

**Medicaid Long-Term Care  
Performance Measure Specifications Manual  
For November 1, 2019 Reporting**

**Measures for Medicaid Managed Long Term Services and Support (LTSS) Plans**

For the LTSS measures, refer to the Measures for Medicaid Managed Long Term Services and Support (LTSS) Plans Technical Specifications and Resource Manual (May 2019). A PDF copy can be downloaded at: [https://www.medicaid.gov/medicaid/managed-care/downloads/ltss/mltss\\_assess\\_care\\_plan\\_tech\\_specs.pdf](https://www.medicaid.gov/medicaid/managed-care/downloads/ltss/mltss_assess_care_plan_tech_specs.pdf).

**Only the following four measures will be reported for calendar year 2018:**

- LTSS Comprehensive Assessment and Update
- LTSS Comprehensive Care Plan and Update
- LTSS Shared Care Plan with Primary Care Practitioner
- LTSS Reassessment/Care Plan Update after Inpatient Discharge

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**LTSS measures must use the guidelines for data collection, preparation, and reporting from the LTSS Technical Specifications and Resource Manual with the following four exceptions:**

**1) For All Four Measures:**

For core and supplemental elements, if there is documentation within the Case Management Record (even if it is not in the assessment document or the care plan), these elements may be counted as compliant.

**2) LTSS Reassessment/Care Plan Update after Inpatient Discharge:**

All members receiving LTSS from the plan should be included in the measure (even if they receive their medical benefits through Medicare).

**3) LTSS Comprehensive Assessment and Update and LTSS Reassessment/Care Plan Update after Inpatient Discharge:**

For these two measures, core element #5, assessment of mental health status using a standardized tool, is not required by the State for calendar year 2018. When reporting these measures, as long as the other eight of the nine core elements are found, the case will be compliant for the numerator.