



July 19, 2021

Center for Medicare and Medicaid Services  
Office of Strategic Operations and Regulatory Affairs  
Division of Regulations Development  
Attn: OMB Control No. CMS-P-0015A; Room C4-26-05  
7500 Security Blvd.  
Baltimore, MD. 21244

Re: Proposed Changes to CMS-372(S)—Annual Report on Home and Community-Based Services Waivers and Supporting Regulations

To Whom It May Concern:

We appreciate the opportunity to comment on the proposed revisions to the Annual Report on Home and Community-Based Services (HCBS) Waivers and Supporting Regulations (CMS-372(S)). We have concerns that the proposed reporting template and schedule will curtail Minnesota's ability to provide valid and reliable evidence of performance required for our HCBS waivers in 42 C.F.R § 441.302.

We will provide suggestions for revising 372 reporting followed by an overview of key reporting areas which may be negatively impacted by proposed changes:

#### **Suggestions for Revising CMS-372(S) Reporting**

State Medicaid agencies maintain varying data systems that support the administration and management of their waivers. States' methodologies and management of quality assessment and compliance reporting is also variable. In response to the proposed revisions, Minnesota suggests that CMS:

- create a more flexible reporting format that allows for sufficient information, such as that captured in the current evidence review and 372 reports, to be included;
- allow for some flexibility when there is compelling need to continue with multi-stage sampling and multi-year reporting for some measures; and
- Consider the feasibility, resource investment, resource diversion, and ultimate value associated with more frequent reporting of different types of performance measures that capture widely varying data.

#### **Reporting areas which may be negatively affected.**

- **Impact on Performance Measures and Data Currently Provided to CMS at Evidence Review:** The proposed changes to the reporting template will limit our ability to provide data that we gather through site reviews of local lead agencies and currently include in our mid-cycle evidence reviews. This discovery activity utilizes multi-stage sampling and yields the data used for the bulk of performance measures related to the development and implementation of participants' support plans.

- When calculating and reporting results based on data generated through multi-stage sampling, Minnesota relies on a four-year rolling average as a method that yields valid and reliable multi-year estimates (particularly for small domains). Use of a four-year rolling average also best incorporates results of the eighteen-month remediation cycle that is provided to local agencies following the Department's finding of a deficiency.
  - It is not administratively feasible to complete the review of all local agencies across the state in one year or to generate valid performance evidence.
- **Restrictive Format:** The proposed reporting template will not provide states with sufficient flexibility to provide meaningful context regarding submitted data.
  - CMS' proposal to combine evidence reviews and annual reports in a more restrictive reporting template limits our ability to deliver contextual information involving our data. We currently provide considerable information to CMS to describe Minnesota's quality assessment and improvement activity in the current annual reporting, as well as in the waiver evidence review. This additional content is necessary to understand the data and how it relates to Minnesota's waiver infrastructure and operations. Requests from CMS have prompted the inclusion of this information in our reports to describe Minnesota's operations and quality management system as related to our performance data.
- **Impact on Resources for Continuous Quality Improvement (CQI):** The proposed revisions to reporting for the HCBS waivers will have negative impact on our ability to conduct ongoing improvement activities.
  - While it is expected that states monitor systems performance on an ongoing basis, monitoring activity does not rely solely on the use of performance measurement. Nor does performance measurement address all areas of systems performance of interest to Minnesota. Annual reporting on all waiver performance measures will divert existing and limited resources from other quality assessment and improvement activity.
  - The agency-wide investment required to support the proposed changes to annual reporting will greatly reduce or divert significant resources away from developing and implementing quality assessment strategies, including those intended to yield more meaningful, person-centered performance measures (e.g., direct participant feedback strategies).

Thank you for the opportunity to comment on the proposed revisions to the CMS-372(S) reporting structure. We are happy to participate in discussions with CMS regarding how to structure reporting for the HCBS waivers that addresses the needs of both CMS and state Medicaid programs.

Sincerely,



Julie Marquardt  
Acting Medicaid Director