

# **MEASURE APPLICATIONS PARTNERSHIP**

*Convened by the National Quality Forum*

## **Summary of All MAP Member Web Meeting #2**

A web meeting of All Measure Applications Partnership (MAP) members was convened on Friday, December 8, 2011. For those interested in viewing an online archive of the web meeting, please use the link below:

<http://www.myeventpartner.com/nqfmeetings/E954D881864E>

### **Coordinating Committee and Workgroup Members in Attendance at the December 8, 2011 Web Meeting:**

*Please see attachment for a listing of members in attendance.*

The primary objectives of the web meeting were to:

- Review HHS list of measures under consideration for 2012 rulemaking,
- Preview approach to MAP workgroups' pre-rulemaking task,
- Consider MAP Dual Eligible Beneficiaries Workgroup cross-cutting input.

### **Welcome and Review of Meeting Objectives**

Coordinating Committee Co-Chair, George Isham, began the meeting with a welcome and review of the meeting objectives.

### **MAP Pre-Rulemaking Approach**

Tom Valuck, Senior Vice President, Strategic Partnerships, NQF, provided an overview of the MAP pre-rulemaking approach. Dr. Valuck began by describing the charge of the Coordinating Committee, which specifies—pursuant to section 3014 of the Affordable Care Act—that the MAP provide annual input to HHS on the selection of performance measures for use in public reporting, performance-based payment, and other programs. Additionally, he spoke of the MAP vision, the current landscape of “siloed” federal programs, and the use of core measure sets as a bridge across federal programs and between the vision and federal programs. Finally, Dr. Valuck described plans for a strategic planning process for the MAP in 2012.

### **HHS List of Measures under Consideration**

Patrick Conway, CMS Chief Medical Officer and Director of Office of Clinical Standards and Quality, presented the HHS list of measures under consideration for MAP pre-rulemaking input. Dr. Conway covered the statutory requirement and goals and objectives of the pre-rulemaking process, noting the difference between the federal rulemaking process and the pre-rulemaking process and providing a broad overview of CMS' measure implementation cycle. He presented the programs MAP will provide input on and noted that additional programs are listed for contextual purposes and harmonization.

Following Dr. Conway's presentation, Committee and workgroup members asked questions regarding the composition of the list, the timing for public comment, and alignment with the National Quality Strategy.

### **MAP Workgroup Pre-Rulemaking Task**

Connie Hwang, Vice President, Measure Applications Partnership, NQF, presented the MAP Measure Selection Criteria, stating that the Coordinating Committee finalized the criteria at their November 1-2 In-person meeting. Dr. Hwang also described the proposed stepwise approach and supporting materials the workgroups will use in their pre-rulemaking meetings. The workgroups will provide recommendations based on their assessment of the HHS list of measures under consideration for pre-rulemaking to the Coordinating Committee for review at their meeting on January 5-6, 2012.

Following Dr. Hwang's presentation, Committee and workgroup members discussed how the MAP Measure Selection Criteria reflect the cascading measures concept and parsimony for the setting-specific core measures.

### **MAP Dual Eligible Beneficiaries Workgroup Cross-Cutting Input**

Alice Lind, Chair of the MAP Dual Eligible Beneficiaries Workgroup, provided an overview of the dual eligible population and described workgroup-specific considerations for this population. Ms. Lind presented the high-leverage areas for quality improvement and the proposed core measures defined by the Dual Eligible Beneficiaries Workgroup. She advised that the MAP workgroups can use this information to inform deliberations at their upcoming meetings. At their December 16 web meeting, the Dual Eligible Beneficiaries Workgroup will review the other three workgroups' recommendations in the context of the needs of the dual eligible population.

Following Ms. Lind's presentation, a MAP member suggested further consideration be given to the fragmentation of benefits between the Medicare and Medicaid programs and how the lack of coordination may impact delivery of care. Additionally, a member of the public audience suggested that the workgroup's efforts be coordinated with other initiatives that currently address quality issues for the dual eligible beneficiaries population.

### **Next Steps**

The next meeting of the MAP Coordinating Committee is January 5-6, 2012, in Washington D.C.

## MAP Coordinating Committee and Workgroup Members in Attendance

### Coordinating Committee:

*(attendance was optional)*

George Isham, Co-Chair  
Aparna Higgins, AHIP  
Bobbie Berkowitz, Population Health  
Carl Sirio, AMA  
Cheryl Phillips, LeadingAge  
Chesley Richards, CDC  
Chip Kahn, FAH  
Christine Bechtel, NPWF  
David Baker, ACP  
Doris Peter, Consumers Union  
Elizabeth Mitchell, Maine Health Management Coalition

Foster Gesten, NAMD  
Gerald Shea, AFL-CIO  
Harold Pincus, Mental Health  
Ira Moscovice, Rural Health  
Joyce Dubow, AARP  
Marissa Schlaifer, AMCP  
Maureen Dailey, substitute, ANA  
Patrick Conway, CMS  
Rhonda Anderson, AHA  
Sam Lin, AMGA  
Suzanne Delbanco, Catalyst for Payment Reform  
William Kramer, PBGH

### Dual Eligible Beneficiaries Workgroup:

Alice Lind, Chair  
Adam Burrows, National PACE Association  
Cheryl Powell, CMS Federal Coordinated Health Care Office  
Daniel Kivlahan, VHA  
Gail Stuart, Nursing  
Henry Claypool, HHS Office on Disability  
Juliana Preston, Measure Methodologist  
Laura Linebach, LA Care Health Plan  
Lawrence Gottlieb, Disability  
Leonardo Cuello, National Health Law Program

Mady Chalk, Substance Abuse  
Margaret Nygren, AAIDD  
Patricia Nemore, Center for Medicare Advocacy  
Patrick Murray, Better Health Greater Cleveland  
Rita Vandivort, SAMHSA  
Sally Tyler, AFSCME  
Samatha Wallack, HRSA  
Steve Counsell, NAPH  
Tom James, Humana

### PAC/LTC Workgroup:

Carol Spence, NHPCO  
Charissa Raynor, SEIU  
Debra Saliba, Measure Methodologist  
Emilie Deady, VNAA  
Gerri Lamb, Care Coordination  
James Lett, NTOCC  
Judith Sangl, AHRQ  
Lisa Tripp, National Consumer Voice for Quality Long-Term Care  
Maryanne Lindeblad, State Medicaid

Randall Krakauer, Aetna  
Robert Hellrigel, Providence Health and Services  
Roger Herr, APTA  
Scott Shreve, VHA  
Sean Muldoon, Kindred Healthcare  
Shari Ling, CMS  
Suzanne Snyder, AMRPA  
Tom von Sternberg, HIT

### Clinician Workgroup:

Amy Compton-Phillips, Kaiser Permanente  
Beth Averbeck, Minnestoa Community Measurement  
Bruce Bagley, AAFP  
Cheryl DeMars, The Alliance  
David Seidenwurm, ACR  
Dolores Yanagihara, Measure Methodologist

Joanne Conroy, AAMC  
Joseph Francis, VHA  
Karen Sepucha, Shared Decision Making  
Mark Metersky, PCPI  
Marshall Chin, Disparities  
Mary Goolsby, AANP  
Peter Briss, CDC  
Rachel Grob, Center for Patient

Douglas Burton, AAOS  
Elizabeth Gilbertson, Unite Here Health  
Eugene Nelson, Population Health  
Frederick Masoudi, ACC  
Ian Corbridge, HRSA  
Janet Brown, ASHA

Partnerships  
Robert Krughoff, Consumer  
CHECKBOOK  
Ronald Stock, Team-Based Care

**Hospital Workgroup:**

Frank Opelka, Chair  
Ann Sullivan, Mental Health  
Barbara Caress, Building Services 32BJ Health  
Fund  
Brock Slabach, NRHA  
Bruce Siegel, Safety Net  
Dale Shaller, Patient Experience  
Delores Mitchell, State Policy  
Jane Franke, BCBS of Massachusetts  
Kasey Thompson, ASHP

Lance Roberts, IHC  
Michael Kelley, VHA  
Mitchell Levy, Patient Safety  
Pamela Cipriano, ONC  
Patricia Conway-Morana, AONE  
Richard Bankowitz, Premier  
Ronald Walters, ADCC  
Sean Morrison, Palliative Care