



MAP Health Insurance Exchange Quality Rating System Task Force Teleconference
December 20, 2013 | 10:00 am – 12:00 pm ET

The National Quality Forum (NQF) convened the Measure Applications Partnership (MAP) Health Insurance Exchange (HIX) Quality Rating System (QRS) Task Force on Friday, December 20, 2013 via teleconference. An online archive of the meeting is available by clicking [here](#).

Task Force Attendance

Elizabeth Mitchell, Task Force Chair	George Andrews, Humana, Inc.
Alison Shippy, National Partnership for Women and Families	Joyce Dubow, American Association of Retired Plans
Andrew Baskin, Aetna	Marissa Schlaifer, Academy of Managed Care Pharmacy
Aparna Higgins, America's Health Insurance Plans	Mark McClellan, The Brookings Institute
Chandra Torgerson, SNP Alliance	Steven Brotman, The Advanced Medical Technology Association
Christie Upshaw Travis, Memphis Business Group on Health	Terry Adirim, Health Resources and Services Administration
Cynthia Pellegrini, March of Dimes	Thomas von Sternberg, subject matter expert: Health IT
Deborah Greene, Centers for Medicare & Medicaid Services (CMS)	Tom Granatir, American Board of Medical Specialties (substitute for Lois Nora)

Welcome and Review of Meeting Objectives

Elizabeth Mitchell, Task Force Chair, welcomed the task force members and public to the teleconference and briefly reviewed the meeting objectives. The teleconference was held as a follow-up to the November 20-21, 2013 in-person meeting. The objectives were to:

- Finalize recommendations on the proposed QRS structure, hierarchical organization, and measures for the QRS family and child core sets; and
- Finalize input on MAP's recommended organization of measures to best support consumer decision-making.

Confirming MAP's Recommended Structure and High-Leverage Opportunities

Aisha Pittman, Senior Director, NQF, reviewed the recommended structure established by the task force and finalized the high-leverage opportunities for the QRS. Ms. Mitchell facilitated task force discussion of three high-leverage opportunities: utilization management, member complaints and grievances, and care for older adults. The task force determined to:

- Retain member complaints and grievances and care for older adults, noting that no specific measures have been proposed for the QRS to address these issues.
- Remove utilization management from the list of high-leverage opportunities; efficient resource use is preferred for enabling consumer decision-making.

PAGE 2

Input on the Proposed Core Sets of Measures

Ms. Pittman provided an overview of three proposed measures for the core set. Ms. Mitchell facilitated the task force discussion:

- CAHPS – Cultural Competency is conditionally supported by the task force and requires further experience and testing prior to implementation.
- Adolescent Well-Care Visits was discussed and tabled during the in-person meeting. The task force determined the measure does not address the current needs of the program and recommends the measure not be included QRS.
- Medication Management for People with Asthma was evaluated by the task force against other available NQF-endorsed measures at the health plan level of analysis. The task force supports the measure for inclusion in the proposed core sets.

Input on the Proposed Structure

Ms. Pittman summarized a comparison of MAP's recommended structure and the structure proposed by HHS for the QRS and Ms. Mitchell facilitated the discussion. The task force encourages HHS to consider making the recommended modifications to the proposed structure. The task force also emphasized the importance of thoroughly testing the final structure and language with consumers prior to implementation.

Measures for Gaps in the Proposed Measures for the QRS

Ms. Pittman presented the high-leverage opportunities for the QRS that are not addressed by the proposed core set of measures. Ms. Mitchell facilitated the task force consideration of the available NQF-endorsed measures at the health plan level, the task force identified measures that should be considered for future inclusion:

- NQF #0541 Proportion of Days Covered (PDC): 5 rates by Therapeutic Category can address medication management.
- NQF #1560 Relative Resource Use for People with Asthma and NQF #1561 Relative Resource Use for People with COPD could compliment the set of resource use measures.

Next Steps

The public comment period on the draft recommendations for the proposed QRS structure is December 23, 2013 through January 6, 2014. Following the MAP Coordinating Committee finalization of the draft recommendations and public comments on January 8, 2014, final recommendations will be submitted to CMS.