Technical Assistance Webinar to Support State Reporting of the Child, Adult, and Health Home Core Sets: FFY 2020 Updates and Reporting Resources Transcript

April 2020

[Slide 1] Hello and thank you for joining us virtually for this technical assistance webinar. Today, we will be reviewing updates to the Federal Fiscal Year 2020 Child, Adult, and Health Home Core Sets. My name is Alli Steiner, and I am part of the Technical Assistance and Analytic Support Team for the Medicaid and CHIP Core Set measures. I am joined by my colleagues, Isabel Platt, Caroline Margiotta, and Patricia Rowan, who will also be presenting during the webinar.

The presentation slides are available in the Resource List on the left side of your webinar console. The slides and the transcript are also available on the Reporting Resources pages of Medicaid.gov.

Next slide, please.

[Slide 2] On this slide, you can find the objectives for today's webinar. First, Isabel will review major updates to the 2020 Child, Adult, and Health Home Core Sets, including measures that were added, removed, and modified for the FFY 2020 reporting year. Then, Caroline will walk us through notable changes to the technical specifications. Tricia will discuss some of CMS's data quality priorities for this coming reporting year, and finally, I will review technical assistance resources to help states calculate the measures.

We wanted to note that CMS will be conducting a separate webinar in the fall about MACPro updates and use of the MACPro system. You will be receiving an email later in the summer about timing and registration.

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[Slide 3] At any point in the webinar, you can provide feedback using the Survey widget in the menu at the bottom of the event console. If you have any questions about today's webinar, or if you would like to request any technical assistance, please indicate that in the evaluation form. You can also email MACQualityTA@cms.hhs.gov at any time to ask a question or request technical assistance.

Next slide, please.

[Slide 4] Now I will pass it over to Isabel to discuss the updates to the Child, Adult, and Health Home Core Sets for FFY 2020.

Thanks, Alli. Next slide, please.

[Slide 5] This slide provides a high-level overview of the updates to the Core Sets for FFY 2020. Four new measures were added this year.

- Metabolic Monitoring for Children and Adolescents on Antipsychotics was added to the Child Core Set;

- Use of Pharmacotherapy for Opioid Use Disorder was added to both the Adult and Health Home Core Sets;
- National Core Indicators was added to the Adult Core Set; and
- Follow-Up After Emergency Department Visit for Alcohol and Other Drug Abuse or Dependence was added to the Health Home Core Set.

In the Child Core Set, CMS modified the Weight Assessment and Counseling for Nutrition and Physical Activity for Children and Adolescents measure. Two new indicators were added related to Counseling for Nutrition and Counseling for Physical Activity, so states will now be reporting three indicators for this measure.

And finally, three measures were retired from the Child Core Set, and two measures were retired from the Adult Core Set, which are shown here on the slide. Please note that the FFY 2020 reporting cycle generally covers utilization occurring in calendar year 2019.

For more information about why these measures were added to or removed from each Core Set, there are links in the bottom of this slide to the CMCS Informational Bulletins from November 2019.

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[Slide 6] Now we'd like to review the new and modified measures in a little more detail. Note that the FFY 2020 Resource Manuals contain the technical specifications for the measures. A link can be found toward the end of this slide deck.

The first new measure in the Child Core Set is Metabolic Monitoring for Children and Adolescents on Antipsychotics, or APM. This measure assesses the percentage of children ages 1 to 17 who had two or more antipsychotic prescriptions and had blood glucose testing, cholesterol testing, or both blood glucose and cholesterol testing. The measure is calculated using the administrative method.

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[Slide 7] CMS added a new measure to both the Adult and Health Home Core Sets for FFY 2020, which is the Use of Pharmacotherapy for Opioid Use Disorder measure, or OUD. This measure captures the percentage of adult Medicaid beneficiaries with an opioid use disorder who filled a prescription or were administered a medication for the disorder during the measurement year. The measure includes five rates.

The first is a total rate that captures use of any of four medications used in medication assisted treatment of opioid dependence and addiction;

And the four other rates capture different types of FDA-approved drugs: buprenorphine, oral naltrexone, long-acting injectable naltrexone, or methadone.

This measure is calculated using the administrative method.

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[Slide 8] This slide provides more detail about the numerator and denominator for this measure.

At the bottom of the slide is a link to the value sets for this measure on the Medicaid.gov website. The value sets include the codes used to identify opioid use disorder for the denominator, as well as the drug codes to identify the numerator for each rate.

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[Slide 9] The National Core Indicators measure is new to the Adult Core Set, with the acronym NCIDDS. This measure provides information on beneficiaries' experience and self-reported outcomes of long-term services and supports for individuals with intellectual and developmental disabilities, and their families. The National Core Indicators in-person survey is conducted in approximately 47 states. For a list of participating states, please click on the link for the NCI website.

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[Slide 10] This slide contains more detail on the NCI survey. We'd like to emphasize that many states already conduct this survey. CMS plans to use data submitted to the measure steward to report state-level performance results.

More information about this measure can be found in the FFY 2020 Adult Core Set Resource Manual and on the NCI website.

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[Slide 11] The Follow-Up After Emergency Department Visit for Alcohol and Other Drug Abuse or Dependence measure, or FUA, has been in the Adult Core Set since FFY 2017, and has been added to the Health Home Core Set for FFY 2020. This measure captures the percentage of emergency department visits for Health Home enrollees with a principal diagnosis of alcohol or other drug abuse or dependence who had a follow-up visit. This measure has two numerators: a 7-day follow-up and a 30-day follow-up. Note that the denominator for the Health Home measure is specified for age 13 and older, while the Adult measure continues to be specified for beneficiaries age 18 and older.

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[Slide 12] As noted earlier, one measure in the Child Core Set – the Weight Assessment and Counseling for Nutrition and Physical Activity for Children and Adolescents measure, or WCC – was modified to add two new indicators.

The Child Core Set already included the BMI percentile documentation indicator; for FFY 2020, CMS has added the Counseling for Nutrition and the Counseling for Physical Activity indicators. The addition of two Counseling Indicators shifts the measure from being a purely administrative measure that documents whether a child's BMI was recorded, to a more meaningful measure that assesses the extent to which health care providers take action on those BMI results. And just to reiterate, please refer to the resource manuals for more details about the new measures.

This measure can be calculated using either the administrative or hybrid methods. Next slide.

[Slide 13] Now, I'd like to pass it over to Caroline Margiotta, who has some additional updates to the measure specifications.

Thanks, Isabel. Next slide, please.

[Slide 14] First, I will present cross-cutting changes to the specifications for FFY 2020. And then, I will drill down to major changes for a few measures. You can also find information about these changes in the Summary of Updates document, which is described later in the webinar.

For several measures, the format of medication lists and/or value sets were modified to align with digital measure formatting. Measures that are affected are shown on this slide using the measure acronyms. And if you are not familiar with the measure names and acronyms, we have included a measure list for each Core Set in the appendix to this slide deck.

In addition, guidance was added on how to access medication lists through the NCQA Store. Note that there is no charge to access these medication lists. Measures that are <u>affected</u> by this change are shown on this slide.

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[Slide 15] Guidance was also added to clarify that states should combine data across all programs, delivery systems, and managed care plans when determining continuous enrollment and allowable gaps for Core Set measures. In other words, states should look for continuous enrollment in Medicaid and CHIP, rather than within individual plans.

Also, a few measures listed on this slide now exclude beneficiaries with advanced illness, and value sets were modified accordingly.

In addition, guidance was added to the resource manual on whether telehealth is eligible for use in reporting. Measures based on HEDIS specifications include telehealth, unless the specifications say otherwise.

<u>Please note that this guidance applies to the FFY 2020 Core Sets, which cover utilization in calendar year 2019</u>.

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[Slide 16] For two measures – the APP measure in the Child Core Set and the SAA measure in the Adult Core Set – updates were made to the reported age groups.

For the APP measure, the rates for Ages 1 to 5 and Ages 6 to 11 were collapsed into one rate for Ages 1 to 11.

And for the SAA measure, the rate for Ages 19 to 64 was replaced with a rate for Age 18 and Older.

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[Slide 17] Now we will review a few measures that had major specification changes for FFY 2020.

First, there were substantial updates to the numerator for the Cervical Cancer Screening, or CCS, measure in the Adult Core Set. Consistent with previous years, the numerator for FFY 2020 includes women ages 21 to 64 who had a cervical cancer screening in the last three

years. However, the specifications for cervical cancer screening in women ages 30 to 64 changed for FFY 2020. Now, the measure includes women ages 30 to 64 who had cervical <u>high-risk</u> HPV testing alone or in conjunction with cervical cytology within the last five years.

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[Slide 18] This slide shows updates to the Timeliness of Prenatal Care measure in the Child Core Set and the Postpartum Care measure in the Adult Core Set.

As you can see, the timeframe for the denominator changed. For FFY 2020, the specifications now include live births occurring between October 8th of the year prior to the measurement year, and October 7th of the measurement year.

In addition, the numerator for both measures changed. For the Timeliness of Prenatal Care measure, the numerator for FFY 2020 now includes prenatal care visits occurring before the enrollment start date. And the numerator for the Postpartum Care measure, now includes postpartum visits occurring on or between 7 and **84** days after delivery.

Finally, for both measures, the continuous enrollment requirement was changed to 60 days after delivery.

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[Slide 19] On this slide, we list some clarifications and examples that were added to the specifications for the Screening for Depression and Follow-Up Plan, or CDF, measure in the Child, Adult, and Health Home Core Sets.

First of all, the specifications clarify that enrollees with an active diagnosis of depression or bipolar disorder are excluded from the measure as the intent of the measure is to promote screening of patients who were never previously diagnosed with depression or bipolar disorder.

The specifications also clarify that an active diagnosis starts prior to the start of the encounter but may or may not have an end date. In addition, the specifications clarify that, if a recommended follow-up includes an additional screening, it must occur on the same encounter as the initial positive screen – an additional screen alone is not considered a valid follow-up intervention.

Some examples of a follow-up plan that meet numerator criteria are shown on the slide.

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[Slide 20] We would also like to highlight major changes to the Plan All-Cause Readmissions, or PCR, measure in the Adult and Health Home Core Sets.

First, the definitions of the index hospital stays and 30-day readmission events now include observation stays.

Another change is the addition of a new category of outlier beneficiaries. Outlier beneficiaries are defined as those with four or more index hospital stays during the measurement year, from January 1 to December 1.

Outlier beneficiaries should be excluded from the existing risk-adjusted readmission rates, which are defined in the specifications.

Finally, three new rates were added to the measure to capture the outlier beneficiaries, namely the Count of Beneficiaries in the Medicaid Population, the Count of Outlier Beneficiaries, and the Outlier Rate.

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[Slide 21] We wanted to mention a few other updates to the PCR measure. First, the risk-adjustment weighting process was modified to incorporate observation stay weights and remove base risk weights.

Second, the specifications clarify that conditions not listed in the risk-adjustment tables should receive a weight of zero when calculating the measure.

In addition, acute and non-acute inpatient discharges were added to the guidance on Utilization Risk Adjustment Determination.

And finally, the specifications include guidance on calculating risk-adjusted readmission weights and new data elements.

Next slide.

[Slide 22] On this slide, the first table shows which data elements should exclude outlier beneficiaries, and the second table shows which should include outlier beneficiaries. As you can see, some of the data elements are calculated automatically in the MACPro reporting system based on data elements reported by states. Additional guidance can be found in the Resource Manual.

Next slide.

[Slide 23] Now I would like to pass it over to Tricia Rowan, who will walk us through CMS's Data Quality Priorities for FFY 2020.

Thanks Caroline. Next slide, please.

[Slide 24] First, I'd like to give an overview of data quality considerations for state Core Set reporting. These include the completeness and accuracy of the data reported, consistency between measures within and across Core Sets, and documentation of any changes in the data. Additional guidance on data quality can be found in the Data Quality Checklists published for each Core Set. Links to these resources are included on this slide. We encourage states to review the checklists as you begin reporting and also as a final check before submitting data.

Next slide.

[Slide 25] On the next few slides we highlight a few priorities for FFY 2020 reporting.

First, some states calculate a state-level rate by combining rates across multiple reporting units such as different health systems or managed care plans. We ask that you please document the methods that were used. For example, when these reporting units use different methodologies

for calculating measures, please indicate the number of reporting units using each methodology in the Additional Notes/Comments on Measure section in MACPro. States should also indicate whether the state-level rates are weighted by population size under the section in MACPro called "Combined rates from multiple reporting units." Additional guidance on calculating state-level rates can be found in the technical assistance resource linked on the slide. Please note that similar guidance applies to the Health Home Core Set for combining rates across multiple providers to create a SPA-level rate.

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[Slide 26] States should also document which populations and services are excluded in their calculations of each measure. For example, please document exclusions of beneficiaries by type of program, namely Medicaid and CHIP; types of delivery systems; special populations like dual eligible beneficiaries or individuals in foster care; and specific health care settings. Please note that if you are unable to include some measure-eligible populations, we ask that you estimate the size of the excluded population and provide additional context on why these populations are missing in the "Additional Notes/Comments on Measure" section in MACPro.

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[Slide 27] States should also look at the alignment between measures included in multiple Core Sets. States should ensure that cross-cutting measures are calculated using consistent methodology and are reported for all applicable Core Sets. One example is the Follow-up After Hospitalization for Mental Illness measure, which cuts across all three Core Sets.

Finally, we would like to emphasize the importance of data documentation. States should document any deviations from the Core Set specifications, such as differences in age groups, data sources, and methods. Additionally, states should document any changes in the populations, denominators, or rates between reporting years.

Next slide.

[Slide 28] Now I'll pass it to Alli to discuss some technical assistance resources that are available to help states with their Core Set reporting.

Thanks, Tricia.

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[Slide 29] Before I begin, I wanted to note that the hyperlinks to each of these resources are available in this slide deck, which is on Medicaid.gov, and also available for download in the Resources widget on the left side of your screen.

And the following resources are available for the Child, Adult, and Health Home Core Sets. Links to each of these resources are within the next three slides for each of the Core Sets.

The first link is to the general Medicaid.gov home page where you can find all of these reporting resources.

Next, the 2020 measure lists include the measure name, measure steward, and data collection methodology.

The Resource Manuals and Technical Specifications contain general reporting guidance as well as technical specifications for each measure. They also contain links to the value set directories and medication lists needed to calculate each measure.

We have also prepared a Summary of Updates document that provides the high-level changes for the measures in each Core Set from the previous year. These documents outline all of the changes to the measures that we discussed today as well as some additional changes.

There is also a Data Quality Checklist for each of the Core Sets. As Tricia mentioned earlier in the webinar, this document is intended to help states improve the completeness, accuracy, consistency, and documentation of data reported. The checklist includes common issues noted in the data reported for FFY 2019. States can use the checklist to assess their data before entering it into MACPro.

The Measurement Period Tables include the denominator, numerator, and continuous enrollment measurement periods for each of the measures in the Core Sets. When entering the start and end dates for a measure in MACPro, states should use the denominator measurement period for each measure on this table if they use Core Set specifications.

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[Slide 30] And here you have the links for the Adult Core Set.

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[Slide 31] And here you have the links for the resources for the Health Home Core Set.

Additionally, there is one resource that's specific to the Health Home Core Set, which is the expected reporting table, which provides guidance on which SPAs are expected to report for each reporting year.

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[Slide 32] And so here are some additional technical assistance resources that apply across the Core Sets:

The first is a brief on Calculating State-Level Rates Using Data from Multiple Reporting Units. The brief provides guidance on developing state-level rates when data for the measures are collected separately by programs, such as Medicaid or CHIP, or by delivery system.

There is also a brief on using the hybrid method, which involves using both administrative data and medical record reviews to calculate certain Core Set measures.

There are new fact sheets on calculating two measures: the Admission to an Institution from the Community Measure in the Health Home Core Set and the Controlling High Blood Pressure Measure in the Adult and Health Home Core Sets.

An updated resource on calculating the PCR measure in the Adult and Health Home Core Sets for 2020 is also available. This describes the updates that Caroline mentioned earlier.

We also have a fact sheet that provides an overview of the substance use disorder measures in the Adult and Health Home Core Sets, which has been updated for 2020 and includes information about the new OUD measure.

Also, programming software is available for several measures. First, SAS code is available to calculate the Contraceptive Care – Post-Partum Women and Contraceptive Care – All Women measures, which are part of both the Child and Adult Core Sets. The code is available at the HHS website at the link shown on the screen.

There are four prevention quality indicator, or PQI, measures included in the Adult Core Set and one PQI measure in the Health Home Core Set. AHRQ, the measure steward, makes free software for calculating these measures available to states. Please note that the software calculates the measure per 100,000 beneficiaries while the Core Set measures are recorded per 100,000 beneficiary months. States will need to adjust the data for reporting in MACPro.

You can also request sample SAS code and a User Guide for calculating the Dental Sealant for 6- to-9-Year-Old Children at Elevated Caries Risk measure. In addition, there's also a TA brief for this measure available at the link shown on the slide.

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[Slide 33] We appreciate your time today and want to encourage you to reach out if you have any questions based on the webinar. One way to reach us is to complete the evaluation form before you leave the webinar, and we will follow-up with you. The evaluation can be accessed at any time through the Survey widget at the bottom of the console, or when you leave the webinar.

And here on this slide, you have two important TA mailbox addresses – the first is intended for questions about calculating, reporting, or using the Core Set measures, and the second is intended for technical help with the MACPro system.

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[Slide 34] Thank you very much for viewing this webinar, and, as always, if you have any questions, please feel free to reach out to the TA mailbox shown on the previous slide. We wanted to note that there will be another webinar in the fall about using the MACPro system, so stay tuned for that.

And just one final reminder to please complete the brief evaluation form as you leave the webinar. Let us know on the form if you have any questions about the content we've presented here today or if you would like to request technical assistance from our team.

Thank you for your efforts to improve the quality of care for beneficiaries in Medicaid and CHIP, and please stay safe and stay well.

This now concludes the webinar.