



### MAP Clinician Workgroup Orientation Web Meeting

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The National Quality Forum (NQF) convened a public web meeting for the Measures Application Partnership (MAP) Clinician Workgroup on September 23, 2020.

#### Welcome and Review of Web Meeting Objectives

Samuel Stolpe, NQF Senior Director, began by welcoming participants to the web meeting. The MAP Clinician Workgroup Co-chairs Robert Fields and Diane Padden provided opening remarks. Sam Stolpe reviewed the meeting agenda and meeting objectives:

- MAP Pre-Rulemaking Approach
- Overview of Programs Under Consideration
- CMS Presentations

#### CMS Welcoming Remarks

Dr. Reena Duseja, Chief Medical Officer of the Quality Measurement and Value-Based Incentives Group at the Centers for Medicare and Medicaid Services (CMS), also provided opening remarks. Dr. Duseja provided a brief overview of the MAP and shared that while considering measures, Workgroup members should consider whether they are appropriate for use in federal programs, whether the measures are impactful and will motivate improvement, whether the measures are aligned with important clinical questions and priorities, and whether they reduce reporting burden. Dr. Duseja thanked the Workgroup for their participation in the MAP pre-rulemaking process.

#### MAP Pre-Rulemaking Approach

Sam Stolpe provided a brief overview of the timeline of MAP Activities. The cycle began with nominations closing in August. In the month of September NQF will host a series of setting specific orientation web meetings and will begin drafting the preliminary analysis in October. On or by December 1, 2020 the Measures Under Consideration (MUC) list will be released, after which the MAP Rural Health will convene to provide their input. The Rural Health Workgroup review will be followed up by a one-day virtual Workgroup Review meeting on December 17, 2020, and the Coordinating Committee Review will be on January 19, 2021.

Prior to the December workgroup meetings, NQF will send and analyze a survey to capture the MAP Coordinating Committee feedback on whether the threshold for consensus is appropriate, proposed changes to amending step two of the MAP voting process, and whether there are any proposed changes to the Preliminary Analysis Algorithm or the decision categories. On February 1, 2021 NQF will submit the final report to Health and Human Services (HHS).

#### Overview of Programs Under Consideration

Sam Stolpe provided an overview on each of the programs to be considered by the clinician workgroup. Each overview gave information on the type of program, the incentive structure, program goals, a list of

current measures, and a summary of the CMS high priority for future measure consideration derived from the 2020 CMS Needs and Priorities report. The following programs were covered:

1. Merit-based Incentive Payment System (MIPS)
2. Medicare Shared Savings Program (SSP)
3. Medicare Part C and D Star Ratings

Following the overview, Sam Stolpe touched on the 2019-2020 MAP Clinician Overarching Themes which included emphasizing care coordination and attribution of outcomes, appropriate opioid measurement, and the Clinician Workgroup reaction to the CMS Meaningful Measures Initiative 2.0. Sam Stolpe also touched on the importance of the MAP Rural Workgroup Review of the MUC. The Rural Health Workgroup feedback will be included inside each of the preliminary analyses that staff will conduct and will share with the Clinician Workgroup prior to the December 17, 2020 meeting.

Following the overview, Workgroup members raised suggestions regarding major categories of measures that should be considered, including measures related to opioids and COVID-19. Dr. Reena Duseja shared that CMS would be hosting listening sessions during fall 2020 to further refine priorities. Rob Fields asked CMS how they reconcile differences between measures at the population versus the individual level. Reena Duseja responded that reconciliation was an ongoing process and that generally CMS focuses on improving value. Rob Fields also inquired about the Clinician Workgroup's responsibility to help CMS programs think holistically about their programs in the context of the measures under consideration. CMS responded that the Committee's first priority is to react to the MUC list and prioritize giving clear recommendations and rationale regarding the given measures, but that usually there is adequate time for the Committee to discuss program goals. Workgroup members also offered suggestions for the MIPS program and Consumer Assessment of Healthcare Providers and Systems (CAHPS) measures.

## **CMS Presentations**

CMS program leads provided a detailed overview of the different programs under consideration. Fiona Larbi provided an overview of the quality measurement approach and quality measures in the Medicare Shared Savings Program. Christine Payne provided an overview of the Part C & D Star Ratings Program. Lisa Marie Gomez provided an overview of the Quality Payment Program and MIPS for the 2020 performance year.

Workgroup members asked that CMS elaborate on providing automatic full credit to patient experience measures regarding payment programs. CMS responded that there are ten measures which get two points which will be the credit received from the program.

## **Opportunity for Public Comment**

Sam Stolpe opened the web meeting to allow for public comment. No public comments were offered.

## **Next Steps**

Teja Vemuganti, NQF Analyst, summarized the next steps for the workgroup. The MAP Rural Health Workgroup will convene for their review in early December and the one-day virtual Workgroup Review meeting for MAP Workgroup members will be on December 17, 2020. The Coordinating Committee Review will be on January 19, 2021.