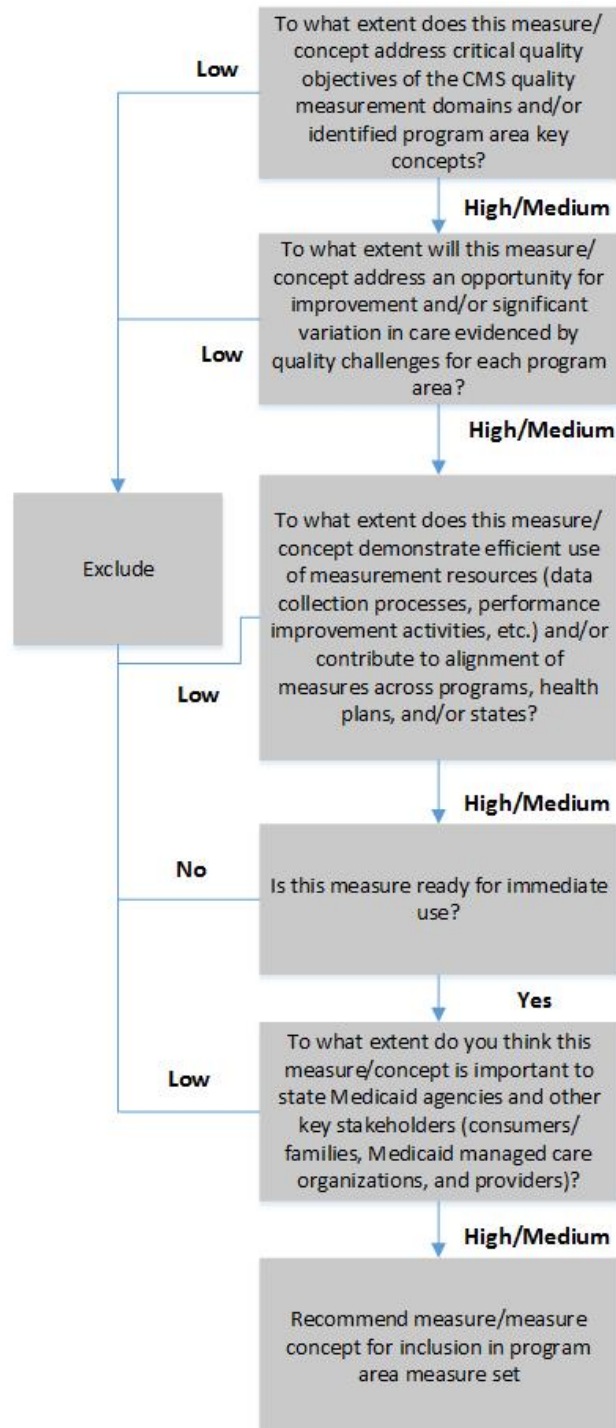




NQF Medicaid Innovation Accelerator Project – Decision Logic (UPDATED)



Decision Logic Questions

- To what extent does this measure/concept address critical quality objectives of the CMS quality measurement domains (e.g., access, clinical care, care coordination, safety, patient and caregiver experience, and population health and prevention) and/or identified program area key concepts (please refer to program area measure summary sheets for a list of key concepts)?
 - High: Measure addresses a CMS quality measurement domain(s) and program area key concepts
 - Medium: Measure addresses CMS quality measurement domains but does not address program area key concepts
 - Low: Measure does not clearly address CMS quality measurement domains or program area key concepts

- To what extent will this measure/concept address an opportunity for improvement and/or significant variation in care evidenced by quality challenges (e.g. access to care/services, readmission rates, etc.) for each program area?
 - High: Addresses multiple quality challenges and opportunities for improvement within a program area
 - Medium: Measure has the potential to address variation in care and quality challenge
 - Low: Measure does not address quality challenges or opportunities for improvement within a program area

- To what extent does this measure/concept demonstrate efficient use of measurement resources (data collection processes, performance improvement activities, etc.) and/or contribute to alignment of measures across programs, health plans, and/or states? The measure is not duplicative of existing measures within the measure set, captures a broad population (encompasses population of different ages, multiple conditions, etc.).
 - High: Measure demonstrates efficient use of measurement resources, addresses a broad population, is not duplicative of existing measures and contributes to alignment across states/programs and health plans
 - Medium: Measure is not duplicative of other measures and does address some areas of alignment but does not encompass broad populations.
 - Low: No evidence that the measure demonstrates/addresses any of the above criteria (e.g., does not demonstrate efficient use of measurement resources, address a broad population, nor contribute to alignment. There are other measures similar to this one already in use.

- Is this non-NQF measure OR concept ready for immediate use?
 - Yes
 - Is a fully developed measure that includes detailed specifications and may have undergone scientific testing and is currently in use or planned to be used in states
 - Is a measure concept that includes a description including a numerator and denominator and is currently in use or planned to be used in states
 -
 - No
 - Is a measure or measure concept that is not in use or planned for use in the Medicaid populations, OR
 - Is a measure concept with no indication of numerator or denominator
- To what extent do you think this measure/concept is important to state Medicaid agencies and other key stakeholders (consumers/families, Medicaid managed care organizations, and providers)?
 - High: Important to state Medicaid agencies and beneficiaries/families
 - Medium: Important to two stakeholders including state Medicaid agencies
 - Low: Important to one stakeholder