

## MAP Coordinating Committee Web Meeting to Finalize the Approach to the Strategic Plan



NATIONAL  
QUALITY FORUM

May 23, 2012

## Public Log-In Information

### PARTICIPANT INSTRUCTIONS:

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## Agenda

<b>11:00 am</b>	<i>Welcome and Review of Meeting Objectives</i>
<b>11:10 am</b>	<i>Finalize Approach to the MAP Strategic Plan (due to HHS June 1)</i> <ul style="list-style-type: none"><li>• Review feedback received</li><li>• Raise additional topics for consideration</li><li>• Opportunity for public comment</li></ul>
<b>11:50 am</b>	<i>Key Areas to Explore during Strategic Planning (final plan due to HHS October 1)</i> <ul style="list-style-type: none"><li>• Public-private alignment</li><li>• Feedback loops and stakeholder engagement</li><li>• MAP indicators of success</li><li>• Opportunity for public comment</li></ul>
<b>12:25 pm</b>	<i>Next Steps</i>
<b>12:30 pm</b>	<i>Adjourn</i>

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## *Welcome and Review of Meeting Objectives*

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## Meeting Objectives

- Finalize Approach to the MAP Strategic Plan
  - Approach due to HHS June 1
  
- Discuss prospective key areas to explore during the strategic planning process
  - Final plan due to HHS October 1

## ***Finalize Approach to the MAP Strategic Plan***

***(due to HHS June 1)***

## Feedback on Draft Approach to Strategic Plan

### Comments received from 8 Coordinating Committee members:

- Generally comments indicated the *Approach to the Strategic Plan* is on target
- Several comments raised issues that will be further explored in developing the Strategic Plan
  - Methods for aligning public and private sector performance measurement activities
  - Data needed to inform MAP decisions
  - Clarity around MAP terms
  - Stakeholder engagement

## Additional Considerations

*Do Coordinating Committee members have additional issues that need to be addressed in the Approach to the Strategic Plan?*

## ***Opportunity for Public Comment***

## ***Key Areas to Explore during Strategic Planning***

***(due to HHS October 1)***

## Prospective Key Areas

- **Public-private alignment**
  - Given MAPs primary purpose is to provide input on federal programs, how can MAP best inform private sector performance measurement efforts?
  - If public and private sectors priorities vary, how might MAP promote alignment?

## Prospective Key Areas

- **Feedback loops and stakeholder engagement**
  - How should MAP establish and maintain feedback loops?
  - Are there additional stakeholders MAP should engage?
  - How can MAP persuade stakeholders to take up MAP's recommendations?

## Prospective Key Areas

### How should we define success for the MAP?

GOAL: Apply performance measures to achieve improvement, transparency, and value, in pursuit of the aims, priorities, and goals of the National Quality Strategy	OBJECTIVES	STRATEGIES/TACTICS	BY 2015, MAP WILL...
	1. Ensure performance measures are high-impact, relevant, actionable, and drive toward realization of the NQS	<ul style="list-style-type: none"> <li>Families of Measures and Core Measure Sets</li> <li>MAP Measure Selection Criteria</li> <li>MAP Analytics Plan</li> <li>Measure Implementation Phasing Strategies</li> </ul>	
	2. Stimulate gap-filling for high-priority measure gaps	<ul style="list-style-type: none"> <li>Families of Measures and Core Measure Sets</li> <li>Addressing Measure Gaps</li> </ul>	
	3. Promote alignment of performance measurement across HHS programs and between public and private initiatives	<ul style="list-style-type: none"> <li>Families of Measures and Core Measure Sets</li> <li>MAP Communication Plan</li> </ul>	
	4. Ensure MAP's recommendations are relevant to public and private implementers and its processes are effective	<ul style="list-style-type: none"> <li>MAP Evaluation Plan</li> <li>MAP Communication Plan</li> </ul>	

## Opportunity for Public Comment

## Next Steps

## Next Steps

- Approach to Strategic Plan submitted to HHS on **June 1, 2012**
- Strategy Task Force to develop draft Strategic Plan
  - Task force In-Person Meeting on June 18, 2012
  - Task force Web Meeting on July 10, 2012
  - Additional task force web meetings as needed
- Other Task Forces
  - Cardiovascular and Diabetes Task Force In-Person Meetings are TBD
  - Safety and Care Coordination Task Force In-Person Meeting #1 on June 19-20, 2012
  - Safety and Care Coordination Task Force In-Person Meeting #2 on July 18-19, 2012
- All MAP Web Meeting on **July 23, 2012 12-2pm**
  - Review DRAFT Strategic Plan
- MAP Coordinating Committee In-Person Meeting on **August 14-15, 2012**
  - Finalize MAP Strategic Plan
  - Finalize measure families for safety, care coordination, cardiovascular care, diabetes



## Measure Applications Partnership—Approach to the Strategic Plan

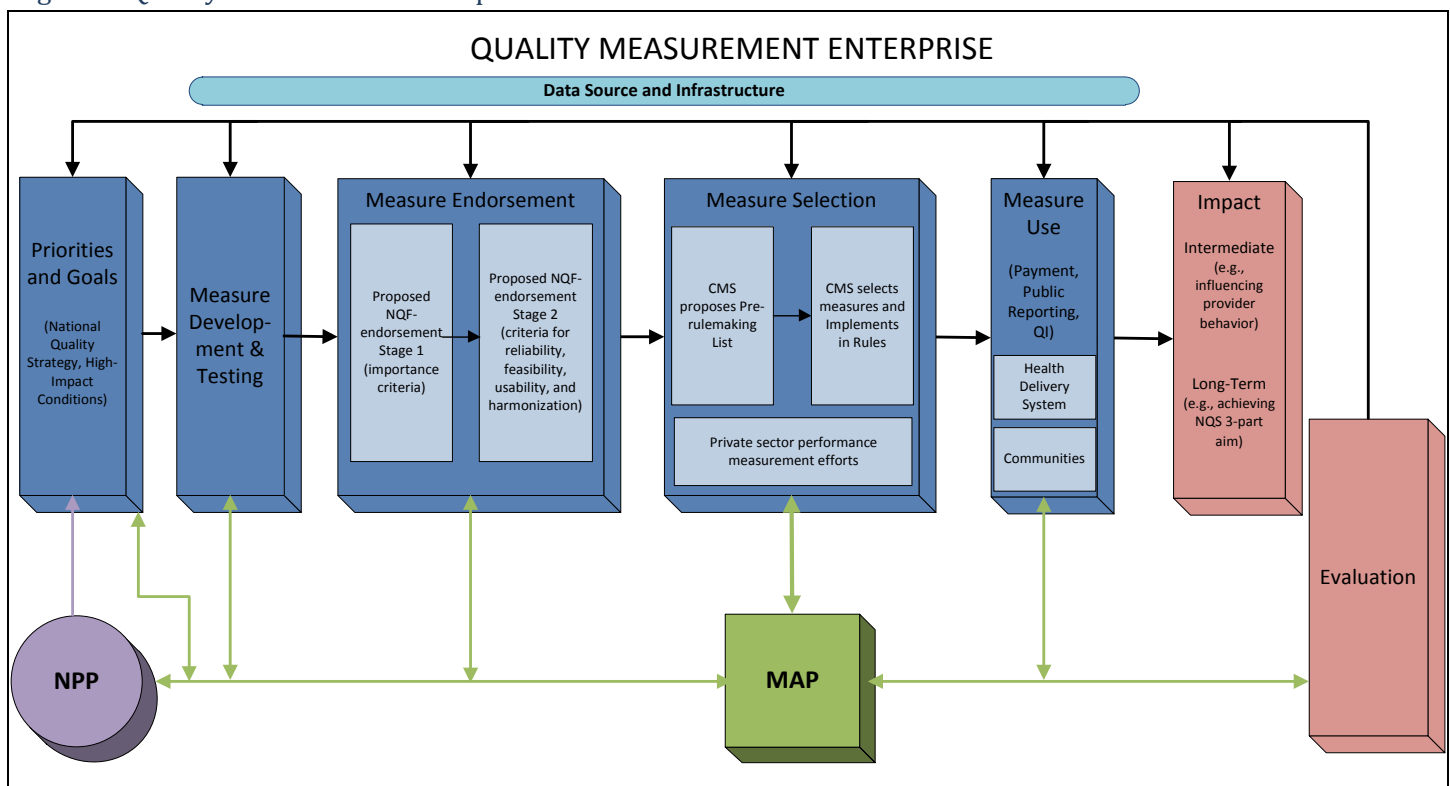
### MAP Goal and Objectives

In pursuit of the aims, priorities, and goals of the National Quality Strategy (NQS), the Measure Applications Partnership (MAP) informs the selection of performance measures to achieve the goal of improvement for clinicians and providers, transparency for consumers and purchasers, and value for all. MAP’s objectives are to:

1. Ensure performance measures are high-impact, relevant, actionable, and drive toward realization of the NQS;
2. Stimulate gap-filling for high-priority measure gaps;
3. Promote alignment of performance measurement across HHS programs and between public and private initiatives; and
4. Ensure MAP’s recommendations are relevant to public and private stakeholders and its processes are effective.

Many stakeholders are engaged in performance measurement efforts to achieve the goals of the NQS. These efforts comprise the Quality Measurement Enterprise (Figure 1) and include priority and goal setting, measure development and testing, measure endorsement, measures selection and use for various purposes, and determining impact.

Figure 1. Quality Measurement Enterprise.



MAP, a public-private partnership, works collaboratively with the stakeholders across the Quality Measurement Enterprise to ensure that the application of performance measures achieves improvement, transparency, and value. Each objective relates to various functions of the quality measurement enterprise.

**Objective 1: Ensure performance measures are high-impact, relevant, actionable, and drive toward realization of the NQS.** MAP’s primary purpose, as specified in the Affordable Care Act (ACA), is to provide input to HHS on selecting performance measures for numerous accountability applications, such as public reporting, performance-based payment, and health information technology incentives tied to “meaningful use.” This input to HHS includes recommendations for applying the best available measures and prioritization of measure gaps to guide policymakers’ decision making. NQF-endorsement is a threshold criterion for selecting measures that are important, scientifically acceptable, feasible, and useful for accountability purposes and quality improvement.

**Objective 2: Stimulate gap-filling for high-priority measure gaps.** MAP, through collaboration with HHS and private entities, will establish pathways to address measure development and measure implementation gaps that MAP has identified and prioritized. The pathways will provide solutions for filling gaps, including but not limited to, defining measure ideas to address gap areas; determining funding needed for measure development, testing, and endorsement; engaging measure developers; facilitating the construction of test beds for measure testing; and identifying opportunities to build mechanisms for efficient collection and reporting of data.

**Objective 3: Promote alignment of performance measurement across HHS programs and between public and private sector initiatives.** Aligned performance measurement is important to send clear direction and strong incentives to providers and clinicians regarding desired health system change. Strategically aligning public and private payment and public reporting programs will encourage the development of delivery system models capable of providing patient-centered, high-value care. Additionally, aligned performance measurement will reduce the data collection burden provider’s encounter as a result of duplicative, uncoordinated measurement efforts.

**Objective 4: Ensure MAP’s recommendations are relevant to public and private stakeholders and its processes are effective.** MAP’s careful balance of interests—across consumers, businesses and purchasers, labor, health plans, clinicians, providers, communities and states, and suppliers—is designed to provide HHS and the field with thoughtful input on performance measure selection. MAP must leverage its relationships with various health care stakeholders to promote MAP’s recommendations and ensure that MAP’s input is considered across the quality measurement enterprise. In mobilizing around specific MAP recommendations, advocacy organizations and those delivering care can together drive progress toward achieving the NQS priorities and goals.

### MAP Strategies and Tactics

To date, MAP has generated program- and measure-specific recommendations to HHS, developed coordination strategies for performance measurement across public and private sector programs, and identified and prioritized measure gaps. Over the next three years, MAP plans to engage in several strategies and tactics to operationalize the MAP objectives. While each strategy and tactic can address multiple MAP objectives, the table below indicates the primary objectives each strategy and tactic addresses.

GOAL:	OBJECTIVES	STRATEGIES/TACTICS	BY 2015, MAP WILL...
	1. Ensure performance measures are high-	<ul style="list-style-type: none"> <li>Families of Measures and Core Measure Sets</li> </ul>	

<b>Apply performance measures to achieve improvement, transparency, and value, in pursuit of the aims, priorities, and goals of the National Quality Strategy</b>	impact, relevant, actionable, and drive toward realization of the NQS	<ul style="list-style-type: none"> <li>MAP Measure Selection Criteria</li> <li>MAP Analytics Plan</li> <li>Measure Implementation Phasing Strategies</li> </ul>	
	2. Stimulate gap-filling for high-priority measure gaps	<ul style="list-style-type: none"> <li>Families of Measures and Core Measure Sets</li> <li>Addressing Measure Gaps</li> </ul>	
	3. Promote alignment of performance measurement across HHS programs and between public and private initiatives	<ul style="list-style-type: none"> <li>Families of Measures and Core Measure Sets</li> <li>MAP Communication Plan</li> </ul>	
	4. Ensure MAP’s recommendations are relevant to public and private implementers and its processes are effective	<ul style="list-style-type: none"> <li>MAP Evaluation Plan</li> <li>MAP Communication Plan</li> </ul>	

**Families of Measures and Core Measure Sets**

MAP has indicated that performance measures should align across settings, programs, populations, and payers in order to provide a comprehensive picture of quality and identify targeted interventions. In accordance with MAP strategies to identify best measures and align performance measurement, MAP will develop families of measures, sets of related available measures and measure gaps that span programs, care settings, and levels of analysis, for each of the NQS priority areas.

Development of measure families will build on the national-level measures identified by the NPP and reports from NQF’s measure endorsement process. NPP and endorsement project Steering Committee liaisons will serve on the MAP task forces devoted to developing measure families. Additionally, MAP will build on private and public sector efforts to select measures; for example, the Interagency Working Group on Healthcare Quality is engaging in efforts to align and coordinate performance measurement efforts across federal programs. Each task force includes MAP members who are federal liaisons.

**Addressing Measure Gaps**

Critical measure gaps – such as patient-reported functional status, cost, and shared decision making – persist across settings and programs despite being previously identified as critical gaps. MAP identified critical measure gaps during its initial pre-rulemaking input and will continue to prioritize measure gaps and identify high-leverage opportunities when developing families of measures. Moving forward, MAP will help facilitate a coordinated strategy for gap filling among

public and private entities by engaging measure developers and those who fund measure development, and by identifying solutions to implementation barriers. For measure development gaps, where measures currently do not exist, MAP will propose strategies to engage measure developers. Such strategies may include identifying where existing measures may need additional testing for application to other settings, bringing tested measures in for NQF endorsement, and prioritizing gaps to signal to funders where measure development is most needed. As part of the gap filling approach, MAP will identify opportunities to promote the development of eMeasures. For implementation gaps, where measures exist but are not included in a particular program, MAP will proactively identify and propose solutions to the implementation barriers that perpetuate the implementation gaps.

### Define Measure Implementation Phasing Strategies

MAP recognizes that its recommendations must consider strategies to quickly and deliberately transition from the current measure sets to ideal measure sets. Phasing strategies will address how a program transitions over time (e.g., some federal programs transition to pay for performance after several initial years as a public reporting program) and evolving mechanisms for data collection. For example, MAP would identify which measures in a program should be phased-out as more person-centered, cross-cutting, and HIT-enabled measures become available. MAP will engage stakeholders to provide input on the feasibility of MAP's phasing strategies. For example, the NPP affinity groups will provide input on how MAP's phasing strategies will address the real world implementation challenges of measurement.

### MAP Analytics Plan

In its first year, MAP emphasized the need for MAP's decision making to be more analysis-driven, informed by measure data and experience in the field. MAP has identified several types of information needed to inform MAP's decisions. Information on current performance gaps highlights the high-leverage opportunities for performance measurement. Qualitative and quantitative information on measure use provides insight into public and private sector implementation experiences. Finally, assessing the impact of measures in the field would elicit potential undesirable consequences and help to understand if performance measures are truly driving improvement. To provide thorough recommendations on the best performance measures for specific purposes, MAP will establish an analytics plan that

- Builds on the NQS and the goals, measures, and strategic opportunities identified by the National Priorities Partnership (NPP) and other initiatives to identify high-leverage opportunities for improvement; and
- Utilizes information on measure use and impact by establishing feedback loops.

**Build on NQS/NPP and other initiatives to identify high-leverage opportunities for improvement.** The foundation for MAP's decision making is the National Quality Strategy. Accordingly, MAP's analytics plan will incorporate NPP's input to HHS regarding strategic opportunities and national-level measures to achieve the aims, priorities, and specific goals of the NQS. MAP and NPP will promote bi-directional collaboration to ensure MAP's decisions align with the true intent of the NQS aims and priorities. NPP leadership and NPP member liaisons play key roles on MAP Task Forces. In addition, MAP will leverage findings from other initiatives focused on advancing health care quality. Specifically, MAP will actively seek information that describes impact and improvability, with a focus on incidence, prevalence, cost, improvement gaps, and regional variation. For example, *The Healthcare Imperative: Lowering Costs and Improving Outcomes*, published by the Institute of Medicines (IOM), will provide MAP with valuable information regarding opportunities to address health care waste and resource use. Similarly, MAP will incorporate information gleaned from NQF's endorsement process and other NQF convening activities. Broader health care quality research and measure endorsement information will facilitate MAP's articulation of the highest-leverage opportunities for performance measurement.

**Utilize information on measure use and impact by establishing feedback loops.** MAP will need information on the use and impact of existing measures to make informed decisions about the best available measures. Examples of measure use and impact information include, but are not limited to, public and private programs in which a measure is used, reasons for maintaining or removing a measure from programs, brief histories of experience using the measure, measure results over time, clinical significance of measure improvement, implementation experiences in the field, and any resulting undesirable consequences of measurement. Despite a lack of existing data on measure use and impact, MAP will leverage its relationships with stakeholders to obtain use and impact information, as well as look to prior work and several ongoing efforts. Such efforts include the NQF endorsement/maintenance process, CMS National Impact Assessment of Medicare Quality Measures Report which provides trended data for eight CMS programs, the Quality Alliance Steering Committee (QASC) Environmental Scan, and The Agency for Health Care Research and Quality's (AHRQ) National Healthcare Quality & Disparities Reports. While each of these efforts provides somewhat disparate information, MAP will establish processes for systematically incorporating measure use and impact information into MAP deliberations. Recognizing that the performance measurement landscape is continually changing, MAP will establish feedback loops with multiple stakeholders throughout the Quality Measurement Enterprise to bolster the knowledge base. As illustrated in Figure 1, MAP seeks to establish feedback loops with multiple stakeholders across the Quality Measurement Enterprise to strengthen MAP's recommendations over time. MAP will leverage NQF's relationships with communities, such as the Aligning Forces for Quality community alliances, to understand how they are approaching performance measurement.

### **MAP Measure Selection Criteria**

The MAP Measure Selection Criteria were developed and adopted to guide MAP's input on the selection of measures and to identify measure gaps. The selection criteria serve to operationalize MAP's overarching goal of ensuring performance measures achieve improvement, transparency, and value. MAP envisions that the MSC will continue to evolve as MAP gains experience using the criteria. MAP will revisit the selection criteria to ensure the aforementioned goals and objectives are clearly articulated within the criteria and address issues raised during the first year experience. For example, MAP highlighted the need to explore whether the differing purposes of performance measurement programs (e.g., public reporting, performance-based payment, quality improvement) call for different selection criteria. MAP will consider how the selection criteria should address removal of low-value measures along with other minor refinements (e.g., identifying high-impact conditions for other age groups). Finally, MAP recognizes that some issues may be better suited for exploration by other stakeholders within the Quality Measurement Enterprise. For example, while the selection criteria address disparities, MAP notes there is a need for a national strategy on addressing healthcare disparities. Development of a national disparities strategy may be better suited for the membership and implementation role of the NPP and informed by the NQF Healthcare Disparities and Cultural Competency project.

### **MAP Evaluation Plan**

MAP seeks to establish feedback loops with various stakeholders to gauge the effectiveness and impact of its recommendations and to enhance its subsequent decision making. MAP must determine whether its recommendations are meeting stakeholder's needs and are aligned with stakeholder goals. As a first step in developing an evaluation plan, MAP will identify its key audiences and determine what those audiences deem most important to assess. Next, MAP will engage in a systematic evaluation to determine uptake of MAP's recommendations and the impact of MAP's recommendations on driving improvement, transparency, and value. Uptake of MAP's recommendations will be informed by finalized federal rules and outreach to private sector stakeholders implementing performance

measurement initiatives. Determining MAP's impact on the broader Quality Measurement Enterprise and understanding if MAP is truly driving improvement, transparency, and value will be informed by stakeholder outreach.

### **MAP Communication Plan**

MAP will develop a plan for disseminating its recommendations in a clear and effective manner to both public and private sector audiences. For example, stakeholder feedback from MAP's first year of pre-rulemaking input requested that MAP clarify its recommendations which included "support," "support direction," and "do not support." MAP will explore options to determine the most discerning response categories. The communication plan will also design strategies for targeted outreach to key stakeholders in the public and private sectors—including measure developers, entities selecting measures for various programs, and healthcare entities that collect and report measurement data. As part of its collaboration with NPP, MAP will identify opportunities to synchronize and activate stakeholders within the Quality Measurement Enterprise to facilitate achieving MAP's objectives.

### **MAP Action Plan**

MAP has identified multiple strategies and tactics to drive toward performance measures that promote improvement, transparency, and value. The MAP Strategic Plan will include an action plan and deliverables for accomplishing each tactic over the next three years.