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Rural Health Measure Prioritization Web Meeting

Day 1

May 27, 2020

Welcome, Introductions, and Meeting Objectives

National Quality Forum Welcome



Shantanu Agrawal, MD, MPhil
President and Chief Executive Officer, NQF



Agenda

- Introductions and Meeting Purpose
- Current Landscape of Rural-Relevant Measures
- Discuss Selection Criteria – Recommendations from Webinar 2 and Pre-Work
- Narrowing the List of Potential Measures: Environmental Scan Findings
- Start Measure Discussion and Voting
- Next Steps
- Adjourn

Project Team



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Andre Weldy,
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Workgroup Co-Chairs



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Community Health
Center

Committee Roster

- **Ira Moscovice, PhD, Co-Chair**
- **Aaron Garman, MD, Co-Chair**
- Kimberly Rask, MD, PhD, FACP
- David Schmitz, MD, FAAFP
- Daniel Coll, MHS, PA-C, DFAAPA
- Margaret Greenwood-Ericksen, MD
- Stephen Tahta, MD
- Erika Thomas
- Leesa Bain
- Karen Murphy, PhD, RN
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- Cameron Deml
- Keith Mueller, PhD
- Tim Size, MBA
- Heather Brown-Palsgrove
- Michael Fadden, MD
- John Gale, MS
- Curtis Lowery, MD
- Melinda Murphy, RN, MS
- Jessica Schumacher, PhD
- Ana Verzone, MS, APRN, FNP, CNM
- Holly Wolff, MHA
- Craig Caplan (non-voting)
- Deborah Winbush (non-voting)
- Bruce Finke (non-voting)
- Emily Moore (non-voting)



Disclosures

- Briefly state your:
 - ▣ Name, title, and organization
 - ▣ If indicated by NQF staff, any relevant disclosures

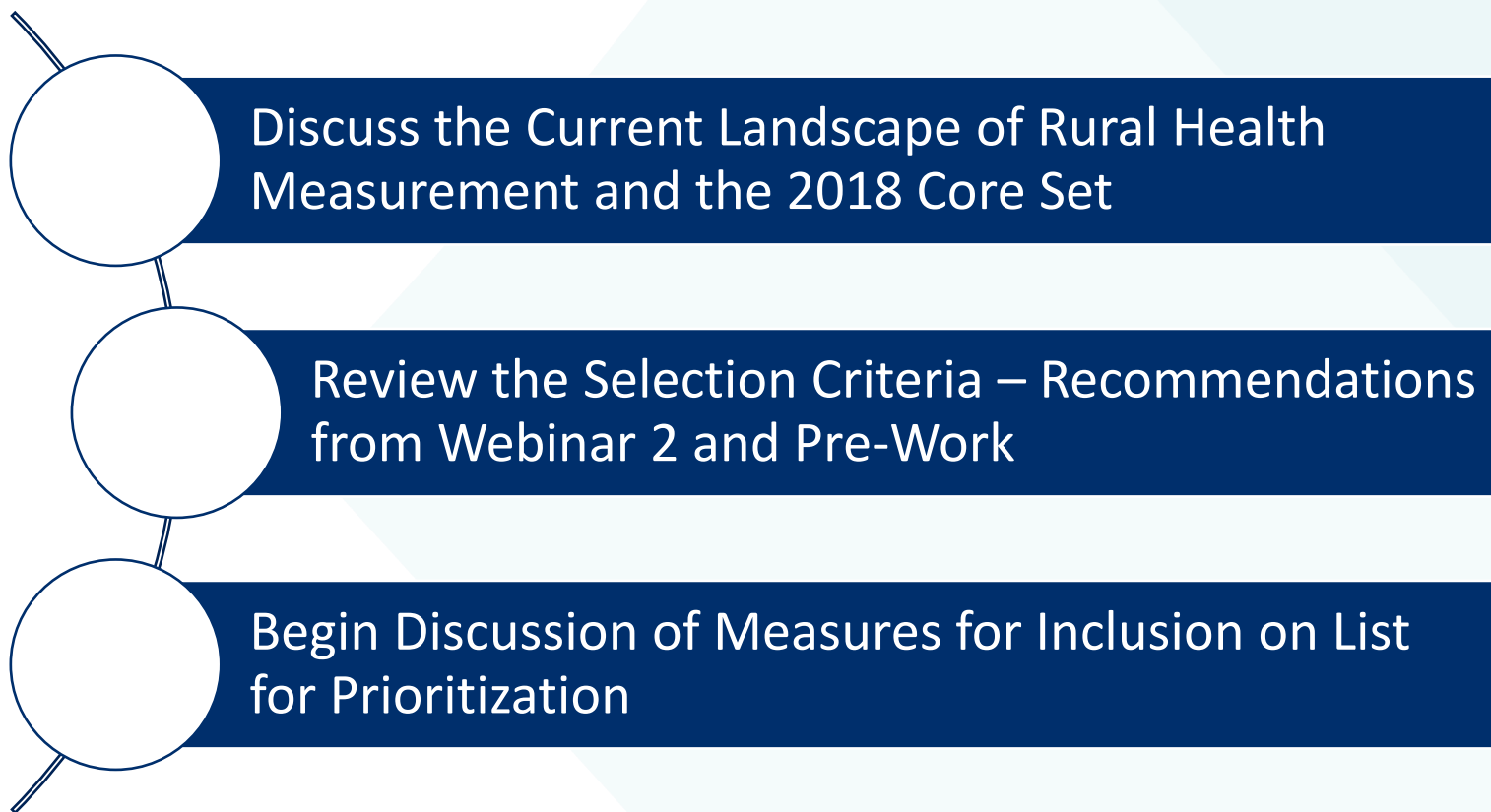
Example: I'm Joan Smith, Chief Medical Officer of ABC Healthcare. I serve on the Board of XYZ Organization and am a Principal Investigator for a research project related to rural health and measurement

Measure Prioritization Meetings

Goal: Prioritize rural-relevant measures susceptible to low case-volume challenges. In the future, these measures will be used for testing the Rural Health Technical Expert Panel's (TEP) recommended statistical approaches.

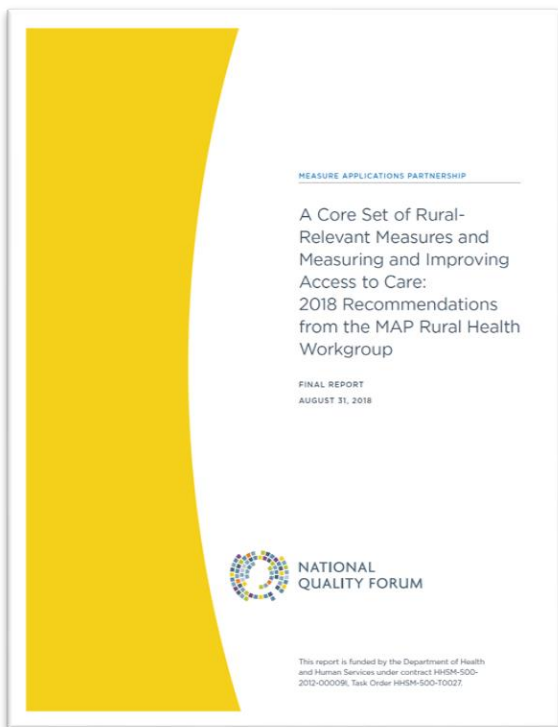
Outcome/Deliverable: Prioritized list of measures including detailed specifications and a summary document that includes the selection criteria, rationale for the selection of each measure, and gaps and future recommendations for rural health measurement.

Meeting Objectives



Current Landscape of Rural- Relevant Health Measures

High-Priority Issues For Rural Populations



A Core Set of Rural-Relevant Measures and Measuring and Improving Access to Care: 2018 Recommendations from the MAP Rural Health Workgroup. Final Report. Released August 2018.

- “The Workgroup supported... inclusion of measures that address specific conditions or services that are particularly relevant to rural populations.” (2018)
 - Mental health
 - Substance abuse
 - Medication reconciliation
 - Diabetes
 - Hypertension
 - Chronic obstructive pulmonary disease (COPD)
 - Hospital readmissions
 - Perinatal conditions and services
 - Pediatric conditions and services

2018 Rural-Relevant Core Set – Hospital Setting (9 measures)

- 0138 National Healthcare Safety Network (NHSN) Catheter-associated Urinary Tract Infection (CAUTI) Outcome Measure
- 0166 HCAHPS
- 0202 Falls with injury
- 0291 Emergency Transfer Communication Measure
- 0371 Venous Thromboembolism Prophylaxis
- 0471 PC-02 Cesarean Birth
- 1661 SUB-1 Alcohol Use Screening
- 1717 National Healthcare Safety Network (NHSN) Facility-wide Inpatient Hospital-onset *Clostridium difficile* Infection (CDI) Outcome Measure
- 1789 Hospital-Wide All-Cause Unplanned Readmission Measure (HWR)

2018 Rural-Relevant Core Set – Ambulatory Care Setting (11 measures)

- 0005 CAHPS Clinician & Group Surveys (CG-CAHPS)-Adult, Child
- 0028 Preventive Care & Screening: Tobacco Use: Screening & Cessation Intervention
- 0041 Preventive Care and Screening: Influenza Immunization
- 0059 Comprehensive Diabetes Care: Hemoglobin A1c (HbA1c) Poor Control (>9.0%)
- 0097 Medication Reconciliation Post-Discharge
- 0326 Advance Care Plan
- 0418 Preventive Care and Screening: Screening for Clinical Depression and Follow-Up Plan
- 0421 Preventive Care and Screening: Body Mass Index (BMI) Screening and Follow-Up
- 0711 Depression Remission at Six Months
- 0729 Optimal Diabetes Care
- 2152 Preventive Care and Screening: Unhealthy Alcohol Use: Screening & Brief Counseling

2018 Rural-Relevant, Ambulatory Care Setting Measures Endorsed at Health Plan and/or Integrated Delivery System Level

- 0018 Controlling High Blood Pressure
- 0024 Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents (WCC)
- 0032 Cervical Cancer Screening (CCS)
- 0034 Colorectal Cancer Screening (COL)
- 0038 Childhood Immunization Status (CIS)
- 2372 Breast Cancer Screening
- 2903 Contraceptive Care – Most & Moderately Effective Methods



2018 Core Set Measures are Resistant to Low Case-Volume

- Our goal is to select measures susceptible to low case-volume (LCV) challenges.
- Do you agree the measures we prioritize should cover conditions/topics not already being adequately measured in rural settings? (e.g., they should compliment the existing core set measures)

Rural Health Core Set Measures with Potential LCV Challenges

In 2018, public commenters noted challenges with six rural core set measures due to case volume. These measures are included in the list for discussion.

- 0138 National Healthcare Safety Network (NHSN) Catheter-associated Urinary Tract Infection (CAUTI) Outcome Measure
- 0166 HCAHPS [Note: includes 11 performance measures under this NQF number]
- 0371 Venous Thromboembolism Prophylaxis
- 0471 PC-02 Cesarean Birth
- 1717 National Healthcare Safety Network (NHSN) Facility-wide Inpatient Hospital-onset *Clostridium difficile* Infection (CDI) Outcome Measure
- 1789 Hospital-Wide All-Cause Unplanned Readmission Measure (HWR)

Selection Criteria – Recommendations from Webinar 2 and Pre-Work



List of High-Priority Issues from 2018 Work

The following topics continued to be priorities for this project:

- Transitions of Care/Care Coordination
- Mental health
- Substance abuse
- Medication reconciliation
- Diabetes
- Hypertension
- Chronic obstructive pulmonary disease (COPD)
- Readmissions
- Perinatal
- Pediatrics

Expanded List of High-Priority Issues

The workgroup then considered the following topic areas and voted on their priority.

- Advance directives/end-of-life
- Access to care
- Vaccinations
- Cancer screening
- Pneumonia
- Heart failure
- Acute myocardial infarction
- Stroke
- Venous thromboembolism
- Emergency department use
- Surgical care
- Asthma
- Obesity
- Infection Prevention*
- Health System Preparedness*
- Patient Resilience*
- Health System Resilience*

*Identified as key issues; however, measures on this topic were not identified in the environmental 20 scan. They will be noted and discussed as gap areas.

Pre-Work: Ranking of High-Priority Issues

- 11 Workgroup members submitted their rankings for the expanded list of prevalent, costly, and high-priority issues for rural health residents and providers.
- As rated by the Workgroup members, issues that received top votes by at least 3 workgroup members were as follows:

Most important issues



Less important issues

Access to Care

Vaccinations

Cancer Screening

Stroke

Healthcare-Associated Infections

Emergency Department Use



Pre-Work: Ranking of High-Priority Issues

- Workgroup members also identified these additional issues as possible additions to the list:

End of life / advance directives

Pneumonia

Heart failure

Surgical care

Heart attack

Asthma

Obesity



Measure Attributes Suggested by the Workgroup

- Outcome measures, including patient-reported outcome-based performance measures (PRO-PMs)
- Measures with a large performance gap and/or performance variation due to disparities
- Appropriate attribution and level of analysis, including who can provide care/services
- Use across multiple programs
- Feasible to implement and report on, reduce burden as much as possible

Pre-Work: Ranking of Measure Attributes

- 11 Workgroup members submitted their rankings for the expanded list of measure attributes that should be considered when selecting measures
- As rated by the Workgroup members, attributes were weighed in the following order:

Most important attributes



Less important attributes

NQF Endorsement

Outcome Measure/PRO-PM

Cross-Cutting

Use in Multiple Programs

Process Used for Measure Scoring

- Applied quantitative approach and subjective decision making to ensure the list contains an adequate mix of measure attributes and addresses high priority rural-relevant topics.
- Used the workgroup's feedback on the importance of four measure attributes (NQF endorsement, outcome or PRO-PM measure type, cross-cutting, and use in multiple programs) to assign a "score" for each measure.
- Filtered measures by rural-relevant topics and selected several relatively high-scoring measures within each topic.
- Added six measures that are in the current Rural Core Set but had public comments suggesting that they were challenging to report due to low case-volume.



Additional Attributes to be Discussed

Other characteristics of measures require a more qualitative discussion and review by the Workgroup, which will be discussed during measure review.

Hospital/clinician
control over
measure

Extent of low case-
volume challenge

Significance to
rural population
and impact on
patient care

Opportunity for
performance
improvement

Feasibility/
measurement
burden



Considerations for the Measure List in its Entirety

Ensure an adequate mix of:

- Condition and non-condition specific measures
- Outcome and process measures
- Measure with risk adjustment and with no risk adjustment
- Implementation in a variety of federal programs
- Variety of care settings and reporting levels represented



Discussion

- Are there additional comments you would like to share with the Workgroup to aid in selecting measures?

Break

Narrowing the List of Potential Measures

Environmental Scan Findings

- Started with 252 measures that relate to rural-relevant conditions/topics and are used in federal programs or select CMMI models.
- NQF applied the criteria developed by the Workgroup to these measures to narrow list to 37 for discussion
- 5 measures were recommended by the Workgroup for removal:
 - ▣ 4 coronary artery bypass graft (CABG) surgery and readmissions measures (not applicable to small rural hospitals)
 - ▣ 1 prostate cancer overuse of bone scan for staging low risk prostate cancer patients (more concern about access/underuse than overuse)

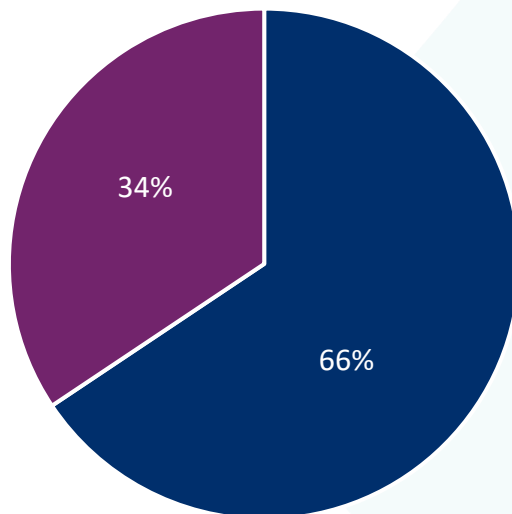
Environmental Scan Findings (Cont.)

- Resulting 32 measures address the following high-priority topics:
Note that some measures address multiple topics

Topic	# of measures	Topic	# of measures
Access to care	1	Pediatrics	2
Behavioral health	4	Perinatal	2
COPD	1	Readmissions	10
Diabetes	1	Stroke	1
Healthcare-associated infections	4	Substance abuse	1
Medication reconciliation	1	Transitions of care	3
Patient experience	2	VTE	1

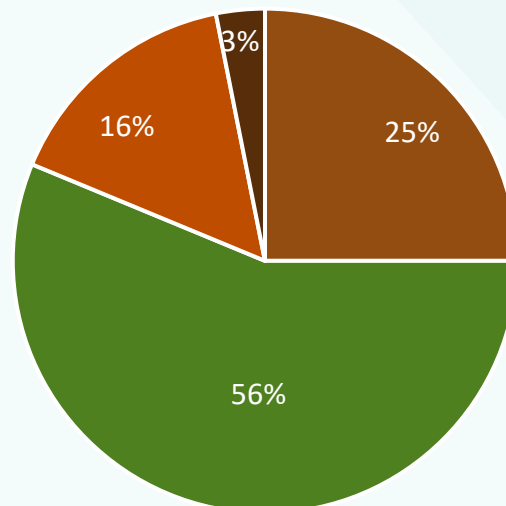
Narrowed List Characteristics

Measure Type



■ Outcome/Intermediate Outcome/PRO-PM
■ Process

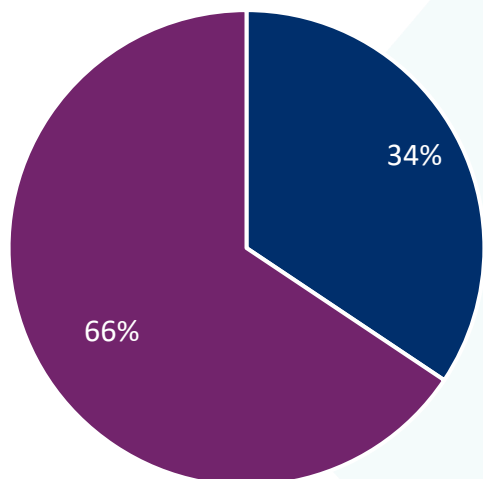
Level of Analysis



■ Clinician ■ Facility ■ Health Plan ■ Population

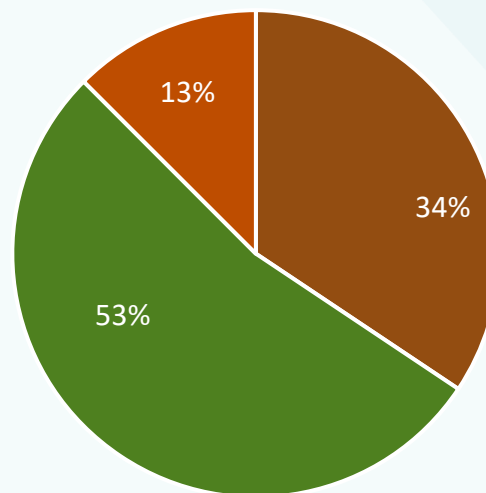
Narrowed List Characteristics (Cont.)

Cross cutting



■ Cross cutting ■ Condition-specific

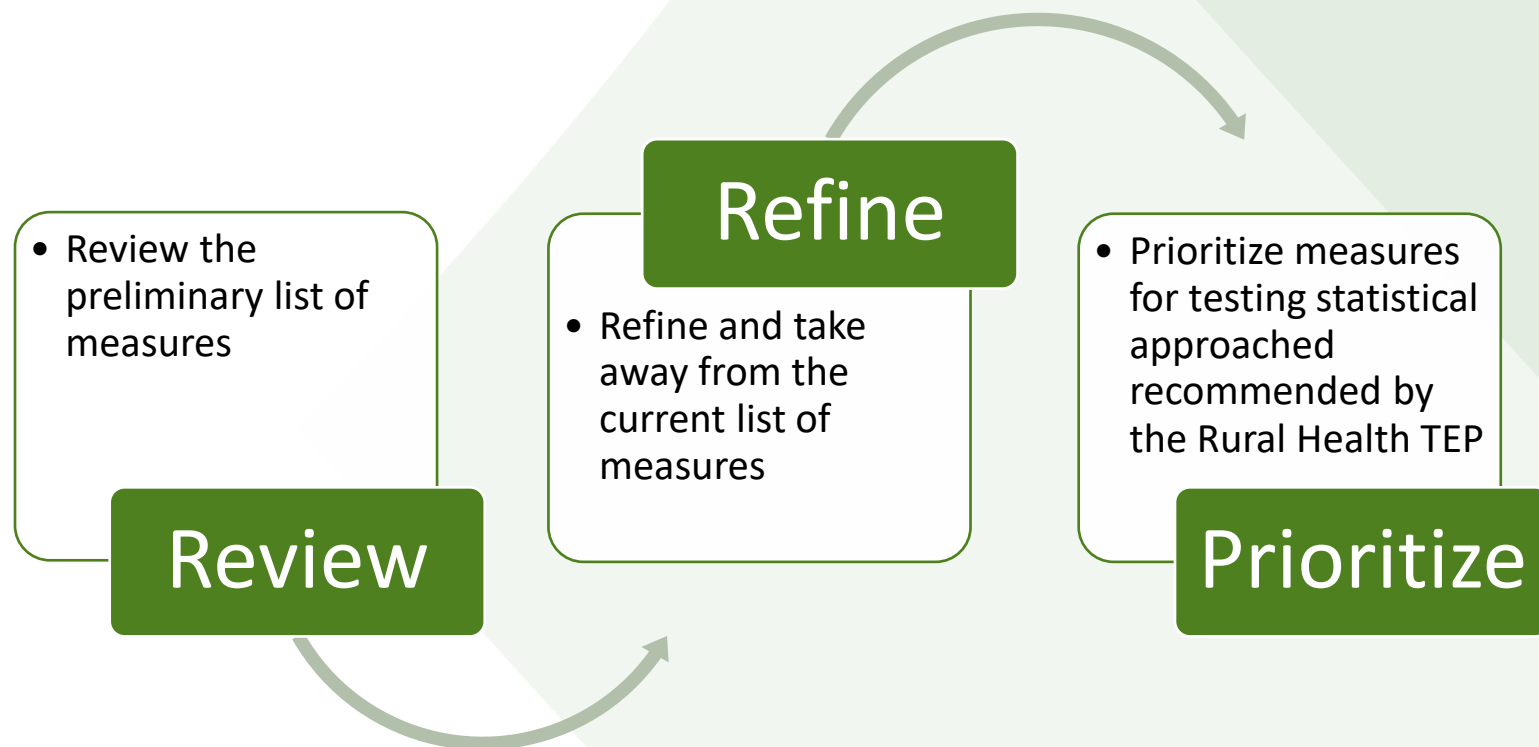
Care Setting



■ Hospital ■ Ambulatory ■ Other

Measure Discussion and Voting

Workgroup Discussion Overview



For Each Measure the Workgroup Should Consider:

- Is the measure problematic due to low-case volume (this is a mandatory requirement) and why?
- Is the measure pertinent to the rural population and does it have a significant impact on patient care?
- Does the hospital/clinician have significant control over measure performance?
- What is opportunity for performance improvement?
- Is the measure feasible to report for rural providers?



Process for Prioritization

- The Workgroup will discuss 32 measures in detail and come to consensus on a reasonable number to be recommended for future statistical testing.
- Measures are grouped by topic area.
- Following discussion of each topic area, Workgroup members will vote “yes” or “no” for each measure to indicate if it should be added to the priority list.
 - ▣ > 60% yes = include on priority list
 - ▣ 40-60% yes = maybe; re-discuss as needed after all discussions are completed
 - ▣ < 40% yes = remove from priority list



Order for Discussion

- Lead discussants for each topic area will share a 3-5 minute summary introducing the measures
- Lead discussant should briefly review measure description, specification highlights, 1-2 sentences on each of the five measure considerations, and if in their opinion the measure should be added to the final list
- After discussants have shared feedback, the entire Workgroup will share their comments on the measures
- After the Workgroup has discussed all measures within a topic, we will pause for Workgroup members to vote on the measures

Patient Experience

NQF#	Measure Title	Measure Type	Data Source	Level of Analysis	Risk-Adjust.	Program Use
0005	CAHPS Clinician/Group Survey	Patient Engagement/Experience	Instrument-Based Data	Clinicians: Group/Practice	Yes	<ul style="list-style-type: none"> • MIPS; • Physician Compare; • Next Generation ACO Model • Medicare Shared Savings Program
0166	HCAHPS [Note: includes 11 performance measures under this NQF number]	Outcome	Instrument-Based Data	Facility	Yes	<ul style="list-style-type: none"> • Hospital Compare • Hospital Inpatient Quality Reporting • Hospital Value-Based Purchasing • Prospective Payment System-Exempt Cancer Hospital Quality Reporting

Access to Care

NQF#	Measure Title	Measure Type	Data Source	Level of Analysis	Risk-Adjust.	Program Use
2079	HIV Medical Visit Frequency	Process	Paper Medical Records, Registry	Facility	No	<ul style="list-style-type: none"> MIPS

Break

Behavioral Health

NQF#	Measure Title	Measure Type	Data Source	Level of Analysis	Risk-Adjust.	Program Use
0108	Follow-Up Care for Children Prescribed Attention-Deficit/Hyperactivity Disorder (ADHD) Medication (ADD-CH)*	Process	Claims, Electronic Health Data (eCQM available)	Health Plan	No	<ul style="list-style-type: none"> • MIPS; • Medicaid
0576	Follow-Up After Hospitalization for Mental Illness	Process	Claims, Registry	Health Plan	No	<ul style="list-style-type: none"> • MIPS; • Hospital Compare; • Inpatient Psychiatric Facility Quality Reporting; • Marketplace Quality Rating System (QRS); • Medicaid

*Also related to Pediatrics.

Behavioral Health (Cont.)

NQF#	Measure Title	Measure Type	Data Source	Level of Analysis	Risk-Adjust.	Program Use
0710	Depression Remission at Twelve Months	Outcome	Paper Medical Records, Electronic Health Records, Registry (eCQM available)	Clinicians: Group/Practice	Yes	<ul style="list-style-type: none"> • MIPS; • Medicare Shared Savings Program; • Next Generation ACO Model
1879	Adherence to Antipsychotic Medications For Individuals with Schizophrenia (SAA-AD)	Intermediate Outcome	Claims, Registry	Clinicians: Group/Practice	No	<ul style="list-style-type: none"> • MIPS; • Medicaid

COPD

NQF#	Measure Title	Measure Type	Data Source	Level of Analysis	Risk-Adjust.	Program Use
0275	Chronic Obstructive Pulmonary Disease (COPD) or Asthma in Older Adults Admission Rate (PQI05-AD)	Outcome	Claims	Population: Community, County or City	Yes	<ul style="list-style-type: none"> Medicaid Next Generation ACO Model

Diabetes

NQF#	Measure Title	Measure Type	Data Source	Level of Analysis	Risk-Adjust.	Program Use
0055	Diabetes: Eye Exam	Process	Claims, Electronic Health Data, Paper Medical Records	Health Plan	No	<ul style="list-style-type: none"> • MIPS; • Marketplace Quality Rating System (QRS); • Next Generation ACO Model • Medicare Part C Star Rating

Healthcare-Associated Infections

NQF #	Measure Title	Measure Type	Data Source	Level of Analysis	Risk-Adjust.	Program Use
0138	National Healthcare Safety Network (NHSN) Catheter-Associated Urinary Tract Infection Outcome Measure	Outcome	Electronic Health Data, Electronic Health Records, Paper Medical Records, Other	Facility	Yes	<ul style="list-style-type: none"> • Hospital Acquired Condition Reduction Program; • Hospital Compare; • Hospital Inpatient Quality Reporting; • Long-Term Care Hospital Compare; • Long-Term Care Hospital Quality Reporting
0139	National Healthcare Safety Network (NHSN) Central Line Associated Bloodstream Infection Outcome Measure	Outcome	Electronic Health Data, Electronic Health Records, Paper Medical Records, Other	Facility	Yes	<ul style="list-style-type: none"> • Hospital Acquired Condition Reduction Program; • Hospital Compare; • Hospital Inpatient Quality Reporting; • Long-Term Care Hospital Compare; • Long-Term Care Hospital Quality Reporting

Healthcare-Associated Infections (Cont.)

NQF#	Measure Title	Measure Type	Data Source	Level of Analysis	Risk-Adjust.	Program Use
1717	National Healthcare Safety Network (NHSN) Facility-wide Inpatient Hospital-onset <i>Clostridium difficile</i> Infection (CDI) Outcome Measure	Outcome	Electronic Health Data, Electronic Health Records, Paper Medical Records, Other	Facility	Yes	<ul style="list-style-type: none"> • Hospital Acquired Condition Reduction Program; • Hospital Compare; • Hospital Inpatient Quality Reporting; • Hospital Value-Based Purchasing; • Inpatient Rehabilitation Facility Compare • Inpatient Rehabilitation Facility Quality Reporting • Long-Term Care Hospital Compare • Long-Term Care Hospital Quality Reporting • Prospective Payment System-Exempt Cancer Hospital Quality Reporting
2726	Prevention of Central Venous Catheter (CVC) - Related Bloodstream Infections	Process	Registry	Facility	No	<ul style="list-style-type: none"> • MIPS



Medication Reconciliation

NQF#	Measure Title	Measure Type	Data Source	Level of Analysis	Risk-Adjust.	Program Use
0419	Documentation of Current Medications in the Medical Record	Process	Electronic Health Records, Claims, Registry (eCQM available)	Clinicians: Group/ Practice	No	<ul style="list-style-type: none">• MIPS;• Next Generation ACO Model



Pediatrics

NQF#	Measure Title	Measure Type	Data Source	Level of Analysis	Risk-Adjust.	Program Use
0069	Appropriate Treatment for Upper Respiratory Infection (URI)	Process	Claims, Electronic Health Data, Electronic Health Records (eCQM available)	Health Plan	No	<ul style="list-style-type: none">• MIPS;• Marketplace Quality Rating System (QRS)

Public Comment

Next Steps

Next Steps

- The second portion of this web meeting will be held on Friday, May 29, 2020 at 12:00 PM EST
- During this meeting we will:
 - ▣ Continue to prioritize measures for testing the statistical approaches recommended by the Rural Health Technical Expert Panel
 - ▣ Discuss challenges and potential solutions for low-volume rural providers in reporting the prioritized measures
 - ▣ Discuss gaps and additional considerations for the future of rural health measurement



Contact Information

- Email: MapRural@qualityforum.org
- NQF phone: 202-783-1300
- Project page:
http://www.qualityforum.org/MAP_Rural_Health_Workgroup.aspx

THANK YOU.

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MAP Rural Health Measure Prioritization Web Meeting

Day 2

May 29, 2020

Agenda

- Welcome and Roll Call
- Day 1 Recap
- Continue Measure Discussion and Voting
- Review Final Prioritized List of Measures
- Challenges and Potential Solutions in Reporting the Prioritized Measures
- Addressing Gaps: Recommendations to Advance Rural Health Measurement
- Next Steps
- Adjourn

Welcome and Roll Call



Project Team Welcome



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Director



Andre Weldy,
Director



Maha Taylor,
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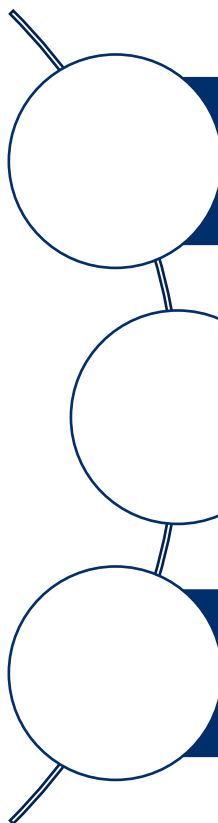


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Meeting Objectives

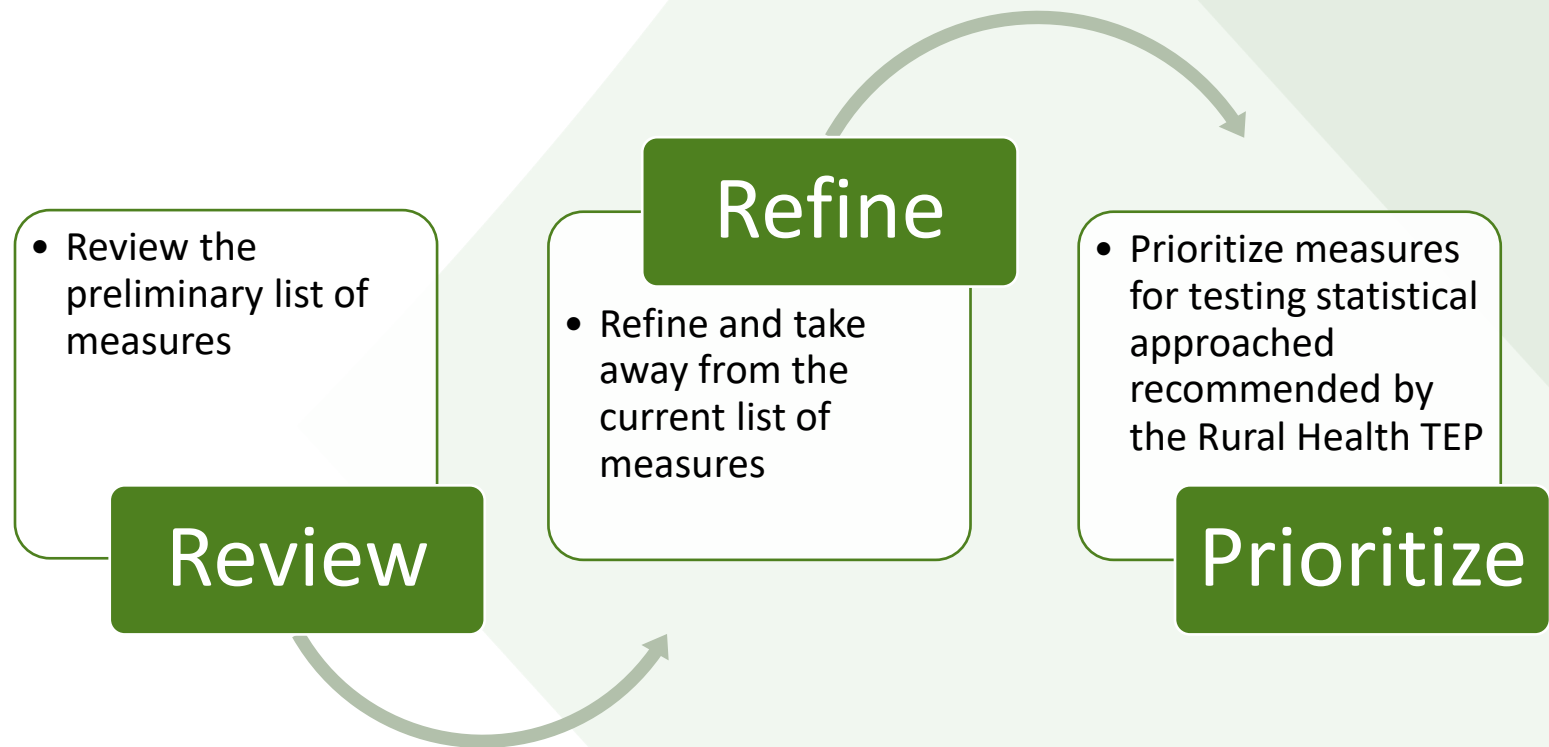
- 
- Continue prioritizing rural-relevant measures for testing the statistical approaches recommended by the Rural Health TEP
 - Discuss challenges and potential solutions for low-volume rural providers in reporting the prioritized measures
 - Address gaps and additional considerations for the future of rural health measurement

Day 1 Recap

Continue Measure Discussion and Voting



Workgroup Discussion Overview



For Each Measure the Workgroup Should Consider:

- Is the measure problematic due to low-case volume (this is a mandatory requirement) and why?
- Is the measure pertinent to the rural population and does it have a significant impact on patient care?
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Order for Discussion

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Perinatal

NQF#	Measure Title	Measure Type	Data Source	Level of Analysis	Risk-Adjust.	Program Use
0471	PC-02 Cesarean Birth	Outcome	Electronic Health Records, Paper Medical Records, Other (eCQM available)	Facility	Yes	• Medicaid
N/A (similar to 0469)	Maternity Care: Elective Delivery or Early Induction Without Medical Indication at < 39 Weeks (Overuse)	Outcome	Electronic Health Records, Paper Medical Records, Other (eCQM available)	Not Specified	No	• MIPS

Readmissions

NQF#	Measure Title	Measure Type	Data Source	Level of Analysis	Risk-Adjust.	Program Use
0173	Emergency Department Use without Hospitalization During the First 60 days of Home Health (Claims-based)	Outcome	Claims	Facility	Yes	<ul style="list-style-type: none"> • Home Health Compare; • Home Health Quality Reporting; • Home Health Value Based Purchasing
1789	Risk-Standardized, All Condition Readmission	Outcome	Claims (eCQM available)	Accountable Care Organization	Yes	<ul style="list-style-type: none"> • Medicare Shared Savings Program • MIPS • Hospital Inpatient Quality Reporting
2510	Skilled Nursing Facility 30-Day All-Cause Readmission Measure (SNFRM)	Outcome	Claims, Enrollment Data	Facility	Yes	<ul style="list-style-type: none"> • Skilled Nursing Facility Value Based Purchasing



Readmissions (Cont.)

NQF #	Measure Title	Measure Type	Data Source	Level of Analysis	Risk-Adjust.	Program Use
3357	Facility-Level 7-Day Hospital Visits After General Surgery Procedures Performed at Ambulatory Surgical Centers	Outcome	Claims, Enrollment Data	Facility	Yes	<ul style="list-style-type: none"> Ambulatory Surgical Center Quality Reporting
3366	Hospital Visits After Urology Ambulatory Surgical Center Procedures	Outcome	Claims, Enrollment Data	Facility	Yes	<ul style="list-style-type: none"> Ambulatory Surgical Center Quality Reporting
3470	Hospital Visits After Orthopedic Ambulatory Surgical Center Procedures	Outcome	Claims	Facility	Yes	<ul style="list-style-type: none"> Ambulatory Surgical Center Quality Reporting
3490	Admissions and Emergency Department (ED) Visits for Patients Receiving Outpatient Chemotherapy	Outcome	Claims, Enrollment Data	Facility	Yes	<ul style="list-style-type: none"> Prospective Payment System-Exempt Cancer Hospital Quality Reporting Hospital Outpatient Quality Reporting

Break



Stroke

NQF#	Measure Title	Measure Type	Data Source	Level of Analysis	Risk-Adjust.	Program Use
1525	Atrial Fibrillation and Atrial Flutter: Chronic Anticoagulation Therapy	Process	Registry, Claims (eCQM available)	Clinician: Individual	No	<ul style="list-style-type: none">MIPS



Substance Abuse

NQF#	Measure Title	Measure Type	Data Source	Level of Analysis	Risk-Adjust.	Program Use
0004	Initiation and Engagement of Alcohol and Other Drug Dependence Treatment	Process	Claims (eCQM available)	Health Plan	No	<ul style="list-style-type: none">• Marketplace Quality Rating System (QRS);• MIPS• Medicaid

Transitions of Care/Care Coordination

NQF#	Measure Title	Measure Type	Data Source	Level of Analysis	Risk-Adjust.	Program Use
0089^	Diabetic Retinopathy: Communication with the Physician Managing Ongoing Diabetes Care	Process	Electronic Health Records, Registry (eCQM available)	Clinicians: Group/ Practice	No	<ul style="list-style-type: none"> MIPS
0563	Primary Open-Angle Glaucoma (POAG): Reduction of Intraocular Pressure (IOP) by 15% OR Documentation of a Plan of Care	Outcome	Claims, Electronic Health Records, Paper Medical Records, Registry	Clinicians: Group/ Practice	No	<ul style="list-style-type: none"> MIPS
1551*	Hospital-level 30 day, all-cause, risk-standardized readmission rate (RSRR) following elective primary total hip arthroplasty (THA) and/or total knee arthroplasty (TKA)	Outcome	Claims	Facility	Yes	<ul style="list-style-type: none"> Hospital Compare Hospital Readmission Reduction Program

*Also related to readmissions

^Also related to Diabetes



Transitions of Care/Care Coordination (Cont.)

NQF#	Measure Title	Measure Type	Data Source	Level of Analysis	Risk-Adjust.	Program Use
2539*+	Facility 7-Day Risk-Standardized Hospital Visit Rate after Outpatient Colonoscopy (OP32)	Outcome	Claims, Enrollment Data	Facility	Yes	<ul style="list-style-type: none">• Ambulatory Surgical Center Quality Reporting• Hospital Compare• Hospital Outpatient Quality Reporting
2881*	Excess Days in Acute Care after Hospitalization for Acute Myocardial Infarction	Outcome	Claims	Facility	Yes	<ul style="list-style-type: none">• Hospital Compare• Hospital Inpatient Quality Reporting

*Also related to readmissions +Also related to ED use



Venous Thromboembolism (VTE)

NQF#	Measure Title	Measure Type	Data Source	Level of Analysis	Risk-Adjust.	Program Use
0371*	Venous Thromboembolism Prophylaxis	Process	eCQM	Facility	No	<ul style="list-style-type: none">• Medicare and Medicaid Promoting Interoperability Program for Eligible Hospitals and Critical Access Hospitals• Hospital Inpatient Quality Reporting

*No longer endorsed.

Break

Review Final Prioritized List of Measures



Prioritization Results

- Display measures that made it to the final list and those in the “maybe” category.
- Discuss final results and additional rationale or notes to include for the recommended measures.
- Based on voting results, we will determine:
 - ▣ Is a follow-up activity necessary to decide on “maybe” measures?
 - ▣ Is a follow-up activity necessary to prioritize measures within the final list?

Challenges and Potential Solutions in Reporting the Prioritized Measures

Discussion

- Summarize reporting challenges identified during measure discussions
- Are there additional challenges with the prioritized measures that warrant discussion?
- What are the potential solutions to address the identified challenges?
- What is the feasibility of reporting eCQMs for most rural providers?

Discussion (Cont.)

- What are the potential unintended consequences if statistical methods to account for low case-volume are applied to these measures?
- How can unintended consequences be considered during testing?
- Do you have general suggestions for CMS in testing statistical approaches on the prioritized measures?

Addressing Gaps: Recommendations to Advance Rural Health Measurement

High-Priority Topics and Gaps

- Prioritized measurement gaps in 2018:
 1. Access to care (including timeliness of care)
 2. Transitions in care
 3. Cost
 4. Substance use measures, particularly those focused on alcohol and opioids
 5. Outcome measures

- Gap considerations from current work:
 - Few measures were identified in the measure scan related to vaccinations, cancer screening, access to care, pediatrics, and emergency department use.
 - Infection prevention, health system preparedness, patient resilience, and health system resilience identified as measure gaps during previous web meeting.



Discussion

- Are there topics in federal programs that are over-measured and that do not adequately or accurately reflect the care provided by rural providers?
- What areas (condition-specific or cross-cutting) are in the greatest need of quality measures to assess the quality of rural health care?
- How can the measurement community make progress towards filling gaps for rural health measurement?
- Are there other measures not used in programs considered as part of the scope of this work that would be candidates for testing statistical approaches to account for low case-volume challenges?

Public Comment

Next Steps



Next Steps

- Create and post meeting summary
- Use discussions heard today to inform Recommendations Report
- Post Report for public comment
- Schedule and host a post comment call with the Rural Health Workgroup
- Post Final Report



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THANK YOU.

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