



*Delaware Health and Social Services*

*Division of Medicaid and Medical Assistance*

**CHILDREN WITH MEDICAL COMPLEXITY ADVISORY  
COMMITTEE**

**PRIVATE DUTY NURSING GAPS IN CARE:  
ANALYSIS UPDATE**



# REVIEW PROCESS & APPROACH

## *Process Overview*

- Developed a reporting sheet and instructions
- DMMA provided MCOs with list of children who received PDN in CY 18
- MCOs collaborated with nursing agencies to complete data collection
- MCOs compiled PDN gaps in care data and results sent to DMMA for initial analysis

## *Preliminary Findings (presented July 2019 CMCAC meeting)*

- Stratified number of children who received PDN by MCO
- Stratified number of children who received PDN by county



# INITIAL FINDING



Children Receiving Private Duty Nursing (PDN)  
Calendar Year 2018

Total Number of Children

N= 266



# GAPS IN CARE DATA ANALYSIS: AREAS OF EXPLORATION

## Geography

Number of  
PDN Agencies  
Serving Each Child

PDN Hours  
Authorized\*

*Note: Authorized  
includes "flex" hours*

Reason Codes for  
Gaps in Care



# CHILDREN RECEIVING PDN BY COUNTY

Total Children  
N=266

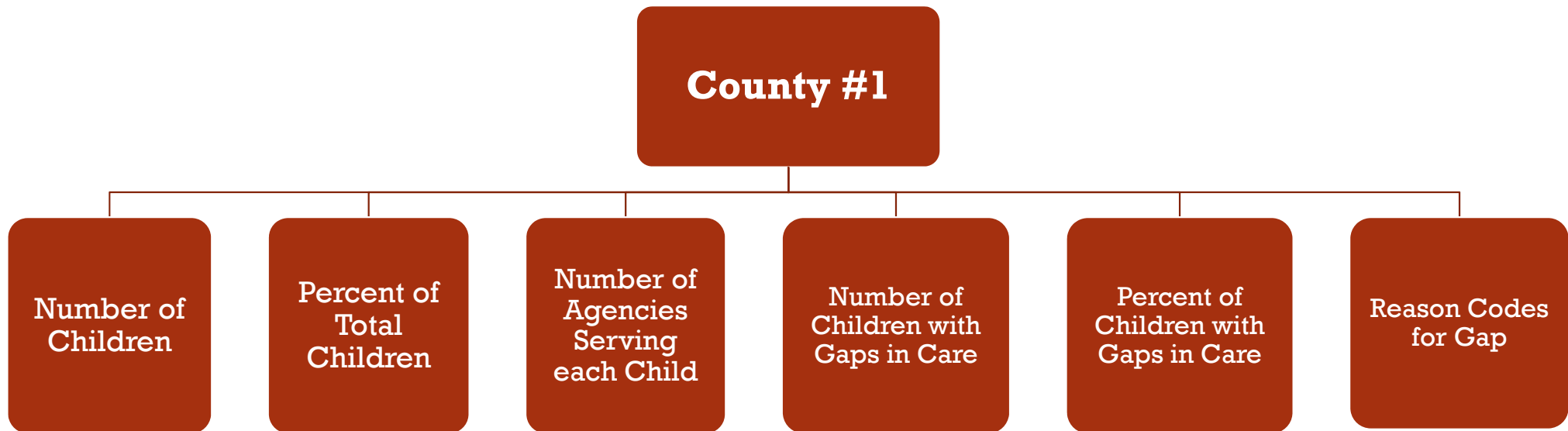
New Castle

Kent

Sussex



# CHILDREN RECEIVING PDN: COUNTY-LEVEL PARAMETERS



# GAPS IN CARE DATA ANALYSIS: AREAS OF EXPLORATION

**Geography**

**Number of  
PDN Agencies  
Serving Each Child**

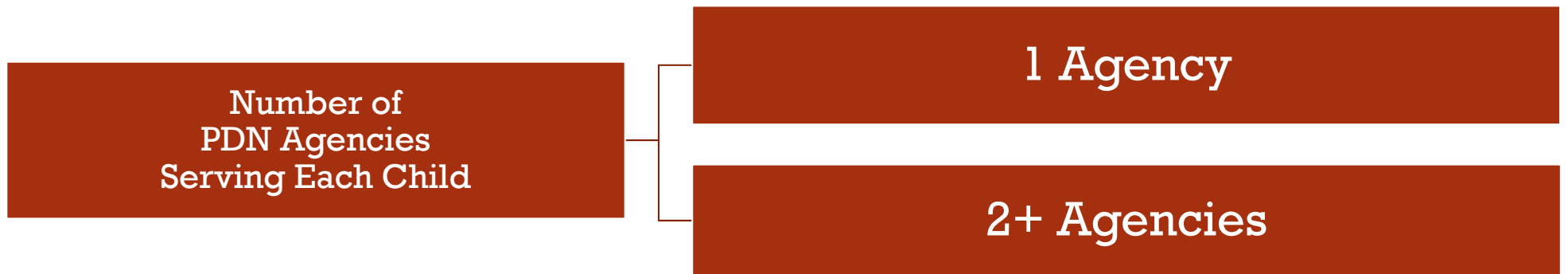
**PDN Hours  
Authorized\***

*Note: Authorized  
includes "flex" hours*

**Reason Codes for  
Gaps in Care**

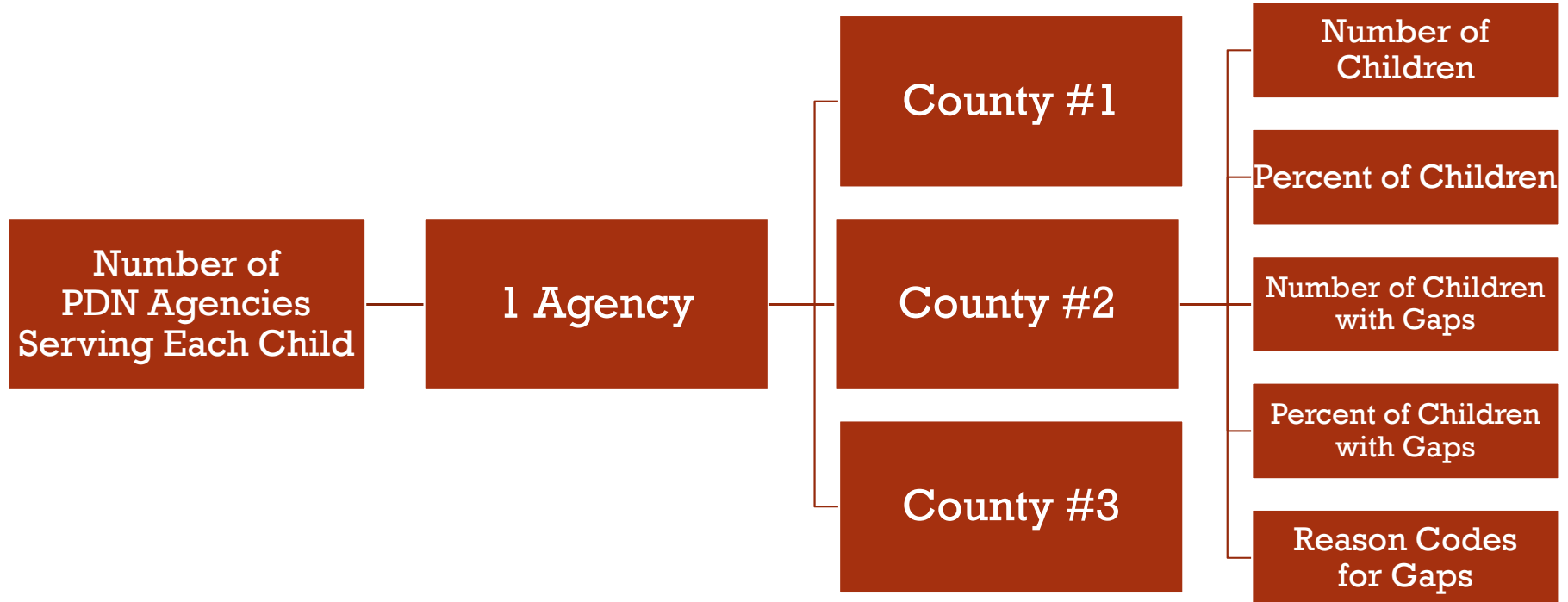


# PRIVATE DUTY NURSING (PDN) AGENCY DISTRIBUTION

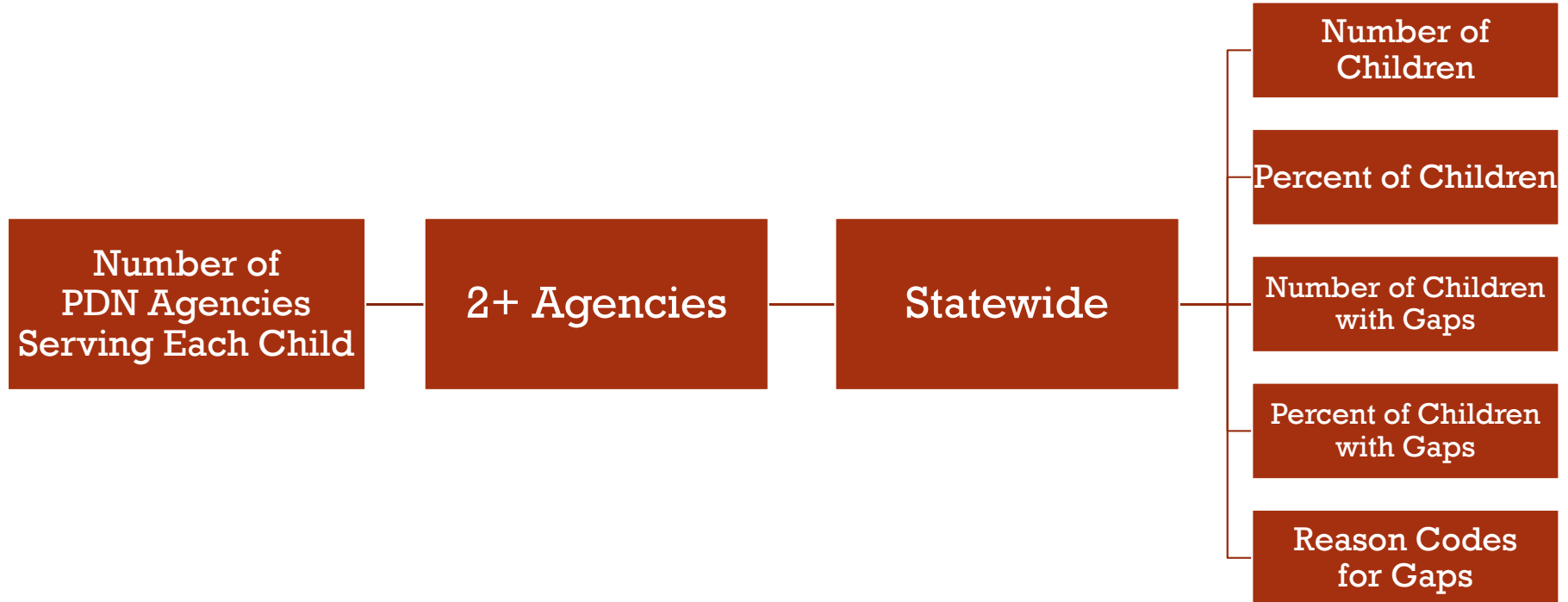




# PRIVATE DUTY NURSING (PDN) AGENCY DISTRIBUTION, BY COUNTY



# PRIVATE DUTY NURSING (PDN) AGENCY DISTRIBUTION, STATEWIDE



# GAPS IN CARE DATA ANALYSIS: AREAS OF EXPLORATION

**Geography**

**Number of  
PDN Agencies  
Serving Each Child**

**PDN Hours  
Authorized\***

**Reason Codes for  
Gaps in Care**

***Note: Authorized  
includes “flex” hours***



# DATA CONSIDERATIONS FOR PDN HOURS AUTHORIZED

## *By Each Month*

- Number of Hours
- Number of Children with Hours
- Percent of Children with Hours
- Average Authorized Hours per Child
- Number of Hours Not Covered
- Number of Children with Gap
- Percent of Children with Gap



# DATA CONSIDERATIONS FOR PDN HOURS AUTHORIZED

*By Calendar Year (2018)*

- Total Number Hours
- Total Member Months
- Average Hours per Member Month
- Total Number of Hours Not Covered
- Total Number Member Months with Gap



# GAPS IN CARE DATA ANALYSIS: AREAS OF EXPLORATION

<p><b>Geography</b></p>	<p><u>Number of PDN Agencies Serving Each Child</u></p>	<p><u>PDN Hours Authorized*</u></p> <p><i>Note: Authorized includes "flex" hours</i></p>	<p><b>Reason Codes for Gaps in Care</b></p>
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# REASON CODES FOR GAPS IN CARE

- AD Agency declined
- AI Acute increase in child's care needs
- FLEX Flex hours were approved but not needed
- FD Family declined/family deferred
- HO Child was in the hospital
- ILL Child was ill
- MD Child had a medical appointment
- NA Staff not available (e.g. holiday/night shift, weekend shift)
- OTHR Other reason
- SCH School closure
- UN Agency(ies) unable to staff
- WE Inclement weather



# PDN ANALYSIS GAPS IN CARE: NEXT STEPS

- Continue to review initial data results to consider approach for analysis
  - Focus on county-level data vs. agency-level data?
  - Focus on number of children vs. member months?
- Consider impact of nursing staffing and availability on agency-level data
- For total authorized hours → separate regular authorized hours from “flex” hours
- Review and update gap *reason codes* for more precise definition and accurate results
- Conduct data comparison analysis of children with higher vs lower authorized hours
- Further explore authorization process from provider approval to home care delivery
- Leverage the knowledge gained through the Gaps in Care Analysis with other inquiries such as the Workforce Capacity study and the Family Satisfaction Focus Groups and Survey
- Continue bridging discussions between data and SHHN workgroups

