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EVROPSKA UNIJA  
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IN INVESTICIJSKI SKLADI  
NALOŽBA V VAŠO PRIHODNOST



# Long Term Care Assessment in Germany

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# Assessment Criteria

- In Germany, during first 20 years (1995 – 2015) entitlements were focused on **physical incapability** with the consequence that activities of daily living (ADL) could not be further managed by a person.
- Since 2015 persons suffering from mental problems (dementia or Alzheimer etc.) are taken into consideration
- In 2017 a paradigm change is envisaged: Instead of incapability „self dependency“ will be the basis of assessment – reflected in the scoring of the assessment modules (NBA)
- The assessment is conducted
  - By special trained and independent nurses
  - Preferably at the claimant’s home

# What is New?

- On 12th August 2015, the Federal Cabinet passed the Second Bill to Strengthen Long-Term Care.  
The Act introduces a new definition of long-term care needs to the day-to-day practice setting. The Act was scheduled to enter into force on 1st January 2016.
- The new assessment (NBA) and the changes in benefit amounts available to beneficiaries in the long-term care insurance are to enter into force by 1st January 2017.

# What is New

- New regulations on benefits and services systematically implement the aims of the **new definition** of long-term care needs – providing assistance in maintaining **independence** and making the most of a person's remaining abilities.
- The previous system was based on **three categories of care** connected with time will be replaced by **five uniformly valid grades of care applicable to all persons in need of long-term care.**
- Now **physical, mental and psychological impairments** will be rated in the recording and assessment process. The assessment will serve to measure the degree of a person's independence in six different areas that will – on the basis of different weightings – be subsequently combined to form an overall assessment.

# Advantages

- Person centered approach: systematic integration of dimensions that have not been taken into consideration before (embraces people with mental as well as physical health problems and includes social factors)
- Uses the measure „degree of de/independency“ for LTC eligibility instead of time for support needed
- Assessment result can be used as starting point for individual care planning
- Specific focus on rehabilitation needs
- Tool can be used for other purposes within the system
- Reform was overdue also in terms of price trend ; increase of benefit packages for all entitled persons

# Assessment Modules

1. Mobility
2. Cognitive abilities
3. Behaviour and psychological problems
4. ADLs
5. Coping with and independent handling of demands and pressures caused by illness or the need for therapy.
6. Organizing everyday life and social contacts
7. Activities outside the house and 8. Household maintenance

Module 7 and 8 are taken into consideration in order to complete the entire situation but the two modules are not scored

## Example Module 1: Mobility

Assessed is physical strength, balance and coordination while moving

	Independent	Almost independent	Almost dependent	Dependent
Position change in bed	0	1	2	3
Keeping stable position	0	1	2	3
Change in position	0	1	2	3
Move in living environment	0	1	2	3
Steeping at stairs	0	1	2	3

Example Module 6: Social contacts and organising daily life  
 Assessed is whether the person can realise the activity in practise

	Independent	Almost independent	Almost dependent	Dependent
Organise the day and adapt on changes	0	1	2	3
Relax/sleep	0	1	2	3
Keep active	0	1	2	3
Planning future	0	1	2	3
Interaction with persons around	0	1	2	3
Interaction with persons outside	0	1	2	3



# Calculation and Weighting Points

Module 1	Module 2&3	Module 4	Module 5	Module 6
10%	15%	40%	20%	15%
		Points/ Module		
12,5 – 26,5	27 - 47	47,5 – 69,5	70 – 89,5	90 - 100
		Grade		
1	2	3	4	5

# Amount for Main Benefits

	Grade 1	Grade 2	Grade 3	Grade 4	Grade 5
Home Care Cash Benefits	125 €	316 €	545 €	728 €	901 €
Home Care Benefits in Kind		689 €	1298 €	1612 €	1995 €
Residential Care		770 €	1262 €	1775 €	2005 €

# Subsequent Changes

- Grade 1 will be those who do not yet require any considerable support but require long-term care counselling and/or adaptation of living conditions
- New claimants in grade 1 plus new claimants with mental disorders will considerably widen the circle of persons. In the coming years, **additional 500,000 claimants** is estimated.
- All persons in **residential care** assigned to care grades 2 to 5 will be paying the same care-related co-payment. In average 580 € plus costs for board, lodging and investment (estimation)

# Subsequent Changes

- **Incentives for informal care:** now better secured with the **pension and unemployment insurance**. LTC insurance will be paying pension contributions for all caregivers who provide at least 10 hours of care per week for clients in grade 2 – 5
- **Coverage in the unemployment insurance** will also be improved. LTC insurance will be paying the unemployment insurance contributions for caregivers who leave their jobs and take up care of relatives.
- Quality assurance will be supported by a qualified administrative office and it will be the task of the new committee to agree on a new procedure for quality control, paying particular attention, in the process, to indicators for measuring the **quality of outcomes**.

# Critical Issues

- „The scoring system is too complex“ (expert group member)
- Threshold for grading ?????? Expert group suggested higher number of points per module and grade
- Due to protection of vested rights legislative body decided on lowering the threshold
- Low level of transparency for potential client
- Example:
  - NBA sum up 100 points in total
  - Modul 1 (15 points) but max 10 points (10% weighting)

# Positive Effects NBA

- Equality (embraces people with physical and/or mental disorders)
- Councelling
- Provides information for:
  - Care planning
  - Promote and enhance status improvement
  - Rehabilitation measures
  - Medical interventions

## German specifics:

- Prompt link to other funding agencies (e.g. Health Insurance)
- Social welfare (mainly for people with disabilities – support for reintegration measures)

# Freedom for Providers and Clients

- Benefit in Cash not earmarked
- Benefits in Kind – Service Package:

60% of the amount:

- Basic care (ADL – Hygiene)
- Household support

40% of the amount:

- Support in all daily routine (household maintenance, accompanying persons to other activities outside the house)

Plus 125€ for special support (psychosocial care)

# Careplan

- Grade and available budget per beneficiary
- Provider and beneficiary/family decide on type of support
  - Basic Care and household support (ADL)
  - What else is necessary (flexible arrangements)

Initiative authorized by Federal Government is working on structural model

„Debureaucratization“ care documentation with the aim to link it to NBA.



Thank you for your Attention