



Quality Measurement 101: The Basics



NATIONAL
QUALITY FORUM

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2:00pm-3:00pm ET

WELCOME
TO NATIONAL QUALITY FORUM

Over 425 Members Strong

Introductions



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Objectives & Agenda

By the end of this session, members can expect to:

- Be able to define basic measurement concepts
- Understand how measurement serves as a tool to help improve healthcare quality and create healthier populations
- Understand how and why stakeholders use quality measures



Audience

How much experience or engagement do you have with quality measurement?

- a. Little to none. Today's session is my introduction to measures.
- b. A little bit. I know what measures are but not how or why different measures are used.
- c. A lot. I know how and why different measures are used in various situations.
- d. Other (please specify)

Animated Short Video: The Quality Community Using Measures Everyday



Key Points

- ✓ Healthcare professionals care about people. To provide the best outcomes, we use healthcare performance measures as a tool to continuously improve the care we deliver.
- ✓ There are many forms and functions of measures. What they all have in common is that they seek to improve health outcomes by improving quality of care.
- ✓ Quality measurement is at work behind the scenes occurring throughout all aspects of healthcare, in various settings, and for various populations.



National Quality Strategy: A Healthcare, Quality, and Measurement Framework



The [National Quality Strategy](#) (NQS) is a national framework to align public and private healthcare stakeholders to achieve better health and healthcare.

The NQS focuses on the “triple aim” Better Care, Healthy People/Healthy Communities, and Affordable Care.

What Do We Mean by Measurement?



Meas•ure

n. A standard: a basis for comparison; a reference point against which other things can be evaluated; “they set the measure for all subsequent work.”

v. To bring into comparison against a standard.*

*Source: [The ABC's of Measurement](#)

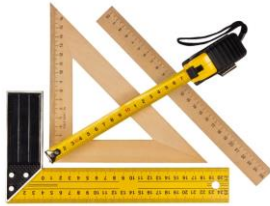
What Is a Healthcare Performance Measure?

Healthcare performance measures are tools used to **quantify** the quality or cost of care provided to patients and their families.

They allow us to **gauge** the quality of care that is provided and help us understand whether and how much improvement activities **improve** care and outcomes .



Why Do We Measure?



The primary goal of healthcare performance measurement is to **improve the quality of healthcare** received by patients (and ultimately, to **improve health**)

*Measurement is a quality improvement tool,
not an end in and of itself*

Who Uses Measures and Why?

Many people are interested in the quality, outcomes, and cost of care including:

- Patients, Consumers, Families, & Caregivers
- Primary Care, Specialists, & Other Health Professionals
- Health Systems & Care Facilities
- Employers & Payers (private & public)
- Measure Developers and Programs
- Health and Measurement Researchers



What Are The Major Uses of Healthcare Performance Measures?

- Internal quality improvement
- Benchmarking
- Accountability applications
 - Certification
 - Accreditation
 - Defining provider networks
 - Public reporting
 - Payment



What Are The Types of Healthcare Performance Measures?

1. Quality
 - A. Structures of care
 - B. Processes of care
 - C. Outcomes
 - i. Intermediate clinical outcomes
 - ii. Health outcomes (mortality, complications, etc.)
 - iii. Patient-reported outcomes (experience, functional status, engagement, quality of life, etc.)
2. Resource use/cost
3. Efficiency (combination of quality and resource use)

Handout



Where Do Data for Measures Come From?

- Paper medical records
- Electronic health records
- Other electronic clinical data (e.g., pharmacy, labs, imaging)
- Electronic assessment data (e.g., MDS; OASIS)
- Administrative claims (e.g., insurance claims)
- Clinical data registries
- Patient reports (e.g., from surveys)



Performance Measures Combine Data from Many Individuals



Whose Performance Is Measured?

Providers of healthcare: Provider-level measures

- Individual clinicians or groups of clinicians
- Hospitals
- Nursing facilities
- Home health agencies
- Hospices
- Health plans



Populations: Population-level measures

- A specified geopolitical area or some other subpopulation of individuals (e.g., age, race, ethnicity, occupation, schools, health conditions, common interests, or any number of other characteristics)

What Are the “Key Ingredients” of a Measure?

To understand a measure, we need to know :

- What should happen?
- Who is the target group?
- Where should it take place?
- When should it take place?
- How should it occur?
- What, Who, Where, When, & How should NOT be measured?

“*Measure specifications*” is the term used to describe how to build and calculate a measure

Let's Review a Measure – NQF #0057

Title

Comprehensive Diabetes Care: Hemoglobin A1c (HbA1c) testing

Description

Percentage of patients 18-75 years of age with diabetes (type 1 and type 2) who received an HbA1c test during the measurement year

Numerator (What, How, When)

Patients with a HbA1c test completed during the measurement period

Denominator (Who, Where, When)

Patients with type 1 or type 2 diabetes who had at least one described encounter during the measurement period

Exclusions (NOT)

Patients with gestational or steroid-induced diabetes

How is Performance Calculated?

Numerator (What, How, When)

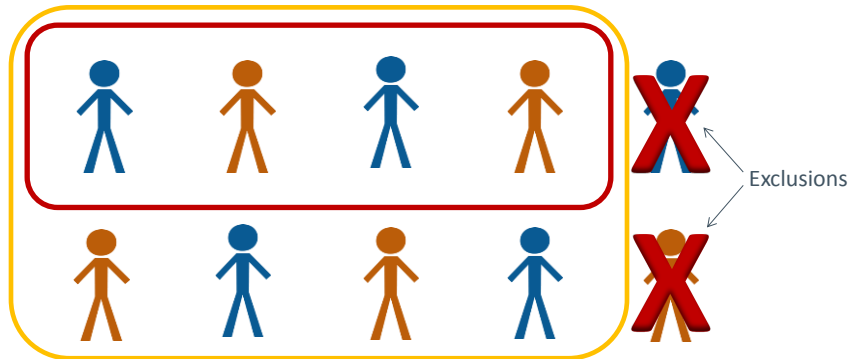
Patients with HbA1c testing during the measurement period

Denominator (Who, Where, When) – Exclusions (NOT)

Patients with type 1 or 2 diabetes who had at least one described encounter during the measurement period

Patients with gestational or steroid-induced diabetes

Patients Receiving Hemoglobin A1c Testing



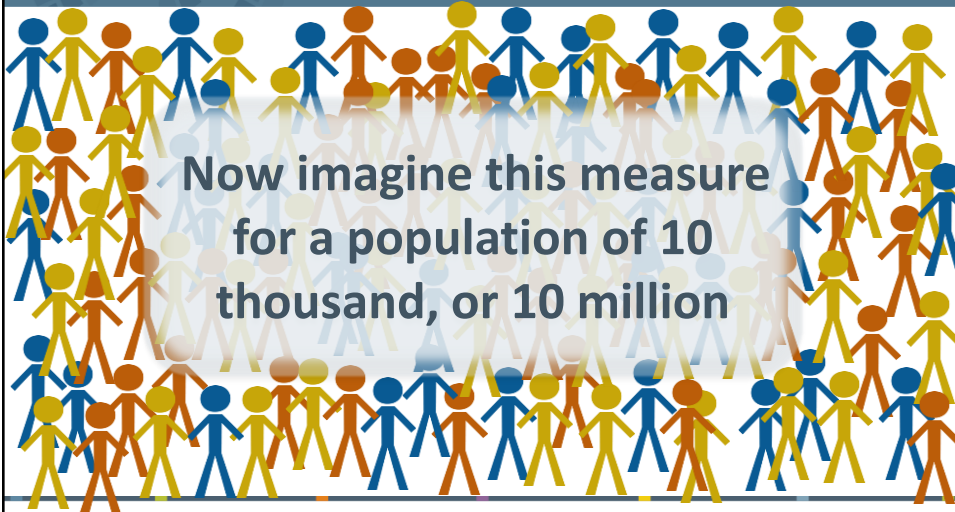
50% of eligible patients received HbA1c testing

Calculating Patients Receiving Hemoglobin A1c Testing

$$\frac{\text{Numerator}}{\text{Denominator} - \text{Exclusions}}$$

$$\frac{4}{10 - 2} = \frac{4}{8} = 50\%$$

Populations Receiving Hemoglobin A1c Testing



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Meet Joe



- 50 years old
- Married for 25 years
- 2 adult children
- Fulltime, sedentary job
- Just became a grandfather
- He has a dog named "Buster"
- He spends time with his family and friends, plays cards, and going fishing

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Joe's Annual Primary Care Visit



- 5'10" and 40 pounds overweight
- Previously diagnosed with hypertension
- Blood pressure was normal
- Diagnosed with type 2 diabetes
- Diagnosed with mild high cholesterol
- Annual influenza vaccine given

Joe's Annual Primary Care Visit: Measures at Work Behind the Scenes



Measure Name/# [type]	Key Question
Body Mass Index (BMI) Screening and Follow Up (NQF 0421) [process]	Did the provider calculate the patient's BMI, and if the BMI is out of range, did the provider take action?
Flu Vaccinations for Adults Ages 18 and Over (NQF 0039) [process]	Did the provider administer the flu vaccine to all eligible adults during their annual visit?
EHR* with EDI* prescribing used in encounters where a prescribing event occurred (NQF 0487) [structure]	What number of encounters last month used an EHR for prescribing medications?

*EHR refers to electronic health records; EDI refers to Electronic Data Interchange

Joe's Check-Up Three Months Later



- Reduced weight by 10 pounds
- Increased daily exercise
- Morning blood sugars lower
- Cholesterol lower
- Blood pressure was normal

Joe's Check-Up Three Months Later: Measures at Work Behind the Scenes



Measure Name/# [type]	Key Question
Comprehensive Diabetes Care: Hemoglobin A1c (HbA1c) testing (NQF 0057) [process]	Did patients with diabetes have a HgA1c testing during the measurement period?
Controlling High Blood Pressure (NQF 0018) [intermediate outcome]	Is the patient's blood pressure under control?
CAHPS* Clinician & Group Surveys (CG-CAHPS) - Adult, Child (NQF 0005) [PRO-PM]	In the patient's opinion, did he or she receive good service?

*CAHPS refers to the Consumer Assessment of Healthcare Providers and Systems

Joe's Check-Up One Year Later



- Lost a total of 30 pounds
- Blood sugars lower
- Walks 2 miles every day
- Episodes of low blood pressure
- Colorectal cancer screening

Joe's Check-Up One Year Later: Measures at Work Behind the Scenes



Measure Name/# [type]	Key Question
Optimal Diabetes Care (NQF 0729) [composite]	Are diabetic patient's receiving optimal care, based on established best practices?
Colorectal Cancer Screening (COL) (NQF 0034) [process]	Were patients ages 50 through 75 years old screened for colorectal cancer?

Other Measures at Work Behind the Scenes



Measure Name/# [type]	Key Question
Diabetes Short-Term Complications Admission Rate (PQI 01) (NQF 0272) [outcome]	How many patients were admitted to the hospital with short-term complications?
Relative Resource Use for People with Cardiovascular Conditions (NQF 1558) [resource use]	How many resources (doctor's visits, hospital stays, diagnostic tests) does it take to care for someone with a cardiovascular condition?
Adult Current Smoking Prevalence (NQF 2020) [intermediate outcome]	How many U.S. adults are smokers?

Applying Joe's Story: How Can Performance Measurement Help to Improve Care?



What Are Some Fundamental Tensions in Healthcare Performance Measurement?



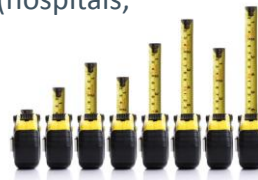
A few good outcome measures for accountability	Versus	Specific process measures to guide improvement
Core sets of measures	Versus	Measures that meet the needs of different providers and settings
Measuring at system level	Versus	Measuring at individual clinician level
Burdens for providers	Versus	Comprehensiveness for consumers & purchasers

How Does NQF Evaluate Measures?

- **Important to measure and report:** goal is to measure those aspects with greatest potential of driving improvements
- **Reliability and Validity:** goal is to make valid conclusions about quality
- **Feasibility:** Goal is minimize burden
- **Usability and Use:** Goal is that measures are used and result in improvement
- Assessment of **related or competing** measures

How Can We Improve Healthcare Performance Measurement?

- Understanding how to engage patients in measurement
- Making measurement meaningful to both consumers & providers
- Adjusting measures for different patient populations, like sociodemographic (SDS) factors
- Attributing results to specific providers (hospitals, medical group, individual clinician)



In Summary

- ✓ Healthcare professionals care about people. To provide the best outcomes, we use healthcare performance measures as a tool to continuously improve the care we deliver.
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Your Feedback

Comments? Questions?



Please type into the chat box anytime or
call 877-468-8808 (no passcode)

Audience Quiz

How will you use your new knowledge about
measures? (Check all that apply.)

- a. To directly improve care I provide to patients.
- b. To inform healthcare decisions I make for myself or loved ones.
- c. To design better healthcare programs.
- d. To participate in measure development, testing, or endorsement at NQF or elsewhere.
- e. Other (please specify).

Upcoming Member Events

Learn more about Member exclusive events and register online:

www.qualityforum.org/learn.aspx



- Member Meet-Up on Oct. 15: “Improving Population Health: Your Role and the Challenge of Measurement”
- In-person, full day workshop on October 27: “How to Talk About Quality”

Event Evaluation

We value your feedback



Please take a moment to fill out our event evaluation here:
<https://www.surveymonkey.com/r/KLH8PFD>

