15 Detailed Indicator Data: ADRC/NWD Functions, 2019

State	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 Percentage Score	Rank
<b>United States</b>	<b>60%</b>	<b>78%</b>	<b>66%</b>	<b>77%</b>	<b>58%</b>	<b>67%</b>	
Alabama	91%	93%	83%	92%	89%	89%	8
Alaska	18%	67%	38%	60%	37%	41%	46
Arizona	37%	87%	58%	84%	67%	64%	28
Arkansas	19%	67%	67%	98%	46%	57%	34
California	27%	67%	42%	41%	24%	37%	47
Colorado	52%	53%	63%	53%	39%	52%	39
Connecticut	88%	100%	98%	90%	78%	90%	7
Delaware	62%	87%	83%	74%	83%	77%	22
District of Columbia	87%	93%	85%	90%	76%	86%	10
Florida	69%	100%	63%	96%	89%	82%	15
Georgia	93%	100%	81%	77%	59%	81%	19
Hawaii	84%	87%	81%	79%	67%	79%	20
Idaho	44%	67%	50%	34%	31%	43%	44
Illinois	57%	33%	42%	37%	56%	46%	41
Indiana	45%	73%	63%	77%	37%	57%	34
Iowa	46%	60%	46%	50%	22%	43%	44
Kansas	47%	87%	69%	76%	50%	63%	29
Kentucky	93%	100%	69%	86%	70%	83%	12
Louisiana	47%	67%	65%	66%	41%	56%	36
Maine	39%	73%	44%	74%	39%	52%	39
Maryland	71%	87%	83%	98%	81%	84%	11
Massachusetts	90%	100%	98%	100%	81%	93%	3
Michigan	59%	93%	71%	75%	63%	70%	26
Minnesota	90%	93%	96%	99%	83%	92%	5
Mississippi	88%	100%	67%	96%	70%	83%	12
Missouri	82%	100%	65%	100%	70%	82%	15
Montana	16%	67%	54%	57%	39%	44%	43
Nebraska	49%	73%	63%	58%	30%	53%	38
Nevada	58%	80%	73%	85%	43%	66%	27
New Hampshire	92%	100%	92%	97%	96%	95%	2
New Jersey	92%	67%	65%	97%	81%	82%	15
New Mexico	7%	33%	31%	69%	26%	33%	48
New York	67%	93%	67%	95%	61%	75%	23
North Carolina	0%	47%	35%	46%	4%	24%	50
North Dakota	53%	60%	58%	74%	30%	54%	37
Ohio	98%	100%	85%	99%	96%	96%	1
Oklahoma	58%	47%	56%	80%	56%	60%	32
Oregon	91%	100%	75%	99%	78%	88%	9
Pennsylvania	74%	100%	79%	99%	67%	82%	15
Rhode Island	64%	73%	56%	61%	59%	62%	30
South Carolina	26%	73%	50%	70%	28%	46%	41
South Dakota	69%	100%	71%	93%	69%	78%	21
Tennessee	44%	73%	65%	63%	56%	58%	33
Texas	83%	60%	85%	59%	78%	74%	24
Utah	34%	13%	25%	35%	26%	28%	49
Vermont	33%	73%	81%	93%	91%	73%	25
Virginia	91%	100%	71%	95%	65%	83%	12
Washington	88%	100%	100%	93%	91%	93%	3
West Virginia	54%	100%	56%	77%	39%	62%	30
Wisconsin	91%	93%	90%	100%	89%	92%	5
Wyoming	5%	27%	13%	26%	4%	13%	51

Note: ADRC/NWD = Aging and Disability Resource Center/No Wrong Door.

Data: AARP PPI (2019), ADRC/No Wrong Door state survey conducted in collaboration with The Lewin Group and US Administration for Community Living (unpublished). Washington, DC: AARP Public Policy Institute.

Source: Long-Term Services and Supports State Scorecard, 2020.

# EXHIBIT A16 Detailed Indicator Data: Subsidized Housing

State	Authorized Vouchers, 2017	Place Based Units, 2017*	Total Potentially Subsidized Units, 2017	Percentage of Housing Units Potentially Subsidized	Rank	Very Low-Income Renter Households, 2012-16**
<b>United States</b>	<b>2,462,457</b>	<b>6,120,425</b>	<b>8,582,882</b>	<b>6.2%</b>		<b>18,934,680</b>
Alabama	35,765	111,754	147,519	6.5%	16	273,605
Alaska	4,737	8,134	12,871	4.0%	49	31,895
Arizona	23,874	65,313	89,187	2.9%	51	341,405
Arkansas	24,349	65,030	89,379	6.5%	16	170,820
California	333,360	534,246	867,606	6.1%	21	2,573,855
Colorado	33,551	84,199	117,750	4.9%	41	305,980
Connecticut	41,234	89,390	130,624	8.6%	5	239,080
Delaware	5,156	18,045	23,201	5.3%	35	41,125
District of Columbia	15,018	44,450	59,468	18.6%	1	76,810
Florida	109,569	340,136	449,705	4.7%	43	1,031,525
Georgia	66,239	202,480	268,719	6.2%	19	569,545
Hawaii	13,362	21,260	34,622	6.3%	18	76,330
Idaho	7,261	20,982	28,243	3.8%	50	78,880
Illinois	103,699	253,093	356,792	6.6%	13	778,645
Indiana	41,554	136,332	177,886	6.1%	21	367,885
Iowa	23,162	55,392	78,554	5.6%	31	170,435
Kansas	13,648	59,212	72,860	5.7%	29	156,870
Kentucky	37,086	94,784	131,870	6.6%	13	271,410
Louisiana	55,871	104,357	160,228	7.7%	7	268,585
Maine	13,235	32,232	45,467	6.1%	21	76,840
Maryland	53,596	132,153	185,749	7.6%	8	317,660
Massachusetts	90,779	203,608	294,387	10.1%	4	480,585
Michigan	61,253	190,476	251,729	5.5%	34	542,930
Minnesota	36,148	132,305	168,453	6.9%	11	304,615
Mississippi	27,148	76,761	103,909	7.8%	6	160,825
Missouri	44,886	128,215	173,101	6.2%	19	360,170
Montana	6,577	17,071	23,648	4.6%	45	61,260
Nebraska	12,956	37,318	50,274	5.9%	28	114,645
Nevada	15,797	44,416	60,213	4.7%	43	162,445
New Hampshire	10,094	25,575	35,669	5.6%	31	66,600
New Jersey	75,742	164,372	240,114	6.6%	13	537,455
New Mexico	15,081	34,076	49,157	5.2%	38	103,450
New York	257,788	623,618	881,406	10.5%	2	1,646,285
North Carolina	65,431	163,462	228,893	4.9%	41	565,040
North Dakota	8,509	14,383	22,892	6.1%	21	47,650
Ohio	99,350	261,072	360,422	6.9%	11	747,615
Oklahoma	24,994	63,175	88,169	5.1%	40	212,890
Oregon	36,032	65,569	101,601	5.7%	29	243,090
Pennsylvania	90,447	204,775	295,222	5.2%	38	724,725
Rhode Island	10,959	38,035	48,994	10.4%	3	83,120
South Carolina	27,801	78,931	106,732	4.6%	45	246,605
South Dakota	6,606	23,648	30,254	7.6%	8	48,945
Tennessee	38,715	140,513	179,228	6.0%	26	369,805
Texas	165,600	419,148	584,748	5.3%	35	1,418,920
Utah	11,619	37,584	49,203	4.4%	48	116,735
Vermont	7,947	16,492	24,439	7.2%	10	35,130
Virginia	52,117	147,566	199,683	5.6%	31	414,050
Washington	57,335	134,639	191,974	6.1%	21	417,065
West Virginia	15,641	37,915	53,556	6.0%	26	96,740
Wisconsin	31,154	112,861	144,015	5.3%	35	356,385
Wyoming	2,625	9,872	12,497	4.5%	47	29,720

\*Multiple data sources, updated through approximately 2017 at the time of analysis.

\*\*Households making less than or equal to HUD Area Median Family Income (HAMFI).

Source: Long-Term Services and Supports State Scorecard, 2020.



# EXHIBIT A17 Detailed Indicator Data: HCBS Cross-State Quality Benchmarking

State	NCI-AD (out of 2.5)		HCBS CAHPS** (out of 1.5) 2017-2019	BRFSS (out of 1.0) 2015-2017	NCQA (out of 1.0) 2019	Total Score (out of 5.0) 2019
	Participation 2019	Two year max sample size*				
<b>United States</b>	<b>0.86</b>		<b>0.28</b>	<b>0.09</b>	<b>0.14</b>	<b>1.30</b>
Alabama	1.2	*	0	0	1.0	2.2
Alaska	0	0	0	0	0	0
Arizona	0	0	1.0	0	0	1.0
Arkansas	0	0	0	0	0	0
California	0	0	0	0	0	0
Colorado	2.0	998	0	0	0	2.0
Connecticut	0	0	1.5	0	0	1.5
Delaware	1.6	675	0	0	0	1.6
District of Columbia	0	0	0	0	0	0
Florida	0	0	1.5	0	0	1.5
Georgia	2.0	803	0	0	0	2.0
Hawaii	0	0	0	0	0	0
Idaho	0	0	0	0	0	0
Illinois	0	0	1.5	0	0	1.5
Indiana	2.5	1,453	0	0	0	2.5
Iowa	0	0	0	0	0	0
Kansas	1.2	440	0.5**	0	1.0	2.7
Kentucky	0	0	0	0	0	0
Louisiana	0	0	0	0.6	0	0.6
Maine	1.6	552	0	0	0	1.6
Maryland	0	0	1.0	0	0	1.0
Massachusetts	0	0	0	0	1.0	1.0
Michigan	0	0	0	0	0	0
Minnesota	2.5	3,758	0	1.0	0	3.5
Mississippi	2.0	965	0**	0	0	2.0
Missouri	1.2	*	0	0	0	1.2
Montana	0	0	0	0	0	0
Nebraska	1.6	672	0	0	0	1.6
Nevada	1.2	406	0	0	0	1.2
New Hampshire	0	0	1.0	0	0	1.0
New Jersey	2.0	921	0.5**	0	0	2.5
New Mexico	0	0	0	0	0	0
New York	0	0	0	0	0	0
North Carolina	2.0	965	0	0	1.0	3.0
North Dakota	0	0	0	0	0	0
Ohio	2.5	1,554	0	0.6	0	3.1
Oklahoma	1.2	*	0	0.6	0	1.8
Oregon	1.6	683	0	0	0	1.6
Pennsylvania	1.2	403	0.5**	0	1.0	2.7
Rhode Island	0	0	0	0.8	0	0.8
South Carolina	1.2	*	0	0	0	1.2
South Dakota	1.2	*	0	0	0	1.2
Tennessee	2.0	858	0	0.6	1.0	3.6
Texas	2.5	1,783	0	0	0	2.5
Utah	1.2	*	0	0	0	1.2
Vermont	1.2	428	0	0	0	1.2
Virginia	0	0	0	0	1.0	1.0
Washington	1.2	464	0	0	0	1.2
West Virginia	0	0	1.5	0	0	1.5
Wisconsin	2.5	2,250	0	0.6	0	3.1
Wyoming	0	0	0	0	0	0

\* Sample size from published annual reports. 2019 participation score based on largest sample from last two published reports (greater sample size = higher score). States that adopted NCI-AD more recently may not have any published annual reports by December 2019 when data were finalized, or have only one published report. An asterisk in the sample size column indicates that no annual report was available.

\*\* Due to overlap of functionality, states using both NCI-AD and HCBS CAHPS receive base credit for one tool only. For example, Kansas reported using CAHPS in 2019, and therefore earned 1.5 points of credit. However, because the state already received credit for NCI-AD, they are only awarded 0.5 points for HCBS CAHPS instead of the full 1.5 points. Similar -1.0 point adjustments were made to Mississippi, New Jersey, and Pennsylvania. See scoring algorithm in Exhibit B4 in Appendix B for detail.

Source: Long-Term Services and Supports State Scorecard, 2020.

# EXHIBIT A18 Detailed Indicator Data: Health Maintenance Tasks Able to be Delegated to LTSS Workers and Nurse Practitioner Scope of Practice

## Health Maintenance Tasks, 2019 (0.25 points each 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
Alabama						Y					
Alaska	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Arizona	Y	Y	Y	Y	Y	Y		Y	Y	Y	Y
Arkansas	Y	Y	Y			Y	Y	Y	Y	Y	Y
California						Y					Y
Colorado	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Connecticut *	—					Y			—	—	
Delaware						Y					
District of Columbia *	Y	Y	Y	—	Y	Y	—	Y	Y		Y
Florida											
Georgia	Y	Y	Y	Y		Y	Y	Y	Y	Y	Y
Hawaii **	Y	Y	Y			Y	Y	Y	Y	Y	Y
Idaho	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Illinois						Y					
Indiana **											
Iowa	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Kansas						Y		Y	Y		Y
Kentucky ***	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Louisiana *		Y				Y		Y		Y	Y
Maine	Y		Y			Y		Y	Y	Y	Y
Maryland	Y	Y	Y	Y		Y	Y	Y	Y	Y	Y
Massachusetts						Y					
Michigan	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Minnesota	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Mississippi						Y				Y	Y
Missouri	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Montana ***	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Nebraska	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Nevada **	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
New Hampshire *	Y	Y	Y	—	Y	Y	Y	Y	Y	Y	Y
New Jersey	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
New Mexico ***	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
New York *	Y	Y	Y		Y	Y	—	Y	Y	Y	Y
North Carolina	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
North Dakota	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Ohio						Y		Y	Y	Y	Y
Oklahoma	Y	Y	Y	Y		Y	Y	Y	Y	Y	Y
Oregon	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Pennsylvania ***											
Rhode Island											
South Carolina											Y
South Dakota	Y	Y	Y	Y		Y		Y	Y	Y	Y
Tennessee	Y	Y									
Texas ***	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Utah ***	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Vermont	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Virginia	Y	Y	Y	Y		Y		Y	Y	Y	Y
Washington	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
West Virginia	Y	Y	Y			Y	Y	Y	Y	Y	Y
Wisconsin ***	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Wyoming	Y	Y				Y	Y	Y	Y	Y	Y

### Legend

Y State responded yes to health maintenance task for 2019 survey.

Y / 1.0 Improvement from last Scorecard.

— Baseline data revised due to survey reporting error in 2017 Scorecard.

\* Revised baseline due to state reporting error in 2016 nurse delegation survey (CT, DC, LA, NH, NY)

\*\* Hawaii, Indiana, and Nevada did not provide updated survey data. 2016 data repeated.

\*\*\* Survey responses based upon AARP interpretation of state Board of Nursing regulations (KY, MT, NM, PA, TX, UT, WI)

Four states allowed additional delegation of medical/nursing tasks since the last Scorecard. Louisiana gave the ability to administer medication on an as needed basis and insert a suppository. New Jersey added the ability for direct care workers to draw up insulin for dosage measurement and administer intramuscular injection medications. South Carolina gave the ability to perform ostomy care including skin care and changing an appliance. Wisconsin added the ability to draw up insulin for dosage measurement and administering intramuscular injection medications.

North Dakota and South Dakota were the only states to improve their performance in Scope of Practice, both moving from reduced to full scope.

Source: Long-Term Services and Supports State Scorecard, 2020.

# EXHIBIT A18 Detailed Indicator Data: Health Maintenance Tasks Able to be Delegated to LTSS Workers and Nurse Practitioner Scope of Practice (continued)

Health Maintenance Tasks, 2019 (0.25 points each task)								Nurse Practitioner Scope of Practice (1.0 point Full, 0.5 points Reduced)		Combined Score		
State	Perform Intermittent Catheterization	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 2019	Change from 2016	2016	2019	Total Score 2016 (out of 5.0)	Total Score 2019 (out of 5.0)	Rank 2019
Alabama		Y				2		0.5	0.5	1.00	1.00	42
Alaska	Y	Y	Y	Y	Y	16		1.0	1.0	5.00	5.00	1
Arizona	Y	Y	Y	Y		14		1.0	1.0	4.50	4.50	13
Arkansas	Y	Y	Y	Y	Y	14		0.5	0.5	4.00	4.00	23
California						2		0	0	0.50	0.50	45
Colorado	Y	Y	Y	Y	Y	16		1.0	1.0	5.00	5.00	1
Connecticut *		Y				2		1.0	1.0	1.50	1.50	40
Delaware	Y	Y				3		0.5	0.5	1.25	1.25	41
District of Columbia *		Y		Y		10		1.0	1.0	3.50	3.50	28
Florida						0		0	0	0	0	51
Georgia	Y	Y	Y	Y		14		0	0	3.50	3.50	28
Hawaii **	Y	Y	Y	Y	Y	14		1.0	1.0	4.50	4.50	13
Idaho	Y	Y	Y	Y	Y	16		1.0	1.0	5.00	5.00	1
Illinois		Y				2		0.5	0.5	1.00	1.00	42
Indiana **						0		0.5	0.5	0.50	0.50	45
Iowa	Y	Y	Y	Y	Y	16		1.0	1.0	5.00	5.00	1
Kansas	Y			Y		6		0.5	0.5	2.00	2.00	38
Kentucky ***	Y	Y	Y	Y	Y	16		0.5	0.5	4.50	4.50	13
Louisiana *	Y	Y	Y	—	Y	9	+2	0.5	0.5	2.25	2.75	36
Maine	Y	Y				9		1.0	1.0	3.25	3.25	32
Maryland	Y	Y	Y	Y		14		1.0	1.0	4.50	4.50	13
Massachusetts		Y				2		0	0	0.50	0.50	45
Michigan	Y	Y				13		0	0	3.25	3.25	32
Minnesota	Y	Y	Y	Y	Y	16		1.0	1.0	5.00	5.00	1
Mississippi	Y	Y				5		0.5	0.5	1.75	1.75	39
Missouri	Y	Y	Y	Y	Y	16		0	0	4.00	4.00	23
Montana ***	Y	Y	Y	Y	Y	16		1.0	1.0	5.00	5.00	1
Nebraska	Y	Y	Y	Y	Y	16		1.0	1.0	5.00	5.00	1
Nevada **	Y	Y	Y	Y		15		1.0	1.0	4.75	4.75	12
New Hampshire *	Y	Y		Y		13		1.0	1.0	4.25	4.25	21
New Jersey	Y	Y	Y	Y	Y	16	+2	0.5	0.5	4.00	4.50	13
New Mexico ***	Y	Y	Y	Y	Y	16		1.0	1.0	5.00	5.00	1
New York *	—	—	Y	Y	—	11		0.5	0.5	3.25	3.25	32
North Carolina	Y	Y	Y	Y	Y	16		0	0	4.00	4.00	23
North Dakota	Y	Y	Y			14		0.5	1.0	4.00	4.50	13
Ohio	Y	Y				7		0.5	0.5	2.25	2.25	37
Oklahoma	Y	Y	Y	Y		14		0	0	3.50	3.50	28
Oregon	Y	Y	Y	Y	Y	16		1.0	1.0	5.00	5.00	1
Pennsylvania ***						0		0.5	0.5	0.50	0.50	45
Rhode Island						0		1.0	1.0	1.00	1.00	42
South Carolina		Y				2	+1	0	0	0.25	0.50	45
South Dakota	Y	Y	Y	Y		13		0.5	1.0	3.75	4.25	21
Tennessee						2		0	0	0.50	0.50	45
Texas ***	Y	Y	Y	Y	Y	16		0	0	4.00	4.00	23
Utah ***	Y	Y	Y	Y	Y	16		0.5	0.5	4.50	4.50	13
Vermont	Y	Y	Y	Y	Y	16		1.0	1.0	5.00	5.00	1
Virginia		Y	Y	Y		12		0	0	3.00	3.00	35
Washington	Y	Y	Y	Y	Y	16		1.0	1.0	5.00	5.00	1
West Virginia		Y	Y		Y	12		0.5	0.5	3.50	3.50	28
Wisconsin ***	Y	Y	Y	Y	Y	16	+2	0.5	0.5	4.00	4.50	13
Wyoming		Y	Y	Y		11		1.0	1.0	3.75	3.75	27

## Legend

Y State responded yes to health maintenance task for 2019 survey.

Y / 1.0 Improvement from last Scorecard.

— Baseline data revised due to survey reporting error in 2017 Scorecard.

\* Revised baseline due to state reporting error in 2016 nurse delegation survey (CT, DC, LA, NH, NY)

\*\* Hawaii, Indiana, and Nevada did not provide updated survey data. 2016 data repeated.

\*\*\* Survey responses based upon AARP interpretation of state Board of Nursing regulations (KY, MT, NM, PA, TX, UT, WI)

Four states allowed additional delegation of medical/nursing tasks since the last Scorecard. Louisiana gave the ability to administer medication on an as needed basis and insert a suppository. New Jersey added the ability for direct care workers to draw up insulin for dosage measurement and administer intramuscular injection medications. South Carolina gave the ability to perform ostomy care including skin care and changing an appliance. Wisconsin added the ability to draw up insulin for dosage measurement and administering intramuscular injection medications.

North Dakota and South Dakota were the only states to improve their performance in Scope of Practice, both moving from reduced to full scope.

Source: Long-Term Services and Supports State Scorecard, 2020.

# EXHIBIT A19 Summary of Indicator Rankings by State

Overall Rank*	State	Number of Indicators with Data	Number of Indicators for which the State is in the:					
			Top 5 States	Top Quartile	2nd Quartile	3rd Quartile	Bottom Quartile	Bottom 5 States
49	Alabama	26	0	4	4	2	16	9
16	Alaska	25	7	10	6	4	5	4
26	Arizona	26	2	5	8	7	6	2
44	Arkansas	26	0	1	6	7	12	5
9	California	26	7	12	5	4	5	4
8	Colorado	26	3	7	13	3	3	0
6	Connecticut	25	5	10	6	7	2	0
22	Delaware	26	0	2	15	6	3	1
14	District of Columbia	24	8	12	3	3	6	3
51	Florida	26	1	2	6	9	9	5
39	Georgia	26	0	1	9	8	8	2
7	Hawaii	26	10	12	6	4	4	2
29	Idaho	26	3	10	7	1	8	4
18	Illinois	26	0	6	8	7	5	2
44	Indiana	26	0	2	7	11	6	5
32	Iowa	25	2	5	6	9	5	2
37	Kansas	26	2	4	7	9	6	3
47	Kentucky	26	0	3	6	4	13	5
42	Louisiana	26	1	5	1	9	11	5
23	Maine	26	2	9	5	3	9	4
13	Maryland	26	3	7	9	5	5	2
10	Massachusetts	26	6	10	7	4	5	1
30	Michigan	26	0	3	7	13	3	1
1	Minnesota	26	12	18	4	1	3	1
40	Mississippi	26	1	4	5	6	11	7
30	Missouri	26	1	4	8	9	5	4
27	Montana	26	1	6	9	5	6	3
25	Nebraska	26	2	7	6	8	5	2
41	Nevada	26	1	2	7	7	10	1
35	New Hampshire	26	2	3	10	9	4	2
12	New Jersey	26	3	4	14	4	4	0
17	New Mexico	26	4	6	6	8	6	2
11	New York	26	4	8	8	5	5	1
38	North Carolina	26	2	3	8	8	7	4
28	North Dakota	26	5	8	6	3	9	6
19	Ohio	26	2	4	12	8	2	1
46	Oklahoma	26	1	2	5	9	10	5
4	Oregon	26	6	14	6	3	3	1
21	Pennsylvania	26	0	6	9	8	3	1
24	Rhode Island	26	3	6	5	10	5	2
48	South Carolina	26	0	1	8	9	8	2
36	South Dakota	26	2	6	7	6	7	5
43	Tennessee	26	2	2	5	11	8	4
15	Texas	26	2	10	6	6	4	1
34	Utah	26	5	7	7	4	8	6
5	Vermont	26	6	13	7	4	2	2
19	Virginia	26	1	6	8	8	4	3
2	Washington	26	5	14	7	3	2	0
50	West Virginia	25	0	0	7	9	9	5
3	Wisconsin	26	3	12	10	3	1	0
33	Wyoming	25	3	6	7	6	6	4

\* Final rank for overall LTSS system performance across five dimensions.

Source: Long-Term Services and Supports State Scorecard, 2020.

## EXHIBIT A20 Summary of Change in Performance by State

Across All Dimensions, Number of Indicators for Which States Improved, Declined, or Stayed About the Same:				
State	Improved	Declined	Same	No Trend *
<b>United States</b>	<b>5</b>	<b>0</b>	<b>16</b>	<b>0</b>
Alabama	2	2	17	0
Alaska	1	7	13	0
Arizona	4	3	14	0
Arkansas	3	2	16	0
California	1	0	19	1
Colorado	3	2	16	0
Connecticut	7	0	13	1
Delaware	4	1	15	1
District of Columbia	4	3	13	1
Florida	2	2	17	0
Georgia	5	2	14	0
Hawaii	5	1	13	2
Idaho	3	4	13	1
Illinois	6	2	13	0
Indiana	4	1	16	0
Iowa	4	3	12	2
Kansas	5	0	15	1
Kentucky	4	3	14	0
Louisiana	7	3	11	0
Maine	1	2	18	0
Maryland	8	0	13	0
Massachusetts	4	1	16	0
Michigan	3	0	18	0
Minnesota	6	1	14	0
Mississippi	5	2	14	0
Missouri	2	0	19	0
Montana	6	1	14	0
Nebraska	3	1	17	0
Nevada	6	1	14	0
New Hampshire	4	1	16	0
New Jersey	7	0	14	0
New Mexico	6	1	13	1
New York	9	0	12	0
North Carolina	1	3	17	0
North Dakota	7	1	13	0
Ohio	6	0	15	0
Oklahoma	4	1	16	0
Oregon	6	3	12	0
Pennsylvania	7	0	14	0
Rhode Island	7	0	13	1
South Carolina	4	1	16	0
South Dakota	4	3	14	0
Tennessee	3	0	17	1
Texas	6	1	13	1
Utah	2	1	17	1
Vermont	3	3	14	1
Virginia	6	1	14	0
Washington	4	1	16	0
West Virginia	3	3	14	1
Wisconsin	5	1	15	0
Wyoming	4	4	11	2

Note: Showing change in 21 indicators where there is comparable current and reference year data.

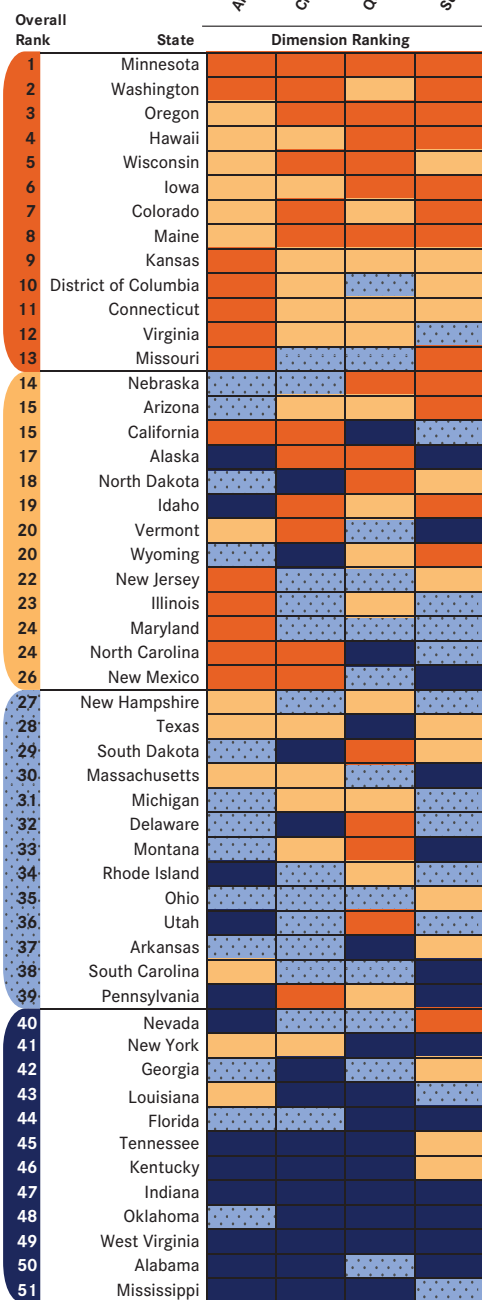
\* Baseline year data not comparable, or missing data for baseline and/or current data year.

Source: Long-Term Services and Supports State Scorecard, 2020.

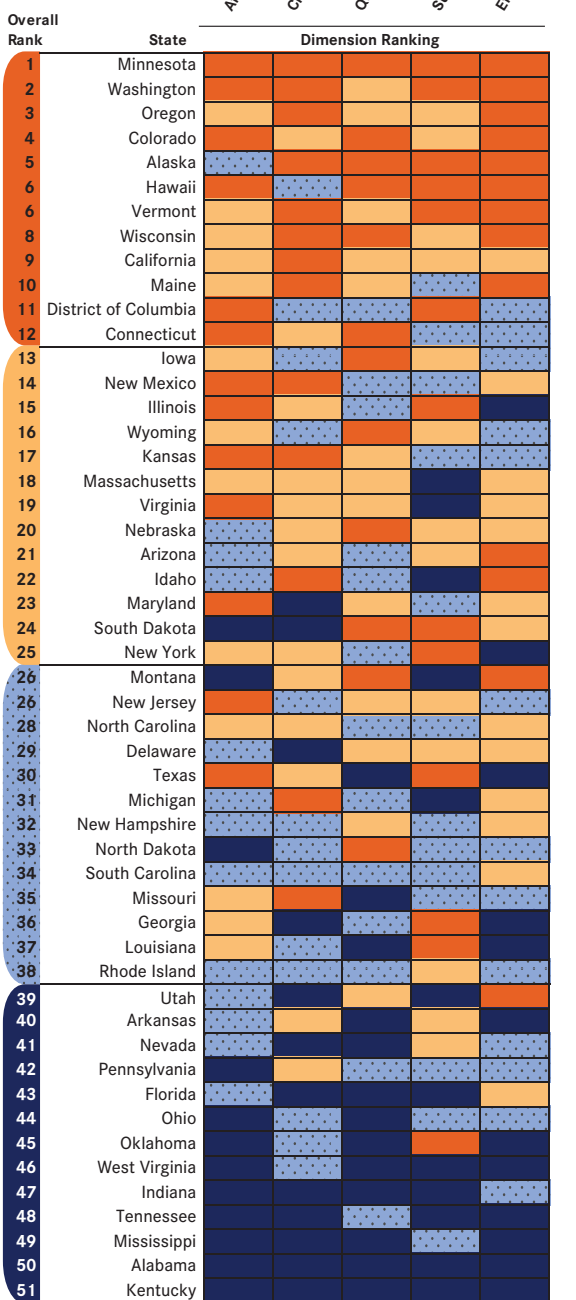
## EXHIBIT A2.1 Matrix Heat Maps for Four LTSS State Scorecards, 2011 to 2020

- Top Quartile
- Second Quartile
- Third Quartile
- Bottom Quartile

2011



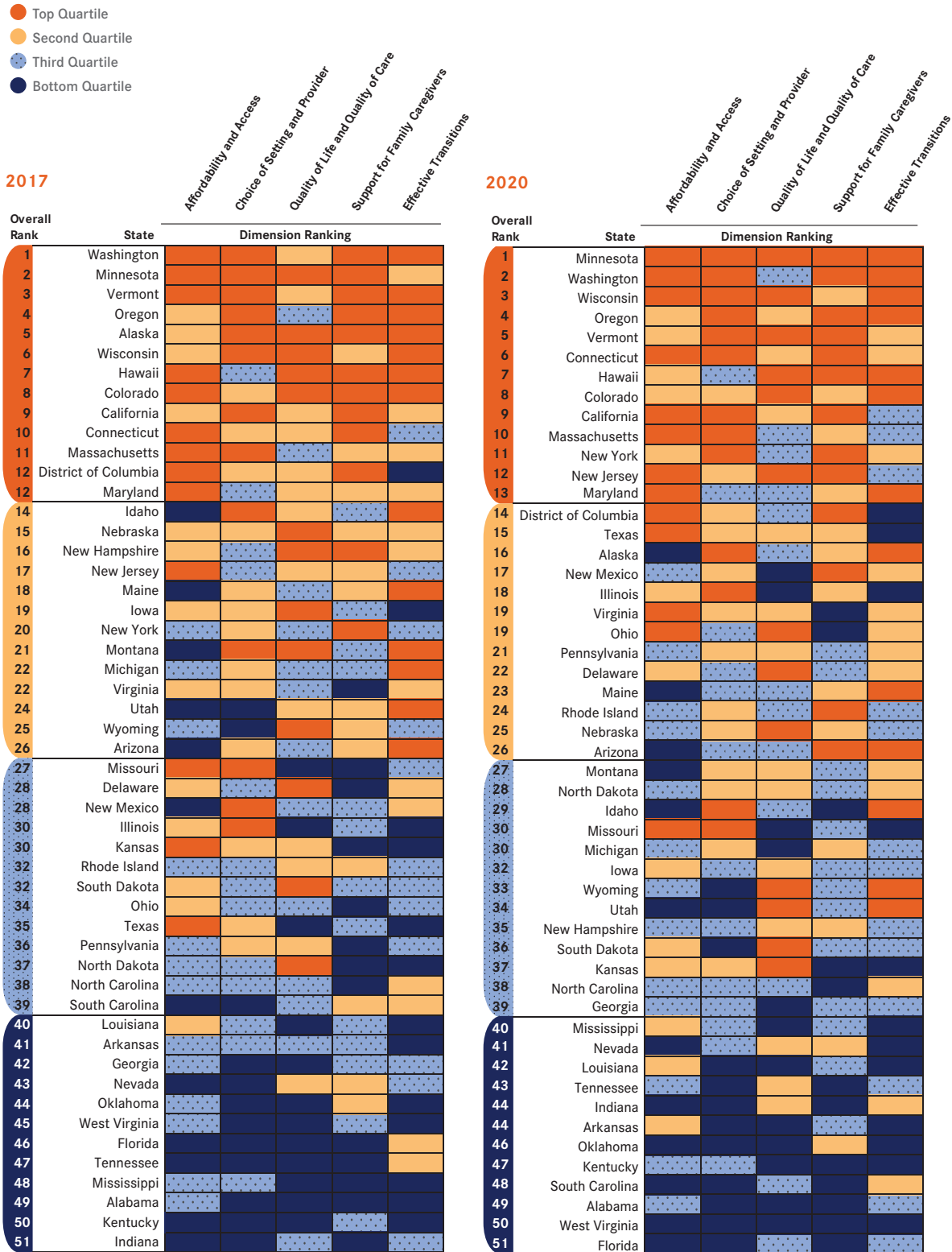
2014



Indicator sets and definitions vary significantly between *Scorecards*. Dimension and overall ranks are not directly comparable between *Scorecards* and therefore a change in rank does not necessarily indicate a change in either absolute or relative performance and should not be interpreted as such. Comparison at the indicator level is the best way to understand changes in system performance.

Source: Long-Term Services and Supports State Scorecard, 2020.

## EXHIBIT A2.1 Matrix Heat Maps for Four LTSS State Scorecards, 2011 to 2020 (continued)



Indicator sets and definitions vary significantly between *Scorecards*. Dimension and overall ranks are not directly comparable between *Scorecards* and therefore a change in rank does not necessarily indicate a change in either absolute or relative performance and should not be interpreted as such. Comparison at the indicator level is the best way to understand changes in system performance.

Source: Long-Term Services and Supports State Scorecard, 2020.

## EXHIBIT A22 State Ranking on LTSS System Performance by Dimension

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	27	51	45	50	38	49
Alaska	45	7	28	24	2	16
Arizona	43	35	36	13	8	26
Arkansas	25	42	47	34	50	44
California	7	2	24	8	35	9
Colorado	14	14	5	20	10	8
Connecticut	2	11	15	11	26	6
Delaware	26	30	4	31	23	22
District of Columbia	1	17	35	1	43	14
Florida	47	50	32	45	39	51
Georgia	33	38	44	28	37	39
Hawaii	20	27	3	8	1	7
Idaho	46	13	31	43	5	29
Illinois	15	10	40	17	42	18
Indiana	41	48	19	51	25	44
Iowa	21	32	17	33	32	32
Kansas	19	22	10	47	47	37
Kentucky	34	37	51	41	44	47
Louisiana	18	47	49	31	49	42
Maine	44	31	33	16	6	23
Maryland	6	28	30	14	12	13
Massachusetts	4	4	34	14	30	10
Michigan	30	24	43	23	27	30
Minnesota	8	1	1	6	11	1
Mississippi	16	36	46	37	51	40
Missouri	3	12	48	39	48	30
Montana	40	26	16	30	15	27
Nebraska	29	23	11	26	33	25
Nevada	51	39	26	19	45	41
New Hampshire	35	33	18	22	34	35
New Jersey	13	19	6	4	35	12
New Mexico	32	16	50	12	17	17
New York	16	9	38	5	21	11
North Carolina	39	34	28	43	19	38
North Dakota	30	25	20	34	22	28
Ohio	10	29	12	42	18	19
Oklahoma	42	45	41	24	46	46
Oregon	24	5	23	3	4	4
Pennsylvania	28	18	21	36	20	21
Rhode Island	37	21	37	10	28	24
South Carolina	50	43	39	46	23	48
South Dakota	22	44	9	38	28	36
Tennessee	35	46	24	49	31	43
Texas	5	15	14	21	40	15
Utah	48	48	7	27	3	34
Vermont	23	3	8	7	16	5
Virginia	12	20	22	48	14	19
Washington	11	6	27	2	7	2
West Virginia	49	40	42	40	41	50
Wisconsin	9	8	2	17	9	3
Wyoming	38	41	13	29	13	33

Source: Long-Term Services and Supports State Scorecard, 2020.



## Exhibit B1 Acknowledgements

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- Tanya Shah, Vice President, Delivery System Reform

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## Exhibit B2 Methodology Overview

The scoring and ranking methodology in this *Scorecard* is based on the same methodology used in previous *LTSS State Scorecards*. As in the 2017 *Scorecard*, the Quality of Life and Quality of Care dimension is given half the weight of the other dimensions in determining the overall rank, and the Support for Family Caregivers dimension is calculated as a single composite rather than an average of indicator ranks.

**Dimensions and Indicators:** The *Scorecard* measures LTSS system performance using 26 indicators (or policy categories) across five dimensions:

- **Affordability and Access** (6 indicators) includes the relative affordability of private pay LTSS, the proportion of individuals with private long-term care insurance, the reach of Medicaid and the Medicaid LTSS safety net for people with disabilities who have modest incomes, and the ease of navigating the LTSS system.
- **Choice of Setting and Provider** (7 indicators) includes the balance between institutional services and home- and community-based services (HCBS), the extent of self-direction, and the supply and availability of alternatives to nursing homes, including subsidized housing units, residential care options such as assisted living, adult day services, and the supply of home health and personal care aides.
- **Quality of Life and Quality of Care** (4 indicators) includes employment of people with disabilities living in the community, two indicators of quality in nursing homes, and a measure of the capability for cross-state benchmarking of HCBS quality measures. This dimension has a long-standing gap in HCBS quality measures that are comparable across states, as well as additional data gaps such as quality of life other than employment. Because of these gaps, the Quality of Life and Quality of Care dimension is considered to be incomplete and receives only one-half of the weight of the other four dimensions in determining states' overall ranks on LTSS system performance.
- **Support for Family Caregivers** (12 policy areas, grouped into 4 broad categories) includes supports for working caregivers,

person- and family-centered care, nurse delegation and scope of practice, and transportation policies.

- **Effective Transitions** (5 indicators) includes measures of hospitalization and institutionalization that should be minimized in a high-performing LTSS system.

Indicators had to be clear, important, meaningful, and have comparable data available at the state level. These 26 indicators were selected because they represent the best available measures at the state level. While no single indicator can fully capture LTSS system performance, taken together they provide a useful measure of how state LTSS systems compare across a range of important dimensions.

**Ranking Methodology:** The *Scorecard* ranks the states from highest to lowest performance on each indicator in the Access, Choice, Quality, and Transitions dimensions. Within each of these four dimensions, individual indicator ranks are averaged and the averages are then re-ranked for dimension-level ranks. In the case of missing data or ties in rank, minor adjustments are made to values used in calculating the average:

- For ties: the average rank is given for the computation of the dimension or overall average (e.g., two states tied at third; both get a score of 3.5 for the calculation of the dimension average).
- For missing data: a constant value is added to all ranks so that the average rank for the indicator is 26 (e.g., if two states are missing data for an indicator, the remaining states rank 2 to 50 for the calculation of the dimension average).

The Support for Family Caregivers dimension is calculated differently. The dimension score is a single composite across all 12 policy areas, and the dimension rank is based on the total dimension score.

The five dimension ranks are then averaged (with the Quality dimension being given half weight) and re-ranked to compute the overall ranking of LTSS system performance. Ties in dimension rank are adjusted as above for calculating overall scores and rankings.

## Exhibit B3 Measuring Change Over Time

One of the main goals of this report is to assess how state long-term services and supports (LTSS) systems improved or declined between the *2017 Scorecard* and the *2020 Scorecard*. However, state ranks at the dimension and overall levels should not be directly compared between the current *Scorecard* and prior *Scorecards*. There are significant changes in the methodology and indicator sets, so changes in rank may not reflect actual changes in relative performance. Tables B3.1 and B3.2 below show a comparison of the indicators and policy categories between the *2017* and *2020 Scorecards*.

**TABLE B3.1** Comparison of Indicator Sets for the *2017* and *2020 LTSS State Scorecards*

Dimension	2017 Scorecard Indicator	2020 Scorecard Indicator	Reference Year Data Available?	Change from 2017 Scorecard
<b>Affordability and Access</b>	Nursing Home Cost	Nursing Home Cost	Yes	
	Home Care Cost	Home Care Cost	Yes	
	Long-Term Care Insurance	Long-Term Care Insurance	Yes	Revised Definition
	Low-Income PWD with Medicaid	Low-Income PWD with Medicaid	Yes	
	PWD with Medicaid LTSS	PWD with Medicaid LTSS	Yes	Revised Definition
	ADRC/NWD Functions	ADRC/NWD Functions	Yes	
<b>Choice of Setting and Provider</b>	Medicaid LTSS Balance: Spending	Medicaid LTSS Balance: Spending	Yes	
	Medicaid LTSS Balance: New Users	Medicaid LTSS Balance: Users	Yes	Replaced Indicator
	Participant Direction	Self-Direction	No	
	Home Health Aide Supply	Home Health Aide Supply	Yes	
	Assisted Living Supply	Assisted Living Supply	Yes	
		Adult Day Services Supply	Yes	New Indicator
	Subsidized Housing Opportunities	Subsidized Housing Opportunities	Yes	
<b>Quality of Life and Quality of Care</b>	PWD Rate of Employment	PWD Rate of Employment	Yes	
	Nursing Home Pressure Sores	Nursing Home Residents with Pressure Sores	No	Revised Definition
	Nursing Home Antipsychotic Use	Nursing Home Antipsychotic Use	Yes	
		HCBS Quality Benchmarking	No	New Indicator
<b>Effective Transitions</b>	Nursing Home Low Care Needs	Nursing Home Residents with Low Care Needs	No	Revised Definition
	Home Health Hospital Admissions	Home Health Hospital Admissions	Yes	Revised Definition
	Nursing Home Hospital Admissions	Nursing Home Hospital Admissions	Yes	
	Burdensome Transitions	Burdensome Transitions	Yes	Revised Definition
	Long Nursing Home Stays	Successful Discharge to Community	No	Replaced Indicator
	Transitions Back to Community			

Notes: Policies in the Support for Family Caregivers dimension are shown in Table B3.2 below. Even when the indicator is unchanged, the *2020 Scorecard* reference year data may not exactly match the *2017 Scorecard* current year data. Different years of data, data updates, or additional information since the production of the *2017 Scorecard* may result in some differences.

**TABLE B3.2** Comparison of Policies Included in the Support for Family Caregivers  
Dimension for the 2017 and 2020 LTSS State Scorecards

Category	2017 Scorecard Policy	2020 Scorecard Policy
<b>Supporting Working Caregivers</b>	Family Responsibility Protected Classification	Family Responsibility Protected Classification
	Exceeds Federal FMLA	Exceeds Federal FMLA
	Paid Family Leave and Sick Days	Paid Family Leave
		Mandatory Paid Sick Days
		Flexible Sick Days
<b>Person- and Family-Centered Care</b>	Unemployment Insurance	Unemployment Insurance
	Spousal Impoverishment Protections	Spousal Impoverishment Protections
	Caregiver Assessment	Caregiver Assessment
	CARE Act Legislation	CARE Act Legislation
<b>Nurse Delegation and Scope of Practice</b>	Nursing Tasks Able to be Delegated	Nursing Tasks Able to be Delegated
	Nurse Practitioner Scope of Practice	Nurse Practitioner Scope of Practice
<b>Transportation Policies</b>	Protection from Increases in Liability or Rates	Volunteer Driver Protection
	Exempt from Livery Laws	
	Volunteer Driver Investment	
	Statewide Coordinating Council	
	Medicaid Non-Medical Transportation	

Notes: Reference year data are available for all policies included in the 2020 Scorecard. Scoring algorithms have changed between the 2017 and 2020 Scorecards for many policies; policy, category, and overall composite scores should not be compared between Scorecards.

Change in performance can be directly measured at the indicator level. Baseline year data (typically 3 years prior to the most current data) are available for 21 of the 26 indicators in the Scorecard. For these 21 indicators, the Scorecard reports both current data and baseline data, and identifies meaningful change (either positive or negative). Note that the period of time covered by the data varies by indicator. Some measures have significant data lag, so the change measured in the 2020 Scorecard may have occurred prior to the publication of the 2017 Scorecard.

To aid in the interpretation of indicator-level change, appendix data tables show current and baseline values for each trended indicator, and also indicate the magnitude of changes by a green check mark for a substantial improvement, a red X for a substantial decline, and a black two-headed arrow for little or no change.

For count- or ratio-scaled data, usually indicators of the form (number of elements)/(population subgroup), a threshold of 10 or 20 percent change in the ratio was used. For example, if a state had a baseline rate of 40 long-term care insurance policies in effect per 1,000 people ages 40 and older in 2015, a ratio of 36 or lower in 2018 would be classified as a decline, and a ratio of 44 or higher would be classified as an improvement. A ratio of 37 through 43 would be classified as “little or no change” so as not to highlight small changes in the data that may not reflect meaningful change.

For percentage data, a threshold of 10 or 20 percent change in the odds was used in order for meaningful change to be possible for any starting value, and for the indication of change to be the same whether the indicator is expressed in a positive or negative way. The odds (or odds ratio) is the ratio of the probability of something happening (or the proportion of the sample in which something is true) to the probability of it not happening, or more generally,  $\text{Odds} = P/(1 - P)$ , where P is the proportion, percentage, or probability. For example, a percentage of 20 percent corresponds to an odds of  $20\%/80\% = 0.25$ , and a percentage of 60 percent corresponds to an odds of  $60\%/40\% = 1.5$ .

The Support for Family Caregivers dimension comprises 12 policy areas grouped into 4 categories. A threshold of 0.2 points of linear change (current value – reference year value) was used to indicate change at the category level. Since some policies are scored against national minimum and maximum values, there could be a slight change in score even if state policy is unchanged. A small threshold of 0.2 points was used so as not to indicate meaningful change without an actual change in state policy.

Table B3.3 below shows the threshold used to indicate substantial improvement for each indicator. Indicators based on survey data that may have uncorrelated sampling errors use a 20 percent threshold instead of 10 percent (as do the two estimated Medicaid LTSS user measures) to reduce the likelihood that random variation is classified as a significant change.

**TABLE B3.3** Thresholds and Type of Change for Identifying Substantial Change

Indicator	Threshold	Type of Change
<b>Affordability and Access Dimension</b>		
Nursing Home Cost	+/-10%	Ratio
Home Care Cost	+/-10%	Ratio
Long-Term Care Insurance	+/-10%	Ratio
Low-Income PWD with Medicaid	+/-20%	Odds Ratio
PWD with Medicaid LTSS	+/-20%	Odds Ratio
ADRC/NWD Functions	+/-10%	Odds Ratio
<b>Choice of Setting and Provider</b>		
Medicaid LTSS Balance: Spending	+/-10%	Odds Ratio
Medicaid LTSS Balance: Users	+/-20%	Odds Ratio
Home Health Aide Supply	+/-20%	Ratio
Assisted Living Supply	+/-20%	Ratio
Adult Day Services Supply	+/-20%	Ratio
Subsidized Housing Opportunities	+/-10%	Odds Ratio
<b>Quality of Life and Quality of Care</b>		
PWD Rate of Employment	+/-20%	Odds Ratio
Nursing Home Antipsychotic Use	+/-10%	Odds Ratio
<b>Support for Family Caregivers</b>		
Supporting Working Family Caregivers	+/-0.2	Linear
Person- and Family-Centered Care	+/-0.2	Linear
Nurse Delegation and Scope of Practice	+/-0.2	Linear
Transportation Policies	+/-0.2	Linear
<b>Effective Transitions</b>		
Home Health Hospital Admissions	+/-10%	Odds Ratio
Nursing Home Hospital Admissions	+/-10%	Odds Ratio
Burdensome Transitions	+/-10%	Odds Ratio



## Exhibit B4 Detailed Indicator Descriptions

### Indicator Description and Data Sources

#### 1 Median Annual Nursing Home Private Pay Cost as a Percentage of Median Household Income Ages 65+:

The ratio of the median daily private-room rate (multiplied by 365 days) divided by the median household income for households headed by someone aged 65 or older. The ratio of the median nursing home cost to median income was calculated at the “region” level and then averaged across all regions in a state, weighted by the proportion of the state population in each region.

Regions are defined by Genworth as collections of counties and map approximately to the Metropolitan Statistical Areas (MSA) established by the US Office of Management and Budget. MSA boundaries are redrawn every 10 years; for this *Scorecard*, the baseline and current-year data are based on different MSA vintages. Change over time in this measure may therefore be due to a combination of changes in one or more of the following: cost (numerator), income (denominator), and market (region definition).

Cost data for the current year are from the *Genworth 2019 Cost of Care Survey* and income data are from the AARP Public Policy Institute (PPI) analysis of the *2018 American Community Survey Public Use Microdata Sample*. Baseline cost data are from the *Genworth 2016 Cost of Care Survey*, and income data are from the *2015 American Community Survey*.

Genworth, *Genworth 2016 Cost of Care Survey* and *Genworth 2019 Cost of Care Survey*. (Richmond, VA: Genworth Financial, 2016, 2019). Detailed tables were provided by Genworth to AARP Public Policy Institute for use in the indicator calculation. Summary reports are available at [https://www.genworth.com/dam/Americas/US/PDFs/Consumer/corporate/cost-of-care/179703\\_CofC\\_Annual\\_060316.pdf](https://www.genworth.com/dam/Americas/US/PDFs/Consumer/corporate/cost-of-care/179703_CofC_Annual_060316.pdf) and <https://www.genworth.com/aging-and-you/finances/cost-of-care.html> and <https://pro.genworth.com/riiproweb/productinfo/pdf/282102.pdf>.

US Census Bureau, ACS PUMS, *American Community Survey Public Use Microdata Sample*. (Washington, DC: US Census Bureau, 2015, 2018), <https://www.census.gov/programs-surveys/acs/data/pums.html>.

#### 2 Median Annual Home Care Private Pay Cost as a Percentage of Median Household Income Ages 65+:

The ratio of the median annual private pay cost of licensed home health aide services (based on 30 hours of care per week multiplied by 52 weeks) divided by the median household income for households headed by someone aged 65 or older. The ratio of the median nursing home cost to median income was calculated at the “region” level and then averaged across all regions in a state, weighted by the proportion of the state population in each region.

Regions are defined by Genworth as collections of counties and map approximately to the Metropolitan Statistical Areas (MSA) established by the US Office of Management and Budget. MSA boundaries are redrawn every 10 years; for this *Scorecard*, the baseline and current-year data are based on different MSA vintages. Change over time in this measure may therefore be due to a combination of changes in one or more of the following: cost (numerator), income (denominator), and market (region definition).

Cost data for the current year are from the *Genworth 2019 Cost of Care Survey* and income data are from the AARP Public Policy Institute analysis (PPI) of the *2018 American Community Survey Public Use Microdata Sample*. Baseline cost data are from the *Genworth 2016 Cost of Care Survey*, and income data are from the *2015 American Community Survey*.

Genworth, *Genworth 2016 Cost of Care Survey* and *Genworth 2019 Cost of Care Survey*. (Richmond, VA: Genworth Financial, 2016, 2019). Detailed tables were provided by Genworth to AARP Public Policy Institute for use in the indicator calculation. Summary reports are available at [https://www.genworth.com/dam/Americas/US/PDFs/Consumer/corporate/cost-of-care/179703\\_CofC\\_Annual\\_060316.pdf](https://www.genworth.com/dam/Americas/US/PDFs/Consumer/corporate/cost-of-care/179703_CofC_Annual_060316.pdf) and <https://www.genworth.com/aging-and-you/finances/cost-of-care.html> and <https://pro.genworth.com/riiproweb/productinfo/pdf/282102.pdf>.

US Census Bureau, ACS PUMS, *American Community Survey Public Use Microdata Sample*. (Washington, DC: US Census Bureau, 2015, 2018), <https://www.census.gov/programs-surveys/acs/data/pums.html>.

#### 3 Private Long-Term Care Insurance Policies in Effect per 1,000 Population Ages 40+:

This is the number of group and individual stand-alone and hybrid private long-term care insurance (LTCI) policies in force (for people of all ages) per 1,000 population ages 40 or older in the state. This is not exactly the proportion of people ages 40+ with private LTCI, because data on the age of policyholders at the state level are not available. Historically, about three-fourths of group policyholders and nearly all individual policyholders have been ages 40+.

LTCI policy data are from the AARP Public Policy Institute analysis of 2018 National Association of Insurance Commissioners (NAIC) Long-Term Care Insurance Experience Reporting - Form 5, end-of-year inforce counts, by company type. In addition, California Public Employee Retirement System (CalPERS) group LTCI policies are separately reported as NAIC does not report CalPERS counts. LTCI policy data excludes federal LTCI group policy counts as the Office of Personnel Management would not authorize the release of 2018 data. 2015 baseline LTCI policy data was rebased to exclude 2015 federal LTCI group policy counts.

Population data are from the US Census Bureau Population Estimates, 2018. 2015 baseline LTCI policy and population data are from the same sources.

NAIC, “Long-Term Care Insurance Experience Reporting - Form 5” (unpublished, Kansas City, MO: National Association of Insurance Commissioners, 2015, 2018), [http://store.naic.org/prod\\_serv\\_home.htm](http://store.naic.org/prod_serv_home.htm).

CalPERS, *Facts at a Glance: January 2014—15 Comprehensive Annual Financial Report* (Sacramento, CA: California Public Employees’ Retirement System, 2015), [www.calpers.ca.gov/](http://www.calpers.ca.gov/). CalPERS, *2018 Long-Term Care Program Report, March 20, 2018* (Sacramento, CA: California Public Employees’ Retirement System, 2018), <https://www.calpers.ca.gov/docs/board-agendas/201803/pension/item-4c-attach-1-a.pdf>.

US Census Bureau, *Annual Estimates of the Resident Population for Selected Age Groups by Sex for the United States: April 1, 2010 to July 1, 2018* (Washington, DC: US Census Bureau, 2018), <https://www.census.gov/data/tables/time-series/demo/popest/2010s-state-detail.html>.

#### **4 Percentage of Adults Ages 21+ with ADL Disability at or Below 250% of Poverty Receiving Medicaid or Other Government Assistance Health Insurance:**

The percentage of adults ages 21+ with a self-care difficulty (difficulty dressing or bathing; a reasonable approximation to activities of daily living disability) at or below 250% of the poverty threshold who have health insurance through Medicaid, medical assistance, or any kind of government assistance plan for those with low incomes or a disability. We chose 250% of poverty in order to fully capture the effect of state policies extending Medicaid eligibility for LTSS up to 300% of Supplemental Security Income.

The percentage of the target population that has Medicaid or other government assistance health insurance was calculated for each year, and this percentage was averaged across the three “current years” and two “reference years” to create the current and baseline indicator values.

Data are from AARP Public Policy Institute analysis of 2016–2018 *American Community Survey Public Use Microdata Sample*. 2014–2015 baseline data are from the same source.

US Census Bureau, ACS PUMS, *American Community Survey Public Use Microdata Sample* (Washington, DC: US Census Bureau, 2014, 2015, 2016, 2017, 2018), <https://www.census.gov/programs-surveys/acs/data/pums.html>.

#### **5 Estimated Medicaid LTSS Users per 100 Population with ADL Disability:**

This measure is an estimate of the number of older people and people with physical disabilities receiving Medicaid LTSS during the year, divided by the number of people in the state with an ADL disability (difficulty with self-care) as measured by the American Community Survey. Because of changes in data availability, this measure is not comparable to similar measures in previous *Scorecards*.

Most, but not all, Medicaid LTSS users have ADL/self-care disabilities. Some have LTSS needs, on account of intellectual disabilities or dementia, but do have difficulty with self-care. Because of data limitations, it was not possible to subset LTSS users by type of disability for a count of LTSS users with ADL disabilities.

Denominator data are from the *American Community Survey*.

Numerator data are estimated by the AARP Public Policy Institute from multiple sources. Nursing home users and HCBS users are estimated separately and added together. Therefore, a single individual receiving services in the community and in a nursing home would be estimated twice. However, this group is fairly small and this measurement issue is constant across all states so has little impact on state ranking on this indicator. This indicator is an estimate derived from multiple sources, not a precise measurement. Small differences in indicator value or rank may not be meaningful; however, the uncertainty in any state’s estimate is small compared to the variation between states.

Nursing home users are estimated from the CMS Medicare and Medicaid Statistical Supplement (data available 2003–04, 2006–11) and Kaiser Family Foundation and UCSF analysis of 12 months of OSCAR data (available 2003–17). The Statistical Supplement contains the number of unique Medicaid nursing homes in each data year; the OSCAR analysis is a near-census of nursing home residents, and contains data on primary payer.



For each of the 8 years that both sources had data, we calculated a conversion factor for each state.

$$K_{state,year} = \frac{U_{state,year}}{C_{state,year}}$$

Where  $U_{state,year}$  is unique Medicaid nursing home user count from the Statistical Supplement and  $C_{state,year}$  is the near-census of nursing home current residents with Medicaid as primary payer from analysis of OSCAR data.

Obvious outliers and implausible values were removed, and the remaining values were averaged to create a state-specific scale factor  $K'_{state}$ . 17 states had at least one data year removed, and 7 states had three or more years removed. For Arizona, which did not have any plausible values in the data, the national average value  $K = 1.863$  was used.

For the current year (2017) and reference year (2014), the estimated number of unique Medicaid nursing home users was given by

$$ENH_{state,year} = K'_{state} * C_{state,year}$$

HCBS users are estimated from Kaiser Family Foundation's (KFF) Medicaid Home and Community-Based Services Enrollment and Spending report series, supplemented by additional sources on a case by case basis. This report provides counts of HCBS users by type of service (3 types in 2014: home health, personal care, and 1915(c) waivers; 6 types in 2017: home health, personal care, 1915(c) waivers, 1915(k), community first choice (CFC), 1115 waivers); counts are not unduplicated between service type, and duplication may be significant and cannot be ignored. Current year data were 2017 (from the 2019 KFF report) and reference year data were 2014 (from the 2018 report).

The general formula for the estimated number of unique HCBS users in a state is

$$EHCBs_{state,year} = \frac{1}{2} \left( \sum_{types} H_{state,year,type} + \max_{types} (H_{state,year,type}) \right)$$

where  $H_{state,year,type}$  is the data in the KFF Enrollment and Spending report and the first half of the right side equation is the total number of HCBS users if there is no duplication between service types, and the second half is the total number of HCBS users if there is 100% duplication to the maximum extent possible given the reported data. The estimated unduplicated count is the midpoint between these two extremes. The service types indexed in the equation above are all that are included in the KFF report, including only aged and physically disabled 1915(c) waivers (excluding other populations such as intellectual/developmental disabilities).

AARP Public Policy Institute followed up with many states (contact with state officials, other stakeholders, and/or state-specific data reports) because of inconsistent or implausible data values. One or more adjustments were applied in 16 states. Adjustments to state estimates are listed below:

Delaware, Hawaii, New Mexico, Rhode Island, Tennessee, Vermont (1115 waiver states, 2017 numbers are plausible but there is a significant undercount of users in 2014)—2014 data are estimated using an assumption of the same user balance (ratio of HCBS to nursing home users) as in 2017.

Arizona—2017 total HCBS users are estimated from 2014 data, based on an increase of 12.9% since 2014. Rate of increase from analysis of state reports for adults (ages 22+) receiving care in the community. <https://www.azahcccs.gov/Resources/Reports/federal.html>.

California—Because of overlap of these service types with the state's 1115 waiver, personal care and CFC were not included in the calculation for data year 2017. For 2014, an 1115 count was estimated assuming the same rate of growth seen in personal care services, and this was substituted for the personal care services count in the calculation.

District of Columbia—2015 data (provided by state Medicaid agency) used instead of 2014 for baseline calculation.

Iowa, South Dakota—2013 home health user counts were used (instead of 2014 and 2017) for calculating both baseline (2014) are current (2017) values.

Massachusetts—2014 total HCBS users are estimated 2017 data, based on an increase of 13.1% between 2014 and 2017. Rate of increase from analysis of data provided to AARP by state Medicaid agency.

Oregon—2017 data do not include CFC in the calculation. It appears that CFC recipients are also being counted as 1915(c) users, including both in the equation would produce a significant over count.

Texas—2014 data are estimated to have the same user balance (ratio of HCBS to nursing home users) as in 2017.

Utah—2014 aged/disabled 1915(c) waiver count of 2349 substituted. Data from CMS 372 report. <https://www.medicaid.gov/sites/default/files/2019-12/cms-372-report-2015.pdf>.

Washington—Because of overlap of these service types with CFC, personal care and aged/disabled 1915(c) waivers were not included in the calculation for data year 2017.

**Numerator data sources:**

Centers for Medicare & Medicaid Services, Medicare & Medicaid Statistical Supplement, 2005 through 2013 editions. “Table 13.25 - Medicaid Persons Served (Beneficiaries), by Type of Service and Area of Residence: Fiscal Year 2011” in the 2013 edition (previous editions may have different table numbering). Available at <https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/Archives/MMSS>.

Kaiser Family Foundation, State Health Facts, Distribution of Certified Nursing Facility Residents by Primary Payer Source, <https://www.kff.org/other/state-indicator/distribution-of-certified-nursing-facilities-by-primary-payer-source/>.

Kaiser Family Foundation, Medicaid Home and Community-Based Services Enrollment and Spending (April 2019), downloaded from <https://www.kff.org/medicaid/issue-brief/medicaid-home-and-community-based-services-enrollment-and-spending> in May 2019.

Kaiser Family Foundation, Medicaid Home and Community-Based Services: Results From a 50-State Survey of Enrollment, Spending, and Program Policies (January 2018), downloaded from <http://files.kff.org/attachment/Report-Medicaid-Home-and-Community-Based-Services> in May 2019.

**Denominator data source:**

US Census Bureau, ACS, American Community Survey (Washington, DC: US Census Bureau, 2013-2018), data table C18106: SEX BY AGE BY SELF-CARE DIFFICULTY, available at <https://data.census.gov/cedsci/>.

**6 ADRC/No Wrong Door Functions (Composite Indicator, scale 0 – 100%):**

This composite indicator comprises functional assessment scores from a voluntary, self-reported survey fielded by AARP for each state’s Aging and Disability Resource Center/No Wrong Door (ADRC/NWD) System. Assessments rated states’ progress toward developing NWD Systems using 41 criteria across 5 dimensions:

1. State Governance and Administration (10 criteria)
2. 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)

States were awarded a point value on the functional status of each criterion. Each criterion received a maximum of 3 points, ranging from 0 (not in place) to 3 (fully operational statewide). Criteria that were informed by more than one question were scored based on the average of the individual questions.

State scores were summed across all criteria to a total of 123 possible points from these functionality criteria. Scores are listed in the *LTSS Scorecard* as a percentage of total possible points, rounded to the nearest whole percent.

List of 41 criteria by function and number of questions for each criterion:

**I State Governance and Administration (10 criteria)**

1. Governor and/or State Legislature’s Support to Develop NWD System (1 question)
2. Multistate Agency Coordinating Body (1 question)
3. Formal Assessment of Access Programs and Functions (1 question)
4. Multiyear Plan to Implement NWD System (1 question)
5. External Stakeholder Involvement (1 question)
6. State Funding (1 question)
7. Designation of Entities (1 question)
8. Continuous Quality Improvement (3 questions)
9. Staff Capacity (2 questions)
10. Information Technology (2 questions)

**II Populations (5 criteria)**

1. Older Adult Population (1 question)
2. People with Physical Disabilities (1 question)
3. People with Intellectual and Developmental Disabilities (1 question)
4. People with Mental Illness and Behavioral Health Needs (1 question)
5. Family Caregiver Population (1 question)

### III Public Outreach and Coordination with Key Referral Sources (8 criteria)

1. Outreach and Marketing Plan (1 question)
2. Searchable Website and 1-800 Phone Number (2 questions)
3. Information and Referral and State Health Insurance Assistance Program (SHIP) (2 questions)
4. Section Q – Local Contact Agencies (1 question)
5. Transitions – Hospitals or Rehab Facilities to Facilitate Transition to Home (1 question)
6. Transitions – Youth (1 question)
7. Veterans Administration (VA) Medical Centers to Provide Veteran-Directed HCBS (1 question)
8. Statewide Reach (1 question)

### IV Person-Centered Counseling (PCC) (9 criteria)

1. Standards are Used to Define PCC (1 question)
2. Management Supports PCC and Planning (1 question)
3. Basic Competencies to Conduct Person-Centered Planning (1 question)
4. Specialized Competencies to Conduct Person-Centered Planning (4 questions)
5. Established Protocols for Developing Person-Centered Plans (1 question)
6. Variety of Organizations to Serve Different LTSS Populations (1 question)
7. Future Planning Needs and Private Pay (2 questions)
8. Follow-up (1 question)
9. Statewide Reach (1 question)

### V Streamlined Eligibility for Public Programs (9 criteria)

1. Improving Efficiencies (1 question)
2. NWD Protocols (1 question)
3. Application Assistance (1 question)
4. Tracking Procedures (1 question)
5. Ease of Access (2 questions)
6. Targeting People Who Are High Risk of Institutionalization (1 question)
7. Diversion Protocol is in Place (2 questions)
8. Presumptive Eligibility (1 question from a different survey source)
9. Statewide Reach (1 question)

AARP PPI, ADRC/No Wrong Door state survey conducted in collaboration with The Lewin Group and US Administration for Community Living” (unpublished, Washington, DC: AARP Public Policy Institute, 2019). Baseline 2016 data are from 2016 and come from the same source.

## 7 Percentage of Medicaid- and State-Funded LTSS Spending Going to HCBS for Older People and Adults with Physical Disabilities:

The percentage of Medicaid LTSS spending for older people and adults with physical disabilities (defined as nursing homes, personal care, aged/disabled waivers, home health, private duty nursing, and other programs used primarily by older people and adults with physical disabilities) going to HCBS. State-funded services are also included where possible; these expenditures are small nationally (about 1% of Medicaid) but significant for some states. Medicaid data are from IBM Watson Health analysis of CMS data and include managed care spending.

The most current data year is 2016 and the reference data year is 2013, where possible. Several adjustments were necessary due to issues with data quality and completeness. 2014 was used for Alaska, California, Idaho, and Kansas. Oregon’s 2016 expenditures for Community First Choice (CFC) were allocated according to historical patterns with 41% of CFC spending being for older adults and people with physical disabilities and 59% for other populations (including people with intellectual/developmental disabilities).

The baseline data year is 2013, where possible. Several adjustments were necessary due to issues with data quality and completeness. New Jersey “HCBS Unspecified AD” spending (managed care) was taken from the previous annual report in this series. New Mexico uses 2014 as a base year. Oregon’s CFC expenditures are allocated 41% to older adults and people with physical disabilities and 59% for other populations, as above.

State-funded HCBS data are from 2018 (current year) and 2014 (reference year). During the most recent data collection, errors in previous 2014 data were noted in certain states, and corrected by others. As a result, for 8 states, 2014 state-funded LTSS spending estimates were interpolated by averaging the current data collection (2018 data) and 2011 data collected for the 2014 State *LTSS Scorecard*: Arizona, the District of Columbia, Idaho, Illinois, Louisiana, Massachusetts,

North Carolina, and Oklahoma. For Maine, the reference year state funded expenditures is set equal to the current (2017/2018) spending.

IBM Watson Health (2018). *Medicaid Expenditures for Long-Term Services and Supports in 2016*, IBM Watson Health, Cambridge, MA,

<https://www.medicaid.gov/sites/default/files/2019-12/LTSexpenditures2016.pdf>

AARP PPI and ADvancing States (2019) LTSS Economic Survey (unpublished).

AARP PPI (2016). *LTSS State Scorecard* Survey (unpublished).

## 8 Estimated Percentage of Medicaid Aged/Disabled LTSS Users Receiving HCBS:

This measure is an estimate, among older people and people with physical disabilities who received Medicaid LTSS during the year, of the percentage that received services in their home or community (as opposed to a nursing home). Because of changes in data availability, this measure is not comparable to previous *Scorecards*, in which the balance of new users receiving HCBS was calculated.

The data used for this indicator are the estimated number of HCBS users  $EHCBS_{state,year}$  and nursing home users  $ENH_{state,year}$  in the numerator of indicator 5: **Estimated Medicaid LTSS users per 100 population with ADL disability** above. Please see that indicator write-up for the details of estimating  $EHCBS_{state,year}$  and  $ENH_{state,year}$ .

This indicator value is calculated as

$$\%HCBS = \frac{EHCBS_{state,year}}{EHCBS_{state,year} + ENH_{state,year}}$$

In addition to the adjustments detailed in the description of indicator 5, reference year data (2014) were not included for Delaware, Hawaii, New Mexico, Rhode Island, Tennessee, Texas, and Vermont due to incomplete data or a lack of comparability to current data.

Estimates are AARP Public Policy Institute calculations based primarily on:

Centers for Medicare & Medicaid Services, Medicare & Medicaid Statistical Supplement, 2005 through 2013 editions. “Table 13.25 - Medicaid Persons Served (Beneficiaries), by Type of Service and Area of Residence: Fiscal Year 2011” in the 2013 edition (previous editions may have different table numbering). Available at <https://www.cms.gov/Research-Statistics-Data-and-Systems/Statistics-Trends-and-Reports/Archives/MMSS>.

Kaiser Family Foundation, State Health Facts, Distribution of Certified Nursing Facility Residents by Primary Payer Source, <https://www.kff.org/other/state-indicator/distribution-of-certified-nursing-facilities-by-primary-payer-source/>.

Kaiser Family Foundation, Medicaid Home and Community-Based Services Enrollment and Spending (April 2019), downloaded from <https://www.kff.org/medicaid/issue-brief/medicaid-home-and-community-based-services-enrollment-and-spending> in May 2019.

Kaiser Family Foundation, Medicaid Home and Community-Based Services: Results From a 50-State Survey of Enrollment, Spending, and Program Policies (January 2018), downloaded from <http://files.kff.org/attachment/Report-Medicaid-Home-and-Community-Based-Services> in May 2019.

## 9 Number of People Self-Directing Services per 1,000 Population with Disabilities:

This is the number of people receiving self-directed services per 1,000 people with any disability in the state. Note that not all people with disabilities have LTSS needs.

The number of people receiving self-directed services is from the National Inventory of Self-Directed Programs in the United States 2019 survey data. Data for the inventory were collected from April to August 2019. Sources of data included state Medicaid waiver information, information from Financial Management Services providers, and telephone interviews with self-directed LTSS program administrators.

The number of people with disabilities is from the 2018 *American Community Survey*.

Applied Self-Direction, “National Inventory of Publicly Funded Self-Directed Long-Term Services and Supports Programs in the United States Survey” (unpublished, Boston, MA: Applied Self-Direction, 2019).

US Census Bureau, ACS, *American Community Survey* (Washington, DC: US Census Bureau, 2018). Census population data (all ages) from 2018 American Community Survey 1-Year Estimates, Table B18101, Sex by Age by Disability Status, available at <https://data.census.gov/cedsci/>.

## 10 Home Health and Personal Care Aides per 100 Population Ages 18+ with an ADL Disability:

This is the number of personal care, nursing, psychiatric, and home health aide direct care workers currently in the workforce per 100 population ages 18+ with an ADL. For 2013-2017, aides are those with occupation code 4610 (personal care aide) or 3600 (nursing, psychiatric, or home health aide) and industry code 8170 (home health care services), 8370 (social services), or 9290 (private households), and who worked in the last 12 months. For 2018, the occupation codes were updated to 3601 (home health aide), 3602 (personal care aide), 3603 (nursing assistant), or 3605 (orderlies and psychiatric aides).

Current year data are from the 2016, 2017, and 2018 *American Community Survey, Public Use Microdata Sample* and baseline data from 2013, 2014, and 2015 are from the same source. Denominator data also from the *American Community Survey*, via American FactFinder.

The supply to population ratio was calculated for each year, and this ratio was averaged across the three “current years” and three “reference years” to create the current and baseline indicator values.

US Census Bureau, ACS PUMS, *American Community Survey Public Use Microdata Sample* (Washington, DC: US Census Bureau, (2013–2018), <https://www.census.gov/programs-surveys/acs/data/pums.html>.

US Census Bureau, ACS, *American Community Survey* (Washington, DC: US Census Bureau, 2013–2018), data table C18106: SEX BY AGE BY SELF-CARE DIFFICULTY, available at <https://data.census.gov/cedsci/>.

## 11 Assisted Living and Residential Care Units per 1,000 Population Ages 75+:

This is the number of assisted living and residential care units per 1,000 population ages 75+. Assisted living and residential care units are taken from two National Center for Health Statistics (NCHS) surveys. To be eligible for inclusion in these studies, a residential care community must have been licensed, registered, listed, certified, or otherwise regulated by the state to

- Provide room and board with at least two meals a day, around-the-clock on-site supervision;
- Help with personal care such as bathing and dressing or health-related services such as medication management;
- Have four or more licensed, certified, or registered beds;
- Have at least one resident currently living in the community; and
- Serve a predominantly adult population.

Excluded were residential care communities licensed to exclusively serve individuals with severe mental illness or intellectual disability/developmental disability. Nursing homes were also excluded.

Data for the current-year 2016 and baseline 2014 assisted living and residential care units are from the *National Study of Long-Term Care Providers Survey*.

For 2016, no estimates were presented for the District of Columbia because the data did not meet confidentiality or reliability standards for NCHS. A 2015 capacity of 814 beds - data previously collected by AARP (unpublished) - was used for calculating the indicator value for DC.

Both 2014 and 2016 data for Connecticut and Iowa are not reported in the *Scorecard*. Connecticut’s licensing structure for assisted living does not permit a unit count. The vast majority of Iowa’s assisted living / residential care facilities were categorically ineligible for the *National Study of Long-Term Care Providers* (NSLTCP) due to the operational definition used in the survey.

2014 baseline data for Hawaii and Wyoming are treated as missing in the *Scorecard* because of concerns that change in supply over time from 2014 to 2016 was due to a change in the composition of the sampling frame, and not to an actual change in the number of units. For both states, the two years of NCHS data are very far apart in magnitude, and further investigation, including alternate data sources, could not resolve the observed differences.

Because publicly reported assisted living and residential care capacity is rounded to the nearest hundred, the capacity per 1,000 people ages 75+ was calculated by NCHS and reported rounded to the nearest whole number.

Population data for 2016 (current year) are from the US Census Bureau Population Estimates, 2017 vintage. Baseline 2014 population data are from the same source, 2015 vintage.

NCHS (2016, 2019). Analysis based on data from the 2014 and 2016 *National Survey of Residential Care Facilities* (unpublished).

NCHS, *National Study of Long-Term Care Providers* (Hyattsville, MD: National Center for Health Statistics, 2014, 2016), <https://www.cdc.gov/nchs/nsltcp/>.

US Census Bureau, *Annual Estimates of the Resident Population for Selected Age Groups by Sex for the United States: April 1, 2010 to July 1, 2017* (Washington, DC: US Census Bureau, 2018), <https://www.census.gov/data/tables/time-series/demo/popest/2010s-state-detail.html>.



## 12 Adult Day Services Total Licensed Capacity per 10,000 Population Ages 65+

This is the maximum number of participants, per 10,000 population ages 65+, allowed at any one time at licensed adult day services centers in each state.

Adult day services capacity refers to the maximum number of participants allowed at an adult day services center location. The allowable daily capacity is usually determined by law or by fire code, but may also be a program decision. Adult day capacity data are from two National Study of Long-Term Care Providers (NSLTCP) surveys. To be eligible for inclusion in these surveys, all adult day services centers identified as adult day care, adult day services, or adult day health services centers and had to: 1) be included in the National Adult Day Services Association database; 2) be licensed or certified by the state to provide adult day services, or accredited by the Commission on Accreditation of Rehabilitation Facilities (CARF); or authorized or otherwise set up to participate in Medicaid (Medicaid state plan, Medicaid waiver, or Medicaid managed care) or part of a Program of All-Inclusive Center for the Elderly (PACE); 3) have one or more average daily attendance of participants based on a typical week; and 4) have one or more participants enrolled at the center at the location at the time of the survey.

Data for current year 2016 and reference year 2014 total licensed adult day services capacity are from the *National Study of Long-Term Care Providers* survey. For 2016, no estimates for adult day services centers were presented for Delaware, the District of Columbia, West Virginia, and Wyoming, and for 2014, no estimates were presented for the District of Columbia, Idaho, Kansas, Utah, West Virginia, and Wyoming, because none of the estimates for these sectors meet confidentiality or reliability standards for NCHS.

For the *Scorecard*, the 2014 data was repeated for the 2016 indicator value for Delaware. All other states are treated as missing data.

Because publicly reported adult day services capacity data is rounded to the nearest hundred, the capacity per 10,000 people ages 65 and older was calculated by NCHS and reported rounded to the nearest whole number.

Population data for 2016 (current year) are from the US Census Bureau Population Estimates, 2017 vintage. Baseline 2014 population data are from the same source, 2015 vintage.

NCHS (2019). Analysis based on data from the 2014 and 2016 *National Study of Long-Term Care Providers* (unpublished).

NCHS, National Study of Long-Term Care Providers (Hyattsville, MD: National Center for Health Statistics, 2014, 2016), available at [https://www.cdc.gov/nchs/nsltcp/nsltcp\\_webtables.htm](https://www.cdc.gov/nchs/nsltcp/nsltcp_webtables.htm).

US Census Bureau, Annual Estimate of the Resident Population for Selected Age Groups by Sex for the United States: April 1, 2010 to July 1, 2017 (Washington, DC: US Census Bureau, 2017, <https://www.census.gov/data/tables/time-series/demo/popest/2010s-state-detail.html>).

## 13 Subsidized Housing Opportunities (Place-Based and Vouchers) as a Percentage of All Housing Units:

This is the number of place-based subsidized housing units and the number of authorized federal housing choice vouchers, as a percentage of all housing units in the state.

State-level housing choice voucher data are from the Center for Budget and Policy Priorities (CBPP) reports, all authorized vouchers. State-level data for place-based units are from the National Housing Preservation Database (NHPD), total units of any subsidy type. Total housing units are from the American Community Survey, via American FactFinder. Current year (2018) and baseline (2015) available from same sources.

NHPD (2016, 2019). AARP Public Policy Institute analysis of National Housing Preservation Database, downloaded 9/14/2016 and 6/6/2019. The NHPD pulls from multiple other sources with varying update frequencies. At the time that baseline and current data were downloaded, most sources were updated through 2015 and 2017.

CBPP (2015, 2017). *Housing Vouchers* (Washington, DC: Center on Budget and Policy Priorities, 2015, 2017), <http://www.cbpp.org/topics/housing-vouchers>.

US Census Bureau, ACS, *American Community Survey* (Washington, DC: US Census Bureau, 2015, 2018), data table B25001 available at US Census Bureau, <https://data.census.gov/cedsci/>.

## 14 Rate of Employment for Adults with ADL Disability Ages 18 to 64 Relative to Rate of Employment for Adults without ADL Disability Ages 18 to 64:

This is the relative rate of employment (full or part time) for people ages 18 to 64 with a self-care difficulty (difficulty dressing or bathing; a reasonable approximation to ADL disability) compared with people ages 18 to 64 without a self-care difficulty. Employment rate is calculated as the percentage of all people who are employed, including those who

are not in the labor force, as many people with disabilities are not in the labor force even though they may have the skills and desire to work.

The ratio of employment rate for adults with ADL disability to adults without ADL disability was calculated for each year, and this ratio was averaged across the three “current years” and three “reference years” to create the current and baseline indicator values.

Current year 2016-2018 data are from 2016, 2017, and 2018 and come from the *American Community Survey*, US Census Bureau. Baseline 2013-2015 are from 2013, 2014, and 2015 from the same source.

US Census Bureau, ACS, *American Community Survey* (Washington, DC: US Census Bureau, 2013- 2015, 2016-2018), data table B18120, available at US Census Bureau, <https://data.census.gov/cedsci/>.

### 15 Percentage of Long-Stay, High-Risk Nursing Home Residents with Pressure Sores:

Percentage of long-stay, high-risk nursing home residents impaired in bed mobility or transfer, comatose, or suffering malnutrition who have pressure sores (stage 2–4 or unstageable) on target assessment.

Current year, four quarter average Q1 – Q4, 2018 data from CMS Minimum Data Set (MDS) 3.0 for Nursing Homes. Data includes stage 2–4 and three unstageable pressure ulcer conditions. Unstageable pressure sores may be open or closed wounds that are completely covered with eschar (hard, black, dead tissue) or a non-removable dressing or device, making them difficult to diagnosis. Prior year CMS data, reported in previous *Scorecards*, did not include unstageable pressure ulcers.

CMS, MDS 3.0 (n.d.). Centers for Medicare & Medicaid Services, *Minimum Data Set, Quality Measure QM453*, Q1 – Q4, 2018, accessed on Nursing Home Compare in August 2018. Baltimore, MD: US Department of Health & Human Services, <https://data.medicare.gov/data/archives/nursing-home-compare>.

### 16 Percentage of Long-Stay Nursing Home Residents who are Receiving an Antipsychotic Medication:

The percentage of long-stay nursing home residents, defined as 100 or more cumulative days in the nursing facility, who are receiving antipsychotic medication on target assessment. Criteria exclude nursing home residents with a diagnosis of schizophrenia, Tourette’s syndrome, and Huntington’s disease.

Current year, four quarter average Q1 – Q4, 2018 , data from CMS Minimum Data Set (MDS) 3.0 for Nursing Homes. Baseline, four quarter average Q2 – Q4, 2015 and Q1, 2016, data from same source.

CMS, MDS 3.0 (n.d.). Centers for Medicare & Medicaid Services, *Minimum Data Set, Quality Measure QM419*, Q1 – Q4, 2018, accessed on Nursing Home Compare in August 2019 and Q2 – Q4, 2015 and Q1, 2016, accessed on Nursing Home Compare in September 2016. Baltimore, MD: US Department of Health & Human Services, <https://data.medicare.gov/data/archives/nursing-home-compare>.

### 17 HCBS Quality Cross-State Benchmarking Capability:

This indicator is constructed from state adoption of four tools that relate to HCBS quality measurement and assurance, or quality of life for people with LTSS needs:

- NCI-AD
- HCBS CAHPS
- BRFSS Emotional Support and Life Satisfaction Module
- Statewide NCQA Accreditation

#### Scoring Algorithm:

- NCI-AD
  - 1.2 points for any participation
  - 1.6 points for sample size >500 (greatest sample size of last two published annual reports)
  - 2.0 points for sample size >800
  - 2.5 points for sample size >1200
- HCBS CAHPS
  - 1.0 point for using within the past 2 years
  - 1.5 points for current/last year

If state is doing both NCI-AD and HCBS CAHPS, the CAHPS credit is reduced by 1.0 because of substitution effect between the tools (a state using one tool robustly is better than using both tools at a minimum level). A state using HCBS CAHPS within the last year would still get 0.5 points of credit for greater frequency of use. For example, Kansas reported using CAHPS in 2019, and therefore earned 1.5 points of credit. However, because the state already received credit for NCI-AD, they are only awarded 0.5 points for HCBS CAHPS instead of the full 1.5 points. Similar -1.0 point adjustments were made to Mississippi, New Jersey, and Pennsylvania.

- BRFSS ES/QOL Module  
0.6 points for 1 year fielding module 2015-17  
0.8 points for 2 years  
1.0 point for 3 years
- NCQA Statewide  
1.0 point for case management for LTSS  
or  
1.0 point for LTSS distinction required

**Data sources:**

NCI-AD: <https://nci-ad.org/states/>, <https://nci-ad.org/resources/reports/>.

HCBS CAHPS: AARP Public Policy Institute and National Association of States United for Aging and Disabilities, “Long-Term Services and Supports Economic Survey” (unpublished, Washington, DC: AARP PPI and NASUAD, 2018). Data validated by CMS (email correspondence, July 2019).

NCQA Statewide: Email correspondence, June 2019. Currently updated data available at: <https://www.ncqa.org/public-policy/work-with-states-map/>.

BRFSS: <https://www.cdc.gov/brfss/questionnaires/modules/category2015.htm>, <https://www.cdc.gov/brfss/questionnaires/modules/category2016.htm> and <https://www.cdc.gov/brfss/questionnaires/modules/category2017.htm>

## 18 Supporting Working Caregivers (maximum possible score 17.0):

This indicator is constructed along six policies:

**Family Medical Leave.** This policy evaluates the extent to which states exceed the federal Family Medical Leave Act (FMLA) requirements for covered employers, covered employee eligibility, covered relationships, and length of leave allowed.

**Scoring:** States received scores for the degree to which they exceeded federal FMLA requirements up to a total of 4.0 possible points as follows:

- 1.0 point for states exceeding federal FMLA for covered employers with 15 or fewer employees and 0.5 points for employers with 16 - 30 employees
- 1.0 point for states exceeding federal FMLA for covered eligibility (time with employer) of less than 1,000 hours, 6 months of work, or no minimum work requirement and 0.5 points for 1,000 hours over a 12-month period
- 0.25 points each (maximum of 1.0 point) for states exceeding federal FMLA for definition of family member (covered relationships) that includes (a) parent-in-law, (b) sibling, (c) grandparent, and (d) grandparent-in-law
- 1.0 point for states exceeding federal FMLA for allowing 16 weeks over a 2-year period and 0.5 points of 12-15 weeks over a 2-year period

Current-year 2018 data from *Raising Expectations: A State-by-State Analysis of Laws That Help Working Family Caregivers* and AARP Public Policy Institute independent research to verify status of laws in 2019. Baseline 2016 data from *Expecting Better for All Working Families: A Special Section of the Fourth Edition of Expecting Better* and legislative updates are from *National Partnership for Women & Families Work & Family Policy Database*, and US Department of Labor, *Wage and Hour Division: Federal vs. State Family and Medical Leave Laws*.

NPWF (2018). *Raising Expectations: A State-by-State Analysis of Laws That Help Working Family Caregivers* (Washington, DC: National Partnership for Women & Families, 2018), <http://www.nationalpartnership.org/our-work/resources/workplace/raising-expectations-2018.pdf>.

NPWF (2016) *Expecting Better for All Working Families: A Special Section of the Fourth Edition of Expecting Better* and *National Partnership for Women & Families Work & Family Policy Database* (Washington, DC: National Partnership for Women & Families, 2016), <http://www.nationalpartnership.org/research-library/work-family/expecting-better-2016.pdf> and <http://www.nationalpartnership.org/issues/work-family/work-family-policy-database/>.

US Department of Labor, *Wage and Hour Division: Federal vs. State Family and Medical Leave Laws* (Washington, DC: US Department of Labor, 2016) <http://www.dol.gov/whd/state/fmla/>.



**Mandatory Paid Family Leave and Sick Days.** These policies evaluate 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. The mandatory paid family leave policy evaluates statewide requirements for covered employers, covered relationships, and length of leave allowed. The mandatory paid sick days policy evaluates statewide requirements for covered employers and number of sick days allowed.

**Scoring:** States received up to 4.0 possible points for statewide paid family leave and up to 3.0 points for mandatory paid sick days leave as follows:

#### **Mandatory Paid Family Leave**

- 1.0 point for statewide laws mandating paid family leave and 0.5 points if enacted statewide law is not effective until after June 2020
- 1.0 point for statewide laws mandating paid family leave for covered employers with 15 or fewer employees, 0.5 points for employers with 16 - 30 employees, and one-half credit if statewide laws do not become effective until after June 2020
- 0.25 points each (maximum of 1.0 point) for statewide laws mandating paid family leave for definition of family member (covered relationships) that includes (a) parent-in-law, (b) sibling, (c) grandparent, and (d) grandparent-in-law, and one-half credit if statewide laws do not become effective until after June 2020
- 1.0 point for statewide laws mandating paid family leave for allowing 10 or more weeks of paid leave, 0.5 points for less than 10 weeks of paid leave, and one-half credit if statewide laws do not become effective until after June 2020.

#### **Mandatory Paid Sick Days**

- 1.0 point for statewide laws mandating paid sick days or paid personal time off and 0.5 points if statewide laws do not become effective until after June 2020
- 1.0 point for statewide laws mandating paid sick days or paid personal time off for covered employers with less than 10 employees, 0.5 points for employers with 10 - 49 employees, and one-half credit if statewide laws do not become effective until after June 2020
- 1.0 point for statewide laws mandating paid sick days or paid personal time off for allowing 40 or more hours of accrued annual leave, 0.5 points from less than 40 hours of accrued annual leave, and one-half credit if statewide laws do not become effective until after June 2020.

Current-year 2018 data from *Raising Expectations: A State-by-State Analysis of Laws That Help Working Family Caregivers* and AARP Public Policy Institute internal communications with State Advocacy & Strategy Integration and independent research to verify status of laws in 2019. Baseline 2016 data from *Expecting Better for All Working Families: A Special Section of the Fourth Edition of Expecting Better*.

NPWF (2018). *Raising Expectations: A State-by-State Analysis of Laws That Help Working Family Caregivers* (Washington, DC: National Partnership for Women & Families, 2018), <http://www.nationalpartnership.org/our-work/resources/workplace/raising-expectations-2018.pdf>.

NPWF (2016). *Expecting Better for All Working Families: A Special Section of the Fourth Edition of Expecting Better and National Partnership for Women & Families Work & Family Policy Database* (Washington, DC: National Partnership for Women & Families, 2016), <http://www.nationalpartnership.org/research-library/work-family/expecting-better-2016.pdf>.

**Flexible Use of Sick Leave.** This policy evaluates the extent to which states and localities require private sector employers to have workplace benefits that allow employees to use a portion of accrued sick time for purposes beyond their own illness, including family caregiving. The flexible use of sick leave policy evaluates state and local legislation for covered employers, covered relationships, and number of days allowed.

**Scoring:** States received up to 3.0 points for flexible use of sick leave as follows:

- 1.0 point for state or local laws requiring flexible use of sick leave for covered employers with 15 or fewer employees, 0.5 points for employers with 16 - 30 employees, and one-half credit if state or local laws do not become effective until after June 2020
- 0.25 points each (maximum of 1.0 point) for state or local laws requiring flexible use of sick leave for definition of *family member* (covered relationships) that includes (a) parent-in-law, (b) sibling, (c) grandparent, and (d) grandparent-in-law, and one-half credit if state or local laws do not become effective until after June 2020
- 1.0 point for state or local laws requiring 10 or more days of flexible use of sick leave, 0.5 points for less than 10 days, and one-half credit if legislation does not become effective until after June 2020.

Current-year 2018 data from *Raising Expectations: A State-by-State Analysis of Laws That Help Working Family Caregivers* and AARP Public Policy Institute internal communications with State Advocacy & Strategy Integration and independent research to verify status of laws in 2019. Baseline 2016 data from *Expecting Better for All Working Families: A Special Section of the Fourth Edition of Expecting Better*.

NPWF (2018). *Raising Expectations: A State-by-State Analysis of Laws That Help Working Family Caregivers* (Washington, DC: National Partnership for Women & Families, 2018), <http://www.nationalpartnership.org/our-work/resources/workplace/raising-expectations-2018.pdf>.

NPWF (2016). *Expecting Better for All Working Families: A Special Section of the Fourth Edition of Expecting Better* (Washington, DC: National Partnership for Women & Families, 2016), <http://www.nationalpartnership.org/research-library/work-family/expecting-better-2016.pdf>.

**Unemployment Insurance.** This policy evaluated 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.

**Scoring:** States received 1.0 point if unemployment insurance laws or regulations include illness or disability of a member of the individual’s immediate family as “good cause” for voluntarily leaving a job.

Current-year 2019 data obtained from communications with Richard McHugh, formerly with the National Employment Law Project. Baseline 2016 data are from *Access to Unemployment Insurance Benefits for Family Caregivers: An Analysis of State Rules and Practices*.

Richard McHugh unpublished internal communications, 2019.

AARP PPI (2015). *Access to Unemployment Insurance Benefits for Family Caregivers: An Analysis of State Rules and Practices*. Washington, DC: AARP Public Policy Institute, <http://www.longtermcorecard.org/publications/access-to-unemployment-insurance-benefits-for-family-caregivers>.

#### **State Policies that Protect Family Caregivers from Employment Discrimination:**

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.

**Scoring:** 2.0 points for statewide laws with defined policy prohibiting discrimination and 1.0 point if statewide but undefined familial status or family responsibility policy. 1.0 point for states with one or more locality laws with a defined policy prohibiting discrimination and 0.5 points if locality law does not define familial status or family responsibility.

Current-year 2019 data are from Center for WorkLife Law (WLL) at the University of California, Hastings College of the Law, legal analysis. Baseline 2014 data are from WLL at the University of California, Hastings College of the Law, *Work Life Law: State Law/Legislation Tracking* from AARP Public Policy Institute.

WLL, legal analysis (unpublished, San Francisco, CA: Center for WorkLife Law at the University of California, Hastings College of the Law, 2019).

WLL, *WorkLife Law: State Law/Legislation Tracking* (San Francisco, CA: Center for WorkLife Law at the University of California, Hastings College of the Law, 2014), <https://worklifelaw.org/publications/FRD-Tracker-June-2014.pdf>.

## **19 Person- and Family-Centered Care (maximum possible score 5.5):**

This indicator is constructed along three policies:

#### **State Policies on Financial Protection for Spouses of Medicaid Beneficiaries who Receive HCBS:**

This policy evaluated the extent to which the state Minimum Maintenance of Needs Allowance (MMNA) permits the community spouse to retain the federal maximum income allowance and asset resource protections, and whether spouses of HCBS waiver recipients receive the full level of income and asset protection afforded to spouses of nursing home residents.

**Scoring:** States received scores for income and asset protections up to a total of 2.0 possible points as follows:

- 1.0 point for states where the MMNA federal *maximum* income allowance of \$3,160.50 is the state *minimum* income allowance protection, 0.5 points for states that permit the full range between the federal minimum \$2,113.75 and federal maximum \$3,160.50 income allowance protection. Midrange values have computed scores:  $(0.5 \times (X - 2113.75) / (3160.5 - 2113.75))$ .
- 1.0 point for states where the MMNA federal maximum asset resource protection of \$126,420 is the minimum standard, and a weighted computation score for states that use an amount above the federal *minimum* \$25,284 asset resource protection:  $(X - \$25,284) / (\$126,420 - \$25,284)$ .

Current-year 2019 state policies on financial protection for spouses of Medicaid beneficiaries who receive HCBS from Krause Financial Services (KFS), *State-Specific Medicaid Resources*, state data last updated Q1, 2019 through Q3, 2019 and AARP Public Policy Institute independent research on statutes for Medicaid HCBS waiver recipients receiving full income and asset protection. Baseline 2016 data are from the same source for Q4, 2015 through Q2, 2016.

KFS, *State-Specific Medicaid Resources* (De Pere, WI: Krauss Financial Services, 2015-16, 2019), <https://www.medicaidannuity.com/resources/state-resources/>.

**State Assessment of Family Caregiver Needs.** This policy addresses the extent to which a state conducts an 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. Programs for which the caregiver assessment tool is used included: (1) 1915(c); (2) 1115 demonstration; (3) Medicaid state plan personal care services; (4) 1915(i); (5) 1915(j); (6) Medicaid state plan (k)—Community First Choice; (7) National Family Caregiver Support Program (OAA); (8) state-funded family caregiver support program; (9) state-funded HCBS; and (10) other.

**Scoring:** 1.0 point if a caregiver assessment is used in at least 1 of the 10 programs listed above for older adults and/or adults with physical disabilities for a maximum of 1.0 point. States are awarded 0.3 points for each additional program (up to 5 programs) beyond the first program linked to an assessment for a maximum of 1.5 points. Total allowable points states can be awarded for this component is 2.5 points.

Current year 2019 data from the LTSS Economic Survey, conducted jointly by the AARP Public Policy Institute and ADvancing States (unpublished). Baseline 2016 data from the AARP Public Policy Institute *LTSS State Scorecard Survey* (unpublished).

AARP PPI and ADvancing States, “LTSS Economic Survey” (unpublished, Washington, DC: AARP Public Policy Institute and Chrystal City, VA: ADvancing States, 2018-2019).

AARP PPI, “LTSS State Scorecard Survey” (unpublished, Washington, DC: AARP PPI, 2016).

**CARE Act.** States that passed Caregiver Advise, Record, Enable (CARE) Act legislation and Bill is signed into law. The CARE Act helps family caregivers from the moment their loved ones go into the hospital to when they return home. The CARE Act requires hospitals to: (1) Record the name of the family caregiver on the medical record of a loved one; (2) Inform the family caregivers when the patient is to be discharged; and (3) Provide the family caregiver with education and instruction of the medical tasks he or she will need to perform for the patient at home.

**Scoring:** States that pass CARE Act legislation and had a Bill signed into law received 1.0 point.

Current year 2019 data obtained from AARP State Advocacy & Strategy Integration internal communications. Baseline 2016 data are from the same source.

AARP State Advocacy & Strategy Integration unpublished internal communications, 2016, 2019.

## 20 Nurse Delegation and Scope of Practice: (maximum possible score 5.0):

This indicator is constructed with two policies:

### Number of Health Maintenance Tasks Able to be Delegated to LTSS Workers (out of 16 tasks):

The number of 16 tasks that can be performed by a direct care aide through delegation by a registered nurse:

Medication Administration	Tube Feeding and Gastric Care
1. Oral medication	10. Gastrostomy tube feeding
2. PRN medication	11. Administer enema
3. Pre-filled insulin/insulin pen	Bladder Regimen and Skin/Appliance Care
4. Draw up insulin	12. Perform intermittent catheterization
5. Other injectable medication	13. Perform ostomy care including skin care and changing appliance
6. Glucometer testing	Respiratory Care
7. Medication through tubes	14. Perform nebulizer treatment
8. Insertion of suppositories	15. Administer oxygen therapy
9. Eye/ear drops	16. Perform ventilator respiratory care

**Scoring:** States received 0.25 points for each of the 16 health maintenance tasks that can be delegated by a registered nurse to an LTSS direct care worker for a total of 4.0 points.

Current-year 2019 data collected from AARP Public Policy Institute survey on nurse delegation in home settings. 2016 data was repeated for three states (Hawaii, Indiana, and Nevada) that did not respond to the 2019 survey on nurse

delegation. Baseline 2016 data from the AARP Public Policy Institute 2016 survey on nurse delegation in home settings. AARP interpreted 2016 state Board of Nursing regulations for twelve states that did not respond to the survey on nurse delegation (Delaware, District of Columbia, Indiana, Kentucky, Louisiana, Michigan, Mississippi, Montana, New Mexico, Oklahoma, Texas, and Utah). Due to data limitations, 2013 data was repeated in 2016 for South Carolina.

AARP PPI, “Survey on Nurse Delegation in Home Settings” (unpublished, Washington, DC: AARP Public Policy Institute, 2016, 2019).

**Nurse Practitioner Scope of Practice:** This policy addresses the extent to which state practice and licensure laws permit a nurse practitioner (NP) to be able to practice to the fullest extent of his or her education and training. Scope of practice includes three levels of authority: (a) Under full practice authority, the NP is permitted to evaluate patients, diagnose, order, and interpret diagnostic tests, initiate and manage treatments, and prescribe medications; (b) Reduced practice requires a collaborative practice agreement with a physician specifying the scope of practice allowed; and (c) Restricted practice requires a physician to oversee all care provided by the NP.

**Scoring:** States that permit full scope of practice received 1.0 point, states that permit reduced scope of practice received 0.5 points, and states that have restricted practice received 0 points.

Current year 2019 data from AARP Public Policy Institute analysis of nurse practitioner state practices, American Association of Nurse Practitioners, *Nurse Practitioner State Practice Environment*. Baseline 2016 data from same source.

American Association of Nurse Practitioners (AANP), *Nurse Practitioner State Practice Environment* (Austin, TX: American Association of Nurse Practitioners, 2016, 2019), <https://www.aanp.org/legislation-regulation/state-legislation/state-practice-environment>.

## 21 Transportation Policies (maximum possible score 1.0):

Transportation policies that support family caregivers include volunteer driver policies.

Volunteer driver policies (current year 2019, baseline 2015-2016): Protection from insurance cancelation, or unreasonable or unfair if the state had a policy.

**Scoring:** States with volunteer driver policies received 1.0 point, and states that did not have a policy received 0 points.

Jana Lynott (AARP, Public Policy Institute), Johanna Zmud, Gretchen Stoeltje, Todd Hansen, Tina Geiselbrecht, Chris Simek, Ben Ettelman (Texas A&M Transportation Institute), and Wendy Fox-Grage, *Volunteer Driver Insurance in the Age of Ridehailing* (Washington, DC: AARP Public Policy Institute, publication forthcoming).

ITN America/AARP PPI (2016 analysis of data from ITN America, 50 state Policy Project, [http://policy.itnamerica.org/?page\\_id=2881](http://policy.itnamerica.org/?page_id=2881)).

## 22 Percentage of Nursing Home Residents with Low Care Needs:

This is the percentage of nursing home residents ages 65+ who met the criteria of having low care needs. Low care status is 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) and is not classified in either the “Special Rehab” or “Clinically Complex” Resource Utilization Group (RUG-IV). Low care status may apply to a resident who is also classified in either of the lowest 2 of the 44 RUG-IV groups. Analysis of 2017 MDS 3.0 state-level care data as reported in LTCFocus.org, by V. Mor at Brown University.

As of February 2020, data for 2016 and 2017 for this measure on LTCFocus.org are not consistent with previous years, mostly likely due to a change in the details of the calculation.

Brown University (2017). Changing Long Term Care in America Project at Brown University funded in part by the National Institute on Aging (1P01AG027296). Providence, RI: Brown University School of Public Health, <http://lctfocus.org/>.

## 23 Percentage of Home Health Patients with a Hospital Admission:

This is the percentage of home health stays for patients who have a Medicare claim for an unplanned admission to an acute care hospital during the 60 days following the start of the home health stay.

Current year 2017 national and state-level data for how often home health patients had to be admitted to the hospital are from CMS, Home Health Compare, Data Archive, 2018 Annual Files, for January – December 2017. Baseline 2015 data are from 2015 Annual Files from the same source for January – December 2014.

Prior *Scorecards* used a different measure of home health hospital admissions that is no longer being calculated or reported.

CMS, Home Health Compare, Data Archive, (Baltimore, MD: US Department of Health & Human Services, archive dates 10/8/2015 and 10/24/2018), <https://data.medicare.gov/data/archives/home-health-compare>.

#### **24 Percentage of Long-Stay Nursing Home Residents Hospitalized within a Six-Month Period:**

This is the percent of long-stay residents (residing in a nursing home for at least 90 consecutive days) who were ever hospitalized within six months of baseline assessment. Residents were excluded if they did not have continuous Medicare fee-for-service coverage for the six month evaluation period.

The study population was identified using data from MDS 3.0, which captures data on nursing home resident assessments, and Master Beneficiary Summary File, Part A-Medicare Inpatient Claims data between January 1, 2016 and December 31, 2016 (current year); and January 1, 2014 and December 31, 2014 (baseline year).

The national percentage was not provided in the source data. The US rate was estimated by the average of state rates, weighted by the total nursing home population in each state.

Brown University (2014, 2016). Changing Long-Term Care in America Project at Brown University funded in part by the National Institute on Aging (1P01AG027296). Providence, RI: Brown University School of Public Health, <http://ltcfocus.org/>.

#### **25 Percentage of Nursing Home Residents with One or More Potentially Burdensome Transitions at End of Life:**

This is the percentage of nursing home decedents who had at least one potentially burdensome transition at end of life. A potentially burdensome transition is defined as:

Any transfer in the last 3 days of life;

A lack of continuity of a nursing home before and after a hospitalization in the last 120 days of life (i.e., going from nursing home A to the hospital and then to nursing home B);

Three or more hospitalizations in the last 90 days of life;

Two or more hospitalizations for dehydration in the last 120 days of life;

Two or more hospitalizations for pneumonia in 120 days; and

Two or more hospitalizations for septicemia in the last 120 days of life.

This definition and the details of the data analysis differ slightly from the definition used in previous *Scorecards*. The study population was identified using data from MDS 3.0, Medicare Beneficiary Summary File, Medicare Medpar records, which captures data on nursing home resident assessments, and Medicare claims data between January 1, 2016 to December 31, 2016 (current year) and January 1, 2013 to December 31, 2013 (baseline year). Subject eligibility criteria included the following: (1) insured by Medicare fee-for-service; (2) a resident of a nursing home within 120 days prior to death; and (3) ages 66+.

Brown University (2013, 2016). Changing Long-Term Care in America Project at Brown University funded in part by the National Institute on Aging (1P01AG027296). Providence, RI: Brown University School of Public Health. <http://ltcfocus.org/>.

#### **26 Percentage of Short-Stay Residents Who Were Successfully Discharged to the Community:**

This is a claims-based outcome measure of the proportion of Medicare beneficiaries, ages 18+, who successfully discharged to the community from a post-acute care (PAC) skilled nursing facility (SNF) and had no unplanned rehospitalizations and no death in the 31 days following discharge. Community is defined as home or self-care, with or without home health services, based on Patient Discharge Status Codes 01, 06, 81, and 86 on the Medicare FFS claim.

Only PAC stays that are preceded by a short-term acute care stay in the 30 days prior to the PAC admission date are included in the measure. Stays ending in transfers to the same level of care are excluded.

Previous *Scorecards* used two measures of transition to and from a nursing home, designed by AARP and Mathematica, and calculated by Mathematica. We are replacing these with a single publicly reported measure in order to align with data that are more readily available and enable comparison to other time periods and levels of analysis (facilities, counties, etc).

Data are from Skilled Nursing Facility Quality Reporting Program, Medicare Fee-for-Service Claims data, 4/1/2017 – 3/31/2018, file date 2/1/2019.

CMS, Medicare Fee-for-Service Claims (2019). Centers for Medicare & Medicaid Services, *Medicare Fee-for-Service Claims QM 523*, 4/1/2017 – 3/31/2018, file date 2/1/2019, accessed on Nursing Home Compare in July 2019. Baltimore, MD: US Department of Health & Human Services. <https://data.medicare.gov/data/nursing-home-compare?sort=relevance&tag=quality%20measures>.



## Exhibit B5 Detailed Indicator Data: Supporting Working Caregivers (State and Local Policy-Level Details)

### States and Localities with Laws that Protect Family Caregivers from Employment Discrimination

The information provided below includes states that received points for having statewide or local laws that protect family caregivers from employment discrimination. States received points for the extent to which a state (or locality) law expressly includes family responsibilities, including care provided to aging parents or family members with an illness or disability, as a protected classification in the context that prohibits discrimination against employees who have family responsibilities.

In the *2020 LTSS State Scorecard*, states with laws that expressly prohibit employment discrimination against family caregivers receive 2.0 points. States with one or more localities that have laws that protect working family caregivers receive 0.60 points. State and local laws that do not expressly define their key term leave room to interpret those laws to protect family caregivers from employment discrimination. States receive 1.0 point for statewide laws with undefined key terms; 0.30 points are given to states with one or more localities with laws having undefined key terms.

Information also includes a list of localities for each state that received points for localities that enacted local legislation and a summary of state and local laws that define key terms—*family responsibilities*, *family status*, *familial status*, and *caregiver*—that can protect working family caregivers of older people and adults with disabilities from employment discrimination.

#### Arizona (0.30 points)

- Local law: Buckey, Tolleson—Local laws do not define familial status.

#### California (0.60 points)

- Local law: San Francisco—Caregiver is defined to include care for a parent of the

employee who is age 65 or older and other adult family members who have serious health conditions. Family is defined as related by blood or marriage, and includes spouse, partner, parent, sibling, and grandparent. Caregiver coverage includes caregivers of own parents over age 65 and adult family members who have a serious health condition.

#### Colorado (0.30 points)

- Local law: Crested Butte, Telluride—Local laws do not define familial status.

#### Connecticut (1.00 point)

- Statewide law—Law does not define family responsibility.

#### Delaware (2.00 points)

- Statewide law—Family responsibility is defined as caring for family members who would be covered under the federal Family Medical Leave Act (FMLA), so siblings, in-laws, grandparents, and unmarried partners are not included. Caregiver coverage includes caregivers of own spouse and own parent and children with a serious health condition.

#### District of Columbia (2.00 points)

- Districtwide law—Family responsibilities is defined as contributing to the support of a person in a dependent relationship. City regulations clarify that the person may be related by blood, legal custody, or marriage, or may be someone who shares a residence and maintains a domestic partnership. Caregiver coverage includes caregivers for a spouse and adult family members, including own parent.

#### Florida (0.60 points)

- Local law: Monroe County—Familial status means the status of “...living alone or in any familial relationship whatsoever, including, but not limited to, living with a

partner... , and of living with one or more dependents, whether minor or disabled children or parents.” Caregiver coverage includes caregivers of adult family members.

**Illinois (0.60 points)**

- Local laws: Champaign, Urbana—Family responsibilities is defined as contributing to the support of a person in a dependent relationship. Caregiver coverage includes caregivers of dependent family members, including own parent and adult family members.

**Indiana (0.30 points)**

- Local laws: Valparaiso, Zionsville—Local laws do not define familial status.

**Iowa (0.60 points)**

- Local law: Grinnell—Familial status is defined as living with minor children or living with and caring for another adult with physical or mental disabilities. Caregiver coverage includes caregivers of adults with disabilities who reside in the same home as the caregiver.

**Kansas (0.60 points)**

- Local law: Mission—Familial status is defined as adults who are spouses, parents, and children, and “persons who are presently residing together or have resided together in the past.” Caregiver coverage includes caregivers of people who have certain family relationships, including own parent and adult family members.

**Kentucky (0.30 points)**

- Local law: Paducah—Local law does not define familial status.

**Maine (0.30 points)**

- Local laws: Bangor, Orano—Local laws do not define family status.

**Maryland (0.60 points)**

- Local law: Montgomery County—Family responsibilities is defined as being financially or legally responsible for the

support or care of a person. Caregiver coverage includes caregivers of others, including own parents and adult family members.

**Michigan (0.60 points)**

- Local laws: Adrian, Albion, Ann Arbor, Battle Creek, Canton Charter Township, Farmington Hills, Fenton, Howell, Jackson, Kalamazoo, Lansing, Marquette, Mount Pleasant, Oshtemo, Portage, Royal Oak, Trenton, Ypsilanti—Local laws define family status and family responsibilities. Caregiver coverage includes caregivers of family members, including own parents and adult family members.

**New Jersey (0.60 points)**

- Local law: East Orange—Family status is defined as being in a family, which means a spouse, sibling, parent, child, or other near relative who lives with the employee, and a nonrelative under certain circumstances. Caregiver coverage includes caregivers of family members, including own parents and adult family members, who live together.

**New Mexico (0.30 points)**

- Local law: Angel Fire—Local law does not define familial status.

**New York (0.60 points)**

- Local law: New York City—Caregiver status is defined as providing direct and ongoing care for a care recipient, which is defined as a person with a disability who is a covered relative or who lives with the employee and relies on the employee for medical care or the needs of daily living. Covered relatives include spouse, partner, parent, sibling, grandparent, parents of the employee’s spouse or partner, or any other individual in a familial relationship with the employee. Caregiver coverage includes caregivers of family members, including own parents and adult family members, and others who live with the employee and who have a disability and rely on the employee for care.

### Ohio (0.30 points)

- Local laws: Bowling Green, Kent, New Carlisle, Olmsted Falls, St. Clairsville—Local laws do not define familial status.

### Oklahoma (0.30 points)

- Local laws: Mounds, Norman, Okmulgee—Local laws do not define familial or family status.

### Oregon (0.30 points)

- Local laws: Beaverton, Corvallis, Hillsboro, Salem, Springfield, Benton County, Multnomah County—Local laws do not define familial status.

### Pennsylvania (0.60 points)

- Local law: Philadelphia—Familial status is defined as providing care or support to a family member. Family members include spouses, partners, parents, grandparents, siblings, and in-laws. Caregiver coverage includes caregivers of family members, including own parents and adult family members.

### Texas (0.30 points)

- Local law: Fulton—Local law does not define familial status.

### Wisconsin (0.60 points)

- Local laws: De Pere, Racine—Family status is defined as a household containing one or more minor or adult relatives (note: this definition may apply to housing, but no other definition is provided for employment). Caregiver coverage includes caregivers of adult relatives, including own parents and adult family members, who live together.

## The Extent to Which States Exceeded Federal Requirements under the Family and Medical Leave Act

The information provided below includes states that exceeded federal Family and Medical Leave Act (FMLA) requirements for covered employers, covered employee eligibility, length of leave, and type of leave allowed. States received points for the degree to which they exceeded the federal FMLA requirements, up to a total of 4.0 possible points, as follows:

### Covered employers:

15 or fewer employees (1.0 point) | 16 to 30 employees (0.50 points)

### Covered employee eligibility (time with employer):

Less than 1,000 hours or 6 months of work with no minimum hours (1.0 point) | 1,000 hours over a 12-month work period (0.50 points)

### Type of leave (covered “family member” relationships):

Parent-in-law | Sibling | Grandparent | Grandparent-in-law (0.25 points each, up to a total of 1.0 point)

### Length of leave:

16 weeks over 2 years (1.0 point) | 12 to 15 weeks over 2 years (0.50 points)

### Connecticut (1.75 points)

- Time with employer (0.50 points)—1,000 hours over a 12-month work period
- Covered relationships (0.25 points)—Parent-in-law
- Length of leave (1.0 point)—16 weeks of leave over a 24-month period

### District of Columbia (3.00 points)

- Covered employers (0.50 points)—20 or more employees
- Time with employer (0.50 points)—1,000 hours over a 12-month work period
- Covered relationships (1.0 point)—Parent-in-law, sibling, grandparent, grand-parent-in-law



- Length of leave (1.0 point)—16 weeks of leave over a 24-month period

#### **Hawaii (2.00 points)**

- Time with employer (1.0 point)—More than 6 consecutive months of service with employer
- Covered relationships (1.0 point)—Parent-in-law, sibling, grandparent, grandparent-in-law

#### **Maine (1.25 points)**

- Covered employers (1.0 point)—15 or more employees
- Covered relationships (0.25 points)—Sibling

#### **Minnesota (0.50 points)**

- Covered relationships (0.50 points)—Sibling, grandparent

#### **New Jersey (1.75 points)**

- Covered employers (0.50 points)—30 or more employees
- Time with employer (0.50 points)—1,000 hours over a 12-month work period
- Covered relationships (0.75 point)—Parent-in-law, sibling, grandparent

#### **Oregon (2.00 points)**

- Covered employers (0.50 points)—25 or more employees
- Time with employer (1.0 point)—900 hours of service (36 weeks, minimum 25 hours per week)
- Covered relationships (0.50 points)—Parent-in-law, grandparent

#### **Rhode Island (0.50 points)**

- Length of leave (0.50 points)—13 weeks of leave over a 2-year period

#### **Vermont (1.25 points)**

- Covered employers (1.0 point)—15 or more employees
- Covered relationships (0.25 points)—Parent-in-law

#### **Wisconsin (0.75 points)**

- Time with employer (0.50 points)—1,000 hours over a 12-month work period
- Covered relationships (0.25 points)—Parent-in-law

### **The Extent to Which States Offer Mandatory Paid Family Leave**

The information provided below includes states that received points for extending benefits beyond FMLA to family caregivers. States received points for the extent to which state laws require employers to provide mandatory paid family leave, up to a total of 4.0 possible points, as follows:

#### **Statewide paid family leave law:**

Statewide law enacted and effective (1.0 point) | ½ credit if statewide law enacted but not effective until after 6/2020 (0.50 points)

#### **Covered employers:**

15 or fewer employees (1.0 point) | ½ credit if law not effective until after 6/2020 (0.50 points) | 16 to 30 employees (0.50 points) | ½ credit if law not effective until after 6/2020 (0.25 points)

#### **Type of leave (covered “family member” relationships):**

Parent-in-law | Sibling | Grandparent | Grandparent-in-law (0.25 points each, up to a total of 1.0 point) | ½ credit if law not effective until after 6/2020 (0.125 to 0.50 points)

#### **Length of leave:**

10 or more weeks of leave (1.0 point) | ½ credit if law not effective until after 6/2020 (0.50 points) | less than 10 weeks (0.50 points) | ½ credit if law not effective until after 6/2020 (0.25 points)

#### **California (3.25 points)**

- Statewide law (1.0 point)—Effective
- Covered employers (1.0 point)—All private-sector employers
- Covered relationships (0.75 points)—Parent-in-law, sibling, grandparent
- Length of leave (0.50 points)—8 weeks of leave

### Connecticut (2.00 points)

- Statewide law (0.50 points)—Law enacted (becomes effective 1/1/21)
- Covered employers (0.50 points)—All private-sector employers (law effective 1/1/21)
- Covered relationships (0.50 points)—Parent-in-law, sibling, grandparent, grandparent-in-law (law effective 1/1/21)
- Length of leave (0.50 points)—Up to 12 weeks of leave (law effective 1/1/21)

### District of Columbia (3.50 points)

- Statewide law (1.0 point)—Effective
- Covered employers (1.0 point)—All private-sector employers
- Covered relationships (1.0 point)—Parent-in-law, sibling, grandparent, grandparent-in-law
- Length of leave (0.50 points)—6 weeks of leave

### Massachusetts (3.25 points)

- Statewide law (1.0 point)—Effective
- Covered employers (0.50 points)—25 or more employees
- Covered relationships (0.75 points)—Parent-in-law, sibling, grandparent
- Length of leave (1.0 point)—12 weeks of leave

### New Jersey (2.50 points)

- Statewide law (1.0 point)—Effective
- Covered employers (0.50 points)—30 or more employees
- Length of leave (1.0 point)—12 weeks of leave

### New York (3.50 points)

- Statewide law (1.0 point)—Effective
- Covered employers (1.0 point)—All private-sector employers
- Covered relationships (0.50 points)—Parent-in-law, grandparent

- Length of leave (1.0 point)—10 weeks of leave

### Oregon (1.50 points)

- Statewide law (0.50 points)—Law enacted (becomes effective 2023)
- Covered employers (0.25 points)—25 or more employees (law effective 2023)
- Covered relationships (0.25 points)—Parent-in-law, sibling (law effective 2023)
- Length of leave (0.50 points)—12 weeks of leave (law effective 2023)

### Rhode Island (2.75 points)

- Statewide law (1.0 point)—Effective
- Covered employers (1.0 point)—All private-sector employers
- Covered relationships (0.25 points)—Grandparent
- Length of leave (0.50 points)—4 weeks of leave

### Washington (3.50 points)

- Statewide law (1.0 point)—Effective
- Covered employers (1.0 point)—All private-sector employers
- Covered relationships (0.50 points)—Sibling, grandparent
- Length of leave (1.0 point)—12 weeks of leave

## The Extent to Which States Offer Mandatory Paid Sick Days

The information provided below includes states that received points for extending benefits beyond FMLA to family caregivers. States received points for the extent to which state laws require employers to provide mandatory paid sick days, up to a total of 3.0 possible points, as follows:

### Statewide paid sick leave law:

Statewide law enacted and effective (1.0 point) | ½ credit if statewide law enacted but not effective until after 6/2020 (0.50 points)

**Covered employers:**

Fewer than 10 employees (1.0 point) | ½ credit if law not effective until after 6/2020 (0.50 points) | 10 to 49 employees (0.50 points) | ½ credit if law not effective until after 6/2020 (0.25 points)

**Amount of annual accrued leave:**

40 or more hours of leave (1.0 point) | ½ credit if law not effective until after 6/2020 (0.50 points) | Less than 40 hours (0.50 points) | ½ credit if law not effective until after 6/2020 (0.25 points)

**Arizona (2.00 points)**

- Statewide law (1.0 point)—Effective
- Covered employers (0.50 points)—15 or more employees
- Amount of annual accrued leave (0.50 points)—Less than 40 hours of leave

**California (2.50 points)**

- Statewide law (1.0 point)—Effective
- Covered employers (1.0 point)—Any number of employees
- Amount of annual accrued leave (0.50 points)—Less than 40 hours of leave

**Connecticut (2.00 points)**

- Statewide law (1.0 point)—Effective
- Covered employers (0 points)—50 or more employees
- Amount of annual accrued leave (1.0 point)—40 or more hours of leave

**District of Columbia (2.00 points)**

- Statewide law (1.0 point)—Effective
- Covered employers (0.50 points)—25 or more employees
- Amount of annual accrued leave (0.50 points)—Less than 40 hours of leave

**Illinois (2.00 points)**

- Statewide law (0 points)—Not statewide
- Covered employers (1.0 point)—Any number of employees
- Amount of annual accrued leave (1.0 point)—40 or more hours of leave

**Maine (1.50 points)**

- Statewide law (0.50 points)—Enacted “paid personal time off” (law effective 1/1/21)
- Covered employers (0.50 points)—10 or more employees (law effective 1/1/21)
- Amount of annual accrued leave (0.50 points)—40 or more hours of leave (law effective 1/1/21)

**Maryland (2.50 points)**

- Statewide law (1.0 point)—Effective
- Covered employers (0.50 points)—15 or more employees
- Amount of annual accrued leave (1.0 point)—40 or more hours of leave

**Massachusetts (2.50 points)**

- Statewide law (1.0 point)—Effective
- Covered employers (0.50 points)—11 or more employees
- Amount of annual accrued leave (1.0 point)—40 or more hours of leave

**Michigan (2.00 points)**

- Statewide law (1.0 point)—Effective
- Covered employers (0 points)—50 or more employees
- Amount of annual accrued leave (1.0 point)—40 or more hours of leave

**Minnesota (2.00 points)**

- Statewide law (0 points)—Not statewide
- Covered employers (1.0 point)—Fewer than 10 employees
- Amount of annual accrued leave (1.0 point)—40 or more hours of leave

**Nevada (2.00 points)**

- Statewide law (1.0 point)—Effective
- Covered employers (0 points)—50 or more employees
- Amount of annual accrued leave (1.0 point)—40 or more hours of leave

### New Jersey (3.00 points)

- Statewide law (1.0 point)—Effective
- Covered employers (1.0 point)—Any number of employees
- Amount of annual accrued leave (1.0 point)—40 or more hours of leave

### New Mexico (1.50 points)

- Statewide law (0 points)—Not statewide
- Covered employers (1.0 point)—Fewer than 10 employees
- Amount of annual accrued leave (0.50 points)—Less than 40 hours of leave

### New York (2.00 points)

- Statewide law (0 points)—Not statewide
- Covered employers (1.0 point)—5 or more employees
- Amount of annual accrued leave (1.0 point)—40 or more hours of leave

### Oregon (2.50 points)

- Statewide law (1.0 point)—Effective
- Covered employers (0.50 points)—10 or more employees
- Amount of annual accrued leave (1.0 point)—40 or more hours of leave

### Pennsylvania (1.50 points)

- Statewide law (0 points)—Not statewide
- Covered employers (0.50 points)—10 or more employees
- Amount of annual accrued leave (1.0 point)—Up to 40 hours of leave

### Rhode Island (2.50 points)

- Statewide law (1.0 point)—Effective
- Covered employers (0.50 points)—18 or more employees
- Amount of annual accrued leave (1.0 point)—40 or more hours of leave

### Texas (1.50 points)

- Statewide law (0 points)—Not statewide
- Covered employers (0.50 points)—15 or more employees

- Amount of annual accrued leave (1.0 point)—40 or more hours of leave

### Vermont (3.00 points)

- Statewide law (1.0 point)—Effective
- Covered employers (1.0 point)—Any number of employees
- Amount of annual accrued leave (1.0 point)—40 or more hours of leave

### Washington (3.00 points)

- Statewide law (1.0 point)—Effective
- Covered employers (1.0 point)—Any number of employees
- Amount of annual accrued leave (1.0 point)—40 or more hours of leave

## The Extent to Which States Offer Flexible Use of Sick Time

The information provided below includes states that received points for extending benefits beyond FMLA to family caregivers. States received points for the extent to which state laws require employers to provide flexible use of sick time, up to a total of 3.0 possible points, as follows:

### Covered employers:

15 or fewer employees (1.0 point) | 16 to 30 employees (0.50 points)

### Type of leave (covered “family member” relationships):

Parent-in-law | Sibling | Grandparent | Grandparent-in-law (0.25 points each, up to a total of 1.0 point)

### Amount of available time:

10 or more days of available time (1.0 point) | Less than 10 days (0.50 points)

### Arizona (2.25 points)

- Covered employers (1.0 point)—15 or more employees
- Covered relationships (0.75 points)—Parent-in-law, sibling, grandparent
- Amount of available time (0.50 points)—Less than 10 days

**California (2.25 points)**

- Covered employers (1.0 point)—Any number of employees
- Covered relationships (0.75 points)—Parent-in-law, sibling, grandparent
- Amount of available time (0.50 points)—Less than 10 days

**Connecticut (1.00 point)**

- Covered employers (0 points)—75 or more employees
- Covered relationships (0 points)—Not applicable
- Amount of available time (1.0 point)—10 or more days

**District of Columbia (2.00 points)**

- Covered employers (0.50 points)—25 or more employees
- Covered relationships (1.0 point)—Parent-in-law, sibling, grandparent, grandparent-in-law
- Amount of available time (0.50 points)—Less than 10 days

**Georgia (1.25 points)**

- Covered employers (0.50 points)—25 or more employees
- Covered relationships (0.25 points)—Grandparent
- Amount of available time (0.50 points)—Less than 10 days

**Hawaii (2.00 points)**

- Covered employers (0 points)—100 or more employees
- Covered relationships (1.0 point)—Parent-in-law, sibling, grandparent, grandparent-in-law
- Amount of available time (1.0 point)—10 or more days

**Illinois (2.25 points)**

- Covered employers (1.0 point)—Any number of employees

- Covered relationships (0.75 points)—Parent-in-law, sibling, grandparent
- Amount of available time (0.50 points)—Less than 10 days

**Maine (1.00 points)**

- Covered employers (0.50 points)—25 or more employees
- Covered relationships (0 points)—Not applicable
- Amount of available time (0.50 points)—Less than 10 days

**Maryland (2.00 points)**

- Covered employers (1.0 point)—15 or more employees
- Covered relationships (0 points)—Not applicable
- Amount of available time (1.0 point)—10 or more days

**Massachusetts (1.75 points)**

- Covered employers (1.0 point)—Any number of employees
- Covered relationships (0.25 points)—Parent-in-law
- Amount of available time (0.50 points)—Less than 10 days

**Michigan (1.00 point)**

- Covered employers (0 points)—50 or more employees
- Covered relationships (0.50 points)—Sibling, grandparent
- Amount of available time (0.50 points)—Less than 10 days

**Minnesota (2.25 points)**

- Covered employers (0.50 points)—21 or more employees
- Covered relationships (0.75 points)—Parent-in-law, sibling, grandparent
- Amount of available time (1.0 point)—10 or more days

**New Jersey (2.00 points)**

- Covered employers (1.0 point)—Any number of employees
- Covered relationships (0.50 points)—Sibling, grandparent
- Amount of available time (0.50 points)—Less than 10 days

**New Mexico (3.00 points)**

- Covered employers (1.0 point)—Any number of employees
- Covered relationships (1.0 point)—Parent-in-law, sibling, grandparent, grandparent-in-law
- Amount of available time (1.0 point)—10 or more days

**New York (2.00 points)**

- Covered employers (1.0 point)—5 or more employees (law enacted only in New York City and Westchester County)
- Covered relationships (0.50 points)—Sibling, grandparent
- Amount of available time (0.50 points)—Less than 10 days

**Oregon (2.00 points)**

- Covered employers (1.0 point)—10 or more employees
- Covered relationships (0.50 points)—Parent-in-law, grandparent
- Amount of available time (0.50 points)—Less than 10 days

**Rhode Island (1.75 points)**

- Covered employers (0.50 point)—18 or more employees
- Covered relationships (0.75 points)—Parent-in-law, sibling, grandparent
- Amount of available time (0.50 points)—Less than 10 days

**Vermont (2.25 points)**

- Covered employers (1.0 point)—Any number of employees
- Covered relationships (0.75 points)—Parent-in-law, sibling, grandparent
- Amount of available time (0.50 points)—Less than 10 days

**Washington (2.75 points)**

- Covered employers (1.0 point)—Any number of employees
- Covered relationships (0.75 points)—Parent-in-law, sibling, grandparent
- Amount of available time (1.0 point)—10 days or more

**Wisconsin (1.25 points)**

- Covered employers (0 points)—50 or more employees
- Covered relationships (0.25 points)—Parent-in-law
- Amount of available time (1.0 point)—10 days or more





# Long-Term Services and Supports State Scorecard

## 2020 Edition | Reference Edition

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