

Monitor, Evaluate and Respond: Use Measurement to Demonstrate Performance

September, 25 2019

Welcome and Introductions

- Torshira Moffett, MPH
 - Director of Product Development
 - National Committee for Quality Assurance (NCQA)



Agenda



NCQA's LTSS Measurement Framework

Additional Resources



What we do, and why

OUR MISSION

To improve the quality of health care

OUR METHOD



Measurement

We can't improve what we don't measure



Transparency

We show how we measure so measurement will be accepted



Accountability

Once we measure, we can expect and track progress



Improving Quality Measurement for LTSS



NCQA's LTSS standards and HEDIS LTSS measures provide a quality measurement framework.



LTSS Landscape Why NCQA Created the LTSS Programs



Increase in use of home and communitybased services to deliver LTSS



Shift in coordination of LTSS to managed care from fee-for-service



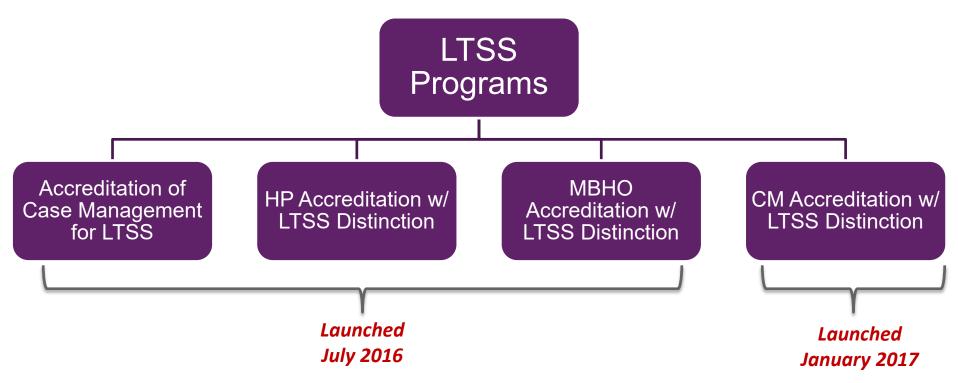
States seeking accountable, integrated health care delivery



Interest in improving the quality of care for people with complex care needs



NCQA's LTSS Evaluation Programs



HP = Health Plan
MBHO = Managed Behavioral Healthcare Organization



Program Adoption

(As of August 2019) WA ME ND MT MN OR WI SD ID NY WY IA NV NE OH IN IL. UT CO CA MO KS ΚY NC TN ΑZ NM OK AR SC MS AL GA LA TX ,FL ΑK н

103 organizations have received accreditation, distinction or are in process

79 organizations in **16** states with accreditation or distinction

- 68 organizations with CM-LTSS Accreditation
- 10 health plans and 1 case management organization with LTSS Distinction



State Adoption of NCQA's LTSS Programs

NCQA CM-LTSS Accreditation Required for Providers

Massachusetts

Support for Providers to Pursue CM-LTSS Accreditation

Alabama

NCQA LTSS Distinction Required for Plans

- Kansas
- Pennsylvania
- Tennessee
- Virginia
- North Carolina



CM-LTSS Accreditation



LTSS 1:

Program Description



LTSS 5:

Measurement and Quality Improvement



LTSS 2:

Assessment Process



LTSS 6:

Staffing, Training and Verification



LTSS 3:

Person-Centered Care Planning



LTSS 7:

Rights and Responsibilities



LTSS 4:

Care Transitions



LTSS 8:

Delegation



CM-LTSS Accreditation Overview

LTSS 1: Program Description

Use current and emerging evidence and professional standards in the development, ongoing review and update of their programs.

LTSS 2: Assessment Process

Have a systematic process for assessing the needs and characteristics of the individuals it serves.

LTSS 3: Person-Centered Care Planning

Coordinate person-centered services for individuals by developing of individualized case management plans and monitoring progress against the plans.

LTSS 4: Care Transitions

Establish a process for safe transitions and analyze the effectiveness of the process.



CM-LTSS Accreditation Overview

LTSS 5: Measurement and Quality Improvement

Measure and work to improve individuals' experience, program effectiveness and active participation rates.

LTSS 7: Rights and Responsibilities

Communicate commitment to the rights of individuals and their expectations of individuals' responsibilities, as well as mitigating critical incidents.

LTSS 6: Staffing, Training and Verification

Define staffing needs, provide staff with ongoing training and oversight, and verify health care staff credentials, where applicable.

LTSS 8: Delegation

Monitor the functions performed by other organizations for the health plan.



HEDIS LTSS Measures (2019)

LTSS Comprehensive Assessment and Update

LTSS Comprehensive Care Plan and Update

LTSS Shared Care Plan with Primary

Care Practitioner

LTSS Reassessment/Care Plan Update after Discharge

- 4 first-year measures included in special HEDIS volume for health plans and CBOs
- Specified to use case management data
- Optional reporting to NCQA with no public reporting
- Data not audited

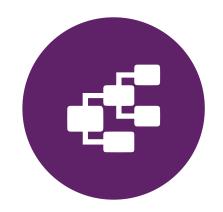
Developed under contract with CMS and partnership with Mathematica Policy Research



NCQA's LTSS Measurement Framework: Key Takeaways



Demonstrates use of a nationally endorsed quality framework for people with complex care needs



Ensures the use of structured processes to manage care transitions and deliver person-centered care

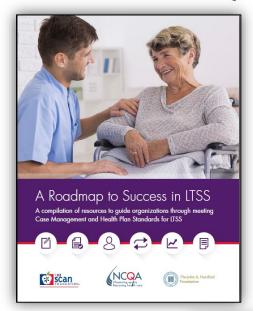


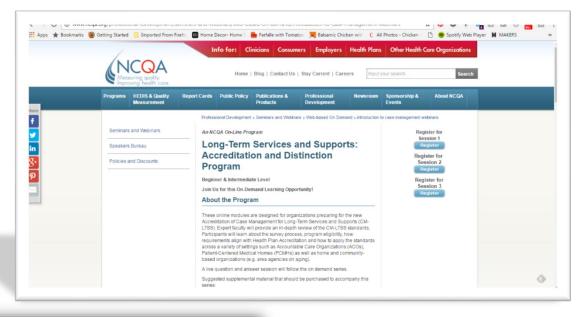
Supports contracting between states, health plans and other case management organizations



Resources

NCQA Educational Resources









Contact:

Torshira Moffett moffett@ncqa.org

Thank You!



https://hcbsbusinessacumen.org





For more information, please visit:

www.hcbsbusinessacumen.org

E-mail: businessacumen@advancing states.org

Or Call: 202.898.2583