



April 1, 2024

Dear Colleague:

NCQA presents the *HEDIS^{®1} Measurement Year (MY) 2024 Long-Term Services and Supports (LTSS): Technical Update*, which contains corrections, policy changes and clarifications to the *HEDIS MY 2024 LTSS Technical Specifications*. With this release, NCQA freezes the HEDIS LTSS technical specifications for MY 2024.

The final version of the Value Set Directory (VSD) for MY 2024 reporting is available in the [NCQA Store](#).

Obtaining the updated VSD. Changes to codes and value sets have been incorporated in the MY 2024 LTSS VSD, available for download by customers with access to the HEDIS MY 2024 LTSS publication. Go to the [My Downloads](#) section of [My NCQA](#) and download the *MY 2024 LTSS* zipped folder, which contains the updated *MY 2024 LTSS Value Set Directory (.xlsx)* file.

The [HEDIS Audit Timeline for MY 2024](#) is available on the NCQA website.

Changes listed in this document are required for HEDIS MY 2024 LTSS reporting. Review all items in the table below and incorporate them into your implementation processes. If information in this memo contradicts a previous response you received in [My NCQA](#), then the response is obsolete.

If you have questions about information included in the *LTSS Technical Update* or about other measure specifications, contact us through [My NCQA](#). We wish everyone a successful HEDIS data collection season!

Sincerely,

Jenna Barry, MPH
Assistant Director, Policy Measures

Enclosure

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Specification Updates

This document contains corrections, policy changes and clarifications to the *HEDIS MY 2024 LTSS: Technical Specifications*. NCQA has identified the appropriate page number, measure/guideline and head/subtitle for each item.

Page	Measure/Guideline	Head/Subtitle	Update
16-19	Guidelines for Calculations and Sampling	Systematic Sampling Methodology	Remove the “Systematic Sampling Methodology” entirely and replace it with the text below in <i>Attachment A</i> which reflects a sample size change from 96 to 411.

Attachment A: Systematic Sampling Methodology

Systematic Sampling Methodology

NCQA implemented a systematic sampling scheme for the Case Management Record Review Method. Proper use and implementation of this method ensures ongoing integrity of collected data and supports increasing requests for audited data. Complete the following steps for each case management record review measure.

LTSS organizations identify a sample of 411 members using a systematic sampling methodology. For members in the sample, numerator events and required exclusions may be identified from manual review of case management records or standardized electronic data sources.

Step 1 Determine the eligible member (EM) population. Develop a list of EMs, including full name (last, first), date of birth and event (if applicable). Reporting LTSS products must include all EMs from all products.

Step 2 The minimum required sample size (MRSS) is 411. This number becomes the denominator for the measure. If the EM is \leq MRSS, proceed to step 4.

To use a larger MRSS, provide written rationale to NCQA through [My NCQA](#).

Step 3 Determine the oversample. This should be an adequate number of additional records to make substitutions. Oversample only enough to guarantee that the MRSS is met; keep substitution criteria in mind.

Written approval from NCQA must be obtained to use an oversampling rate larger than 20%. Refer to [Oversample requests to NCQA](#) for details.

The oversample records should be used, and reported, only to replace cases taken out of the MRSS because of valid data errors, false positives and so on; otherwise, these records should not be reported on in the final denominator.

Step 4

- If $EM \leq MRSS$, all eligible members are included in the sample. The MRSS must be reported as the EM.
- If $EM > MRSS$ + all oversample records, go to step 5.
- If $MRSS < EM \leq MRSS$ + all oversample records, go to step 8.

Step 5 Sort the list of EMs in alphabetical order (by applicable measurement year) by last name, first name, date of birth and event (if applicable).

If combined LTSS products are reported, alphabetize the combined EM population from both

products.

Sort EMs from A to Z in even measurement years and from Z to A in odd measurement years.

Note: Sort order applies to all components. For HEDIS LTSS MY 2024, sort all fields by ascending order (i.e., last name ascending, first name ascending, date of birth ascending, event ascending).

Step 6 Calculate $N = EM / (MRSS + \text{all oversample records})$. Round *down* to a whole number.

Determine N, which is used in the formula to determine which member will start your sample. N is calculated using the equation:

$$N = EM / (MRSS + \text{all oversample records})$$

where EM = the eligible member population (step 1) and MRSS = the minimum required sample size (step 2).

Step 7 Calculate $START = (RAND \times N)$. Before choosing members, determine the member to start with (START). It is important that the sample be selected from a single pass through the member list. START can have many values and still allow only one pass.

The Random Number (RAND) table below lists a value between 0 and 1 for each measure where the Case Management Record Review Method applies. Refer to this table to determine the RAND to use when determining START. The RAND for each measure is used to calculate the starting point from which to draw the final sample.

Calculate the number from which to start drawing the final sample as follows:

$$START = (RAND \times N)$$

(round per the .5 rule to the nearest whole number greater than 0), where RAND = the random number for each respective measure identified.

RAND Table for LTSS MY 2024

Measure	RAND
Long-Term Services and Supports Comprehensive Assessment and Update	0.37
Long-Term Services and Supports Comprehensive Care Plan and Update	0.37
Long-Term Services and Supports Shared Care Plan with Primary Care Practitioner	0.37
Long-Term Services and Supports Reassessment/Care Plan Update After Inpatient Discharge	0.28

Step 8 Select the sample, choosing every i^{th} member using the formula:

$$i^{\text{th}} \text{ member} = START + [(i-1) \times EM / (MRSS + \text{all oversample records})]$$

(rounding $[(i-1) \times (EM / MRSS + \text{all oversample records})]$ per the .5 rule to the nearest whole number greater than 0).

For $i = 2, 3, 4, \dots, MRSS$ where EM = the eligible member population (step 1). MRSS = the minimum required sample size (step 2).

Starting with the member corresponding to the number START, choose every i^{th} member until the MRSS is met. This becomes the primary list of sampled members.

Continue choosing every i^{th} member until the oversample is met. This set of members becomes

the oversample.

Use and report oversample records only to replace cases taken out of the MRSS because of valid data errors, false positives and so on; otherwise, do not report these records in the final denominator.

Note: From step 4, if $MRSS < EM \leq MRSS +$ all oversample records, sort the EMs in alphabetical order (by applicable measurement year) by last name, first name, date of birth and event (if applicable). Choose the first MRSS EMs as the primary sample and the remaining EMs as the oversample.

The oversample list is only used to replace exclusions. All exclusions must be documented because they may be subject to audit.

Oversample requests to NCQA

Any oversampling rate larger than 20% must be approved by NCQA annually. Submit a formal request with the rationale to NCQA through PCS via [My NCQA](#). NCQA provides written notification of approval or disapproval within 7 business days. Organizations must maintain the documentation for the HEDIS Compliance Audit.

Oversampling methodology

The starting sample size must be larger than the designated sample size because case management records must be substituted if a member is ineligible for the measure; for example, whether a member was incorrectly identified as enrolled in the MLTSS plan for specific dates through enrollment data, or meets exclusion criteria for the measure.

To adjust for this, divide the sample size by the percentage of records expected to be inappropriate for review.

Suppose 10% of records are expected to be inappropriate for the measure. To determine the oversample, multiply the MRSS by the oversample percentage and round up to the nearest whole number.

$$411 \times 0.10 = 41.1$$

(rounded up to 42 = oversample).

The recommended methodology for substitution is:

- Replace the member’s chart with that of the first member in the oversample list.
- Continue replacing each ineligible member with the next consecutive member of the oversample list.

If the initial oversample was underestimated and all oversample members have been exhausted without satisfying the MRSS, the organization must contact NCQA through PCS via [My NCQA](#) to determine next steps.

Organizations must only use the oversample for substitution and must report all measures using their MRSS.

Note: Many factors must be considered when determining the initial sample size and oversampling percentage—such as previous years’ data, frequency of exclusions and claims lag.

Example 1

The eligible member population is 389. This measure was not collected in the previous year. Follow the systematic sampling scheme.

- Step 1** EM = 389.
- Step 2** The MRSS is 411. Because $389 < 411$, skip to step 4.
- Step 3** *Skip this step.*
- Step 4** Include all 389 members in your primary list.

Example 2

The eligible member population is 436. Based on experience with this population, about 10 percent of the members from the primary sample must be excluded. Follow the systematic sampling scheme.

- Step 1** EM = 436.
- Step 2** The MRSS is 411.
- Step 3** Oversample = $411 \times .10 = 41.1$ (the next whole number *above* is 42, so the oversample = 42).
- Step 4** Because $411 < 436$, skip to step 6.
- Step 5** *Skip this step.*
- Step 6** Sort the list and choose the first 411 as the primary list. The remaining 25 members become the oversample list*.

**Remember, members in the oversample are used only to replace members excluded from the sample.*