



January 18, 2019

Submitted electronically to: HCBSQualMeasures@mathematica-mpr.com

Mathematica Policy Research
Medicaid Quality Measures Project Team

Re: Comments on Medicaid Quality Measure – New Medicaid Beneficiaries Using HCBS First

Dear Project Team:

The Center for Consumer Engagement in Health Innovation at Community Catalyst appreciates the opportunity to provide comments on the proposed measure for new Medicaid long-term services and supports beneficiaries who receive home and community based services.

Community Catalyst is a national non-profit advocacy organization dedicated to quality affordable health care for all. Since 1998, Community Catalyst has been working to build the consumer and community leadership required to transform the American health system. The Center for Consumer Engagement in Health Innovation (Center) is a hub devoted to teaching, learning and sharing knowledge to bring the consumer experience to the forefront of health. The Center works directly with consumer advocates to increase the skills and power they have to establish an effective voice at all levels of the health care system. We collaborate with innovative health plans, hospitals and providers to incorporate the consumer experience into the design of their systems of care. We work with state and federal policymakers to spur change that makes the health system more responsive to consumers.

We have been working to improve home and community-based services (HCBS) for consumers for the last five years, producing tools for consumer advocates and other stakeholders to use in seeking improvements and supporting the work of consumer advocates as they engage with individuals who are dually-eligible for Medicare and Medicaid and/or who rely on long-term services and supports (LTSS). Working to ensure care is person- and family-centered is at the core of what we do.

We appreciate your focus on ensuring that Medicaid enrollees have access to the home and community based services that they need. We believe it is important to support enrollees in their choice to receive LTSS in the home setting, instead of in institutional settings.

However, we are concerned that the measure is very narrowly constructed and that therefore it is not useful as a measure of enrollees' quality of care. We strongly urge you to emphasize the development and implementation of measures that focus on participant experience and quality of life. These are critical gaps in the measurement of HCBS quality, which this proposed measure does not fill.

Specifically, we have the following comments and questions:

1. The denominator is limited to individuals who did not receive any LTSS in the year prior to first using any LTSS in the measurement year. We would like to know what percentage of Medicaid LTSS beneficiaries this denominator captures in each state.
2. The logic model presumes that individuals have some kind of gradual decline that triggers an assessment and then implementation of LTSS services. We note that in our experience, this is not a common clinical scenario and in fact more instances of LTSS need come in the face of a health crisis. Does Mathematica have any data to support this assumption built into the logic model?
3. Long-term institutional care use is defined for dual-eligible beneficiaries as any nursing facility admission fully covered by Medicaid. However, we note that beneficiaries who partially contribute to the cost of their nursing facility would be excluded from this definition and would not be captured in the definition of long-term institutional care use.
4. We would like to clarify how the measure developers anticipate this measure being used. We are concerned that this measure may not be useful for comparing plan performance as many external factors could influence performance. We do not believe this measure should move forward in development. However, should it do so, we believe that this measure might be more applicable at the state level.

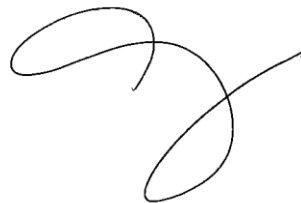
Overall, we are most concerned that this measure does not appropriately measure what is most important, which is whether consumers' needs for long-term services and supports are being met. We recommend that CMS instead emphasize measures that directly assess beneficiaries' experiences with home and community based services, including the impact on their quality of life and community inclusion.

Should you have any questions or wish to discuss these comments further, please do not hesitate to contact us at adembner@communitycatalyst.org and ahwang@communitycatalyst.org.

Sincerely,



Alice Dembner



Ann Hwang