

ODP Updates

December 2, 2022

ARPA Proposed Initiative Updates

- **Additional Initiatives Approved by CMS**
 - HRST data into data warehouse
 - Capacity Building Institute: Children with Multi-System Involvement
 - Recovery and Expansion Supplements
 - Submitted Appendix K on 11/22 to authorize supplemental payments

ID/A Waivers Renewals – Temporary Extension

- CMS issued Request for Additional Information (RAI)
- ODP requested a second 90 day extension through 12/27/2022
- Proposed changes
 - PHE ‘unwinding’ provisions
 - Services delivered using remote technology – teleservice
 - Remote Support (distinct service definition)
 - Supports Coordination monitoring
 - **P/FDS** - remote monitoring, can take place 1 time out of the 4 yearly required face-to-face monitorings.
 - **Consolidated & Community Living** - remote monitoring can take place 3 out of the 6 required face-to-face monitorings per year.

Federal Public Health Emergency (PHE)

- PHE renewed 10/13/2022
- Anticipated renewal effective **January 11** for 90 days.
- Anticipate administration will maintain its commitment to provide 60 days advance notice before ending the PHE.
- If new PHE is last PHE, the 60-day notice would come on **February 10, 2023**. The new assumed end date of the PHE would be **April 11, 2023**.
- If April is the end PHE then the 6.2 percentage point Federal Medicaid Assistance Percentages (FMAP) enhancement under current law will extend through **June 30, 2023**.

Appendix K

- In place until 6 months after federal PHE ends
 - Cap exceptions
 - Enhanced rates for CPS & transport trip
- Planning for 'unwinding' of authorities

HRST Workgroup

- Goal: create version of LTMH that can inform and be informed by the HRST process to decrease redundant creation of information and to increase the relevance of both the HRST and LTMH by having up to date, consistent information.
- Representatives from TPA, PAR, RCPA and The Arc along with IntellectAbility staff have met 3 times since August 2022. (August September and most recently November)
- Last session, demo of tools developed by other states
- A working template for the LTMH was created with the workgroup.
- Workgroup members will be taking prototype back for broader input and feedback (likely Dec)

Abuse/Neglect Registry Taskforce

- Taskforce met March – Nov 2022
- Completed comprehensive set of recommendations for an abuse/neglect registry
- Submitted to Governor's Office, Sec Aging, Sec DHS, House Human Service Committee, and Senate Health and Human Services Committee on Nov 30, 2022

Home and Community Based Services Quality Measure Set

Home and Community Based Services (HCBS) Measure Set

- July 21, 2022 CMS published a State Medicaid Director (SMD) letter adopting a standard measures set for HCBS
- 7+ million people receive HCBS under Medicaid
 - 150,000 people in PA
- Medicaid-funded HCBS - \$125 billion annually in state and federal spending (\$4B for ID/A waivers in PA)
- No standardized way of looking at quality of service delivery systems
- HCBS quality measure set will promote use, within and across states, of nationally standardized quality measures to promote health equity and reduce disparities in health outcomes among this population.

What is a “Measure Set”?

Measures that assess quality across a broad range of areas identified as measurement priorities for HCBS

- Service plan
- Health and safety
- Access
- Rebalancing
- Community Integration

Purpose of HCBS Quality Measure Set

- Promote more common and consistent use, within and across states, of nationally standardized quality measures in HCBS programs
- Create opportunities for CMS and states to have comparative quality data on HCBS programs.
- Expected to support states with improving the quality and outcomes of HCBS
- Promote health equity and reduce disparities in health outcomes among this population.



NQF#	Measure Steward	Measure Name	Data Collection Method	Assurance Sub Assurance	Access	Rebal- ance	Integratio n HCBS Settings
Subassurance: 4. Participants are afforded choice between/among waiver services and providers.							
3622	NASDDDS, HSRI	NCI-IDD CC-4: Life Decision Composite Measure (The proportion of people who report making choices (independently or with help) in life decisions)	Part. Reported Data/ Survey	Assurance: Service Plan - The State demonstrates it has designed and implemented an effective system for reviewing the adequacy of service plans for waiver participants.			X
N/A	NASDDDS, HSRI	NCI-IDD: The percentage of people who report that they helped make their service plan	Part. Reported Data/ Survey	Assurance: Service Plan - The State demonstrates it has designed and implemented an effective system for reviewing the adequacy of service plans for waiver participants.			X

Implementation of HCBS Measure Set

- Voluntary, currently
- HCBS quality measure set is one piece of a larger Medicaid quality strategy – 2nd letter expected
- CMS expects to update the measure set in the future, including adding newly developed measures that address measure gaps, as the field of HCBS measure development advances.
- HCBS Quality Measure Set extensively leverages existing beneficiary surveys including **National Core Indicators[®]-Intellectual and Developmental Disabilities (NCI[®]-IDD)**