



NATIONAL  
QUALITY FORUM

# Medicaid Innovation Accelerator Project 2016-2017

Technical Expert Panel In-Person Meeting  
Community Integration— Community-Based Long-Term Services and  
Supports Breakout Session

*April 18-19, 2017*

# Community Integration– Community-based Long-Term Services and Supports Breakout Session

## Teleconference and Streaming Information

- Teleconference: Dial (877) 303-9138 (no conference ID needed)
- Streaming Day 1:  
<http://nqf.commpartners.com/se/Rd/Mt.aspx?103219>
- Streaming Day 2:  
<http://nqf.commpartners.com/se/Rd/Mt.aspx?219880>

# LTSS Breakout Session

- Goals of breakout session:
  - ▣ *Develop recommendations for strengthening states' Medicaid delivery system reform efforts through identification of measures related to the LTSS program area*
    - » Review measures by measure score
    - » Analyze measures for consideration using a decision logic to recommend a comprehensive measure set to the Coordinating Committee



# Quality Measures for Long-term Services and Supports - A State Perspective

National Quality Forum IAP Project  
April 18, 201

# Overview

- Who is NASUAD?
- Long-term Services and Supports and move to Managed Care
- Federal oversight
- Promising Practices - States and Plans

# NASUAD's mission.....

To design, improve, and sustain state systems delivering home and community based services and supports for the elderly and individuals with disabilities and their caregivers by:

- **Innovating** - Collect, analyze and facilitate use of information among states on innovation and effective policies and programs
- **Advocating** - Represent states' interests in design and development of all long term services and supports programs
- **Assisting** - Provide state specific technical assistance on systems design, information, planning, and transformation
- **Collaborating** - Foster the development of strategic partnerships
- **Convening** - Facilitate communications among federal, state and local decision makers through various media including national meetings

# Long-term Services and Supports

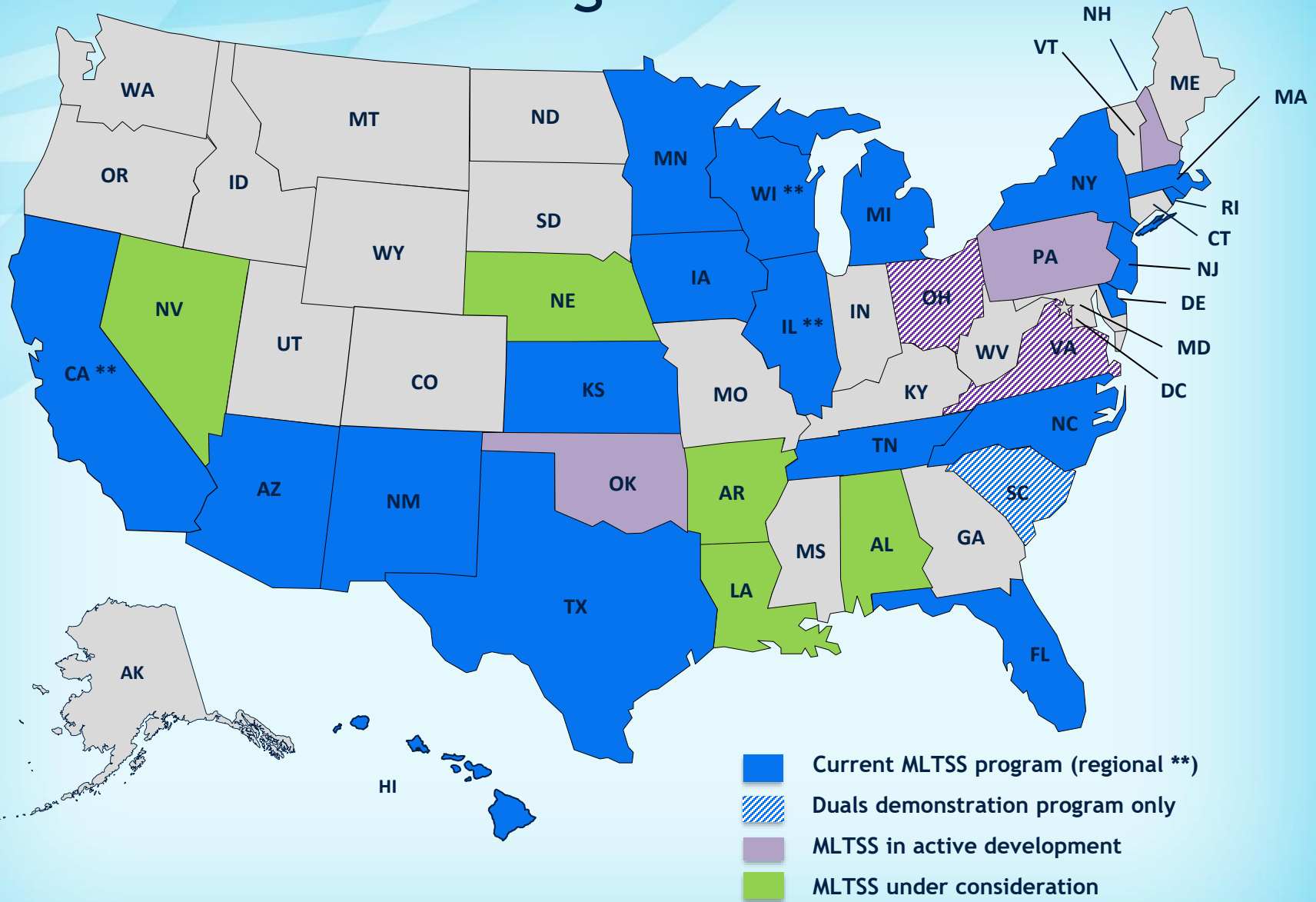
- LTSS involve assistance with activities of daily living (ADLs) and instrumental activities of daily living (IADLs) - things like bathing, dressing, making food, driving - that older adults and people with disabilities need in order to live their lives
- In sum, non-medical services
- Once people need enough help to meet nursing home requirements (level of care), they can get Medicaid coverage.
- States offer home and community based services as an alternative to a nursing home

# What is Managed Long-Term Services and Supports (MLTSS)?

- MLTSS is the delivery of long term services and supports through capitated Medicaid managed care plans
- In most states, plans are covering medical services as well, which provides a comprehensive delivery system for beneficiaries
- Growing trend across the country



# MLTSS Programs - 2017



Source: NASUAD survey; CMS data

# Challenges to Effective Quality Measurement in LTSS

- LTSS does not have widely adopted or evidence-based guidelines, protocols or training standards
  - There are few professional norms, education, and bodies of knowledge
- State programs vary significantly depending upon the populations enrolled and the services offered
  - Diversity of populations
- States driven by CMS requirements for performance measures in HCBS waiver programs; same requirements don't exist for non-waiver services

# Challenges to Effective Quality Measurement in LTSS

- MANY small providers in historic FFS programs unable to collect and report reliably
  - Claims are NOT generally a good source of data
- States do not have data systems capable of collecting and reporting performance measures
- These factors = lack of standardization in LTSS programs and barriers to effective QM

# Challenges to Effective Quality Measurement in LTSS

- States tend to use almost all structure and process measures:
  - # of providers trained
  - # of assessments completed
  - % of care plans completed timely
  - # of critical incidents reported and remediated
- Consumer and advocacy groups - especially disability communities - want to see outcome measures

# Challenges to Effective Quality Measurement in LTSS

- What are the ‘right’ outcomes?
  - Person-specific based on individual needs, desires and goals
- Consumer’s perspective even more critical in LTSS than in acute care settings
  - NOT satisfaction - quality of life!
- Health plans offer better technology and data systems, but collecting and reporting remains significantly challenging
- Tension between individual outcomes and system performance

# Considerations for Selecting LTSS Measures

- Quality measures should be defined relative to the ultimate goals of or outcomes of LTSS
  - Therefore the person/client/consumer must be at center of the process
- Must be as applicable as possible to as many populations as possible
- Need to be ‘doable’ for both FFS and MLTSS states
- Focus on what the ‘accountable entity’ (either providers or health plans) can control

# Considerations for Selecting LTSS Measures

- Minimize case/record review to the maximum extent possible; focus on administrative data
- Should address both quality of life and service delivery
- Good place to start is NQF's HCBS measurement framework/domains
  - Committee spent 2 years sifting through measures, developing domain definitions and identifying needed next steps
- Look for commonality among states; they have been and will be leaders in this work



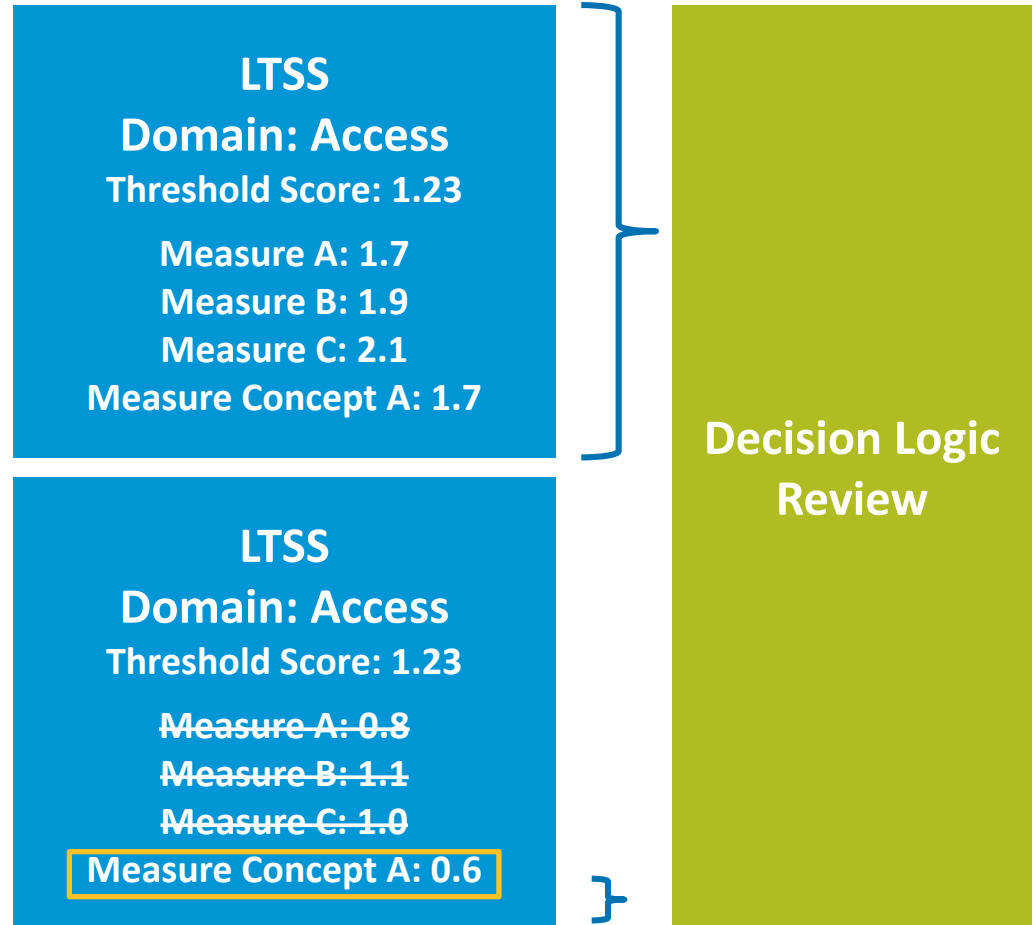
For more information, please visit: [www.nasuad.org](http://www.nasuad.org)

Or call us at: **202-898-2583**



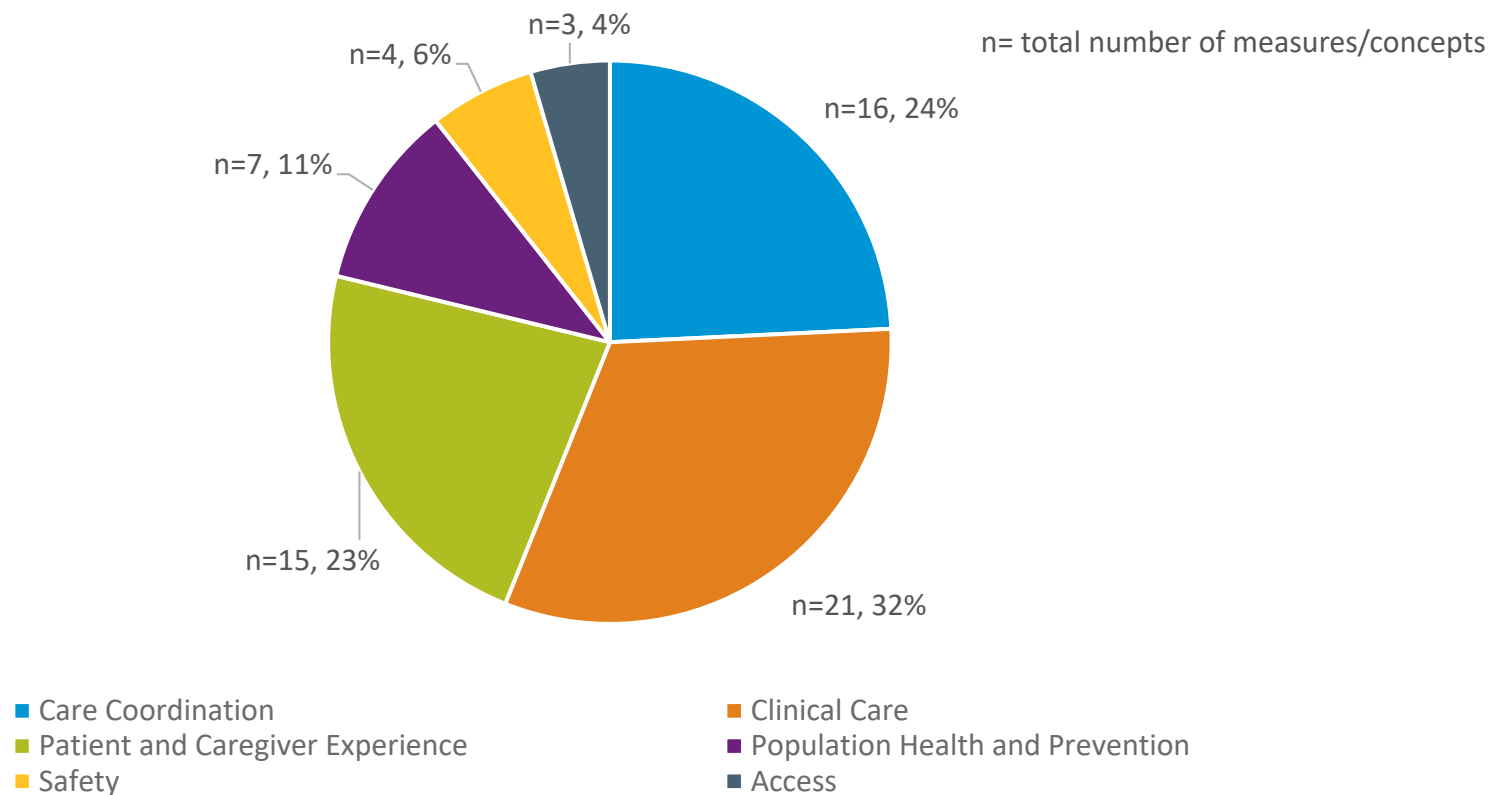
# TEP Decision Process

- ✓ Measures/Concepts that meet or exceed the threshold score (total program area-specific mean) automatically continue to the decision logic review
- ✓ Only Measures/Concepts with scores that fall below the mean that TEP members choose to retain in advance of the meeting will move on to the decision logic review
- ✓ Note: TEP members may only select up to 3 measures to retain



# Promoting Community Integration through Community-Based Long-Term Services and Supports – Measure Landscape

Measures and Measure Concepts, by Domain



# Promoting Community Integration through Community-Based Long-Term Services and Supports – Measure Landscape

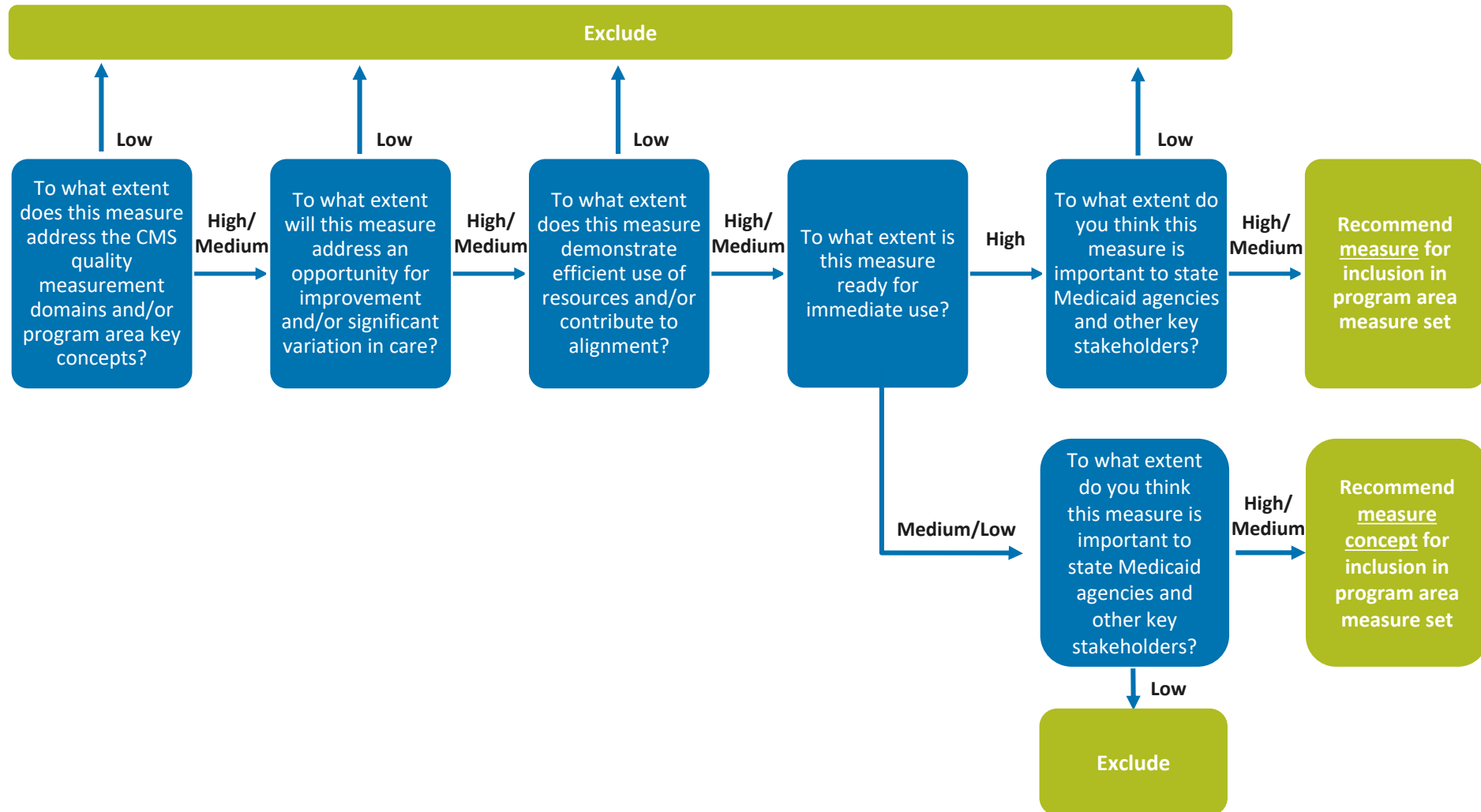
	Total	Measure	Measure Concepts
Total	66	18	48
Mean	<b>1.23</b>	1.94	0.96
Maximum score	2.7	2.7	2.05
Minimum score	0.15	0.9	0.15
>= Threshold Score	22	14	8

**\*Note:** Total mean (1.23) is used to denote cut-off for measure/concepts to be analyzed by decision logic.

# LTSS Overall Measure Score Mean

- LTSS Measure Overall Measure Score Mean: 1.23
- Measures/Concepts with scores at or above program area mean and measures/concepts retained:
  - ▣ *Access: 1*
  - ▣ *Care Coordination: 12*
  - ▣ *Clinical Care: 4*
  - ▣ *Patient and caregiver experience: 7*
  - ▣ *Population health and prevention: 2*
  - ▣ *Safety: 2*
  - ▣ ***Total: 28***

# Decision Logic

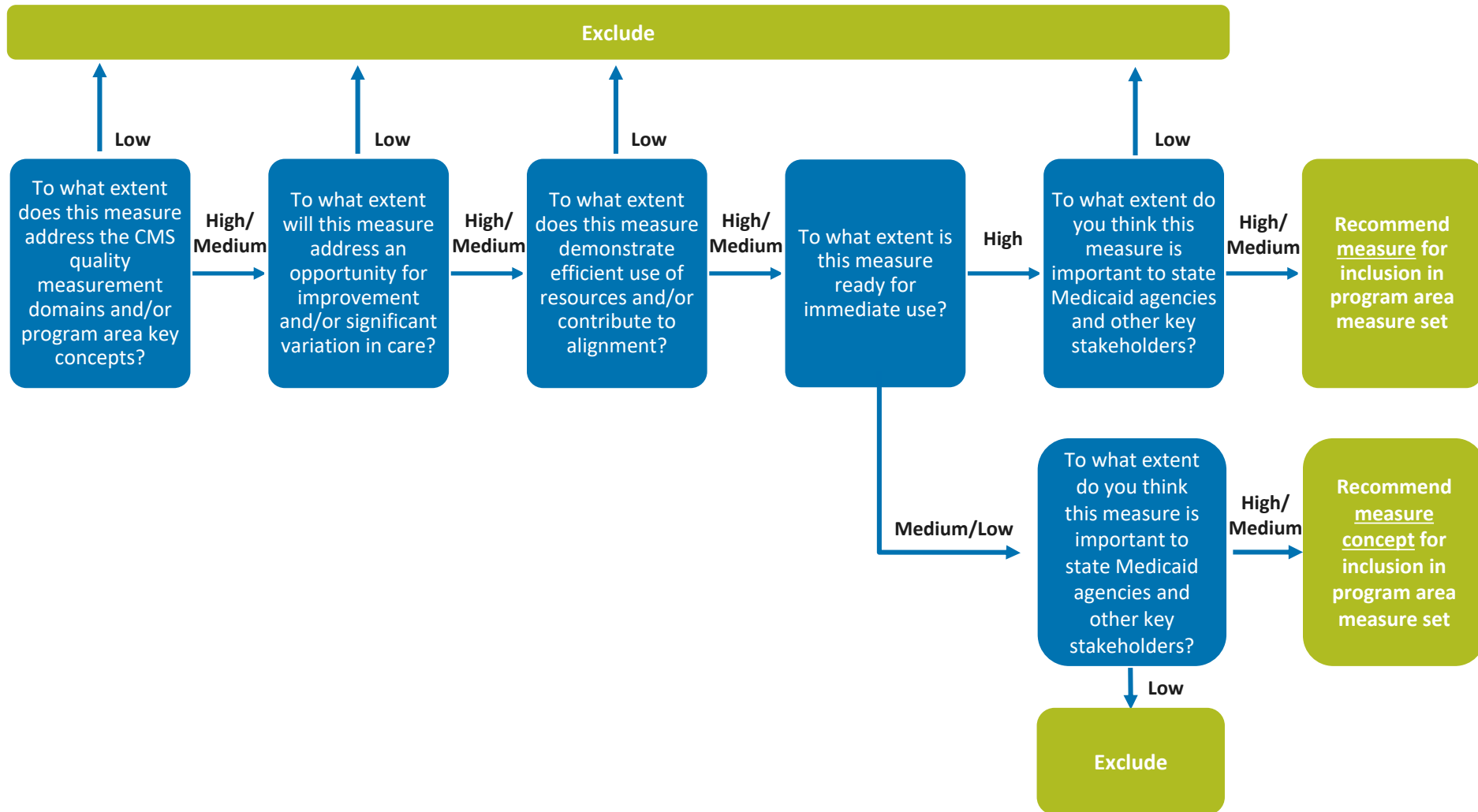


# Review of TEP Voting

- TEP members will utilize a hand vote
  - *State panelists will not vote*
- A vote requires 60% agreement to move forward
  - *Each decision to support or not support will be accompanied by one or more statements of rationale as to how and why each decision was reached.*
- TEPs will review potential measures/measure concepts by CMS quality measurement domain
- The measure sets will be recommended to the Coordinating Committee for consideration

# CMS Quality Measurement Domains

# Decision Logic





# Measures/Concepts for Consideration

- To what extent does this measure address critical quality objectives of the CMS quality measurement domains and/or identified program area key concepts?
  - *High: Measure addresses a CMS quality measurement domain(s) and program area key concepts*
  - *Medium: Measure addresses CMS quality measurement domains but does not address program area key concepts*
  - *Low: Measure does not clearly address CMS quality measurement domains or program area key concepts*
  
- TEP Vote

# Measures/Concepts for Consideration

- To what extent will this measure address an opportunity for improvement and/or significant variation in care evidenced by quality challenges (e.g. readmissions, access to care) for each program area?
  - *High: Addresses multiple quality challenges and opportunities for improvement within a program area*
  - *Medium: Measure has the potential to address variation in care and quality challenges*
  - *Low: Measure does not address quality challenges or opportunities for improvement within a program area*
- TEP Vote

# Measures/Concepts for Consideration

- To what extent does this measure demonstrate efficient use of measurement resources (data collection processes, performance improvement activities, etc.) and/or contribute to alignment of measures across programs, health plans, and/or states? The measure is not duplicative of existing measures within the measure set, captures a broad population (encompasses population of different ages, multiple conditions, etc.).
  - *High: Measure demonstrates efficient use of measurement resources, addresses broad populations, is not duplicative of existing measures and contributes to alignment across states/programs and health plans*
  - *Medium: Measure is not duplicative of other measures and does address some areas of alignment but does not encompass broad populations*
  - *Low: No evidence that the measure demonstrates/addresses any of the above criteria (e.g., does not demonstrate efficient use of measurement resources, address a broad population, nor contribute to alignment. There are other measures similar to this one already in use*
- TEP Vote

# Measures/Concepts for Consideration

- To what extent is this measure ready for immediate use?
  - ▣ *High: Already in use in the Medicaid populations*
  - ▣ *Medium: Measure has a specified numerator and denominator and has reported testing*
  - ▣ *Low: Measure has a numerator and denominator but there is no evidence of testing*
  
- TEP Vote

# Measures/Concepts for Consideration

- To what extent do you think this measure is important to state Medicaid agencies and other key stakeholders (consumers/families, Medicaid managed care organizations, and providers)?
  - ▢ *High: Important to state Medicaid agencies and consumers/families*
  - ▢ *Medium: Important to two stakeholders including state Medicaid agencies*
  - ▢ *Low: Important to one stakeholder*
- TEP Vote

# Opportunity for Public Comment

# CMS Quality Measurement Domain: Access

# Access Domain: Measures/Concepts Analyzed Using Decision logic

- There is **1** measures/concepts in the LTSS access domain that that will be analyzed using the decision logic
  - *Adult Access to Preventative/Ambulatory Care 20-44, 45-64, 65+*



# Opportunity for Public Comment

# CMS Quality Measurement Domain: Care Coordination

# Care Coordination Domain: Measures/Concepts Analyzed Using Decision logic

- There are **12** measures/concepts in the LTSS care coordination domain that that will be analyzed using the decision logic
  - *NQF 0576: Follow-Up After Hospitalization for Mental Illness*
  - *NQF 0097: Medication Reconciliation*
  - *NQF 0647: Transition Record with Specified Elements Received by Discharge Patients (Discharges from Inpatient Facility to Home/Self Care or Any Other Site of Care)*
  - *NQF 0648: Timely Transmission of Transition Record (Discharges from an Inpatient Facility to Home/Self Care or Any Other Site of Care)*
  - *NQF 0646: Reconciled Medication List Received by Discharged Patients (Discharges from an Inpatient Facility to Home/Self Care or Any Other Site of Care)*

# Care Coordination Domain: Measures/Concepts Analyzed Using Decision logic

- Care coordination measures continued
  - ▣ *NQF 2371: Annual Monitoring for Patients on Persistent Medications*
  - ▣ *NQF 0228: 3-Item Care Transition Measure (CTM-3)*
  - ▣ *Percentage of Short-Stay Residents who were Successfully Discharged to the Community*
  - ▣ *Healthy Days in the Community*
  - ▣ *Clinical Risk Score*
  - ▣ *Individualized Plan of Care Completed\**
  - ▣ *Referral to Community-Based Health Resources\**

# Opportunity for Public Comment

# CMS Quality Measurement Domain: Clinical Care

# Clinical Care Domain: Measures/Concepts Analyzed Using Decision logic

- There are 4 measures/concepts in the LTSS clinical care domain that will be analyzed using the decision logic
  - *NQF 0101: Falls: Screening for Fall Risk*
  - *Adherence to Antipsychotics for Individuals with Schizophrenia*
  - *Adherence to Mood Stabilizers for Individuals with Bipolar I Disorder*
  - *Home- and Community-Based Long Term Services and Supports Use Measure Definition (HCBS)*

# Opportunity for Public Comment



# CMS Quality Measurement Domain: Patient and Caregiver Experience

# Patient and Caregiver Experience Domain: Measures/Concepts Analyzed Using Decision logic

- There are 7 measure/concept in the LTSS patient and caregiver experience domain that that will be analyzed using the decision logic
  - *NQF 0006: Consumer Assessment of Healthcare Providers and Systems (CAHPS) Health Plan Survey, Version 5.0 (Medicaid and Commercial) CAHPS® Health Plan Survey v 4.0 - Adult questionnaire*
  - *NQF 0326: Advance Care Plan*
  - *NQF 2483: Gains in Patient Activation (PAM) Scores at 12 Months*
  - *Call Center - Foreign Language Interpreter and TTY Availability*
  - *NQF 2967: CAHPS® Home and Community Based Services (HCBS) Measures\**
  - *National Core Indicators— Aging and Disability\**
  - *National Core Indicators\**

# Opportunity for Public Comment

# CMS Quality Measurement Domain: Population Health and Prevention

# Population Health and Prevention Domain: Measures/Concepts Analyzed Using Decision logic

- There is **2** measure/concept in the LTSS population health and prevention domain that that will be analyzed using the decision logic
  - *Improving or Maintaining Physical Health*
  - *Number and percent of waiver participants who were determined to meet Level of Care requirements prior to receiving HCBS services\**

# Opportunity for Public Comment

# CMS Quality Measurement Domain: Safety

# Safety Domain: Measures/Concepts to be Analyzed Using Decision logic

- There are 2 measures/concepts in the LTSS safety domain that that will be analyzed using the decision logic
  - *Workforce development measure derived from workforce development domain of the C-CAT*
  - *ED visit resulting in an inpatient stay*



# Opportunity for Public Comment

# Summary of the Day 1 (Breakout Session)

# Adjourn for Day 1

# Day 2 Agenda

- Continue Review Medicaid IAP Program Area Measures (Breakout Session)
- Reconvene in 9th Floor Conference Room for LUNCH
- Finalized Review Medicaid IAP Program Area Measures (Breakout Session)
- Reconvene in 9th Floor Conference Room to Review TEP
- Recommendations to Coordinating Committee
- Opportunity for Public Comment
- Next Steps
- Closing Remarks
- Adjourn

# Summary of the Day 2 (Breakout Session)

# Reconvene in 9th Floor Conference Room to Review TEP Recommendations to Coordinating Committee

# 9th Floor Conference Room Streaming and Teleconference Information

## ■ *Streaming Audio Online*

- *Direct your web browser to:  
<http://nqf.commpartners.com/se/NQFLogin/>*
- *Under “Enter a Meeting” type in the meeting number: **103219** for Day 1 and **219880** for Day 2.*
- *In the “Display Name” field, type in your first and last names and click “Enter Meeting.”*

## ■ *Teleconference*

- *Dial (888) 802-7237 for Committee members or (877) 303-9138 for public participants.*