

American Association on Health & Disability

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AAHD - Dedicated to better health for people with disabilities through health promotion and wellness



October 10, 2023 Member Issues of Focus; NCQA Consumer Advisory Council

Three of our federal policy issue priorities:

- 1. Overcoming and Linking Program Silos for Persons with Co-Occurring Mental Illness and Substance Abuse Disorder; Persons with Co-Occurring Mental Illness and Chronic Medical Conditions; Persons with Co-Occurring Mental Health and Intellectual and Other Developmental Disabilities; Persons with Co-Occurring Behavioral Health Conditions and Disabilities; Persons with Co-Occurring Disabilities and Chronic Health Conditions.
- 2. Enhancing the Employment Status, Benefits, and Official Recognition of Non-Traditional Workers – Community-Based; Lived Experience Framework - community-based, non-medical credentialled, and a livedexperience framework serving persons with disabilities, aged individuals requiring long-term services and supports (LTSS), persons with mental illness and substance use disorder, persons served in the Medicaid homeand-community-based services (HCBS) programs, and persons with cooccurring conditions including those with chronic health conditions.

HHS has a Community Health Worker Sustainability Workgroup that includes a focus on: (a) Consortium for Constituents with Disabilities (CCD) advocated DSPs (Direct Support Professionals) and Medicaid HCBS workforce; (b) Disability and Aging Collaborative (DAC) advocated LTSS workforce, including Medicaid HCBS; (c) Mental Health Liaison Group (MHLG) advocated MH/BH peer support workers (peer support specialists); and (d) NACHW (APHA; ASTHO) advocated - community health workers.

3. Medicaid Home-and-Community-Based Services (HCBS) – Expanding the statutory authority status (from waiver to state plan benefit), increasing dedicated resources; strengthening work force and family care givers.

Medicaid HCBS annually serves between 4 million (Kaiser Family Foundation, August 14, 2023) to 7.5 million (Mathematica, July 22, 2022) persons. Annual Medicaid HCBS expenditures were \$88 billion in Fee-For-Service HCBS in 2021 and \$30.9 billion in Managed LTSS in 2019 (MACPAC, June 15, 2023).

Quality Measures That Reinforce the 3 Federal Policy Issues Above:

- 1. ACL-AHRQ-AHRQ Project HCBS Evidence Map.
- 2. Mathematica for CMS (Medicaid and CHIP Core Quality Measures) sharing care plans between primary care and HCBS providers.
- 3. Primary Care Continuity of Care Measure American Board of Family Medicine
- 4. Behavioral Health-Primary Care Integration, including Quality Measures:
- a. Bipartisan Policy Center.
- b. Commonwealth Fund.
- c. PCORI.
- d. National Academy of Medicine, Strategies To Improve Access to Behavioral Health Care Through Medicare and Medicaid.
- e. CMS CMMI Primary Care Demo.
- f. Core Quality Measure Collaborative (CQMC).
- 5. Patient-Reported Outcomes, Performance Measures (PRO-PM):
 a. AHRQ CAHPS Patient Experience Updates.
 b. American Board of Family Medicine primary care PRO-PM.

All These Efforts Require Robust and Inter-Active Data Systems

Consistent with the advocacy efforts of the Consortium for Constituents with Disabilities (CCD), Disability and Aging Collaborative (DAC), and Disability and Rehabilitation Research Coalition (DRRC):

Continue to assertively advocate: Collect, Analyze, and Regularly Publicly Report –demographic factors including **disability status**, race, ethnicity, sex, age, primary language, sexual orientation, gender identity, and socio-economic status, in all settings and by setting.

Ideally, the data system analysis should be able to cross-walk between these various precise demographic factors; for example, disability status and race. All Medicare, Medicaid, and HHS health programs should use these comprehensive and consistent demographic categories in the collection, analysis, and publicly transparent reporting of such data. Quality and performance data should be stratified by such categories.

Sincerely,

E. Clarke Ross

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