



Submitted via Website

July 15, 2016

National Quality Forum

Email: hcbs@qualityforum.org

RE: "Addressing Performance Measure Gaps in Home and Community-Based Services to Support Community Living: Priorities for Measure Development" Interim Report

To Whom It May Concern:

Overall, the Alliance supports the conceptual framework in the home and community-based services (HCBS) interim report as it applies to HCBS overall, as a continuum of services and supports. However, the Alliance does have a few concerns as detailed below.

First, the operational definition of HCBS on page 7 of the report is very broad and does not specify sources of funding. As such, it appears even to include the delivery of skilled home health services under the Medicare home health benefit, even though the Medicare benefit is not considered a type of long-term service or support. Although Medicare-certified home health agencies (that deliver Medicare home health benefits) can, do and should partner with providers of long-term services and supports (LTSS), it is important to understand and note that the Medicare benefit does not cover long-term care. Further, the definition of HCBS is also broad enough to include home care medicine (physician and APRN house calls) and potentially even hospice.

While, the Alliance recognizes that the definition of HCBS is likely broad by design, and purposefully neutral as to source of payment, it is important to note that unlike most of the other providers of services that are subsumed in the operational definition of HCBS, Medicare home health agencies are already subject to numerous performance measures, pay-for reporting against those measures, and even public reporting and star ratings on Medicare's Home Health Compare website.

Additionally, the domains identified in the interim report are also broad in nature. We support the aspiration of applying the domains in the interim report to the HCBS "system" or "continuum" as a whole, but caution that for individual providers of HCBS, the current state of each provider's role and function should be considered. For individual providers of HCBS (as defined in the interim report), measurement of quality in every domain and sub-domain may not be appropriate. In practice, measures that will be developed to apply to each provider should be tailored and appropriate so that providers are held to what they can reasonably and feasibly be accountable for.

Moreover, it is critical that providers be held to a parsimonious set of measures to enable them to focus their performance improvement efforts. As noted in the IOM's "Vital Signs" report measures as actually applied to providers should be thoughtfully chosen and prioritized to enable meaningful performance improvement efforts.

Sincerely,

A handwritten signature in black ink, appearing to read "T. Lee", is positioned to the left of a vertical line.

Teresa Lee, J.D., M.P.H.
Executive Director