



## NATIONAL QUALITY FORUM

# Meeting Summary

HHS-500-2012-000091—Task Order 7

### Measure Applications Partnership MAP Coordinating Committee Web Meeting

**June 20, 2014**

**12:00 pm - 2:00 pm ET**

The National Quality Forum (NQF) convened a web meeting of the Measure Applications Partnership (MAP) Coordinating Committee on Friday, June 20, 2014. An online archive of the meeting is available by clicking [here](#).

#### **Committee Member Attendance**

Please see attachment for the list of members in attendance.

#### **Welcome and Review of Meeting Objectives**

Session was led by George Isham, MAP Coordinating Committee Co-Chair with additional presentations by Christine Cassel, President and CEO, NQF, and Robert Saunders, Senior Director, NQF.

Dr. Isham welcomed the group to the meeting and reviewed the following meeting objectives:

- Review key themes and strategic direction of proposed MAP Families of Measures for Affordability, Population Health, and Person- and Family-Centered Care
- Review ongoing lean improvement activities aimed at enhancing pre-rulemaking process

Dr. Cassel provided additional opening remarks and highlighted how families of measures are intended as a tool that stakeholders can use for assessing progress in important areas and can help promote alignment in measurement across the health system. Dr. Cassel briefly mentioned an NQF Kaizen event where staff considered opportunities for improving the pre-rulemaking process.

Following Dr. Cassel's remarks, Dr. Saunders presented the approach for developing a Family of Measures:

- Scanning the universe of measures for available measures
- Identifying measures for high-leverage opportunities identified by task force
- Undergoing an initial staff review to identify potential measures for the families
- Conducting the initial task force review of measures selected by staff through an online survey
- Holding the in-person meeting to identify and finalize measures for inclusion in the family as well as measurement gaps, methodological challenges, and data availability, and implementation issues

### **Proposed MAP Families of Measures - Affordability**

Session was led by Dr. Mark McClellan, MAP Affordability Task Force Chair.

Dr. McClellan presented the key themes from the Affordability Task Force's discussion in developing a family of measures:

- Rising healthcare costs are affecting all stakeholders, and all stakeholders have a shared responsibility for making care affordable
- Current measures are limited in their ability to describe the full cost picture, so further work is needed to produce measures that comprehensively capture cost at multiple levels
- Greater transparency of costs and prices is required for improving affordability

Dr. McClellan's presentation also discussed the multiple opportunities to improve cost and affordability measurement including the development of cost measures that can track broader progress in affordability, highlighting indirect costs (e.g., transportation, productivity, and caregiving), and the need to capture the patient experience of affordability.

Coordinating Committee members provided additional input on important areas for affordability measurement including readmissions from psychiatric causes and assessing the percent of revenues spent on actual care and services excluding administration and profits for each provider.

### **Proposed MAP Families of Measures – Population Health**

Session was led by Bobbie Berkowitz, MAP Population Health Task Force Chair with an additional presentation by Allen Leavens, Senior Director, NQF.

Dr. Berkowitz presented the key themes from the Population Health Task Force's discussion in developing a family of measure:

- Population health measures should align with the NQS aim of achieving healthy people and healthy communities, ultimately promoting improvements in length and quality of life.
- More emphasis is needed on measuring upstream determinants of health in both clinical and community settings, though this can often be challenging due to data and accountability issues.
- In addition to measuring health of the total population, attention needs to be given to health disparities and the particular issues affecting the health of various subpopulations.

Dr. Berkowitz's presentation also discussed how the task force selected measures of clinical preventive services, such as screenings and immunizations, as well as many measures that addressed topics outside of the traditional healthcare system. Furthermore, the task force considered how measures could be used in non-healthcare situations such as a community health needs assessment and public health activities.

Coordinating Committee members supported the approach of seeing how different measures and indicators in the population health family might be applied to potential use cases. Additionally, a Coordinating Committee member emphasized the importance of integrating the health care system with the social services and public health system.

#### **Proposed MAP Families of Measures – Person- and Family-Centered Care**

Session was led by Gail Hunt and Rhonda Anderson, MAP Person- and Family-Centered Care Task Force Co-Chairs with an additional presentation by Mitra Ghazinour, Project Manager, NQF.

Ms. Hunt and Dr. Anderson presented the key themes from the Person- and Family-Centered Care Task Force's discussion in developing a family of measure:

- Measurement should capture patients' experience of care as well as include patient-reported measures that evaluate meaningful outcomes for patients.
- Collaborative partnerships between persons, families, and their care providers are critical to enabling person-/family-centered care across the healthcare continuum.
- Future measure development should focus on patient-reported outcomes that offer a more holistic view of care, considering individuals' goals, needs, and preferences as well as their overall well-being.

Ms. Hunt and Dr. Anderson's presentation also described the guiding framework and the highest priority topic and sub-topics the task force used in developing their family. Additionally, the task force noted that patient surveys, like Consumer Assessment of Healthcare Providers and Systems (CAHPS) survey, can serve as a mechanism for better understanding patient experience and act as a starting point for assessing quality.

Coordinating Committee member discussion highlighted the importance of a common data platform for data collection, encouraging patients to take a more active role in their care, and health literacy.

#### **MAP Families of Measures – Cross-Cutting Themes**

Session was led by Rob Saunders.

Dr. Saunders presented the cross-cutting themes that emerged from all three families of measures:

- Measures need to be aligned with important concept areas, such as the aims of the National Quality Strategy, which will promote broad improvement across the health system.
- Families of measures provide a tool that stakeholders can use to identify the most relevant measures for their particular measurement needs, promote alignment by highlighting the most important measurement categories, and can be applied by other measurement initiatives.

- There are not sufficient measures assessing several priority areas, which highlight the need for further development of measures that matter in affordability, person- and family-centered care, and population health.

Coordinating Committee member discussion focused on filling measurement gaps and addressing implementation issues.

### **MAP Continuous Improvement – Updates**

Session was led by Dr. Isham, with additional presentations by Rob Saunders and Sarah Lash, Senior Director, NQF.

Dr. Saunders and Ms. Lash presented current efforts to improve the MAP pre-rulemaking process. A process-improvement activity known as “Kaizen,” was used to:

- Identify and remove the causes of unneeded variation
- Identify and remove sources of waste within the MAP pre-rulemaking process
- Focus on outputs that are critical to MAP’s success

Preliminary outputs from the activity included enhancing new MAP member orientation, modifying materials to maximize decision making, adapting the public/member comment period, and modifying deliverables dates to ensure broad usability.

Coordinating Committee members provided additional suggestions including aligning the NQF endorsement and MAP measure selection processes and collaborating with measure developers.

### **Opportunity for Public Comment**

There were no questions or comments from the public.

### **Summary and Next Steps**

Session was led by Dr. Isham, who concluded the meeting with a brief discussion of next steps.

The immediate upcoming MAP pre-rulemaking meeting is a July 18<sup>th</sup> web meeting to review the 2014 MAP Dual Eligible Beneficiaries report and the MAP Medicaid Task Force’s input on the Medicaid Adult Core Set.

## MAP COORDINATING COMMITTEE MEMBERS IN ATTENDANCE

MAP Coordinating Committee Member
George Isham, Co-Chair
Girma Alemu, Health Resources and Services Administration (HRSA) ( <i>Substitute</i> )
Rhonda Anderson, American Hospital Association
Richard Antonelli, Subject Matter Expert: Child Health
Bobbie Berkowitz, Subject Matter Expert: Population Health
Steven Brotman, AdvaMed
Jayne Chambers, Federation of American Hospitals ( <i>substitute</i> )
Marshall Chin, Subject Matter Expert: Disparities
Shari Davidson, National Business Group on Health
Christopher M. Dezii, Pharmaceutical Research and Manufacturers of America (PhRMA)
Joyce Dubow, AARP
Foster Gesten, National Association of Medicaid Directors
Tom Granatir, American Board of Medical Specialties ( <i>Substitute</i> )
Aparna Higgins, America's Health Insurance Plans
Gail Hunt, National Alliance for Caregiving
William Kramer, Pacific Business Group on Health
Kevin Larsen, Office of the National Coordinator for HIT (ONC)
Edward Lennard, Office of Personnel Management/FEHBP (OPM)
Sam Lin, American Medical Group Association
Harold Pincus, Subject Matter Expert: Mental Health
Koryn Rubin, American Medical Association ( <i>substitute</i> )
Marissa Schlaifer, Academy of Managed Care Pharmacy
Alison Shippy, National Partnership for Women and Families
Marla Weston, American Nurses Association
Nancy Wilson, Agency for Healthcare Research and Quality (AHRQ)