

# Becoming a TEP Member

How Patients, Families, & Caregivers Can Make  
a Difference on Technical Expert Panels (TEPs)  
to Improve Quality Measures



# Overview

- This document is for people who have experience with the health care system—either as a patient, a family member of a patient, or caregiver—and may want to get involved in improving health care.
- You’ll learn more about Technical Expert Panels (TEPs), quality measures, and how you can join a TEP to help make health care better.
- The information in this document is about TEPs for quality measures that are under contract with the Centers for Medicare & Medicaid Services (CMS).

“I realized after the first meeting that this was a way for a patient to actually change things for the better for thousands of patients.”

–D.F., patient with end-stage renal disease (ESRD) and 4-time TEP participant

# How to use this document

This document was made to be read from start to finish. However, if you want to jump to certain parts, this PDF has several navigation features to help you.

- The next page is a menu to help you find the information you need. Click on any of the **bulleted items** in the menu to skip forward to that section.
- There is also a **Return to Main Menu button** at the end of each section. When available, the button is in the upper right-hand corner of the page.
- Some text **links to webpages** to help you find more information. This text is underlined to show you can click on it.

- Introduction to TEPs and Measures
- How Technical Expert Panels (TEPs) Work
- How You Can Participate in a TEP
- How You Can Join a TEP
- When You Are Selected for a TEP
- Where to Find Additional Information



# Introduction to TEPs and Measures

# What is a Technical Expert Panel (TEP)?

A technical expert panel (TEP) is a group of people that shares ideas and opinions to help develop a quality measure or address another quality measurement topic.



# What is a Technical Expert Panel (TEP)? (cont.)

- TEPs work best with a diverse group of people, including patients, family members, caregivers, health care professionals, patient advocates, statisticians, quality improvement experts, electronic health record vendors, and measure developers.
- As a patient, family member, or caregiver on a TEP, you can offer a unique perspective thanks to your experience with the health care system. You can help measure developers and CMS create measures that are easily understood, relevant, and useful to other people experiencing care and services in the health care system.

# What are quality measures?

Quality measures are tools that measure whether the health care system is effective, safe, efficient, patient-centered, equitable, or timely.

[More detail is available on the CMS site here.](#)



The screenshot shows the CMS.gov website interface. At the top, there is a navigation bar with links for Home, About CMS, Newsroom, Archive, Share, Help, and Print. Below this is the CMS.gov logo and the text 'Centers for Medicare & Medicaid Services'. A search bar is located on the right side of the header. The main navigation menu includes buttons for Medicare, Medicaid/CHIP, Medicare-Medicaid Coordination, Private Insurance, Innovation Center, Regulations & Guidance, Research, Statistics, Data & Systems, and Outreach & Education. The breadcrumb trail reads: Home > Medicare > Measures Management System > What is a Quality Measure. Below the breadcrumb trail is a row of navigation buttons: Measures System Overview, Measures Development, Get Involved, Tools & Resources, New to Measures, and Popular Links. The main content area is titled 'What is a Quality Measure?' and contains the following text:

Quality measures, which can also be referred to as Clinical Quality Measures (CQMs) and electronic Clinical Quality Measures (eCQMs), are tools that help measure or quantify healthcare processes, outcomes, patient perceptions, and organizational structure and/or systems that are associated with the ability to provide high-quality health care and/or that relate to one or more quality goals for health care. These goals include: effective, safe, efficient, patient-centered, equitable, and timely care.

Measurement is a step in improving health care quality, and quality measures help drive that improvement through a consistent and accountable approach. While each measure focuses on a different aspect of health care delivery, together they provide a more comprehensive picture of the quality of healthcare. CQMs and eCQMs measure many aspects of patient care including:

- Health outcomes
- Clinical processes
- Patient safety
- Efficient use of health care resources
- Care coordination
- Patient engagements
- Population and public health
- Adherence to clinical guidelines

A measure is made up of several components. It has a title and description of what it is. It must also have a numerator, denominator, and denominator exclusions. The **numerator**, which is also called the measure focus, describes the target process, condition, event, or outcome expected for the targeted population. The **denominator** defines the population being measured—it could be the whole population or a subset. The **denominator exclusion** identifies members of this population who should be removed from the measure population, and hence the denominator, before determining if numerator criteria are met. Below is an example of a measure and what those components look like and mean:

**Measure Title:** Controlling High Blood Pressure

**Description:** Percentage of patients 18-85 years of age who had a diagnosis of hypertension and whose blood pressure was adequately controlled (< 140/90 mmHg) during the measurement period.

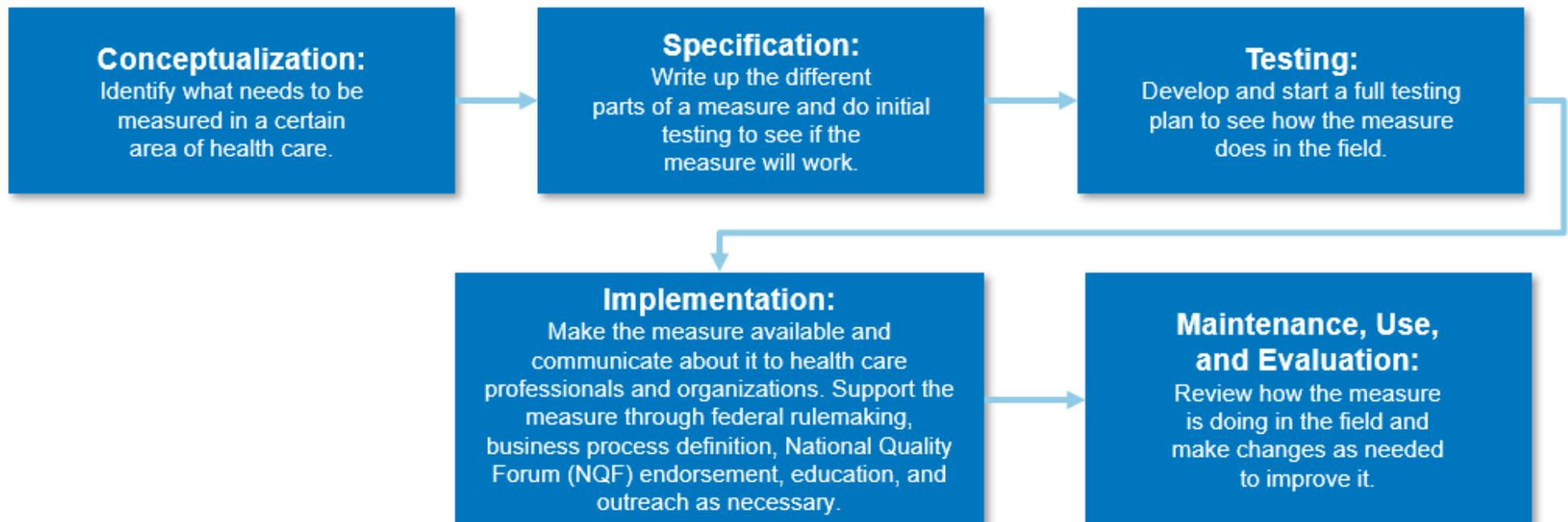
# What are quality measures? (cont.)

## Here's an example of a quality measure:

- A quality measure was developed that measures how often health care organizations give foot exams to their patients with diabetes.
- The reason this measure was developed is because people with diabetes can get foot infections more easily than others. Research shows that regular foot exams can help with this problem. By finding more foot-related problems early, we can prevent foot infections or treat them earlier, which saves lives, improves patients' well being, and lowers costs.

# How are quality measures made?

Quality measures start as an idea or concept and are developed by following a structured path, which is outlined in the CMS Blueprint. The path looks like this:



# How do TEPs help improve health care?

Technical Expert Panels (TEPs) help with the development of quality measures. People on a TEP, including patients and their family members and caregivers, share their ideas and experiences to help make the measures as good as they can be.

By serving on a TEP, you can help CMS put patients first and help our health care system reach 6 quality priorities.

## 6 Quality Priorities

1. Promote Effective Communication and Coordination of Care
2. Promote Effective Prevention and Treatment of Chronic Disease
3. Work with Communities to Promote Best Practices of Healthy Living
4. Make Care Affordable
5. Make Care Safer by Reducing Harm Caused in the Delivery of Care
6. Strengthen Person and Family Engagement as Partners in Their Care

# Why are patients and family members involved in TEPs?

Patients, family members, and caregivers have a key viewpoint on what is important in health care. CMS has made it a top priority to get this group involved in TEPs, encouraging measure developers to:

- Include at least one patient, family member, or caregiver who can share their experience related to the measure topic. More than one is strongly encouraged.
- Get patients, family members, and caregivers involved as soon as possible.





# How Technical Expert Panels (TEPs) Work

# The role of TEPs in measure development

To help with measure development, TEP members use their knowledge and experience to:

- Review new measure ideas and help decide which ones should be developed further
- Review results from the testing of measures that are currently being developed
- Advise the measure developer on which measures should be recommended to CMS based on criteria, including if patients will find the measure(s) meaningful and important
- Give feedback on other quality measurement and measure development topics



# Expectations of TEP members

The expectations for TEP members are different for each TEP. The expectations for each TEP can be found in the application information, which is in the [Currently Accepting Nominations announcement](#), under “TEP Expected Time Commitment.”

In general, you will be expected to share your unique perspective. You will also:

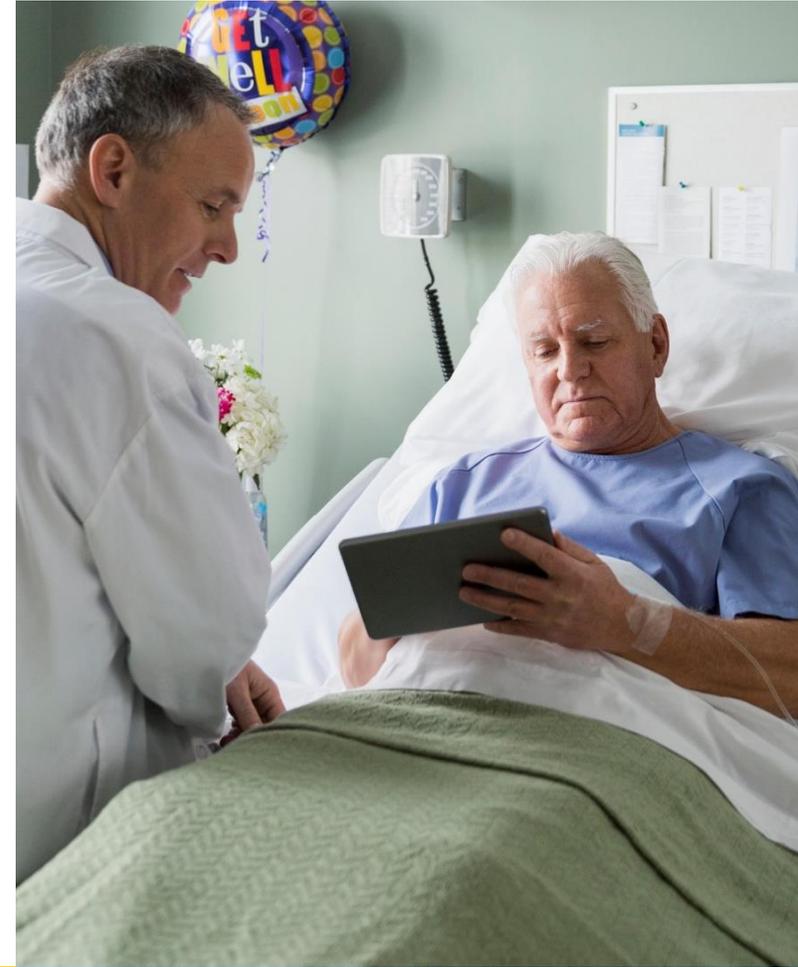
- Participate in several meetings about improving the quality of health care
- Agree to have your comments shared with the general public
- Be available for all TEP activities for the given timeframe.



# Types of TEP members

TEPs work best when they are made up of diverse people. Two key groups of people are patients, family members, and caregivers:

- **Patients** are individuals who are participating in their health and wellness. This might be someone who sees their primary care practitioner once a year, who gets home health service, uses home and community-based services, or who uses hospital services.
- **Family members and caregivers** are people who support a patient receiving health care and need support making informed health care decisions. This can include informal or primary caregivers.



# Types of TEP members *(cont.)*

[Return  
to Main  
Menu](#)

Other key types of TEP members include:

- **Clinicians:** health care professionals who provide care for patients and includes physicians, nurses, pharmacists, or other allied health professionals.
- **Facilities:** organizations that provide services and support to patients, including hospitals, skilled nursing facilities, home health agencies, community-based providers, and outpatient centers.
- **Measure developers:** responsible for the development, implementation, and maintenance of measures.
- **Other stakeholder groups:** includes health insurance providers, academic researchers, and local, state, and federal government agencies.



## How You Can Participate in a TEP

# Unique contributions of Patients and Family Members

- Your experiences make you an expert!
- Your input can help developers design better quality measures by balancing your needs with other stakeholder needs.
- You'll be able to share:
  - Your health care experience
  - What health care quality issues are most important to you
  - What information you need to make informed health care decisions



# Why get involved

## **As a member of a TEP, you can:**

- Share your point of view on health care issues that are important to you
- Ensure that patients, families, and caregivers provide input on issues that affect people 'on the ground'

## **You can also help measure developers:**

- Get input from a diverse group of experts, especially the people who are using health care
- Build measures that are useful and easy to understand

## **Finally, you'll be able to help CMS:**

- Develop messaging to reflect issues that are important to the public
- Identify information that consumers need to make health decisions

# Case Study of a TEP Member

## Background:

- D.F. had a lot of experience with the health care system as an end-stage renal disease (ESRD) patient looking for solutions.
- Before joining his first TEP, he had no experience with the TEP process.
- But he had an analytical background, knew his experience with ESRD treatment was meaningful, and wanted to help with an issue that affected him personally.

# Case Study of a TEP Member



## Joining the TEP:

- Through his involvement with an ESRD network, D.F. got an opportunity to join a TEP related to his personal experience with vascular access.
- At first, he was intimidated and did not fully understand his role on the TEP.
- Soon, he felt welcomed, comfortable, and supported.

# Case Study of a TEP Member

- D.F.'s first TEP led to a vascular access measure that will soon be in use.
- Previously, having a catheter was a drawback to ESRD patients trying to get a transplant, so he felt that sharing his opinion and experiences made a difference.
- Since then, he has served on 4 other TEPs and worked with the National Kidney Foundation (NKF).
- With NKF, he is a leader and mentor in a networking group that works to ensure at least one patient serves on every TEP. To date, patients affiliated with NKF have served on more than 20 TEPs.
- D.F. and his group are helping patients and improving the culture of health care.

# Case Study of a TEP Member

[Return  
to Main  
Menu](#)

## D.F.'s Recommendations for Patients

- Get involved with TEPs to share your health care experience.
- Your experience and ideas are important to the TEP, so be sure to speak up in TEP meetings.
- Learn what you can about quality measurement because you can help improve health care.

“I was able to help change how things are measured to protect patients a bit better.”

–D.F., patient with end-stage renal disease (ESRD) and 4-time TEP participant



## How You Can Join a TEP

# Where to find information about current TEPs

Want to know what TEPs are seeking members?

- Visit the [TEP Currently Accepting Nominations webpage](#) to see what TEPs are forming today.
- For more information about a TEP, download the .zip file in the Downloads section at the bottom of the page.

The screenshot shows the CMS.gov website interface. At the top, there is a navigation bar with links for Home, About CMS, Newsroom, Archive, Share, Help, and Print. Below this is the CMS.gov logo and the text 'Centers for Medicare & Medicaid Services'. A search bar is located on the right side of the header. The main navigation menu includes buttons for Medicare, Medicaid/CHIP, Medicare-Medicaid Coordination, Private Insurance, Innovation Center, Regulations & Guidance, Research, Statistics, Data & Systems, and Outreach & Education. Below the navigation menu, there is a breadcrumb trail: Home > Medicare > Measures Management System > Currently Accepting Nominations. A secondary navigation bar contains buttons for Measures System Overview, Measures Development, Get Involved, Tools & Resources, New to Measures, and Popular Links. The main content area is titled 'Technical Expert Panels: Currently Accepting Nominations Link'. It contains a paragraph explaining the purpose of the page: 'This page serves as the designated site that is used to solicit nominations for technical expert panel members for CMS measure development and maintenance contractors. Individuals with expertise in the relevant fields including clinicians, statisticians, quality improvement, methodologists, and pertinent measure developers, as well as consumers, are encouraged to submit nominations. Person and family membership on TEPs is a very important part of the measure development process. TEP members are chosen to provide input to the measure contractor based on their personal experience and training. It is critical to the success that TEP members represent a diversity of perspectives and backgrounds.' Below this is a section titled 'TEPs Accepting Nominations:' with a bulleted list of projects: 'Development of Two Outpatient Outcome Measures for the Merit-based Incentive Payment System (MIPS)', 'Impact Assessment of CMS Quality and Efficiency Measures', and 'MACRA Episode-Based Cost Measures - Call for Clinical Subcommittee'. The 'Project Title' is 'Development of Two Outpatient Outcome Measures for the Merit-based Incentive Payment System (MIPS)'. The 'Dates' section states: 'Update: The Clinician Committee nomination period has been extended and will now close on October 19, 2018.' The 'Project Overview' section states: 'The Centers for Medicare & Medicaid Services (CMS) has contracted with Yale New Haven Health Services Corporation – Center for Outcomes Research and Evaluation (CORE) to develop two outpatient outcome measures for the Merit-based Incentive Payment System. The two measures will assess the quality of care provided by clinicians who are eligible to participate in the MIPS (hereinafter, MIPS eligible clinicians).'

1. A measure focused on care provided for patients with heart failure (hereinafter, MIPS heart failure measure): The heart failure measure will assess admissions among a cohort of ambulatory patients with a diagnosis of heart failure.
2. A measure focused on care provided for patients with diabetes (hereinafter, MIPS diabetes measure): The diabetes measure will assess hospitalizations and

# Getting nominated for a TEP

Once you find an open TEP that matches your background and interests, you must be nominated, either by yourself or by someone else. To submit a nomination, fill out and turn in the following documents, as requested in the [“Currently Accepting Nominations” announcement](#):

- The **nomination form**. There will either be a link to an online form in the announcement or a .zip file to download at the bottom of the Currently Accepting Nominations page in the Downloads section.
- A **letter of interest** highlighting experience and knowledge that’s relevant to the measure being developed

CLINICIAN COMMITTEE NOMINATION FORM

Project Title:  
Development of Two Outpatient Outcome Measures for the Merit-based Incentive Payment System (MIPS)

Dates:  
Update: The Clinician Committee nomination period has been extended and will now close on October 19, 2018.

Project Overview:  
The Centers for Medicare & Medicaid Services (CMS) has contracted with Yale New Haven Health Services Corporation – Center for Outcomes Research and Evaluation (CORE) to develop two outpatient outcome measures for the Merit-based Incentive Payment System. The two measures will assess the quality of care provided by clinicians who are eligible to participate in the MIPS (hereinafter, MIPS eligible clinicians).

1. A measure focused on care provided for patients with heart failure (hereinafter, MIPS heart failure measure): The heart failure measure will assess admissions among a cohort of ambulatory patients with a diagnosis of heart failure.
2. A measure focused on care provided for patients with diabetes (hereinafter, MIPS diabetes measure): The diabetes measure will assess hospitalizations and emergency department (ED) visits for hyperglycemia and hypoglycemia among a cohort of patients with diabetes.

Each measure will be risk-adjusted for patient complexity. The quality measure scores will be calculated using patient characteristics and outcomes documented on routinely submitted Medicare claims; therefore, the clinicians whose performance will be assessed by the quality measures will not need to submit any additional data directly to CMS.

In this posting, CORE is recruiting clinicians and professional society representatives to participate on Clinician Committees to inform the development of each of the measures. CORE will convene one Clinician Committee for the heart failure measure and another for the diabetes measure. We will ask Committee members to review materials and provide input to help shape the measures, such as which types of outcomes should be counted in the measures.

The contract name is Measure & Instrument Development and Support (MIDS); Development, Reevaluation, and Implementation of Outpatient Outcome/Efficiency Measures. The contract number for both the heart failure and diabetes measures is HHSM-500-2013-13018L.

Requirements:

# Getting nominated for a TEP (cont.)



Additional documents to submit with your nomination:

- A **resume, curriculum vitae, or other document that lists relevant experience**, including publications (this is optional for patients.)
- The **confidentiality agreement** (also in the .zip file)
- If you are nominating someone else, you must **confirm that you have told that person about your nomination** and they're interested in serving on a TEP



# Tips for filling out the nomination form

**These tips can help improve your chances of being selected for a TEP:**

- Submit **all** requested materials on or before the due date.
- Make sure that your letter of interest provides strong support for how your experience and knowledge are relevant to the topics that the TEP will discuss. If you've served on a TEP or other committee before, be sure to mention that, too.
- For patients, family members, and caregivers, your experience and knowledge includes your personal experiences with a health condition, treatment, and/or service/support that's involved in the measure being developed.

# Tips for filling out the nomination form (cont.)

Return  
to Main  
Menu

More tips to help improve your chances of being selected for a TEP:

- To make your nomination stand out, highlight the unique perspective you can bring to the TEP.
- If you have more questions about a TEP that you're interested in, contact the TEP coordinator directly. Contact information is at the bottom of the [“Currently Accepting Nominations” announcement.](#)





## When You Are Selected for a TEP

# What happens when you are selected?

- After the nomination deadline passes, a team will review the nomination materials and choose people to be on the TEP.
- If you're selected, the TEP coordinator will contact you and explain the next steps.
- Once selected, you will also have to provide a list of any conflicts of interest you may have, including any significant financial interests or other relationships that may influence your participation.

**Note:** If you aren't selected for the TEP, you may still be a good match for a different TEP. You can stay involved by [nominating yourself for other TEPs](#) that match your experience, signing up for the [MMS Newsletter](#), and participating in [public comments on proposed measures](#).

# Your involvement during the TEP

Participants have different responsibilities depending on the TEP. In addition to the expectations described in the Call to Nominations, the TEP coordinator will give you more details. However, usually you will be asked to:

- Read the TEP Charter and information about the measure being developed.
- Attend TEP meetings. Usually they're held virtually but sometimes meetings are in person.
- Share your unique perspective at the meetings and through surveys.

## Can I get reimbursed for expenses I have from participating in a TEP?

Some TEPs offer financial reimbursement, so do not let expenses stop you from applying. You can also contact the TEP leader to find out if such support is offered by a TEP that you are interested in.

# What happens after the TEP?

[Return to Main Menu](#)



After the TEP you'll usually be able to:

- Review and comment on the final TEP report before it gets posted on the CMS website.
- Find out what the next steps are for the measure your TEP worked on.
- Stay in touch with the TEP coordinator or other member(s) of the TEP for updates as needed.



## Where to Find Additional Information

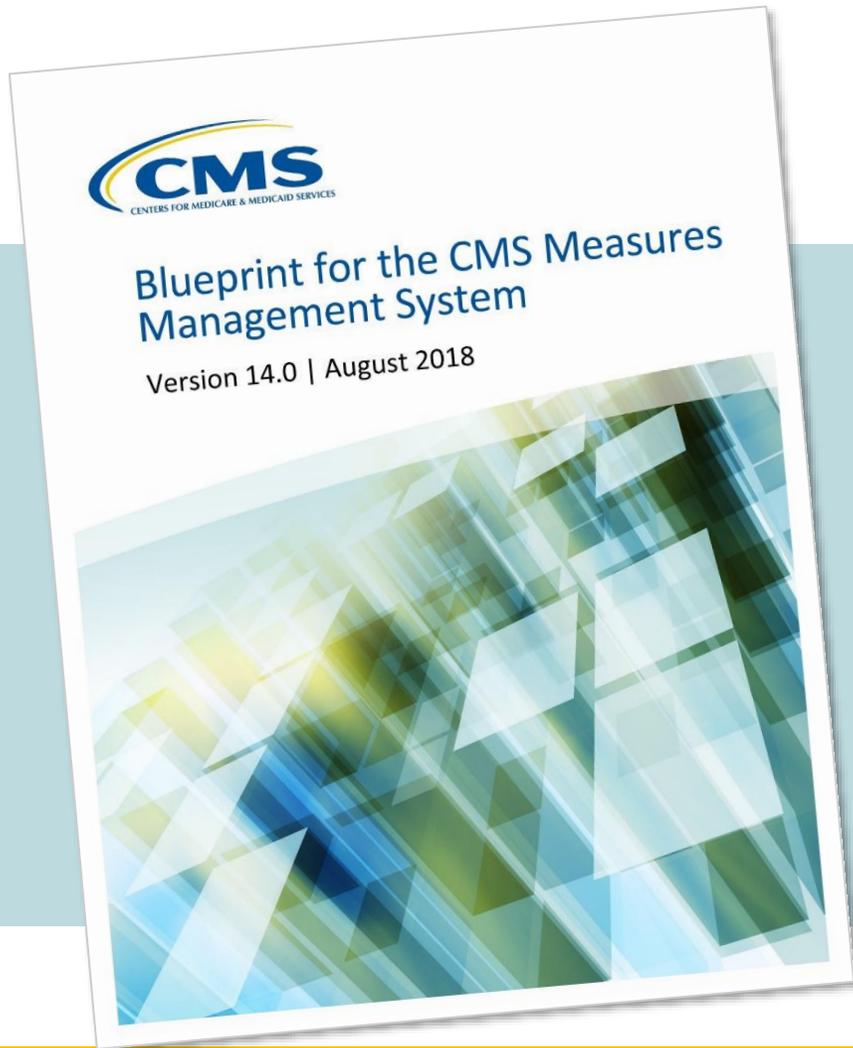
# Resources



- For general questions, email [MMSsupport@battelle.org](mailto:MMSsupport@battelle.org).
- Check out the list of [TEPs that are Currently Accepting Nominations](#).
  - For questions about a specific TEP, contact the TEP leader listed on the TEP description on the Currently Accepting Nominations page.
- [CMS TEP webpage](#): This site provides general information about TEPs involved in developing quality measures. Additional information about CMS's program to develop quality measures can be found elsewhere on this site.



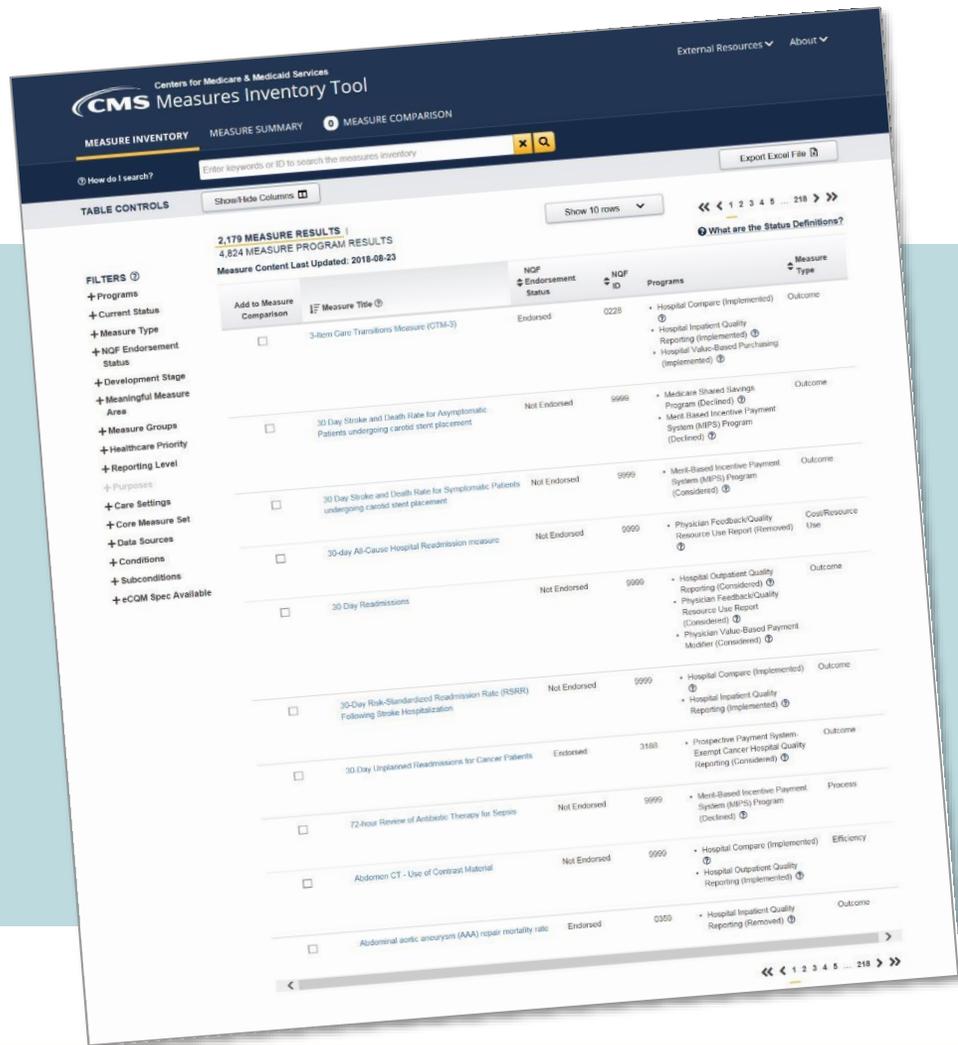
# Additional Resources



**Measure Development Blueprint**: This is the overall guide to the measure development process, including useful detailed steps, forms, and examples.

# Additional Resources

Return to Main Menu



**CMS Measures Inventory Tool**: This site is used by measure developers to learn about past measures that have been created. Using the search tool, you can find out what measures have been created in areas of health care that interest you.



<https://www.cms.gov/>

