

# Community First Choice Discussion Protocol for Beneficiary Focus Group

## Introduction

- Introduce facilitators (explain that we are from NORC, NASHP, and CMS [if applicable])
- Thank you very much for your time today.
- We have been asked by CMS to produce a Report to Congress about the Community First Choice program, which is the funding source Medicaid uses to pay for the home and community based services you receive. They are interested in hearing how well the program is working for you.
- In this discussion, we are interested in hearing about your recent experiences with home and community-based services and personal attendant services.
- We are interested only in your opinions. We want you to know that there are **no right or wrong answers** and that the answers you give here will not affect the benefits you currently receive from Medi-Cal in any way. Our format will be informal. We'll ask some questions, but we mostly want to hear from you.
- We have a few things to cover before we get started.
  - We do not plan to ask very personal questions, but we are talking about health care – so, **please keep everything someone else has said private after this meeting.**
    - We won't share anything you have to say as coming from you personally. We also ask that you not share anything you hear from other patients here today with others outside of this group.
    - We're **just using first names** today to protect privacy.
    - **We won't include any names** or anything that identifies you in any report we write. Our report will be a general summary.
  - As much as we want to hear what you have to say, it is completely **okay for you not to answer any question**, if you don't want to.
  - **Your participation is voluntary and you can leave at any time.**
- We do have a **member of our team from NORC taking notes** so we can write our report.
  - These notes will only be used by our project staff and will not be shared with anyone else.
  - To make sure that we all hear what everyone has to say today, we ask that folks be careful to just **speak one at a time**, and to not have side conversations or interrupt one another.
- We expect that this focus group will take approximately 1.5 hour - . We'll do our best to stick to this schedule.
  - If any questions come up after we leave here today, please feel free to contact Gretchen Torres at 312-759-4049.

- Does anyone have any questions before we begin?

## Discussion Questions

### General Health Overview

- In general, how are you feeling about the health care and assistance you are receiving these days?
- On a general level, how would you describe your health-related challenges, either physical or emotional?

### Receipt of Home and Community-Based Services

Now, we'd like to talk about the personal attendant services you receive through Medicaid or a program called IHSS. By personal attendant services, we mean the hands-on help with day-to-day activities you receive in your home, such as bathing, grooming, preparing meals, and housekeeping.

- When did you begin receiving personal attendant services in your home though [HCBS program]?
- Thinking back to when you first began receiving these services,
  - How did you first learn you could receive personal attendant services under Medicaid?
  - How would you describe the process of applying for these services?
- Have you always received these services under the Medicaid program?
  - If not, how did you pay for those benefits before? Did you pay out of pocket or receive help from a friend or family member?
  - How did the types of home and community-based services you received differ prior to getting them through Medicaid?
- Since August of 2012, California's Medicaid program, Medi-Cal, has been participating in a program called Community First Choice. This program is one way that Medicaid might be paying for your personal attendant services. Were you aware of this program?
  - If yes: Did you notice any change in your services once California became approved to run a Community First Choice program?
- Before you began receiving personal attendant services in your home, were you receiving care in a facility (such as a nursing home, hospital or institution) or were you living at home/in the community?
- [If they were in a facility prior to CFC or began receiving HCBS within the last two years:] What has your experience been like transitioning into community-based living?
  - Have you encountered any challenges since transitioning into community-based living?
    - If so, has your service provider been able to help you overcome any of those challenges?
- Who provides your personal attendant services now? Is it a family member or a professional?

- How did you make this decision? How do you feel about the option to have a family member receiving funding to help you at home?

## Quality of Services

- Overall how would you describe your experience with the personal attendant services you receive? Have you noticed any changes since you first started receiving these services?
- Have you had to change providers? If so, what was the reason for the change?
- If you formerly received care in a facility or institutional setting, how has your experience with receiving these services changed now that you living in your home or community?
- How would you describe the quality of the services you receive from your provider?
  - Do you feel that your service provider is knowledgeable about your health needs?
  - What has been your experience in communicating with your service provider?
  - Does your provider connect you to other resources in the community, like housing or transportation?

## Independent Living

- How, if at all, has receiving personal care services through Medicaid affected your ability to live independently?
  - Are there things you are able to do now that you were unable to do prior to enrolling in the program?
- Which services help you the most to accomplish day-to-day activities?
- Are there services you are not currently receiving that would allow you to live even more independently?
  - [If beneficiary was in a facility prior to CFC:] Are there any things you were able to do while living in a facility that you are no longer able to do?

## Physical and Emotional Health

- We have talked a bit about the health-related issues you are all living with. Would you say these have changed since you began personal attendant services?
  - Have things gotten better or worse on average?
  - In general, how would you describe your current physical health as compared to when you were not receiving personal attendant services? You do not need to talk about the specifics of your condition, just tell us in general how you've been feeling.
  - How would you describe how you have been feeling as compared to when you were not receiving home and community-based services? Do you feel happier? More independent? Are there certain things you can do now that you couldn't do before?
- When you first began receiving services, did you have specific health goals in mind?

- Did you discuss those goals with your service provider?
- Has your provider been supportive in helping you meet these goals?
  - If so, what specific approaches do you find most helpful?
  - Which services are less so?

## **Family Caregivers**

- If your care is provided by a relative, did they receive payments from the state prior to participating in CFC? How has the receipt of direct cash from the State impacted the services they provide? How, if at all, have the services they provide changed in recent months?

## **Other Questions**

- What changes or improvements would you suggest to your providers or the administrators of [program] to make your experience receiving the services we have been talking about today better?
- Do you have any other questions or feedback for us before we wrap up?

Thank you very much for your time today and very helpful comments.

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-New. The time required to complete this information collection is estimated at 90 minutes per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Reports Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850.