

PROGRAM INSTRUCTION

SUA-16-PI-09

January 12, 2016

TO: Area Agency on Aging Directors

FROM: Cynthia Brammeier, Administrator *CJB*
State Unit on Aging, Division of Medicaid & Long-Term Care

BY: Amy Hochstetler, IT Business Analyst *AH*

RE: Health Promotion/Disease Prevention Service

The State Unit on Aging previously issued SUA-11-PI-03 to define Health Promotion and Disease Prevention, as well as the data entry method into the aging software system, NAMIS. This Program Instruction will supercede any Health Promotion information from SUA-11-PI-03 and any other previous program instructions.

NAMIS currently allocates four services to the Health Promotion and Disease Prevention NAPIS reporting category. The four NAMIS services that are considered NAPIS Health Promotion/Disease Prevention services are: Medication Management, Health Promotion/Disease Prevention, Health Clinic, and Health Education. The definition for Health Promotion and Disease Prevention will be updated on July 1, 2016 to include only evidenced based programs. At this time, Medication Management will no longer be considered a NAPIS Health Promotion and Disease Prevention service because it is not evidence based.

In line with current policy, evidence based programs must be reviewed by the State Unit on Aging before implementation.

SUA-11-PI-03 also states that Health Promotion services should be entered as a registered service to comply with AoA standards. The State Program Report (SPR) requires the following information for Health Promotion and Disease Prevention:

- Number of Providers
- Number of AAAs that provide direct service
- Unduplicated Persons Served
- Expenditure details

Service units are not required. Provider and direct service data is collected directly from NAMIS provider service agreements. Area Agencies on Aging will need to report on the number of clients

served and provide details on expenditures. NAMIS is set up to count client profiles to provide an estimated Unduplicated Persons Served. This cannot be changed. NAPIS Health Promotion services were not counted if they were entered into NAMIS via group utilization.

Until the NAMIS replacement software is in place, it will be at the discretion of the AAA on whether data is entered as a registered service or group utilization. The data entry must remain consistent – the services cannot be entered as both registered service and group utilization. Once NAMIS is replaced, the State Unit on Aging will set data entry expectations for NAPIS Health Promotion data.

When entering data as group utilization, the Quantity and Number Served fields both need to be entered. The Quantity field describes the number of sessions held. The Number Served field indicates the number of participants.

In the first row of the example below, 1 session was held with 49 participants. If one-on-one sessions occur, they will be documented similar to the fourth row. In the fourth row, the Quantity and Number Served match, two.

Quantity	NumberServed
1.00	49
1.00	40
1.00	45
2.00	2

Starting on July 1, 2016, the state will manually update NAPIS Health Promotion and Disease Prevention data in the SPR to include the group utilization Number Served information.

If you have any questions please contact Amy Hochstetler at (402) 471-4781 or email at DHHS.Aging@nebraska.gov.