Measure Applications Partnership

Annual Pre-Rulemaking Input



NATIONAL QUALITY FORUM

*November 4, 2013* 

## MAP Pre-Rulemaking Timeline

- December 1: HHS list of measures under consideration provided to MAP
- December 4: All MAP Web Meeting to preview list of measures under consideration
- December 10-20: MAP workgroup meetings to provide input on program measure sets and measures under consideration
- January 7-8: MAP Coordinating Committee Meeting in-person to finalize MAP's recommendations to HHS
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- **February 1**: Pre-Rulemaking Report due to HHS

## MAP Pre-Rulemaking Approach

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- 1. Build on MAP's prior recommendations
- 2. Evaluate each finalized program measure set using MAP Measure Selection Criteria
- 3. Evaluate measures under consideration for what they would add to the program measure sets
- 4. Identify high-priority measure gaps for programs and settings

## 1. Build on MAP's Prior Recommendations

| MAP's Prior Efforts  | Pre-Rulemaking Use   |
|--|--|
| <b>Coordination Strategies</b><br>(i.e., Safety, Clinician, PAC-LTC, Dual<br>Eligible Beneficiaries Cross-Cutting Input) | <ul> <li>Provides setting-specific considerations that will serve as<br/>background information for MAP's pre-rulemaking<br/>deliberations.</li> <li>Key recommendations from each coordination strategy will<br/>be compiled in background materials.</li> </ul>              |
| Gaps Identified Across All MAP<br>Efforts  | <ul> <li>Provides historical context of MAP gap identification activities.</li> <li>Will serve as a foundation for measure gap prioritization.</li> <li>A universal list of MAP's previously identified gaps will be compiled and provided in background materials.</li> </ul> |

\*While MAP's prior efforts serve as guidance for this work, pre-rulemaking decisions are not restricted to measures identified within these efforts.

## 1. Build on MAP's Prior Recommendations

| MAP's Prior Efforts  | Pre-Rulemaking Use   |  |
|--|--|--|
| 2012 and 2013 Pre-Rulemaking<br>Decisions  | <ul> <li>Provides historical context and represents a starting place<br/>for pre-rulemaking discussions.</li> <li>Prior MAP decisions will be noted in the individual<br/>measure information.</li> </ul>  |  |
| Families of Measures<br>NQS priorities (safety, care<br>coordination)<br>Vulnerable populations (dual<br>eligible beneficiaries, hospice)<br>High-impact conditions<br>(cardiovascular, diabetes,<br>cancer) | <ul> <li>Represents a starting place for identifying the highest-leverage opportunities for addressing performance gaps within a particular content area.</li> <li>Setting- and level-of-analysis-specific core sets will be compiled, drawing from the families and population cores. Core measures will be flagged in the individual measure information.</li> <li>MAP will compare the setting and level-of-analysis cores</li> </ul> |  |
| cancer)  | • MAP will compare the setting and level-of-analysis cores against the program measure sets.   |  |

## 2. Evaluate Finalized Program Measure Set Using MAP Measure Selection Criteria

#### **MAP identifies:**

- Potential measures for inclusion
- Potential measures for removal
- Gaps—implementation gaps (core measures not in the set) and other gaps (e.g., development, endorsement) along the measure lifecycle
- Additional programmatic considerations (e.g., guidance on implementing MAP recommendations, data collection and transmission, attribution methods)

#### **MAP** Measure Selection Criteria

#### Background

- MAP initially developed the Measure Selection Criteria (MSC) prior to the first round of pre-rulemaking activities in 2011, primarily to guide decisions on recommendations for measure use in federal programs, with an emphasis on measure *sets*.
- Per HHS' request, the MAP Strategy Task Force was re-convened this summer as the MAP Measure Selection Criteria and Impact Task Force to advise the Coordinating Committee about potential refinements to the MSC, emphasizing the following:
  - Applying lessons learned from the past two years.
  - Integrating the Guiding Principles developed by the Clinician and Hospital Workgroups during the 2012-13 pre-rulemaking cycle.

#### **Revised MAP Measure Selection Criteria**

- NQF-endorsed measures are required for program measure sets, unless no relevant endorsed measures are available to achieve a critical program objective
- 2. Program measure set adequately addresses each of the National Quality Strategy's three aims
- 3. Program measure set is responsive to specific program goals and requirements
- 4. Program measure set includes an appropriate mix of measure types
- 5. Program measure set enables measurement of person- and familycentered care and services
- 6. Program measure set includes considerations for healthcare disparities and cultural competency
- 7. Program measure set promotes parsimony and alignment

#### **Revisions to the Measure Selection Criteria**

#### **Overarching Changes**

- Added a preamble to emphasize that the criteria are meant as guidance rather than rules; application should be to *measure sets*, not individual measures; and focus should be placed on filling important measure gaps and promoting alignment.
- More consistent use of terminology and formatting.
- Removed extraneous content, including the "Response Option" rating scales for each criterion or sub-criterion.

| Federal Program for MAP Pre-Rulemaking Input                              | MAP Workgroup |
|---|---------------|
| Physician Feedback/Value-Based Payment Modifier                           |               |
| Physician Quality Reporting System  |               |
| Medicare and Medicaid EHR Incentive Program for Eligible Professionals    | Clinician     |
| Medicare Shared Savings Program   | Workgroup     |
| Physician Compare   |               |
| Hospital Inpatient Quality Reporting                                      |               |
| Hospital Value-Based Purchasing   |               |
| Hospital Outpatient Quality Reporting                                     |               |
| Medicare and Medicaid EHR Incentive Program for Hospitals and CAHs        |               |
| Prospective Payment System (PPS) Exempt Cancer Hospital Quality Reporting | Hospital      |
| Inpatient Psychiatric Facility Quality Reporting                          | Workgroup     |
| Hospital Readmission Reduction Program                                    |               |
| Hospital-Acquired Conditions Reduction Program                            |               |
| Medicare Shared Savings Program   |               |
| Ambulatory Surgical Center Quality Reporting                              |               |
| Home Health Quality Reporting   |               |
| Nursing Home Quality Initiative and Nursing Home Compare Measures         |               |
| Inpatient Rehabilitation Facility Quality Reporting                       | PAC/LTC       |
| Long-Term Care Hospital Quality Reporting                                 | Workgroup     |
| Hospice Quality Reporting   |               |
| End Stage Renal Disease Quality Reporting                                 |               |

## 3. Evaluate Measures Under Consideration

#### MAP will indicate a decision and rationale for each measure under consideration:

| MAP Decision<br>Category | Decision Description  | Rationale (Example)   |
|--------------------------|---|---|
| Support                  | Indicates measures under consideration that should be<br>added to a program measure set in the current rulemaking<br>cycle.                       | <ul> <li>Measure addresses a previously identified measure gap</li> <li>Measure is included in a MAP Family of Measures</li> <li>Measure promotes parsimony and alignment across public and private sectors</li> </ul>                            |
| Do Not Support           | Indicates measures that are not recommended for inclusion in a program measure set.   | <ul> <li>Measure is not appropriately specified or tested for<br/>the population, setting, or level of analysis</li> <li>A different measure better address a similar topic</li> </ul>  |
| Conditionally<br>Support | Indicates measures, measure concepts, or measure ideas<br>that should be phased into a program measure sets when<br>contingent factor(s) are met. | <ul> <li>Measure should receive NQF endorsement before<br/>being use in the program</li> <li>Measure requires modification before use in the<br/>program</li> <li>Measures needs testing for the setting before use in<br/>the program</li> </ul> |

# 4. Identify High-Priority Measure Gaps for Programs and Settings

#### **MAP's Previously Identified Gaps**

- Compiled from all of MAP's prior reports
- Categorized by NQS priority and high-impact conditions
- Compared with gaps identified in other NQF efforts (e.g., NPP, endorsement reports)

#### MAP will:

- Identify priorities for filling gaps across settings and programs
- Present measure ideas to spur development
- Capture barriers to gap filling and potential solutions

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