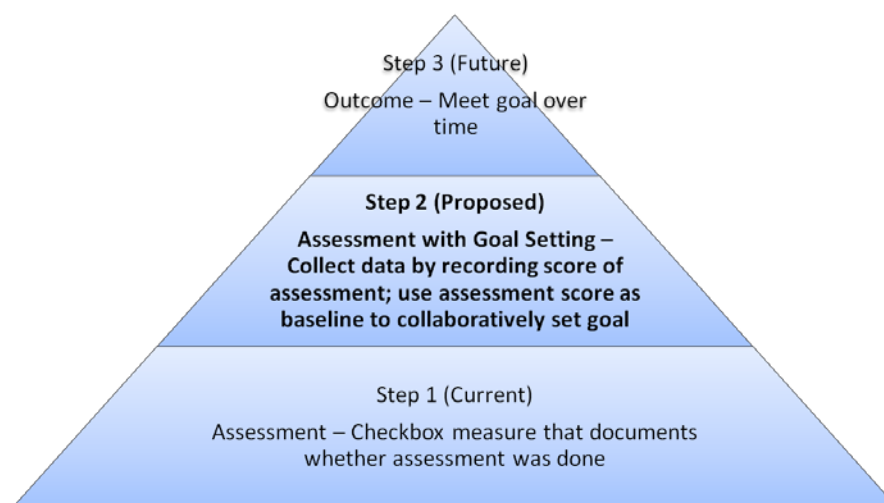


The Centers for Medicare & Medicaid Services (CMS) has an interest in the development of clinical quality measures related to patients' outcomes, as these measures can be used to assess progress toward the National Quality Strategy aims of better care, healthy people and communities, and affordable care. Assessing health-related outcomes is challenging and requires appropriate (reliable and valid) scales of measurement coupled with the understanding that each patient is unique with regard to disease severity, ability to tolerate treatment regimens, and expectations of health status changes over time (such as improving health, constant health status, or worsening health).

To address these measurement challenges, we developed a stepwise approach to measuring patients' outcomes. We propose measures that use assessment tools to quantify health status and use goal setting to account for an individual patient's status, capabilities, and outcome expectations. As depicted in Figure 1, our proposed measures are more advanced than current assessment measures, which document whether an assessment was completed but, in most cases, do not collect the assessment scores.

As a step towards outcome measures, the measures we propose require the capture of two assessment scores and patients' goals in order to satisfy the numerator criteria. By focusing on assessment and collaborative goal-setting, we give credit to physicians who undertake these activities. Assessment and goal-setting foster patients' engagement and promote patient-physician communication, both of which drive patient-centered care. These measures will build the structural foundation, in terms of clinical work flows and electronic capabilities, for future measures that will evaluate outcomes.

Figure 1. Building to outcomes measures



Assessment tools alone are a means to quantify a patient's health, functional, or disease status. These tools typically consist of a series of questions that can be answered by the patient or caregiver (for patient-reported outcomes or PROs), the physician or care provider, or both. The tools can assess general health or focus on a particular disease or condition. The literature provides evidence on the validity and reliability of the tools we have considered for our proposed measures. Physicians can record the score as discrete data in the electronic health record.

We recognize that the use of instruments to assess PROs or functional status is currently limited. Workflows to support their use in care delivery are rare, and data from care delivery are limited. The measures we have constructed ideally will help to foster the development of the workflows and resulting data, which are needed to assess the validity and reliability of future outcomes measures.

Although using assessment tools in clinical care can address the problem of quantifying a patient's health status, we still have to account for individual differences in patients' health, functional, and disease status. The approach we recommend requires the patient and his or her physician to use the assessment score to set a goal. Introduction of goal-setting offers several advantages. A collaboratively set goal can serve as an individual benchmark for future outcomes measurement. In addition, goal-setting is patient-centered and avoids the potential unintended consequence of promoting a goal that is not appropriate for an individual patient. Finally, the range of goals patients set can reflect the differences in underlying disease or health severity among the population, providing data to inform possible risk-adjustment of eventual outcomes measures. In place of direct adjustment of measures, goal-setting can enable patients and their physicians to set reasonable, attainable, and individual goals.

Future outcome measures could take a number of forms, including measuring performance against a goal, measuring an assessment score against a defined benchmark, or measuring a change in the assessment score over time. To determine the best method, it will be necessary to collect and analyze data from the proposed assessment and goal-setting measures to determine the validity and reliability of potential outcomes measures' scores. It will also be necessary to obtain input from physicians concerning measures' validity and usability for improving patients' engagement and care.

Measures for Public Comment

CMS seeks public comment on one measure of assessment with goal setting developed for potential use in the Electronic Health Record Incentive Program for Eligible Professionals and in other CMS quality reporting programs. This measure targets chronic pain due to osteoarthritis, a common and burdensome disease.

For this measure, we have identified pain assessment tools that are validated to measure the impact of pain on functional status or quality of life. We seek feedback on the measure construct and the tools considered for inclusion in the measure.