



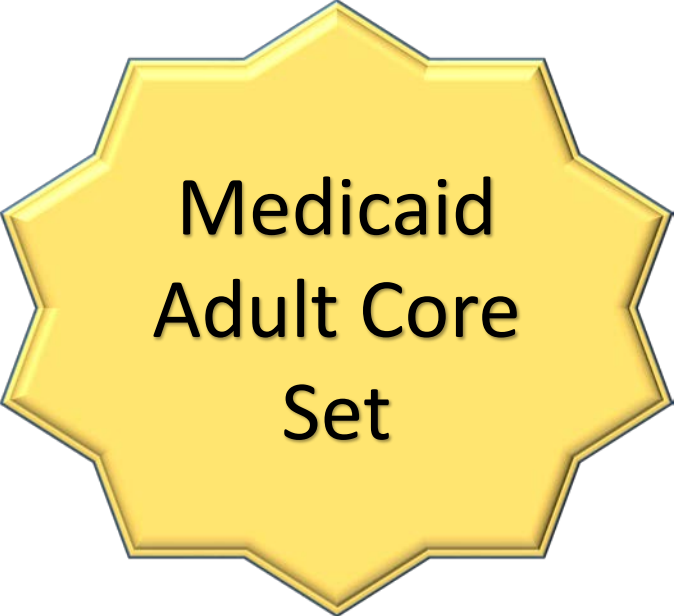
Federal Quality Management Practices CMS RFI on HCBS Recommended Measures

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Discussion Topics

- Set the Stage: The big picture view of CMS/Medicaid LTSS Quality Activities
 - Current Medicaid Reporting Structures
 - NCI in CMS LTSS Quality Activities
- Request for Information Details: Deadline, Document Organization, Questions
 - RFI Response Activity from State I/DD Systems
 - NASDDDS Meeting To Gather Comments
 - CMS Focus groups to gather comments
 - State Agencies Submitting Comments
- Role of NCI Coordinators- Crucial Activity
 - Ensuring reliability and availability of NCI Data
 - Discussing NCI with Quality Management Team in OA and SMA
- Responding to RFI
 - All states
 - Response to critical areas- not all questions
 - Share with NCI Team

CMS LTSS Quality Activities MLB




Medicaid
Adult Core
Set




RFI HCBS
Recommended
Measure Set



DEHPG
Quality
Management
Workgroup



Medicaid
Scorecard



1915(c)
Waiver
Performance
Measures

Details of Current CMS Quality Activities and NCI



Measures identified by a formal workgroup annually; voluntary participation by states; Medicaid Office in each state approves their participation and determines which measures to report; Person-Reported Outcomes-Performance Measures (PRO-PM); **NCI currently approved as the only Long Term Services/Supports measure.**
<https://www.medicare.gov/medicare/quality-of-care/downloads/performance-measurement/2020-adult-core-set.pdf>



Measures selected by CMS from data reported by states; voluntary participation by states; Medicaid Office in each state confirms participation to CMS; three pillars of reporting - **State Health System Performance, State Administrative Accountability, and Federal Administrative Accountability**; LTSS is currently a cost per person measure and a checkoff re: Does the State Use Experience of Care Survey? Includes **NCI as one of three options** (NCI, NCI-AD, CAHPS HCBS).
<https://www.medicare.gov/media/file/2020-medicare-chip-scorecard-factsheet.pdf>



Measures identified by state 1915(c) waiver Operating Agencies; required reporting by states for each separate waiver (unless shared administration); Six statutory assurance areas for reporting (Administrative Authority, Level of Care, Qualified Providers, Service Plan, Health and Welfare, Financial Accountability); **NCI currently included as a confirming/supporting data source within several state 1915(c) Waivers**;
<https://wms-mmdl.cms.gov/WMS/faces/portal.jsp>



Measures identified by a workgroup within CMS; Request for Information posted for public comment at this time; measures will be voluntary at launch; potentially will fill the gap in HCBS/LTSS measures for other CMS measurement activity (see above); currently framed by NQF HCBS Quality Domains; **NCI included in both base measure set and extended measure set**;
<https://www.medicare.gov/medicare/quality-of-care/downloads/rfi-hcbs-recommended-measure-set.pdf>

CMS LTSS Quality Activities- DEHPG Workgroup

Medicaid
Adult Core
Set

RFI HCBS
Recommended
Measure Set

DEHPG Quality
Management
Workgroup

- **Began meeting with National Associations and State Agencies in 2019**
- **Began with exploration of new measurement system**
- **Recommended CMS consider complete review of 1915(c) Interim Guidance for Quality Management, including Waiver PM /EBR/372 reporting procedures**

RFI Details: Deadline, Document Organization, Selection Criteria

- Deadline Originally Set as Oct. 19; moved to Nov. 18 COB
- Document structure:
 - Intro / Background, purpose, content, organization, measure selection criteria, limitations, types of measures.
 - Recommended measures organized by NQF domains,
 - Core set / extended set of measures
- 47 distinct questions posed by CMS throughout the RFI
- Respondents not required to respond to all questions – can offer comment on selected, priority areas

- Considering Measure Selection Criteria
 - Importance to measure and report
 - Scientific Acceptability of Measure Properties
 - Feasibility
 - Usability and Use
 - Related and Competing Measures
 - Level at Which Measure Can Be Applied
 - Type of Measure: process, structure or outcome

RFI Response Activity from State I/DD Systems

- NASDDDS Meeting To Gather Comments- Oct. 13
- CMS Focus groups to gather comments Sept. 30, Oct. 19 and NOV.16
- NASDDDS Draft Comments distributed to State I/DD Directors and QM Directors;
- State Agencies Submitting Comments Directly to CMS

Summary of Comments from NASD DDS Members

- General Comments
 - Must Undertake full review of HCBS Quality Management Requirements including 1915(c)
 - Any recommended measures must not exclusively add new measures on top of existing compliance measures
 - Transition from current structure of compliance measurement to outcome based measures must allow for transition time and take into account current Waiver Cycles
 - Infrastructure for reporting must be supported by federal partners
 - Must allow for customization and continued identification of priorities by individual states, and within individual HCBS programs
- Contents Specific Comments
 - CMS indicates measure participation is voluntary and should assure they remain voluntary and not become expectations in the future

Summary of Comments from NASDDDS Members cont..

- Contents Specific Comments

- Criteria of most importance is usability/practical application of measures to drive improvement in state systems.
- Proprietary measures/instruments such as NCI, when already consisting of major majority of states, is not a factor to rule out inclusion in acceptable measures
- Recommend any work to develop standard set of measures be done in close partnership with state Medicaid and operating agencies
- Involve advocates and people with lived experience in determining importance of measure
- Ensure balance of measures covering process, structure and outcomes

Key points for NCI Coordinators

- Reliability/validity of NCI Data through implementation fidelity
 - Ensuring protocols are followed
 - Training adherence
 - Providing feedback to NCI
 - Annual work plan review
- Understanding of NCI team activities related to reliability/validity and measure development.
 - NQF submission
 - Testing of various modes
 - Robust revisions cycle
 - Annual work plan review
- NCI tested design protocols to ensure meaningful participation of people with IDD

Key points for NCI Coordinators (continued)

- Understanding NCI's flexibility and responsiveness to state needs
 - Ease of adding questions to reflect state priorities
 - State IDD agency role in establishing measures
- Discussing NCI with Quality Management Team in Operating Agency (OA) and State Medicaid Agency (SMA)
- Support NCI's role in current state Quality Management Structure
- Understanding the relationship between NCI, Medicaid Adult Core Measure Set, HCBS Waiver Performance Measures, RFI vision, and state's own quality measures



Responding to RFI

- Due date November 18th
<https://www.medicaid.gov/medicaid/quality-of-care/downloads/rfi-hcbs-recommended-measure-set.pdf>
- Send comments to: HCBSMeasuresRFI@cms.hhs.gov
- Value of responses from states
 - Response to critical areas;
 - not required to respond to all questions or all areas;
 - opportunities to reflect on structure /organization of recommended measures-
(e.g. by NQF domain vs. HCBS Final Rule)

Questions or Comments?

1. What is your state's current activity around the RFI?
2. Suggestions for ways in which we can assist?

Contact the NCI Team:

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