
Medicaid Health Home Core Sets Annual Review Workgroup:

Meeting to Prepare for the 2026 Review

June 5, 2024

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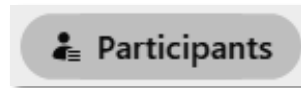


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Technical Instructions *(continued)*

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Welcome and Meeting Objectives

Meeting Objectives

- **Discuss the strategy and criteria for assessing measures**
- **Identify the measures suggested for addition to the 2026 Medicaid Health Home Core Sets**
- **Describe the resources available to Workgroup members for reviewing measures**
- **Present the agenda and approach for measure discussion at the voting meeting (June 25–26, 2024)**
- **Provide opportunity for public comment**

Mathematica Medicaid Health Home Core Sets Review Team

- **Rosemary Borck, Project Director**
- **Patricia Rowan, Principal Researcher**
- **Emily Costello, Health Analyst**
- **Maria Dobinick, Researcher**
- **Kalidas Shanti, Health Associate**
- **Madelaine Spiering, Health Analyst**

2026 Health Home Core Sets Review Workgroup

Voting Members

Co-Chair: Kim Elliot, PhD, CPHQ, CHCA	Health Services Advisory Group
Co-Chair: Jeff Schiff, MD, MBA	AcademyHealth
David Basel, MD <i>Nominated by South Dakota Department of Social Services</i>	Avera Medical Group
Mackenzie Daly, MPA	Rhode Island Department of Behavioral Healthcare, Developmental Disabilities, and Hospitals
Ari Houser, PhD	AARP Public Policy Institute
Amy Houtrow, MD, PhD, MPH, FAAP <i>Nominated by American Academy of Pediatrics</i>	University of Pittsburgh School of Medicine
Arielle Kane, MPP	Families USA
Pamela Lester, RN, BSN, MSHS	Iowa Medicaid Enterprise

2026 Health Home Core Sets Review Workgroup *(continued)*

Voting Members

Elizabeth Nichols, PhD, MS	New York State Department of Health
Kayla Romero, MPH	New Mexico Department of Health
Pamela Tew, LSW	ZERO TO THREE
Sara Toomey, MD, MPhil, MPH, MSc <i>Nominated by Children's Hospital Association</i>	Boston Children's Hospital
Laura Vegas, MPS <i>Nominated by National Association of State Directors of Developmental Disability Services</i>	National Association of State Directors of Developmental Disability Services
Jeannine Wigglesworth, MS	Connecticut HUSKY Health Behavioral Health Administrative Services Organization

2026 Health Home Core Sets Review Workgroup: Federal Liaisons

Federal Liaisons (Non-voting)

Administration for Community Living, DHHS

Agency for Healthcare Research and Quality, DHHS

Center for Clinical Standards and Quality, CMS, DHHS

Department of Veterans Affairs, VA

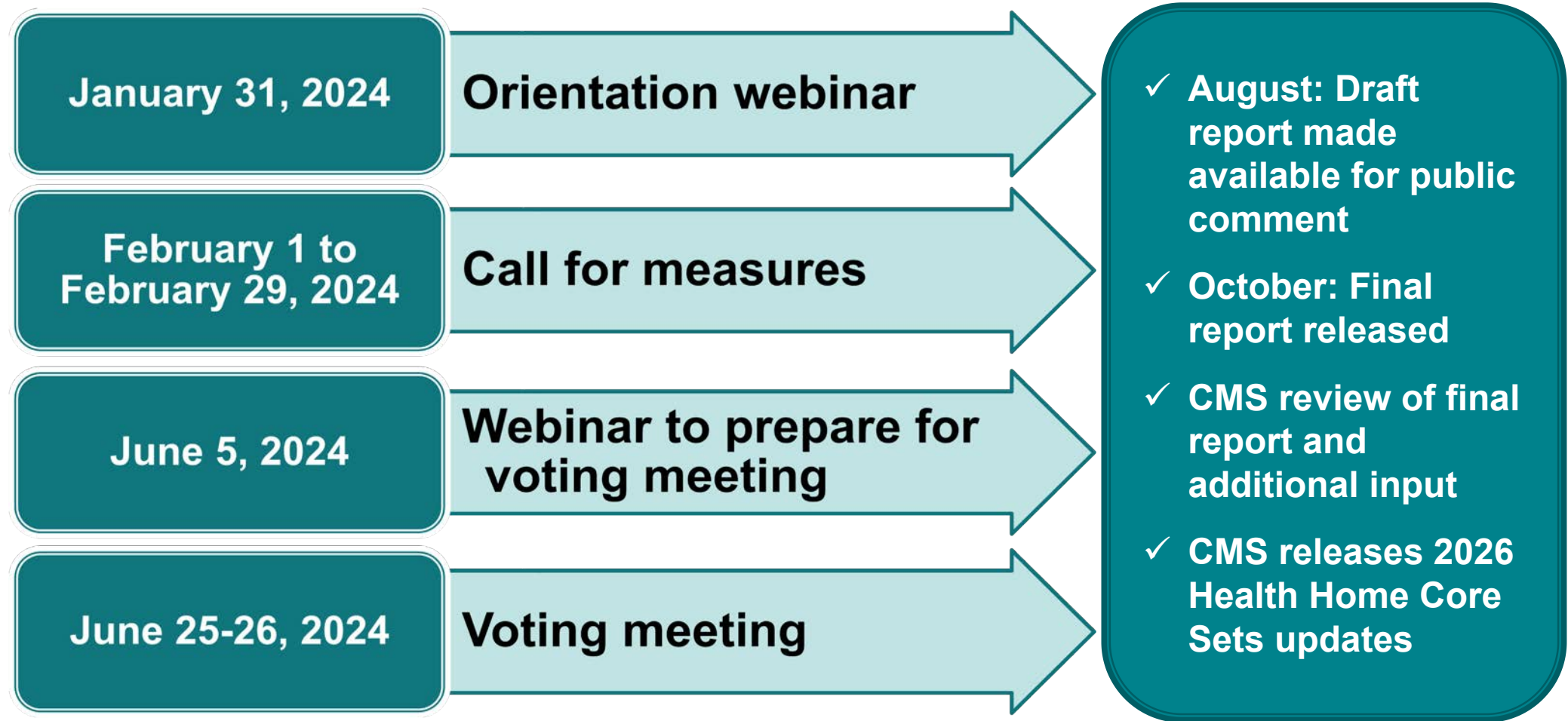
Health Resources and Services Administration, DHHS

Office of Disease Prevention and Health Promotion, DHHS

Office of Minority Health, DHHS

Substance Abuse and Mental Health Services Administration, DHHS

2026 Medicaid Health Home Core Sets Annual Review Milestones



Measure Review Strategy and Criteria

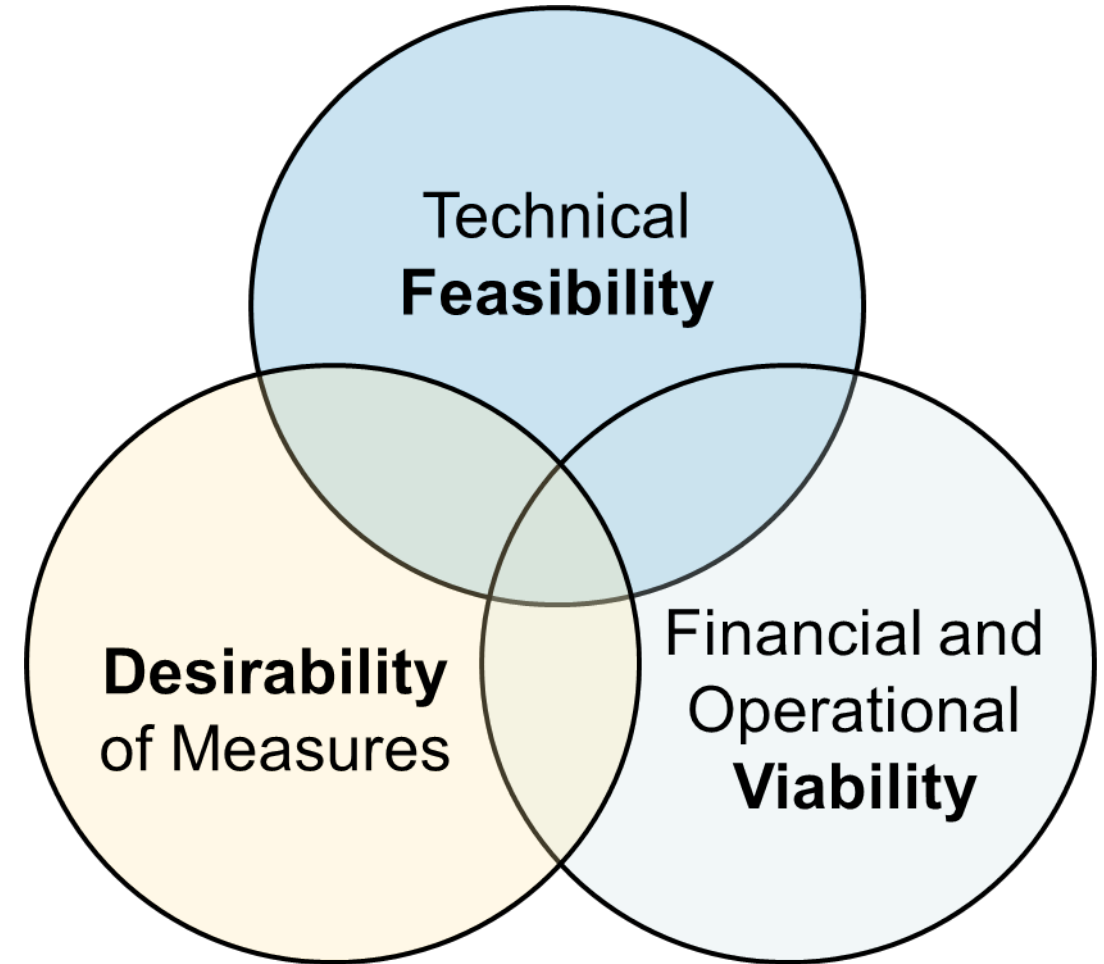
2026 Medicaid Health Home Core Sets Annual Review Workgroup Charge

The Medicaid Health Home Core Sets Workgroup for the 2026 Annual Review is charged with assessing the 2025 Medicaid Health Home Core Sets and recommending measures for addition or removal in order to strengthen and improve the Medicaid Health Home Core Sets

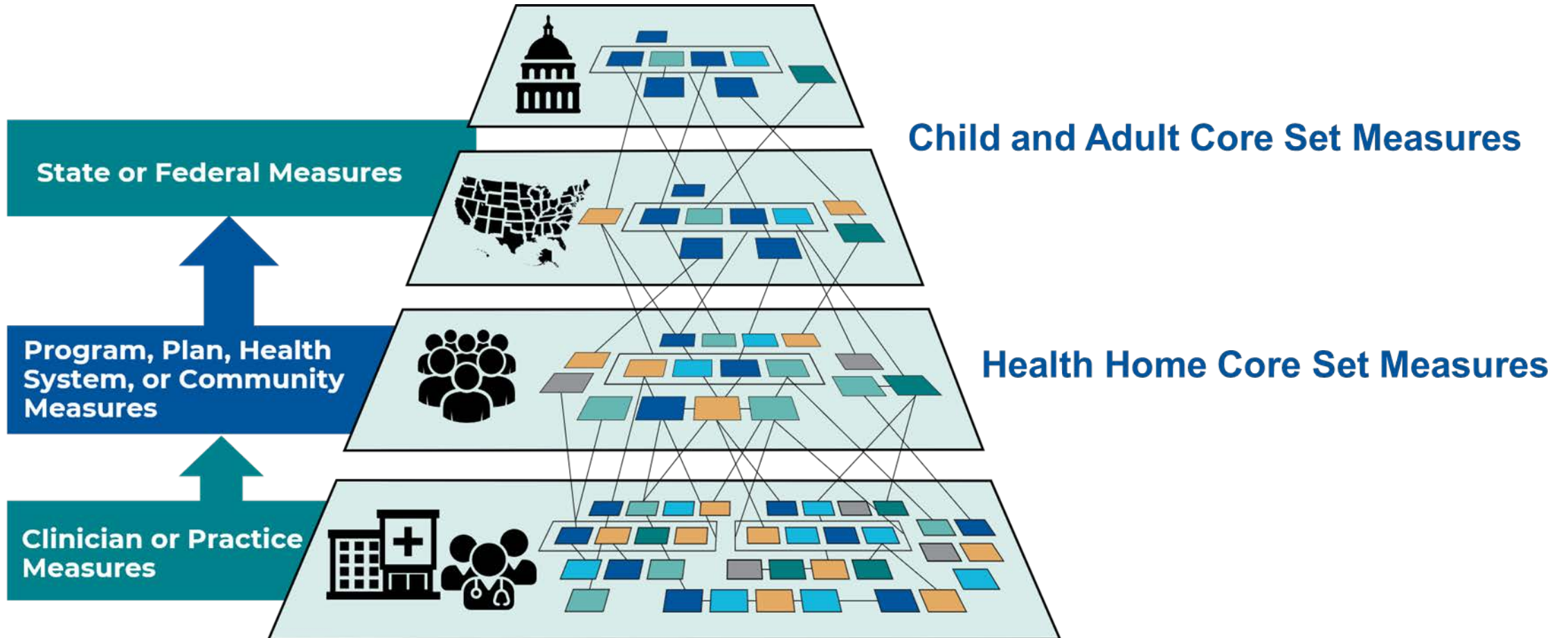
The Workgroup should focus on recommending measures that are actionable, aligned, and appropriate for program-level reporting, to ensure the measures can meaningfully drive improvement in quality of care and outcomes for Medicaid health home program enrollees

Role of the Workgroup in Strengthening the 2026 Health Home Core Sets

- The annual Workgroup process is designed to identify gaps in the existing Health Home Core Sets and suggest updates to strengthen and improve the Core Sets
- The Workgroup discussion must balance the desirability, feasibility, and viability of measures from the perspective of program-level quality measurement and improvement
 - Example: Quality measures that reflect health outcomes may be more desirable than process measures, but they may be more challenging to report based on data availability and resource intensity



Alignment Across Multiple Levels to Facilitate Quality Improvement



Preparing for Mandatory Reporting

- **States with approved health home SPAs that have been in effect for at least six months of the reporting period must report on all Health Home Core Set measures for FFY 2024 reporting and annually thereafter**
 - States must adhere to reporting guidance in the resource manuals and TA briefs issued by CMS
 - For more information on the mandatory reporting requirements, see <https://www.medicaid.gov/federal-policy-guidance/downloads/smd24002.pdf>
- **Feasibility and viability of program-level reporting of current and future Health Home Core Sets measures are key considerations as mandatory reporting begins**
- **Another key consideration is the ability to stratify measures by factors such as race, ethnicity, sex, geography, age, disability, and language**
 - States will be required to report data stratified by race and ethnicity, sex, and geography for a subset of mandatory measures beginning with FFY 2025 Core Set reporting
- **Workgroup recommendations for the 2026 Health Home Core Sets should consider the feasibility for all states with approved health home programs to report a measure for all beneficiaries enrolled in the health home program within two years of the measure being added to the Core Sets**

Criteria for the 2026 Medicaid Health Home Core Sets Annual Review

- **To assess measures for inclusion in the 2026 Medicaid Health Home Core Sets, Workgroup members will use criteria in three areas:**
 - **Minimum Technical Feasibility Requirements**
 - **Actionability and Strategic Priority**
 - **Other Considerations**
- **To be considered for the 2026 Medicaid Health Home Core Sets, all measures must meet minimum technical feasibility requirements**

Criteria for Suggesting Measures for Addition

Minimum Technical Feasibility Requirements

- ✓ The measure must be fully developed and have detailed technical specifications that enable production of the measure at the program level (e.g., numerator, denominator, and value sets).
- ✓ The measure must have been tested in state Medicaid and/or CHIP programs or be in use by one or more state Medicaid and/or CHIP programs.
- ✓ An available data source or validated survey instrument exists that contains all the data elements necessary to calculate the measure, including an identifier for Medicaid beneficiaries (or the ability to link to an identifier).
- ✓ The specifications and data source must allow for consistent calculations across health home programs (e.g., coding and data completeness).
- ✓ The measure must include technical specifications (including code sets) that are provided free of charge for state use in the Core Set.

Actionability and Strategic Priority

- ✓ Taken together with other Core Set measures, the measure can be used to estimate the overall national quality of health care in Medicaid health home programs.
- ✓ The measure should be suitable for comparative analyses of disparities by factors such as race, ethnicity, sex, age, rural/urban status, disability, and language.
- ✓ The measure addresses a strategic priority for improving health care delivery and outcomes in Medicaid health home programs.
- ✓ The measure can be used to assess progress in improving health care delivery and outcomes in Medicaid health home programs (e.g., the measure has room for improvement, performance is trendable, and improvement can be directly influenced by Medicaid health home programs/providers).

Other Considerations

- ✓ The prevalence of the condition or outcome being measured is sufficient to produce reliable and meaningful results across health home programs, taking into account Medicaid population sizes and demographics.
- ✓ The measure and measure specifications are aligned with those used in other CMS programs, where possible (e.g., Core Quality Measures Collaborative Core Sets, Medicaid Promoting Interoperability Program, Merit-Based Incentive Payment System, Qualified Health Plan Quality Rating System, Medicare Advantage Star Ratings, and/or Medicare Shared Savings Program).
- ✓ All health home programs should be able to produce the measure for Core Set reporting within two years of the measure being added to the Core Set and be able to include all Medicaid health home populations (e.g., all age groups, eligibility categories, and delivery systems).

Criteria for Suggesting Measures for Removal

Technical Feasibility

- ✓ The measure is not fully developed and does not have detailed technical measure specifications, preventing production of the measure at the program level (e.g., numerator, denominator, and value sets).
- ✓ States report significant challenges in accessing an available data source that contains all the data elements necessary to calculate the measure, including an identifier for Medicaid beneficiaries (or the ability to link to an identifier).
- ✓ The specifications and data source do not allow for consistent calculations across health home programs (e.g., there is variation in coding or data completeness across states).
- ✓ The measure is being retired by the measure steward and will no longer be updated or maintained.

Actionability and Strategic Priority

- ✓ Taken together with other Core Set measures, the measure does not contribute to estimating the overall national quality of health care in Medicaid health home programs.
- ✓ The measure is not suitable for comparative analyses of disparities by factors such as race, ethnicity, sex, age, rural/urban status, disability, and language.
- ✓ The measure does not address a strategic priority for improving health care delivery and outcomes in Medicaid health home programs (e.g., it does not promote effective care delivery, does not address the unique and complex needs of Medicaid beneficiaries, or there is a lack of evidence that this measure will lead to quality improvement).
- ✓ The measure cannot be used to assess progress in improving health care delivery and outcomes in Medicaid health home programs (e.g., the measure is topped out, trending is not possible, or improvement is outside the direct influence of Medicaid health home programs/providers).

Other Considerations

- ✓ The prevalence of the condition or outcome being measured is not sufficient to produce reliable and meaningful results across health home programs, taking into account Medicaid population sizes and demographics.
- ✓ The measure and measure specifications are not aligned with those used in other CMS programs, or another measure is recommended for replacement.
- ✓ All health home programs may not be able to produce the measure within two years of the reporting cycle under review or may not be able to include all Medicaid health home populations (e.g., all age groups, eligibility categories, and delivery systems).

What Do We Mean by Testing of Measures in Medicaid

- **Alpha testing—or formative testing—occurs concurrently to developing detailed technical specifications**
 - Typically involves small scale, iterative testing to determine the existence and quality of required data elements
 - Provides initial information about the feasibility of collecting required data to calculate and report a measure
- **Beta testing—or field testing—occurs after the development of complete specifications to assess the scientific acceptability and usability of a measure**
 - Field testing is designed to test implementation and usability in the target population, in this case, state Medicaid and CHIP programs
 - Field testing determines measure reliability and validity while providing further feasibility information, such as burden and costs associated with implementing a measure
- **To meet minimum technical feasibility requirements, measures must have been field tested in or currently in use by state Medicaid and CHIP programs to ensure that the specifications can be implemented using state Medicaid and CHIP data for program-level Core Set reporting**

Measures Suggested for Addition to or Removal from the 2026 1945 and 1945A Medicaid Health Home Core Sets

Measures Suggested for Addition to the Health Home Core Sets

Measure Name	Measure Steward	CMIT #	Data Collection Method	Age Range	Suggested for 1945 or 1945A Health Home Core Set	Included in 2024 Child or Adult Core Sets
Measures Suggested for Addition						
Diabetes Screening for People With Schizophrenia or Bipolar Disorder Who Are Using Antipsychotic Medications (SSD)	NCQA	1932	Administrative (claims only)	Ages 18 to 64	1945 Health Home Core Set	Yes - Adult Core Set
Emergency Department Visits for Chronic Ambulatory Care Sensitive Conditions (PQE 02) <i>This measure will not be discussed because it does not meet minimum technical feasibility criteria for testing in state Medicaid and/or CHIP programs or use by one or more state Medicaid and/or CHIP programs.</i>	AHRQ*	NA	Administrative (claims/encounter data only)	Age 40 and older	1945 Health Home Core Set	No
Metabolic Monitoring for Children and Adolescents on Antipsychotics (APM)	NCQA	2800	Administrative (claims only)	Ages 1 to 17	Both 1945 and 1945A	Yes - Child Core Set
Social Needs Screening and Intervention (SNS)	NCQA	NA	HEDIS® Electronic Clinical Data Systems (ECDS)	≤17 years, 18 to 64 years, age 65 and older	Both 1945 and 1945A	No

* AHRQ is the measure developer for this measure.

AHRQ = Agency for Healthcare Research and Quality; ECDS= Electronic Clinical Data System; NA = there is no CMIT number assigned to this measure; NCQA = National Committee for Quality Assurance.


Questions from Workgroup Members

Guidance to Workgroup Members for Reviewing Measures

Guidance for Measure Review

- **Before the voting meeting, Workgroup members should review all the measures suggested for consideration by the Workgroup**
- **Mathematica will provide resources to help Workgroup members assess the measures suggested for addition to the Health Home Core Sets**
- **To guide their review, Workgroup members should refer to the criteria for addition of new measures**
- **The Measure Review Worksheet can be used to record and organize notes, questions, and planned vote for each measure suggested for addition**

Measure Information Sheet: Addition


Mathematica
 Progress Together

MEASURE INFORMATION SHEET
DO NOT DISTRIBUTE

HEALTH HOME CORE SETS REVIEW WORKGROUP:
MEASURES SUGGESTED FOR ADDITION TO THE 2026 CORE SETS

Measure Information	
Measure name	Social Need Screening and Intervention
Description	<p>The percentage of members who were screened, using prespecified instruments, at least once during the measurement period for unmet food, housing, and transportation needs, and received a corresponding intervention if they screened positive. Six rates are reported.</p> <ol style="list-style-type: none"> Food Screening. The percentage of members who were screened for food insecurity. Food Intervention. The percentage of members who received a corresponding intervention within 30 days (1 month) of screening positive for food insecurity. Housing Screening. The percentage of members who were screened for housing instability, homelessness or housing inadequacy. Housing Intervention. The percentage of members who received a corresponding intervention within 30 days (1 month) of screening positive for housing instability, homelessness or housing inadequacy. Transportation Screening. The percentage of members who were screened for transportation insecurity. Transportation Intervention. The percentage of members who received a corresponding intervention within 30 days (1 month) of screening positive for transportation insecurity.
Measure steward	National Committee for Quality Assurance (NCQA)
CMIT number	To be determined by CMS
Meaningful Measures area(s)	Equity
Measure type	Process
Addition of measure to which Core Set(s)?	Both: 1945 Health Home Core Set and 1945A Health Home Core Set
Recommended to replace current measure?	No
Is the measure on the Child or Adult Core Set?	The Child and Adult Core Sets Annual Review Workgroup discussed, but did not recommend, the measure for addition to the 2026 Child and Adult Core Sets. ¹

1

- Measure information and technical specifications
- Information on minimum technical feasibility
- Whether the data source allows for stratification by racial, ethnic, and sociodemographic characteristics
- Nominating Workgroup member(s) comments on feasibility, actionability, and strategic priority
- Other information, including condition prevalence in Medicaid and CHIP and measure alignment across programs

Guidance for Measure Review

- 1. Review Measure Information Sheet and record notes and questions in measure review worksheet**
- 2. Consult other available resources as needed including:**
 - [Medicaid and CHIP Beneficiary Profile](#)
 - [Health Home Core Set History Table](#)
 - [Health Home Information Resource Center](#)
 - [Chart Packs and Measure Specific Tables](#)
 - [Health Home Measure Summaries](#)
 - [Health Home Core Set Resource Manual and Technical Specifications](#)
- 3. Assess the measure in relation to the criteria for addition**
- 4. Record preliminary vote in measure review worksheet**

Voting Meeting Approach

Voting Meeting Logistics

- The virtual voting meeting will take place on June 25–26, 2024
- Registration is now available at <https://www.mathematica.org/features/hhcoresetreview>
- The meeting will be open to the public
- More information about the meeting agenda and resources will be posted on our website prior to the meeting: <https://www.mathematica.org/features/hhcoresetreview>

Approach to Measure Discussion

- **The Workgroup will discuss 3 measures suggested for addition during the voting meeting, including 1 measure for addition to the 1945 Health Home Core Set and 2 measures for addition to both the 1945 and 1945A Health Home Core Sets.**
- **Measures will be considered in their specified form**

Voting Process

- **Voting will take place by measure after Workgroup discussion and public comment**
- **Workgroup members will vote on each measure in its specified form**
 - **Measures for addition:**
 - Yes = I recommend adding the measure to the Core Set
 - No = I do not recommend adding the measure to the Core Set
- **Measures will be recommended for addition if two-thirds of eligible Workgroup members vote “yes”**

Discussion of Gaps at the Voting Meeting

- **Every year, the Workgroup identified a list of gaps in the Core Sets**
- **The list of gaps is intended to inform the Call for Measures for the subsequent annual review**
- **Beginning with the 2027 Health Home Core Sets Annual Review cycle, Mathematica will conduct a Public Call for Measures**
- **During the Voting Meeting next month, Mathematica will engage the Workgroup in a discussion about priorities and criteria for the 2027 Public Call for Measures**
- **Public comment on priorities and criteria for the Public Call for Measures will be invited**

Workgroup Homework

- Review the Measure Information Sheets and record notes and questions in the measure review worksheet.
- Prepare for the discussion on the Public Call for Measures by reviewing measure criteria and previously identified gaps
- If you have questions while reviewing the resources, please email MHHCoreSetReview@mathematica.org
- Thank you for taking the time to prepare for the discussion and voting!

Questions from Workgroup Members

Opportunity for Public Comment

Wrap Up

Next Steps for Measure Review

- **Workgroup members and federal liaisons will receive resources after this meeting**
 - Measure information sheets will be posted publicly before the voting meeting
- **Workgroup members should log in to the voting platform and complete the practice vote**
- **Agenda and measure information sheets will be posted publicly prior to the voting meeting**
- **For help accessing resources or any other questions, Workgroup members should email MHHCoreSetReview@mathematica-mpr.com**

For More Information

- Information on the Medicaid Health Home Core Sets Annual Review is available at <https://www.mathematica.org/features/hhcoresetreview>
- Information on Medicaid Health Home Core Sets quality reporting is available at <https://www.medicaid.gov/resources-for-states/medicaid-state-technical-assistance/health-home-information-resource-center/health-home-quality-reporting/index.html>
- Information on the Medicaid Health Home program is available at <https://www.medicaid.gov/resources-for-states/medicaid-state-technical-assistance/health-home-information-resource-center/index.html>

Thank you for participating!