Program description
Oregon Project Independence (OPI) was formed in 1975 with the mission to help elderly Oregonians remain in their homes longer, thereby delaying entry into Medicaid Long-Term Care (MLTC). OPI has traditionally served those 60 years of age or older or who have been diagnosed with Alzheimer’s disease or a related disorder, meet the requirement of Oregon’s long-term care services priority rule, and do not receive federal benefits other than food stamps and Supplemental Low Income Medicare Beneficiary Program benefits.

Scope & findings
Below we provide profiles of OPI consumers, compare them with Medicaid Long-Term Care consumers, and investigate whether participation in OPI delays entry into Medicaid Long-Term Care.

OPI served 3,512 Oregonians in Fiscal Year 2015.

Fewer OPI consumers were identified as of Hispanic/Latino ethnicity or identified as Asian compared to all Oregonians age 65+ and compared to MLTC consumers.

OPI consumers entered care significantly later than MLTC consumers.
**Service Priority Levels**

Service Priority Level (SPL) by cohort. Shaded region indicates SPLs eligible for Medicaid services.

OPI consumers were represented in higher SPL categories than MLTC consumers. Though SPL data was missing for both cohorts, it was more pronounced for the OPI consumers (63.4% missing data).

Consumers in OPI remained in the OPI caseload for significantly less time than consumers in MLTC home care services. OPI consumers left services after an average of 168.7 days compared to 810 for MLTC. Twenty-four percent of OPI consumers who left the program transferred to MLTC within 30 days of ending OPI services. Most (85.7%) OPI consumers who left the caseload did not transfer into nursing home care.

Per consumer program costs were not able to be determined due to missing data.

**Methods**

We developed a consumer profile of all OPI consumers receiving services between July 1, 2014 and June 30, 2015.

We also compared OPI consumers 60 years of age or older with consumers 60 years of age and older receiving home care and meal-delivery services funded through Medicaid LTC.

To make these profiles, we used administrative data collected by Area Agencies on Aging and reported to the Department of Human Services. These data were obtained from the DHS|OHA Integrated Client Services data warehouse.
Recommendations

Oregon Enterprise Data Analytics makes the following recommendations to facilitate a full understanding of the Oregon Project Independence program:

- Report service, cost, and consumer information at the individual level, rather than the aggregate, to improve evaluation of program costs and effectiveness.
- Publish OPI program manual to the OPI website.
- Conduct a follow-up inquiry using individual-level data collected by Area Agencies on Aging to further understand program costs and effectiveness.

By consistently and accurately collecting Service Priority Levels, results from the Risk Assessment Tool, program costs, consumer copayments, and service information the OPI program could answer many important questions, such as:

- Does OPI delay entry into Medicaid Long-Term Care services?
- What consumer characteristics best predict whether or when they will move to a higher level of care outside of their home? Do these risk factors vary by AAA?
- Does OPI serve clients who, based on their financial resource availability, might be eligible for Medicaid Long-Term Care services? And does the state spend more or less to serve these consumers in OPI versus similar consumers in MLTC?
- What combinations of services are most successful at helping consumers stay in their homes longer based on their characteristics?

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