

Appendices on Demographic and Health Conditions

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Appendix 1
Utilization and Costs for Selected Demographic and Health
Condition Subpopulations

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Table A.1-1
Proportion and utilization of institutional and non-institutional services for the Minnesota demonstration-eligible and comparison groups, by age

Measures by setting	Baseline period 1 10/1/2011–9/30/2012						Baseline period 2 10/1/2012–9/30/2013						Demonstration period 10/1/2013–12/31/2014					
	Demonstration			Comparison			Demonstration			Comparison			Demonstration			Comparison		
	65–74	75–84	85 and older	65–74	75–84	85 and older	65–74	75–84	85 and older	65–74	75–84	85 and older	65–74	75–84	85 and older	65–74	75–84	85 and older
Number of beneficiaries	21,128	18,597	21,703	72,338	57,254	59,050	21,585	18,267	20,769	73,060	54,851	56,482	20,721	17,216	18,941	78,161	54,917	57,187
Institutional setting																		
Inpatient admissions ¹																		
% with use	2.7	2.5	2.2	3.1	3.5	3.2	3.3	3.4	3.1	3.1	3.7	3.4	2.9	3.0	2.7	3.0	3.6	3.3
Utilization per 1,000 user months	172.1	155.8	143.6	174.7	167.9	152.6	170.5	161.2	150.2	168.9	168.7	155.8	151.6	142.9	133.5	148.3	146.6	133.9
Utilization per 1,000 eligible months	30.2	28.1	24.2	35.0	38.8	34.5	36.6	37.6	32.9	35.5	41.4	36.5	33.0	34.4	29.5	34.4	39.8	35.7
Inpatient psychiatric																		
% with use	0.1	0.0	0.0	0.1	0.0	0.0	0.1	0.1	0.0	0.1	0.0	0.0	0.1	0.1	0.0	0.1	0.1	0.0
Utilization per 1,000 user months	123.2	107.6	109.1	133.3	117.5	106.3	126.7	121.8	108.0	130.2	122.2	126.8	130.0	101.5	99.5	116.4	96.8	97.8
Utilization per 1,000 eligible months	1.1	0.4	0.2	1.2	0.5	0.2	1.5	0.7	0.3	1.2	0.5	0.1	1.6	0.7	0.2	1.3	0.6	0.1
Inpatient non-psychiatric																		
% with use	2.6	2.5	2.2	3.0	3.4	3.2	3.1	3.4	3.0	3.0	3.7	3.4	2.7	3.0	2.7	2.9	3.5	3.3
Utilization per 1,000 user months	171.4	155.4	143.3	172.5	167.1	152.2	168.6	160.5	149.9	167.1	167.8	155.5	148.1	141.9	132.9	145.9	145.6	133.7
Utilization per 1,000 eligible months	29.0	27.7	24.0	33.8	38.3	34.3	35.0	36.9	32.6	34.3	40.9	36.3	31.4	33.6	29.3	33.0	39.1	35.5
Inpatient dementia																		
% with use	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Utilization per user months	110.0	83.3	90.9	96.3	145.0	97.3	105.3	105.9	105.3	109.1	102.8	104.8	121.2	97.2	97.1	96.6	97.0	89.6
Utilization per eligible months	0.1	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.1	0.1	0.0	0.0	0.0	0.0	0.1	0.0

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Table A.1-1 (continued)
Proportion and utilization of institutional and non-institutional services for the Minnesota demonstration-eligible and comparison groups, by age

Measures by setting	Baseline period 1 10/1/2011–9/30/2012						Baseline period 2 10/1/2012–9/30/2013						Demonstration period 10/1/2013–12/31/2014					
	Demonstration			Comparison			Demonstration			Comparison			Demonstration			Comparison		
	65–74	75–84	85 and older	65–74	75–84	85 and older	65–74	75–84	85 and older	65–74	75–84	85 and older	65–74	75–84	85 and older	65–74	75–84	85 and older
Emergency department use (non-admit)																		
% with use	3.6	3.1	2.8	4.4	4.0	3.3	4.3	4.1	3.6	4.8	4.5	3.7	3.9	3.3	2.9	5.1	4.7	3.8
Utilization per 1,000 user months	165.5	148.8	143.3	181.5	166.3	149.9	177.3	162.0	154.4	185.0	167.7	155.9	152.3	133.8	131.8	164.3	155.2	138.7
Utilization per 1,000 eligible months	42.4	36.0	32.2	53.5	46.7	37.8	52.3	47.5	41.2	58.2	52.3	42.0	46.1	38.1	33.0	61.7	55.6	43.6
Emergency department use (psychiatric)																		
% with use	0.2	0.1	0.1	0.1	0.1	0.1	0.2	0.1	0.1	0.2	0.1	0.1	0.2	0.1	0.1	0.2	0.1	0.1
Utilization per 1,000 user months	116.2	106.8	106.8	122.1	109.5	104.1	120.8	104.3	113.3	121.1	109.0	107.7	105.9	87.9	91.9	109.8	90.0	91.6
Utilization per 1,000 eligible months	1.7	1.0	0.8	1.7	1.3	1.0	2.0	1.3	1.1	1.8	1.3	0.9	1.8	1.0	0.9	2.1	1.3	1.1
Observation stays																		
% with use	0.5	0.5	0.4	0.6	0.6	0.5	0.6	0.7	0.6	0.7	0.8	0.6	0.7	0.7	0.6	0.8	0.9	0.7
Utilization per 1,000 user months	115.1	112.7	113.2	113.4	112.4	112.2	117.0	121.6	126.0	116.1	116.0	116.7	94.5	91.7	97.6	98.7	98.8	99.2
Utilization per 1,000 eligible months	5.3	5.4	4.7	6.4	6.6	5.1	6.8	7.5	6.2	8.0	8.2	6.6	6.9	6.9	6.3	9.1	9.6	7.8
Skilled nursing facility																		
% with use	1.1	1.9	2.4	1.0	1.7	2.0	1.3	2.1	2.7	1.1	1.9	2.1	1.0	1.6	2.0	1.0	1.9	1.9
Utilization per 1,000 user months	168.7	169.3	168.2	162.3	162.5	149.6	170.6	174.2	181.3	160.2	167.7	154.3	140.9	146.3	151.6	135.8	145.2	129.3
Utilization per 1,000 eligible months	12.4	20.5	26.1	11.4	19.0	21.0	14.4	22.6	30.0	11.7	21.0	22.3	10.8	17.2	22.4	11.5	20.3	20.2

(continued)

Table A.1-1 (continued)
Proportion and utilization of institutional and non-institutional services for the Minnesota demonstration-eligible and comparison groups, by age

Measures by setting	Baseline period 1 10/1/2011–9/30/2012						Baseline period 2 10/1/2012–9/30/2013						Demonstration period 10/1/2013–12/31/2014					
	Demonstration			Comparison			Demonstration			Comparison			Demonstration			Comparison		
	65–74	75–84	85 and older	65–74	75–84	85 and older	65–74	75–84	85 and older	65–74	75–84	85 and older	65–74	75–84	85 and older	65–74	75–84	85 and older
Hospice																		
% with use	0.8	2.2	4.6	0.9	2.5	5.8	0.9	2.2	5.0	0.8	2.6	5.8	0.8	2.0	5.0	0.8	2.6	5.6
Utilization per 1,000 user months	398.2	419.1	430.9	454.3	489.5	512.6	428.1	434.4	436.2	451.8	478.6	488.9	351.8	373.1	370.1	366.3	409.1	434.7
Utilization per 1,000 eligible months	8.8	22.5	47.8	9.3	27.0	60.6	9.0	23.2	50.9	8.6	26.9	59.6	8.6	20.5	49.9	8.5	26.0	56.7
Non-institutional setting																		
Primary care E&M visits																		
% with use	35.8	37.2	39.5	41.3	47.4	55.6	45.2	49.7	53.1	45.9	52.4	59.7	44.7	48.4	51.7	46.1	52.3	60.0
Utilization per 1,000 user months	683.8	675.9	655.9	818.3	906.4	993.8	925.6	979.7	925.1	907.6	1,009.9	1,091.9	1,010.1	1,058.5	980.3	936.3	1,036.4	1,105.4
Utilization per 1,000 eligible months	609.1	617.3	605.1	719.4	820.1	927.0	851.6	925.0	883.1	815.4	935.3	1,026.4	936.2	1,006.9	942.7	842.1	959.3	1,050.3
Behavioral health visits																		
% with use	5.0	2.2	1.0	4.1	2.6	2.4	5.4	2.8	1.4	3.4	2.5	2.4	5.0	2.7	1.6	3.0	2.6	2.5
Utilization per 1,000 user months	534.3	397.0	253.3	504.6	334.6	302.9	653.1	563.5	395.1	498.3	441.4	399.9	764.1	610.2	522.8	613.4	630.1	586.6
Utilization per 1,000 eligible months	90.3	38.7	14.4	67.4	35.7	30.5	113.0	59.9	25.9	63.8	46.8	40.3	109.4	56.8	30.9	60.0	55.6	49.5
Outpatient therapy (PT, OT, ST)																		
% with use	2.7	3.2	4.1	3.9	6.6	10.6	3.2	3.7	4.7	4.0	6.9	10.9	2.3	2.3	2.9	4.1	7.2	11.4
Utilization per 1,000 user months	2,348.7	2,665.0	2,815.6	4,031.5	5,145.1	5,519.4	2,129.7	2,132.3	2,325.1	3,922.1	4,909.6	5,259.3	2,021.9	2,294.2	2,485.1	3,949.9	5,300.4	5,827.9
Utilization per 1,000 eligible months	317.4	434.0	592.8	654.9	1,300.8	2,120.6	330.2	404.9	563.9	660.8	1,295.9	2,104.2	275.2	324.4	443.3	772.1	1,581.7	2,565.0

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Table A.1-1 (continued)
Proportion and utilization of institutional and non-institutional services for the Minnesota demonstration-eligible and comparison groups, by age

Measures by setting	Baseline period 1 10/1/2011–9/30/2012						Baseline period 2 10/1/2012–9/30/2013						Demonstration period 10/1/2013–12/31/2014					
	Demonstration			Comparison			Demonstration			Comparison			Demonstration			Comparison		
	65–74	75–84	85 and older	65–74	75–84	85 and older	65–74	75–84	85 and older	65–74	75–84	85 and older	65–74	75–84	85 and older	65–74	75–84	85 and older
Independent therapy (PT, OT, ST)																		
% with use	1.1	0.8	0.3	1.0	0.8	0.4	1.5	1.0	0.4	1.0	1.0	0.5	1.6	1.3	0.5	1.0	1.1	0.5
Utilization per 1,000 user months	1,275.6	1,210.8	1,507.4	2,313.1	1,957.9	1,880.1	1,415.8	1,345.7	1,893.7	2,058.2	2,131.7	2,295.7	1,349.4	1,369.6	1,797.9	2,030.4	2,249.7	2,262.6
Utilization per 1,000 eligible months	71.2	52.3	25.2	100.9	75.0	33.0	100.1	73.3	37.1	94.9	95.9	50.2	117.6	97.3	47.4	114.3	118.1	53.9
Home health episodes																		
% with use	2.2	2.7	1.8	1.5	1.6	1.2	3.3	4.0	2.8	1.6	1.6	1.3	1.6	2.0	1.5	1.5	1.8	1.3
Utilization per 1,000 user months	484.7	534.3	442.4	200.3	195.0	196.6	713.1	791.9	646.4	218.3	206.6	213.5	382.8	430.4	365.8	201.9	217.6	203.6
Utilization per 1,000 eligible months	38.1	48.6	31.3	16.7	17.5	13.9	60.3	78.2	51.5	18.4	19.3	15.5	28.1	37.7	26.5	19.0	25.1	17.6
Durable medical equipment																		
% with use	16.2	15.2	12.9	17.0	14.8	10.6	23.4	25.6	22.3	17.3	15.4	10.7	21.6	24.5	22.5	16.0	14.6	10.2
Utilization per 1,000 user months	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Utilization per 1,000 eligible months	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—

(continued)

Table A.1-1 (continued)
Proportion and utilization of institutional and non-institutional services for the Minnesota demonstration-eligible and comparison groups, by age

Measures by setting	Baseline period 1 10/1/2011–9/30/2012						Baseline period 2 10/1/2012–9/30/2013						Demonstration period 10/1/2013–12/31/2014					
	Demonstration			Comparison			Demonstration			Comparison			Demonstration			Comparison		
	65–74	75–84	85 and older	65–74	75–84	85 and older	65–74	75–84	85 and older	65–74	75–84	85 and older	65–74	75–84	85 and older	65–74	75–84	85 and older
Other hospital outpatient services																		
% with use	24.0	23.9	24.9	28.3	29.3	29.9	30.1	31.9	34.2	30.7	32.2	32.0	26.4	25.9	27.0	31.8	33.0	33.1
Utilization per 1,000 user months	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Utilization per 1,000 eligible months	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—

— Counts of service use could not be developed for this type of service.

E&M = evaluation and management; OT = occupational therapy; PT = physical therapy; ST = speech therapy.

¹ Includes acute admissions, inpatient rehabilitation, and long-term care hospital admissions.

NOTES: Utilization for inpatient admissions, inpatient psychiatric admissions, inpatient substance abuse, skilled nursing facility, and hospice are defined as number of admissions during the eligible/user month. Utilization for emergency department (non-admit), emergency department (psychiatric), observation stays, specialist E&M visits, primary care E&M visits, behavioral health visits, home health, and outpatient and independent therapy are defined as the number of visits during the eligible/user month. Durable medical equipment and other outpatient services are defined as having any of those services during the eligible month.

Medicare Advantage encounter data was not fully reported by some plans until January 2012, therefore, utilization for the period September to December 2011, the first 4 months of Baseline Year 1, is underreported; thus Baseline Year 1 results are slightly lower than anticipated.

Given that the demonstration started in mid-September 2013, September 2013 was excluded from the baseline and demonstration periods because evaluation measures could not be created simultaneously in the same month using both fee-for-service and encounter data.

Table A.1-2
Proportion and utilization of institutional and non-institutional services for the Minnesota demonstration-eligible and comparison groups, by gender

Measures by setting	Baseline period 1 10/1/2011–9/30/2012				Baseline period 2 10/1/2012–9/30/2013				Demonstration period 10/1/2013–12/31/2014			
	Demonstration		Comparison		Demonstration		Comparison		Demonstration		Comparison	
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
Number of beneficiaries	18,635	42,793	55,188	133,454	18,556	42,065	54,797	129,596	17,620	39,259	57,811	132,454
Institutional setting												
Inpatient admissions ¹												
% with use	2.9	2.3	3.7	3.1	3.6	3.1	3.7	3.3	3.2	2.7	3.6	3.1
Utilization per 1,000 user months	170.8	151.1	174.1	160.0	171.5	156.1	171.7	160.8	151.0	139.4	152.8	138.0
Utilization per 1,000 eligible months	32.9	25.3	41.0	33.8	39.6	34.0	41.3	36.0	36.0	30.8	41.0	34.3
Inpatient psychiatric												
% with use	0.1	0.1	0.1	0.1	0.1	0.1	0.1	0.1	0.1	0.1	0.1	0.1
Utilization per 1,000 user months	128.9	112.5	125.4	126.5	120.5	124.7	132.5	125.8	129.7	114.6	121.4	102.7
Utilization per 1,000 eligible months	0.7	0.5	0.7	0.6	0.8	0.9	0.7	0.6	0.9	0.9	0.9	0.6
Inpatient non-psychiatric												
% with use	2.9	2.2	3.6	3.0	3.5	3.0	3.6	3.2	3.1	2.6	3.6	3.0
Utilization per 1,000 user months	169.7	150.7	172.7	158.9	170.7	154.9	170.2	160.0	149.2	137.6	150.9	137.0
Utilization per 1,000 eligible months	32.1	24.7	40.3	33.2	38.7	33.1	40.5	35.3	35.1	29.9	40.0	33.7
Inpatient dementia												
% with use	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Utilization per 1,000 user months	103.1	101.7	135.5	101.6	123.1	97.0	125.1	94.7	97.1	104.8	95.1	95.4
Utilization per 1,000 eligible months	0.1	0.0	0.0	0.0	0.0	0.0	0.1	0.0	0.0	0.0	0.1	0.0
Emergency department use (non-admit)												
% with use	3.4	3.1	4.1	3.8	4.1	4.0	4.5	4.2	3.6	3.3	4.7	4.5
Utilization per 1,000 user months	166.1	147.8	178.4	161.7	173.8	161.8	185.8	164.2	150.8	136.2	165.6	148.8
Utilization per 1,000 eligible months	40.0	35.6	50.0	44.3	49.2	46.3	55.2	49.2	42.4	38.2	57.9	52.1

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Table A.1-2 (continued)
Proportion and utilization of institutional and non-institutional services for the Minnesota demonstration-eligible and comparison groups, by gender

	Baseline period 1 10/1/2011–9/30/2012				Baseline period 2 10/1/2012–9/30/2013				Demonstration period 10/1/2013–12/31/2014			
	Demonstration		Comparison		Demonstration		Comparison		Demonstration		Comparison	
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
Measures by setting												
Emergency department use (psychiatric)												
% with use	0.2	0.1	0.2	0.1	0.2	0.1	0.2	0.1	0.1	0.1	0.2	0.1
Utilization per 1,000 user months	124.5	102.4	131.2	102.1	119.8	110.9	122.7	108.6	104.7	93.6	112.8	92.2
Utilization per 1,000 eligible months	1.8	0.9	1.9	1.1	1.9	1.3	1.9	1.1	1.6	1.1	2.1	1.3
Observation stays												
% with use	0.5	0.5	0.5	0.6	0.6	0.6	0.7	0.7	0.6	0.6	0.8	0.8
Utilization per 1,000 user months	112.8	114.1	115.8	111.5	121.8	120.9	118.6	115.2	97.7	93.1	101.0	98.0
Utilization per 1,000 eligible months	5.0	5.1	5.8	6.1	6.9	6.8	7.6	7.6	6.7	6.7	8.6	8.8
Skilled nursing facility												
% with use	1.8	1.8	1.7	1.5	1.9	2.0	1.7	1.6	1.5	1.5	1.7	1.5
Utilization per 1,000 user months	177.4	165.1	167.5	152.0	186.4	172.5	169.0	156.2	152.8	144.8	147.4	131.1
Utilization per 1,000 eligible months	20.1	19.3	18.3	16.5	21.7	22.2	19.0	17.6	16.3	16.5	18.6	16.2
Hospice												
% with use	2.1	2.7	2.4	3.4	2.2	2.8	2.5	3.2	2.0	2.7	2.4	3.1
Utilization per 1,000 user months	399.2	432.3	460.0	513.9	423.4	438.5	463.6	489.1	347.5	375.9	388.5	431.0
Utilization per 1,000 eligible months	21.6	28.2	25.1	35.6	22.1	29.2	26.1	33.4	20.5	27.4	24.1	32.0
Non-institutional setting												
Primary care E&M visits												
% with use	36.4	38.0	45.0	49.4	46.8	50.2	49.4	53.8	45.9	49.0	49.4	53.9
Utilization per 1,000 user months	683.5	666.9	910.2	906.6	931.9	946.7	1,003.6	1,000.8	1,001.8	1,021.9	1,027.3	1,021.5
Utilization per 1,000 eligible months	604.2	612.8	796.2	832.9	855.1	897.4	894.0	934.6	929.2	974.2	916.7	958.0

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Table A.1-2 (continued)
Proportion and utilization of institutional and non-institutional services for the Minnesota demonstration-eligible and comparison groups, by gender

Measures by setting	Baseline period 1 10/1/2011–9/30/2012				Baseline period 2 10/1/2012–9/30/2013				Demonstration period 10/1/2013–12/31/2014			
	Demonstration		Comparison		Demonstration		Comparison		Demonstration		Comparison	
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
Behavioral health visits												
% with use	2.7	2.8	3.0	3.0	3.1	3.4	2.7	2.8	2.9	3.3	2.5	2.8
Utilization per 1,000 user months	429.9	453.4	399.7	392.2	631.4	559.4	441.4	457.5	673.6	675.3	570.2	626.9
Utilization per 1,000 eligible months	47.4	49.0	46.2	44.5	73.5	65.7	49.2	51.5	65.8	69.2	50.4	57.4
Outpatient therapy (PT, OT, ST)												
% with use	3.2	3.4	6.2	7.4	3.6	4.0	6.2	7.6	2.5	2.5	6.6	7.8
Utilization per 1,000 user months	2,731.4	2,604.3	5,340.0	5,005.9	2,358.5	2,152.8	4,836.1	4,868.1	2,564.4	2,154.9	5,389.4	5,168.1
Utilization per 1,000 eligible months	435.9	451.7	1,238.3	1,410.1	425.0	431.6	1,139.7	1,422.6	372.4	331.0	1,436.4	1,676.4
Independent therapy (PT, OT, ST)												
% with use	0.6	0.8	0.7	0.7	0.9	1.0	0.8	0.8	1.0	1.2	0.7	0.9
Utilization per 1,000 user months	1,291.3	1,285.8	2,247.7	2,053.8	1,477.5	1,445.5	2,241.5	2,084.7	1,421.6	1,413.3	2,313.6	2,088.4
Utilization per 1,000 eligible months	43.3	52.4	68.0	70.2	63.3	74.6	81.0	79.8	81.8	92.3	87.8	98.8
Home health episodes												
% with use	2.0	2.3	1.4	1.4	2.9	3.5	1.5	1.5	1.5	1.8	1.5	1.5
Utilization per 1,000 user months	467.9	497.6	201.7	195.6	701.4	727.8	214.9	212.1	427.5	383.0	208.7	207.5
Utilization per 1,000 eligible months	34.4	41.0	15.6	16.2	53.8	66.9	17.3	17.9	29.0	31.4	19.1	20.9
Durable medical equipment												
% with use	14.6	14.8	14.4	14.0	21.6	24.6	14.6	14.4	19.9	24.1	13.5	13.7
Utilization per 1,000 user months	—	—	—	—	—	—	—	—	—	—	—	—
Utilization per 1,000 eligible months	—	—	—	—	—	—	—	—	—	—	—	—

(continued)

Table A.1-2 (continued)
Proportion and utilization of institutional and non-institutional services for the Minnesota demonstration-eligible and comparison groups, by gender

Measures by setting	Baseline period 1 10/1/2011–9/30/2012				Baseline period 2 10/1/2012–9/30/2013				Demonstration period 10/1/2013–12/31/2014			
	Demonstration		Comparison		Demonstration		Comparison		Demonstration		Comparison	
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
Other hospital outpatient services												
% with use	24.4	24.2	27.6	29.8	31.6	32.2	29.8	32.4	26.7	26.3	30.7	33.4
Utilization per 1,000 user months	—	—	—	—	—	—	—	—	—	—	—	—
Utilization per 1,000 eligible months	—	—	—	—	—	—	—	—	—	—	—	—

— Counts of service use could not be developed for this type of service.

E&M = evaluation and management; OT = occupational therapy; PT = physical therapy; ST = speech therapy.

¹ Includes acute admissions, inpatient rehabilitation, and long-term care hospital admissions.

NOTES: Utilization for inpatient admissions, inpatient psychiatric admissions, inpatient substance abuse, skilled nursing facility, and hospice are defined as number of admissions during the eligible/user month. Utilization for emergency department (non-admit), emergency department (psychiatric), observation stays, specialist E&M visits, primary care E&M visits, behavioral health visits, home health, and outpatient and independent therapy are defined as the number of visits during the eligible/user month. Durable medical equipment and other outpatient services are defined as having any of those services during the eligible month.

Medicare Advantage encounter data was not fully reported by some plans until January 2012, therefore, utilization for the period September to December 2011, the first 4 months of Baseline Year 1, is underreported; thus Baseline Year 1 results are slightly lower than anticipated.

Given that the demonstration started in mid-September 2013, September 2013 was excluded from the baseline and demonstration periods because evaluation measures could not be created simultaneously in the same month using both fee-for-service and encounter data.

Table A.1-3
Proportion and utilization of institutional and non-institutional services for the Minnesota demonstration-eligible and comparison groups, by race

Measures by setting	Baseline period 1 10/1/2011–9/30/2012								Baseline period 2 10/1/2012–9/30/2013								Demonstration period 10/1/2013–12/31/2014							
	Demonstration				Comparison				Demonstration				Comparison				Demonstration				Comparison			
	White	African American	Hispanic	Asian/PI	White	African American	Hispanic	Asian/PI	White	African American	Hispanic	Asian/PI	White	African American	Hispanic	Asian/PI	White	African American	Hispanic	Asian/PI	White	African American	Hispanic	Asian/PI
Number of beneficiaries	49,395	3,978	654	4,618	151,844	23,906	3,772	5,939	48,112	4,191	675	4,692	147,524	23,970	3,861	5,799	44,428	4,258	707	4,627	151,713	25,098	4,001	5,821
Institutional setting																								
Inpatient admissions ¹																								
% with use	2.6	2.6	1.7	1.4	3.3	3.4	2.4	2.0	3.4	3.3	2.5	2.1	3.5	3.6	2.2	2.0	3.0	3.0	2.3	2.0	3.4	3.4	1.9	1.7
Utilization per 1,000 user months	157.3	170.0	140.8	138.6	164.5	173.2	146.8	145.1	160.4	173.1	153.0	149.1	164.9	167.1	150.5	152.1	144.5	141.7	132.5	126.6	143.6	144.4	123.9	128.1
Utilization per 1,000 eligible months	28.5	28.8	19.2	16.1	37.0	38.3	26.8	21.7	37.3	36.8	27.8	23.3	39.0	40.0	24.6	21.9	33.7	34.2	25.8	22.4	38.4	37.1	20.7	19.3
Inpatient psychiatric																								
% with use	0.1	0.0	0.0	0.0	0.1	0.0	0.0	0.0	0.1	0.1	0.0	0.0	0.1	0.1	0.0	0.0	0.1	0.1	0.1	0.0	0.1	0.1	0.0	0.0
Utilization per 1,000 user months	118.7	97.3	83.3	90.9	127.7	116.7	123.2	98.7	122.0	142.0	250.0	136.4	129.2	124.2	92.3	83.3	118.0	136.7	133.3	75.6	107.0	129.4	113.0	78.5
Utilization per 1,000 eligible months	0.7	0.3	0.4	0.1	0.7	0.5	0.5	0.0	1.0	0.6	0.4	0.1	0.7	0.6	0.2	0.0	1.0	0.7	0.7	0.1	0.8	0.8	0.1	0.0
Inpatient non-psychiatric																								
% with use	2.5	2.5	1.7	1.4	3.3	3.4	2.4	2.0	3.3	3.3	2.5	2.1	3.4	3.6	2.2	2.0	2.9	3.0	2.2	2.0	3.4	3.3	1.9	1.7
Utilization per 1,000 user months	156.6	170.4	141.2	138.6	163.2	172.4	144.7	145.2	159.2	172.9	152.1	148.7	163.8	166.7	150.1	152.1	142.6	139.8	130.1	126.4	142.1	143.7	123.5	128.0
Utilization per 1,000 eligible months	27.8	28.5	18.7	16.0	36.3	37.7	26.3	21.7	36.2	36.1	27.4	23.1	38.2	39.4	24.3	21.9	32.6	33.4	25.2	22.3	37.5	36.3	20.6	19.2
Inpatient dementia																								
% with use	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Utilization per 1,000 user months	104.5	100.0	0.0	0.0	113.0	99.2	83.3	83.3	108.6	83.3	0.0	83.3	104.9	100.2	0.0	0.0	87.9	160.0	0.0	0.0	98.6	73.7	0.0	0.0
Utilization per 1,000 eligible months	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.1	0.0	0.0	0.0	0.0	0.1	0.0	0.0	0.0	0.1	0.0	0.0

(continued)

Table A.1-3 (continued)

Proportion and utilization of institutional and non-institutional services for the Minnesota demonstration-eligible and comparison groups, by race

Measures by setting	Baseline period 1 10/1/2011–9/30/2012								Baseline period 2 10/1/2012–9/30/2013								Demonstration period 10/1/2013–12/31/2014							
	Demonstration				Comparison				Demonstration				Comparison				Demonstration				Comparison			
	White	African American	Hispanic	Asian/PI	White	African American	Hispanic	Asian/PI	White	African American	Hispanic	Asian/PI	White	African American	Hispanic	Asian/PI	White	African American	Hispanic	Asian/PI	White	African American	Hispanic	Asian/PI
Emergency department use (non-admit)																								
% with use	3.3	3.9	3.2	1.5	3.9	4.8	4.1	2.2	4.2	4.8	3.6	2.1	4.3	5.4	4.1	2.4	3.4	4.9	3.7	2.0	4.6	5.5	3.8	2.4
Utilization per 1,000 user months	154.5	155.0	155.6	117.3	164.8	186.2	154.7	131.8	167.7	164.6	171.6	125.9	168.5	187.0	165.8	136.3	143.6	142.9	138.7	103.9	154.1	165.7	139.6	121.9
Utilization per 1,000 eligible months	38.2	44.6	37.0	16.1	45.4	59.8	46.4	24.3	49.1	55.4	44.2	23.2	50.3	64.9	49.1	27.5	39.5	56.3	44.4	22.0	54.7	65.6	43.0	26.5
Emergency department use (psychiatric)																								
% with use	0.1	0.1	0.1	0.0	0.1	0.2	0.1	0.0	0.2	0.1	0.1	0.0	0.1	0.2	0.1	0.0	0.1	0.1	0.1	0.0	0.2	0.2	0.1	0.0
Utilization per 1,000 user months	112.9	106.3	87.7	119.4	108.7	140.2	93.9	86.9	114.4	119.7	97.6	93.8	110.6	134.9	114.3	95.0	97.4	93.3	75.8	101.8	98.2	114.5	86.1	76.1
Utilization per 1,000 eligible months	1.3	1.0	0.7	0.2	1.2	2.4	1.3	0.2	1.6	1.6	0.6	0.3	1.4	2.2	0.8	0.2	1.4	1.4	1.1	0.3	1.6	2.1	0.8	0.2
Observation stays																								
% with use	0.5	0.6	0.5	0.3	0.6	0.7	0.5	0.3	0.6	0.9	0.6	0.4	0.7	0.9	0.5	0.4	0.6	1.0	0.6	0.4	0.8	1.1	0.6	0.3
Utilization per 1,000 user months	115.0	115.6	104.2	94.0	113.4	114.8	97.7	94.3	123.3	115.4	105.5	103.6	116.6	118.1	101.2	108.5	96.1	93.4	84.7	81.9	100.0	96.7	84.8	89.2
Utilization per 1,000 eligible months	5.1	6.6	4.8	3.0	5.9	8.0	5.2	2.9	6.8	9.5	7.0	4.5	7.6	10.0	5.5	4.1	6.6	10.1	5.6	4.6	8.9	11.2	5.8	3.5
Skilled nursing facility																								
% with use	2.1	0.8	0.4	0.3	1.7	1.2	0.5	0.4	2.4	0.9	0.6	0.2	1.8	1.5	0.5	0.4	1.8	0.6	0.4	0.2	1.8	1.3	0.5	0.4
Utilization per 1,000 user months	169.9	148.1	147.2	149.9	156.7	160.0	122.1	169.6	179.3	143.7	128.0	123.5	160.5	162.3	134.5	173.2	150.0	118.9	134.1	105.6	136.0	141.2	100.7	127.9
Utilization per 1,000 eligible months	23.1	8.5	4.3	3.0	19.0	13.0	5.4	4.4	26.4	9.3	5.9	2.6	20.0	15.9	5.4	4.1	19.9	6.9	5.1	2.6	18.9	14.4	5.2	4.2

(continued)

Table A.1-3 (continued)
Proportion and utilization of institutional and non-institutional services for the Minnesota demonstration-eligible and comparison groups, by race

Measures by setting	Baseline period 1 10/1/2011–9/30/2012								Baseline period 2 10/1/2012–9/30/2013								Demonstration period 10/1/2013–12/31/2014							
	Demonstration				Comparison				Demonstration				Comparison				Demonstration				Comparison			
	White	African American	Hispanic	Asian/PI	White	African American	Hispanic	Asian/PI	White	African American	Hispanic	Asian/PI	White	African American	Hispanic	Asian/PI	White	African American	Hispanic	Asian/PI	White	African American	Hispanic	Asian/PI
Hospice																								
% with use	3.0	0.9	0.5	0.9	3.5	2.3	1.1	0.8	3.1	0.9	0.4	0.9	3.4	2.4	0.8	0.7	3.1	0.9	0.4	0.7	3.3	2.1	1.4	0.5
Utilization per 1,000 user months	424.4	413.6	642.9	437.2	501.5	499.2	462.8	482.0	434.1	411.0	289.7	486.3	479.0	524.6	420.1	461.8	372.5	340.9	243.9	338.2	421.9	405.3	426.3	355.7
Utilization per 1,000 eligible months	30.7	10.1	5.4	9.1	36.4	24.2	11.9	8.0	31.9	10.0	4.3	9.5	35.0	25.6	8.3	7.0	30.8	9.0	4.5	7.3	33.6	21.8	14.1	5.0
Non-institutional setting																								
Primary care E&M visits																								
% with use	38.7	37.5	33.4	26.7	50.0	46.0	37.5	30.8	51.2	47.6	40.9	36.0	54.4	52.7	40.3	33.9	50.1	47.6	41.7	35.6	55.3	52.2	34.4	28.9
Utilization per 1,000 user months	695.3	674.5	594.6	456.2	933.3	932.3	743.5	556.7	969.9	991.5	804.6	707.3	1,030.3	1,063.1	769.9	607.4	1,042.8	1,103.8	904.1	767.1	1,054.3	1,094.1	791.5	556.0
Utilization per 1,000 eligible months	633.4	616.7	531.6	400.2	852.1	838.3	637.3	472.5	914.1	924.3	741.2	647.3	955.5	980.9	676.3	520.4	987.8	1,044.1	842.9	720.7	992.1	1,012.9	607.9	440.8
Behavioral health visits																								
% with use	3.0	2.5	1.3	1.6	3.4	2.4	1.3	0.6	3.4	4.1	1.3	1.7	3.1	2.6	0.9	0.4	3.5	3.2	1.7	1.4	3.1	2.4	0.6	0.3
Utilization per 1,000 user months	423.6	686.3	432.0	376.3	388.6	464.4	350.7	317.8	503.4	1,237.0	451.7	490.5	443.9	558.3	403.1	239.3	635.5	942.3	478.5	508.5	621.9	590.5	285.3	297.6
Utilization per 1,000 eligible months	48.8	70.9	21.9	25.3	48.4	48.5	18.8	7.1	61.9	157.7	24.2	33.2	54.5	59.8	16.4	5.0	67.5	112.1	34.8	27.0	61.7	54.7	8.9	4.9
Outpatient therapy (PT, OT, ST)																								
% with use	3.8	2.4	2.2	0.7	8.0	4.6	2.7	1.5	4.4	2.7	2.4	0.7	8.1	5.1	2.9	1.5	2.9	2.0	1.9	0.5	8.5	5.0	2.6	1.4
Utilization per 1,000 user months	2,738	2,247	1,675	1,131	5,258	3,842	4,477	2,849	2,299	1,717	1,192	960	5,066	3,656	4,230	2,246	2,403	1,563	1,263	1,037	5,451	4,036	3,055	2,298
Utilization per 1,000 eligible months	520.6	255.0	213.3	52.9	1,551.4	778.7	510.4	206.7	508.0	241.9	163.9	47.6	1,542.2	802.1	502.9	171.7	408.8	201.0	144.8	48.7	1,881.5	948.7	416.8	185.7

(continued)

Table A.1-3 (continued)
Proportion and utilization of institutional and non-institutional services for the Minnesota demonstration-eligible and comparison groups, by race

Measures by setting	Baseline period 1 10/1/2011–9/30/2012								Baseline period 2 10/1/2012–9/30/2013								Demonstration period 10/1/2013–12/31/2014							
	Demonstration				Comparison				Demonstration				Comparison				Demonstration				Comparison			
	White	African American	Hispanic	Asian/PI	White	African American	Hispanic	Asian/PI	White	African American	Hispanic	Asian/PI	White	African American	Hispanic	Asian/PI	White	African American	Hispanic	Asian/PI	White	African American	Hispanic	Asian/PI
Independent therapy (PT, OT, ST)																								
% with use	0.6	1.6	0.8	0.6	0.7	0.6	0.6	0.4	0.8	2.5	1.0	0.9	0.8	0.7	0.7	0.7	0.9	2.9	1.3	1.0	0.9	0.8	0.7	0.7
Utilization per 1,000 user months	1,402	985	1,215	1,040	2,119	1,914	2,453	2,416	1,476	1,607	1,219	992	2,272	1,681	1,689	1,608	1,490	1,366	1,157	960	2,270	1,823	1,614	1,453
Utilization per 1,000 eligible months	45.7	94.5	51.7	37.4	71.3	58.4	78.1	51.0	59.4	194.4	70.0	49.3	83.1	66.3	60.0	59.4	74.6	210.5	87.4	63.3	99.4	81.7	69.4	65.1
Home health episodes																								
% with use	2.4	2.7	1.5	1.0	1.4	2.3	1.4	0.6	3.6	3.7	2.6	1.8	1.5	2.2	1.2	0.7	1.8	1.9	2.0	0.8	1.5	1.9	1.3	0.9
Utilization per 1,000 user months	498.4	507.9	415.3	325.3	194.9	233.0	186.7	126.7	725.6	713.5	812.5	634.6	212.1	244.4	174.0	143.1	397.2	358.4	524.1	319.7	200.7	244.5	353.4	160.3
Utilization per 1,000 eligible months	41.0	52.1	26.8	16.2	15.4	26.5	14.9	6.0	66.5	74.3	56.3	32.1	17.4	26.7	13.1	7.4	32.5	33.8	42.5	12.8	19.9	28.2	29.7	11.0
Durable medical equipment																								
% with use	14.9	15.8	12.8	13.0	14.5	13.7	12.5	10.3	24.1	23.6	18.4	22.5	14.9	14.5	12.4	10.1	23.5	21.7	17.7	21.0	14.3	13.0	10.0	8.9
Utilization per 1,000 user months	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Utilization per 1,000 eligible months	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—

(continued)

Table A.1-3 (continued)

Proportion and utilization of institutional and non-institutional services for the Minnesota demonstration-eligible and comparison groups, by race

Measures by setting	Baseline period 1 10/1/2011–9/30/2012								Baseline period 2 10/1/2012–9/30/2013								Demonstration period 10/1/2013–12/31/2014							
	Demonstration				Comparison				Demonstration				Comparison				Demonstration				Comparison			
	White	African American	Hispanic	Asian/PI	White	African American	Hispanic	Asian/PI	White	African American	Hispanic	Asian/PI	White	African American	Hispanic	Asian/PI	White	African American	Hispanic	Asian/PI	White	African American	Hispanic	Asian/PI
Other hospital outpatient services																								
% with use	26.0	23.0	22.1	9.8	30.9	24.7	19.7	17.5	34.9	27.2	26.0	13.1	33.5	27.9	21.8	18.9	28.5	25.6	24.8	12.1	35.1	27.0	20.9	18.0
Utilization per 1,000 user months	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Utilization per 1,000 eligible months	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—

— Counts of service use could not be developed for this type of service.

E&M = evaluation and management; OT = occupational therapy; PI = Pacific Islander; PT = physical therapy; ST = speech therapy.

¹ Includes acute admissions, inpatient rehabilitation, and long-term care hospital admissions.

NOTES: Utilization for inpatient admissions, inpatient psychiatric admissions, inpatient substance abuse, skilled nursing facility, and hospice are defined as number of admissions during the eligible/user month. Utilization for emergency department (non-admit), emergency department (psychiatric), observation stays, specialist E&M visits, primary care E&M visits, behavioral health visits, home health, and outpatient and independent therapy are defined as the number of visits during the eligible/user month. Durable medical equipment and other outpatient services are defined as having any of those services during the eligible month.

Medicare Advantage encounter data was not fully reported by some plans until January 2012, therefore, utilization for the period September to December 2011, the first 4 months of Baseline Year 1, is underreported; thus Baseline Year 1 results are slightly lower than anticipated.

Given that the demonstration started in mid-September 2013, September 2013 was excluded from the baseline and demonstration periods because evaluation measures could not be created simultaneously in the same month using both fee-for-service and encounter data.

Table A.1-4
Proportion and utilization of institutional and non-institutional services for the Minnesota demonstration-eligible and comparison groups, by urban/rural status

Measures by setting	Baseline period 1 10/1/2011–9/30/2012				Baseline period 2 10/1/2012–9/30/2013				Demonstration period 10/1/2013–12/31/2014			
	Demonstration		Comparison		Demonstration		Comparison		Demonstration		Comparison	
	Urban	Rural	Urban	Rural	Urban	Rural	Urban	Rural	Urban	Rural	Urban	Rural
Number of beneficiaries	45,418	16,010	164,363	24,279	44,970	15,651	160,776	23,617	41,917	14,962	165,850	24,415
Institutional setting												
Inpatient admissions ¹												
% with use	2.4	2.7	3.2	3.4	3.2	3.3	3.3	3.5	2.9	2.8	3.2	3.5
Utilization per 1,000 user months	157.0	158.9	165.0	163.2	160.4	162.3	164.0	165.5	142.9	143.7	142.5	143.7
Utilization per 1,000 eligible months	26.8	29.5	35.5	37.8	35.4	36.5	37.1	39.8	32.5	32.0	35.6	39.4
Inpatient psychiatric												
% with use	0.1	0.1	0.1	0.1	0.1	0.1	0.1	0.1	0.1	0.1	0.1	0.1
Utilization per 1,000 user months	123.0	104.1	125.8	127.5	124.3	120.4	126.3	135.0	120.7	112.5	111.7	99.9
Utilization per 1,000 eligible months	0.6	0.6	0.6	0.7	0.9	0.7	0.6	0.6	0.9	0.8	0.8	0.6
Inpatient non-psychiatric												
% with use	2.4	2.6	3.2	3.3	3.2	3.2	3.3	3.5	2.8	2.8	3.1	3.5
Utilization per 1,000 user months	156.4	158.5	163.9	161.9	159.2	161.6	163.0	164.4	140.9	142.3	141.2	142.7
Utilization per 1,000 eligible months	26.2	28.9	34.9	37.1	34.5	35.7	36.4	39.1	31.5	31.2	34.8	38.7
Inpatient dementia												
% with use	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Utilization per user months	118.4	87.5	110.6	103.3	100.8	112.5	101.7	115.8	116.3	75.9	97.1	90.2
Utilization per eligible months	0.0	0.0	0.0	0.0	0.0	0.1	0.0	0.1	0.0	0.0	0.0	0.1
Emergency department use (non-admit)												
% with use	3.0	3.8	3.7	4.5	3.8	4.8	4.2	5.0	3.3	3.7	4.4	5.3
Utilization per 1,000 user months	150.3	160.2	166.7	167.4	162.1	173.2	169.7	174.3	137.6	149.3	153.8	154.7
Utilization per 1,000 eligible months	34.3	44.5	44.5	51.7	43.9	56.7	49.1	58.5	38.2	43.0	51.9	61.5

(continued)

Table A.1-4 (continued)
Proportion and utilization of institutional and non-institutional services for the Minnesota demonstration-eligible and comparison groups, by urban/rural status

Measures by setting	Baseline period 1 10/1/2011–9/30/2012				Baseline period 2 10/1/2012–9/30/2013				Demonstration period 10/1/2013–12/31/2014			
	Demonstration		Comparison		Demonstration		Comparison		Demonstration		Comparison	
	Urban	Rural	Urban	Rural	Urban	Rural	Urban	Rural	Urban	Rural	Urban	Rural
Emergency department use (psychiatric)												
% with use	0.1	0.1	0.1	0.1	0.1	0.1	0.1	0.1	0.1	0.1	0.1	0.1
Utilization per 1,000 user months	114.5	102.5	116.1	99.2	116.2	108.6	117.0	103.4	98.9	93.6	101.5	92.8
Utilization per 1,000 eligible months	1.2	1.1	1.4	1.0	1.5	1.5	1.4	1.3	1.3	1.2	1.6	1.5
Observation stays												
% with use	0.5	0.5	0.5	0.7	0.6	0.6	0.7	0.8	0.6	0.6	0.8	0.9
Utilization per 1,000 user months	111.2	120.4	111.8	115.4	119.6	125.6	115.9	117.5	93.8	96.4	98.0	101.7
Utilization per 1,000 eligible months	4.9	5.7	5.6	7.5	6.8	7.1	7.3	8.6	6.7	6.7	8.4	10.1
Skilled nursing facility												
% with use	1.6	2.3	1.5	1.8	1.8	2.6	1.6	1.9	1.3	2.1	1.5	1.8
Utilization per 1,000 user months	167.0	172.2	156.6	157.3	171.3	187.5	160.0	160.4	141.5	158.4	136.1	136.4
Utilization per 1,000 eligible months	17.6	25.2	16.3	20.0	19.7	28.9	17.3	20.9	14.2	23.0	16.2	20.0
Hospice												
% with use	2.7	2.0	3.4	2.0	2.8	2.0	3.2	2.1	2.6	2.3	3.1	2.2
Utilization per 1,000 user months	435.2	385.3	507.7	453.4	450.1	381.5	490.8	435.3	382.6	329.8	425.9	387.2
Utilization per 1,000 eligible months	28.0	21.4	35.5	20.2	29.2	20.9	33.7	21.3	26.0	23.5	31.5	21.9
Non-institutional setting												
Primary care E&M visits												
% with use	38.1	35.7	47.9	48.8	49.8	47.3	53.0	50.3	49.1	45.1	52.7	51.7
Utilization per 1,000 user months	688.2	623.0	918.2	864.8	980.6	828.8	1,028.6	891.5	1,079.3	828.5	1,052.7	909.9
Utilization per 1,000 eligible months	628.8	557.0	835.3	768.3	924.6	768.1	952.3	802.5	1,026.9	769.1	972.1	842.3

(continued)

Table A.1-4 (continued)
Proportion and utilization of institutional and non-institutional services for the Minnesota demonstration-eligible and comparison groups, by urban/rural status

Measures by setting	Baseline period 1 10/1/2011–9/30/2012				Baseline period 2 10/1/2012–9/30/2013				Demonstration period 10/1/2013–12/31/2014			
	Demonstration		Comparison		Demonstration		Comparison		Demonstration		Comparison	
	Urban	Rural	Urban	Rural	Urban	Rural	Urban	Rural	Urban	Rural	Urban	Rural
Behavioral health visits												
% with use	2.9	2.4	3.1	2.6	3.7	2.3	3.1	1.6	3.5	2.3	3.1	1.5
Utilization per 1,000 user months	471.0	360.9	398.5	374.3	629.2	394.2	471.5	327.8	688.0	617.2	630.0	468.3
Utilization per 1,000 eligible months	53.5	34.2	47.5	35.2	78.6	37.3	57.6	24.0	76.1	45.1	62.9	25.7
Outpatient therapy (PT, OT, ST)												
% with use	3.4	3.2	6.7	8.4	3.8	3.9	6.9	8.4	2.4	2.7	7.0	9.0
Utilization per 1,000 user months	2,914.5	1,885.9	4,989.3	5,436.9	2,415.8	1,675.2	4,799.3	5,057.9	2,326.8	2,140.4	5,135.7	5,507.1
Utilization per 1,000 eligible months	487.3	330.7	1,276.3	1,681.0	455.2	354.9	1,266.2	1,612.3	340.0	353.8	1,494.7	2,018.8
Independent therapy (PT, OT, ST)												
% with use	0.9	0.3	0.8	0.5	1.2	0.4	0.9	0.6	1.4	0.4	0.9	0.6
Utilization per 1,000 user months	1,267.8	1,454.9	2,085.1	2,221.6	1,428.7	1,658.8	2,079.7	2,399.8	1,354.7	1,992.3	2,117.4	2,298.1
Utilization per 1,000 eligible months	59.1	22.6	71.9	60.3	83.6	35.0	82.3	71.7	103.9	46.6	98.8	82.5
Home health episodes												
% with use	2.5	1.5	1.5	1.2	3.7	2.3	1.6	1.2	1.9	1.2	1.6	1.2
Utilization per 1,000 user months	501.4	427.3	203.4	169.3	726.6	689.9	223.2	166.0	411.2	316.4	221.0	146.9
Utilization per 1,000 eligible months	45.2	21.2	17.0	12.0	71.9	36.9	19.1	12.3	35.5	16.6	22.4	12.5
Durable medical equipment												
% with use	14.9	14.4	13.4	17.1	24.5	21.3	13.8	17.1	23.7	20.3	12.8	16.9
Utilization per 1,000 user months	—	—	—	—	—	—	—	—	—	—	—	—
Utilization per 1,000 eligible months	—	—	—	—	—	—	—	—	—	—	—	—

(continued)

Table A.1-4 (continued)
Proportion and utilization of institutional and non-institutional services for the Minnesota demonstration-eligible and comparison groups, by urban/rural status

Measures by setting	Baseline period 1 10/1/2011–9/30/2012				Baseline period 2 10/1/2012–9/30/2013				Demonstration period 10/1/2013–12/31/2014			
	Demonstration		Comparison		Demonstration		Comparison		Demonstration		Comparison	
	Urban	Rural	Urban	Rural	Urban	Rural	Urban	Rural	Urban	Rural	Urban	Rural
Other hospital outpatient services												
% with use	21.3	32.7	26.6	39.1	27.5	45.1	29.2	41.1	23.1	36.0	29.7	43.5
Utilization per 1,000 user months	—	—	—	—	—	—	—	—	—	—	—	—
Utilization per 1,000 eligible months	—	—	—	—	—	—	—	—	—	—	—	—

— Counts of service use could not be developed for this type of service.

E&M = evaluation and management; OT = occupational therapy; PT = physical therapy; ST = speech therapy.

¹ Includes acute admissions, inpatient rehabilitation, and long-term care hospital admissions.

NOTES: Utilization for inpatient admissions, inpatient psychiatric admissions, inpatient substance abuse, skilled nursing facility, and hospice are defined as number of admissions during the eligible/user month. Utilization for emergency department (non-admit), emergency department (psychiatric), observation stays, specialist E&M visits, primary care E&M visits, behavioral health visits, home health, and outpatient and independent therapy are defined as the number of visits during the eligible/user month. Durable medical equipment and other outpatient services are defined as having any of those services during the eligible month.

Medicare Advantage encounter data was not fully reported by some plans until January 2012, therefore, utilization for the period September to December 2011, the first 4 months of Baseline Year 1, is underreported; thus Baseline Year 1 results are slightly lower than anticipated.

Given that the demonstration started in mid-September 2013, September 2013 was excluded from the baseline and demonstration periods because evaluation measures could not be created simultaneously in the same month using both fee-for-service and encounter data.

Table A.1-5
Proportion and utilization of institutional and non-institutional services for the Minnesota demonstration-eligible and comparison groups, beneficiaries with disability

Measures by setting	Baseline period 1 10/1/2011–9/30/2012		Baseline period 2 10/1/2012–9/30/2013		Demonstration period 10/1/2013–12/31/2014	
	Demonstration	Comparison	Demonstration	Comparison	Demonstration	Comparison
Number of beneficiaries	6,110	22,019	5,565	19,681	4,748	17,859
Institutional setting						
Inpatient admissions ¹						
% with use	3.1	3.8	4.0	4.2	3.7	4.2
Utilization per 1,000 user months	161.2	167.5	164.4	166.0	151.5	146.1
Utilization per 1,000 eligible months	34.0	42.9	44.0	47.6	42.9	46.8
Inpatient psychiatric						
% with use	0.1	0.1	0.2	0.1	0.1	0.1
Utilization per 1,000 user months	120.8	126.7	120.0	111.5	105.3	106.2
Utilization per 1,000 eligible months	1.2	1.0	1.7	0.8	1.3	0.9
Inpatient non-psychiatric						
% with use	3.0	3.7	3.9	4.2	3.6	4.1
Utilization per 1,000 user months	159.9	165.4	162.2	165.4	150.3	144.9
Utilization per 1,000 eligible months	32.8	41.9	42.3	46.7	41.5	45.8
Inpatient dementia						
% with use	0.0	0.0	0.0	0.0	0.0	0.0
Utilization per 1,000 user months	83.3	85.3	83.3	92.1	200.0	76.0
Utilization per 1,000 eligible months	0.0	0.0	0.0	0.1	0.1	0.0
Emergency department use (non-admit)						
% with use	3.7	5.1	4.8	5.2	3.8	5.6
Utilization per 1,000 user months	156.3	180.7	176.0	170.1	141.5	155.9
Utilization per 1,000 eligible months	43.1	61.4	57.0	61.4	44.0	65.9

(continued)

Table A.1-5 (continued)
Proportion and utilization of institutional and non-institutional services for the Minnesota demonstration-eligible and comparison groups, beneficiaries with disability

Measures by setting	Baseline period 1 10/1/2011–9/30/2012		Baseline period 2 10/1/2012–9/30/2013		Demonstration period 10/1/2013–12/31/2014	
	Demonstration	Comparison	Demonstration	Comparison	Demonstration	Comparison
Emergency department use (psychiatric)						
% with use	0.1	0.1	0.2	0.1	0.1	0.2
Utilization per 1,000 user months	103.5	102.4	107.5	104.7	87.9	86.7
Utilization per 1,000 eligible months	1.2	1.5	1.7	1.5	1.6	1.7
Observation stays						
% with use	0.6	0.7	0.8	0.8	0.8	1.0
Utilization per 1,000 user months	114.6	109.6	123.8	116.3	96.7	95.0
Utilization per 1,000 eligible months	5.9	7.7	8.6	9.0	8.1	10.6
Skilled nursing facility						
% with use	2.1	1.9	2.6	2.1	2.0	2.1
Utilization per 1,000 user months	164.0	157.2	178.4	155.3	148.6	138.3
Utilization per 1,000 eligible months	23.4	21.0	28.9	22.6	22.3	22.8
Hospice						
% with use	2.2	2.6	2.5	2.8	2.7	3.0
Utilization per 1,000 user months	389.0	500.6	436.1	477.0	363.0	405.0
Utilization per 1,000 eligible months	22.7	27.1	26.0	29.0	26.9	30.3
Non-institutional setting						
Primary care E&M visits						
% with use	39.5	50.4	53.7	56.3	53.9	57.3
Utilization per 1,000 user months	724.5	983.8	1,062.7	1,100.9	1,156.8	1,125.9
Utilization per 1,000 eligible months	671.1	904.0	1,013.1	1,041.3	1,115.4	1,076.3

(continued)

Table A.1-5 (continued)
Proportion and utilization of institutional and non-institutional services for the Minnesota demonstration-eligible and comparison groups, beneficiaries with disability

Measures by setting	Baseline period 1 10/1/2011–9/30/2012		Baseline period 2 10/1/2012–9/30/2013		Demonstration period 10/1/2013–12/31/2014	
	Demonstration	Comparison	Demonstration	Comparison	Demonstration	Comparison
Behavioral health visits						
% with use	4.3	4.4	4.5	3.8	4.2	3.7
Utilization per 1,000 user months	391.1	413.6	465.1	527.2	575.2	742.9
Utilization per 1,000 eligible months	69.6	66.1	78.0	81.4	76.9	84.7
Outpatient therapy (PT, OT, ST)						
% with use	3.8	7.3	4.8	7.9	2.9	8.6
Utilization per 1,000 user months	2,662.8	4,974.7	2,070.6	4,567.9	2,171.9	5,224.6
Utilization per 1,000 eligible months	526.6	1,414.6	505.0	1,434.2	404.9	1,867.7
Independent therapy (PT, OT, ST)						
% with use	0.6	0.7	0.8	0.8	1.0	0.8
Utilization per 1,000 user months	1,272.5	2,023.2	1,451.5	2,224.9	1,548.1	1,902.3
Utilization per 1,000 eligible months	39.5	65.6	58.6	87.3	80.1	90.8
Home health episodes						
% with use	2.9	2.0	4.2	2.0	2.2	2.2
Utilization per 1,000 user months	528.8	205.7	794.3	211.4	419.7	238.1
Utilization per 1,000 eligible months	51.7	22.9	79.5	23.7	39.3	31.5
Durable medical equipment						
% with use	18.5	19.3	30.6	19.3	29.3	18.3
Utilization per 1,000 user months	—	—	—	—	—	—
Utilization per 1,000 eligible months	—	—	—	—	—	—

(continued)

Table A.1-5 (continued)
Proportion and utilization of institutional and non-institutional services for the Minnesota demonstration-eligible and comparison groups, beneficiaries with disability

Measures by setting	Baseline period 1 10/1/2011–9/30/2012		Baseline period 2 10/1/2012–9/30/2013		Demonstration period 10/1/2013–12/31/2014	
	Demonstration	Comparison	Demonstration	Comparison	Demonstration	Comparison
Other hospital outpatient services						
% with use	27.4	32.4	37.6	34.7	31.0	36.7
Utilization per 1,000 user months	—	—	—	—	—	—
Utilization per 1,000 eligible months	—	—	—	—	—	—

— Counts of service use could not be developed for this type of service.

E&M = evaluation and management; OT = occupational therapy; PT = physical therapy; ST = speech therapy.

¹ Includes acute admissions, inpatient rehabilitation, and long-term care hospital admissions.

NOTES: Utilization for inpatient admissions, inpatient psychiatric admissions, inpatient substance abuse, skilled nursing facility, and hospice are defined as number of admissions during the eligible/user month. Utilization for emergency department (non-admit), emergency department (psychiatric), observation stays, specialist E&M visits, primary care E&M visits, behavioral health visits, home health, and outpatient and independent therapy are defined as the number of visits during the eligible/user month. Durable medical equipment and other outpatient services are defined as having any of those services during the eligible month.

Medicare Advantage encounter data was not fully reported by some plans until January 2012, therefore, utilization for the period September to December 2011, the first 4 months of Baseline Year 1, is underreported; thus Baseline Year 1 results are slightly lower than anticipated.

Given that the demonstration started in mid-September 2013, September 2013 was excluded from the baseline and demonstration periods because evaluation measures could not be created simultaneously in the same month using both fee-for-service and encounter data.

Table A.1-6
Proportion and utilization of institutional and non-institutional services for the Minnesota demonstration-eligible and comparison groups, beneficiaries with Alzheimer's disease or other dementia

Measures by setting	Baseline period 1 10/1/2011–9/30/2012				Baseline period 2 10/1/2012–9/30/2013				Demonstration period 10/1/2013–12/31/2014			
	Demonstration		Comparison		Demonstration		Comparison		Demonstration		Comparison	
	Other dementia	Alzheimer	Other dementia	Alzheimer	Other dementia	Alzheimer	Other dementia	Alzheimer	Other dementia	Alzheimer	Other dementia	Alzheimer
Number of beneficiaries	8,214	5,162	34,240	29,817	8,562	5,267	33,295	28,800	7,503	4,362	30,439	25,658
Institutional setting												
Inpatient admissions ¹												
% with use	3.8	3.2	4.2	4.0	4.6	3.5	4.6	4.0	4.0	3.0	4.6	3.7
Utilization per 1,000 user months	167.6	157.2	165.5	158.7	171.6	154.0	170.7	162.9	152.6	138.3	148.7	141.8
Utilization per 1,000 eligible months	43.1	34.7	46.5	43.4	50.9	37.8	50.9	43.8	44.7	32.9	51.4	41.6
Inpatient psychiatric												
% with use	0.1	0.1	0.1	0.1	0.2	0.1	0.1	0.1	0.2	0.1	0.1	0.1
Utilization per 1,000 user months	117.2	108.3	127.0	124.8	135.6	120.7	120.6	130.7	127.4	97.4	110.1	108.1
Utilization per 1,000 eligible months	1.2	1.0	1.1	1.1	2.0	1.0	1.0	1.0	1.8	1.1	1.1	1.1
Inpatient non-psychiatric												
% with use	3.7	3.1	4.1	3.9	4.4	3.4	4.5	3.9	3.8	2.9	4.5	3.6
Utilization per 1,000 user months	166.9	155.8	163.4	156.8	168.9	152.7	169.9	161.0	148.8	137.0	147.0	139.4
Utilization per 1,000 eligible months	41.7	33.5	45.3	42.3	48.7	36.7	49.9	42.6	42.7	31.7	50.2	40.2
Inpatient dementia												
% with use	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Utilization per 1,000 user months	114.8	98.6	118.8	102.9	105.7	105.3	89.5	110.3	133.3	87.0	88.9	99.2
Utilization per 1,000 eligible months	0.1	0.1	0.0	0.1	0.2	0.1	0.1	0.2	0.1	0.1	0.1	0.2
Emergency department use (non-admit)												
% with use	4.0	3.6	4.5	4.0	4.6	3.8	4.9	4.2	3.9	3.3	5.0	4.1
Utilization per 1,000 user months	161.9	158.2	171.8	158.3	175.2	166.6	178.3	164.0	156.7	143.9	160.6	144.3
Utilization per 1,000 eligible months	46.3	41.0	53.7	46.2	54.4	43.7	57.9	48.1	45.8	37.3	60.1	47.1

(continued)

Table A.1-6 (continued)
Proportion and utilization of institutional and non-institutional services for the Minnesota demonstration-eligible and comparison groups, beneficiaries with Alzheimer's disease or other dementia

Measures by setting	Baseline period 1 10/1/2011–9/30/2012				Baseline period 2 10/1/2012–9/30/2013				Demonstration period 10/1/2013–12/31/2014			
	Demonstration		Comparison		Demonstration		Comparison		Demonstration		Comparison	
	Other dementia	Alzheimer	Other dementia	Alzheimer	Other dementia	Alzheimer	Other dementia	Alzheimer	Other dementia	Alzheimer	Other dementia	Alzheimer
Emergency department use (psychiatric)												
% with use	0.2	0.2	0.2	0.2	0.3	0.2	0.2	0.2	0.2	0.2	0.2	0.2
Utilization per 1,000 user months	120.6	111.9	109.7	106.8	114.2	118.5	109.4	112.9	101.3	100.5	97.7	94.7
Utilization per 1,000 eligible months	2.3	2.3	1.7	2.1	2.6	2.6	1.8	2.0	2.4	2.2	2.1	2.2
Observation stays												
% with use	0.7	0.6	0.7	0.6	0.8	0.6	0.8	0.6	0.8	0.6	0.9	0.7
Utilization per 1,000 user months	119.4	113.0	114.1	111.2	129.3	121.7	121.3	114.8	101.8	101.3	97.6	97.5
Utilization per 1,000 eligible months	7.2	5.9	7.1	6.0	8.7	6.6	8.5	6.7	8.1	6.2	9.4	7.3
Skilled nursing facility												
% with use	2.9	2.2	2.4	2.4	3.1	2.3	2.6	2.5	2.6	1.7	2.6	2.3
Utilization per 1,000 user months	167.8	161.1	152.9	148.4	171.7	169.2	155.8	154.4	153.7	134.3	133.7	131.1
Utilization per 1,000 eligible months	31.9	24.1	26.0	26.5	34.0	25.4	27.7	27.1	28.2	17.9	28.2	24.5
Hospice												
% with use	4.6	7.0	4.6	6.1	5.7	8.9	5.2	7.0	6.2	9.6	5.8	7.2
Utilization per 1,000 user months	443.8	484.0	500.7	508.7	460.7	516.2	490.4	525.8	390.1	443.9	438.7	450.0
Utilization per 1,000 eligible months	47.5	72.8	48.7	63.5	57.7	92.0	53.8	73.3	62.3	96.0	58.9	73.3

(continued)

Table A.1-6 (continued)
Proportion and utilization of institutional and non-institutional services for the Minnesota demonstration-eligible and comparison groups, beneficiaries with Alzheimer's disease or other dementia

	Baseline period 1 10/1/2011–9/30/2012				Baseline period 2 10/1/2012–9/30/2013				Demonstration period 10/1/2013–12/31/2014			
	Demonstration		Comparison		Demonstration		Comparison		Demonstration		Comparison	
	Other dementia	Alzheimer	Other dementia	Alzheimer	Other dementia	Alzheimer	Other dementia	Alzheimer	Other dementia	Alzheimer	Other dementia	Alzheimer
Measures by setting												
Non-institutional setting												
Primary care E&M visits												
% with use	46.9	50.6	59.5	64.1	57.2	59.3	63.2	67.6	56.9	58.6	64.6	68.6
Utilization per 1,000 user months	800.4	820.0	1,068.6	1,146.2	1,021.5	1,021.6	1,169.8	1,253.3	1,096.5	1,042.2	1,205.7	1,265.8
Utilization per 1,000 eligible months	761.6	787.3	1,016.7	1,105.8	985.6	985.6	1,124.5	1,216.0	1,063.6	1,010.2	1,169.5	1,237.6
Behavioral health visits												
% with use	3.4	3.1	4.1	4.7	3.8	2.3	4.0	4.3	4.0	2.4	4.3	4.1
Utilization per 1,000 user months	361.7	316.0	360.9	346.3	422.9	359.5	456.7	402.5	555.2	418.8	634.0	525.0
Utilization per 1,000 eligible months	52.3	43.6	59.7	63.8	65.4	39.9	75.3	73.6	76.7	41.6	90.4	76.6
Outpatient therapy (PT, OT, ST)												
% with use	6.5	7.4	11.8	14.2	7.2	7.2	12.4	14.5	5.4	5.1	13.2	15.7
Utilization per 1,000 user months	3,325.5	3,994.8	5,839.2	5,734.7	3,094.3	2,976.7	5,638.6	5,559.9	3,294.4	3,208.7	6,390.7	6,446.4
Utilization per 1,000 eligible months	1,010.0	1,245.3	2,474.0	2,862.1	999.7	959.9	2,494.5	2,864.4	902.0	830.0	3,175.0	3,634.5
Independent therapy (PT, OT, ST)												
% with use	0.5	0.3	0.6	0.3	0.5	0.4	0.7	0.3	0.5	0.3	0.6	0.3
Utilization per 1,000 user months	1,527.4	1,836.2	2,093.2	2,315.1	1,733.2	2,843.5	2,310.6	2,563.9	2,231.2	2,669.3	2,325.6	2,606.6
Utilization per 1,000 eligible months	34.0	29.8	56.9	33.7	42.0	43.4	67.5	41.2	55.9	43.8	71.6	41.2
Home health episodes												
% with use	1.6	1.3	1.8	1.3	2.2	1.6	1.9	1.2	1.2	0.9	1.8	1.1
Utilization per 1,000 user months	278.0	232.1	192.7	182.5	408.2	300.3	191.8	182.4	235.6	185.9	162.5	168.1
Utilization per 1,000 eligible months	22.6	17.4	18.5	13.9	36.1	24.3	19.8	12.2	17.6	11.6	19.0	13.3

(continued)

Table A.1-6 (continued)
Proportion and utilization of institutional and non-institutional services for the Minnesota demonstration-eligible and comparison groups, beneficiaries with Alzheimer's disease or other dementia

Measures by setting	Baseline period 1 10/1/2011–9/30/2012				Baseline period 2 10/1/2012–9/30/2013				Demonstration period 10/1/2013–12/31/2014			
	Demonstration		Comparison		Demonstration		Comparison		Demonstration		Comparison	
	Other dementia	Alzheimer	Other dementia	Alzheimer	Other dementia	Alzheimer	Other dementia	Alzheimer	Other dementia	Alzheimer	Other dementia	Alzheimer
Durable medical equipment												
% with use	16.4	14.1	14.9	11.2	22.6	18.6	14.7	10.2	21.2	17.4	13.5	9.6
Utilization per 1,000 user months	—	—	—	—	—	—	—	—	—	—	—	—
Utilization per 1,000 eligible months	—	—	—	—	—	—	—	—	—	—	—	—
Other hospital outpatient services												
% with use	32.3	29.6	35.7	31.8	38.2	32.8	37.8	32.5	32.3	28.1	38.6	32.7
Utilization per 1,000 user months	—	—	—	—	—	—	—	—	—	—	—	—
Utilization per 1,000 eligible months	—	—	—	—	—	—	—	—	—	—	—	—

— Counts of service use could not be developed for this type of service.

E&M = evaluation and management; OT = occupational therapy; PT = physical therapy; ST = speech therapy.

¹ Includes acute admissions, inpatient rehabilitation, and long-term care hospital admissions.

NOTES: Utilization for inpatient admissions, inpatient psychiatric admissions, inpatient substance abuse, skilled nursing facility, and hospice are defined as number of admissions during the eligible/user month. Utilization for emergency department (non-admit), emergency department (psychiatric), observation stays, specialist E&M visits, primary care E&M visits, behavioral health visits, home health, and outpatient and independent therapy are defined as the number of visits during the eligible/user month. Durable medical equipment and other outpatient services are defined as having any of those services during the eligible month.

Medicare Advantage encounter data was not fully reported by some plans until January 2012, therefore, utilization for the period September to December 2011, the first 4 months of Baseline Year 1, is underreported; thus Baseline Year 1 results are slightly lower than anticipated.

Given that the demonstration started in mid-September 2013, September 2013 was excluded from the baseline and demonstration periods because evaluation measures could not be created simultaneously in the same month using both fee-for-service and encounter data.

Table A.1-7
Proportion and utilization of institutional and non-institutional services for the Minnesota demonstration-eligible and comparison groups, by HCC score

Measures by setting	Baseline period 1 10/1/2011–9/30/2012								Baseline period 2 10/1/2012–9/30/2013								Demonstration period 10/1/2013–12/31/2014							
	Demonstration				Comparison				Demonstration				Comparison				Demonstration				Comparison			
	<1	1–2	2–4	4+	<1	1–2	2–4	4+	<1	1–2	2–4	4+	<1	1–2	2–4	4+	<1	1–2	2–4	4+	<1	1–2	2–4	4+
Number of beneficiaries	25,432	23,865	10,659	1,472	74,612	71,774	35,842	6,414	24,623	23,978	10,475	1,545	71,037	71,725	35,134	6,497	20,506	24,308	10,324	1,741	63,334	81,571	37,385	7,975
Institutional setting																								
Inpatient admissions ¹																								
% with use	1.7	2.4	3.9	6.6	2.0	3.3	5.3	8.6	2.1	3.2	5.3	9.0	2.0	3.4	5.7	9.3	1.8	2.7	4.5	8.0	2.0	3.1	5.3	8.9
Utilization per 1,000 user months	154.4	150.3	164.8	194.8	152.0	157.5	178.5	225.8	150.5	152.7	173.6	219.7	148.4	157.8	180.3	217.8	129.6	138.3	150.9	195.7	130.7	135.1	152.9	196.9
Utilization per 1,000 eligible months	18.8	26.9	43.4	74.4	22.3	36.3	59.7	100.4	23.4	34.6	58.5	102.6	22.3	37.9	64.3	106.7	20.0	30.9	50.7	94.8	21.9	33.8	60.0	101.2
Inpatient psychiatric																								
% with use	0.0	0.1	0.1	0.1	0.0	0.1	0.1	0.1	0.0	0.1	0.1	0.2	0.0	0.1	0.1	0.1	0.0	0.1	0.1	0.1	0.0	0.1	0.1	0.2
Utilization per 1,000 user months	130.4	115.6	112.5	108.3	126.4	131.4	118.3	125.7	116.7	127.3	121.3	132.0	133.0	124.1	127.6	130.0	108.3	118.1	130.1	110.7	104.7	112.6	107.6	110.9
Utilization per 1,000 eligible months	0.3	0.7	0.8	0.9	0.4	0.6	0.9	1.6	0.5	1.0	1.3	2.2	0.5	0.6	0.9	1.0	0.4	1.0	1.3	1.4	0.4	0.8	1.1	1.5
Inpatient non-psychiatric																								
% with use	1.7	2.4	3.8	6.5	2.0	3.2	5.3	8.5	2.1	3.1	5.2	8.8	2.0	3.4	5.6	9.2	1.7	2.6	4.4	7.9	1.9	3.0	5.3	8.7
Utilization per 1,000 user months	153.8	149.6	164.3	193.9	151.1	156.3	177.1	223.0	149.9	151.6	172.0	218.0	147.0	157.0	179.2	216.3	128.4	136.5	148.5	193.5	130.1	133.6	151.3	195.7
Utilization per 1,000 eligible months	18.5	26.1	42.5	73.4	21.8	35.6	58.7	98.7	22.8	33.6	57.2	100.4	21.8	37.2	63.3	105.5	19.5	29.9	49.3	93.3	21.5	33.0	58.7	99.6

(continued)

Table A.1-7 (continued)

Proportion and utilization of institutional and non-institutional services for the Minnesota demonstration-eligible and comparison groups, by HCC score

Measures by setting	Baseline period 1 10/1/2011–9/30/2012								Baseline period 2 10/1/2012–9/30/2013								Demonstration period 10/1/2013–12/31/2014							
	Demonstration				Comparison				Demonstration				Comparison				Demonstration				Comparison			
	<1	1–2	2–4	4+	<1	1–2	2–4	4+	<1	1–2	2–4	4+	<1	1–2	2–4	4+	<1	1–2	2–4	4+	<1	1–2	2–4	4+
Inpatient dementia																								
% with use	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Utilization per 1,000 user months	102.6	127.7	86.2	83.3	113.7	107.3	109.8	103.7	102.0	108.1	111.1	0.0	118.8	94.8	106.1	132.5	74.6	107.7	139.5	90.9	90.6	97.7	98.0	77.5
Utilization per 1,000 eligible months	0.0	0.0	0.0	0.1	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.1	0.1	0.1	0.0	0.0	0.0	0.1	0.0	0.0	0.1	0.0
Emergency department use (non-admit)																								
% with use	2.6	3.1	4.3	6.3	3.1	3.9	5.3	7.4	3.1	4.0	5.8	7.9	3.4	4.4	6.1	8.1	2.6	3.5	4.4	6.2	3.4	4.6	6.2	8.4
Utilization per 1,000 user months	149.0	148.3	164.5	175.5	158.9	158.7	185.7	221.8	152.0	161.4	184.7	213.1	155.6	168.1	191.7	217.2	126.1	140.2	154.8	174.6	138.0	149.8	173.2	201.8
Utilization per 1,000 eligible months	30.1	35.8	50.9	73.3	36.4	45.0	65.1	92.9	35.8	46.6	69.1	96.1	38.9	50.9	73.6	100.4	29.2	40.3	52.5	73.5	38.9	53.7	75.1	102.7
Emergency department use (psychiatric)																								
% with use	0.1	0.1	0.1	0.1	0.1	0.1	0.2	0.2	0.1	0.1	0.2	0.2	0.1	0.1	0.2	0.3	0.1	0.1	0.1	0.2	0.1	0.1	0.2	0.2
Utilization per 1,000 user months	120.7	111.5	96.6	115.6	128.4	104.7	106.7	100.9	111.9	115.6	116.0	105.6	116.5	113.5	112.6	111.6	92.2	101.8	92.8	104.7	93.4	110.9	89.1	87.8
Utilization per 1,000 eligible months	1.0	1.2	1.3	1.2	1.2	1.2	1.8	1.9	1.1	1.6	2.2	2.3	1.2	1.4	1.7	2.7	0.8	1.5	1.5	2.1	1.1	1.7	1.9	2.0

(continued)

Table A.1-7 (continued)
Proportion and utilization of institutional and non-institutional services for the Minnesota demonstration-eligible and comparison groups, by HCC score

Measures by setting	Baseline period 1 10/1/2011–9/30/2012								Baseline period 2 10/1/2012–9/30/2013								Demonstration period 10/1/2013–12/31/2014							
	Demonstration				Comparison				Demonstration				Comparison				Demonstration				Comparison			
	<1	1–2	2–4	4+	<1	1–2	2–4	4+	<1	1–2	2–4	4+	<1	1–2	2–4	4+	<1	1–2	2–4	4+	<1	1–2	2–4	4+
Observation stays																								
% with use	0.4	0.5	0.7	0.8	0.4	0.6	0.9	1.2	0.5	0.6	0.9	1.3	0.5	0.7	1.1	1.6	0.4	0.6	0.9	1.4	0.5	0.8	1.2	1.9
Utilization per 1,000 user months	117.5	109.2	116.8	108.8	109.8	110.6	117.0	124.9	119.2	118.2	126.6	129.9	111.9	114.4	122.8	121.8	92.2	91.6	98.2	109.5	96.2	95.3	102.1	122.4
Utilization per 1,000 eligible months	4.2	4.9	7.3	8.3	4.2	5.8	9.8	13.2	4.9	6.9	10.3	14.8	5.1	7.6	12.2	17.3	4.6	6.6	9.8	15.2	5.8	8.5	13.2	20.9
Skilled nursing facility																								
% with use	1.1	1.9	2.9	3.9	0.8	1.7	2.7	3.9	1.2	2.1	3.4	4.7	0.9	1.8	2.8	4.4	1.0	1.4	2.4	3.5	0.9	1.5	2.7	4.0
Utilization per 1,000 user months	165.8	164.3	174.4	190.9	158.3	149.0	162.5	186.3	167.6	173.4	183.9	203.8	155.4	155.8	166.1	181.4	152.3	142.0	147.7	160.7	137.0	130.2	139.9	154.7
Utilization per 1,000 eligible months	11.9	20.6	31.7	45.2	9.1	18.1	30.2	43.3	13.1	22.8	37.6	53.4	9.7	19.3	31.1	49.7	10.5	15.6	27.0	39.2	9.8	15.8	29.2	43.9
Hospice																								
% with use	1.5	2.9	4.0	4.6	1.9	3.6	4.5	4.9	1.5	2.9	4.5	4.7	1.8	3.6	4.2	5.1	1.4	2.6	4.2	5.0	1.8	3.0	4.4	5.5
Utilization per 1,000 user months	423.7	421.2	427.1	427.0	508.0	503.3	487.6	496.6	421.0	432.7	452.8	414.7	482.0	490.7	470.4	461.7	370.7	365.1	376.0	350.2	429.3	417.5	414.6	421.6
Utilization per 1,000 eligible months	15.2	29.7	42.0	47.1	20.1	37.4	47.5	52.9	15.1	29.8	46.6	48.7	19.0	37.1	44.1	53.1	14.2	25.8	42.4	51.4	18.7	30.2	44.5	57.1

(continued)

Table A.1-7 (continued)
Proportion and utilization of institutional and non-institutional services for the Minnesota demonstration-eligible and comparison groups, by HCC score

Measures by setting	Baseline period 1 10/1/2011–9/30/2012								Baseline period 2 10/1/2012–9/30/2013								Demonstration period 10/1/2013–12/31/2014							
	Demonstration				Comparison				Demonstration				Comparison				Demonstration				Comparison			
	<1	1–2	2–4	4+	<1	1–2	2–4	4+	<1	1–2	2–4	4+	<1	1–2	2–4	4+	<1	1–2	2–4	4+	<1	1–2	2–4	4+
Non-institutional setting																								
Primary care E&M visits																								
% with use	31.2	39.9	45.4	48.5	38.3	53.5	57.5	58.1	39.6	52.8	61.5	67.2	41.8	57.7	64.4	66.7	38.1	50.1	60.6	65.3	40.6	55.4	65.5	69.9
Utilization per 1,000 user months	555.1	682.7	849.5	1,040.3	697.6	958.0	1,191.1	1,374.3	723.2	970.0	1,273.2	1,610.5	757.2	1,062.3	1,324.1	1,589.0	739.3	1,018.7	1,408.9	1,758.5	751.8	1,035.0	1,357.8	1,658.4
Utilization per 1,000 eligible months	480.1	637.4	807.2	980.4	598.8	902.1	1,109.0	1,272.2	651.8	930.4	1,243.0	1,581.4	664.9	1,005.3	1,271.5	1,513.2	673.8	975.6	1,379.3	1,726.9	652.1	978.6	1,318.9	1,618.1
Behavioral health visits																								
% with use	2.1	3.2	3.3	3.6	2.1	3.6	3.8	4.4	2.4	3.7	4.2	5.9	1.7	3.3	4.0	4.3	1.9	3.6	4.4	5.7	1.3	3.1	4.3	5.6
Utilization per 1,000 user months	484.2	452.6	380.6	448.2	389.4	388.8	407.0	435.3	632.0	588.7	509.3	503.9	422.8	448.0	490.8	482.1	669.1	720.9	609.8	576.9	491.9	616.3	672.5	653.1
Utilization per 1,000 eligible months	39.1	55.9	52.5	62.8	29.7	53.2	58.7	74.5	54.4	76.6	77.7	95.2	30.2	59.9	76.0	77.6	45.4	79.5	81.6	99.5	24.2	61.4	90.9	111.4
Outpatient therapy (PT, OT, ST)																								
% with use	2.3	3.7	4.8	5.1	4.3	8.8	9.3	8.6	2.6	4.3	5.6	6.5	4.6	8.6	9.7	9.7	1.8	2.6	3.5	4.2	4.7	8.1	10.2	10.9
Utilization per 1,000 user months	2,568	2,600	2,747	2,967	4,356	5,320	5,433	5,647	2,081	2,225	2,298	2,430	4,340	4,943	5,233	5,617	2,374	2,225	2,255	2,313	4,749	5,209	5,640	5,768
Utilization per 1,000 eligible months	298.0	491.4	658.2	751.1	764.1	1,727.7	1,862.6	1,790.7	276.3	477.4	643.9	754.6	807.3	1,611.5	1,895.5	1,960.1	252.5	355.1	465.6	554.5	985.7	1,745.4	2,302.1	2,474.1

(continued)

Table A.1-7 (continued)
Proportion and utilization of institutional and non-institutional services for the Minnesota demonstration-eligible and comparison groups, by HCC score

Measures by setting	Baseline period 1 10/1/2011–9/30/2012								Baseline period 2 10/1/2012–9/30/2013								Demonstration period 10/1/2013–12/31/2014							
	Demonstration				Comparison				Demonstration				Comparison				Demonstration				Comparison			
	<1	1–2	2–4	4+	<1	1–2	2–4	4+	<1	1–2	2–4	4+	<1	1–2	2–4	4+	<1	1–2	2–4	4+	<1	1–2	2–4	4+
Independent therapy (PT, OT, ST)																								
% with use	0.8	0.7	0.6	0.7	0.6	0.7	0.9	1.1	1.1	1.0	0.8	1.0	0.7	0.9	1.0	0.9	1.3	1.1	0.9	0.8	0.7	0.9	0.9	0.7
Utilization per 1,000 user months	1,322	1,260	1,248	1,264	2,131	1,911	2,361	2,798	1,481	1,496	1,307	1,114	2,036	2,241	2,109	1,786	1,414	1,450	1,308	1,464	2,164	2,181	2,076	1,905
Utilization per 1,000 eligible months	57.5	46.2	39.6	47.0	63.7	63.7	91.0	118.2	79.9	71.4	52.9	48.7	65.2	91.4	91.7	72.6	100.5	91.0	65.1	67.7	86.2	102.1	99.8	77.3
Home health episodes																								
% with use	1.8	2.3	2.9	3.6	0.9	1.4	2.5	4.4	2.5	3.6	4.3	6.7	0.9	1.5	2.6	4.5	1.1	1.8	2.4	3.1	0.9	1.4	2.4	4.3
Utilization per 1,000 user months	494.0	501.2	473.8	427.2	170.9	189.6	222.7	265.5	682.3	772.3	691.3	670.7	183.8	210.5	231.9	277.7	362.2	400.2	419.2	398.7	164.5	203.7	232.6	289.0
Utilization per 1,000 eligible months	30.4	41.5	51.4	59.0	9.4	15.4	28.2	51.2	44.9	70.5	82.3	112.7	10.1	17.7	30.9	55.6	20.4	32.0	44.1	55.4	10.9	19.3	34.3	60.9
Durable medical equipment																								
% with use	9.9	15.1	23.0	34.2	9.0	14.5	22.8	34.2	15.7	24.3	37.7	52.9	8.9	14.7	24.4	37.8	14.8	22.5	35.4	48.5	8.0	13.3	22.2	34.3
Utilization per 1,000 user months	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Utilization per 1,000 eligible months	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—

(continued)

Table A.1-7 (continued)
Proportion and utilization of institutional and non-institutional services for the Minnesota demonstration-eligible and comparison groups, by HCC score

Measures by setting	Baseline period 1 10/1/2011–9/30/2012								Baseline period 2 10/1/2012–9/30/2013								Demonstration period 10/1/2013–12/31/2014							
	Demonstration				Comparison				Demonstration				Comparison				Demonstration				Comparison			
	<1	1–2	2–4	4+	<1	1–2	2–4	4+	<1	1–2	2–4	4+	<1	1–2	2–4	4+	<1	1–2	2–4	4+	<1	1–2	2–4	4+
Other hospital outpatient services																								
% with use	18.8	25.8	32.0	36.4	22.9	31.9	36.3	40.1	24.3	34.1	43.0	50.0	24.6	34.1	40.9	44.3	20.0	27.3	34.8	41.0	24.6	34.0	41.8	47.9
Utilization per 1,000 user months	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Utilization per 1,000 eligible months	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—

— Counts of service use could not be developed for this type of service.

E&M = evaluation and management; HCC = hierarchical condition category; OT = occupational therapy; PT = physical therapy; ST = speech therapy.

¹ Includes acute admissions, inpatient rehabilitation, and long-term care hospital admissions.

NOTES: Utilization for inpatient admissions, inpatient psychiatric admissions, inpatient substance abuse, skilled nursing facility, and hospice are defined as number of admissions during the eligible/user month. Utilization for emergency department (non-admit), emergency department (psychiatric), observation stays, specialist E&M visits, primary care E&M visits, behavioral health visits, home health, and outpatient and independent therapy are defined as the number of visits during the eligible/user month. Durable medical equipment and other outpatient services are defined as having any of those services during the eligible month.

Medicare Advantage encounter data was not fully reported by some plans until January 2012, therefore, utilization for the period September to December 2011, the first 4 months of Baseline Year 1, is underreported; thus Baseline Year 1 results are slightly lower than anticipated.

Given that the demonstration started in mid-September 2013, September 2013 was excluded from the baseline and demonstration periods because evaluation measures could not be created simultaneously in the same month using both fee-for-service and encounter data.

Table A.1-8
Proportion and utilization of institutional and non-institutional services for the Minnesota demonstration-eligible and comparison groups, by death

Measures by setting	Baseline period 1 10/1/2011–9/30/2012				Baseline period 2 10/1/2012–9/30/2013				Demonstration period 10/1/2013–12/31/2014			
	Demonstration		Comparison		Demonstration		Comparison		Demonstration		Comparison	
	Alive	Died	Alive	Died	Alive	Died	Alive	Died	Alive	Died	Alive	Died
Number of beneficiaries	53,284	8,144	163,356	25,286	52,368	8,253	159,390	25,003	47,995	8,884	160,759	29,506
Institutional setting												
Inpatient admissions ¹												
% with use	2.1	6.9	2.7	9.9	2.7	9.3	2.8	10.4	2.4	7.5	2.6	9.2
Utilization per 1,000 user months	144.7	232.1	147.4	255.8	145.0	257.8	146.1	261.1	128.3	222.2	125.6	225.8
Utilization per 1,000 eligible months	23.3	78.0	29.4	112.5	29.9	104.6	30.6	118.9	26.9	86.6	29.3	104.5
Inpatient psychiatric												
% with use	0.1	0.0	0.1	0.0	0.1	0.1	0.1	0.0	0.1	0.1	0.1	0.1
Utilization per 1,000 user months	115.5	160.8	124.6	155.2	122.3	139.7	126.4	158.5	117.9	128.2	107.8	128.9
Utilization per 1,000 eligible months	0.6	0.5	0.6	0.5	0.8	0.8	0.7	0.5	0.9	0.9	0.7	0.7
Inpatient non-psychiatric												
% with use	2.1	6.9	2.6	9.9	2.7	9.2	2.7	10.4	2.3	7.5	2.6	9.1
Utilization per 1,000 user months	143.9	230.9	145.9	255.1	143.6	257.0	144.8	260.2	126.2	220.8	124.1	224.7
Utilization per 1,000 eligible months	22.7	77.5	28.8	112.0	29.1	103.7	29.9	118.2	26.0	85.6	28.5	103.6
Inpatient dementia												
% with use	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Utilization per 1,000 user months	104.2	83.3	104.1	129.3	95.0	200.0	97.4	125.4	82.2	145.2	83.8	152.3
Utilization per 1,000 eligible months	0.0	0.0	0.0	0.1	0.0	0.1	0.0	0.2	0.0	0.1	0.0	0.1
Emergency department use (non-admit)												
% with use	3.1	4.1	3.8	5.3	3.8	6.2	4.2	6.1	3.3	4.7	4.4	6.2
Utilization per 1,000 user months	148.8	208.9	162.3	217.2	158.3	242.6	164.9	236.8	135.0	196.4	148.3	207.0
Utilization per 1,000 eligible months	35.9	49.1	44.6	62.5	44.9	74.8	49.2	72.1	37.9	55.2	51.8	74.5

(continued)

Table A.1-8 (continued)
Proportion and utilization of institutional and non-institutional services for the Minnesota demonstration-eligible and comparison groups, by death

Measures by setting	Baseline period 1 10/1/2011–9/30/2012				Baseline period 2 10/1/2012–9/30/2013				Demonstration period 10/1/2013–12/31/2014			
	Demonstration		Comparison		Demonstration		Comparison		Demonstration		Comparison	
	Alive	Died	Alive	Died	Alive	Died	Alive	Died	Alive	Died	Alive	Died
Emergency department use (psychiatric)												
% with use	0.1	0.1	0.1	0.1	0.1	0.2	0.1	0.2	0.1	0.2	0.1	0.2
Utilization per 1,000 user months	108.5	145.7	109.6	163.6	108.8	169.3	110.9	152.3	93.6	139.9	97.5	119.4
Utilization per 1,000 eligible months	1.1	1.5	1.3	1.6	1.4	2.5	1.3	1.9	1.2	1.7	1.5	2.0
Observation stays												
% with use	0.5	0.6	0.6	0.7	0.6	1.0	0.7	1.0	0.6	1.0	0.8	1.2
Utilization per 1,000 user months	110.1	161.0	109.3	154.9	115.8	183.7	112.1	163.2	89.6	140.7	94.5	139.8
Utilization per 1,000 eligible months	5.0	6.7	5.8	7.9	6.5	10.7	7.3	10.9	6.3	10.3	8.4	12.7
Skilled nursing facility												
% with use	1.5	4.7	1.3	4.7	1.7	5.1	1.4	4.9	1.3	3.8	1.3	4.4
Utilization per 1,000 user months	158.2	227.4	143.5	221.6	163.6	255.6	146.7	226.6	135.5	203.1	122.5	194.7
Utilization per 1,000 eligible months	16.8	52.3	14.1	51.8	19.1	57.5	14.9	53.9	13.8	42.6	13.7	48.4
Hospice												
% with use	1.3	18.0	1.8	17.7	1.2	19.4	1.7	18.5	1.1	16.9	1.5	16.1
Utilization per 1,000 user months	463.7	394.8	566.1	438.3	466.2	413.5	534.4	437.3	409.4	347.0	473.8	380.2
Utilization per 1,000 eligible months	13.0	186.2	19.3	185.4	12.7	199.2	17.4	190.9	10.7	170.6	15.5	164.2
Non-institutional setting												
Primary care E&M visits												
% with use	37.6	36.2	47.3	56.6	48.6	56.5	51.5	64.0	47.1	58.0	51.2	65.1
Utilization per 1,000 user months	661.0	818.7	877.9	1,259.4	928.2	1,113.7	965.7	1,418.3	987.5	1,297.2	979.8	1,429.0
Utilization per 1,000 eligible months	606.1	661.0	795.8	1,124.9	872.1	1,034.3	889.3	1,302.7	933.4	1,229.9	903.1	1,349.3

(continued)

Table A.1-8 (continued)
Proportion and utilization of institutional and non-institutional services for the Minnesota demonstration-eligible and comparison groups, by death

Measures by setting	Baseline period 1 10/1/2011–9/30/2012				Baseline period 2 10/1/2012–9/30/2013				Demonstration period 10/1/2013–12/31/2014			
	Demonstration		Comparison		Demonstration		Comparison		Demonstration		Comparison	
	Alive	Died	Alive	Died	Alive	Died	Alive	Died	Alive	Died	Alive	Died
Behavioral health visits												
% with use	2.9	1.4	3.0	3.0	3.4	2.1	2.8	3.0	3.3	2.3	2.7	3.1
Utilization per 1,000 user months	452.3	319.9	400.8	324.6	592.9	382.8	457.6	395.6	686.9	521.9	615.0	566.9
Utilization per 1,000 eligible months	50.9	20.6	45.6	38.5	71.0	33.2	51.3	45.6	70.8	42.1	55.0	57.5
Outpatient therapy (PT, OT, ST)												
% with use	3.2	4.8	6.5	12.9	3.7	6.3	6.6	13.4	2.3	4.4	6.8	13.6
Utilization per 1,000 user months	2,574.3	3,308.7	4,952.9	6,186.5	2,133.3	2,906.6	4,751.3	5,689.6	2,142.4	3,226.5	5,029.0	6,468.5
Utilization per 1,000 eligible months	429.7	655.3	1,269.6	2,387.8	404.8	726.1	1,255.0	2,272.8	312.9	647.2	1,468.6	2,886.2
Independent therapy (PT, OT, ST)												
% with use	0.8	0.2	0.8	0.2	1.0	0.2	0.9	0.3	1.2	0.3	0.9	0.3
Utilization per 1,000 user months	1,275.3	1,977.8	2,101.3	2,343.7	1,443.1	2,188.9	2,109.7	2,981.1	1,390.7	2,590.3	2,140.7	2,368.9
Utilization per 1,000 eligible months	52.4	16.9	73.3	26.2	75.5	20.2	84.1	34.3	94.4	36.9	101.9	33.0
Home health episodes												
% with use	2.3	1.3	1.4	1.7	3.4	2.6	1.5	2.0	1.7	1.6	1.5	1.9
Utilization per 1,000 user months	499.9	318.2	195.3	220.2	731.6	573.8	208.4	263.9	391.2	436.9	203.2	252.1
Utilization per 1,000 eligible months	40.7	19.0	15.7	18.8	64.6	44.1	17.3	22.8	30.9	28.5	19.9	24.4
Durable medical equipment												
% with use	14.7	15.1	14.1	14.3	23.4	27.2	14.4	15.8	22.3	27.9	13.6	14.6
Utilization per 1,000 user months	—	—	—	—	—	—	—	—	—	—	—	—
Utilization per 1,000 eligible months	—	—	—	—	—	—	—	—	—	—	—	—

(continued)

Table A.1-8 (continued)
Proportion and utilization of institutional and non-institutional services for the Minnesota demonstration-eligible and comparison groups, by death

Measures by setting	Baseline period 1 10/1/2011–9/30/2012				Baseline period 2 10/1/2012–9/30/2013				Demonstration period 10/1/2013–12/31/2014			
	Demonstration		Comparison		Demonstration		Comparison		Demonstration		Comparison	
	Alive	Died	Alive	Died	Alive	Died	Alive	Died	Alive	Died	Alive	Died
Other hospital outpatient services												
% with use	24.2	24.9	28.8	33.4	31.3	40.1	31.1	37.6	25.7	32.9	32.0	37.7
Utilization per 1,000 user months	—	—	—	—	—	—	—	—	—	—	—	—
Utilization per 1,000 eligible months	—	—	—	—	—	—	—	—	—	—	—	—

— Counts of service use could not be developed for this type of service.

E&M = evaluation and management; OT = occupational therapy; PT = physical therapy; ST = speech therapy.

¹ Includes acute admissions, inpatient rehabilitation, and long-term care hospital admissions.

NOTES: Utilization for inpatient admissions, inpatient psychiatric admissions, inpatient substance abuse, skilled nursing facility, and hospice are defined as number of admissions during the eligible/user month. Utilization for emergency department (non-admit), emergency department (psychiatric), observation stays, specialist E&M visits, primary care E&M visits, behavioral health visits, home health, and outpatient and independent therapy are defined as the number of visits during the eligible/user month. Durable medical equipment and other outpatient services are defined as having any of those services during the eligible month.

Medicare Advantage encounter data was not fully reported by some plans until January 2012, therefore, utilization for the period September to December 2011, the first 4 months of Baseline Year 1, is underreported; thus Baseline Year 1 results are slightly lower than anticipated.

Given that the demonstration started in mid-September 2013, September 2013 was excluded from the baseline and demonstration periods because evaluation measures could not be created simultaneously in the same month using both fee-for-service and encounter data.

Appendix 2
Minimum Data Set Tables by Age, Gender, Race, and Urbanicity

Table A.2-1
Annual nursing facility utilization and characteristics at admission for the Minnesota demonstration-eligible and comparison groups, by age

	Baseline period 1 10/1/2011–9/30/2012						Baseline period 2 10/1/2012–9/30/2013						Demonstration period 10/1/2013–12/31/2014					
	Demonstration			Comparison			Demonstration			Comparison			Demonstration			Comparison		
Measures of long-stay residents at admission	65–74	75–84	85+	65–74	75–84	85+	65–74	75–84	85+	65–74	75–84	85+	65–74	75–84	85+	65–74	75–84	85+
Annual nursing facility utilization																		
Weighted number of beneficiaries	16,522	12,483	9,426	50,159	35,607	24,387	16,912	12,494	9,114	51,165	33,815	23,509	15,689	11,979	8,521	52,347	33,847	24,607
New long-stay nursing facility admissions per 1,000 eligibles ¹	14.0	35.1	74.0	15.1	41.5	82.6	15.0	32.6	74.3	15.7	41.3	81.1	18.5	36.3	79.3	18.7	46.4	91.1
Characteristics of new long-stay nursing facility residents at admission																		
Weighted number of admitted beneficiaries	232	438	698	759	1,476	2,014	253	407	677	801	1,396	1,906	290	434	675	980	1,571	2,241
Functional status (RUG-IV ADL scale)	7.7	8.2	8.6	8.5	8.1	8.9	8.1	8.3	8.4	8.2	8.8	8.9	8.2	8.2	8.7	8.4	8.8	8.5
Percent with severe cognitive impairment ²	24.1	34.4	42.6	25.6	42.7	45.9	27.8	37.9	40.2	30.0	39.9	48.6	24.6	34.6	37.8	26.1	40.3	48.3
Percent with serious and persistent mental illness ³	15.8	5.2	1.5	14.4	5.5	1.5	14.1	4.7	1.7	13.7	4.8	2.2	13.1	7.2	1.4	16.9	5.5	1.2
Percent with low level of care need ⁴	4.0	3.6	2.5	3.7	2.2	1.8	2.7	2.7	2.1	3.2	2.2	3.1	2.7	2.8	2.9	2.5	1.8	2.2

ADL = activity of daily living; RUG = Resource Utilization Group.

¹ Eligibles refers to beneficiaries who were demonstration-eligible for the corresponding time period. The denominator for the admission rate measure also excludes those who were already residing in a nursing facility at the start of the time period.

² Severe cognitive impairment was defined by a low score on the Brief Interview for Mental Status, poor short-term memory, or severely impaired decision-making skills.

³ Serious and persistent mental illness was defined as having an active diagnosis of schizophrenia or bipolar disorder, determined by the Minimum Data Set (MDS) 3.0.

⁴ Low level of care need was defined as users in the reduced physical function RUG who required no assistance with late-loss ADLs (bed mobility, transfer, toilet use, eating).

NOTE: Given that the demonstration started in mid-September 2013, September 2013 was excluded from the baseline and demonstration periods because evaluation measures could not be created simultaneously in the same month using both fee-for-service and encounter data. MDS analyses align with this timeline.

Table A.2-2
Annual nursing facility utilization and characteristics at admission for the Minnesota demonstration-eligible and enrolled groups, by age

Measures of long-stay residents at admission	Demonstration period 10/1/2013–12/31/2014					
	Eligible			Enrolled		
	65–74	75–84	85+	65–74	75–84	85+
Annual nursing facility utilization						
Weighted number of beneficiaries eligible for admission	15,689	11,979	8,521	10,460	9,603	6,669
New long-stay nursing facility admissions per 1,000 eligibles ¹	18.5	36.3	79.3	13.7	27.8	63.5
Characteristics of long-stay nursing facility residents						
Weighted number of long-stay beneficiaries	290	434	675	144	267	424
Functional status (RUG-IV ADL scale)	8.2	8.2	8.7	8.7	8.5	8.8
Percent with severe cognitive impairment ²	24.6	34.6	37.8	24.2	33.8	37.1
Percent with SPMI ³	13.1	7.2	1.4	15.6	8.7	1.4
Percent with low level of care need ⁴	2.7	2.8	2.9	2.1	2.5	2.5

ADL = activity of daily living; RUG = Resource Utilization Group; SPMI = severe and persistent mental illness.

¹ Eligibles refers to beneficiaries who were demonstration-eligible for the corresponding time period. The denominator for the admission rate measure also excludes those who were already residing in a nursing facility at the start of the time period.

² Severe cognitive impairment was defined by a low score on the Brief Interview for Mental Status, poor short-term memory, or severely impaired decision-making skills.

³ SPMI was defined as having an active diagnosis of schizophrenia or bipolar disorder, determined by the Minimum Data Set (MDS) 3.0.

⁴ Low level of care need was defined as users in the reduced physical function RUG who required no assistance with late-loss ADLs (bed mobility, transfer, toilet use, eating).

NOTE: Given that the demonstration started in mid-September 2013, September 2013 was excluded from the baseline and demonstration periods because evaluation measures could not be created simultaneously in the same month using both fee-for-service and encounter data. MDS analyses align with this timeline.

Table A.2-3
Annual nursing facility utilization, characteristics, and quality measures of all long-stay nursing facility residents for the Minnesota demonstration-eligible and comparison groups, by age

	Baseline period 1 10/1/2011–9/30/2012						Baseline period 2 10/1/2012–9/30/2013						Demonstration period 10/1/2013–12/31/2014					
	Demonstration			Comparison			Demonstration			Comparison			Demonstration			Comparison		
	65–74	75–84	85+	65–74	75–84	85+	65–74	75–84	85+	65–74	75–84	85+	65–74	75–84	85+	65–74	75–84	85+
Measures of all long-stay residents																		
Annual nursing facility utilization																		
Weighted number of beneficiaries eligible for long-stay	18,184	15,930	17,320	55,603	48,285	54,113	18,502	15,695	16,323	56,547	45,727	51,256	17,057	14,569	14,491	57,461	44,745	50,566
Long-stay nursing facility users as % of eligibles ¹	10.9	24.5	49.3	11.4	29.6	58.4	10.2	23.2	47.9	11.1	29.5	57.5	10.0	21.0	45.8	10.8	28.5	55.7
Characteristics of long-stay nursing facility residents																		
Weighted number of long-stay beneficiaries	1,974	3,902	8,534	6,311	14,305	31,615	1,886	3,639	7,813	6,268	13,482	29,453	1,700	3,053	6,637	6,224	12,765	28,141
Functional status (RUG-IV ADL scale)	7.3	8.4	8.7	8.2	8.9	9.1	7.2	8.3	8.6	8.3	8.9	9.2	7.3	8.2	8.7	8.3	8.9	9.3
Percent with severe cognitive impairment ²	29.5	44.7	57.6	37.2	51.6	63.2	27.8	43.5	55.9	38.0	51.7	62.0	26.7	42.2	54.8	36.1	49.5	61.4
Percent with SPMI ³	23.8	11.0	3.4	17.8	8.9	2.7	23.9	11.7	3.5	18.7	9.0	2.8	23.4	11.4	3.5	20.7	8.8	3.1
Percent with low level of care need ⁴	9.6	7.8	7.0	7.0	6.0	4.9	10.0	8.3	7.6	7.5	5.6	5.0	11.3	8.2	7.4	7.2	5.4	4.9
Quality measures for long-stay nursing facility residents																		
Weighted quality measure denominator	1,973	3,902	8,534	6,308	14,302	31,612	1,885	3,639	7,813	6,268	13,480	29,452	1,699	3,052	6,637	6,224	12,765	28,140
Percentage of long-stay residents who were physically restrained	1.5	1.8	1.5	1.8	2.1	1.9	0.8	1.2	1.0	1.1	1.6	1.5	1.0	1.0	0.9	1.5	1.5	1.3
Weighted quality measure denominator	1,634	3,615	8,382	5,578	13,574	31,174	1,549	3,357	7,672	5,495	12,793	29,035	1,419	2,807	6,510	5,378	12,153	27,740
Percentage of long-stay residents who got an antipsychotic medication	28.7	26.7	19.3	32.8	28.6	22.9	27.6	24.5	17.6	29.7	27.3	20.4	25.5	22.7	16.1	27.9	26.0	18.9
Weighted quality measure denominator	1,387	3,023	7,034	4,633	11,239	26,179	1,331	2,835	6,384	4,658	10,890	24,549	1,220	2,414	5,570	4,710	10,303	23,957
Percentage of long-stay high-risk residents with pressure ulcers	10.2	9.1	7.9	12.2	11.4	9.1	10.3	9.3	6.6	11.2	10.0	8.5	10.5	9.9	7.5	10.7	10.0	9.1
Percentage of long-stay residents who self-report moderate to severe pain	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Percentage of long-stay residents experiencing one or more falls with major injury	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—

— Not included in this year's annual report, but planned for future analyses.

ADL = activity of daily living; RUG = Resource Utilization Group; SPMI = severe and persistent mental illness.

¹ Eligibles refers to beneficiaries who were demonstration-eligible for the corresponding time period. The denominator for the admission rate measure also excludes those who were already residing in a nursing facility at the start of the time period.

² Severe cognitive impairment was defined by a low score on the Brief Interview for Mental Status, poor short-term memory, or severely impaired decision-making skills.

³ SPMI was defined as having an active diagnosis of schizophrenia or bipolar disorder, determined by the Minimum Data Set (MDS) 3.0.

⁴ Low level of care need was defined as users in the reduced physical function RUG who required no assistance with late-loss ADLs (bed mobility, transfer, toilet use, eating).

NOTE: Given that the demonstration started in mid-September 2013, September 2013 was excluded from the baseline and demonstration periods because evaluation measures could not be created simultaneously in the same month using both fee-for-service and encounter data. MDS analyses align with this timeline.

Table A.2-4
Annual nursing facility utilization, characteristics, and quality measures of all long-stay nursing facility residents for the Minnesota demonstration-eligible and enrolled groups, by age

	Demonstration period 10/1/2013–12/31/2014					
	Eligible			Enrolled		
	65–74	75–84	85+	65–74	75–84	85+
Measures of all long-stay residents						
Annual nursing facility utilization						
Weighted number of beneficiaries eligible for long-stay	17,057	14,569	14,491	11,429	11,675	11,571
Long-stay nursing facility users as % of eligibles ¹	10.0	21.0	45.8	9.5	19.4	44.5
Characteristics of long-stay nursing facility residents						
Weighted number of long-stay beneficiaries	1,700	3,053	6,637	1,089	2,263	5,148
Functional status (RUG-IV ADL scale)	7.3	8.2	8.7	7.5	8.4	8.9
Percent with severe cognitive impairment ²	26.7	42.2	54.8	28.7	42.4	55.7
Percent with SPMI ³	23.4	11.4	3.5	26.1	12.3	3.7
Percent with low level of care need ⁴	11.3	8.2	7.4	11.5	8.1	7.4
Quality measures for long-stay nursing facility residents						
Weighted quality measure denominator	1,699	3,052	6,637	1,089	2,263	5,148
Percentage of long-stay residents who were physically restrained	1.0	1.0	0.9	1.1	0.9	1.0
Weighted quality measure denominator	1,419	2,807	6,510	886	2,064	5,037
Percentage of long-stay residents who got an antipsychotic medication	25.5	22.7	16.1	27.8	22.5	16.2
Weighted quality measure denominator	1,220	2,414	5,570	793	1,814	4,345
Percentage of long-stay high-risk residents with pressure ulcers	10.5	9.9	7.5	10.9	10.0	6.9
Percentage of long-stay residents who self-report moderate to severe pain	—	—	—	—	—	—
Percentage of long-stay residents experiencing one or more falls with major injury	—	—	—	—	—	—

— Not included in this year's annual report, but planned for future analyses.

ADL = activity of daily living; RUG = Resource Utilization Group; SPMI = severe and persistent mental illness.

¹ Eligibles refers to beneficiaries who were demonstration-eligible for the corresponding time period. The denominator for the admission rate measure also excludes those who were already residing in a nursing facility at the start of the time period.

² Severe cognitive impairment was defined by a low score on the Brief Interview for Mental Status, poor short-term memory, or severely impaired decision-making skills.

³ SPMI was defined as having an active diagnosis of schizophrenia or bipolar disorder, determined by the Minimum Data Set (MDS) 3.0.

⁴ Low level of care need was defined as users in the reduced physical function RUG who required no assistance with late-loss ADLs (bed mobility, transfer, toilet use, eating).

NOTE: Given that the demonstration started in mid-September 2013, September 2013 was excluded from the baseline and demonstration periods because evaluation measures could not be created simultaneously in the same month using both fee-for-service and encounter data. MDS analyses align with this timeline.

Table A.2-5
Annual nursing facility utilization and characteristics at admission for the Minnesota demonstration-eligible and comparison groups, by gender

	Baseline period 1 10/1/2011–9/30/2012				Baseline period 2 10/1/2012–9/30/2013				Demonstration period 10/1/2013–12/31/2014			
	Demonstration		Comparison		Demonstration		Comparison		Demonstration		Comparison	
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
Measures of long-stay residents at admission												
Annual nursing facility utilization												
Weighted number of beneficiaries eligible for admission	11,919	26,513	35,922	74,231	12,072	26,449	35,849	72,640	11,414	24,775	36,285	74,516
New long-stay nursing facility admissions per 1,000 eligibles ¹	32.9	36.8	33.9	40.9	30.8	36.5	37.4	38.0	35.8	40.0	39.8	44.9
Characteristics of long-stay nursing facility residents												
Weighted number of long-stay beneficiaries	392	975	1,216	3,034	372	966	1,340	2,763	409	991	1,445	3,347
Functional status (RUG-IV ADL scale)	7.7	8.6	8.5	8.5	7.9	8.5	8.6	8.8	8.0	8.7	8.7	8.5
Percent with severe cognitive impairment ²	34.4	37.8	39.8	41.7	37.6	36.9	39.8	43.1	33.0	34.5	39.7	41.7
Percent with SPMI ³	4.7	5.2	9.0	3.7	5.3	4.8	5.0	5.5	6.1	5.4	6.9	5.4
Percent with low level of care need ⁴	4.2	2.6	2.1	2.3	3.1	2.1	2.7	2.9	3.9	2.4	2.8	1.8

ADL = activity of daily living; RUG = Resource Utilization Group; SPMI = severe and persistent mental illness.

¹ Eligibles refers to beneficiaries who were demonstration-eligible for the corresponding time period. The denominator for the admission rate measure also excludes those who were already residing in a nursing facility at the start of the time period.

² Severe cognitive impairment was defined by a low score on the Brief Interview for Mental Status, poor short-term memory, or severely impaired decision-making skills.

³ SPMI was defined as having an active diagnosis of schizophrenia or bipolar disorder, determined by the Minimum Data Set (MDS) 3.0.

⁴ Low level of care need was defined as users in the reduced physical function RUG who required no assistance with late-loss ADLs (bed mobility, transfer, toilet use, eating).

NOTE: Given that the demonstration started in mid-September 2013, September 2013 was excluded from the baseline and demonstration periods because evaluation measures could not be created simultaneously in the same month using both fee-for-service and encounter data. MDS analyses align with this timeline.

Table A.2-6
Annual nursing facility utilization and characteristics at admission for the Minnesota demonstration-eligible and enrolled groups, by gender

Measures of long-stay residents at admission	Demonstration period 10/1/2013–12/31/2014			
	Eligible		Enrolled	
	Male	Female	Male	Female
Annual nursing facility utilization				
Weighted number of beneficiaries eligible for admission	11,414	24,775	7,923	18,808
New long-stay nursing facility admissions per 1,000 eligibles ¹	35.8	40.0	25.9	33.5
Characteristics of long-stay nursing facility residents				
Weighted number of long-stay beneficiaries	409	991	205	629
Functional status (RUG-IV ADL scale)	8.0	8.7	8.2	8.9
Percent with severe cognitive impairment ²	33.0	34.5	32.5	34.2
Percent with SPMI ³	6.1	5.4	6.5	6.1
Percent with low level of care need ⁴	3.9	2.4	3.5	2.1

ADL = activity of daily living; RUG = Resource Utilization Group; SPMI = severe and persistent mental illness.

¹ Eligibles refers to beneficiaries who were demonstration-eligible for the corresponding time period. The denominator for the admission rate measure also excludes those who were already residing in a nursing facility at the start of the time period.

² Severe cognitive impairment was defined by a low score on the Brief Interview for Mental Status, poor short-term memory, or severely impaired decision-making skills.

³ SPMI was defined as having an active diagnosis of schizophrenia or bipolar disorder, determined by the Minimum Data Set (MDS) 3.0.

⁴ Low level of care need was defined as users in the reduced physical function RUG who required no assistance with late-loss ADLs (bed mobility, transfer, toilet use, eating).

NOTE: Given that the demonstration started in mid-September 2013, September 2013 was excluded from the baseline and demonstration periods because evaluation measures could not be created simultaneously in the same month using both fee-for-service and encounter data. MDS analyses align with this timeline.

Table A.2-7
Annual nursing facility utilization, characteristics, and quality measures of all long-stay nursing facility residents for the Minnesota demonstration-eligible and comparison groups, by gender

	Baseline period 1 10/1/2011–9/30/2012				Baseline period 2 10/1/2012–9/30/2013				Demonstration period 10/1/2013–12/31/2014			
	Demonstration		Comparison		Demonstration		Comparison		Demonstration		Comparison	
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
Measures of long-stay residents												
Annual nursing facility utilization												
Weighted number of beneficiaries eligible for long-stay	15,298	36,136	47,990	110,010	15,174	35,347	47,099	106,432	13,989	32,128	46,943	105,829
Long-stay nursing facility users as % of eligibles ¹	24.9	29.3	28.0	35.3	23.0	27.8	26.8	34.4	21.7	26.0	26.2	32.9
Characteristics of long-stay nursing facility residents												
Weighted number of long-stay beneficiaries	3,812	10,598	13,414	38,817	3,495	9,842	12,640	36,563	3,030	8,360	12,298	34,831
Functional status (RUG-IV ADL scale)	8.1	8.5	8.8	9.0	8.0	8.4	8.7	9.1	8.1	8.5	8.7	9.2
Percent with severe cognitive impairment ²	46.7	51.5	53.8	57.9	45.5	49.6	52.3	57.4	44.0	48.4	51.6	56.0
Percent with SPMI ³	9.3	7.9	7.1	6.0	9.9	8.2	7.2	6.3	9.9	8.1	7.7	6.7
Percent with low level of care need ⁴	8.0	7.5	5.7	5.3	8.6	8.0	5.7	5.4	9.0	7.9	6.0	5.1
Quality measures for long-stay nursing facility residents												
Weighted quality measure denominator	3,811	10,598	13,411	38,812	3,495	9,841	12,637	36,562	3,030	8,358	12,298	34,831
Percentage of long-stay residents who were physically restrained	1.5	1.6	2.1	1.9	0.9	1.1	1.5	1.5	0.8	1.0	1.4	1.4
Weighted quality measure denominator	3,572	10,059	12,837	37,489	3,247	9,330	12,113	35,210	2,808	7,927	11,746	33,525
Percentage of long-stay residents who got an antipsychotic medication	24.3	21.7	27.2	25.0	21.6	20.4	25.2	22.7	20.3	18.6	24.2	21.1
Weighted quality measure denominator	2,886	8,559	10,477	31,573	2,651	7,898	9,964	30,133	2,337	6,867	9,757	29,212
Percentage of long-stay high-risk residents with pressure ulcers	10.5	7.8	11.9	9.5	10.3	6.9	10.6	8.8	10.4	7.9	11.8	8.8
Percentage of long-stay residents who self-report moderate to severe pain	—	—	—	—	—	—	—	—	—	—	—	—
Percentage of long-stay residents experiencing one or more falls with major injury	—	—	—	—	—	—	—	—	—	—	—	—

— Not included in this year's annual report, but planned for future analyses.

ADL = activity of daily living; RUG = Resource Utilization Group; SPMI = severe and persistent mental illness.

¹ Eligibles refers to beneficiaries who were demonstration-eligible for the corresponding time period. The denominator for the admission rate measure also excludes those who were already residing in a nursing facility at the start of the time period.

² Severe cognitive impairment was defined by a low score on the Brief Interview for Mental Status, poor short-term memory, or severely impaired decision-making skills.

³ SPMI was defined as having an active diagnosis of schizophrenia or bipolar disorder, determined by the Minimum Data Set (MDS) 3.0.

⁴ Low level of care need was defined as users in the reduced physical function Resource Utilization Group who required no assistance with late-loss ADLs (bed mobility, transfer, toilet use, eating).

NOTE: Given that the demonstration started in mid-September 2013, September 2013 was excluded from the baseline and demonstration periods because evaluation measures could not be created simultaneously in the same month using both fee-for-service and encounter data. MDS analyses align with this timeline.

Table A.2-8
Annual nursing facility utilization, characteristics, and quality measures of all long-stay nursing facility residents for the Minnesota demonstration-eligible and enrolled groups, by gender

	Demonstration period 10/1/2013–12/31/2014			
	Eligible		Enrolled	
	Male	Female	Male	Female
Measures of all long-stay residents				
Annual nursing facility utilization				
Weighted number of beneficiaries ¹	13,989	32,128	9,893	24,782
Long-stay nursing facility users as % of eligibles	21.7	26.0	21.0	25.9
Characteristics of long-stay nursing facility residents				
Weighted number of long-stay beneficiaries	3,030	8,360	2,082	6,419
Functional status (RUG-IV ADL scale)	8.1	8.5	8.3	8.7
Percent with severe cognitive impairment ²	44.0	48.4	45.3	49.8
Percent with serious and persistent mental illness ³	9.9	8.1	10.3	8.4
Percent with low level of care need ⁴	9.0	7.9	9.0	7.8
Quality measures for long-stay nursing facility residents				
Weighted quality measure denominator	3,030	8,358	2,082	6,419
Percentage of long-stay residents who were physically restrained	0.8	1.0	0.6	1.1
Weighted quality measure denominator	2,808	7,927	1,921	6,067
Percentage of long-stay residents who got an antipsychotic medication	20.3	18.6	20.6	18.6
Weighted quality measure denominator	2,337	6,867	1,631	5,320
Percentage of long-stay high-risk residents with pressure ulcers	10.4	7.9	10.3	7.6
Percentage of long-stay residents who self-report moderate to severe pain	—	—	—	—
Percentage of long-stay residents experiencing one or more falls with major injury	—	—	—	—

— Not included in this year's annual report, but planned for future analyses.

ADL = activity of daily living; RUG = Resource Utilization Group.

¹ Eligibles refers to beneficiaries who were demonstration-eligible for the corresponding time period.

² Severe cognitive impairment was defined by a low score on the Brief Interview for Mental Status, poor short-term memory, or severely impaired decision-making skills.

³ Serious and persistent mental illness was defined as having an active diagnosis of schizophrenia or bipolar disorder.

⁴ Low level of care need was defined as users in the reduced physical function RUG who required no assistance with late-loss ADLs (bed mobility, transfer, toilet use, eating).

NOTE: Given that the demonstration started in mid-September 2013, September 2013 was excluded from the baseline and demonstration periods because evaluation measures could not be created simultaneously in the same month using both fee-for-service and encounter data. Minimum Data Set analyses align with this timeline.

Table A.2-9

Annual nursing facility utilization and characteristics at admission for the Minnesota demonstration-eligible and comparison groups, by race

Measures of long-stay residents at admission	Baseline period 1 10/1/2011–9/30/2012								Baseline period 2 10/1/2012–9/30/2013								Demonstration period 10/1/2013–12/31/2014							
	Minnesota				Comparison				Minnesota				Comparison				Minnesota				Comparison			
	White	African American	Hispanic	Asian/PI	White	African American	Hispanic	Asian/PI	White	African American	Hispanic	Asian/PI	White	African American	Hispanic	Asian/PI	White	African American	Hispanic	Asian/PI	White	African American	Hispanic	Asian/PI
Annual nursing facility utilization																								
Weighted number of beneficiaries eligible for admission	28,279	3,153	541	4,228	81,881	13,441	3,425	7,564	27,992	3,316	577	4,258	79,300	14,006	3,617	7,447	25,784	3,386	579	4,212	79,885	14,658	3,891	7,844
New long-stay nursing facility admissions per 1,000 eligibles ¹	44.9	16.6	6.8	3.7	47.4	19.4	10.9	3.9	44.7	14.6	5.2	1.6	46.6	20.1	7.9	5.4	50.3	13.9	13.8	3.5	52.7	25.0	10.6	8.5
Characteristics of long-stay nursing facility residents																								
Weighted number of long-stay beneficiaries	1,271	52	4	16	3,880	261	37	30	1,250	48	3	7	3,695	282	29	40	1,297	47	8	15	4,212	367	41	67
Functional status (RUG-IV ADL scale)	8.3	8.6	*	*	8.5	8.6	*	*	8.3	8.4	*	*	8.7	8.4	*	*	8.46	7.81	*	*	8.6	9.3	*	*
Percent with severe cognitive impairment ²	36.3	43.2	*	*	40.3	52.0	*	*	36.2	61.8	*	*	40.9	51.9	*	*	33.9	37.0	*	*	40.2	49.4	*	*
Percent with SPMI ³	5.1	6.7	*	*	5.0	8.2	*	*	4.8	9.3	*	*	5.3	7.9	*	*	5.3	7.9	*	*	5.9	6.0	*	*
Percent with low level of care need ⁴	3.2	1.9	*	*	2.2	1.3	*	*	2.5	0.0	*	*	2.8	3.2	*	*	2.9	0.8	*	*	2.3	1.1	*	*

* Measures not reported due to sample size of <30.

ADL = activity of daily living; PI = Pacific Islander; RUG = Resource Utilization Group; SPMI = severe and persistent mental illness.

¹ Eligibles refers to beneficiaries who were demonstration-eligible for the corresponding time period.

² Severe cognitive impairment was defined by a low score on the Brief Interview for Mental Status, poor short-term memory, or severely impaired decision-making skills.

³ SPMI was defined as having an active diagnosis of schizophrenia or bipolar disorder.

⁴ Low level of care need was defined as users in the reduced physical function RUG who required no assistance with late-loss ADLs (bed mobility, transfer, toilet use, eating).

NOTE: Given that the demonstration started in mid-September 2013, September 2013 was excluded from the baseline and demonstration periods because evaluation measures could not be created simultaneously in the same month using both fee-for-service and encounter data. Minimum Data Set analyses align with this timeline.

Table A.2-10
Annual nursing facility utilization, characteristics, and quality measures of all long-stay nursing facility residents for the Minnesota demonstration-eligible and comparison groups, by race

Measures of all long-stay residents	Baseline period 1 10/1/2011–9/30/2012								Baseline period 2 10/1/2012–9/30/2013								Demonstration period 1 10/1/2013–12/31/2014							
	Demonstration				Comparison				Demonstration				Comparison				Demonstration				Comparison			
	White	African American	Hispanic	Asian/PI	White	African American	Hispanic	Asian/PI	White	African American	Hispanic	Asian/PI	White	African American	Hispanic	Asian/PI	White	African American	Hispanic	Asian/PI	White	African American	Hispanic	Asian/PI
Annual nursing facility utilization																								
Weighted number of beneficiaries eligible for long-stay	40,699	3,440	557	4,300	125,503	16,730	3,688	7,769	39,430	3,605	598	4,333	119,921	17,522	3,881	7,650	35,231	3,650	596	4,273	117,590	18,073	4,129	8,022
Long-stay nursing facility users as % of eligibles ¹	33.7	10.0	3.4	2.1	37.9	21.6	8.1	3.1	32.1	9.5	3.8	1.9	37.0	21.9	7.5	3.1	30.6	8.9	4.4	1.8	35.9	21.5	7.1	3.1
Characteristics of long-stay nursing facility residents																								
Weighted number of long-stay beneficiaries	13,711	345	19	91	47,552	3,622	298	243	12,674	344	23	84	44,331	3,839	290	236	10,788	325	26	78	42,158	3,878	293	252
Functional status (RUG-IV ADL scale)	8.4	8.1	*	8.7	9.0	9.1	*	8.3	8.4	7.7	*	8.6	9.0	9.3	*	8.2	8.4	8.0	*	8.5	9.0	9.3	*	8.8
Percent with severe cognitive impairment ²	50.1	54.4	*	53.6	56.3	63.1	*	62.7	48.4	52.5	*	54.4	55.6	60.7	*	71.5	47.0	54.8	*	53.9	54.3	60.1	*	62.3
Percent with SPMI ³	8.2	10.2	*	5.1	6.2	6.6	*	5.1	8.6	11.5	*	3.6	6.3	9.4	*	5.9	8.5	11.6	*	3.9	6.6	10.7	*	9.1
Percent with low level of care need ⁴	7.7	4.5	*	6.3	5.6	3.0	*	3.0	8.2	7.5	*	6.6	5.6	4.2	*	4.3	8.3	6.2	*	6.4	5.3	5.3	*	1.7
Quality measures for long-stay nursing facility residents																								
Weighted quality measure denominator	13,710	345	*	91	47,544	3,622	*	243	12,673	344	*	84	44,329	3,839	*	236	10,786	325	*	78	42,157	3,878	*	252
Percentage of long-stay residents who were physically restrained	1.5	1.4	*	3.4	1.9	1.9	*	1.8	1.0	0.8	*	3.6	1.5	1.1	*	1.8	0.9	0.8	*	0.5	1.4	1.7	*	1.3

(continued)

Table A.2-10 (continued)
Annual nursing facility utilization, characteristics, and quality measures of all long-stay nursing facility residents for the Minnesota demonstration-eligible and comparison groups, by race

Measures of all long-stay residents	Baseline period 1 10/1/2011–9/30/2012								Baseline period 2 10/1/2012–9/30/2013								Demonstration period 1 10/1/2013–12/31/2014							
	Demonstration				Comparison				Demonstration				Comparison				Demonstration				Comparison			
	White	African American	Hispanic	Asian/PI	White	African American	Hispanic	Asian/PI	White	African American	Hispanic	Asian/PI	White	African American	Hispanic	Asian/PI	White	African American	Hispanic	Asian/PI	White	African American	Hispanic	Asian/PI
Quality measures for long-stay nursing facility residents (continued)																								
Weighted quality measure denominator	12,977	318	*	88	45,868	3,440	*	238	11,964	312	*	81	42,740	3,584	*	232	10,181	295	*	76	40,643	3,581	*	241
Percentage of long-stay residents who got an antipsychotic medication	22.2	26.2	*	22.0	25.7	24.1	*	20.0	20.6	23.6	*	22.1	23.7	19.9	*	23.1	18.9	19.2	*	20.1	22.2	19.1	*	15.0
Weighted quality measure denominator	10,933	253	*	72	38,293	2,965	*	199	10,075	250	*	63	36,076	3,232	*	188	8,741	252	*	57	34,915	3,196	*	209
Percentage of long-stay high-risk residents with pressure ulcers	8.3	11.0	*	16.9	9.8	13.2	*	10.0	7.6	11.4	*	8.8	9.1	11.1	*	6.3	8.5	9.3	*	15.7	9.3	11.7	*	3.6
Percentage of long-stay residents who self-report moderate to severe pain	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Percentage of long-stay residents experiencing one or more falls with major injury	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—

— Not included in this year's annual report, but planned for future analyses. * Measures not reported due to sample size of <30.

ADL = activity of daily living; PI = Pacific Islander; RUG = Resource Utilization Group; SPMI = severe and persistent mental illness.

¹ Eligibles refers to beneficiaries who were demonstration-eligible for the corresponding time period.

² Severe cognitive impairment was defined by a low score on the Brief Interview for Mental Status, poor short-term memory, or severely impaired decision-making skills.

³ SPMI was defined as having an active diagnosis of schizophrenia or bipolar disorder.

⁴ Low level of care need was defined as users in the reduced physical function RUG who required no assistance with late-loss ADLs (bed mobility, transfer, toilet use, eating).

NOTE: Given that the demonstration started in mid-September 2013, September 2013 was excluded from the baseline and demonstration periods because evaluation measures could not be created simultaneously in the same month using both fee-for-service and encounter data. Minimum Data Set analyses align with this timeline.

Table A.2-11
Annual nursing facility utilization, characteristics, and quality measures of all long-stay nursing facility residents for the Minnesota demonstration-eligible and enrolled groups, by race

	Demonstration period 1 10/1/2013–12/31/2014							
	Eligible				Enrolled			
	White	African American	Hispanic	Asian/PI	White	African American	Hispanic	Asian/PI
Measures of long-stay residents								
Annual nursing facility utilization								
Weighted number of beneficiaries eligible for admission	25,784	3,386	579	4,212	18,868	2,398	399	3,543
New long-stay nursing facility admissions per 1,000 eligibles ¹	50.3	13.9	13.8	3.5	41.1	9.1	14.9	3.8
Weighted number of beneficiaries eligible for long-stay	35,231	3,650	596	4,273	26,460	2,587	414	3,593
Long-stay nursing facility users as % of eligibles ¹	30.6	8.9	4.4	1.8	30.6	8.1	5.2	1.8
Characteristics of long-stay nursing facility residents								
Weighted number of long-stay beneficiaries	10,788	325	26	78	8,093	210	22	65
Functional status (RUG-IV ADL scale)	8.4	8.0	*	8.5	8.6	8.3	*	8.3
Percent with severe cognitive impairment ²	47.0	54.8	*	53.9	48.4	57.9	*	54.7
Percent with SPMI ³	8.5	11.6	*	3.9	8.8	10.3	*	4.6
Percent with low level of care need ⁴	8.3	6.2	*	6.4	8.2	5.8	*	7.7
Quality measures for long-stay nursing facility residents								
Weighted quality measure denominator	10,786	325	*	78	8,092	210	*	65
Percentage of long-stay residents who were physically restrained	0.9	0.8	*	0.5	1.0	1.0	*	0.6
Weighted quality measure denominator	10,181	295	*	76	7,611	192	*	63
Percentage of long-stay residents who got an antipsychotic medication	18.9	19.2	*	20.1	18.9	20.4	*	21.3
Weighted quality measure denominator	8,741	252	*	57	6,636	168	*	46
Percentage of long-stay high-risk residents with pressure ulcers	8.5	9.3	*	15.7	8.1	8.7	*	17.2
Percentage of long-stay residents who self-report moderate to severe pain	—	—	—	—	—	—	—	—
Percentage of long-stay residents experiencing one or more falls with major injury	—	—	—	—	—	—	—	—

— Not included in this year's annual report, but planned for future analyses. * Measures not reported due to sample size of <30.

ADL = activity of daily living; PI = Pacific Islander; RUG = Resource Utilization Group; SPMI = severe and persistent mental illness.

¹ Eligibles refers to beneficiaries who were demonstration-eligible for the corresponding time period.

² Severe cognitive impairment was defined by a low score on the Brief Interview for Mental Status, poor short-term memory, or severely impaired decision-making skills.

³ SPMI was defined as having an active diagnosis of schizophrenia or bipolar disorder.

⁴ Low level of care need was defined as users in the reduced physical function RUG who required no assistance with late-loss ADLs (bed mobility, transfer, toilet use, eating).

NOTE: Given that the demonstration started in mid-September 2013, September 2013 was excluded from the baseline and demonstration periods because evaluation measures could not be created simultaneously in the same month using both fee-for-service and encounter data. Minimum Data Set analyses align with this timeline.

Table A.2-12
Annual nursing facility utilization and characteristics at admission for the Minnesota demonstration-eligible and comparison groups, by urban/rural status

Measures of long-stay residents at admission	Baseline period 1 10/1/2011–9/30/2012				Baseline period 2 10/1/2012–9/30/2013				Demonstration period 10/1/2013–12/31/2014			
	Demonstration		Comparison		Demonstration		Comparison		Demonstration		Comparison	
	Urban	Rural	Urban	Rural	Urban	Rural	Urban	Rural	Urban	Rural	Urban	Rural
Annual nursing facility utilization												
Weighted number of beneficiaries eligible for admission	36,470	1,962	107,772	2,381	36,608	1,913	106,266	2,223	34,476	1,713	108,412	2,389
New long-stay nursing facility admissions per 1,000 eligibles ¹	34.5	56.0	38.4	47.5	33.7	53.6	37.7	41.2	37.2	68.8	43.1	49.6
Characteristics of long-stay nursing facility residents												
Weighted number of long-stay beneficiaries	1,257	110	4,137	113	1,235	103	4,011	91	1,282	118	4,674	118
Functional status (RUG-IV ADL scale)	8.4	7.5	8.5	8.5	8.4	7.2	8.7	8.1	8.6	7.5	8.6	8.2
Percent with severe cognitive impairment ²	38.0	23.4	41.2	40.1	37.0	38.3	42.0	40.8	34.1	34.0	41.2	35.7
Percent with SPMI ³	5.5	0.9	5.2	4.6	5.1	3.2	5.3	4.3	5.7	4.2	5.9	1.9
Percent with low level of care need ⁴	2.9	5.5	2.2	2.3	2.2	4.8	2.9	0.6	2.5	5.8	2.1	2.1

ADL = activity of daily living; RUG = Resource Utilization Group; SPMI = severe and persistent mental illness.

¹ Eligibles refers to beneficiaries who were demonstration-eligible for the corresponding time period.

² Severe cognitive impairment was defined by a low score on the Brief Interview for Mental Status, poor short-term memory, or severely impaired decision-making skills.

³ SPMI was defined as having an active diagnosis of schizophrenia or bipolar disorder.

⁴ Low level of care need was defined as users in the reduced physical function RUG who required no assistance with late-loss ADLs (bed mobility, transfer, toilet use, eating).

NOTE: Given that the demonstration started in mid-September 2013, September 2013 was excluded from the baseline and demonstration periods because evaluation measures could not be created simultaneously in the same month using both fee-for-service and encounter data. Minimum Data Set analyses align with this timeline.

Table A.2-13
Annual nursing facility utilization and characteristics at admission for the Minnesota demonstration-eligible and enrolled groups, by urban/rural status

Measures of long-stay residents at admission	Demonstration period 10/1/2013–12/31/2014			
	Eligible		Enrolled	
	Urban	Rural	Urban	Rural
Annual nursing facility utilization				
Weighted number of beneficiaries eligible for admission	34,476	1,713	25,422	1,309
New long-stay nursing facility admissions per 1,000 eligibles ¹	37.2	68.8	29.8	58.1
Characteristics of long-stay nursing facility residents				
Weighted number of long-stay beneficiaries	1,282	118	758	76
Functional status (RUG-IV ADL scale)	8.6	7.5	8.8	7.5
Percent with severe cognitive impairment ²	34.1	34.0	33.6	35.7
Percent with SPMI ³	5.7	4.2	6.3	5.3
Percent with low level of care need ⁴	2.5	5.8	2.2	4.6

ADL = activity of daily living; RUG = Resource Utilization Group; SPMI = severe and persistent mental illness.

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Table A.2-14
Annual nursing facility utilization, characteristics, and quality measures of all long-stay nursing facility residents for the Minnesota demonstration-eligible and comparison groups, by urban/rural status

	Baseline period 1 10/1/2011–9/30/2012				Baseline period 2 10/1/2012–9/30/2013				Demonstration period 10/1/2013–12/31/2014			
	Demonstration		Comparison		Demonstration		Comparison		Demonstration		Comparison	
	Urban	Rural	Urban	Rural	Urban	Rural	Urban	Rural	Urban	Rural	Urban	Rural
Measures of long-stay residents												
Annual nursing facility utilization												
Weighted number of beneficiaries eligible for long-stay	48,583	2,851	154,464	3,537	47,797	2,724	150,302	3,229	43,674	2,443	149,441	3,331
Long-stay nursing facility users as % of eligibles ¹	27.6	34.8	33.0	36.0	26.0	33.3	32.0	33.4	24.2	34.1	30.8	32.1
Characteristics of long-stay nursing facility residents												
Weighted number of long-stay beneficiaries	13,420	991	50,957	1,274	12,430	907	48,122	1,080	10,556	834	999	999
Functional status (RUG-IV ADL scale)	8.4	8.3	9.0	8.3	8.3	8.3	9.0	8.4	8.4	8.2	9.1	8.4
Percent with severe cognitive impairment ²	50.3	50.0	56.9	54.0	48.5	49.1	56.2	54.4	47.5	43.6	54.9	52.0
Percent with SPMI ³	8.5	4.2	6.3	5.0	8.9	5.3	6.5	6.0	8.9	5.3	7.0	4.9
Percent with low level of care need ⁴	7.5	8.9	5.4	7.5	8.0	9.9	5.4	9.9	8.1	9.1	5.2	8.9
Quality measures for long-stay nursing facility residents												
Weighted quality measure denominator	13,418	991	50,949	1,274	12,429	907	48,119	1,080	10,554	834	46,059	1,070
Percentage of long-stay residents who were physically restrained	1.6	1.3	2.0	1.2	1.1	0.9	1.5	1.1	0.9	1.1	1.4	0.4
Weighted quality measure denominator	12,669	962	49,083	1,243	11,704	874	46,272	1,051	9,932	804	44,236	1,035
Percentage of long-stay residents who got an antipsychotic medication	22.7	18.7	25.5	25.4	21.0	16.3	23.4	23.8	19.2	17.2	21.9	20.2
Weighted quality measure denominator	10,670	775	41,104	947	9,852	698	39,269	827	8,556	648	38,157	813
Percentage of long-stay high-risk residents with pressure ulcers	8.5	8.6	10.0	11.4	7.7	8.2	9.2	9.5	8.7	6.4	9.5	8.4
Percentage of long-stay residents who self-report moderate to severe pain	—	—	—	—	—	—	—	—	—	—	—	—
Percentage of long-stay residents experiencing one or more falls with major injury	—	—	—	—	—	—	—	—	—	—	—	—

— Not included in this year's annual report, but planned for future analyses.

ADL = activity of daily living; RUG = Resource Utilization Group; SPMI = severe and persistent mental illness.

¹ Eligibles refers to beneficiaries who were demonstration-eligible for the corresponding time period.

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⁴ Low level of care need was defined as users in the reduced physical function RUG who required no assistance with late-loss ADLs (bed mobility, transfer, toilet use, eating).

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Table A.2-15
Annual nursing facility utilization, characteristics, and quality measures of all long-stay nursing facility residents for the Minnesota demonstration-eligible and enrolled groups, by urban/rural status

	Demonstration period 10/1/2013–12/31/2014			
	Eligible		Enrolled	
	Urban	Rural	Urban	Rural
Measures of all long-stay residents				
Annual nursing facility utilization				
Weighted number of beneficiaries eligible for long-stay	43,674	2,443	32,745	1,930
Long-stay nursing facility users as % of eligibles ¹	24.2	34.1	23.9	34.6
Characteristics of long-stay nursing facility residents				
Weighted number of long-stay beneficiaries	10,556	834	7,833	668
Functional status (RUG-IV ADL scale)	8.4	8.2	8.6	8.4
Percent with severe cognitive impairment ²	47.5	43.6	48.9	45.3
Percent with SPMI ³	8.9	5.3	9.2	5.5
Percent with low level of care need ⁴	8.1	9.1	8.0	9.5
Quality measures for long-stay nursing facility residents				
Weighted quality measure denominator	10,554	834	7,833	668
Percentage of long-stay residents who were physically restrained	0.9	1.1	0.9	1.2
Weighted quality measure denominator	9,932	804	7,346	642
Percentage of long-stay residents who got an antipsychotic medication	19.2	17.2	19.3	17.3
Weighted quality measure denominator	8,556	648	6,431	521
Percentage of long-stay high-risk residents with pressure ulcers	8.7	6.4	8.3	6.3
Percentage of long-stay residents who self-report moderate to severe pain	—	—	—	—
Percentage of long-stay residents experiencing one or more falls with major injury	—	—	—	—

— Not included in this year's annual report, but planned for future analyses.

ADL = activity of daily living; RUG = Resource Utilization Group; SPMI = severe and persistent mental illness.

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NOTE: Given that the demonstration started in mid-September 2013, September 2013 was excluded from the baseline and demonstration periods because evaluation measures could not be created simultaneously in the same month using both fee-for-service and encounter data. Minimum Data Set analyses align with this timeline.