CMS HCBS Quality Measure Set: Strengths, Challenges, and Alternatives



2023 Home and Community-Based Services Conference



Center for Rehabilitation Outcomes Research

Home and Community-Based Services Outcomes Research and Measurement

Rehabilitation Research Training Center



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Speakers





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Agenda

Shirley Ryan

- Welcome
- Background: HCBS Outcome Measures
- Factors Influencing HCBS Measure
- Outcome Measures Under Development
- Implementing Outcome Measures in HCBS Delivery Systems
- Wrap-up

Background: HCBS Outcome Measures

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Evolving Understanding of HCBS Quality

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- HCBS was originally an alternative to institutional care
 - Quality was conceptualized as assuring health and safety
- Evolving understanding of HCBS as supporting people to live in the community
 - Person-centered supports given in alignment with person's strengths, preferences, and goals, as well as support needs
 - Includes issue of choice and control, community engagement, meeting personal life goals

CMS Proposed Access Rule

- Access Rule addresses all Medicaid services
- Focus on HCBS, including quality measures
 - Proposed set of nationally standardized quality measures
 - Require reports every 2 years
 - Report at state level
 - Stratification to address health disparities and improve equity



Proposed HCBS Quality Measure Sets

Proposed Initial Quality Measure Sets

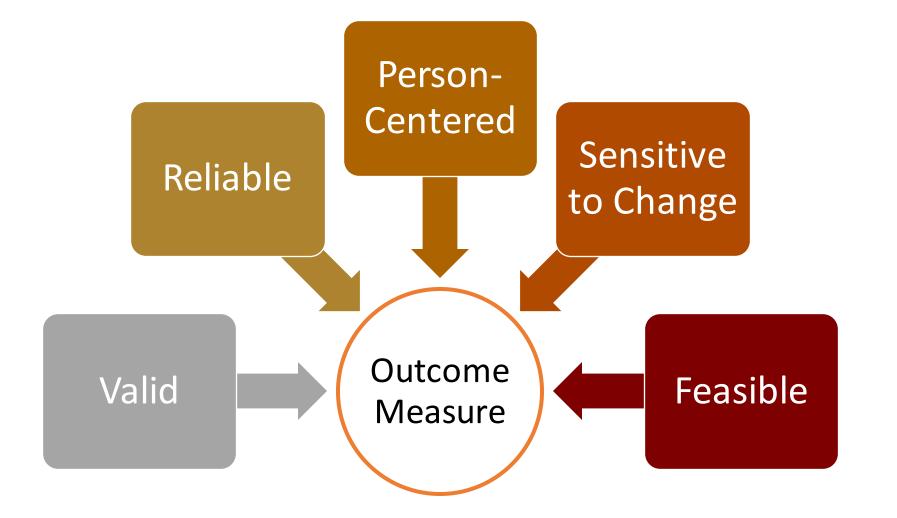
- HCBS CAHPS Survey
- National Core Indicators IDD
- National Core Indicators AD
- Personal Outcome Measures
- Updates Proposed At Least Every Other Year
 - Address priorities and gaps
 - Meet scientific standards
 - Feasible reporting at state and program levels



Suggestions to Enhance CMS Access Rule and HCBS Quality Measurement

- Adopt guidance provided by the 2014 Standards for Educational and Psychological Testing developed by the American Psychological Association, the American Educational Research Association, and the National Council on Measurement in Education
- Specify modes of administration
- Establish evidence of reliability and validity
- Evaluate opportunities to track individuals over time to establish sensitivity to change
- Maintain focus on person-centered planning and service delivery

Critical Properties of HCBS Outcome Measures



Person-Centeredness

- Focuses on what is important to the individual, recognizing that people have different priorities and preferences
- Person-centered service plans are guided by the individuals' priorities and input
- Person-centered outcome measures assess the achievement of person-centered goals



Person-Centered, Non-Medical Outcomes

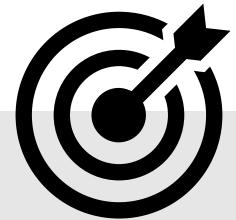
- Measures help ensure services are being used in a meaningful way, helping to achieve desired outcomes
- Person-centered outcomes
 - Outcomes are defined by the person, and may be fluid
 - Level of achievement may fluctuate over time
 - Progress may be as valuable as achievement
 - Status of outcomes may be subjective

Validity of HCBS Outcome Measures

- Measures provide accurate information
 - Does it measure the outcome we are aiming to measure?
 - Is the HCBS recipient receiving services that are timely, person-centered, and support them in living the life that they want?

Challenges

- Identifying the "right" outcomes, ones that accurately reflect the life the person wants to live
- Understanding the connections between services and desired outcomes



Reliability of HCBS Outcome Measures

- Measures produce consistent results
 - Is there consistency in answers received by different individuals implementing the survey?
 - Does the measure produce consistent results concerning whether HCBS recipients are receiving services that are person-centered and support them in living the life that they want?

Challenges

Information may vary depending on how or by whom it is collected



Reliable, Not Valid



Both Reliable & Valid

Sensitivity to Change



- Measures detect change over time in outcomes
- Can improve the ability of the measure set to determine if services are having their intended impact
- Can help evaluate the consequences of changes in policy, funding, programming, etc.
- Challenges
 - Progress toward vs. maintenance of a desired outcome: both are positive, only one reflects change
 - Changes in desired outcomes: Shift from achievement of a desired outcome to starting over, if the desired outcome changes (e.g., I'm living where I want vs. Now I want to move to a new location)

Feasibility of HCBS Outcome Measures

- Organizations and states can implement the instrument
 - As designed
 - At desired frequency
 - At an affordable cost
 - With minimal burden to organizations and respondents
- Challenges
 - Collecting data from a population vs. a sample
 - All HCBS participants or a sample?
 - How to integrate data collection and outcome measures into care practice?

YES NO

Measure Implementation

Who collects data?

How often are data collected?

From whom are data collected?

How are data aggregated and reported?

- Person level
- Provider level
- Program level
- State level

Equity issues

- Risk adjustment
- Stratification

Gaps in Person-Centered HCBS Outcome Measures

- Content gaps of measures
 - Person-centered outcomes
 - Linkage of supports to outcomes
 - Quality at provider level
- Limited evidence of reliability, validity and sensitivity to change
- Availability of measures and implications for use
 - State level data
 - Provider level data
 - Person level data

Discussion What Measures Do You Need?

- In your roles as quality managers, providers, policy makers, service recipients, advocates, or others
 - What measures do you need?
 - Do you have the measures you need?
 - What is lacking in the measures available to you?

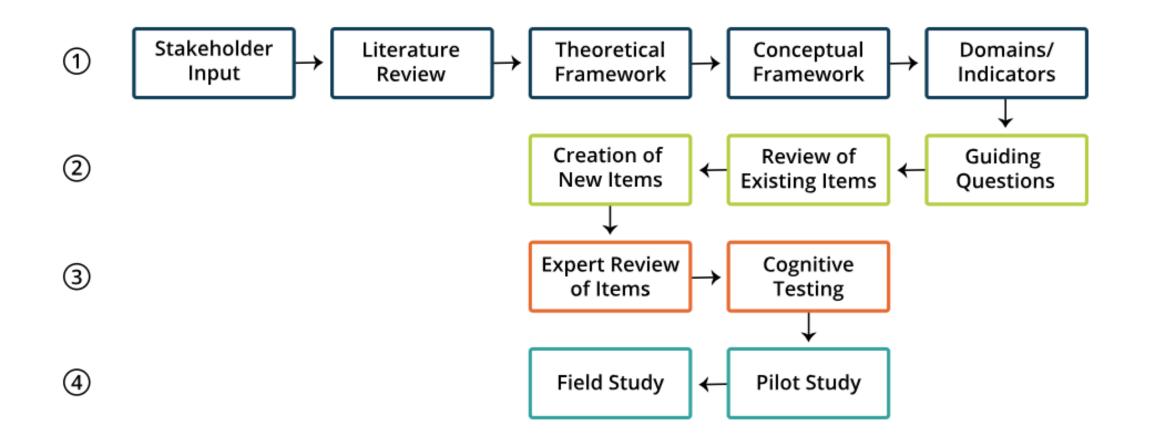
Outcome Measures Under Development

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RTC/OM Measure Development Process

At Institute of Community Integration at the University of Minnesota



Source: Brief 3: Development of HCBS Outcome Measures

https://publications.ici.umn.edu/rtcom/briefs/brief-three-development-of-hcbs-outcome-measures

Measure Concepts in Development by RTC/OM at UMN

Source: Brief 3: Development of HCBS Outcome Measures https://publications.ici.umn.edu/rtcom/briefs/brief-

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NQF Domain/Measure	Focus of Measure
Community Inclusion	The degree to which HCBS recipients
Meaningful ActivitiesSocial Connectedness	 engage in desired activities (e.g., education, volunteering, recreation, leisure, etc.). develop and maintain positive relationships with others.
Choice and Control	The degree to which HCBS recipients exercise choice & control over
 Control over Daily Activities Control over Services & Supports Control over Self-Directed Services 	 their daily lives. the supports and services they receive. supports and services receive through self-directed service waivers.
Employment	The degree to which HCBS recipients
 Opportunities for Meaningful Employment Employment Supports 	 have timely access to appropriate transportation that supports their needs, choices, and goals as related to community inclusion.
Transportation	The degree to which HCBS recipients
	 have timely access to appropriate transportation that supports their needs, choices, and goals as related to community inclusion.
Abuse and Neglect	The degree to which
 Freedom from Abuse & Neglect System Supports for Safety 	 HCBS recipients are free from abuse and neglect and the HCBS system implements appropriate prevention and intervention strategies.

Shirley Ryan Abilitylab Research Projects

Project 1

 Develop and test person-centered outcome measures for HCBS

Project 2

 Identify best practices and specific servicedelivery competencies of HCBS providers

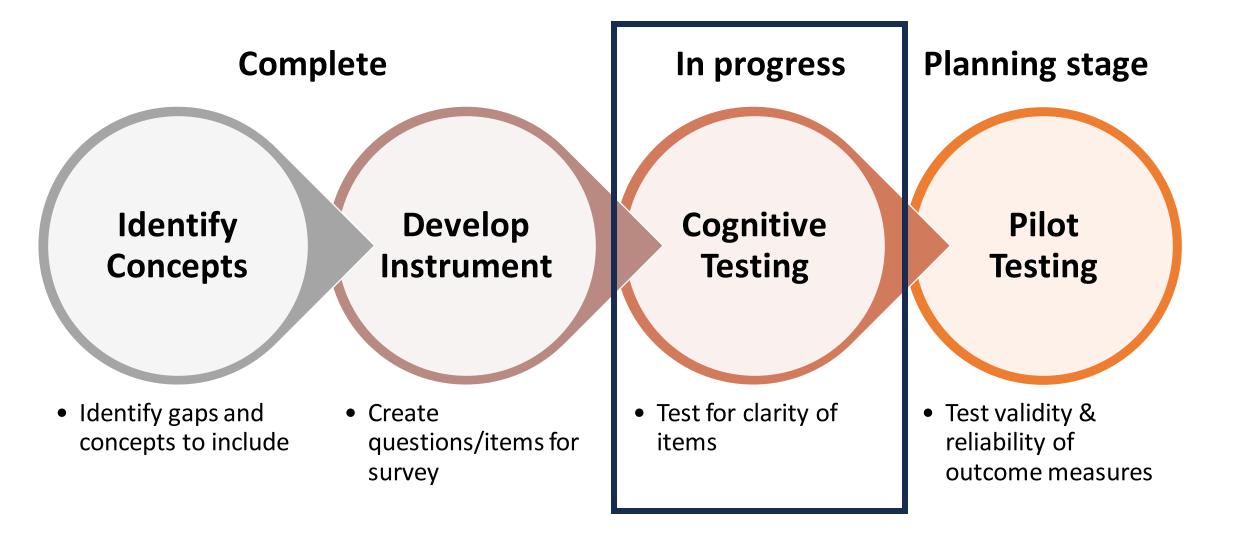
Project 3

 Develop and test training that improves the skills of HCBS providers

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CROR Outcome Measure Development





Identify Concepts	Developed list of concepts	Used National Quality Forum Outcome domains to narrow scope Identified important concepts from the literature Identified concepts used by RTC/OM Elicited concepts from our participant council
	Analyzed instruments used in HCBS	Selected items Reviewed, refined item wording Evaluated psychometric properties
Shirley Ryan Abilitylab. Center for Rehabilitation Outcomes Research	Selected concepts	 What had coverage and what didn't? What had incomplete coverage? Participant council guidance in choosing Formed definition Elicited sub-concepts for each concept

Develop Instrument

Item development was guided by:

- Participant Council
- Existing literature and instruments, RTCOM database

Instrument Sections:

- Sub-Concept of Outcome
- Overall Outcome of Concept
- Importance
- Progress over time
- Perception of Support

CONCEPTS:



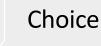
Choice and Control Over Diet & Nutrition



Choice and Control Over Finances/Money



Choice and Control Over Healthcare



Choice and Control Over How Time is Spent



Choice and Control Over Living Arrangement



Choice and Control Over Meaningful Relationships



Choice and Control Over Personal Expression



Community Engagement



Dignity of Risk

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Cognitive Testing

Purpose

- Make sure items are
 - Clear to respondents
 - Measure what we want to measure

Methods

- Interview 25 individuals who use HCBS from different disability groups and backgrounds
 - Ask questions from the surveys
 - Pay attention to non-verbal cues
 - Ask why they chose their answers
 - Ask for suggestions on how to make wording clearer



Pilot Testing

Purpose

- Test validity and reliability of the measures at the individual level
- Assess the feasibility and utility of the measures

Methods

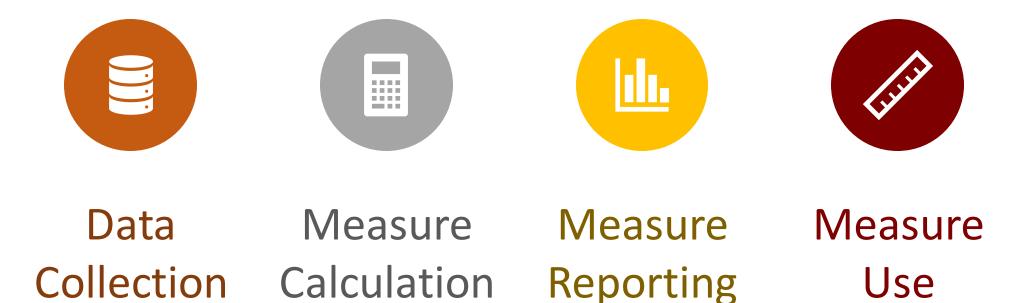
- Administer the survey with 400 HCBS recipients
- 2 interviews with each HCBS recipient
 - 3-6 months in between
 - Some will have 3rd interview to test if results vary by administrator
- Involvement by care managers or those helping administer care plans (validity and reliability)
- Interviews with provider quality managers (feasibility & utility)



Implementing HCBS Outcome Measures in HCBS Delivery Systems

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HCBS Outcome Measure Implementation





Approaches to Data Collection

Surveys	Sample	
	Data collected by external parties	
	Report at the population level	
Claims data	Full population	
	Data submitted by providers	
Interviews with HCBS	May be done with sample or full population as part of care planning	
participants	May be done by care managers, external quality reviewers, p or other	eers,

Measure Calculation and Reporting

Calculation

- Data collected from individuals are entered into a database for analysis
- Provider-specific or centralized database, depending on use
- Creating measures from individual items
 - Inclusion/exclusion criteria
 - Risk adjustment or stratification

Reporting

- Levels: State, program, provider, person
- Purpose: Internal use (program improvement); public reporting



Discussion

Implementation and Use of Outcome Measures



Focusing on implementation within HCBS delivery systems...

- What are your concerns and suggestions about HCBS outcome measure implementation?
 - How best to collect data?
 - How often to collect data?
 - How to assure data reliability and validity?
- What supports do providers and states need to support adoption, implementation, and use of the HCBS outcome measures?

Wrap Up

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Project 3: Person-Centered Training

PURPOSE

Develop a manualized training designed to support person-centered care delivery and coordination, using the HCBS practices and competencies identified in Projects 1 & 2.

Recruiting organizations to participate in training next spring/summer!

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- Combine the concepts of a person-centered system with skills from Motivational Interviewing
- Use a collaborative training model state assessors, case managers, direct support professionals and self-advocates all participate
- Multiple modules, smaller bite-sized delivery the number and length of modules is to be determined.
- Testing will
 - Identify barriers and facilitators to engagement
 - Assess ways to improve the feasibility of implementation

Come visit us at our exhibitor table

Shirley Ryan

Center for Rehabilitation Outcomes Research Interest in participating in the training or measure testing

Get a sneak peak of our training module

Provide input on our projects

Get more information on our projects

For Further Information, Contact:

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Thank you!



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