













#### Overview

- 1. Existing approaches to CRC quality measurement
- 2. Data from prior and ongoing work
- 3. Proposed approach to patient-centered measure development









#### Background

- In parallel, policy makers have developed measures to assess underuse of CRC screening.
- The HEDIS measure for CRC screening was first introduced by NCQA in 2003.
- This widely used underuse measure assesses proportion of individuals aged 50-75 who are "up to date" for screening.

#### The Gap

- Age alone is not a sufficient criterion for making a screening decision:
  - USPSTF: "Clinicians should always understand the evidence but individualize decision-making to the specific patient and situation."
  - But HEDIS uses age without explicitly considering clinical differences between patients in the target age group.





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## Objective

- Develop a measure that:
  - Incorporates individual patient benefit
  - Considers patient preferences
  - Feasible to implement

















## How comfortable would you be with stopping if



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### **Overview of Proposed Work**

- We will specify several individualized, patientcentered measures of CRC screening performance.
- Candidate measures will be presented to an advisory panel of patients and an advisory panel of experts.
- Panels will be asked to assess measures on prespecified characteristics and provide additional feedback.







### **Proposed Work**

- We will use several approaches to calculate tailored target rates:
  - 1. Proportion of systematically informed patients in the trial who chose to undergo screening
  - 2. Stratify this rate by health status and prior screening history.
  - 3. Stratify this rate by the expected benefit of screening.

Each approach will yield an increasingly refined target rate for the population.





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#### **Proposed Work**

- After conducting measure specification and analyses, we will convene two advisory panels:
  - Patient panel: 8-10 patients, ages 50-85
  - Expert panel: 8-10 healthcare providers and policy makers and measure developers

#### **Proposed Work**

- Panelists will be presented with data from candidate measures and asked to discuss:
  - Whether the measures are meaningful
  - How the various approaches are likely to be perceived by patients
  - Feasibility of implementation
  - Unintended effects

Time for open-ended feedback and additional measure specification.

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#### Study Team:

- VA Ann Arbor Center for Clinical Management Research
- Erasmus University Medical Center
- Memorial Sloan Kettering Cancer Center
- University of Colorado School of Medicine





















# The Patient-Centered Challenge

How to assess patient centeredness in quality measure development?

#### Identified Priorities from the Patient Community

Perceived challenges to meaningful patient-community engagement in quality measure-development<sup>1</sup>:

- Closed out of some segments of the process
- Brought into the process after much of the work is completed
- Asked to represent the views of <u>all</u> patients

Identified Priority from Patient Community	Proposed Solution
Increase patient-community skills and capacity to engage in quality	<ul> <li>Develop a rubric<sup>†</sup> to evaluate patient centeredness in quality-measure development</li> <li>Implement and encourage the use of the rubric</li> <li>Identify emerging good practices for patient centeredness in measure development</li> </ul>
Develop tools to support the patient community in engagement on quality	
<sup>†</sup> Defined as a tool with criteria and levels of achievement in	patient centeredness and patient engagement
Concannon TW, Friedberg MW, Hwang A, and Wiitala K. Engaging Consumers RAND Corporation, 2017. <u>https://www.rand.org/pubs/research_reports/RR1760</u>	





Development & Implementation	
Phase I: Development	Phase II: Implementation
<ul> <li>Convene a multi-stakeholder Advisory Roundtable to develop the rubric</li> <li>Identify and describe the characteristics of meaningful patient engagement in measure development</li> </ul>	<ul> <li>Convene a larger stakeholder group to socialize and inform effective implementation of the rubric</li> <li>Implement the rubric within PQA's measure development cycle</li> </ul>
	Disseminate and encourage the use of the rubric, where possible







23







