

## Data Availability for Monitoring Access to Care

**Panel Discussion** 

**Medicaid and CHIP Payment and Access Commission** Ashley Semanskee, Martha Heberlein, Linn Jennings



October 28, 2021

#### **Panelists**

- Dr. Genevieve Kenney, Urban Institute
- Dr. Joseph Caldwell, Brandeis University
- Barry Cambron, Alabama Medicaid Agency



#### Overview

- Access domains:
  - Provider availability and accessibility
  - Beneficiary utilization
  - Beneficiary perceptions and experiences
- Discussion question:
  - What are the most important gaps and limitations of existing data, and what approaches could help address them?



#### **Provider Availability and Accessibility**

- Existing data include licensure data, directories, claims, secret shopper audits, and provider surveys
- Difficult to measure whether providers are taking new patients, caseload, wait times, and language and disability accessibility
- Interviewee suggestions: issue guidance for standardization, survey providers, conduct secret shopper audits



## **Beneficiary Utilization**

- T-MSIS is the main source of data on service use but has some limitations
- Difficult to measure appropriateness of care and outcomes
- Interviewee suggestions: improve T-MSIS data, conduct chart reviews, use HEDIS and all-payer claims databases



# **Beneficiary Perceptions and Experiences**

- Existing data include complaints and grievances, CAHPS surveys, state beneficiary surveys, and qualitative data (e.g., focus groups, interviews)
- Data may not be representative
- Interviewee suggestions: federal Medicaid survey, identifying key measures, collecting qualitative data





### **Commission Discussion**

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