

**Attachment 1: Crosswalk Between Evaluation Data Needs, Existing Data Sources, and Proposed Data Collection for Evaluation of the CMS QIN-QIO Program for Task C.3-6. Medication Safety and Adverse Drug Event Prevention**

Evaluation Data Needs	Existing Data Sources	Proposed Data Collection
To assess whether providers' participation in the QIN-QIO ADE Program significantly lowers beneficiaries' rate and time to hospital utilization (admissions, re-admissions, ED visits or observations) for (a) anticoagulant- (b) opioid- and/or (c) diabetes-related ADEs compared to beneficiaries under the care of providers unexposed to the QIN-QIO Program.	<ul style="list-style-type: none"> <li>• Medicare claims Part A and Part D</li> </ul>	<ul style="list-style-type: none"> <li>• None</li> </ul>

Evaluation Data Needs	Existing Data Sources	Proposed Data Collection
<p>To identify types of quality improvement efforts that healthcare providers use to prevent ADEs with a focus on: (1) comparing QIN-QIO participant responses with non-participant responses, and (2) explaining variability in beneficiary outcomes identified in analysis of claims data.</p>	<ul style="list-style-type: none"> <li>• Medicare claims Part A and Part D.</li> <li>• Administrative reports from the QIN-QIO Deliverable and Data Submission Tool (DDST) to determine types of professionals recruited for the ADE program and their workplace settings.</li> <li>• QIN-QIO Intervention Evaluation Measures (IEM) reports to determine types of activities conducted. This IEM dataset is not comprehensive and many entries are not complete.</li> </ul>	<p>Survey for community providers participating and not participating in the QIN-QIO program. See Appendix A for questions to:</p> <ul style="list-style-type: none"> <li>• Identify health professionals working in settings targeted by QIOs (S1, S2, S3)</li> <li>• Ascertain organization size and whether it belongs to a chain (factors influencing who answers the survey as well as the nature of the responses to individual questions) (S4, S5)</li> <li>• Screen participants for knowledge about QI efforts in their organizations to reduce ADEs (S6, S7)</li> <li>• Establish the respondent's level of experience with QI efforts for ADE prevention in their organization (S9, S10)</li> <li>• Balance input from QIO participants and non-participants (S8)</li> <li>• Ascertain QI activities for ADE prevention since the 11<sup>th</sup> SOW (Q1, Q2)</li> <li>• Document use of best practices to prevent ADEs, including medication reconciliation, drug take-backs, opioid counseling, data collection and use of data for quality improvement (Q3, Q4, Q5).</li> </ul>

Evaluation Data Needs	Existing Data Sources	Proposed Data Collection
To estimate the proportion of improvements in medication safety and ADE prevention that is attributable to the QIN-QIO program.	<ul style="list-style-type: none"> <li>• None</li> </ul>	<ul style="list-style-type: none"> <li>• Survey for community providers participating/not participating in the QIN-QIO program. Questions ask providers to assign attribution to QIN-QIO and other QI programs/resources toward achieving outcomes (Q6, Q7, Q7a).</li> </ul>
To estimate provider level of engagement with the QIN-QIO program and assess whether level of engagement (from survey) is associated with medication safety and ADE outcomes (from claims).	<ul style="list-style-type: none"> <li>• Medicare claims Part A and Part D.</li> </ul>	<p>Survey for community providers participating/not participating in the QIN-QIO program; see Appendix A for questions to determine</p> <ul style="list-style-type: none"> <li>• QIO awareness (S8, Q6, Q8-11, Q13)</li> <li>• Satisfaction with participating in QIO program (Q12, Q12a)</li> <li>• Agreement with desired outcome specific for pharmacists (Q18)</li> <li>• The number and type of meetings in which they participated (Q14-16)</li> <li>• Perceived quality of collaboration (Q17)</li> <li>• QIO activities in which they participated (Q19)</li> <li>• Perceived engagement (global item) (Q20)</li> </ul>
To collect information from community-based providers on QI needs to help increase medication safety and decrease ADEs	<ul style="list-style-type: none"> <li>• None</li> </ul>	<ul style="list-style-type: none"> <li>• Survey for community providers participating/not participating in the QIN-QIO program, Appendix A (Q21)</li> </ul>