

Home- and Community-Based Long Term Services and Supports Use Measure Definition (HCBS)

July 25, 2016

Medicaid Version 1.1

Description

Proportion of months receiving long-term services and supports (LTSS) associated with receipt of services in home- and community-based settings during the measurement year.

These specifications are derived from a measure developed by the Washington State Department of Social and Health Services, in collaboration with Medicaid delivery system stakeholders, as part of the 5732/1519 performance measure development process.

Eligible Population

Ages	Separate reporting for age groups 18 – 64 and 65+
Medicaid enrollment	Enrolled in Medicaid coverage in the denominator-compliant member month
Anchor date	December 31 of the measurement year
Identification window for Behavioral Health Risk factors	January 1 of the year prior to the measurement year through December 31 of the measurement year (24 months)
Benefit	Full benefit Medicaid-only and dual eligibles excluding Part C enrollees Exclude persons with other third-party liability (coverage)
Data sources	Medicaid MCO encounters and HCA-paid claims RSN/BHO encounter data and DBHR-paid behavioral health services CARE assessment diagnoses for identification of mental illness and substance use disorder Medicare Parts A and B claims and Medicare Part D encounters Long-term care service data
Service contracting entity attribution	For Behavioral Health Organization (BHO), Area Agency on Aging (AAA) and Managed Care Organization (MCO) reporting, members must meet the additional attribution criteria defined below: <ul style="list-style-type: none">Resided in the BHO service area in the qualifying service month

	<p>AND presented an indication of a mental health treatment need in the 24 months leading up to and including the denominator-compliant member month</p> <ul style="list-style-type: none"> • Resided in the BHO service area in the qualifying service month AND presented an indication of a substance use disorder treatment need in the 24 months leading up to and including the denominator-compliant member month • Resided in the AAA service area in the denominator-compliant member month • Enrolled with the MCO in the denominator-compliant member month
LTSS service criteria	<p>Receipt of any one or more of the following service modalities in the index month:</p> <ul style="list-style-type: none"> • Home- and community-based services <ul style="list-style-type: none"> ○ In-home personal care services ○ Adult family home services ○ Adult residential care services ○ Assisted living services • Nursing home services
Claim status	Include only final paid claims or accepted encounters in measure calculation

Denominator

Person-months associated with receipt of LTSS services by persons in the eligible population in the measurement year (includes HCBS and nursing home services).

Numerator

Person-months associated with receipt of home- and community-based LTSS by persons in the eligible population in the measurement year (excludes nursing home services).

Measure may be expressed as a rate per 1,000 member months or, equivalently, as a percentage of denominator-compliant member months.