

August 30, 2010

Centers for Medicare & Medicaid Services
Department of Health & Human Services
Attn: CMS-2480-NC
PO Box 8010
Baltimore, MD 21244-1850



On behalf of Medicaid Health Plans of America (MHPA) I am submitting comments for the Secretary's recommendations for legislative changes to improve the quality of care provided to children under Medicaid and CHIP.

MHPA is a national nonprofit organization and the leading trade association solely focused on representing Medicaid health plans. MHPA's 24 member health plans range from large multi-state plans to small community-based plans, serving almost 14 million Medicaid and CHIP members nationwide.

As you know, Medicaid and CHIP services are largely delivered through managed care, and most often through health plans. We anticipate that states will continue the trend of enrolling more and more adults and children into health plans under the upcoming Medicaid expansion.

A majority of the quality measurement work in Medicaid and CHIP is done through Medicaid health plans. It is critical that the quality reporting programs CMS puts into place at a national level (and encourages at the state level) work for Medicaid/CHIP programs that have contracted with health plans in order to adequately measure, understand, and improve the quality of care children receive.

Recommendations to improve the quality of children's health care under titles XIX and XXI

The quality of care for the pediatric population has improved over the years. This is demonstrated by the positive trend of reported pediatric HEDIS measures. In addition to the establishment and adoption of performance measures by state Medicaid programs, Medicaid health plans have a long history of submitting quality measures to NCQA for their Medicaid and CHIP populations. The Medicaid and CHIP community, and especially health plans, have long recognized the importance and value of performance measurement reporting and its direct effect on improving the quality of care.

MHPA recognizes that there is a need for additional nationally recognized performance measures for the pediatric Medicaid and CHIP populations. While developing new measures and requirements for reporting, MHPA recommends that the Secretary consider the following improvements to the program:

Provide appropriate support and resources to measures development and organizations that develop nationally recognized measures through a stringent process.

Require that measure development efforts supported by CMS take into account scientific soundness, feasibility, appropriateness, length of enrollment and reporting burden for states, health care providers and health plans. All measures should be maintained and re-evaluated on regular basis.

Require states to use the core measures as specified. Without a common set of measurement data we can only get a snapshot of quality within a state for the population being measured. Standardized measures allow for state, regional and national analyses so that we truly know the quality of care for children in Medicaid and CHIP.

The status of voluntary reporting by States under titles XIX and XXI

MHPA submitted comments on the CHIP Quality Measurement Program's initial set of core measures in March 2010. MHPA recommends that the Secretary consider the following improvements to the program:

Refine the initial core set to only include well specified, standardized, and tested measures that are currently in use by Medicaid/CHIP programs (such as HEDIS measures) as is consistent with the CHIPRA legislation. MHPA is supportive of the following measures as per our comments on March 31, 2010:

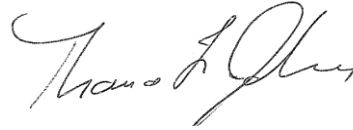
- Frequency of ongoing prenatal care
- Timeliness of prenatal care
- Childhood immunization status
- Immunizations for adolescents
- BMI documentation
- Chlamydia screening for women
- WCVs in the first 15 months of life
- WCVs in the third, fourth, fifth and sixth years of life
- Appropriate testing for children with pharyngitis
- Follow-up care for children prescribed ADHD medication
- Follow-up after hospitalization for mental illness
- Children and adolescents' access to primary care practitioners

The use of existing measures will help improve state, health plan, and provider participation in the voluntary program. A smaller subset of measures would provide CMS with comparable data that could be used to assess the quality of children's health nationwide.

Require that states reporting measures must report on their full Medicaid and CHIP populations, including managed care and fee-for-service. Much of what is known about the quality of care for children in the Medicaid and CHIP program on a national level is due to the reporting efforts (voluntary and mandatory) of Medicaid health plans. To truly understand the quality of care in Medicaid and CHIP, fee-for-service and primary care case management need to report the same measures using the same methodology as health plans.

We appreciate your consideration of these comments. For more information about MHPA or the perspective of Medicaid health plans, please contact me at TJohnson@mhp.org or (202) 857-5725, or contact Liza Greenberg, Senior Consultant for performance measurement, at Lgreenberg@mhp.org.

Sincerely,

A handwritten signature in black ink, appearing to read "Thomas L. Johnson". The signature is fluid and cursive, with the first name "Thomas" being the most prominent.

Thomas L. Johnson
President and CEO