

HHS-Sponsored Measure Registry Needs Assessment

Project Findings

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What We'll Cover

- Overview of Project
- Review of Major Findings
- Opportunities and Next Steps
- Public Commenting Period
- Q&A Throughout

Project Impetus

- Measurement and reporting efforts have grown tremendously in recent years
- Many stakeholders struggle with maintaining and/or accessing measure information
- Lack of standardized measure information and approaches makes identifying and tracking measures difficult

Measure Registry Needs Assessment Project

- HHS and others have expressed interest in being able to consistently identify any type of measure and its versions over time, for a variety of purposes
 - Could a registry of measures fulfill this interest?
- HHS contracted with NQF to assess:
 - Measure information needs across the measure lifecycle
 - Systems or approaches currently in use
 - Potential value in a standardized approach

HHS' Plans with Project Findings

- HHS plans to use the input gathered through this project to:
 - Inform near-term decisions on where and how to invest in managing measure information
 - Determine the role for the federal government to help meet measure information needs:
 - » Through coordinated and synthesized next steps; and
 - » Within the context of aligned public- and private-sector efforts

Major Project Activities and Corresponding Reports

Activity	Brief Description	Date(s)	Corresponding Report(s)
Open Call	An open call for information about current systems and approaches to measure information management.	May 16 – June 6, 2012	Summary of Responses
Stakeholder Discussions	Targeted discussions with public- and private-sector organizations involved in measure development and implementation.	June 11 – July 11, 2012	Summary of Stakeholder Discussions
Webinar: Current Systems	A public webinar to share information about selected measure information management systems.	July 26, 2012	Webinar Summary Webinar Recording Slide Presentations
Workshop	A multi-stakeholder workshop to explore measure information needs, requirements, and potential approaches to measure information management.	Sept. 5, 2012	Workshop Summary: Part I , Part II Meeting Recordings: Morning , Afternoon Slide Presentations
Webinar: Major Findings	A public webinar to share major findings from the above information-gathering activities.	Oct. 26, 2012	Note: Webinar Recording and Summary to be posted online by Nov. 19, 2012 at www.qualityforum.org/RNA
Public Comment Period	A 4-week period for members of the public to review and provide feedback on the Draft Report summarizing major findings.	Oct. 26 – Nov. 28, 2012	Draft Report to HHS on Major Findings
Final Report	The Final Report to HHS on the major findings on the project, including edits based on public feedback.	Late Dec. 2012	Note: Final report to be posted online at www.qualityforum.org/RNA

Needs Assessment Activities: Open Call for Information

May 16 – June 6, 2012: An open call for information about current systems and approaches to measure information management

Open Call Respondents

Architelos	Department of Veteran Affairs
Allscripts	Humana
Agency for Healthcare Research and Quality/ECRI Institute	National Institute of Standards Technology
Centers for Medicare & Medicaid Services/ Health Services Advisory Group	SunCoast Regional Health Information Organization

Needs Assessment Activities: Stakeholder Discussions

June 25 – July 11: Targeted discussions with public- and private-sector organizations

Organizations Involved in Stakeholder Discussions

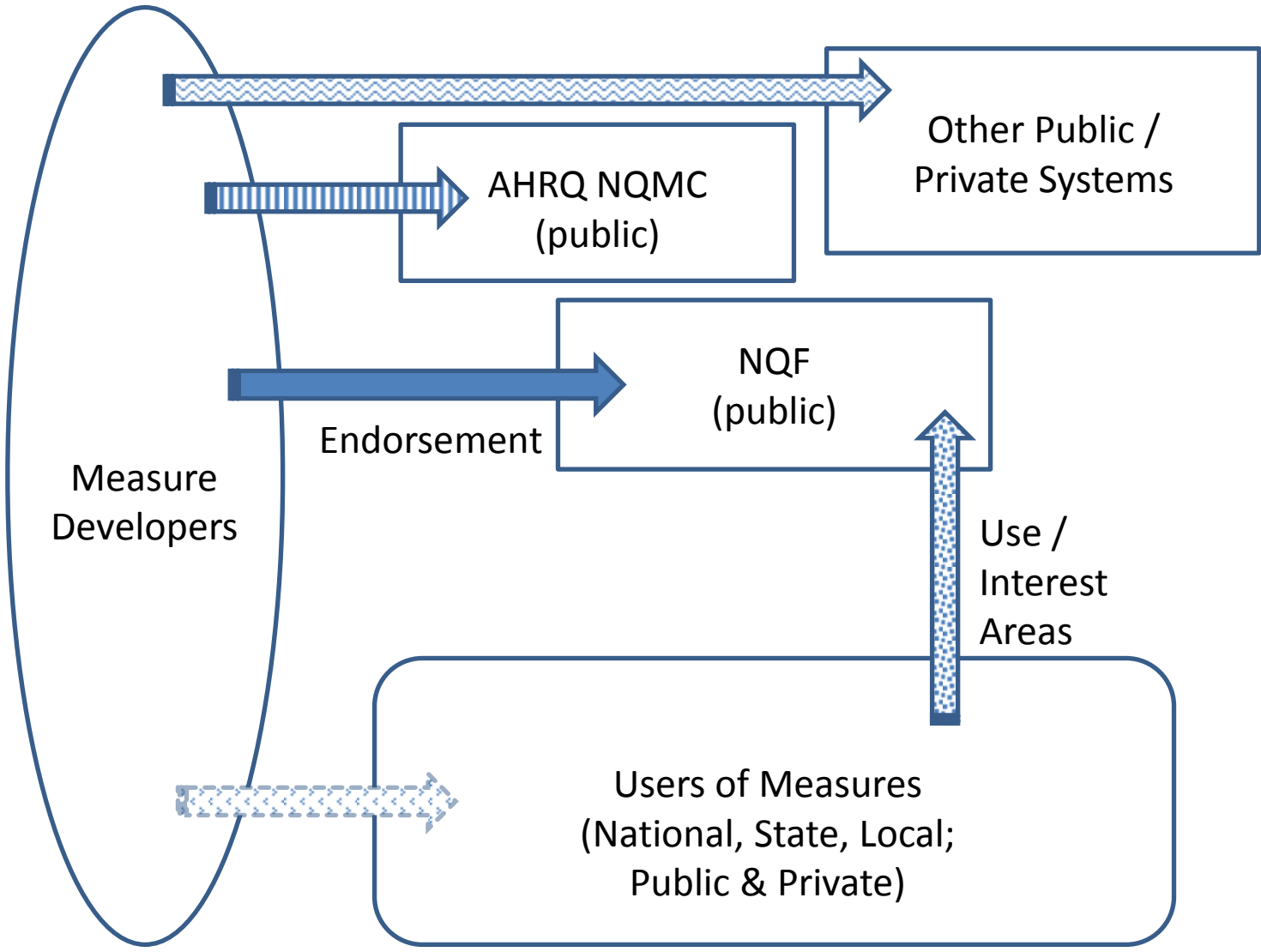
Agency for Healthcare Research and Quality/ECRI Institute	Health Resources and Services Administration	National Committee for Quality Assurance
American College of Cardiology	The Joint Commission	National Library of Medicine
California Office of the Patient Advocate	Kaiser Permanente	National Quality Forum
Centers for Disease Control and Prevention	Keystone Beacon Community	Office of the National Coordinator for Health Information Technology
Centers for Medicare & Medicaid Services/Health Services Advisory Group	The Leapfrog Group	Pacific Business Group on Health
Cincinnati Beacon Community	Minnesota Community Measurement	Rhode Island Beacon Community
Department of Veterans Affairs	National Business Coalition on Health	

Needs Assessment Activities: Multi-Stakeholder Workshop

Sept. 5, 2012: A multi-stakeholder workshop to explore measure information needs, requirements, and potential approaches to measure information management

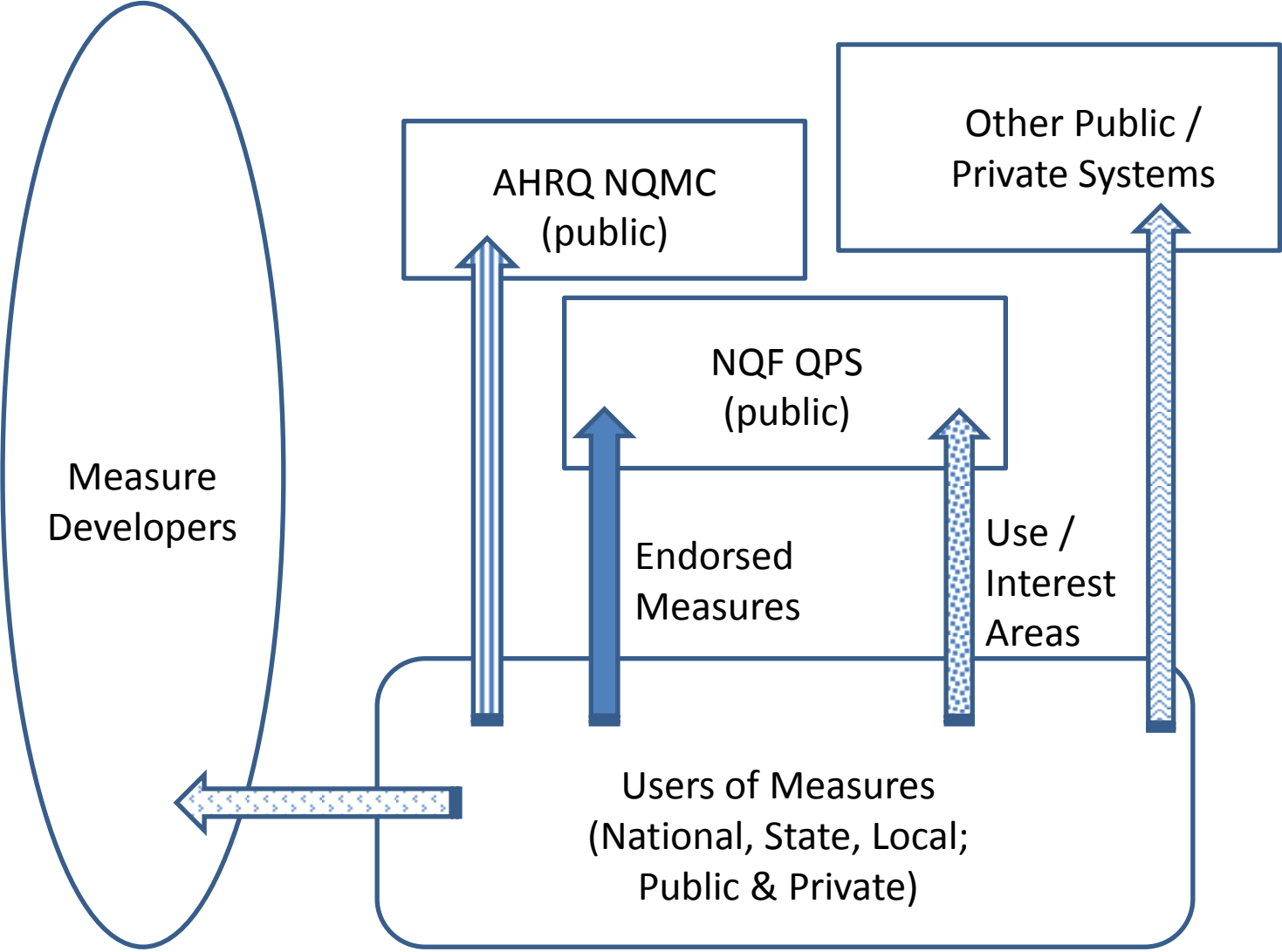
ActiveHealth Management	Centers for Disease Control and Prevention	The Joint Commission	Office of the National Coordinator for Health Information Technology
Aetna	Centers for Medicare & Medicaid Services	Kaiser Permanente	OptumInsight
Agency for Healthcare Research and Quality	Colorado Beacon Community	Keystone Beacon Community	Quality Insights of Pennsylvania
Aligning Forces for Quality National Program Office	Consumer Purchaser Disclosure Project	Lantana Group	Rhode Island Beacon Community
America's Health Insurance Plans	Department of Veterans Affairs	Mathematica	Society of Thoracic Surgeons
American College of Cardiology	ECRI Institute	McKesson	Substance Abuse and Mental Health Services Administration
American College of Physicians	Geisinger Health System	National Business Coalition on Health	SunCoast Regional Health Information Organization
American College of Surgeons	Health Care Incentives Improvement Institute	National Database of Nursing Quality Indicators	Truven Health
American Institutes for Research	the Health Collaborative of Greater Cincinnati	National Hospice and Palliative Care Organization	UnitedHealthcare
American Nurses Association	Health Resources and Services Administration	National Library of Medicine	Wyoming Department of Health
Brookings Institution	Health Services Advisory Group	National Partnership for Women & Families	
California Office of the Patient Advocate	Indian Health Service	National Quality Forum	

Measure Information Landscape



DIRECTION ONE: Where Measure Information is Sent, Submitted or Stored

Measure Information Landscape



DIRECTION TWO: Where Users Seek Out and Piece Together Measure Information

Overarching Findings

- No single system or approach exists today to meet all the needs of the diverse stakeholders involved in healthcare quality
- Most organizations that seek information about measures must access multiple sources
- There are no standardized definitions for measure information elements nor for what determines a new version of a measure
- Stakeholders recommended building upon existing systems in a phased approach

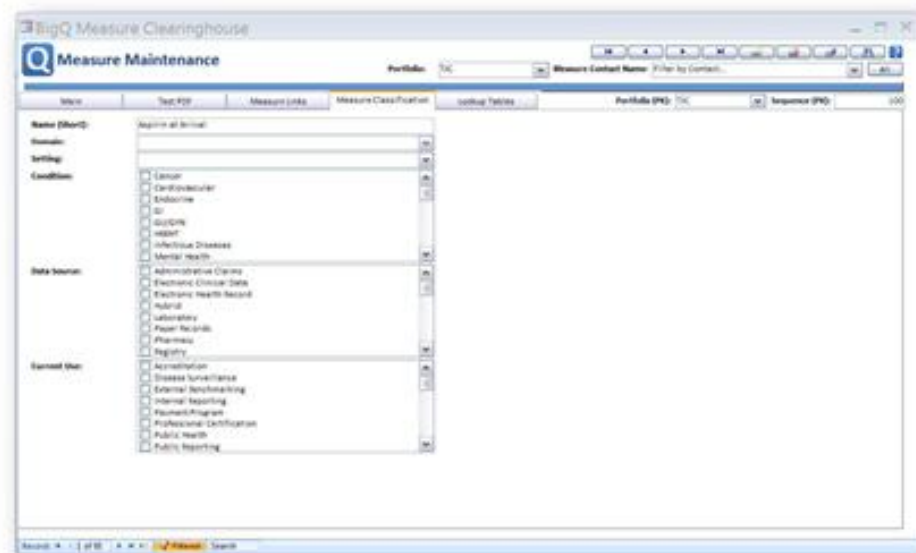
Major Findings: Approaches to Measure Information Management

- Stakeholders employ a wide-range of approaches for managing measure information
- Some use Excel spreadsheets while others have created custom databases

Quality Measure Clearinghouse

KPQMC Measure Maintenance

Categorization / Classification



Slide# 12

Privileged and Confidential

KAISER PERMANENTE

Kaiser Permanente, Webinar: Exploration of Information Systems, July 26, 2012

Major Findings: Current Measure Information Systems

- Those who use measure information generally rely on a combination of resources from AHRQ, NQF, CMS, and measure developers.
- Many must also rely on internet searches to 'fill in the gaps'.

The screenshot displays the National Quality Measures Clearinghouse website. The header includes the AHRQ logo and the text 'Advancing Excellence in Health Care'. The main navigation bar features 'National Quality Measures Clearinghouse' and a search bar. The left sidebar contains a 'Measures' menu with options like 'By Topic', 'By Organization', and 'By Domain'. The main content area is titled 'Measures by Domain' and shows a search for 'Process' with results for 'Acetaminophen use'.

Measures by Domain
Browse by primary measure domain to find measures represented in NQMC that are linked to a particular domain of measurement. For definitions of each measure domain, see the [Glossary](#).

[Create Domain E-mail Alerts](#)

Health Care Delivery Measures | **Population Health Measures**

Clinical Quality Measures
- Process
- Access
- Outcome
- Structure
- Patient Experience

Related Health Care Delivery Measures
- User-enrollee Health State
- Management
- Use of Services
- Cost

Clinical Efficiency Measures
- Efficiency

Search within: **GO**

Sort results by: Relevance Publication date

Filter results by: **Compare Measures**

1-20 of 1143 [Next >](#)

- 1. Acetaminophen use: percentage of patients prescribed acetaminophen who have risk factors for liver disease AND the percentage of patients treated with high-dose (greater than or equal to 4 gm/day) acetaminophen who are advised of the associated risk of liver toxicity.** 2004 Jun. NQMC:002170
Arthritis Foundation - Nonprofit Organization; RAND Health - Nonprofit Research Organization; University of Alabama at Birmingham - Academic Institution. [View all measures by the developer\(s\)](#)
- 2. Acute myocardial infarction (AMI)/chest pain: median time from ED arrival to ECG (performed in the ED prior to transfer) for patients with AMI or chest pain.** 2011 Dec. NQMC:006358
Centers for Medicare & Medicaid Services - Federal Government Agency [U.S.]; Oklahoma Foundation for Medical Quality - Health Care Quality Collaboration. [View all measures by the developer\(s\)](#)
- 3. Acute myocardial infarction (AMI)/chest pain: percentage of ED patients with AMI or chest pain who received aspirin within 24 hours before ED arrival or prior to transfer.** 2011 Dec. NQMC:006357
Centers for Medicare & Medicaid Services - Federal Government Agency [U.S.]; Oklahoma Foundation for Medical Quality - Health Care Quality Collaboration. [View all measures by the developer\(s\)](#)

Major Findings: Challenges to Address

- Limited resources for maintaining measure information
- Lack of standardized measure information
- Lack of standard measure identification practices
- Insufficient and/or inconsistent data across available sources
- Inconsistent or unclear approaches to measure versioning
- Unique information needs associated with eMeasures
- Dynamic nature of quality measurement field

Major Findings:

Primary Measure Information Needs

Priority	Measure Information Needs
1	Complete, up-to-date measure specifications , including eMeasures and related information
2	Consistent approaches to definitions for elements of measure information, or metadata , as well as measure identification and versioning processes to help stakeholders track a measure and changes to it throughout the development and use pipeline (including measure concepts and measures no longer maintained by the measure developer)
3	Measure use information (including use in national reporting and incentive programs and use at the local, state, and regional levels) with systematic, structured feedback loops between measure developers and measure end-users to support collaboration and implementation
4	Measure results and benchmark data , including information that can support comparisons across settings and regions over time, and that can inform action to close performance gaps
5	Other information to support use of a measure including: <ul style="list-style-type: none">➤ Measure abstracts (concise summaries of the most essential information about a measure, including the context for why the measure is important and/or the intent of the measure)➤ Harmonization among and relationships between measures➤ Measure gaps➤ Reliability and validity testing information



Questions or Comments?

Please enter questions into the chat box
on your screen.

Potential Approaches for Measure Information Management

- At the September 5th workshop, participants considered several approaches to help frame their input
- Approaches represent new thinking on how to meet measure information needs while building on existing systems
- Approaches include:
 1. Alignment of Information in Existing Systems
 2. Independent Systems and Information Repositories Accessible via One Access Point
 3. Multiple Systems Connected into One System
 4. One Registry for Measures

Alignment of Information in Existing Systems

Enable the alignment of information in current measure information systems.

Benefits	<ul style="list-style-type: none">• Ability to take an incremental approach• Potential to connect data systems based on common, standardized data elements
Challenges	<ul style="list-style-type: none">• Lack of a standard-setting body or organization to manage the approach• Unique data needs of individual systems and organizations
Trade-offs	<ul style="list-style-type: none">• With the right incentives, this approach could improve communication among organizations at a comparatively low cost• Does not ensure the measure information is any more accessible, consistent, or accurate

Current Example of Approach: Electronic Data Interchange (EDI) sponsored by the Data Interchange Standards Association; www.disa.org

Independent Systems and Information Repositories Accessible via One Access Point

Make data within multiple measure information systems accessible via a single access point.

Benefits	<ul style="list-style-type: none">• Ability to create single access point relatively quickly by using commercially-available products• Flexibility in indexing of systems• Support better understanding of existing information sources and where opportunities for alignment of information exist
Challenges	<ul style="list-style-type: none">• Manual assessment of the indexed information would be needed to assure relevancy of the information• Potential for duplicative or inconsistent information about measures
Trade-offs	<ul style="list-style-type: none">• Would force stakeholders to balance the rapid time to market and lower development costs and data entry requirements with concerns about the accuracy, completeness, and relevance of the information

Current Example of Approach: Employment search sites such as Simply Hired; www.simplyhired.com

Multiple Systems Connected to One System

Enable the display of information from multiple independent information systems while allowing those systems to maintain their independence to evolve and meet their own users' needs.

Benefits	<ul style="list-style-type: none">• Ability to take an incremental approach• Cost of information and system maintenance can be distributed across several entities• Could provide a deeper and wider set of information than other approaches
Challenges	<ul style="list-style-type: none">• With loose alignment of multiple systems, issues of authority and control over input and maintenance of data can occur• Potential for duplicative or inconsistent information about measures
Trade-offs	<ul style="list-style-type: none">• Distributes the burden of data input and allows some autonomy for users• Does not assure the accuracy, completeness, or relevance of information to the user without considerable governance and strict alignment across systems

Current Example of Approach: Airfare sites such as Kayak; www.kayak.com

One Registry for Measures

A “one-stop shop” to meet the primary information need: full and up-to-date measure specifications.

Benefits	<ul style="list-style-type: none">• Greater assurance of the accuracy, completeness, and relevancy of the information within the system• Could be achieved by expanding an existing system• Would necessitate alignment across organizations’ measure information
Challenges	<ul style="list-style-type: none">• Least suited for the desired incremental approach• Would require significant resources and strict governance to build, maintain, and enhance over time• May unequally burden segments of the measure development community
Trade-offs	<ul style="list-style-type: none">• Could help meet the primary needs of stakeholders <u>if</u>:<ul style="list-style-type: none">• sufficient resources are allocated, and the governance structure and business case for participation and use are widely accepted; and• the approach is not unduly burdensome, particularly for measure developers

Current Example of Approach: International Standard Book Number (ISBN); www.isbn.org



Questions or Comments?

Please enter questions into the chat box
on your screen.

Major Findings: Opportunities to Consider

- Alignment of measure information elements would benefit all, regardless of approach
- Technical elements of all approaches are feasible
- Greater collaboration can spur uptake while protecting competition
- Results would drive increased understanding and improvement

Major Findings: Next Steps

1. Build the Foundation

- Define a measure's development and use lifecycle;
- Determine and define the key information about a measure, throughout its lifecycle, that is important to capture;
- Define a consistent approach to measure identification; and
- Define a consistent approach to measure versioning.

Major Findings: Next Steps (cont.)

2. Define the Vision and Create A Road Map

- Clarify the primary audiences;
- Define the value to each audience of participating in and using the potential approach; and
- Determine the impact the approach may have on stakeholders' resources and workflow.

Major Findings: Next Steps (cont.)

3. Take an Incremental Approach

- Evaluate current systems for their effectiveness and potential to contribute to a solution;
- Seek multi-stakeholder input on the potential design and functionality of the system; and
- Create a development plan that first targets an initial set of stakeholders' needs, with the intention of meeting all primary needs in the longer term.

Major Findings: Next Steps (cont.)

4. Support Competition and Collaboration

- Examine opportunities to share measure specifications widely while respecting business models of measure developers;
- Develop creative approaches to encourage alignment with defined measure metadata fields; and
- Create structured approaches that enable measure developers and implementers to learn from each other and support continued innovation of performance measurement.

Major Findings: Next Steps (cont.)

5. Coordinate on the Plan

- Align activities across HHS agencies, including identifying and implementing transparent processes for consistently tracking measures used in HHS programs;
- Capitalize on opportunities for the public and private sectors to coordinate on ensuring the accuracy and integrity of measure information;
- Allocate resources to the development and ongoing maintenance of a standardized approach to measure information management; and
- Create incentives that motivate participation in and use of the consistent approach to measure information management.



Questions or Comments?

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on your screen.

Provide Your Feedback

- Public Commenting Period on Draft Report open as of today
 - Closes November 28, 6 PM Eastern
 - Access Commenting Form from “Links” at top of your screen
- Final Report to HHS and posted online: late December 2012

www.qualityforum.org/RNA

Thank You

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