

U.S. Department of Health and Human Services Office of the Assistant Secretary for Planning and Evaluation (ASPE)

Office of Behavioral Health, Disability, and Aging Policy (BHDAP)

To our partners in research and policy analysis:

I am delighted to share with you BHDAP's newsletter of our Spring 2024 work. As you will see below, in recent months our team has published research on the <u>feasibility of using certain Medicaid data</u> to calculate behavioral health quality measures at the clinic level. BHDAP also collaborated with the U.S. Department of Housing and Urban Development (HUD) to <u>evaluate Medicare Advantage (MA)</u> <u>enrollment</u> among adults receiving federal housing assistance. Most recently, BHDAP researchers released an issue brief on the experiences of state agencies with <u>Medicaid home and community-based services (HCBS) policy flexibilities</u> during the COVID-19 public health emergency.

BHDAP also collaborated with experts across both HHS and the U.S. Department of Labor (DOL) as key partners in the HCBS Federal Opportunities Regarding Workforce and Research Data (HCBS FORWARD) workgroup. This workgroup carried out a key priority action required under President Biden's <u>Executive Order</u> 14095, "Increasing Access to High-Quality Care and Supporting Caregivers" and released five high-priority recommendations to improve data on this essential workforce.

Additionally, BHDAP researchers <u>presented</u> original work at the AcademyHealth 2024 Annual Research Meeting, which was carried out in collaboration with colleagues from across ASPE. One presentation focused on trends in telehealth and prescription stimulants among Medicaid beneficiaries under COVID-19 policy changes. The other examined implications of proposed updates to the federal standards for collecting and reporting race/ethnicity data. As part of our work implementing the National Alzheimer's Project Act, BHDAP also held a <u>policy roundtable</u> at this meeting, which focused on both the challenges of and opportunities for transforming care to better meet the needs of people with dementia.

We thank you for your partnership and interest in our work!

Dr. Tisamarie Sherry, Deputy Assistant Secretary

Please share with interested colleagues and/or subscribe below to receive these and other updates from BHDAP.

RECENT PUBLICATIONS

Improving Data on the Workforce Delivering Home and Community-Based Services (*posted April 25, 2024*)

Read Brief

In April, HHS and DOL released recommendations to improve data infrastructure on the workforce delivering HCBS in response to President Biden's <u>Executive Order</u> 14095, "Increasing Access to High-Quality Care and Supporting Caregivers". The importance of these workers to the United States economy, the increasing demand for services, and the persistent challenges around job quality, recruitment, and retention make it critical that policymakers have usable data. This data can be used to support the HCBS workforce and track the impacts of policy changes over time. Implementing these recommendations will drive data-informed policy decisions to improve the quality of and access to HCBS for the millions of Americans who are receiving or need these services.

A related webinar was held in May 2024; the recording can be viewed here.

Feasibility of Calculating Measures to Monitor Quality Performance of Behavioral Health Programs (*posted May 9, 2024*)

Read Report

The calculation of behavioral health quality measures at the clinic level holds great promise for monitoring clinic performance over time, and for providing information for clinics to use to revise their processes and procedures to improve their performance. This report describes a novel process of testing the feasibility of using the Transformed Medicaid Statistical Information System Analytic Files data to calculate behavioral health quality measures at the clinic level. Results indicated that calculating reliable, valid behavioral health quality measures at the organization level was feasible for most organizations and years in all states included in this analysis, but that calculating clinic-level measures was not feasible in many cases. These findings highlight the potential utility of monitoring behavioral health organizations' performance on quality measures over time and highlight the need for states to develop methods to identify behavioral health clinics in federal Medicaid data to enable these kinds of analyses to the clinic level as well.

Tele-Behavioral Health Use Among Medicare Beneficiaries During COVID-19 (*posted May 20, 2024*)

Read Brief

This brief summarizes analyses of Medicare fee-for-service data examining beneficiary use of tele-behavioral health services during 2019 and 2020. Results demonstrate that the number of Medicare beneficiaries receiving behavioral health care via telehealth increased dramatically during the COVID-19 public health emergency. However, the overall percentage of beneficiaries receiving behavioral health care services in any setting was lower in 2020

than in 2019 despite known increases in persons experiencing symptoms of anxiety or depression and increases in substance use during this time.

Medicare Advantage Coverage Among Individuals Receiving Federal Housing Assistance (posted May 23, 2024)

Read Report

Using HUD administrative data linked to Centers for Medicare & Medicaid Services (CMS) Medicare enrollment and MA plan data, this study sought to better understand MA enrollment among adults receiving housing assistance from HUD's three largest rental assistance program categories: the Housing Choice Voucher program, public housing, and multifamily programs. Study findings highlight geographic concentrations of MA enrollees who receive federal housing assistance and opportunities to engage MA plans and housing stakeholders to improve delivery of care and supportive services for HUD-assisted persons. The report and a <u>Leveraging the Link infographic</u> were published on the <u>HUD website</u>.

Changes in Ownership of Skilled Nursing Facilities from 2016 to 2021: Variations by Size, Occupancy Rate, Penalty Amount, and Type of Ownership (*posted June 10, 2024*) <u>Read Brief</u>

Stakeholders, researchers, and policymakers have identified varying nursing home ownership structures and ownership transactions as potentially influencing the quality of care delivered to vulnerable residents. ASPE has conducted several research projects aimed at understanding the relationship between various aspects of nursing home ownership and quality of care to inform evidence-based policymaking. This project builds on BHDAP research brief published in November 2023: <u>Trends in Ownership Structures of U.S. Nursing Homes</u> and the Relationship with Facility Traits and Quality of Care (2013-2022).

Medicaid Section 1915(c) Home and Community-Based Services Waiver Policy Flexibilities During the COVID-19 Public Health Emergency: State Agency, Provider, and Consumer Experiences (*posted June 17, 2024*)

Read Brief

States may use Appendix K to modify their existing Medicaid HCBS 1915(c) waiver programs during emergency situations. During the COVID-19 public health emergency, states used Appendix K to make temporary changes to access and eligibility, payment, services, and other aspects of their waiver programs. This brief describes experiences of state agencies and HCBS consumer and provider groups with the selection, implementation, evaluation, and continuation of Appendix K policy flexibilities during the COVID-19 public health emergency.

Nurse Staffing Estimates in U.S. Nursing Homes, May 2024 (posted June 28, 2024) Read Report

In April 2024, CMS issued the Minimum Staffing Standards for Long-Term Care Facilities and Medicaid Institutional Payment Transparency Reporting final rule which established new

minimum nurse staffing requirements for nursing homes by nurse type. This brief uses Nursing Home Care Compare Data from May 2024 to examine current staffing levels in United States nursing homes relative to specific minimum staffing requirements in the final rule. Using an illustrative example of a 100-bed facility, we examine how many nurse staff would need to be added per shift over the next several years during the final rule's implementation phase in order to staff at or above the final rule's minimum hours per resident day requirements, and to provide at least 24 hours of registered nurse care.

BHDAP IN ACTION

BHDAP leadership and researchers contributed to webinars, conferences, and panel discussions, and worked with our federal partners to support cross-agency collaborations:

AcademyHealth 2024 Annual Research Meeting

BHDAP and ASPE colleagues participated in two podium presentations of original research at the *AcademyHealth 2024 Annual Research Meeting* at the end of June. One presentation, <u>Trends in Telehealth Initiation of Prescription Stimulants Among Medicaid-Covered Patients</u>, sought to understand how in-person and telehealth initiation of prescription stimulants changed in association with COVID-19 policy changes among patients with Medicaid coverage. The second, <u>Testing Classification Methods for More Inclusive Analysis of Race/Ethnicity Data</u>, explored the implications of proposed updates to the federal standards for collecting and reporting race/ethnicity data, namely collecting race and ethnicity together in one question, by comparing two approaches to classifying multiple selection race/ethnicity data. BHDAP also hosted a policy roundtable at this meeting, <u>Transforming Healthcare for People with Dementia: Policy Changes and Opportunities</u>. The participants discussed key areas on which health care researchers, providers, and stakeholders must focus on as scientific and care developments in the dementia field rapidly evolve.

ACL Building the HCBS Workforce Data Infrastructure Webinar

The Administration for Community Living (ACL) hosted a webinar, <u>Call-to-Action for Building</u> <u>the Home-and Community-Based Services Workforce Data Infrastructure</u>, that presented recommendations developed by BHDAP and partners regarding data on HCBS workforce. This data can be used to support the HCBS workforce and track the impacts of policy changes over time. Implementing these recommendations will drive data-informed policy decisions to improve the quality of and access to HCBS for the millions of Americans who are receiving or need these services.

> Links and references to information from non-governmental organizations are provided for informational purposes and are not HHS endorsement, recommendation, or preference for the non-governmental organizations.

Past Newsletters are available at https://aspe.hhs.gov/bhdap-newsletters.

WHO WE ARE: ASPE is the principal advisor to the Secretary of HHS on policy development, including major activities in policy coordination, legislative development, policy research, program evaluation, and economic analysis. Within ASPE, BHDAP focuses on policies and programs that support the independence, productivity, health and well-being of people with disabilities, people with behavioral health conditions, and older adults, including those with long-term care needs.

To subscribe please email: <u>LISTSERV@LIST.NIH.GOV</u> with "SUBSCRIBE ASPE-BHDAP your name" in the body of the message (i.e., subscribe ASPE-BHDAP John Doe).

Questions and subscription problems can be sent to <u>ASPE-BHDAP@hhs.gov</u>. Visit our webpage for BHDAP information and reports at <u>https://aspe.hhs.gov/about/offices/bhdap</u>.