PREGNANCY OUTCOMES

- Summary report or dashboard: Develop a summary report or a dashboard to monitor measures on pregnancy process and clinical outcomes.

- Trend and subgroup analysis: Conduct analysis to monitor changes over time and identify subpopulation and geographic areas at risk of poor outcomes for continuous improvement.

CARE COORDINATION

- Serious emotional disturbance (SED) waiver: Consider requiring an SED Waiver specific survey be completed by MCOs and explore the potential for the Child ECHO Behavioral Health survey to include a supplemental sample of children and youth receiving SED Waiver services.

- HCBS CAHPS: Consider requiring the MCOs to complete the HCBS CAHPS survey (one already does), stratified by waiver and including questions for both Targeted Case Management and MCO Care Coordination.

- HCBS CAHPS: Increase sample size for subgroup analysis by alternating years in which additional sampling is conducted for specific subgroups and to use the hybrid approach, with a combination of in-person and phone surveys.

- National Core Indicator: Consider increasing resources for the National Core Indicator TM (NCI) and NCI-Aging and Disabilities TM (NCI-AD) surveys by eliminating the HCBS CAHPS survey which has substantial overlap and fewer domains. This approach will help pool resources together.

NETWORK ADEQUACY

- Network Adequacy Reporting: Continue to strengthen the standardized and systemized reporting form MCOs
- Monitoring process: Formulate and utilize program monitoring data to help identify areas for continuous improvement
- HCBS waivers: Conduct analysis to measure the adequacy of waiver service provider availability for waiver participants
- Consumer Information: Improve information sharing in responding to common questions from consumer and informing consumers regarding the process when issues related provider availability arise

TELEHEALTH

- Develop measures to track the telehealth concepts outlined in Figure 2 (page 8 of the recommendation report), to understand factors influencing consumer access and provider ability to administer telehealth services in KanCare.
- In addition to measuring access of telehealth services, KanCare could adopt measures from the other three domains outlined by the National Quality Forum in its telehealth framework, including: a) Financial Impact/Cost , b) Experience and c) Effectiveness.
- Develop a way to track whether telehealth services are provided via video or audio-only modalities, such as by adding a modifier to claims to indicate how the service was delivered. Audio-only modalities should also continue in order to make telehealth services accessible to those who cannot access video-only services.
- Only once the data collection is provided through the program, can analysis of telehealth's impact on access, patient outcomes, etc. be assessed

BEHAVIORAL HEALTH

- Access to telehealth: Developing a robust telehealth option for behavioral health services in KanCare with reasonable reimbursement attached will be key to the ongoing success of these services, which are often preferred by individuals receiving behavioral health treatment.
- Medicaid/CHIP Behavioral Health Core Set: Improve key quality measures including
  - Adherence to Antipsychotic Medications for Individuals with Schizophrenia: Ages 19 to 64
  - Initiation and Engagement of Alcohol and Other Drug Abuse or Dependence Treatment: Age 18 and Older
- Mental health parity: Incorporate mental health parity expectations and reporting in the KanCare contracts.

QUALITY ASSURANCE

- Tracking whether HCBS consumers are receiving the services they need and are qualified to receive, and developing benchmarks and more robust systems of accountability
- HCBS Service Plan Performance Measures: Develop benchmark goals and incentives, as well as additional measures.
- Consumer interview and record review methodologies: Ensure validation and Representativeness
- HCBS CAHPS: Increase sample size for subgroup analysis
- Direct care workers: Measure their availability for adequate workforce and access
- AuthentiCare: Explore the potential for measuring authorized and fulfilled hours for direct care
- HCBS person-centered care: Ensure adequate hours are authorized and fulfilled.