



National Study of Long-Term Care Providers (NSLTCP)

Update & What's New

Lauren Harris-Kojetin, PhD
National Center for Health Statistics

2017 National Adult Day Services
Conference

September 26, 2017

National Center for Health Statistics
Division of Health Care Statistics



Study Overview



National Study of Long-Term Care Providers

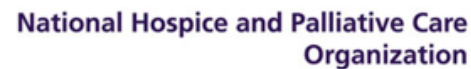
National Health Care Surveys



U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Centers for Disease Control and Prevention
National Center for Health Statistics

- Biennial initiative sponsored by National Center for Health Statistics
- Monitors trends in paid, regulated LTC services
- Includes five sectors
 - **adult day services centers and participants**
 - home health agencies and patients
 - hospices and patients
 - nursing homes and residents
 - residential care communities and residents

Provider Association Supporters



Information about Adult Day Services Centers

- **Location**—metropolitan statistical area status, Census region, state
- **Operating characteristics**—ownership, chain status, capacity, number of people served, Medicaid certification, model type, part of a CCRC, years in operation, revenue sources
- **Services offered and how**—case management, dementia care unit, dental, dietary/nutritional, hospice, medication management, mental health, pharmacy, podiatry, skilled nursing, social work, therapeutic, transportation
- **Staffing**—nursing, social work, activities
- **Practices**—advance directives, depression screening, disease management programming, health information technology, fall risk assessment and reduction interventions, person-centered practices



Information about Adult Day Services Participants

- **Socio-demographics**—age, race, ethnicity, sex, Medicaid use, left because of cost
- **Health conditions (18)**—e.g., Alzheimer’s disease, cardiovascular disease, depression, developmental disability, diabetes, etc.
- **Physical and Cognitive Functioning**—need any ADL assistance (bathing, dressing, eating, toileting, transferring, walking/locomotion), wheelchair/scooter use
- **Health care use and adverse events**—advance directive documentation, emergency department use, falls and related injuries, hospitalizations and re-hospitalizations, receiving hospice
- **Other characteristics**—living arrangements



Informational Products

All are free, available to the public, and downloadable



National Center for Health Statistics

National Study of Long-Term Care Providers

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Residential Care Community Participants



Adult Day Services Center Participants



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National Study of Long-Term Care Providers

CDC > NCHS

National Study of Long-Term Care Providers



The biennial National Study of Long-Term Care Providers (NSLTCP) monitors trends in the supply, provision, and use of the major sectors of paid, regulated long-term care services. NSLTCP uses survey data on the residential care community and adult day services sectors, and administrative data on the home health, nursing home, and hospice sectors. The vision for NSLTCP is to offer reliable, accurate, relevant and timely national and state statistical information to support and inform long-term care services policy, research and practice.

What's New

- Long-Term Care Services in the United States: 2014 Overview State Web Tables and Maps  [PDF - 5.9 MB] (9/22/2016)
- 2014 NSLTCP Weighted Survey Estimates: Residential Care Communities  [PDF - 379 KB] (8/31/2017)
- 2014 National Study of Long-Term Care Providers (NSLTCP) Survey Data (11/6/2015)

Website:

<http://www.cdc.gov/nchs/nsltcp.htm>

National Center for Health Statistics

National Study of Long-Term Care Providers

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National Study of Long-Term Care Providers

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Study Results and Publications



- [Reports](#)
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Variation in Operating Characteristics of Adult Day Services Centers, by Center Ownership: United States, 2014

Vincent Rome, M.P.H.; Lauren D. Harris-Kojetin, Ph.D.; and Eunice Park-Lee, Ph.D.

Key findings

Data from the 2014 National Study of Long-Term Care Providers

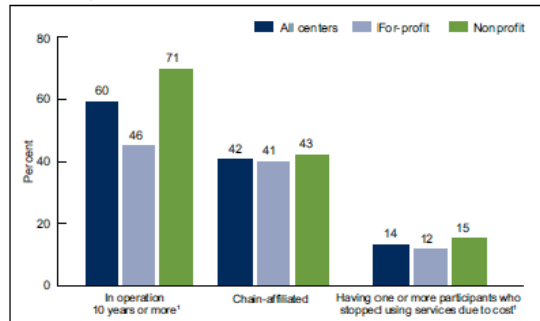
- In 2014, a higher percentage of nonprofit (71%) than for-profit (46%) adult day services centers had been in operation for 10 years or more.
- Compared with nonprofit centers, for-profit centers received a higher percentage of revenue from Medicaid and a lower percentage from private sources.
- A higher percentage of for-profit than nonprofit centers offered disease-specific programs for participants with cardiovascular disease, depression, and diabetes.
- A higher percentage of nonprofit than for-profit adult day services centers primarily served participants with select diagnoses.

More than one-quarter of a million participants were enrolled in 4,800 adult day services centers in the United States in 2014 (1,2). Unlike other long-term care providers, such as nursing homes, home health agencies, hospices, and residential care communities, the majority of adult day services centers are nonprofit (3). However, for-profit ownership of adult day services centers has increased, from 27% in 2010 to 40% in 2012, and more recently to 44% in 2014 (4,5). This report presents the most current national estimates of selected adult day services center operating characteristics, and compares these characteristics by center ownership. State estimates for the characteristics presented in this data brief are available online at: http://www.cdc.gov/nchs/nsitcp/nsitcp_products.htm.

Keyword: National Study of Long-Term Care Providers

In 2014, a higher percentage of nonprofit than for-profit adult day services centers had been in operation for 10 years or more.

Figure 1. Selected operating characteristics of adult day services centers, by center ownership: United States, 2014



¹Differences between for-profit and nonprofit centers are significant at the $p < 0.05$ level.
NOTE: Figure excludes cases with missing data; see "Data source and methods" for details.
SOURCE: CDC/NCHS, National Study of Long-Term Care Providers, 2014.

Variation in Adult Day Services Center Participant Characteristics, by Center Ownership: United States, 2014

Eunice Park-Lee, Ph.D.; Lauren D. Harris-Kojetin, Ph.D.; Vincent Rome, M.P.H.; and Jessica P. Lendon, Ph.D.

Key Findings

Data from the 2014 National Study of Long-Term Care Providers

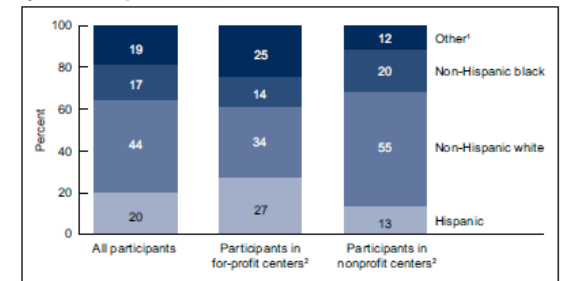
- The racial and ethnic composition of participants in for-profit adult day services centers was more diverse than in nonprofit centers.
- About 61% of participants in for-profit centers received Medicaid, compared with 46% of those in nonprofit centers.
- The percentage of participants living with Alzheimer's disease or with intellectual or developmental disability was higher in nonprofit adult day services centers than in for-profit centers.
- The percentage of participants needing assistance with dressing, toileting, and eating was higher in nonprofit centers than in for-profit centers.
- A higher percentage of participants in nonprofit centers (9%) than in for-profit centers (7%) had fallen in the last 90 days.

More than one-quarter million participants were enrolled in adult day services centers in the United States on the day of data collection in 2014 (1). The number of for-profit adult day services centers has grown in recent years (2). In 2012, 40% of adult day services centers were for-profit, serving more than one-half of all participants (3–5). This report presents the most current national estimates of selected characteristics of participants in adult day services centers and compares these characteristics by center ownership type. State-level estimates for the characteristics presented in this report are available online at http://www.cdc.gov/nchs/nsitcp/nsitcp_products.htm.

Keywords: medical conditions • activities of daily living (ADLs) • home and community-based services • National Study of Long-Term Care Providers

The racial and ethnic composition of participants in for-profit adult day services centers was more diverse than in nonprofit centers.

Figure 1. Percent distribution of race and ethnicity among adult day services center participants, by center ownership: United States, 2014



¹Includes participants of the following racial and ethnic backgrounds: non-Hispanic American Indian or Alaska Native, non-Hispanic Asian, non-Hispanic Native Hawaiian or other Pacific Islander, non-Hispanic of two or more races, other race or ethnicity category not reported in the center's system, and unknown race and ethnicity.
²Significant difference between participants in for-profit and nonprofit centers ($p < 0.05$).
NOTE: Cases with missing data are excluded; see "Data source and methods" for details. Percentages are based on unrounded numbers; estimates may not sum to 100% because of rounding.
SOURCE: CDC/NCHS, National Study of Long-Term Care Providers, 2014.



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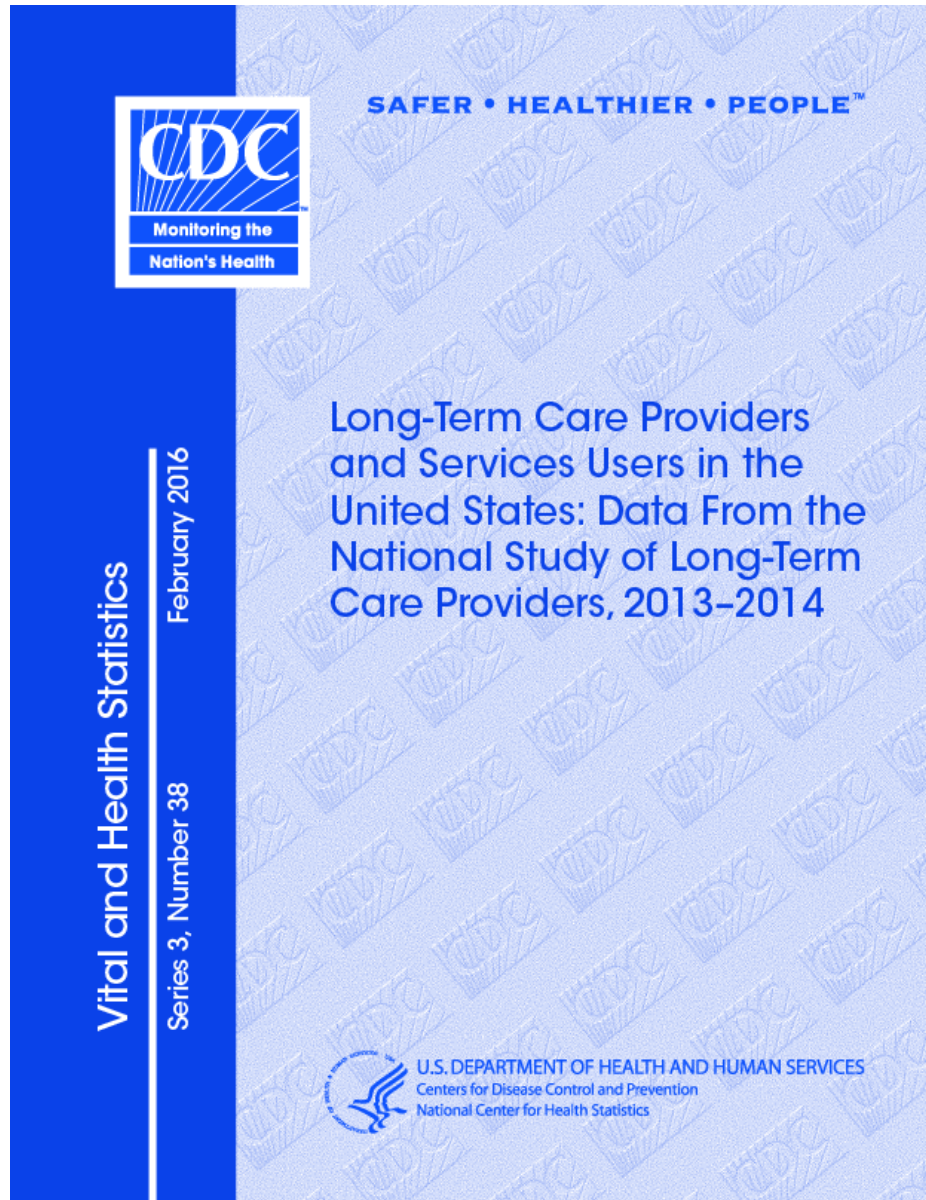
U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Centers for Disease Control and Prevention
National Center for Health Statistics



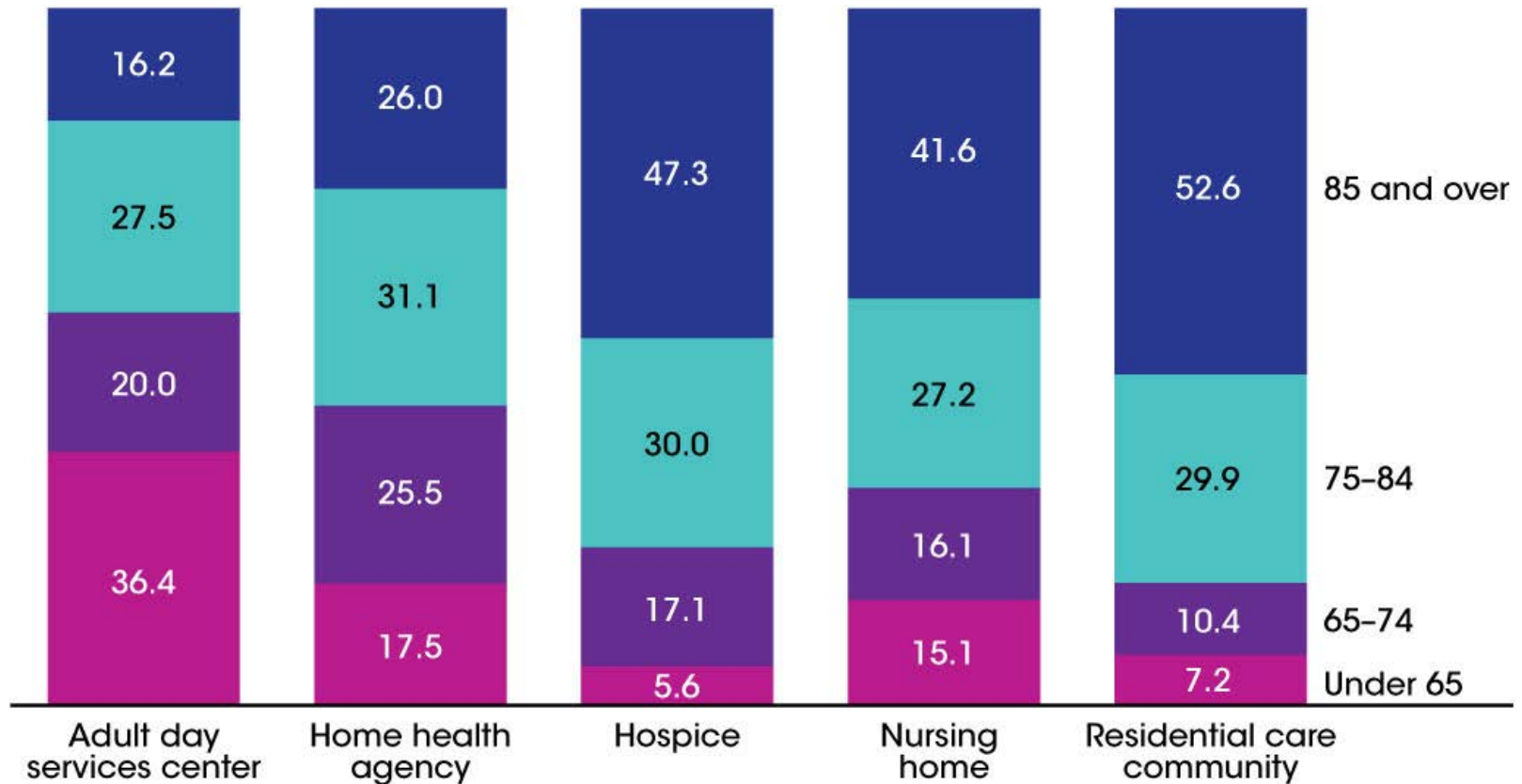
Table 1. State estimates for NCHS Data Brief No. 224, Variation in Operating Characteristics of Adult Day Services Centers, by Center Ownership: United States, 2014

State	For-profit ownership	In operation 10 years or more	Chain-affiliated	Had one or more participants who stopped using services due to cost
Percent				
All ADSCs ¹	44	60	42	14
Alabama	*	77	0	*
Alaska	0	†	*	*
Arizona	*	70	79	48
Arkansas	44	56	*	*
California	48	65	53	6
Colorado	44	41	31	*
Connecticut	34	74	26	21
Delaware	*	*	49	*
D.C.	*	*	*	*
Florida	52	43	28	30
Georgia	60	52	38	21
Hawaii	39	45	46	25

Vital and Health Statistics, Series 3 Report



Percent distribution of long-term care services users, by sector and age group: United States, 2013 and 2014



SOURCE: NCHS, *Long-Term Care Providers and Services Users in the United States: Data From the National Study of Long-Term Care Providers, 2013–2014*, Figure 22 and Table 4 in Appendix B. Link to report: http://www.cdc.gov/nchs/data/series/sr_03/sr03_038.pdf

Vital and Health Statistics, Series 3 Report State Tables



Bookmarks

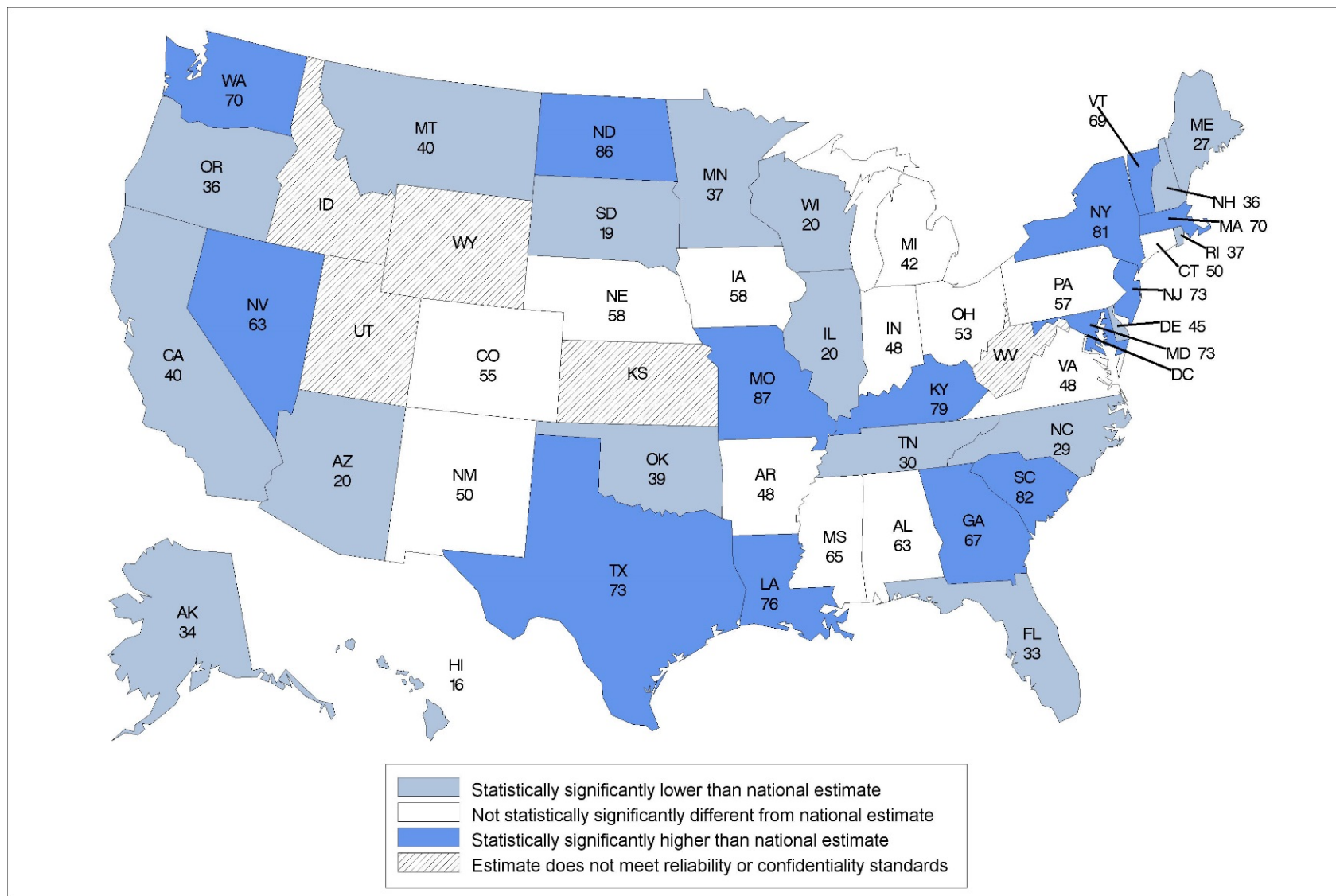
- Providers and users of Long-Term Care Services, by Provider Type and Selected Characteristics
 - Table 1. Alabama Profile
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 - Table 17. Kansas Profile
 - Table 18. Kentucky Profile

Table 5. Providers and Users of Long-Term Care Services in California, by Provider Type and Selected Characteristics

Selected characteristic	Adult day services center		Home health agency		Hosp
	Number or percent				
Organization					
Number of providers ¹	1,100	(1)	1,100	(32)	300
Number of beds or licensed maximum capacity ²	80,200	(1,500)	---	---	---
Average capacity	75	(1.4)	---	---	---
Average number of people served	52	(1.1)	---	---	---
Metropolitan statistical area status (percent):					
Metropolitan	96.4	(0.5)	98.2	(0.4)	96.9
Micropolitan or neither	3.6	(0.5)	1.8	(0.4)	3.1
Ownership (percent):					
For-profit	42.4	(1.3)	88.1	(1.0)	73.4
Not-for-profit, government, or other	57.6	(1.3)	11.9	(1.0)	26.6
Number of people served (percent): ³					
Category 1	24.7	(1.1)	31.8	(1.4)	31.0
Category 2	66.6	(1.3)	27.4	(1.3)	24.5
Category 3	8.7	(0.8)	30.7	(1.4)	33.4
Missing ⁴	---	---	10.1	(0.9)	11.1
Staffing ⁵					
Number of nursing employee FTEs	4,257	(141)	10,316	(432)	4,037
Nursing employee FTEs (percent):					
Registered nurse	18.2	(0.7)	55.4	(1.1)	54.2
Licensed practical nurse or licensed vocational nurse	9.5	(0.4)	30.0	(1.0)	13.3
Aide	72.3	(0.9)	14.6	(0.7)	32.5
Providers with one or more employee FTEs (percentage):					
Registered nurse	37.7	(1.3)	100.0	(0.0)	100.0
Licensed practical nurse or licensed vocational nurse	22.5	(1.2)	27.0	(1.2)	22.7
Aide	10.0	(0.4)	10.0	(0.4)	10.0

¹⁴

Percentage of adult day participants who used Medicaid for long-term care services in the past 30 days: United States, 2014



Statistical significance tested at $p < 0.05$. The national percentage is 54%.

2012 NSLTCP Weighted Survey Estimates: Adult Day Services Centers

QUESTION NUMBER	VARIABLE NAME	QUESTION TEXT	DATA MEASURE	CODE CATEGORIES	WEIGHTED PERCENTAGES**
1	OWNERSHP	What is the type of ownership of this adult day services center? ___ <i>Private, nonprofit</i> ___ <i>Private, for profit</i> ___ <i>Publicly traded company or limited liability company (LLC)</i> ___ <i>Government--Federal, state, county, or local</i>	Percent of adult day services centers, by ownership type	-9= Not ascertained	0.4
				1 = Nonprofit, government (federal,	59.8
				2 = For profit (including publicly traded company or limited liability company)	39.8
2	CHAIN	Is this center owned by a person, group, or organization that owns or manages two or more adult day services centers? This may include a corporate chain. ___ <i>Yes</i> ___ <i>No</i>	Percent of adult day services centers, by chain affiliation status	-9 = Not ascertained	0.3
				1 = YES	41.1
				2 = NO	58.6
3	OTHOWN	Is this adult day services center owned by any other type of organization? ___ <i>Yes ---> CONTINUE</i> ___ <i>No, not part of another organization --->SKIP TO QUESTION 4</i>	Percent of adult day services centers, by whether or not the center is owned by any other type of organization	-9 = Not ascertained	0.4
				1 = YES	25.4
				2 = NO, NOT PART OF ANOTHER ORGANIZATION	74.2
3a	OWNHOSP	For each item (a-f) below, please indicate whether or not this type of organization owns this center. (a) Hospital	Percent adult day services centers, by whether or not the center is owned by a hospital	-9 = Not ascertained	0.5
				-1 = Legitimate skip	74.2
				1 = YES	3.6
				2 = NO	21.7

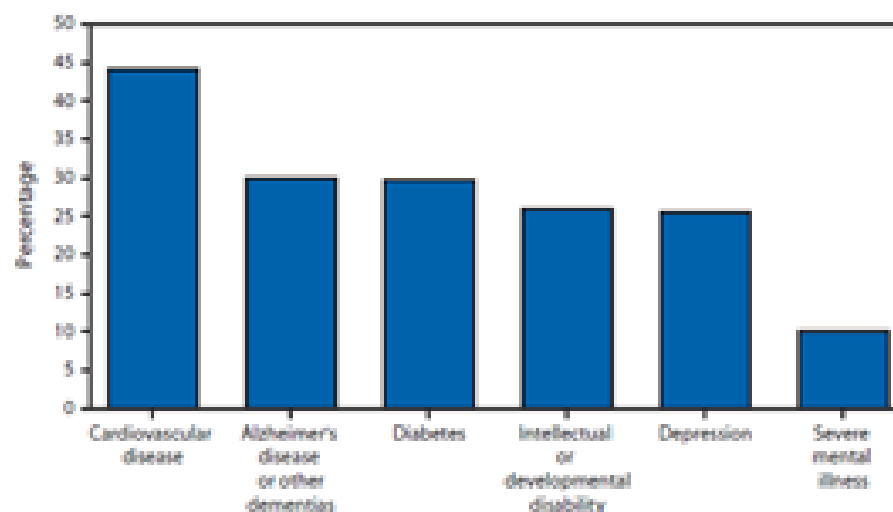
Morbidity and Mortality Weekly Report (MMWR)

[MMWR](#)


QuickStats: Percentage of Adult Day Services Center Participants,* by Selected Diagnoses[†] – National Study of Long-Term Care Providers, United States, 2014

Weekly

September 11, 2015 / 64(35);989



* The denominator used to calculate these percentages is 282,200, which is the estimated number of enrolled adult day services center participants in the United States on any given day in 2014. Because diagnoses are not mutually exclusive, percentages add up to more than 100 percent.

[†] Participating administrators of adult day services centers were asked, "Of the participants enrolled at this center, about how many have been diagnosed with: a. Alzheimer's disease or other dementias, b. Intellectual or developmental disability, c. Severe mental illness, d. Depression, e. Cardiovascular disease (e.g., heart disease, stroke, high blood pressure), f. Diabetes?"

National Study of Long-Term Care Providers

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Related Sites

Surveys and Data Collection Systems

National Nursing Home Survey

National Home and Hospice Care Survey

National Survey of



National Study of Long-Term Care Providers

[CDC](#) > [NCHS](#) > [National Study of Long-Term Care Providers](#) > [Study Results and Publications](#)

Study Results and Publications - Presentations



2016 California Association for Adult Day Services (CAADS) Annual Meeting and Fall Conference

- [Update on the 2016 National Study of Long-Term Care Providers: Progress and Goals for Adult Day Services Centers in California](#) [PDF - 4.8 MB]

2016 National Adult Day Services Association Conference

- [Resources from the National Study of Long-Term Care Providers—Information for Adult Day Services Providers for Internal Planning and Advocacy](#) [PDF - 5.4 MB]

2016 Adult Day Health Care Association of Texas Annual Meeting and Training Conference

- [How do adult day services centers in Texas compare to the nation?](#) [PDF - 926 KB]

2016 Pennsylvania Adult Day Services Association Annual Conference

- [Adult Day Services Centers and Participants in the United States and Pennsylvania: Findings from the 2014 NSLTCP and Update on the 2016 ADS Survey Wave](#) [PDF - 2.0 MB]

2015 California Association for Adult Day Services (CAADS) Annual Meeting and Fall Conference

- [Characteristics of Adult Day Services Centers and Participants in the United States and California: Findings from the 2014 NSLTCP](#) [PDF - 805 KB]

2015 National Conference on Health Statistics

- [Residential Care Communities and Adult Day Services Centers: New Survey Data From the 2014 National Study of Long-Term Care Provider \(NSLTCP\)](#) [PDF - 2.6 MB]
- [The National Study of Long-Term Care Providers \(NSLTCP\): A New Resource for Researchers, Providers, and Policymakers](#) [PDF - 1.5 MB]
- [The Role of the Web in National Health Surveys](#) [PDF - 460 KB]

So What?

- How can the information in these products help you and the adult day services industry?
- Why take the time to complete the questionnaire?



How Can NSLTCP Findings Help You?

- Provide performance benchmarks
- Help with internal planning
- Communicate the value of adult day to the public and policymakers



Interpretation of state web tables for NCHS Data Brief #165



Findings among adult day centers	2012 National Study of Long Term Care Providers	State of GA	Center
For profit ownership	40%	48%	
Average Daily Attendance	39	21	
Chain Affiliated	41%	38%	
In operation 10+ years	60%	48%	
Serve one or more participants whose long-term care services in the past 30 days was paid by Medicaid	87%	95%	
Screened participants for cognitive impairment	59%	70%	
Provided specific programs for Alzheimer's disease or other dementias	73%	88%	
Screened participants for depression	20%	19%	
Provided depression disease-specific programs for their participants	58%	59%	
Provided skilled nursing services	70%	70%	

Table Design: Teresa Johnson, Former Director, National Adult Day Services Association
 DATA SOURCE: NCHS



May 22, 2107

Senator Orrin G. Hatch
Chairman
Senate Committee on Finance
HealthReform@Finance.Senate.gov

Dear Senator Hatch:

The National Adult Day Services Association (NADSA) appreciates the opportunity you have provided to offer comments and recommendations for “patient-focused reforms that address costs and give American families greater control over their healthcare decisions.” We were equally enthusiastic to respond to the President’s earlier call to “Modernize Medicare,” mirroring the exact call we have presented to policymakers for the past several years.

• • • •

Adult Day Services programs are extremely important in helping to contain costs for Medicaid.... **Data from a 2013-2014 national survey by the National Center for Health Statistics estimated 423,000 individuals were enrolled in ADS/ADHC with 282,000 served daily. Of these individuals, 63.7% were over age 65 and 54% were supported by Medicaid as the primary payor....**

Source: National Study of Long-Term Care Providers.

People living with chronic conditions and diseases such as hypertension, physical disability, cardiovascular disease, diabetes, mental illness, Alzheimer's, dementia, developmental disability, or traumatic brain injury need better access to adult day centers to receive the care they need to continue to live in their own homes and avoid the high costs of institutionalization.

More than a quarter million consumers (273,200) were enrolled in an estimated 4,800 adult day centers operating in the United States on any given day according to a 2013 National Study of Long Term Care Providers published by the National Center for Health Statistics^[1]. A follow-up 2014 study revealed that Adult Day Services center participants are more diverse than users of other major long-term care services with respect to race, ethnicity and age. Additionally, 32% had a diagnosis of Alzheimer's disease or other dementia.^[2]

The same 2014 study noted although a majority of participants were elderly, 37% of adult day services consumers were under age 65. In short, Adult Day Services centers increasingly are serving younger persons with intellectual and developmental disabilities and a growing number of veterans with traumatic brain injuries.^[3]

NADSA member volunteers from every state are working with our public officials to ensure that access to Adult Day Services is included in all long-term care services and supports (LTSS) policy discussions and decisions.

^[1] Harris-Kojetin L, Sengupta M, Park-Lee E, Valverde R. *Long-term care services in the United States: 2013 overview*. Hyattsville, MD: National Center for Health Statistics. ^[2] Centers for Disease Control and Prevention, NCHS Data Brief Number 164, September 2014 ^[3]



Public Policy Agenda

Facilitate Access to Adult Day Services

<https://www.nadsa.org/public-policy-agenda-2/>

Accessed September 21, 2017

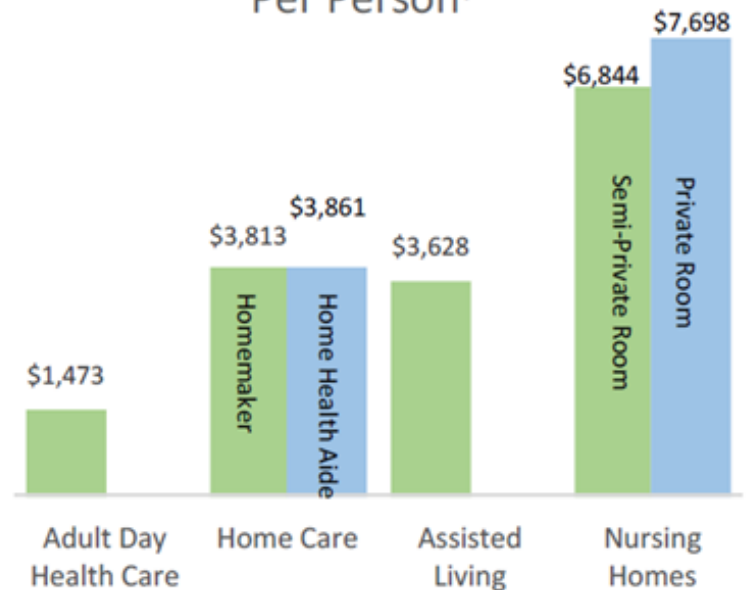
Adult Day Services

The Most Cost-Effective Option in Long-Term Care Today

Adult Day Services At A Glance

- There are an estimated 5,500 adult day centers in the U.S.⁵ (8% of all regulated long term care providers)⁶
- Adult day services reduce readmission and emergency department visits¹
- Participants stay healthier and less lonely in the daily presence of family members
- Provides supervised care while individuals can still live at home with family/caregivers; 74% of participants live in private residences²
- Services are designed to support seniors (64%) and younger adults with disabilities (36%)³
- Daily social and therapeutic activities provide stimulation and improve mental cognition
- Enhances the quality of life of participants and their families⁴
- **More funding for adult day services decreases Medicaid costs by reducing full-time institutional care while still providing consistent health monitoring and socialization**

National Median Monthly Cost Per Person⁷



Source for citation 2, 3, and 6: Harris-Kojetin, Sengupta, Park-Lee, Valverde. *Long-Term Care Services in the United States: 2013 Overview*. National Center for Health Statistics.

What's different for the 2018 survey?

- What can you expect?
- Why is it important to participate if your center is invited?



What's different for 2018?

Features	2018	2012, 2014, 2016
Geographic detail	National	State and National
Center info	More	Less
Participant info	More, richer	Less
Products	<ul style="list-style-type: none">• Reports, tables• Research Data Center• Public-use files	<ul style="list-style-type: none">• Reports, tables, maps• Research Data Center
Centers included	Fewer (sample)	More (census)
Your task	<ul style="list-style-type: none">• Little more time• Easier task	<ul style="list-style-type: none">• 45-60 mins• Harder task



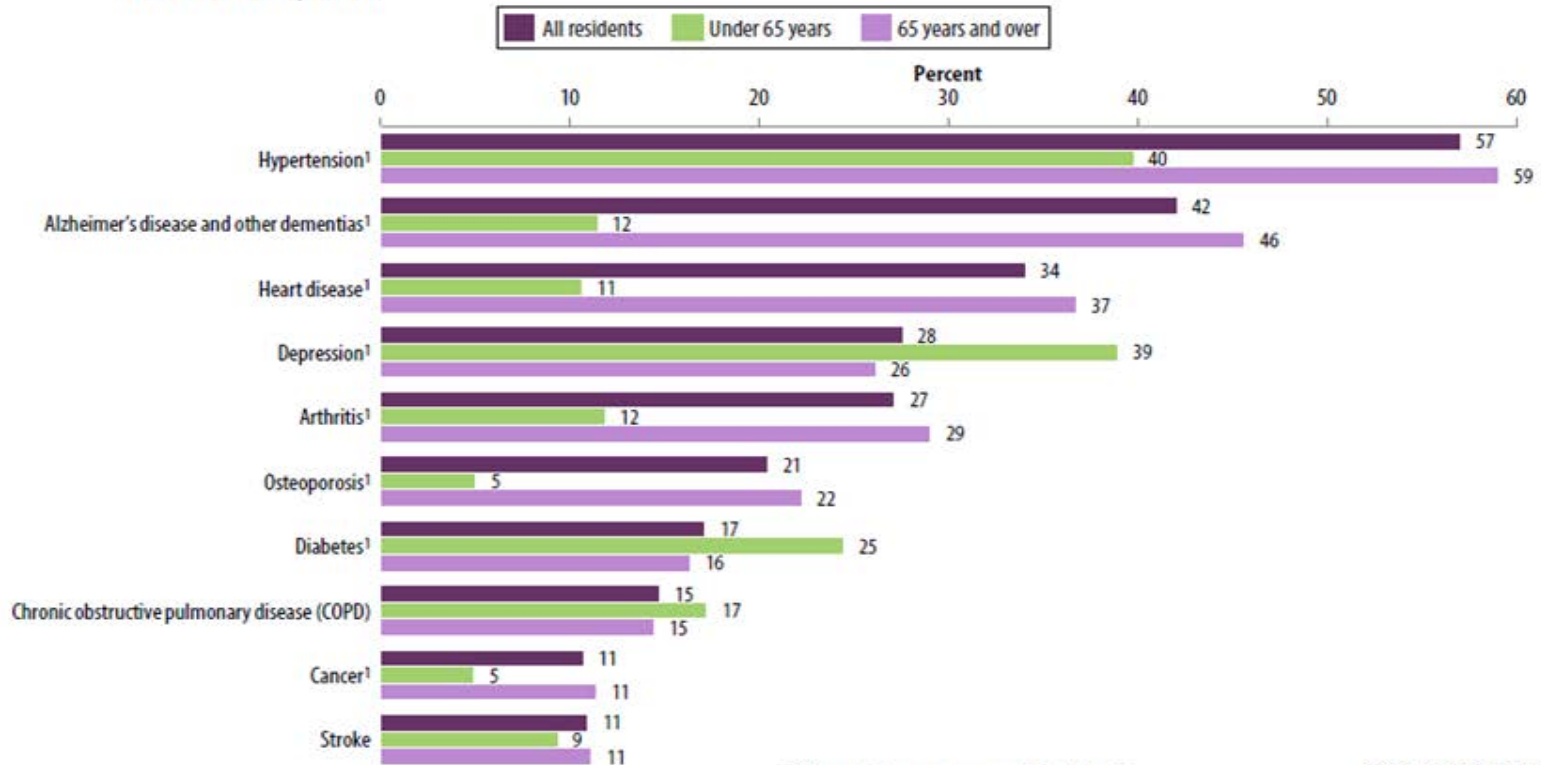
What can you expect for the 2018 survey?

- Sample (1,650) versus census (~5,000)
- Call to confirm contact information [5 mins]
- Advance package
- Call to screen for eligibility and set future appointment for participant sampling and data collection [15 mins]
- Provider questionnaire (web or mail) [30 mins]
- Call to sample and collect information on 2 enrolled participants [30 mins]



Example of Information Possible with Person-level Data

FIGURE 3-1 Percentage of residential care community residents, by the 10 most common chronic conditions and age: United States, 2010

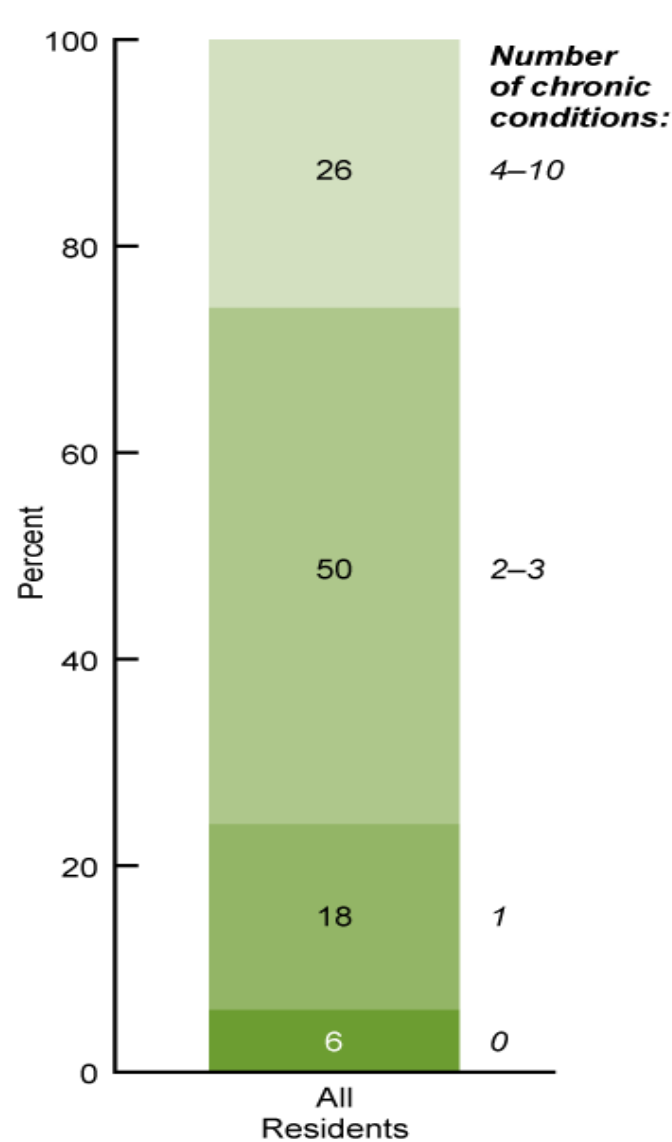


¹ Differences between age groups are significant at $p < .05$.

SOURCE: CDC/NCHS, 2010 NSRICE.

- The 10 most common chronic conditions for all residents included, in descending order, hypertension (57%), Alzheimer's disease and other dementias (42%), heart disease (34%), depression (28%), arthritis (27%), osteoporosis (21%), diabetes (17%), chronic obstructive pulmonary disease (COPD; 15%), cancer (11%), and stroke (11%).
- Hypertension, Alzheimer's disease and other dementias, heart disease, arthritis, osteoporosis, cancer, and stroke were more prevalent among residents aged 65 and over than among residents under age 65.
- A higher percentage of residents under age 65 had depression, diabetes, or COPD than did residents aged 65 and over.

Example of Information Possible with Person-level Data (2)



- For questions or comments about presentation
 - Email: LHarrisKojetin@cdc.gov
- For questions or comments about NSLTCP
 - Email: ltcsbfeedback@cdc.gov
 - Phone: 301-458-4747
- Visit our website at:
 - <http://www.cdc.gov/nchs/nsltcp.htm>



Supplemental Slide



**National Study of
Long-Term Care Providers**

Adult day services centers (ADSC) eligibility criteria

- All ADSCs in the US, using National Adult Day Services Association's (NADSA) database (not just NADSA members);
- In operation just prior to the survey fielding period;
- Licensed or certified by the State specifically 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 or part of a Program of All-Inclusive Care for the Elderly (PACE);
- One or more average daily attendance of participants based on a typical week; and
- One or more participants enrolled at the center at the time of the survey.

