



MAP Dual Eligible Beneficiaries Workgroup Web Meeting April 30, 2013

The National Quality Forum (NQF) convened a web meeting of the Measure Applications Partnership (MAP) Dual Eligible Beneficiaries Workgroup on Tuesday, April 30, 2013. In addition to members listed below, 43 members of the public attended this meeting. An [online archive](#) of the meeting is available.

Workgroup Members in Attendance:

Alice Lind (Chair)	
Richard Bringewatt, SNP Alliance	Joan Levy Zlotnik, National Association of Social Workers
Gwendolen Buhr, American Medical Directors Association	Laura Linebach, L.A. Care Health Plan
Adam Burrows, National PACE Association	Samantha Meklir, Health Resources and Services Administration
Mady Chalk, [subject matter expert: Substance Abuse]	Tina Nuttall, Humana, Inc. (substitute for George Andrews)
Alfred Chiplin, Center for Medicare Advocacy	D.E.B. Potter, Agency for Healthcare Research and Quality
Anne Cohen, [subject matter expert: Disability]	Cheryl Powell, CMS Medicare-Medicaid Coordination Office
Steven Counsell, National Association of Public Hospitals and Health Systems	Juliana Preston, [subject matter expert: Measure Methodologist]
Leonardo Cuello, National Health Law Program	Clarke Ross, Consortium for Citizens with Disabilities
James Dunford, [subject matter expert: Emergency Medical Services]	Marisa Scala-Foley, Administration for Community Living

Welcome and Review of Meeting Objectives

Session led by Alice Lind, MAP Dual Eligible Beneficiaries Workgroup Chair, with an additional presentation from Cheryl Powell, Centers for Medicare & Medicaid Services (CMS).

Ms. Lind welcomed the group to the web meeting, introduced new organizational representatives and workgroup members, and reviewed the meeting objectives:

- Begin work on measures for dual eligible beneficiaries with disabling behavioral or cognitive conditions;
- Prepare for in-person meeting by introducing the approach for creating a family of measures;
- Review public comments received on December 2012 Interim Report and discuss how to address them going forward;

- Develop understanding of the quality issues facing beneficiaries with behavioral or cognitive health needs and the opportunities for improvement through measurement.

Ms. Powell shared her thoughts on the past and present efforts of this workgroup, highlighting how useful the MAP reports have been to the ongoing work of the Medicare-Medicaid Coordination Office and their efforts to improve the quality of care. MAP has helped to set the framework for the field and advance thinking about quality measurement among vulnerable individuals. She encouraged the workgroup to continue gathering multiple perspectives, including that of the beneficiary.

How Will the Pieces Fit Together?

Session led by Ms. Lind.

Ms. Lind reviewed the Evolving Core Set of Measures for Dual Eligible Beneficiaries and measures for high-need subgroups as inputs for a family of measures. A *family of measures* is a term the workgroup will use to describe a set of measures that relate to one another; address the highest priorities for measurement; and include the best available measures for a particular topic and prioritized gaps. It provides end-users with a pre-screened group of measures carefully selected to work together for a given topic and transcends any specific healthcare service location to evaluate an individual's experience across healthcare settings over time.

One member asked if the workgroup should give preference to selecting measures that are more general and versatile to facilitate alignment. Ms. Lind shared that the workgroup had previously selected measures both for their specificity and versatility; the workgroup should consider the factors that make dual eligible beneficiaries unique. Another member raised the importance of considering application of measures within integrated health systems. The workgroup will continue to consider a balanced approach to measure selection at the upcoming in-person meeting.

Ms. Lind reviewed [public comments](#) received on MAP's [December 2012 Interim Report](#). Workgroup member Clarke Ross, representing the Consortium for Citizens with Disabilities, asked for clarification of public comments on "accessibility." He highlighted that accessibility has multiple meanings, one being compliance with legal requirements of the Americans with Disabilities Act, another being the ability to engage with the health system. Anne Cohen, the disability subject matter expert for the workgroup, commented on the importance of reporting quality measures in a simple and meaningful way so that they are actionable by healthcare organizations and can also inform consumers.

State of Performance Measurement in Behavioral Health

Session led by Ms. Lind, with additional presentations by Lisa Patton, SAMHSA; NQF Behavioral Health Steering Committee co-chair, Harold Pincus; and Behavioral Health Steering Committee member, Mady Chalk.

Ms. Lind presented an overview of the [Draft SAMHSA National Framework for Quality Improvement in Behavioral Health Care](#). The purpose of the framework and its six priorities, goals, and opportunities for successes were reviewed to further the workgroup's synchronization with other national efforts. Following Ms. Lind's presentation, Dr. Patton provided an update on SAMHSA's ongoing refinements to the framework and corresponding measure nomination and review process. She notified participants that the next iteration is expected to be made available for public comment in four to six weeks.

Dr. Pincus and Dr. Chalk provided an overview on the progress of the NQF Behavioral Health Consensus Development Project. The project includes three phases: phase one recommended 10 measures for

endorsement, phase two is currently underway with the review of 25 measures, and a third phase is expected. The Steering Committee has recognized many gaps in measurement and experts noted some of the issues complicating the development of measures in this field:

- Need for measures to fit person-centered models of care, specifically for recovery;
- Inadequate screening for alcohol and drug use, including prescription drug interactions;
- Lack of appropriate follow-up for mental health and substance use disorders following a positive screen; and,
- Widespread delay in implementation and use of quality measures, especially the availability of health information technology (HIT).

The MAP Dual Eligible Beneficiaries Workgroup will consider these factors when selecting measures and noting gaps at the upcoming meeting.

What Is Known about Quality Issues for Dual Eligible Beneficiaries with Disabling Behavioral and Cognitive Conditions?

Session led by Megan Duevel Anderson, Project Analyst, NQF and Amaru Sanchez, Project Analyst, NQF.

Ms. Duevel Anderson and Mr. Sanchez presented demographic data regarding high-need beneficiaries with disabling behavioral and cognitive conditions, drawn from a staff-conducted literature review. High-need dual eligible beneficiaries consume a disproportionate amount of Medicare and Medicaid resources, often have multiple diagnoses, and have complex social and health care needs. The service needs of high-need beneficiaries present opportunities to reduce cost and improve quality.

Key Issues for Measurement

Session led by Sarah Lash, Senior Program Director, NQF.

Ms. Lash discussed a list of proposed key issues for measurement for high-need dual eligible beneficiaries with disabling behavioral health and cognitive conditions. The key issues arose from the staff-conducted literature review and are organized by high-leverage opportunities for improvement. Workgroup members were invited to submit feedback on the quality issues list to NQF staff. The key issues will be the foundation for the scan of available measures to be reviewed at the May in-person meeting on the best measures.

Public Comment, Wrap Up, and Summary

The public was given an opportunity to comment. One public commenter questioned if a single measure might apply to multiple categories within a family of measures. NQF staff clarified that any measure selected may fit more than one opportunity area (e.g., both quality of life and mental health). Additionally, a single measure can be included in more than one of MAP's families of measures on different topics.

The meeting concluded with a discussion of next steps. The next meeting of the MAP Dual Eligible Beneficiaries Workgroup will be held on May 21-22, 2013, in Washington, DC. Please see the NQF website for details.