Addressing Performance Measure Gaps in Home and Community-Based Services to Support Community Living

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Introductions & Opening Remarks
HCBS Committee

- Joe Caldwell (Co-Chair)
- Stephen Kaye (Co-Chair)
- Robert Applebaum
- Kimberly Austin-Oser
- Suzanne Crisp
- Jonathan Delman
- Camille Dobson
- Sara Galantowicz
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- Sarita Mohanty
- Gerry Morrissey
- Ari Ne’eman
- Andrey Ostrovsky
- Mike Oxford
- Lorraine Phillips
- Mary Smith
- Anita Yuskauskas
Introductions

NQF Project Team
- Margaret Terry, RN, PhD
  - Senior Director
- Rachel Roiland, RN, PhD
  - Senior Project Manager
- Andrew Anderson, MHA
  - Senior Project Manager
- Kim Ibarra, MS
  - Project Manager
- Desmirra Quinnonez
  - Project Analyst

Federal Advisory Group
- Sophia Chan, CMS
- Eliza Bangit, ACL
- Ellen Blackwell, CMS
- Mike Smith, CMS
- Elizabeth Ricksecker, CMS
- D.E.B. Potter, ASPE
- Lisa Patton, SAMHSA
Today’s Session

- Provide an overview of the policy environment related to home and community based services (HCBS)
- Describe quality measurement within the realm of HCBS
- Describe NQF’s HCBS Quality Project
- Provide an update on the project’s progress and next steps
- Q&A
HCBS and the Policy Environment
HCBS

- Most people prefer to live in their community

- Home and community-based services are critical to promoting independence, wellness, and self-determination for people with long-term care needs

- Examples of HCBS services include personal care, supported employment, family caregiver supports, and coordination and rehabilitation services
HCBS Consumers

- Individuals with:
  - Multiple chronic diseases
  - Those 65+
  - Physical disabilities
  - Intellectual/developmental disabilities
  - Serious mental illness
  - Any other condition that results in the individual needing assistance with self-care activities and other activities that support community living
Current and Projected HCBS Demand

- 37 million individuals have a disability
  - >50% of working age (18-64)

- 13.6 million individuals live with chronic mental illness
  - 60 million people experience a mental illness each year

- By 2030: 70 million older adults in the United States
  - 19% of the total population

- By 2040: 1 million individuals with multiple chronic conditions
HCBS Providers and Spending

- States continue to shift resources to HCBS
  - Medicaid spending LTSS: $152 billion
  - Managed LTSS: Increased 55% from 14.5 billion in 2013, to 22.5 billion in 2014
  - $80.6 billion for HCBS and $71.2 billion for institutional LTSS
  - 7.7% increase in HCBS spending, from $75 billion to $81 billion between 2013 & 2014
  - Approximately $470 billion is the estimated value of family caregiving in the US
Medicaid HCBS Expenditures as a Percentage of Total Medicaid LTSS Expenditures, FY 1995–2014
Regulatory Changes Affecting HCBS Quality

Medicaid Managed Care Final Rule

- Major Goals
  - Enhance alignment among programs
  - Enhance beneficiary experience and protections
  - Strengthen payment provisions and program integrity
  - Support delivery system reforms
  - Promote quality of care
Medicaid Managed Care

- Regulations specific to MLTSS:
  - Identify and assess enrollees with LTSS needs
  - Comply with HCBS settings rule
  - Implement a person-centered planning process
  - Apply a provider credentialing process to behavioral health and LTSS providers
  - Create a stakeholder group
    - Obtain and address the opinions of beneficiaries, individuals representing beneficiaries, providers, and other stakeholders in the design, implementation, and oversight of a state’s MLTSS program
Medicaid Managed Care

Regulations specific to Quality of Care:

- Develop a quality assessment and performance improvement program specific to LTSS

- A plan for those who need LTSS, have special needs, and managed care organization that provide LTSS

- Identify standard performance measures related to:
  - Quality of life
  - Rebalancing
  - Community integration activities
Quality Measurement and HCBS
Sources of Measures in HCBS

- Testing Experience Functional Tools (TEFT)
  - Experience of Care Survey
    - 19 performance measures—update on EOC
  - Functional Assessment Standardized Tools (FASI)

- Surveys
  - National Core Indicators
  - Money follows the Person Quality of Life survey
Sources of Measures in HCBS

- State Programs such as 1915 waivers
  - Percent of HCBS consumers whose primary case manager asked about their preferences
  - Percent of HCBS consumers with paid employment

- Medicaid Managed LTSS
  - Performance measures related to
    - Quality of life
    - Rebalancing
    - Community integration activities
HCBS and Quality Measurement: Why Now?

- A high-quality HCBS system is needed to support older adults, people with multiple chronic conditions, and people with disabilities of all ages.

- Established frameworks and quality domains for evaluating long-term supports and services (LTSS) and HCBS exist.

- Availability and uptake of performance measures is promising.
HCBS and Quality Measurement: Why NQF?

- An independent, nonprofit, membership organization that convenes all stakeholders working to improve health and healthcare through quality measurement

- Gold standard for quality—selects & endorses best health and healthcare quality measures

- Supports the advancement of measurement science
What Is a Healthcare Performance Measure?

- Healthcare performance measures are tools used to *quantify* the quality or cost of care provided to patients and their families.

- They allow us to *gauge* the quality of care that is provided and help us understand whether and how much improvement activities *improve* care and outcomes.
NQF- Performance Measures

- Five criteria that are evaluated
  - Evidence & Gap exists
  - Scientific Acceptability –Reliability and Validity
  - Feasibility
  - Usability
Why Measure?

For many reasons, including:

- Measures drive improvement.
- Measures inform consumers and other stakeholders.
- Measures influence payment.

*Measurement is a quality improvement tool, not an end in and of itself*

*A performance measure is a way to calculate whether and how often the system does what it should.*
NQF and Measurement

The Performance Measurement Enterprise

Setting Goals and Priorities
Developing and Testing Measures
Endorsing Measures
Selecting and Using Measures

Measure Gaps Projects
Consensus Development Projects
Measure Applications Partnership; National Quality Partners

Goal: improved outcomes
Home and Community Based Services Quality Project
A new frontier for NQF...

Addressing Performance Measure Gaps in Home and Community-Based Services to Support Community Living
HCBS Quality Project

Purpose:
- Provide multi-stakeholder guidance on the highest priorities for measurement of home and community-based services that support high-quality community living

Importance:
- Broad and inclusive orientation to community living and maximizes opportunities for public input
- Supports the aims of the Affordable Care Act, the National Quality Strategy, and HHS’ Community Living Council
- Opportunity to address the gaps in HCBS measurement and provide direction for future performance measurement
Project Objectives

1. Create a conceptual framework for measurement, including an HCBS definition
2. Perform a synthesis of evidence and environmental scan for measures and measure concepts
3. Identify gaps in HCBS measures based on the framework and environmental scan
4. Make recommendations for advancing HCBS quality measurement
Since we last met....Key Milestones

- Committee Web Meeting
  - Feb 2015

- In-Person Meeting
  - Apr 2015

- Interim Report: Definition & Framework
  - July 2015

- Committee Web Meeting
  - Aug 2015

- Interim Report: Environmental Scan & Synthesis
  - Dec 2015

- Committee Web Meeting
  - Jan 2016

- In-Person Meeting
  - March 2016

- Interim Report: Priorities & Recommendations
  - June 2016

- Final Report
  - Sept 2016
2nd Interim Report
Synthesis of Evidence & Environmental Scan

- Purposes:
  - A point-in-time assessment meant to capture the current state of the HCBS quality measurement landscape
  - A starting point for discussing next steps for moving quality measurement forward in HCBS

- Results:
  - Number of measures, measure concepts, and instruments within domains varied widely
  - Few measures truly captured the characteristics of quality that matter most to stakeholders
Public Comments on 2nd Interim Report

- Measurement Domains and Sub-domains
  - Variable distribution of measures across domains
    » Lack or very small number of measures in the Consumer Voice, Equity, Community Inclusion, Caregiver Support, and Human and Legal Rights domains
  - Need for additional domain and sub-domain refinement
    » A need to delineate differences among domains and sub-domains
Public Comments on 2nd Interim Report

- **Importance HCBS Quality Measurement**
  - Strong support for assessing and monitoring HCBS quality
  - Quality initiatives and measurements must be person-centered, not one-size-fits all

- **Challenges facing HCBS Quality Measurement**
  - Lack of valid and reliable measures for many of the complex concepts captured by the domains
  - Difficult to determine the necessary and appropriate level of analysis for a given measurement domain or sub-domain
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Priorities & Recommendations
June 2016

Final Report
Sept 2016
In-Person Meeting

- Objectives
  - Prioritize and refine the domains and subdomains
  - Identify gaps in performance measurement
  - Identify short term, intermediate, and long term recommendations to advance HCBS performance measurement
HCBS Quality Measurement Domains

Improved Consumer Outcomes for Individuals Using HCBS
Draft Recommendations

- Cross-cutting Recommendations
  - Address overall approaches to quality measurement in HCBS

- Domain-specific recommendations
  - Short-term: measures ready for implementation or expansion in the near future
  - Intermediate: further development needed on existing measures
  - Long-term: more research is needed, particularly around building an evidence base to support measure development
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Sept 2016
Support quality measurement work across all domains and subdomains, rather than devoting resources to a few

Identify and implement a consistent approach to quality measurement (e.g., data collection, analysis, reporting, and quality improvement activities)

Leverage technology for data collection, storage, analysis, and reporting of quality data

Build on the existing quality measurement landscape when developing or expanding the use of quality measures across HCBS
3\textsuperscript{rd} Interim Report
Draft Cross-Cutting Recommendations

- Use both system and individual level data to develop HCBS quality measures

- Support a balanced approach to HCBS quality measurement with structure, process, and outcome measures in each domain

- Develop a menu of tailorable HCBS quality measures that can be easily incorporated into existing HCBS programs to increase the use of similar reliable and valid measures throughout the HCBS system
3rd Interim Report
Draft Domain Specific Recommendations

- Short-Term:

  Person-Centered Planning and Coordination

  - Expand the implementation of process measure concepts related to the assessment and person-centered subdomains
3rd Interim Report
Draft Domain Specific Recommendations

- Intermediate:

  Person-Centered Planning and Coordination

  - Consumer surveys in use within various states should be explored for items that could be translated into quality measures.
3rd Interim Report
Draft Domain Specific Recommendations

- Long Term:
  
  Human and Legal Rights

  - Develop the evidence base for the processes that the HCBS system can implement to optimize HCBS consumers’ privacy, preservation of their human and legal rights, and ability to exercise their rights.
3rd Interim Report
Draft Promising Measures - Examples

- Person-Centered Planning and Coordination
  - % of HCBS beneficiaries and family members responding to the National Core Indicators (NCI)™ survey who report satisfaction with the development and implementation of their individual support plans

- Human and Legal Rights
  - % of HCBS beneficiaries and/or guardians who are informed about the ways to identify and report abuse, neglect, and exploitation
Public Comments on 3rd Interim Report

- Global Recommendations
  - Need for clarity on the purpose, use, and importance of a menu of HCBS quality measures
  - Enhance specificity to ensure that there is enough information for stakeholders to take action
  - Suggestions for prioritizing domains and sub-domains
Public Comments on 3rd Interim Report

- Domain Specific Recommendations & Promising Measures
  - Specific edits to domain and subdomain descriptions
  - Suggestions for more actionable short term steps that can be taken in the domains where there were few or no short-term recommendations
Next Steps....Final Report

- Committee continues to
  - Work towards consensus....

- Refine the domains and subdomains
  - Definitions and descriptions
  - Recommendations

- Identify promising measures from public comment and the Committee’s review of relevant surveys and MLTSS contracts

Final Report – September 2016
Q & A
Questions or Comments?

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