

# eMeasure Feasibility

Expert Panel Meeting



NATIONAL  
QUALITY FORUM

December 7, 2012

# Background

- All measures are assessed for scientific acceptability and feasibility (two of the four criteria)
- NQF Testing Task Force report identifies criteria for evaluating EHR measures for reliability and validity (2011)
- NQF's eMeasure Review and Assessment draft proposal (2012) comments:
  - Stakeholders identify need for increased eMeasure feasibility assessment
  - NQF criteria should incorporate the **feasibility of data capture for the data elements utilized** in addition to reliability and validity

# eMeasure Feasibility Project Goals

- Environmental scan of current approaches to eMeasure feasibility assessment
- Recommendations for eMeasure feasibility assessment
- Draft starter set of criteria for eMeasure feasibility assessment

# Meeting Objectives

- Additions to the environmental scan
- Discussion:
  - Principles and Guidance for eMeasure Feasibility Assessment
  - Recommendations for eMeasure Feasibility Assessment
  - Potential scoring for eMeasure Feasibility Assessment
  - Starter set of criteria for eMeasure Feasibility Assessment

# Project Timeline\*

December 7, 2012	Expert Panel meeting
December 8-31, 2012	NQF staff prepares draft report
January 1-16, 2013	Expert Panel review of draft report
January 21-February 19, 2013	30-day Public comment on draft report
February 20 – March 8, 2013	Final revisions to draft report after review of comments
March 11 – April 5, 2013	Final approval by HITAC, CSAC and NQF BoD

**\*Tentative**

# Schematic for eMeasure Testing

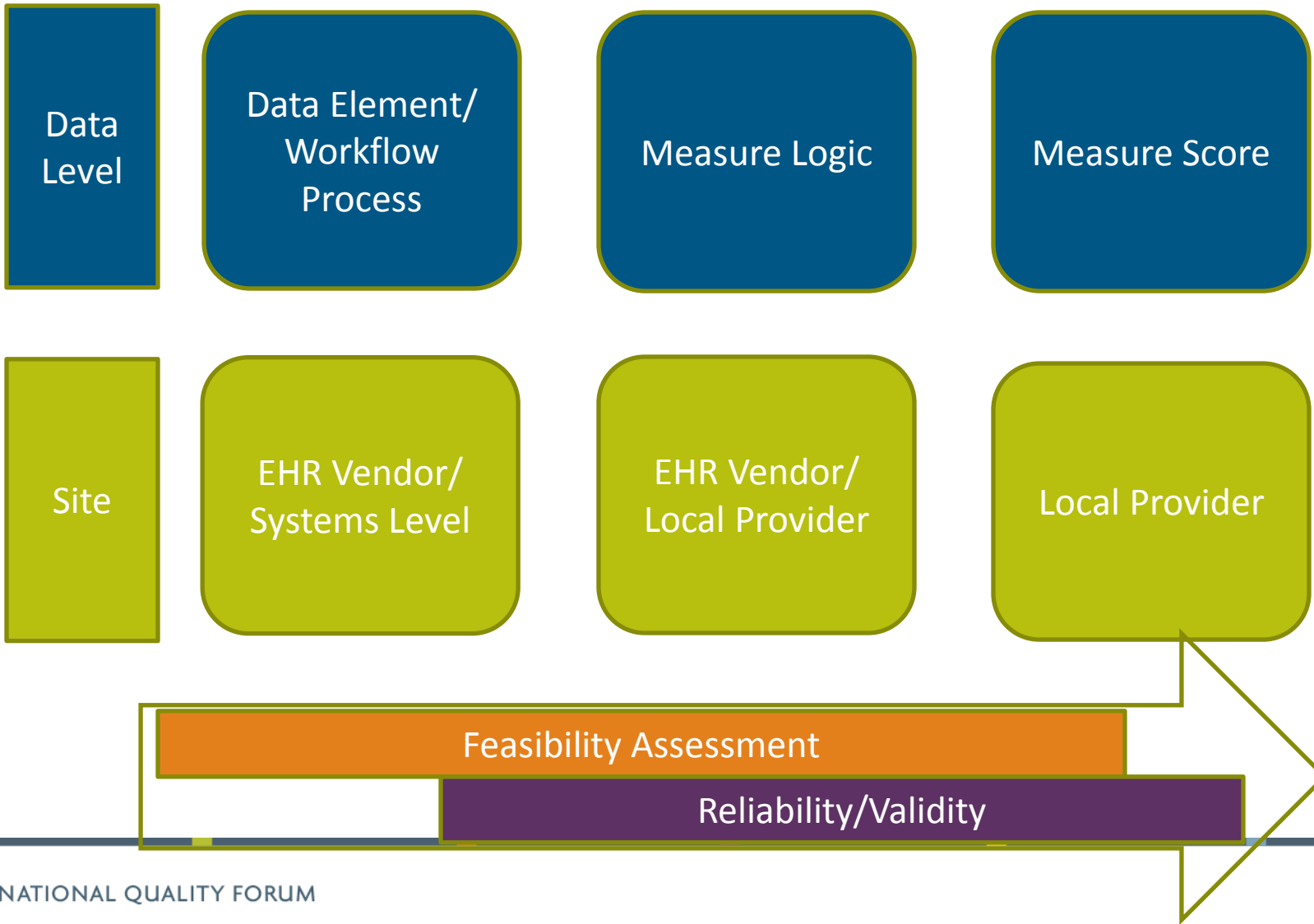
## ■ **Feasibility:**

- An iterative process that should occur throughout the development, testing, and implementation process
- Initial feasibility examines the individual data elements, associated value sets, representation in the QDM and begins to assess appropriate measure logic
- May occur at the vendor system level primarily
- Need to begin to address how data will be derived during care processes

## ■ **Reliability and Validity:**

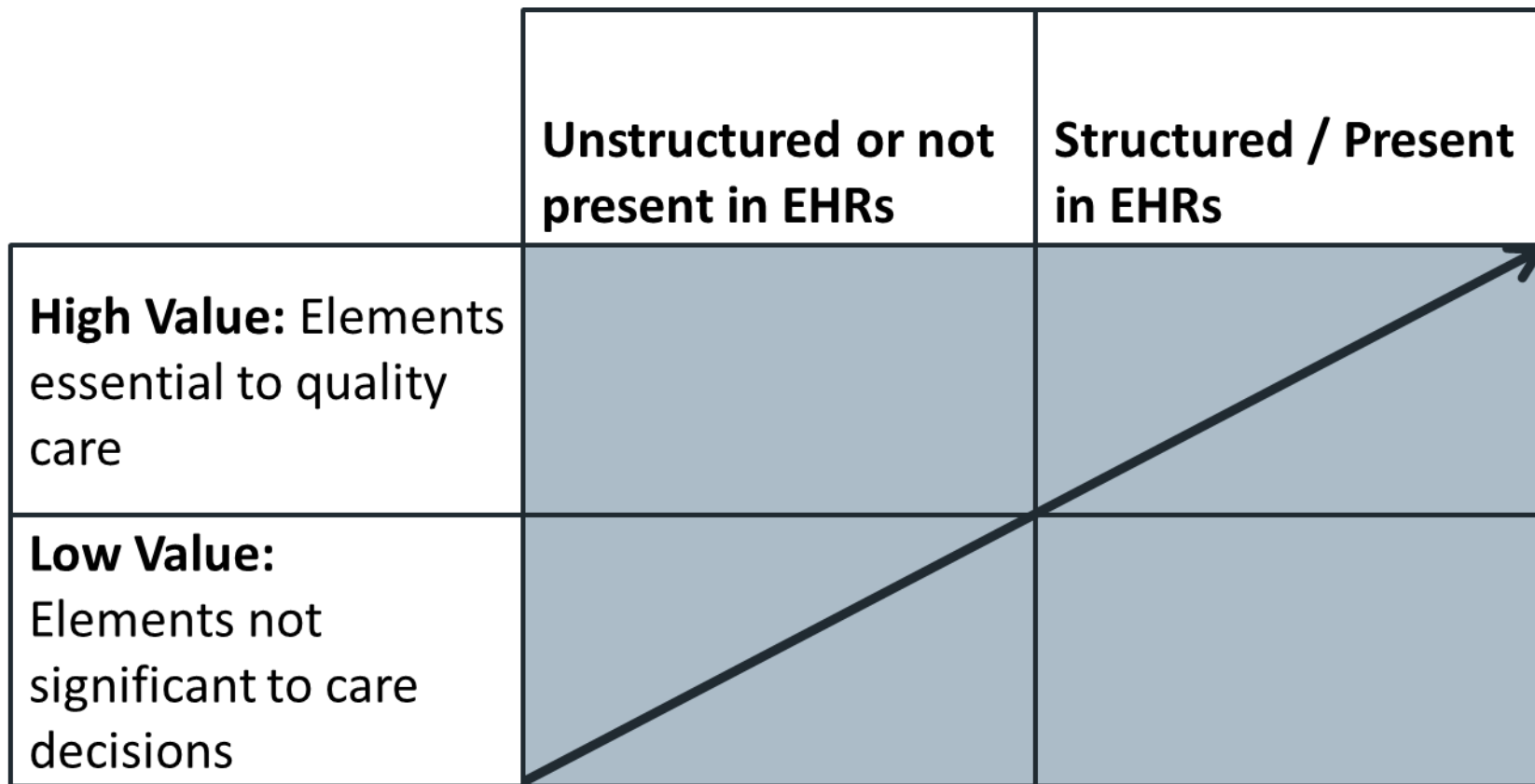
- At the point at which an eMeasure is determined to be feasible (still to be defined), testing can then move into the measure logic and aggregating of data into measure scores.
- While feasibility may continue to be assessed, testing blends into reliability and validity.
- Will require testing and implementation by providers at the point of care

# eMeasure development, testing and implementation timeline



# ONC Table

	Unstructured or not present in EHRs	Structured / Present in EHRs
High Value: Elements essential to quality care		
Low Value: Elements not significant to care decisions		

A 2x2 matrix with a diagonal arrow pointing from the bottom-left cell to the top-right cell. The arrow starts at the bottom-left corner of the matrix and ends at the top-right corner, passing through the center of the matrix.



# Quality Score for Common Data Types (HITEP I)

Data Quality Criteria	Description	Scale	Weight
Authoritative/Accurate Source	Is the entry in the EHR from an authoritative data source? What is the accuracy of the data element in EHRs?	1-5	5
Data Standards	Is the data element coded in a structured format using a nationally accepted terminology standard?	1-5	5
Workflow Fit	Does capture of the data element by the most appropriate healthcare professional fit the typical EHR workflow for that user?	1-5	4
Availability in EHRs	Is the data element currently available within EHRs?	1-5	4
Auditable	Can the data be tracked over time to assess accuracy?	1-5	2

# Characteristics of Data Elements

**The Expert Panel identified several characteristics that may influence the feasibility of each data element:**

- Data are captured during the course of patient care
- Data are found in structured data fields
- Data element definition is precise and unambiguous with appropriate granularity to represent the quality concept
- Data element and associated value set use standardized vocabularies
- Interoperability complexity