

MEASURE APPLICATIONS PARTNERSHIP STRATEGY TASK FORCE

Convened by the National Quality Forum

Summary of In-Person Meeting #1

An in-person meeting of the Measure Applications Partnership (MAP) Strategy Task Force was held on Thursday, April 12, 2012. For those interested in reviewing an online archive of the web meeting, please click on the link below:

[Meeting Recordings - April 12, 2012](#)

Strategy Task Force Members in Attendance at meeting:

Chip Kahn, MAP Strategy Task Force Co-Chair	Alice Lind, MAP Dual Eligible Beneficiaries Workgroup Chair (phone)
Gerald Shea, MAP Strategy Task Force Co-Chair (phone)	Frank Opelka, MAP Hospital Workgroup Chair
Christine Bechtel, MAP Coordinating Committee Member	Bernard Rosof, National Priorities Partnership Co-Chair (phone)
Patrick Conway, Centers for Medicare & Medicaid Services	Nancy Wilson, Agency for Healthcare Research and Quality

The primary objectives of the meeting were to:

- Set MAP 3-year strategic goals for performance measurement to enable improvement, transparency, and value
- Review ongoing measure evaluation efforts and discuss MAP evaluation strategy
- Discuss proposed MAP 2012-2013 scope of work
- Define enhancements to the MAP Measure Selection Criteria
- Determine how to strengthen MAP-NPP alignment
- Finalize approach for the strategic plan outline due to HHS June 1

Welcome and Review of Meeting Objectives

Strategy Task Force Co-Chairs, Chip Kahn and Gerald Shea, began the meeting with a welcome and review of the meeting objectives.

Performance Measurement for Improvement, Transparency, and Value and MAP 3-Year Strategic Goals

Strategy Task Force members discussed MAP's overall goals. Members highlighted that MAP's work should align with the aims, priorities, and goals of the National Quality Strategy (NQS). To advance the NQS, MAP's efforts should ensure that performance measurement yields improvement for clinicians and providers, offers greater transparency for consumers and purchasers, and that measurement efforts generate value to society. Members observed that in the current measurement landscape improvement and transparency are not yielding maximum value. The group also discussed how MAP can best meet the needs of various stakeholders in the quality measurement enterprise. The group stressed the importance of identifying when issues might be better addressed by other stakeholders, citing health disparities as an example of an issue that could be more effectively addressed by the National Priorities Partnership (NPP).

Measure Evaluation Efforts and MAP Evaluation Strategy

The Strategy Task Force discussed the need for measure use and impact analyses to inform MAP's decision-making. Two ongoing and planned efforts to assess the use and impact of performance measurement were presented. First, Patrick Conway, CMS, provided an overview of a recent study that assessed the performance trends of measures in federal healthcare programs. Next, Ayodola Anise, Engelberg Center for Health Care Reform at Brookings, presented plans for an environmental scan of performance measurement implementation efforts that will be conducted by the Quality Alliance Steering Committee (QASC).

Strategy Task Force discussions focused on how other initiatives, along with the work of CMS and QASC, can serve as important inputs to MAP. The group discussed evaluating what MAP has done to date to meet the needs and goals of all stakeholders, including front-line providers as well as patients and families. To conclude this agenda item, the members emphasized the importance of assessing MAP's progress and the impact of MAP's recommendations. Task force members also highlighted that a MAP evaluation strategy must cross levels of analysis, lifespan (including ages 18-64), and the public and private sectors.

Proposed MAP 2012-2013 Scope of Work

Connie Hwang, Vice President Measure Applications Partnership, NQF, presented the proposed MAP scope of work for 2012-2013. In her presentation, Dr. Hwang highlighted the proposed enhanced structure of the MAP, introducing time-limited, content-focused task forces that will identify families of measures related to high-priority topics. These task forces will directly advise the Coordinating Committee and will be comprised of MAP members. There was general agreement with MAP 2012 activities, as proposed. Strategy Task Force members raised the importance of strategic plan development staying connected with other activities within the quality measurement enterprise to ensure synergy.

Enhancing MAP's Measure Selection Criteria

The Strategy Task Force then reviewed the MAP Measure Selection Criteria in light of the goals. Members emphasized that all measures should promote improvement, transparency, and add value to the health care system. Task force members also emphasized needing a more global strategy for addressing disparities. There was discussion on an adequate definition of "parsimony" for criterion #4: Program measure set promotes parsimony. The members agreed to define parsimony as the fewest number of measures needed to accomplish program goals. Finally, task force members suggested creating a criterion for removing measures from program measure sets. Actual changes to the MAP Measure Selection Criteria will be discussed and considered in greater detail at subsequent task force meetings.

MAP-NPP Relationship

Bernard Rosof, Co-Chair of the NPP, presented on NPP's recent input to HHS on the 2012 National Quality Strategy (NQS). The aim of their input was to make the NQS more actionable by identifying measureable goals and recommending strategic opportunities. Additionally, Dr. Rosof discussed the importance of promoting bi-directional communication and integration between the work of NPP and MAP. Strategy Task Force members concurred and provided suggestions for connecting MAP and NPP activities.

Summary and Next Steps

The meeting concluded with a discussion of next steps. The next meeting of the Strategy Task Force will be an in-person meeting on June 18.