



Proposed Access Monitoring Plan and Possible Recommendations

Medicaid and CHIP Payment and Access Commission

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Overview

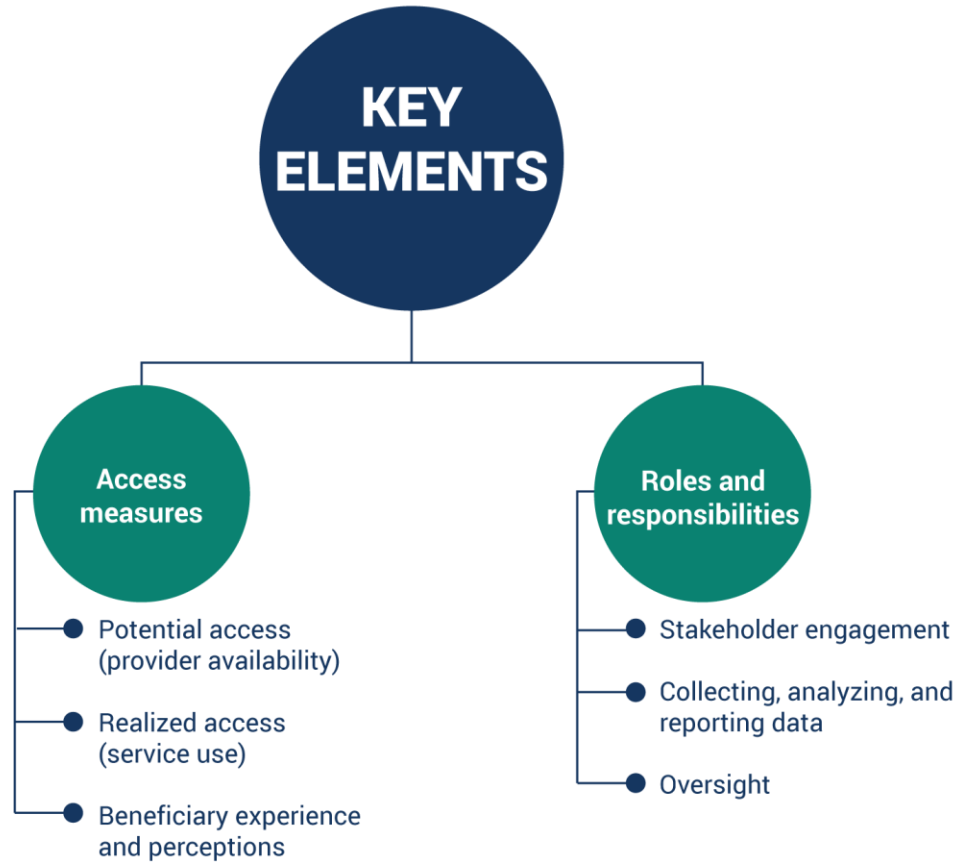
- Prior meeting discussions
- Goals of access monitoring
- Key elements of an access monitoring system
- Possible recommendations
- Next steps

Prior Meeting Discussions

- September: presentation on the current access monitoring systems and challenges with monitoring across states and delivery systems
- October: expert panel discussion of the data gaps and limitations and approaches to addressing these gaps
- December: expert panel discussion of the design and implementation considerations for a new access monitoring system, and a discussion of the goals and key elements of a new system

Goals of Access Monitoring





Possible Recommendations

Draft Recommendation 1

The Centers for Medicare & Medicaid Services should develop an ongoing and robust access monitoring system consisting of a core set of measures for acute care and long-term services and supports that are comparable across states and delivery systems. The agency should issue public reports with state- and national-level data in a consumer-friendly format at regular intervals.

Draft Recommendation 2

To have a more complete picture of access to services, the Centers for Medicare & Medicaid Services should design an access monitoring system that includes an assessment of potential access, realized access, and beneficiary perceptions and experiences.

Draft Recommendation 3

The Centers for Medicare & Medicaid Services should design a new access monitoring system that prioritizes services and populations for which Medicaid plays a key role and those for which there are known access issues and disparities. The system should be designed so that it can be updated to reflect changes in measurement, policy priorities, and care delivery.

Draft Recommendation 4

The Centers for Medicare & Medicaid Services should involve stakeholders in development of the new system, inviting input and engaging in discussion with states, health plans, providers, and beneficiaries. The process for establishing a new access monitoring system should be public and transparent.

Draft Recommendation 5

The Centers for Medicare & Medicaid Services should mount a periodic and ongoing beneficiary survey to collect information on beneficiary perceptions and experiences with care.

Draft Recommendation 6

The Centers for Medicare & Medicaid Services should further standardize and improve the Transformed Medicaid Statistical Information System data to allow for meaningful cross-state comparisons of the use of particular services, access to providers, and stratification by key demographic characteristics, such as race and ethnicity.

Draft Recommendation 7

To implement a new access monitoring system, the Centers for Medicare & Medicaid Services should provide additional analytical resources and technical assistance to states.

Next Steps

- April meeting
 - Review draft chapter
 - Vote on package of recommendations

Summary of Recommendations

1. Core set of comparable measures
2. Assess provider availability, beneficiary utilization, and beneficiary perceptions and experiences
3. Prioritize and update key populations and services
4. Invite stakeholder input
5. Field a beneficiary survey
6. Further standardize T-MSIS
7. Provide state technical support



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