

2018 Measures Under Consideration

Pre-Rulemaking: Open Forum Discussion #1

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April 5, 2018



Welcome

- » The meeting is moderated.
- » All lines will be muted during the presentation.
- » The meeting is being recorded and will be uploaded to the CMS website for future viewing. The meeting facilitator will send the link to the recording in a follow-up email.
- » Questions will be accepted later in the presentation.

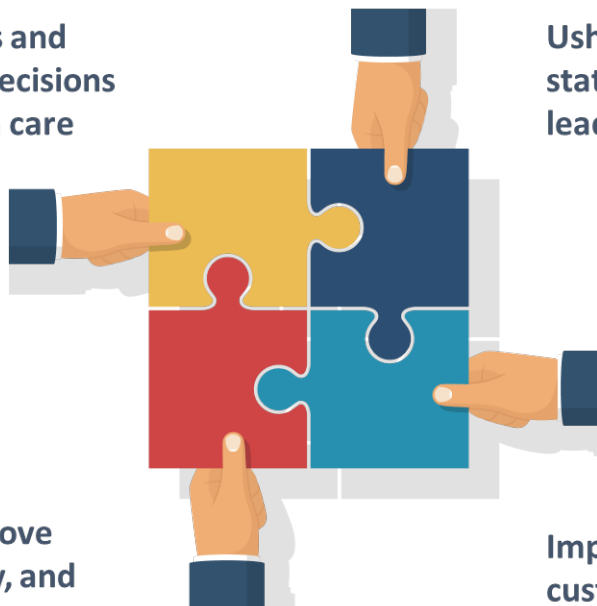
Agenda

- » Overview of the Meaningful Measures Initiative
- » Pre-Rulemaking Review
- » Demonstration of JIRA
- » Question and Answer Session

A New Approach to Meaningful Outcomes

Empower patients and doctors to make decisions about their health care

Usher in a new era of state flexibility and local leadership



Support innovative approaches to improve quality, accessibility, and affordability

Improve the CMS customer experience

Meaningful Measures Objectives

Meaningful Measures focus everyone's efforts on the same quality areas and lend specificity, which can help identify measures that:

- Address high-impact measure areas that safeguard public health
- Are patient-centered and meaningful to patients, clinicians and providers
- Are outcome-based where possible
- Fulfill requirements in programs' statutes
- Minimize level of burden for providers
- Identify significant opportunity for improvement
- Address measure needs for population based payment through alternative payment models
- Align across programs and/or with other payers

Meaningful Measures Framework

Meaningful Measure Areas Achieve:

- ✓ High quality healthcare
- ✓ Meaningful outcomes for patients

Criteria meaningful for patients and actionable for providers

Draws on measure work by:

- Health Care Payment Learning and Action Network
- National Quality Forum – *High Impact Outcomes*
- National Academies of Medicine – *IOM Vital Signs Core Metrics*

Includes perspectives from experts and external stakeholders:

- Core Quality Measures Collaborative
- Agency for Healthcare Research and Quality
- Many other external stakeholders

Quality Measures



Meaningful Measures



● Promote Effective Communication & Coordination of Care

Meaningful Measure Areas:

- Medication Management
- Admissions and Readmissions to Hospitals
- Transfer of Health Information and Interoperability

● Promote Effective Prevention & Treatment of Chronic Disease

Meaningful Measure Areas:

- Preventive Care
- Management of Chronic Conditions
- Prevention, Treatment, and Management of Mental Health
- Prevention and Treatment of Opioid and Substance Use Disorders
- Risk Adjusted Mortality

● Work with Communities to Promote Best Practices of Healthy Living

Meaningful Measure Areas:

- Equity of Care
- Community Engagement

● Make Care Affordable

Meaningful Measure Areas:

- Appropriate Use of Healthcare
- Patient-focused Episode of Care
- Risk Adjusted Total Cost of Care

● Make Care Safer by Reducing Harm Caused in the Delivery of Care

Meaningful Measure Areas:

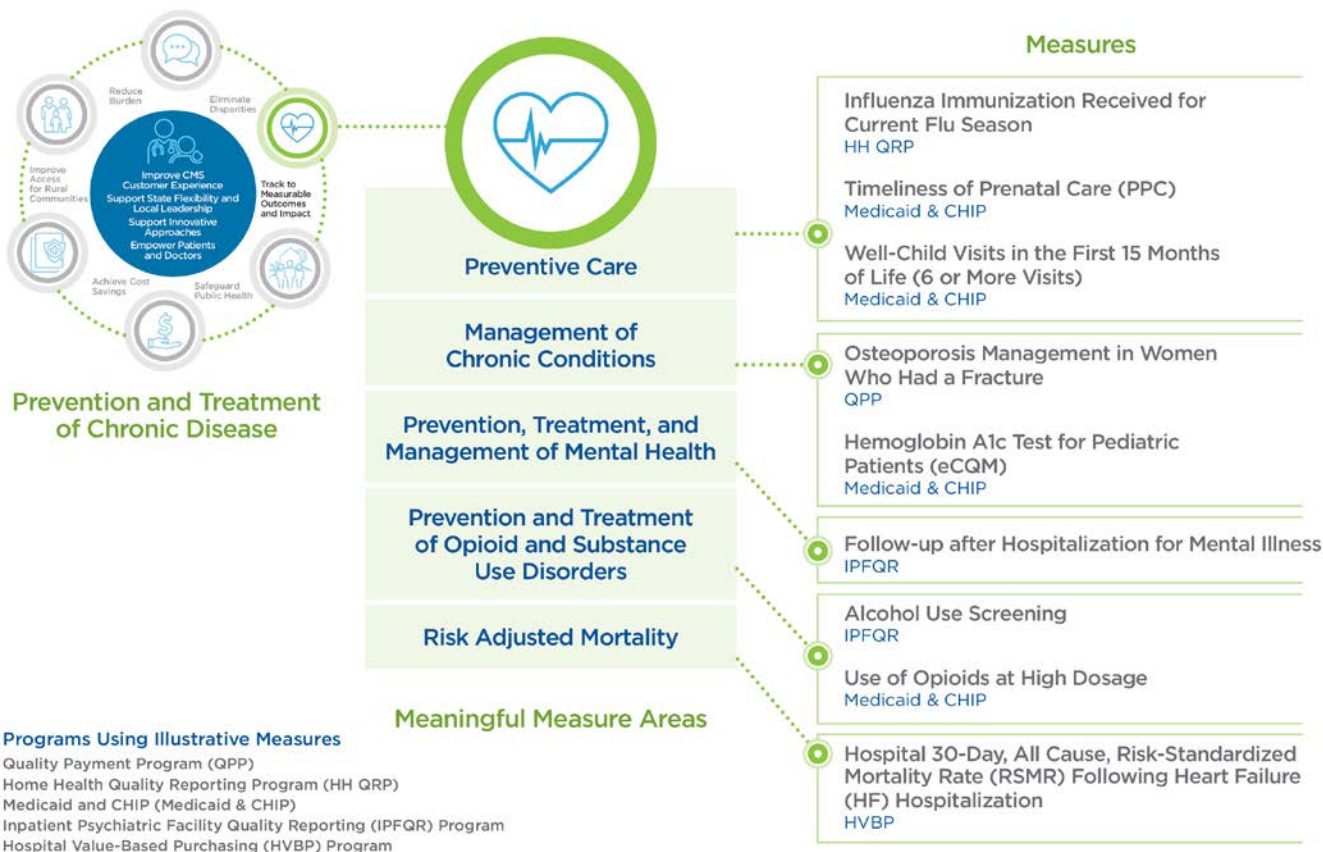
- Healthcare-associated Infections
- Preventable Healthcare Harm

● Strengthen Person & Family Engagement as Partners in their Care

Meaningful Measure Areas:

- Care is Personalized and Aligned with Patient's Goals
- End of Life Care according to Preferences
- Patient's Experience of Care
- Patient Reported Functional Outcomes


Promote Effective Prevention & Treatment of Chronic Disease



Meaningful Measures Website

Meaningful Measures Framework

CMS's new comprehensive initiative "Meaningful Measures" was launched in 2017 and identifies high priority areas for quality measurement and improvement. Its purpose is to improve outcomes for patients, their families and providers while also reducing burden on clinicians and providers.



Cross Cutting Connections

Meaningful Measures will move payment toward value through focusing everyone's efforts on the same quality areas and lend specificity, with the following principles for identifying measures that:


1. Address high impact measure areas that safeguard public health
2. Patient-centered and meaningful to patients
3. Outcome-based where possible
4. Fulfill requirements in programs' statutes
5. Minimize level of burden for providers
6. Significant opportunity for improvement
7. Address measure needs for population based payment through alternative payment models
8. Align across programs and/or with other payers (Medicaid, commercial payers)

"At CMS, our overall vision is to reinvent the agency to put patients first. We want to partner with patients, providers, payers, and others to achieve this goal. We aim to be responsive to the needs of those we serve."

Administrator Seema Verma
Center for Medicare and Medicaid Services

Featured video

"It is recommended to view the video below with Flash disabled in Chrome, Firefox, or Internet Explorer 11 browsers, due to known usability issues with other browsers."



Patients Over Paperwork

View more videos

YouTube requires JavaScript to view videos. You will need the latest version of Adobe Flash Player to watch the video.

<https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/QualityInitiativesGenInfo/CMS-Quality-Strategy.html>



Pre-Rulemaking Review

Guidelines for Proposing Measures

- » Measures in current use do not need to go on the Measures under Consideration List again
 - Exceptions are measure being expanded into other CMS program(s) or measure undergoing substantial changes
- » Measures that were submitted to be on a prior year's MUC List, but were not accepted by any CMS program(s), are eligible for resubmission
- » Measure specifications may change over time. If a measure has significantly changed, you may submit it again for consideration

Measures Under Consideration List Publishing

March 1

JIRA opened for new candidate measures

June 1

JIRA closes for MIPS-Quality program measures only

June 15

JIRA closes for all other CMS program measures

July 20

Draft MUC List prepared

August 2

Federal-Only Stakeholder Meeting (preview MUC List)

August 20

MUC clearance process begins

New for 2018

- » Status for “MAP refine and resubmit” measures
- » MIPS-Cost and MIPS-Quality as separate programs in JIRA
- » Select one healthcare priority
- » Select one Meaningful Measure
- » How measure will be reported

Notes on 2018 Interface

- » Scroll to see all drop-down choices (some lists are long)
- » If you select “Other,” then navigate to the Comments field at the very bottom of the form. List the data field and specify the intended “other” value
- » Measure Title field is limited to 255 characters
- » Enter NA if you cannot complete a required text field

JIRA Filters for Reporting

- » Users can create and save custom filters with columns/fields of their choosing and criteria such as certain programs or measure types
- » Can export custom reports into CSV file
- » Can set up personalized dashboard views with updated info based on frequently needed filters

Ask a Question

» Moderator will provide instruction

Next Steps

- » 2018 CMS Pre-Rulemaking Program Measurement Needs and Priorities Session – April 10 from 1:00 to 3:00 PM ET
- » 2018 Measures Under Consideration (MUC) Open Forum #2 – April 12 from 1:00 PM to 2:00 PM ET
- » Resource for everything MUC:
 - [Pre-Rulemaking Web Site](#)

Contacts for MUC List

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For More Information

- » JIRA Submission Template Blank
- » FAQs
- » JIRA User Guide

[Pre-Rulemaking Web Site](#)