

# Home and Community-Based Services (HCBS) Measures Maintenance and Development: Technical Expert Panel Meeting #1 Summary Report: May 27 and 28, 2025

## Background

### Technical expert panel (TEP) purpose

The Centers for Medicare & Medicaid Services (CMS) contracted with Mathematica and Human Services Research Institute to (1) develop new measures for children, youth, and young adults (CYYA) receiving home and community-based services (HCBS) and (2) maintain existing CMS HCBS and long-term services and supports (LTSS) measures. The contract name is Long-term Services and Supports (LTSS) Analyses, Public Reporting, and Measures Maintenance and Development. The contract number is 75FCMC19D0091 and the task order number is 75FMC24F0194. As part of its measure development process, Mathematica convenes groups of technical experts who contribute direction and thoughtful input to the measure developer during measure development and maintenance.

### Meeting objectives

The objectives of the TEP meeting, held on May 27 and 28, 2025, were for TEP members to do the following:

1. Understand the project's goals and anticipated engagement with the TEP for the maintenance of CMS's existing HCBS and LTSS measures
2. Understand HCBS measurement for CYYA, including the current status, gaps identified, and development goals
3. Provide input on the preliminary measure concepts list based on CMS Measures Management System (MMS) Blueprint criteria, including importance, usability/use, and feasibility

## Major discussion points

### Welcome and orientation

The HCBS Measures Maintenance and Development TEP Orientation Meeting took place on May 27, 2025, with 17 of 18 TEP members in attendance. Mathematica provided an overview of the session structure and introduced the key groups involved in the project: the Mathematica project team (Mathematica and Human Services Research Institute), CMS, and TEP members. TEP members introduced themselves so participants could understand their colleagues, backgrounds, and areas of expertise.

After introductions, Mathematica transitioned into an overview of the LTSS Analyses, Public Reporting, and Measures Maintenance and Development project. The Mathematica team clarified to TEP members that, for the purposes of this work, *children* refers broadly to people from birth up to their 21st birthday, encompassing CYYA who rely on HCBS. The goal of this initiative is to advance quality improvement and assurance within Medicaid HCBS. This effort seeks to review and identify potential needed updates to CMS' existing HCBS and LTSS measures and to establish new meaningful measures for CYYA. The project will ensure that all measures adhere to CMS MMS Blueprint, which sets rigorous standards for measure development and refinement. The MMS Blueprint criteria of importance, usability and use, feasibility, and scientific acceptability provide the framework for measure evaluation under this project. Mathematica emphasized that these criteria ensure the measures serve their intended purpose and are both practical and actionable for interested parties working to enhance HCBS. The team concluded by reiterating the importance of collaboration with TEP members because the TEP's collective expertise is an important input to the ongoing refinement and development of HCBS quality measures.

Afterward, Mathematica defined expectations for the project team and TEP members. With expectations clearly outlined, the meeting moved on to TEP charter ratification. Mathematica introduced the process of ratification, reminding members that the charter had been sent out ahead of the meeting for review and signature. The purpose of the charter was to formalize member participation, define responsibilities, and establish a shared commitment to the objectives of the TEP. The TEP co-chairs, having secured more than the threshold of members needed to sign on, ratified the charter. Mathematica acknowledged the announcement, thanking members for their engagement and reaffirming the importance of the charter in guiding the TEP's collaborative efforts moving forward. There were no questions from the TEP members during the May 27 meeting.

## **HCBS and LTSS measure maintenance**

Mathematica began the May 28 meeting by providing an overview of the meeting goals, HCBS Quality Measure Set, and expectations for TEP engagement in the maintenance of HCBS and LTSS measures. Mathematica then described how it would use CMS MMS Blueprint and Consensus-Based Entity (CBE) processes to maintain and evaluate 38 CMS-stewarded measures, some of which are part of the HCBS Quality Measure Set (QMS). The TEP members received a detailed list of these measures in the meeting materials.

Next, Mathematica explained how annual updates for all 38 measures are required under the CMS MMS Blueprint, regardless of CBE endorsement status, and they include tasks such as literature reviews, environmental scans, code set updates, and analysis of interested parties' feedback. Some of the measures are already CBE endorsed and will require re-endorsement over the next few years.

Then, Mathematica described plans to actively engage the TEP in measure maintenance activities, fostering collaboration through scheduled meetings, email discussions, and surveys. These interactions will provide opportunities to address endorsement-related updates, environmental scan findings, interested party feedback, and proposed measure refinements. The team will share more details and timelines as the project continues, ensuring transparency and alignment with long-term objectives.

During the discussion, a TEP member asked about the implementation status of the measures covered. Specifically, the member inquired about the extent to which these measures have already been implemented, the availability of results, and how different accountable entities—which vary by measure—access data on the calculated measures. The member also sought clarification on the national adoption of the Functional Assessment Standardized Items (FASI) measures, wondering whether they were widely used or only implemented within select groups. CMS representatives responded with information on the implementation of the FASI items and the broader landscape of measure adoption.

## **Children’s HCBS measures development**

### **Overview of goals, gaps identified, and measure concept evaluation criteria**

Mathematica provided background information on the current landscape of HCBS quality measurement for CYYA, emphasizing the absence of tailored measures for this population and the need for targeted development. Mathematica explained that the project team is, using CMS’ MMS Blueprint criteria, developing and testing up to five new (de novo) or respecified quality measures tailored specifically for CYYA receiving Medicaid HCBS to address these gaps.

Mathematica provided an overview of the literature review and measures scan process used to develop the list of 21 measure concepts. Mathematica reiterated that, to ensure thorough evaluation of measure concepts, these measures will be assessed based on CMS MMS Blueprint Guidelines, which outline four essential criteria: importance, usability and use, feasibility, and scientific acceptability.

Mathematica then explained that this meeting’s discussion would focus on three of the four key criteria. First, importance would be evaluated to determine whether each measure is evidence based and contributes to substantial improvements in the quality of care for CYYA receiving HCBS. Next, usability and use would be considered to assess how well the measure’s performance results can be applied for accountability and quality enhancement. Finally, feasibility would be examined to ensure that the necessary data are accessible and can be collected without undue burden. The final criterion, scientific acceptability, will be explored later in the measure development process.

### **Preliminary measure concepts**

The project team then shifted the conversation to a review of potential quality measure concepts for CYYA receiving HCBS, led by Human Services Research Institute. TEP members considered two types of measures: existing measures respecified for CYYA receiving Medicaid HCBS and de novo measures developed for this project. The team reiterated that for the purposes of this discussion, *children* are people younger than age 21, though the team recognized the varied needs within this broad group, which includes infants and toddlers, school-age children, adolescents transitioning to adult services, and young adults. Human Services Research Institute encouraged TEP members to consider how each measure could apply across this spectrum.

The team grouped the measure concepts according to domains within the [HCBS Quality Framework](#), originally developed by the National Quality Forum (NQF) multistakeholder Home and Community-Based Services Quality Measurement Committee in 2016. Because of the importance of inclusivity in the selection process, the list presented was intentionally broad, ensuring all potentially relevant concepts received thorough evaluation. The primary goal of this discussion was to refine the list of concepts and

ensure the final set focuses on measures important to CYYA and their families as well as funders, providers, and other interested parties. It was also to assess whether measure concepts are feasible to implement and can be used for quality improvement or related purposes. Human Services Research Institute emphasized the value of TEP members' feedback, which draws from members' diverse expertise and perspectives.

Human Services Research Institute noted that most measures identified in the initial measure scan relied on self-reported survey data primarily drawn from individual or family self-reports. But because the surveys informing those measures are specific to adults, and a CYYA-specific survey is still under consideration, this meeting focused solely on non-survey-based measure concepts. Survey-based quality measures could potentially be addressed in future conversations. The list presented primarily included measure concepts based on existing measures for adults that could be respecified for use with children. Those measure concepts included a mix of CMS-stewarded measures and measures stewarded by other organizations, which means the degree of and approach to re-specification could vary depending on stewardship. The list also included one de novo measure concept. Because the objective was to refine the measure list, TEP members were encouraged to provide feedback on any concepts they felt should not be pursued further.

In all, 21 measure concepts were presented for the following domains:

- Person-centered planning and coordination domain: nine measure concepts
- System performance and accountability: six measure concepts
- Holistic health and functioning: three measure concepts
- Community inclusion: one measure concept
- Choice and control: one measure concept
- Service delivery and effectiveness: one de novo measure concept

TEP members discussed the measure concepts list and asked why many of the measure specifications are separate for managed LTSS (MLTSS) and fee-for-service (FFS) LTSS. CMS shared that the MLTSS and FFS measures were first developed for MLTSS only and then respecified for use in FFS LTSS based on a desire to have parallel measures and to report on the entire HCBS delivery system. States have also indicated to CMS that collecting data for the measures for MLTSS and FFS LTSS together would be burdensome. Mathematica provided further background that the initial measure specifications were developed at the plan level, and then there was interest to develop FFS versions of the measures to capture the full scope of an HCBS system within a state.

The discussion also covered the scope, scale, and usefulness of measure concepts. TEP members inquired about measure accountability. For the person-centered planning and coordination domain, TEP members valued measures as important but had concerns about the feasibility of data collection for some of the measures. For measures in the system performance and accountability and holistic health and functioning domains, TEP members provided feedback on potentially small sample sizes for measure calculation. For the community inclusion domain, TEP members discussed indicators of inclusion and recommended that Mathematica consider additional indicators for this domain.

### **Next steps and questions**

Mathematica closed out the TEP meeting by describing a post-meeting survey and requesting that all TEP members complete it to provide more input on ongoing measure development activities and to inform the next TEP meeting. Fifteen out of eighteen TEP members completed the post-meeting survey as of the survey close date on June 3, 2025.

## Appendix A: TEP members and project team

### Exhibit 1. TEP members

Name	Organizational affiliation
Anne Deutsch*	RTI International
Brittany Pennington	Minnesota Department of Human Services
Camille Dobson	ADvancing States
Colleen McKiernan	The Lewin Group
Coretta Lankford	American Institutes for Research (AIR)
Donna Martin	American Network of Community Options and Resources (ANCOR)
Eric Carlson	Justice in Aging
Joseph Caldwell	Brandeis University
Kayla Trzpuc*	North Dakota Department of Health and Human Services
Kim Grasty	Iowa Department of Health and Human Services
Linda Riccio	Transitional Care Management
Martha Ryan	MassHealth
Renata Ticha	University of Minnesota Institute on Community Integration
Sara Hackbart	Elevance Health
Tamara Poluszek	Aetna Better Health of Florida
Therence James	University of Connecticut Center on Aging
Tom Rice	Caregiver and family member of a person receiving HCBS; ANCOR
Victoria Wagner	New York State Department of Health
Kim Grasty	Iowa Department of Health and Human Services
Linda Riccio	Transitional Care Management
Martha Ryan	MassHealth
Renata Ticha	University of Minnesota Institute on Community Integration
Sara Hackbart	Elevance Health
Tamara Poluszek	Aetna Better Health of Florida
Therence James	University of Connecticut Center on Aging
Tom Rice	Caregiver and family member of a person receiving HCBS; ANCOR

\*TEP co-chair

**Exhibit 2.** Project team

Name	Organizational affiliation
Kerry Lida	Centers for Medicare & Medicaid Services
Jen Bowdoin	Centers for Medicare & Medicaid Services
Melanie Brown	Centers for Medicare & Medicaid Services
Mary Botticelli	Centers for Medicare & Medicaid Services
Kate Ginnis	Centers for Medicare & Medicaid Services
Andrea Wysocki	Mathematica
Breanna Arndt	Mathematica
Elizabeth Boystak	Mathematica
Elizabeth Greener	Mathematica
Sara Galantowicz	Human Services Research Institute
Stephanie Giordano	Human Services Research Institute
Krista Hammons	Mathematica
Linda Newton-Curtis	Human Services Research Institute
Jessica Ross	Mathematica
Alena Tourtellotte	Mathematica