



MAP Medicaid Task Force Teleconference April 28, 2014

The National Quality Forum (NQF) convened a web meeting of the Measure Applications Partnership (MAP) Medicaid Task Force on Monday, April 28, 2014. An archive of the meeting is available on the [online archive](#).

Task Force Members in Attendance:

Harold Pincus, Task Force Chair	Jennifer Sayles, L.A. Care Health Plan
George Andrews, Humana, Inc.	Alvia Siddiqi, American Academy of Family Physicians
Foster Gesten, National Association of Medicaid Directors	Brock Slabach, National Rural Health Association
Nancy Hanrahan; subject matter expert: Care Coordination	Marsha Smith, Centers for Medicare & Medicaid Services (CMS)
Marc Leib; subject matter expert: State Medicaid	Ann Marie Sullivan; subject matter expert: Mental Health
Cynthia Pellegrini, March of Dimes	Lisa Tripp, National Consumer Voice for Quality Long-Term Care

Welcome and Review Meeting Objectives

Dr. Pincus welcomed members and public audience to the web meeting, and introduced Ann Hammersmith, General Council, NQF, who conducted a role call and disclosures of interest for all task force members. Dr. Pincus reviewed the meeting objectives, which were to:

- Build understanding of Medicaid Adult Core Set of measures including how MAP's input will assist CMS in meeting its goals for the program
- Discuss thematic feedback from participating states
- Identify information needs to support Medicaid Task Force decisionmaking
- Expand on prior work to identify measure gaps in the Medicaid Adult Core Set

Dr. Pincus also reviewed the MAP Medicaid Task Force Charge to set the tone of the meeting and to remind members of the purpose and structure of this work.

Medicaid Eligible Adult Population Overview

Dr. Pincus introduced Allison Ludwig, Senior Project Manager, NQF, who provided a background on the Medicaid eligible adult population. Ms. Ludwig shared key characteristics about the non-elderly adult Medicaid enrollee population, including demographics, health status, and Medicaid expenditures. NQF

staff will continue to monitor the changes in the population characteristics associated with Medicaid expansion under the Affordable Care Act (ACA).

Overview of Medicaid Adult Core Set

Dr. Pincus introduced Karen LLanos, CMS who provided a brief history of the Medicaid Adult Core Set (Core Set) of measures, including the statutory authority under ACA for development and annual improvement to strengthen the Core Set.

- The state-level voluntary reporting program of aggregate data from measures in the Core Set is supported by CMS through technical assistance and analytics support providers. The first annual reporting period closed February 2014.
- CMS launched two-year grant program December 2012 to support Medicaid agencies in testing the collection and reporting of the Core Set. In 2014, 26 grantee states reported at least 15 measures. In the future, information reported by states will be made available in the Annual Secretary's Reports and Reports to Congress.
- Ms. LLanos then reviewed CMS' goals for the program, which include:
 - States should understand and be interested in collecting and reporting data;
 - Data collection should be consistent across states;
 - For states to see the value of measures, so they can use them for their own quality improvement metrics;
 - And to ultimately increase the number of states reporting adult Medicaid data.
- Ms. LLanos reflected on the prior input from MAP, the value of the multi-stakeholder perspective, and the request for this task force's 2014 review identify opportunities to make the set stronger and measures to fill key gap areas.

Dr. Pincus facilitated discussion on the Core Set, specifically, the ideal number of measures, the future of technical assistance and analytics support, and how MAP's input can be most effective and useful.

MAP's Prior Recommendations and Properties of the Medicaid Adult Core Set

Dr. Pincus introduced Megan Duevel Anderson, Project Manager, NQF. Ms. Duevel Anderson presented MAP's prior recommendations on the Medicaid Adult Core Set completed in fall 2013, including general and measure specific recommendations, as well as gap areas. Ms. Duevel Anderson also reviewed the current MAP Measure Selection Criteria and properties of the Medicaid Adult Core Set.

Dr. Pincus facilitated the discussion on prior recommendation, notably the importance of considering differences between states (e.g. socioeconomic characteristics of beneficiaries, benefits structures, and Medicaid expansion under ACA).

Early Feedback from States on Using the Medicaid Adult Core Set

Dr. Pincus introduced Margo Rosenbach and Katie Adamek, Mathematica Policy Research. Ms. Adamek shared the early feedback gathered from states using the Medicaid Adult Core Set. Results indicated challenges implementing measures for in state-level reporting, as well as measure-specific challenges. Ms. Adamek also discussed CMS's efforts to update the Medicaid Adult Core Set by May 2014 and continue technical assistance and analytic support for the states.

Dr. Pincus facilitated discussion on feedback from states using the Core Set. The task force sought CMS' lessons learned from the first reporting year and plans to overcome barriers to state participation.

- CMS has provided clarification on the specifications for several measures.
- States are more comfortable with specific types of measures, such as HEDIS measures, that are already collected and reported for other purposes, and less so with measures that are more complex to address and report on topics such as care coordination.
- CMS will revisit the infrastructure and capacity needs for state reporting when the current grant program ends in 2014 and will continue to provide the best possible support in order to participate in reporting.

Information Needs of the Medicaid Task Force

Dr. Pincus reviewed the planned information sources to support future deliberations of the Medicaid Adult Core Set. Task force members highlighted the importance of:

- Alignment to minimize the burden of measurement, and misalignment resulting from modified measure specifications;
- Consideration for the differences in state demographics and the ongoing NQF Socioeconomic Status (SES) project to inform risk adjustment and efforts to address population disparities;
- Information about current measure development activities in key gap areas; and
- Input from both states participating and not participating in the grant program and reporting to better understand the underlining factors influencing participation.

Early Identification of Gaps and Opportunities for Alignment in the Measure Set

Dr. Pincus invited discussion of gap areas in the Medicaid Adult Core Set, yielding the following gaps:

- Behavioral health, including mental health and substance abuse,
- Measures to address disparities in care,
- Person- and family-centered care and engagement,
- Care coordination,
- Health and well-being, specifically for populations with chronic illness.

Opportunity for Public Comment

Dr. Pincus invited public participants to share their comments. Woody Eisenberg, Pharmacy Quality Alliance, recommended that MAP consider adding NQF-endorsed measures that address medication adherence for chronic illnesses and the use of antipsychotic drugs to the Medicaid Adult Core Set.

Summary and Next Steps

Dr. Pincus provided closing remarks, thanking the task force, presenters, and public for their participation. Important upcoming events for the task force include:

- June 5-6: In-Person Meeting of Medicaid Task Force
- July 9-30: Public Comment on draft final report
- July 18: MAP Coordinating Committee review of draft final report via web meeting
- August: Final report due to CMS and made available to the public