

# National MLTSS Health Plan Association

August 1, 2018

Harold Pincus, MD, Chair  
Marissa Schlaifer, RPh, MS, Chair  
Medicaid Adult Workgroup  
Measure Applications Partnership  
National Quality Forum  
1030 15th Street NW  
Suite 800  
Washington DC 20005

## **Re: Strengthening the Core Set of Healthcare Quality Measures for Adults Enrolled in Medicaid, 2018**

Dear Drs. Pincus and Schlaifer,

Thank you for the opportunity to provide comment on the National Quality Forum (NQF)'s request for stakeholder input on adding new quality measures to the Core Set of Health Care Quality Measures for Adults Enrolled in Medicaid (the Adult Core Set).

The National MLTSS Health Plan Association is an association of health plans that contract with states to provide managed long-term services and supports (MLTSS). Our members currently cover about 75 percent of enrollees in MLTSS plans and assist States in delivering high quality services at the same or lower cost as the fee for service system with a particular focus on ensuring beneficiaries' quality of life and ability to live in the community instead of an institution. Responsibility for managing an LTSS benefit also extends to our members' offerings through D-SNPs and Medicare-Medicaid Plans (MMPs). Member organizations include Aetna Inc., AmeriHealth Caritas, Anthem Inc., CareSource, Centene Corp., Commonwealth Care Alliance, Health Plan of San Mateo, L.A. Care Health Plan, Molina Health Care Inc., Tufts Health Plan, UPMC Health Plan, and WellCare Health Plans Inc.

The Association strongly supports efforts to include measures of home- and community-based services (HCBS) in the Adult Core Set. We encourage the workgroup to continue pursuing HCBS measures for future addition. With regard to the current update, we support the workgroup's recommendation to include NQF #2967 CAHPS HCBS composite measure. Incorporating this measure into the Adult Core Set will bring national consistency to MLTSS outcome measurement. Currently, 13 states that operate MLTSS programs have independently implemented HCBS quality measures, with another 3 states actively developing such measures. Without national standards or guidance, states developing and implementing MLTSS quality measures struggle with validity and reliability concerns. Nearly all LTSS measures are state-specific, with states either choosing different quality metrics than their neighbors or implementing different definitions

of the same metrics. Additionally, most state MLTSS measures have not been tested for validity and reliability. NQF's efforts to create nationally-recognized HCBS quality measures will improve states' abilities to hold health plans accountable, make meaningful and reliable comparisons of plans' performance, and facilitate more effective quality improvement initiatives.

The Association is committed to implementing meaningful and feasible measurement of MLTSS plan members' patient-reported outcomes. Over the past year, the Association has been working with our member plans to find effective ways to implement measures that address HCBS outcomes, including some of the items included in NQF #2967. We would welcome the opportunity to share our thoughts on HCBS quality measurement with NQF.

The Association also encourages the workgroup to look beyond the CAHPS HCBS survey to identify metrics that address other quality concerns that matter to LTSS consumers and advocates. For example, the CAHPS HCBS survey does not include elements addressing members' satisfaction with where they live, or members' ability to work or volunteer in their community. We encourage NQF to endorse and recommend HCBS quality measures that address consumers' needs parsimoniously, while still covering the broad range of issues that matter to LTSS users and their caregivers.

We welcome the opportunity to meet with NQF staff to discuss our comments or the efforts of the Association. If you have any questions, please contact me at [latkins@mltss.org](mailto:latkins@mltss.org).

Sincerely,

A handwritten signature in black ink, appearing to read "G. Lawrence Atkins". The signature is fluid and cursive, with the first letters of the first and last names being capitalized and prominent.

G. Lawrence Atkins  
Executive Director