



# Adult Medicaid Quality Grants Funding Opportunity



Potential Applicants'  
Teleconference

July 30, 2012

3:00pm - 4:00pm Eastern

# Agenda for Call

- CMS Welcome and Introductions
- Overview of Funding Opportunity
- Questions

# Overview of the Funding Opportunity

- A two-year grant opportunity, funded by the Affordable Care Act (ACA), to support state Medicaid agencies in developing the capacity to collect, report, and analyze data on the initial core of set of health care quality measures for adults enrolled in Medicaid.
- Grant funding will support states' efforts to use these data for improving the quality of care for adults covered by Medicaid in their state.

# Overview of Initial Core Set of Health Care Quality Measures for Adults in Medicaid

- ACA provided for the identification of an initial core set of quality measures for voluntary use by states.
- Initial Core Set identified through multi-stakeholder process involving state Medicaid representatives, health care quality experts, & representatives of health professional organizations and associations.
- Measures published January 2012 and reporting by January 2014.

# Initial Core Set of Health Care Quality Measures for Adults in Medicaid

- Flu Shots for Adults Ages 50-64
- Adult BMI Assessment
- Breast Cancer Screening
- Cervical Cancer Screening
- Medical Assistance With Smoking and Tobacco Use Cessation
- Screening for Clinical Depression and Follow-Up Plan
- Plan All-Cause Readmission
- PQI 01: Diabetes, Short-term Complications Admission Rate
- PQI 05: Chronic Obstructive Pulmonary Disease Admission Rate
- PQI 08: Congestive Heart Failure Admission Rate
- PQI 15: Adult Asthma Admission Rate
- Chlamydia Screening in Women
- Follow-Up After Hospitalization for Mental Illness
- PC-01: Elective Delivery
- PC-03 Antenatal Steroids
- Controlling High Blood Pressure
- Comprehensive Diabetes Care: LDL-C Screening
- Annual HIV/AIDS medical visit
- Comprehensive Diabetes Care: Hemoglobin A1c Testing
- Antidepressant Medication Management
- Adherence to Antipsychotics for Individuals with Schizophrenia
- Annual Monitoring for Patients on Persistent Medications
- CAHPS Health Plan Survey v 4.0 - Adult Questionnaire with CAHPS Health Plan Survey v 4.0H - NCQA Supplemental
- Care Transition – Transition Record Transmitted to Health care Professional
- Initiation and Engagement of Alcohol and Other Drug Dependence Treatment
- Prenatal and Postpartum Care: Postpartum Care Rate

# Eligible Applicants and Potential Funding Amounts

- All 50 states, the District of Columbia, and US Territorial Medicaid agencies are eligible.
- Fifty-six (56) grant awards are available in the amount of up to \$1 million for each 12-month budget period over the two-year project period (an estimated total of up to \$2 million per Grantee).
- Grants will be awarded with consideration to: available funding, quality of application, and demonstrated ability to meet goals of project.

# Performance-Based Funding

- Selected states will receive an initial award for the first year of program implementation to pursue goals and objectives of grant program.
- Second year of grant program is contingent upon availability of funding, Grantee performance, and demonstrated implementation of at least two Medicaid quality improvement projects in the first year of the grant.

# Reporting Requirements for Grantees

- Progress reports (semi-annual and annual)
- Final report
- At least two quality improvement projects implemented over the two-year project cycle
- Performance measurement data submitted to CMS on least 15 initial core measures by January 2014.



# Requirements for Grantees, continued

- States must, over both years, begin developing their capacity to collect individual data and begin testing their ability to stratify, at a minimum, three\* of the adult measures by at least two of the following demographic categories: race/ethnicity, gender, language, urban/rural, and disability status.

\* The FOA identifies a menu of four measures from which a State can select three for this activity. The four measures are: Comprehensive Diabetes Care: Hemoglobin A1c Testing; Prenatal and Postpartum Care: Postpartum Care Rate; Controlling High Blood Pressure; Cervical Cancer Screening.

# What Will CMS do with Information Provided by Grantees?

- CMS will use the information and lessons learned through these grant activities to provide guidance and best practices to all Medicaid agencies on collecting, reporting, and using the quality measures to drive quality improvement.
- Data collected through these grants will be publicly reported by CMS in the same manner as data submitted by states on the initial core set of children's health care quality measures (e.g., Reports to Congress).

# CMS Support to States in Collecting and Analyzing the Core Measures

- CMS will launch a national Technical Assistance and Analytic Support (TA/AS) program in late 2012 to assist States.
  - Includes a technical assistance mailbox, one-on-one assistance to States, technical specification manuals, webinars, and issue briefs.
- The TA/AS will be available for all states (including states not receiving funding under this announcement) for reporting on the initial core set measures.

# Key Dates for Applicants

- Letter of Intent Due Date: July 31, 2012\*
- Application Due Date: August 31, 2012
- Anticipated Notice of Award: October 31, 2012

\*Letters of intent are voluntary and non-binding

# Questions?

- Programmatic questions related to this grant opportunity should be sent to: [medicaidadultmeasures@cms.hhs.gov](mailto:medicaidadultmeasures@cms.hhs.gov)
- Letter of intent can be emailed to: [mark.smith@cms.hhs.gov](mailto:mark.smith@cms.hhs.gov)
- All applications are required to be submitted through: <http://www.grants.gov>