



MAP Dual Eligible Beneficiaries Workgroup Web Meeting December 20, 2013

The National Quality Forum (NQF) convened a web meeting of the Measure Applications Partnership (MAP) Dual Eligible Beneficiaries Workgroup on Friday, December 20, 2013. An [online archive](#) of the meeting is available.

Workgroup Members in Attendance:

Alice Lind, Workgroup Chair
Rhonda Robinson Beale, subject matter expert: Mental Health
Adam Burrows, National PACE Association
Gwendolen Buhr, American Medical Directors Association
Mady Chalk, subject matter expert: Substance Use
Anne Cohen, subject matter expert: Disability
Steven Counsell, America's Essential Hospitals
Leonardo Cuello, National Health Law Program
James Dunford, subject matter expert: Emergency Medicine
Jennie Chin Hansen, American Geriatrics Society
Lisa Patton, Substance Abuse and Mental Health Services Administration
Ruth Perry, subject matter expert: Medicaid ACO
D.E.B. Potter, Agency for Healthcare Research and Quality
Cheryl Powell, CMS Federal Coordinated Healthcare Office
Juliana Preston, subject matter expert: Measure Methodologist
Clarke Ross, Consortium for Citizens with Disabilities

Welcome and Review Meeting Objectives

Session led by Alice Lind, MAP Dual Eligible Beneficiaries Workgroup Chair, with additional presentation from Sarah Lash, Senior Director, NQF.

Ms. Lind welcomed the group to the web meeting and introduced Dr. Christine Cassel, CEO, NQF, who briefly commended workgroup members on their hard work and dedication to the project. A workgroup update of disclosures of interest and roll call were completed. The primary objectives of the meeting were to:

MAP Dual Eligible Beneficiary Workgroup December 20, 2013 Web Meeting Summary

- Review and discuss the results of MAP Post-Acute Care/Long-Term Care (PAC/LTC), Hospital, and Clinician Workgroup deliberations on pre-rulemaking input to HHS, and;
- Provide additional cross-cutting input to the MAP Coordinating Committee regarding the applicability and appropriateness of measures for dual eligible beneficiaries.

Sarah Lash presented an overview of the approach for pre-rulemaking and how the other workgroups used the Family of Measures for Dual Eligible Beneficiaries to inform their thinking. Ms. Lash discussed the list of measures under consideration for 2014 and the standardized approach to developing MAP pre-rulemaking recommendations. Finally, Ms. Lash reviewed the updated MAP Measure Selection Criteria and decision categories.

Post-Acute Care/Long-Term Care Workgroup Progress

Mitra Ghazinour, Project Manager, NQF, and Gwen Buhr, liaison to the PAC/LTC Workgroup, presented on the PAC/LTC Workgroup's pre-rulemaking recommendations.

- The PAC/LTC Workgroup reviewed 36 measures under consideration for four federal programs: Home Health Quality Reporting, Inpatient Rehabilitation Facility Quality Reporting, Long-Term Care Hospital (LTCH) Quality Reporting, and End-Stage Renal Disease Quality Management.
- Ms. Ghazinour noted the PAC/LTC Workgroup measurement priorities and how they aligned with the high priority areas identified by the Dual Eligible Beneficiaries Workgroup:
 - Common emphasis on functional status and quality of life;
 - Promoting person-centeredness enabling patients to receive seamless care to improve their overall health regardless of care setting; and
 - Recognizing the heterogeneity of populations served in each setting and developing or further testing measures that are specified for and applicable to each population.
- From the Family of Measures for Dual Eligible Beneficiaries, four measures were under consideration for a PAC/LTC program.
 - The PAC/LTC Workgroup supported three of these measures and supported the direction of the remaining measure for inpatient rehabilitation facilities.
 - Discussion highlighted the importance of preventive care delivered by specialty providers and harmonization of measures across settings.
 - Participants encouraged the use of hospice and palliative care measures in the hospital setting.
- Gwen Buhr shared her experience as the liaison to the PAC/LTC Workgroup.
- Dual Eligible Beneficiaries Workgroup members discussed prominent measure gaps across PAC/LTC programs and settings regarding lack of appropriate measures in some high-leverage opportunity areas consistent with the PAC/LTC Workgroup's recommendations. Care transitions and coordination with ancillary services (e.g., durable medical equipment) measures were specifically noted as measure gap areas.

Hospital Workgroup Progress

Erin O'Rourke, Project Manager, NQF, presented on the Hospital Workgroup's pre-rulemaking recommendations.

MAP Dual Eligible Beneficiary Workgroup December 20, 2013 Web Meeting Summary

- The Hospital Workgroup reviewed measures for 10 federal programs: Hospital Inpatient Quality Reporting, Hospital Value-based Purchasing, Hospital Outpatient Quality Reporting, Medicare and Medicaid EHR Incentive Program for Hospitals and CAHs (Meaningful Use), PPS-Exempt Cancer Hospital Quality Reporting, Inpatient Psychiatric Facility Quality Reporting, Hospital Readmissions Reduction Program, Hospital-Acquired Conditions Payment Reduction, Medicare Shared Savings Program, and Ambulatory Surgical Center Quality Reporting.
- From the Family of Measures for Dual Eligible Beneficiaries, three measures were under consideration for one or more hospital programs. One measure was not supported, another was conditionally supported, and the third yielded a split decision that will be resolved by the MAP Coordinating Committee during their January 2014 meeting.
- Ms. O'Rourke presented for further discussion two measure concepts under consideration for inpatient psychiatric facilities related to the provision of individual psychotherapy versus group therapy. The Hospital Workgroup had not supported these measures, however additional feedback was received from individuals with mental health expertise present on the web meeting.
 - Workgroup members emphasized that some services need to be individualized, and it would not be appropriate to only receive group therapy.
 - Workgroup members noted that the measures have more to do with historical misuses of billing codes than they do with the quality of care. OIG and GAO reports addressed these issues in the partial hospitalization population.
 - HHS is working with the Institute of Medicine to convene a panel on psychotherapy quality measurement.
- Workgroup members also discussed the incentive structure for the Hospital Readmission Reduction Program and supported programmatic changes to reduce potential penalties to safety net hospitals that serve a large volume of dual eligible beneficiaries.

Clinician Workgroup Progress

Aisha Pittman, Senior Director, NQF, and Ruth Perry, liaison to the Clinician Workgroup, presented on the Clinician Workgroup's pre-rulemaking recommendations.

- The MAP Clinician Workgroup reviewed more than 500 measures under consideration or currently finalized measures for four clinician programs: Physician Quality Reporting System (PQRS), Physician Compare, Physician Feedback/Value-Based Payment Modifier, Medicare and Medicaid EHR Incentive Program for Eligible Professionals (MU-EP), and the Medicare Shared Savings Program.
- From the Family of Measures for Dual Eligible Beneficiaries, two measures were under consideration for Clinician programs, and both were supported. Many of the other measures in the Family of Measures for Dual Eligible Beneficiaries are already used in clinician-level programs.
- Ruth Perry shared her experience as the Dual Eligible Beneficiaries Workgroup liaison to the Clinician Workgroup. She noted that there was a focus on Medicare and a suggestion was made to integrate Medicaid and CHIP into the measure development and selection process.

MAP Dual Eligible Beneficiary Workgroup December 20, 2013 Web Meeting Summary

- The Dual Eligible Beneficiaries Workgroup agreed with the concept of a core set of measures begun by the Clinician Workgroup to increase the likelihood that cross-cutting measures relevant to vulnerable beneficiaries would be used. They also agreed on the need for more shared accountability programs like health homes.

Opportunity for Public Comment

- A member of the public requested follow-up on any measures of quality of life from CAHPS or the National Core Indicators because of the high prevalence of medical-behavioral health issues among dual eligible beneficiaries.

Summary and Next Steps

This meeting concluded with a reminder of important dates and meetings:

- January 7-8: MAP Coordinating Committee Meeting
- January 13-27: Public Comment on MAP Pre-Rulemaking Report
- February 1: MAP Pre-Rulemaking Report Due to HHS
- Mid-February: Public Comment on Duals Report
- February 28: Dual Eligible Beneficiaries Workgroup Report Due to HHS
- Mid-March: Web Meeting of Dual Eligible Beneficiaries Workgroup
- April 10-11: In-Person Meeting of Dual Eligible Beneficiaries Workgroup