

Scoring Guidelines for FACT-GP/Health Home Functional Assessment

An important part of the Health Home Program is the collection and assessment of process and outcome quality measures. One component of this is the FACT-GP/Health Home Functional Assessment (HH FACT-GP). This assessment is composed of two sets of questions that are combined for scoring purposes. The first set is the standardized/validated FACT-GP from the Functional Assessment of Chronic Illness Therapy (FACIT) Measurement System (www.facit.org). The second set is a series of six questions specific to Health Homes that provide additional measures of functional status and of homelessness. These are available on the Health Home website in the seven required languages. (http://www.health.ny.gov/health_care/medicaid/program/medicaid_health_homes/nys_implementation.htm) The score resulting from this assessment will be used to adjust risk scoring and to measure longitudinal changes in this population. It is very important to have the member respond to each of the questions to the best of his/her ability.

FACT-GP:

Our intention is that the HH FACT-GP be administered in an interview format so the member has the opportunity to clarify any questions he/she may have regarding the intent and meaning of the questions. The member should have a copy of the assessment form in his/her preferred language to use during the interview. Interviewers should assist with overcoming any literacy or health literacy barriers. Members should be encouraged to answer each question using the scale of “0” to “4” based upon the most applicable response. Please note that the responses should reflect the member’s condition during the last 7 days. While the scoring metrics can account for some skipped questions, interviewers should aim to have all of the questions answered. In order for this assessment to be valid, 17 of the 21 questions (80%) must be answered. Results will be rejected if less than 80% of questions are answered for any one member. Health Homes that have a pattern of obtaining less than all questions answered will be asked to provide the DOH an explanation with a plan of correction.

For the FACT-GP, overall, the higher the score, the healthier the individual. Note that some questions – specifically, those in the Physical Well-Being and Emotional Well-Being sections - have responses such that the higher number response suggests the person has a lower quality of life. On the score sheet, the numerical value of these answers must be reversed before being added to the total. Negatively stated items are reversed by subtracting the member response from “4”. These can be identified on the score sheet under the heading, “Reverse Item?” by the formula, “4 - ____”. It is also important to note that scores will be prorated if there are missing items in any one subscale. In any one subscale, however, at least 50% of the questions must be answered to ensure valid results.

Further information on completing and scoring the FACT-GP is included in the scoring manual from FACIT , “Administrative Guidelines Manual_082505”, found on the Department’s Health Home website.

Health Home (HH)-Specific Questions:

The Health Home-specific questions should be answered by the member at the same face-to-face interview during which the FACT-GP is completed. The member should have a copy of the instrument to read in his/her preferred language and the interviewer should assist with questions and administer the assessment.

The first five HH questions assess important aspects of the member's functional status. The value range for each question is "0" to "4" depending on the member's interpretation of his/her situation. Like the FACT-GP, some questions are reverse-scored and the scoring is adjusted in the same manner. The last HH question, HH6, asks if the member is homeless. Persons perceive homelessness in different ways. For this question, "having a home" means having one's own residence that one has access to at any time. Being in a shelter or "couch surfing" would be considered homeless. This item requires a "Yes/No" response that is converted to a number on the scoring sheet. This question is weighted more heavily due to the significance of homelessness on chronic health conditions. Because a higher score represents better health, a score of "0" indicates that the member was homeless in the last 7 days; if they are housed, the score is "8". While a combined score is obtained for this subscale, each question will also be reported separately.

Calculating the subscales and final scores:

A worksheet (Combined FACT-GP and Health Home-Specific Scoring Guidelines) is included with these guidelines that can be printed and used to calculate the scores. In addition, an Excel spreadsheet is also included that can be downloaded and used on a computer to auto-calculate the scores. Only the areas in yellow in the Excel version can be changed; instructions for using this electronic version are as follows:

- The interviewer opens an electronic version of the scoring sheet and enters the member's Client Identification Number (CIN) in the appropriate location at the top of the first page. (The CIN will auto-fill to the second page.)
- For each question, the interviewer should enter the actual score for the answer the member gave on the response line in the yellow-highlighted section. The spreadsheet will calculate when a reversal is needed.
- In the box next to the title, "Number of Questions Answered", the interviewer should enter the number of questions in the subscale that were answered. If a member does not answer a question, the interviewer should follow the instructions in the red box for that subscale as to how to fill in the response area for that question. (This will allow for a subscale score to be prorated.)
- There are instances when answers create a fractioned subscore. If this happens the score should be rounded to the nearest whole number. Example: Subscore = 4.50, round this up to 5. Subscore = 4.49, round this down to 4.
- Once all questions are answered, the interviewer can save the electronic version of the scoring sheet.
- When the file is saved, the name of the file should be changed for identification purposes for that member.
- The interviewer may also print out a copy of the spread sheet with the member's CIN on it and file it with the functional assessment tool the member completed.
- For the next member, the interviewer will open a new Excel spreadsheet.

Example: John Smith is being interviewed and his HH FACT-GP is being administered. The interviewer uses the electronic scoring sheet to capture the scores and enters the member's CIN at the top. The member is given a paper copy of the survey tool in his preferred language and the interviewer answers any questions/concerns/clarifications to assist the member in answering all of the questions. For question GP1, the member gives a score of 3. The interviewer enters a "3" in the yellow space under the "Response" column next to question GP1. The member then continues answering questions and the interviewer continues to record the member's responses. At the end of each section, the interviewer enters the total number of questions answered in that section in the yellow box to the right of the box labeled "Number of questions answered". For question GP1, the member declines to provide an answer despite the best efforts of the interviewer. The interviewer refers to the red box under the Physical Well-being Subscale and notes that a "4" needs to be placed in the "Response" section for the GP1 question. Since this is a reverse score question, a "0" will populate the "Score" column once a "4" is entered. For this subscale, the interviewer notes that only three out the four questions were answered and enters a "3" in the yellow space to the right of the box labeled "Number of questions answered". When the interviewer is finished collecting all of the information, the interviewer performs the "Save" function on the computer by changing the name of the worksheet using the naming preference established by the Health Home and saving to the predetermined file location for these tools. The interviewer also saves the appropriate numbers to the data collection tool used by the Health Home for easy transfer to the quarterly reporting tool, HH CMART. The interviewer may also print out the scoring sheet to be filed with the paper copy of the tool that the member wrote on.

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