

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-500-2013-13018I.

Requirements:

We will convene two Clinician Committees of approximately 15 individuals each (15 for heart failure and 15 for diabetes). We will ensure that each Clinician Committee includes front-line clinicians from rural and/or underserved communities, professional/specialty society representatives, as well as other clinicians caring for patients with these conditions whose expertise reflects the qualifications below.

For the MIPS heart failure measure Clinician Committee:

Subject Matter Expertise: The heart failure measure will assess the quality of outpatient care for patients with heart failure. We are therefore seeking to engage professional society representatives, as well as primary care and specialty clinicians who provide ambulatory care to people with heart failure, or who are involved in the transition of these patients from hospital to home. These specialties include but are not limited to:

1. Cardiology
2. Advanced heart failure specialists
3. Primary care
4. Geriatrics
5. Internal medicine
6. Palliative care

We are specifically looking to include front-line clinicians who treat patients with heart failure and who:

- Practice in rural communities and/or underserved settings (e.g., federally qualified health centers), and/or
- Have expertise in performance measurement, quality improvement, care coordination, and/or health disparities.

For the MIPS short-term diabetes complications measure Clinician Committee:

Subject Matter Expertise: The short-term diabetes complications measure will assess the quality of outpatient care for patients with diabetes (both type 1 and type 2 diabetes). We are therefore seeking to engage professional society representatives, as well as primary care and specialty clinicians who provide ambulatory care to people with diabetes, or who are involved in the transition of these patients from hospital to home. These specialties include but are not limited to:

1. Endocrinology
2. Primary care
3. Family medicine
4. Internal medicine
5. Geriatrics

We are specifically looking to include front-line clinicians who treat patients with diabetes and who:

- Practice in rural communities and/or underserved settings (e.g., federally qualified health centers), and/or
- Have expertise in performance measurement, quality improvement, care coordination, and/or health disparities.

Participation Information:

Participation on the Clinician Committees is voluntary. As such, individuals wishing to participate on one of the committees should understand that their input will be recorded in the meeting minutes. Proceedings of the Clinician Committees will be summarized in a report that is disclosed to the public. If a participant has disclosed private, personal information by his or her own choice, then that material and those communications are not deemed to be covered by patient-provider confidentiality. Any questions about confidentiality will be answered by the public call organizers.

All potential Clinician Committee members must disclose any current and past activities that may pose a potential conflict of interest for performing the tasks required of the committee. All potential members should be able to commit to the anticipated time frame needed to perform the functions of the Clinician Committees.

Expected Time Commitment:

CORE anticipates holding two to three teleconference meetings for each Clinician Committee between October 2018 and July 2019. Teleconference meetings will last approximately two hours. In addition, CORE anticipates holding all-day in-person meetings for each committee in the Baltimore/Washington D.C area in January or February 2019. There are limited per diem and travel funds available for clinicians representing underserved and/or rural communities.

Instructions:

Applicants/nominees must submit the following documents **with this completed and signed form**:

- A letter of interest (not to exceed 1 page) highlighting experience/knowledge relevant to the expertise described above and involvement in measure development.
- Curriculum vitae or a summary of relevant experience for a maximum of 10 pages.

Please send this completed and signed Clinician Committee Nomination form, statement of interest, and CV to CORE with “Nomination” in the subject line at MIPSoutcomemeasures@yale.edu by 5:00 PM Eastern Time on October 19, 2018.

*All potential Clinician Committee members must disclose any significant financial interest or other relationships that may influence their perceptions or judgment. It is unethical to conceal (or fail to disclose) conflicts of interest. However, the disclosure requirement is not intended to prevent individuals with particular perspectives or strong points of view from serving on a Clinician Committee. The intent of full disclosure is to inform the measure developer, other committee members, and CMS about the source of Clinician Committee members’ perspectives and how that might affect discussions or recommendations.

Please indicate which committee(s) for which you are submitting a nomination:

☐ MIPS Heart Failure Measure Clinician Committee

☐ MIPS Short-Term Diabetes Complications Measure Clinician Committee

Applicant/Nominee Information (Self-Nominations are Acceptable):

Name:

Credentials:

Professional Role:

Organizational Affiliation:

City:

State:

Mailing address:

Telephone:

Email:

Person Recommending the Nominee:

Complete this section only if you are nominating a third party for the Clinician Committee. You must sign this form and attest that you have notified the nominee of this action and that they are agreeable to serving on the Clinician Committee. The measure developer will request the required information from the nominee.

Name:

Credentials:

Professional Role:

Organizational Affiliation:

City:

State:

Mailing address:

Telephone:

Email

I attest that I have notified the nominee of this action and that the nominee is agreeable to serve on the Clinician Committee.

Signature: _____

Date: _____

Applicant/Nominee's Disclosure:

This section addresses disclosure of any current and past activities that may indicate a conflict of interest. As a measure developer for the Centers for Medicare & Medicaid Services (CMS), CORE must ensure independence, objectivity, scientific rigor, and balance in its measure development activities.

Do you or any family members have a financial interest, arrangement, or affiliation with any corporate organizations that may create a potential conflict of interest? ☐ Yes ☐ No

If yes, please describe (grant/research support, consultant, speaker's bureau, and major stock shareholder, other financial or material support). Please include the name of the corporation/organization.

Do you or any family members have intellectual interest in a study or other research related to the quality measures under consideration? ☐ Yes ☐ No

If yes, please describe the type of intellectual interest and the name of the organization/group.

Applicant/Nominee's Agreement:

- If at any time during my service as a member of this Clinician Committee my conflict of interest status changes, I will notify the measure developer and the Clinician Committee chair.
- It is anticipated that during 2018-2019, there will be 2 webinars (approximately 2 hours each) and one in-person meeting (estimated 1-day meeting with additional 1 day of travel). I am able to commit to attending these Clinician Committee meetings.
- If selected to participate in a Clinician Committee and the measures are submitted to a measure endorsement organization (such as the National Quality Forum, NQF), I will be available to discuss the measures with the organization or its representatives and work with the measure developer to make revisions to the measures, if necessary.
- I understand that my participation on a Clinician Committee is voluntary. As such, I understand that my input will be recorded in the meeting minutes. Proceedings of the Clinician Committee meetings will be summarized in a report that is disclosed to the general public. If I have disclosed private, personal information by my own choice, then that material and those communications are not deemed to be subject to any confidentiality laws.
- If selected to participate in a Clinician Committee, I will keep all materials and discussions confidential until such time that CMS authorizes their release.
- If selected to participate on the Clinician Committee, I understand that there are only limited per diem and travel funds available for clinicians representing underserved and/or rural communities; therefore, expenses related to my participation may not be covered.

I have read the above and agree to abide by it.

Signature: _____ Date: _____