

Measuring Quality in I/DD Services



Optimizing Care Systems for People with Intellectual and Developmental
Disabilities - NASEM Workshop

12/8/2021

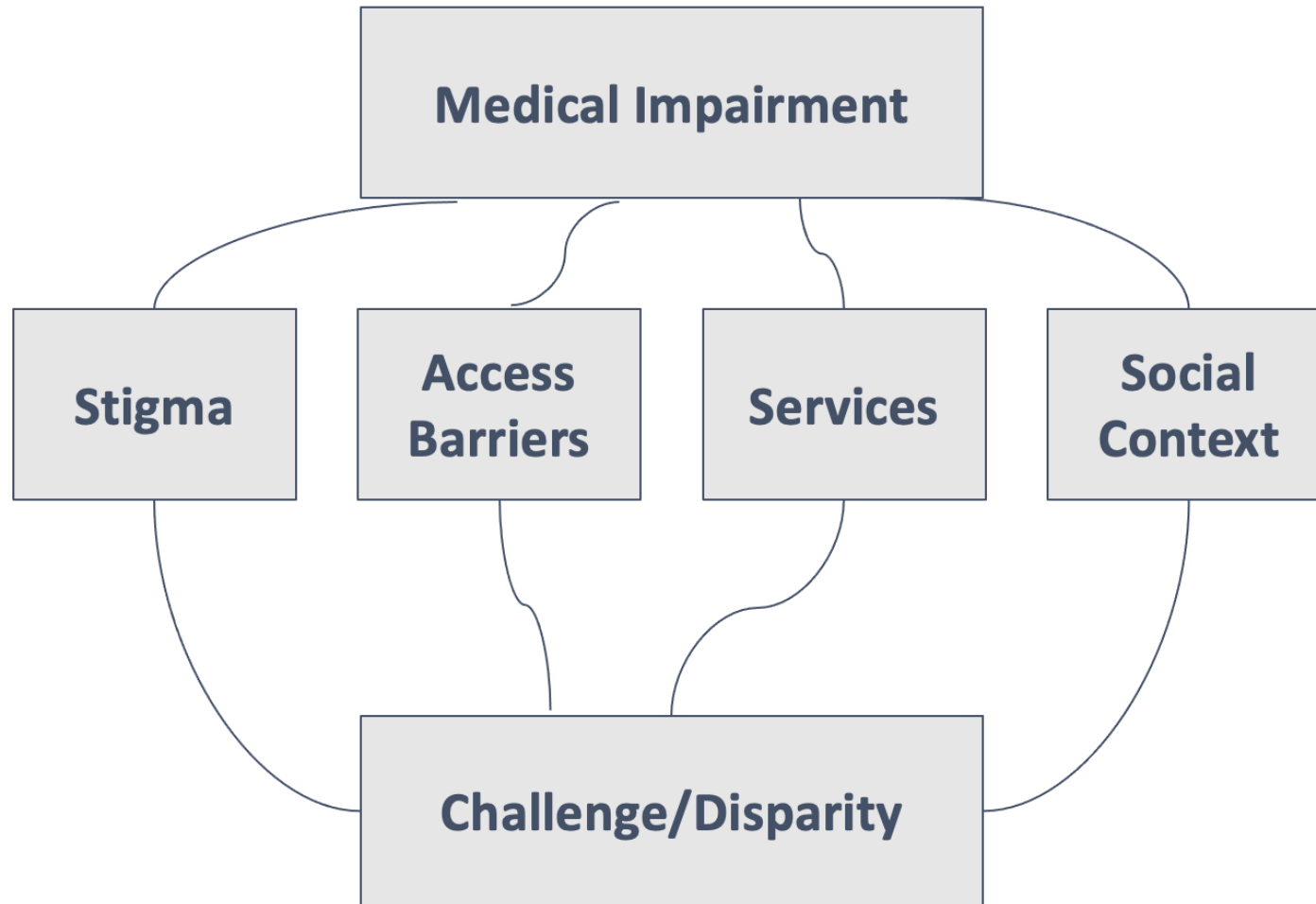
Medical Model of Disability

Medical Impairment



Challenge

Social Model of Disability



Quality Measures Have Historically Not Focused on HCBS

- Until recently, few NQF-endorsed quality measures focused on HCBS
- HCBS quality measurement has relied on survey tools, such as NCI and CQL POMS
- Over the last ten years, HHS and disability stakeholders have worked to expand # of HCBS quality measures derivable from administrative data for use in MLTSS and FFS contexts

National Core Indicators®

National Core Indicators (NCI)® is a voluntary effort by public developmental disabilities agencies to measure and track their own performance.

The core indicators are standard measures used across states to assess the outcomes of services provided to individuals and families. Indicators address key areas of concern including employment, rights, service planning, community inclusion, choice, and health and safety.

NCI® is a collaboration of [participating states](#), [HSRI](#), and [NASDDDS](#).

Featured Core Indicators



Feels Lonely

The percentage of people who feel lonely

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Person has Paid Job in the Community

The percentage of people who report having a paid job in the community

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Allowed to Use Phone or Internet at Any Time

The percentage of people who report they can use phone/internet

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Quality Measurement in MLTSS

- MLTSS implementations often spark real fears from self-advocates, families & providers
- Quality measurement offers a means of addressing those fears and ensuring accountability and oversight for MCO behavior
- MLTSS contracts often tie quality measures to financial incentives, including withholding portions of the capitated rate

Donabedian's Framework

Structure: What are the entity's capacity, attributes or processes?



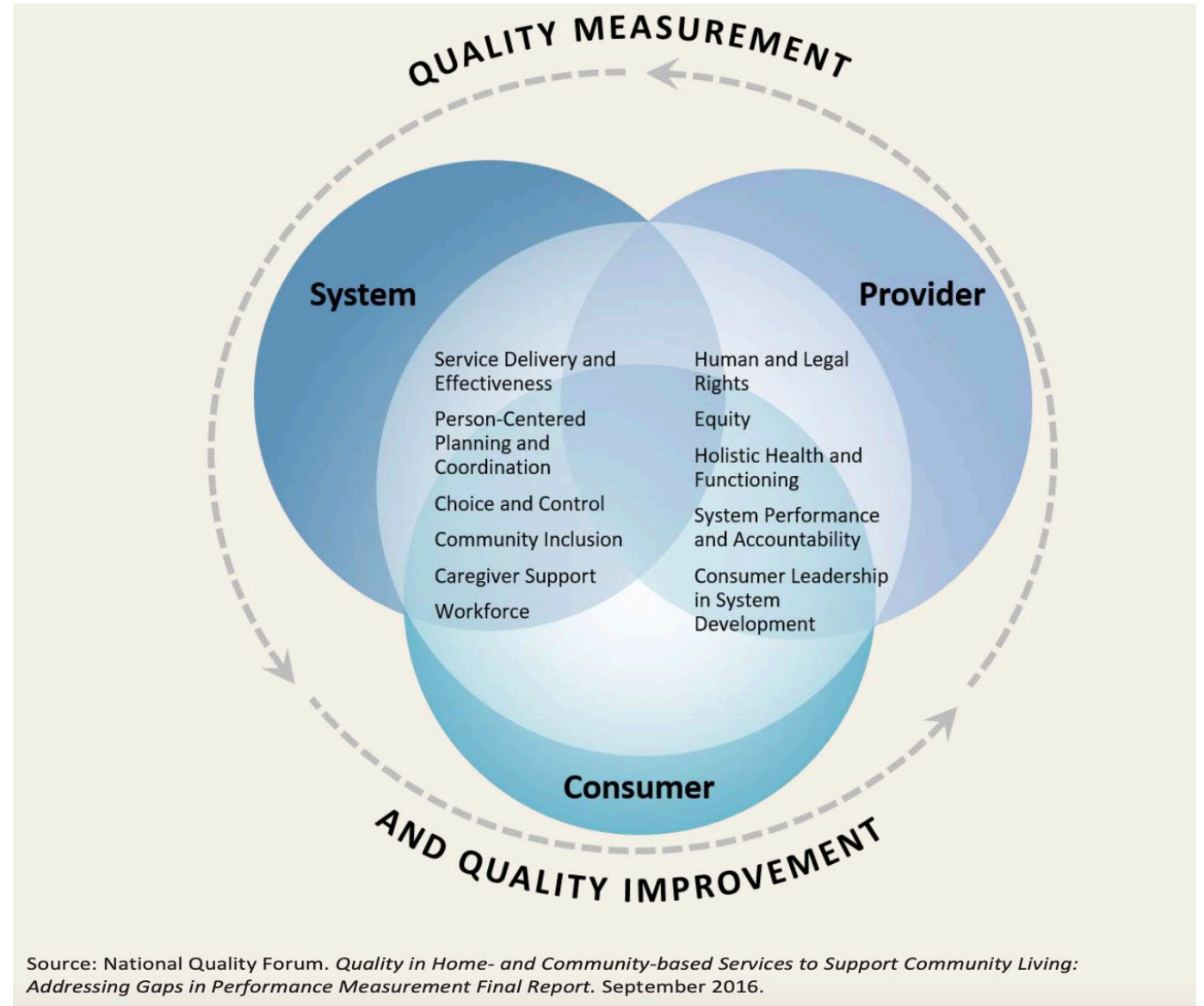
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graph TD; A[Structure: What are the entity's capacity, attributes or processes?] --> B[Process: how does the entity interact with PWD (i.e: services, care planning, etc)?]; B --> C[Outcomes: what outcomes emerge for PWD served by the entity?];
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Process: how does the entity interact with PWD (i.e: services, care planning, etc)?

Outcomes: what outcomes emerge for PWD served by the entity?

NQF Framework

- Developed by National Quality Forum Workgroup on HCBS Quality in 2016
- Offers a framework for thinking about measure development & selection
- Image from Lipson, 2019



Example: Select New York FIDA- IDD Quality Measures

- Service Plans Updated within 30 days of re-assessment
- Service plans document discussion of care goals
- Proportion of Enrollees in an ICF-IID
- Proportion of ICF-IID residents successfully discharged to the community
- Number of Critical Incident/Abuse Reports per 1,000 LTSS Participants
- Proportion of Enrollees self-directing their own services

CMS LTSS Rebalancing and Utilization Measures

- **LTSS Admission to an Institution from the Community**
 - Number of MLTSS plan member admissions to an institution from the community per 1,000 member months
 - Rates reported across age groups and by short-, medium- and long-term stays
 - FFS version: “per 100,000 months of HCBS use”
- **LTSS Minimizing Institutional Length of Stay**
 - Proportion of admissions to an institution that result in successful discharge to the community (community residence for 60 or more days) within 100 days of admission
 - Both observed and risk-adjusted rate reported
 - Variation on this now a core reporting requirement for dual eligible demos
- **LTSS Successful Transition after Long-Term Institutional Stay**
 - Proportion of long-term institutional stays which result in successful transitions to the community (community residence for 60 days or more)
 - Both observed and risk-adjusted rate reported

CAHPS HCBS Survey

- Cross-disability survey of LTSS users, designed to allow comparisons across states, populations and health plans
- 69 core items as well as 21 item supplemental module on employment services
- Primary focus is on unmet need but also includes questions on community inclusion, choice/autonomy & other NQF priority areas
- Deployed in 2020 – AHRQ currently collecting voluntary submissions from states & MCOs – research data sets may be forthcoming

More Work Needed

Need for greater emphasis on choice and autonomy in further measure development

Transitions within HCBS spectrum underemphasized

Day and employment services ripe for greater quality measurement

As people with I/DD are included in MLTSS and other risk-based arrangements, quality measures are crucial