Hello, everyone, and thank you for attending today's webinar. Before we begin, I want to cover a few housekeeping items.

At the bottom of your audience console are multiple application widgets you can use. You can expand each widget by clicking on the Maximize icon at the top right of the widget or by dragging the bottom right corner of the widget panel.

If you have any questions during the webcast, you can click on the purple Q&A widget at the bottom and submit your question. We'll address as many questions as possible throughout the session.

If you have technical difficulties, please click on the Help widget. It has a question mark icon and covers common technical issues. However, you can submit technical issues via the Q&A widget. Please note: most technical issues can be resolved by pressing F5 or Command R on MACs to refresh your player console.

At the end of the webinar, you can provide feedback using the Survey widget. It is in the Widget Menu at the bottom of your console.

Finally, an on-demand version of this webcast will be available one day after the webcast using the same audience link to access today's event.

Now I'll introduce Alli Steiner from Mathematica Technical Assistance and Analytic Support Team. Alli, you now have the floor.

All right. Thank you so much, Brian.

So, like Brian said, my name is Alli Steiner, and I'm part of the Technical Assistance and Analytic Support Team for the Medicaid and CHIP core set measures. I'm joined by my colleague Colleen Staatz, who will also be presenting later on during the webinar, as well as a few members of the Technical Assistance Team at Mathematica. Additionally, our CMCS colleagues are joining us on the phone.

So here on this slide you can see the agenda for today's webinar. We'll be going through the major updates; the 2019 Child and Adult Core Set Measures and Specifications; Review data quality priorities; Present available reporting resources; And then have a few opportunities for questions.

Next slide, please.

So, you may recall that typically we have a webinar closer to the opening of MACPro in the fall, but we know that states are already working to collect data and calculate the FFY 2019 measures, so we wanted to take this opportunity to highlight some major changes now, and we'll still plan to have a webinar with guidance for reporting in MACPro later in the fall.

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So, next slide, please.

So first we'll present on some high-level changes to the 2019 Core Sets. No measures were added to the 2019 Child or Adult Core Sets. One measure was retired from the Adult Core Set, which is the PC03 Antenatal Steroids measure. And no measures were retired from the Child Core Set.

The FUA/FUM measure from the 2018 Adult Core Set is separated into two distinct measures in the 2019 Core Set, which is alignment with the HEDIS measures. The two distinct measures for 2019 are shown here on the bottom of the slide, and they include the Follow Up After ED Visit for Alcohol and Other Drug

Abuse or Dependence or FUA Measure, and the Follow Up After ED Visit for Mental Illness, FUM Measure.

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On this slide we've listed some major changes to the specifications for FFY 2019. For the Follow Up After Hospitalization for Mental Illness Measure, which is in both the Child and Adult Core Sets, the age ranges were updated to align with the updates made to the HEDIS measure. The FUH measure is now reported for children ages 6 to 17 in the Child Core Set and adults ages 18 and older in the Adult Core Set.

An eMeasure Specification was added to the HIV Viral Load Suppression Measure in the Adult Core Set.

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Additionally, information was added on how to obtain the Value Sets for Electronic Specifications for the relevant measures in the Child and Adult Core Sets, which are shown here on this slide.

Additionally, exclusions for beneficiaries with advanced illness and frailty were added to four measures in the Adult Core Set. The acronyms for the measures listed on this slide are included in the Measure List, which are a part of the Appendix in the back of the slide deck.

Next slide, please.

Now I'll go through a few measure-specific changes to the specifications.

So, first the screening for Depression and Follow-Up Plan or CDF measure is included in both the Child and Adult Core Sets. For ages through 12 through 17 in the Child Core Set and ages 18 and older in the Adult Core Set. For 2019, an option for calculating the measure using administrative data only was added. Previously the specifications required the hybrid method which included a medical record review. For 2019, the medical record review may be used to validate the state's administrative data, but validation is not required for reporting.

The specifications also clarify the Exclusions and Exceptions and when they should be applied. The Exclusion criteria are evaluated before determining whether a beneficiary meets the numerator criteria, whereas the Exception criteria are only evaluated if the beneficiary does not meet the numerator criteria. Additionally, ICD-10 codes to identify the Exclusions and Exceptions were added to the specification.

Next slide, please.

So here on this slide we show the major steps for calculating the CDF measure. So first assess the denominator criteria by looking for an encounter with eligible CPT or HCPCS codes.

Next, exclude beneficiaries with an active diagnosis of depression or bipolar disorder prior to the encounter.

Then assess the numerator criteria which includes depression screening on the date of encounter, and if the screening is positive, whether a follow-up plan was documented.

Next, among those that did not meet the numerator criteria in step three, remove those that meet the Exception criteria. So this would include those that refuse to participate, those with an emergent situation, and those with functional capacity concerns.

And then, finally, calculate the rate by taking the numerator divided by the denominator times 100, and then this would be reported in MACPro.

So now I'm going to pass over to my – my colleague, Colleen Staatz, for the next slide.

Thanks, Alli.

Now I'm going to talk some more about some Adult Core Set measures that had significant updates for 2019. The first is the Controlling High Blood Pressure measure.

In previous years, this measure required the use of the hybrid method or electronic health record. For 2019, the administrative method was added as an option for reporting this measure. The administrative method uses CPT Category II codes to identify beneficiaries who meet the criteria for the numerator, meaning that they have a diagnosis of hypertension and their blood pressure is adequately controlled.

In addition, the criteria for blood pressure being adequately controlled is now the same for all measureeligible beneficiaries while in previous years there were different numerator criteria based on beneficiary age and diabetes status.

Also, Telehealth was incorporated into the measure specifications.

Next slide, please.

Another Adult Core Set measure with major changes between 2018 and 2019 is the Use of Opioids at High Doses in Persons Without Cancer measure. The numerator criteria for this measure changed for 2019 to include beneficiaries who received prescriptions for opioids with an average daily dose greater than or equal to 90 morphine-milligram equivalents over a period of 90 days or more. And as in previous years, beneficiaries with cancer diagnosis or in hospice are excluded from the measure.

Also for 2019, the rate is now expressed as a percentage while in previous years it was reported as a rate per 1,000 beneficiaries.

The continuous enrollment requirement was changed from the treatment period with one allowable gap to the measurement year with one allowable gap. And also the term "treatment period" was replaced throughout the specification with the term "opioid episode."

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We would like to also highlight some changes to the Plan All-Cause Readmission Measure for FFY 2019.

States will now be asked to report the count of expected 30-day readmissions rather than the expected readmission rate for this measure. Guidance on using risk adjustment to calculate the count of expected 30-day readmissions is included in the measure specification.

The table on this slide shows which data elements for this measure are reported by states and which are calculated by MACPro.

As with previous years, states will report the count of indexed hospital stays and the count of observed 30-day readmissions. The observed readmission rate will be calculated by MACPro. States will then report the count of expected 30-day readmissions, and then MACPro will automatically calculate the expected readmission rate and the observed-to-expected ratio.

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We'll now pause in case there are any questions. As a reminder, you may enter questions directly into your chat box.

So it looks like there are no questions at this time, but as a reminder, feel free to type questions and we'll have another opportunity to answer them towards the end of the webinar.

Next slide, please.

Now I'd like to talk a little about CMS's Data Quality Priorities for FFY 2019.

First, as many of you know, we are in the process of conducting systematic data quality outreach to states that reported Core Set data for FFY 2018 using the Seek More Information, or SMI, function in MACPro. We'd like to thank all the states that responded to our questions and provided informative clarifications and feedback.

For 2019, CMS will have a similar focus on data quality. We have listed here on the slide some areas that CMS will be focusing on during the data quality outreach process for 2019. These include documentation of populations included or excluded from the data. For example, if certain state delivery systems are excluded. In addition, CMS is particularly interested in learning about whether special populations, such as Dual Eligibles and individuals in foster care are included, as well as individuals receiving care in healthcare settings, such as federally-qualified health centers, rural health centers, and Indian health service facilities. The more detail that you can provide about the populations included in your states Core Set data when reporting in MACPro, the better.

Also, please document any deviation from Core Set specifications, such as the use of different age groups, data sources, or method.

Finally, CMS would like to ensure alignment between the Core Sets and measures that appear in multiple Core Sets, such as the FUH measure, for example.

Next slide, please.

Now we'd like to discuss some technical assistance resources that are available to help states with their Core Set reporting.

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And, again, I just want to note that all – the hyperlinks to all of these resources are available in Appendix A of the slide deck. And the slides will be posted online following the presentation, so anyone who registered for this webinar should receive an email with a link to view the slides. They're also available in the Resources widget.

So the 2019 Measure Lists are posted online for both the Child and Adult Core Sets. In addition, the Resource Manuals and Technical Specifications are posted, and within the Resource Manuals are the links to the Value Set Directories needed to calculate the measures as well.

There are also a Summary of Updated Documents that provides the high-level changes for the measures in the Child and Adult Core Sets from the previous year. These documents outline all the changes to the measures that we discussed today as well as some additional changes.

There is also a Data Quality Checklist for both the Child and Adult Core Set Measures. This document is intended to help states to improve the completeness, accuracy, consistency, and documentation of data reported. The checklist includes common issues noted in the data reported for FFY 2018. And states can use the checklist to assess their data before entering it in MACPro.

Finally, the Measurement Period Tables include the denominator, numerator, and continuous enrollment measurement periods for each of the measures in the Adult and Child Core Sets. When entering the start and end dates for a measure in MACPro, states should use the denominator measurement period for each measure on this table if they use Core Set specifications.

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Here are some additional resources that apply to both the Child and Adult Core Sets.

The first is a brief on calculating state-level rates using data from multiple reporting units. This brief provides guidance on developing state-level rates when data for the measures are collected separately by programs, such as Medicaid or CHIP, or by payment system.

There is also a brief available on using the hybrid method, which involves the use of both administrative data and medical record review.

The Contraceptive Care – Post-Partum Women and Contraceptive Care – All Women measures are part of both the Child and Adult Core Sets, and SAS code is available to calculate these measures. It is available at the HHS website at the link shown on the screen.

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Here are some additional measure-specific resources for measures in the Child Core Set.

For the Use of Multiple Concurrent Antipsychotics in Children and Adolescents measure, sample SAS codes and a User Guide is available on request by emailing the TA mailbox at <a href="MACqualityTA@cms.hhs.gov">MACqualityTA@cms.hhs.gov</a>.

There is also a sample SAS code in the User Guide for the SEAL measure, which is Dental Sealant for 6-to-9-Year-Old Children at Elevated Caries Risk. In addition, there's also a TA brief for this measure available at the link shown on the slide.

Finally, other general Child Core Set TA resources are available on Medicaid.gov.

Next slide, please.

There are also a few measure-specific resources available for measures in the Adult Core Set. The Use of Opioids at High Dosage In Persons Without Cancer and the Concurrent Use of Opioids and Benzodiazepines measures require the use of National Drug Codes, or NDCs. A file with these codes is available on request to states by emailing the TA mailbox. These codes are updated every year, so even if you requested the codes last year, please request them again to obtain the updated file for 2019. The file also contains additional guidance on morphine-milligram equivalent, or MME, conversion factors which are needed to calculate the OHD measure.

There are four PQI measures included in the Adult Core Set, and free software for calculating these measures is available from AHRQ. Please note that the software calculates the measure per 100,000 beneficiaries while the Core Set measures are recorded per 100,000 beneficiary months. So states will need to adjust the data for reporting in MACPro.

And, again, additional Adult Core Set TA resources are available on Medicaid.gov.

Next slide, please.

So we just wanted to highlight a few upcoming Core Set webinars. The first one is next Wednesday, May 29. There will be a webinar on State Reporting of Health Home Core Set Measures with information on the status of FFY 2015 through 2018 reporting as well as updates for FFY 2019.

Then, on July 11, there will be a webinar on calculating Stratifying Performance Rates for Core Set Measures and Using the Stratified Data for Quality Improvement. States may report stratified rates for a number of categories in MACPro including race, ethnicity, sex, language, disability, and geography.

Finally, in September there will be a webinar on Technical Assistance to Support FFY 2019 Reporting in MACPro.

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So, again, we want to take some time to answer questions. Please feel free to enter questions in the chat

So, yeah, it looks like we have a few questions that have come in so far, so I'll read the question out loud and then respond to it.

So, the first question is, are there going to be slots in each measure in MACPro to identify the category of coverage, duals, etc., or will we include it in the comments area?

So, thank you for that question. There are a few places in MACPro where you can tell us about your state's delivery system and population. So, first, on the Administrative section of MACPro, you would tell us the breakdown of your population covered by Medicaid and CHIP in terms of, you know, the percent covered by managed care, fee for service, or other delivery systems. And that section should add up to 100%.

And then within each measure there is an opportunity for you to let us know which populations are included. So that would include whether it includes your Medicaid, CHIP, your dual population. So there are checkboxes for each of those.

And then within each measure there's also a place to indicate which delivery systems are included within that measure. So, for example, if you have managed care in your state but only half of your managed care plans are included in that specific measure, that – you would let us know that within that specific section of MACPro.

And then in terms of the other populations that we talked about such as individuals in foster care, or individuals receiving services at FQHCs or through the Indian health services, that is not specifically a separate section in MACPro, but to the extent that you have this information and could include it in the additional comments section, that would just be really helpful for CMS to understand. So, for example, if you know for a fact that your foster care population isn't included, if you can let us know that in the comments, the more information we have about who is included and who is excluded, the better picture we have of your — of your Core Set data.

Okay, we also have a question about special population stratification. It says, stratification is difficult to do in a managed care environment unless those facts are added to HEDIS measures. So, we wanted to just note that we – so we are having a webinar on stratification in – in July, July 11 actually, so we'll be going over some resources to help collect stratified data there. But we also did want to say in terms of the special populations, what we're encouraging here is just to include as much information about who's included and who's excluded in your comments. And we understand that reporting the stratified rates is a little bit more challenging as well. But, stay tuned for more information about strati – stratified rates.

We also have a question about what is the MACPro 2019 submission due date? That has not been officially announced yet by CMCS, but it will be – we will send out a communication through the Technical Assistance mailbox when that date is announced.

There is also a question about whether the CMS health home submission date is the same as Adults and Child. That also has not been determined yet.

So it looks like we got another question about for states that report weighted rates using managed care plans reporting HEDIS measures where there are no age breakouts indicating child and adult populations. Like the PCP measure, can the state simply report the same rate for both the Child and Adult and put a note that the state-wide weighted rate cannot be broken out since that is how it is reported to HEDIS. Yes, we do have some states where that is the case. And in that case, we would encourage you to go ahead and report the measure but, again, as you said in the question, just put a comment that it cannot be broken out by Child and Adult since the state does not have these data available. So that's fine.

And it looks like there is also a question, is there a definition for beneficiaries with advanced illness and frailty for measures that require that exclusion? Yes, there is, and that is defined in the technical specifications. So, again, if you have any questions, feel free to let us know, but that is all defined in the tech specs themselves.

We also have a question that says, NCQA is considering the retirement of the APC measure, which is the multiple concurrent antipsychotic measure in the Child Core Set. And the question asks, would the measure also be dropped from the Core Set if retired by NCQA? And the answer to that question is that would be determined by the annual Core Set stakeholder review process. The meeting just took place in early May, and then CMS will release the final 2020 Core Sets later in – in the end – by the end of the year. So, that has not been determined officially, but it will be decided by the annual review stakeholder workgroup.

All right, so I think that's all the questions we've received at this time. Again, feel free to enter additional questions, and if we don't answer them today, we can respond to you by email. But I think we can go ahead and move to the next slide.

All right. And next slide, please.

So just to wrap up, we wanted to remind everyone of the Technical Assistance contacts for Core Set reporting.

For TA questions relating to calculating, reporting, or using the Core Set measures, please submit any questions to the TA mailbox at MACqualityTA@cms.hhs.gov.

And if you have any questions or need assistance with MACPro itself, you can contact the MACPro Help Desk at the address shown on the slide.

Now I'll turn it back to Brian to wrap things up for the webinar today.

Next slide, please.

This concludes the webcast for today. Please submit feedback to the presentation team by using the survey that will appear in your browser when the event concludes. If you are unable to do so at this time, you can view the on-demand recording of the event and access the Survey widget there. The on-demand version of this webcast will be available approximately one day after the webcast using the same audience link that was sent to you at the registration.

Thank you. Have a great afternoon.