Hello and Happy New Year from ASPE’s Office of Behavioral Health, Disability, and Aging Policy, or BHDAP /bē dap/!

We have a new name but our structure and mission remain the same. BHDAP (formerly the Office of Disability, Aging, and Long-Term Care Policy, or DALTCP) focuses on policies and programs that support the independence, productivity, health and well-being of people with disabilities, people with behavioral health conditions, and older adults including those with long-term care needs. This inaugural issue includes all our publications in 2020 as well as links to a few past reports from 2019 that may be of interest.

Please forward and subscribe below to receive future listings of reports and other updates from BHDAP.

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U.S. Department of Health and Human Services
Office of the Assistant Secretary for Planning and Evaluation (ASPE)
Office of Behavioral Health, Disability, and Aging Policy (BHDAP)

Who we are: ASPE is the principal advisor to the Secretary of HHS on policy development, including major activities in policy coordination, legislative development, policy research, program evaluation, and economic analysis. Within ASPE, BHDAP focuses on policies and programs that support the independence, productivity, health and well-being of people with disabilities, people with behavioral health conditions, and older adults, including those with long-term care needs. Please share with interested colleagues and/or subscribe to receive these and other updates from BHDAP.

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Long-Term Care and the Impact of COVID-19: A First Look at Comparative Cross-National Statistics
Read Report
Long-term care (LTC) populations, particularly in congregate settings, are an important group for countries to focus on as they address the COVID-19 pandemic. In this brief, we summarize the available data and literature on the cross-national impact of COVID-19 in LTC settings as of October 2020 and the changes in reported death rates since June 2020.

COVID-19 Intensifies Nursing Home Workforce Challenges
Read Report
Recruiting and retaining quality direct care staff has long been a challenge in nursing homes, and these problems have only been amplified by the COVID-19 pandemic. This report examines the impact of the COVID-19 pandemic on nursing homes, particularly on the workforce, and identifies new federal, state, and facility-level policies and practices that have been implemented to address challenges within them.
Individuals Experiencing **Homelessness** are Likely to have Medical Conditions Associated with Severe Illness from **COVID-19**

Read Report

This brief uses a proprietary dataset of electronic health records to describe the prevalence rates of chronic health conditions associated with a higher risk of severe illness from COVID-19 among people with a history of homelessness. The paper found that for many of the health conditions examined, people with a history of homelessness have greater prevalence than the general population, for example, for chronic obstructive lung disease (23%) or asthma (24%).

**Strengthening the Entry-Level Health Care Workforce: Finding a Path**

Read Report

This report, led in collaboration with ASPE’s Office of Health Policy, provides potential approaches to expand and strengthen the entry-level health care workforce in the United States, with a primary focus on the following occupational categories: licensed practical nurses, medical assistants, dental assistants, hygienists, home health aides, certified nursing assistants, and personal care aides, community health workers, and peer specialists. This report was conducted prior to the COVID-19 pandemic. However, the pandemic has had a significant impact on these front-line workers, has reinforced their importance, and has revealed new opportunities going forward.

**Postpartum Opioid Prescription Fills, Opioid Use Disorder, and Utilization of Medication-Assisted Treatment among Women with Medicaid and Private Health Insurance Coverage**

Read Report

This issue brief examines the rate of opioid prescribing and its association with the development of OUD among women covered under Medicaid and private health insurance after childbirth.

**How Does DATA-Waiver Provider Patient Capacity Relate to Opioid and Buprenorphine Prescribing?**

Read Report

This brief examines how increases in patient capacity among buprenorphine waivered providers relates to prescribing of buprenorphine and opioids at the county-level.

**Changes in Home Health Care Use in Medicare Advantage Compared to Traditional Medicare, 2011-2016**

Read Report

Prior work has shown that home health providers strategically provided therapy visits and recertified episodes in order to maximize payment under traditional Medicare (TM). However, Medicare Advantage (MA) has more flexibility in terms of how they pay for home health care. Using a mixed-methods study, we found that overall, MA enrollees
were less likely to use home health care than TM enrollees. We also found that MA home health users were less likely to have a hospital admission during their home health spell.

**Advance Care Planning Among Medicare Fee-For-Service Beneficiaries and Practitioners**

*Read Research Brief*
*Read Report*

This study found low but increasing use of advance care planning (ACP) billing codes among Medicare fee-for-service beneficiaries and practitioners, with variation by practitioner type, beneficiary mortality, place of service, and state. Although barriers to ACP remain, we identified a wide variety of other interventions facilitating ACP, including education and training programs.

**Understanding Substance Use Disorder (SUD) Treatment Needs Using Assessment Data: Final Report**

*Read Report*

To identify and address gaps in substance use disorder (SUD) treatment capacity, state and federal policymakers need information on the need and demand for different SUD levels of care. This project explored the feasibility of gathering and utilizing patient placement and other needs assessment data to identify and address unmet patient needs by levels of care. We found substantial variability in whether states required a needs assessment or standardized set of intake questions. Even states that used the same placement criteria had different approaches to how they applied the criteria.

**Understanding the Characteristics of Older Adults in Different Residential Settings: Data Sources and Trends**

*Read Research Brief*
*Read Report*

This study estimates the older adult (ages 65+) population in the United States, their places of residence, and their demographic, health, and functional characteristics, using multiple data sources: the Medicare Current Beneficiary Survey (MCBS), the Health and Retirement Study (HRS), the National Health and Aging Trends Study (NHATS), and the National Study of Long Term Care Providers (NSLTCP). Between 2002 and 2015, findings show a decline in the proportion of older adults residing in nursing homes and a corresponding increase in the proportion living in traditional housing, while the proportion residing in community-based residential care settings remained stable.

**Certified Community Behavioral Health Clinics Demonstration Program: Report to Congress, 2019**

*Read Report*

ASPE is overseeing a comprehensive national evaluation of the CCBHC demonstration in collaboration with CMS using a mixed-methods evaluation to examine the implementation and outcomes of the demonstration. ASPE’s third annual report to Congress, as well implementation findings and preliminary cost and quality findings are now available on the ASPE website.
We found that an increase of the federal minimum wage would result in large proportions of nursing assistants gaining a wage increase, thereby increasing direct labor costs to nursing homes.

Research shows that retention in medication-assisted treatment (MAT) results in better outcomes. Rates of treatment engagement and retention in treatment, however, are persistently low.

This work explores the current relationships between family structure—the presence of a spouse and/or children—and caregiving arrangements when people develop long-term services and supports (LTSS) needs. The aim is to better understand the potential implications for increased demand on the formal long-term care system, unmet need, and reliance on Medicaid for baby boomers and future generations if fewer older adults have traditional family caregivers in the future. We find that baby boomers may find new ways to support their later life needs despite declining rates of children and spouses.
• Implications of Alternative Methods of Identifying Populations with Dementia: Issue Brief, Read Report
• Individuals’ Awareness of a Dementia Diagnosis: Issue Brief, Read Report
• Analysis of State Efforts to Comply with Fair Labor Standards Act Protections to Home Care Workers, Read Report
• State Residential Treatment for Behavioral Health Conditions: Regulation and Policy Environmental Scan, Read Report
• Credentialing, Licensing, and Reimbursement of the SUD Workforce: A Review of Policies and Practices Across the Nation, Read Report
• Non-Fatal Opioid Overdose and Associated Health Outcomes, Read Report
• Optimal Utilization of Psychosocial Supports in Medication-Assisted Treatment for Opioid Use Disorder Issue Brief, Read Report
• Psychosocial Supports in Medication-Assisted Treatment: Site Visit Findings and Conclusions, Read Report
• Support and Services at Home (SASH) Evaluation: Evaluation Findings, 2010-2016, Read Report
• Approaches to Early Jail Diversion: Collaborations and Innovations, Read Report
• Choice Matters: Housing Models that Promote Recovery for Individuals and Families Facing Opioid Use Disorder, Read Report
• Loss of Medicare-Medicaid Dual-Eligible Status: Frequency, Contributing Factors and Implications Policy Brief, Read Report
• How Many Older Adults Can Afford To Purchase Home Care? Research Brief, Read Report
• Best Practices and Barriers to Engaging People with Substance Use Disorders in Treatment: Final Report, Read Report
• Status Report on Protecting Our Infants Act Implementation Plan, Read Report

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