

# Virginia's National Core Indicators Aging & Disability (NCI-AD) Project



This report includes data from a sample of Medicaid members who use long term services and supports (LTSS) that completed the National Core Indicators - Aging & Disability (NCI-AD) Adult Consumer Survey across Virginia in 2023-2024. Comparison results between overall state and each of the state's five Managed Care Organizations are also included.

Virginia participates in the NCI-AD Project as part of the state's effort to measure the quality of LTSS and systems performance.

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For more information about NCI-AD in Virginia, visit our website at: <https://nci.partnership.vcu.edu/>.

**Prepared by:**



**VCU**

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School of Education

**Prepared for:**



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# VIRGINIA'S NCI-AD STATEWIDE RESULTS



## DESCRIPTION OF SAMPLE

The 2023-2024 project year was the first time Virginia participated in the National Core Indicators Aging and Disability (NCI-AD) survey. A total of 1,002 Cardinal Care Managed Care Medicaid members from across the state of Virginia receiving LTSS services from all five Managed Care Organizations participated in the NCI-AD survey. All surveys were completed by phone either with the Cardinal Care Managed Care Medicaid member or with a proxy who knew the person well.

**STATEWIDE SAMPLE SIZE: 1,002 total respondents**

### Residence Location

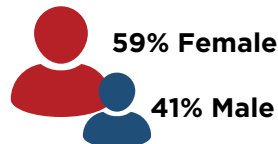
- 77% Metropolitan
- 9% Small town
- 8% Micropolitan
- 6% Rural



### Residence Type

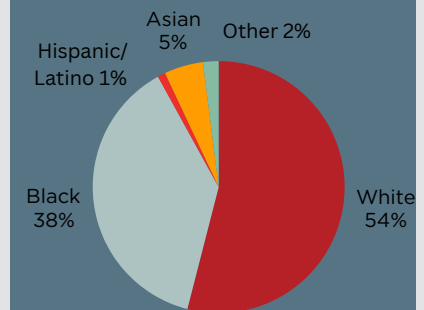
- 81% Family Home/Own Home
- 9% Other
- 3% Nursing Facility
- 3% Group/Adult Foster
- 2% Assisted Living
- 2% Senior Living Apartment

#### RESIDENCE LOCATION & TYPE



**55**  
years old  
(average)

#### GENDER & AGE



#### RACE & ETHNICITY

## MEDICAL BACKGROUND

2%

Have a mental health diagnosis

56%

Receives Medicare



#### DIAGNOSIS

11% ID/DD

7% TBI

5% ALZHEIMER'S  
/DEMENTIA

2% PHYSICAL DISABILITY

**86%** Have access to mental health services if they want them

**77%** Can get an appointment to see or talk to their primary care doctor when needed



## HEALTH & HEALTHCARE

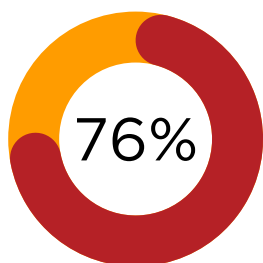
**51%** Talked to health professionals using video conference/telehealth

**63%** Liked using telehealth

**In the past 12 months:**

**42%** Went to the emergency room

**23%** Had an overnight stay in a hospital or rehab/nursing facility and was discharged to go home



### Support

**76%** of respondents say they have enough help with everyday activities

### Food Access

**15%** have to skip meals due to financial worries



**85%** have access to healthy foods when they want them

### FALLS

21%

Have a history of falls

46%

Have concerns about falling/being unstable

71%

Have worked with someone to reduce their risk of falling

### SUPPORT ACCESS TO COMMUNITY



**93%** of respondents say they can see/talk to family/friends they do not live with when they want

**72%** always have a way to get where they want to go

**69%** can take part in activities with others as much as they want

**21%** often feel lonely

### ACCESS TO PREVENTATIVE HEALTH CARE

78%

52%

47%

**In the past 12 months:**

**78%** Had physical exam

**52%** Had a vision exam

**47%** Had a dental visit

92%

Services and supports are delivered in a way that is **respectful of their culture**

63%

Have **enough privacy where they live** (if living in a group setting)

69%

Others **ask before coming in** their home/room (if living in a group setting)

#### RESPECT & PRIVACY

#### SERVICES & UNMET NEEDS

59%

Services meet all their current goals

45%

Case manager talked to them about services to help with unmet needs

Overall **23%** of respondents want a job

23%

For respondents aged 18-59

**36%**

reported they wanted a job and someone has talked with them about job options

#### EMPLOYMENT



**74%** of respondents say they feel in control of their life

#### CHOICE & CONTROL

**87%**

Can choose/change their services and supports

**81%**

Can choose/change the people who provide paid supports

**82%**

Can choose/change when/how often they receive services

19%

**Paid staff changes too often**

24%

**Case manager changes too often**

#### STAFF LONGEVITY & TURNOVER

#### SERVICE COORDINATION



73%

**73%** Have a backup plan if their paid support staff does not show up

## COMPARISON OF EACH MANAGED CARE ORGANIZATION RESULTS TO STATEWIDE RESULTS

### EMPLOYMENT

	AETNA	ANTHEM	MOLINA	OPTIMA	UNITED	VIRGINIA
Respondents that want a job (Overall)	20%	26%	39%	22%	10%	23%
Respondents that want a job (Aged 18-59)	31%	44%	53%	31%	19%	36%
Report that someone has talked with them about job options (Aged 18-59)	37%	50%	24%	44%	19%	36%

### RESPECT & PRIVACY

	AETNA	ANTHEM	MOLINA	OPTIMA	UNITED	VIRGINIA
Services and supports are delivered in a way that is respectful of their culture	97%	93%	89%	93%	100%	94%
Have enough privacy where they live ( <i>if in a group setting</i> )	63%	92%	50%	29%	57%	63%
Others ask before coming in their home/room ( <i>if in a group setting</i> )	50%	100%	83%	50%	43%	69%

### CHOICE & CONTROL

	AETNA	ANTHEM	MOLINA	OPTIMA	UNITED	VIRGINIA
Can choose/change their services and supports	92%	83%	85%	87%	91%	87%
Can choose/change the people who provide paid supports	85%	88%	64%	77%	88%	81%
Can choose/change when/how often they receive services	80%	78%	70%	86%	88%	82%
Respondents say they feel in control of their life	74%	72%	68%	78%	76%	74%

### SERVICES & UNMET NEEDS

	AETNA	ANTHEM	MOLINA	OPTIMA	UNITED	VIRGINIA
Services meet all their current goals	46%	68%	58%	60%	59%	59%
Case manager talked to them about services to help with unmet needs	49%	39%	50%	46%	42%	45%

### STAFF LONGEVITY & TURNOVER

	AETNA	ANTHEM	MOLINA	OPTIMA	UNITED	VIRGINIA
Paid staff changes too often	26%	26%	17%	19%	9%	19%
Case manager changes too often	20%	23%	22%	40%	11%	24%

### SERVICE COORDINATION

	AETNA	ANTHEM	MOLINA	OPTIMA	UNITED	VIRGINIA
Have a backup plan if their paid support staff does not show up	84%	72%	61%	75%	57%	73%

## HEALTH & HEALTHCARE

	AETNA	ANTHEM	MOLINA	OPTIMA	UNITED	VIRGINIA
Have access to mental health services if they want them	88%	76%	88%	88%	89%	86%
Can get an appointment to see or talk to their primary care doctor when needed	76%	75%	75%	82%	79%	77%
Talked to health professionals using video conference/telehealth	55%	53%	50%	46%	51%	51%
Went to the emergency room ( <i>in past 12 months</i> )	47%	37%	49%	34%	45%	42%
Had an overnight stay in a hospital or rehab/nursing facility in past 12 months and was discharged to go home	23%	18%	31%	20%	26%	23%

## SUPPORT & FOOD ACCESS

	AETNA	ANTHEM	MOLINA	OPTIMA	UNITED	VIRGINIA
Respondents say they have enough help with everyday activities	70%	82%	67%	74%	84%	76%
Have to skip meals due to financial worries	19%	14%	18%	17%	9%	15%
Have access to healthy foods when they want them	84%	85%	84%	84%	87%	85%

## FALLS

	AETNA	ANTHEM	MOLINA	OPTIMA	UNITED	VIRGINIA
Have a history of falls	24%	16%	25%	24%	17%	21%
Have concerns about falling/being unstable	55%	42%	44%	36%	51%	46%
Have worked with someone to reduce their risk of falling	62%	67%	72%	68%	85%	71%

## SUPPORT ACCESS TO COMMUNITY

	AETNA	ANTHEM	MOLINA	OPTIMA	UNITED	VIRGINIA
Can see/talk to family/friends they do not live with when they want	96%	86%	90%	94%	96%	93%
Always have a way to get where they want to go	74%	69%	65%	80%	73%	72%
Can take part in activities with others as much as they want	70%	65%	60%	76%	74%	69%
Often feel lonely	23%	16%	20%	27%	19%	21%

## ACCESS TO PREVENTIVE HEALTH CARE

	AETNA	ANTHEM	MOLINA	OPTIMA	UNITED	VIRGINIA
Had a physical exam in past 12 months	77%	77%	73%	77%	85%	78%
Had a vision exam in past 12 months	59%	46%	44%	50%	60%	52%
Had a dental visit in past 12 months	46%	45%	40%	47%	57%	47%