

TECHNICAL EXPERT PANEL NOMINATION FORM

Project Title:

Development and Reevaluation of Outpatient Outcome Measures for the Merit-based Incentive Payment System (MIPS)

Project Overview:

In developing cost and quality measures for the MIPS, the Centers for Medicare and Medicaid Services (CMS) is providing numerous opportunities for stakeholder engagement.

CMS's contractor, Acumen, LLC has convened a Technical Expert Panel (TEP) to inform the development of episode groups for use in cost measures under the project titled "MACRA Episode-Based Cost Measures." CMS/Acumen convened in-person TEP meetings in August and December 2016, and a follow-up TEP webinar in March 2017. Separate to the TEP, CMS/Acumen is currently recruiting clinicians to participate in Clinical Subcommittees as part of the cost measure project. For details about the objectives of the Clinical Subcommittees and the nomination process, please see the [Call for Clinical Subcommittee Nominations](#). The nomination period is open until April 24, 2017. If you have any questions about the MACRA Episode-Based Cost Measures Clinical Subcommittees, please email macra-clinical-committee-support@acumenllc.com.

In addition to the MACRA Episode-Based Cost Measures' TEP, CMS will also convene additional TEPs through Yale New Haven Health Services Corporation Center for Outcomes Research and Evaluation (CORE) to inform the development and reevaluation of outpatient outcome measures (described herein) and inpatient outcome measures (to be called no earlier than summer 2017). To optimize the recruitment of stakeholders and to leverage expertise across projects, CMS encourages TEP nominees to consider serving on one or more of the TEPs: cost measure development, outpatient outcome measure development and reevaluation, and inpatient outcome measure development.

In this posting, CMS/CORE is recruiting experts to participate on a TEP to inform the development and reevaluation of outpatient outcome measures for the MIPS. CMS is developing and reevaluating quality measures to assess the quality of care provided by clinicians who are eligible to participate in the MIPS (hereinafter, MIPS eligible clinicians). The measures will assess each eligible clinician's hospital admission rate relative to that of other MIPS eligible clinicians with similar patients. The measures will be risk adjusted for patient complexity, unlike other measures currently applied at the eligible clinician or group level. 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.

As part of its measure development and reevaluation processes, CMS is convening a group of stakeholders (for example, frontline clinicians, patients/caregivers, professional societies) to help shape the approach to the measures, such as which types of admissions should be counted in the measures.

CORE is completing this work under contract to CMS. The contract name is Measure & Instrument Development and Support (MIDS): Development, Reevaluation, and Implementation of Outpatient Outcome/Efficiency Measures. The contract number is HHSM-500-2013-130181.

Project Objectives:

The primary goal of this project is to gather expert and stakeholder input to inform quality measure development and reevaluation for patients with acute or chronic conditions. CMS will use the measures to evaluate the quality of care provided by MIPS eligible clinicians.

TEP Expected Time Commitment:

CORE anticipates holding approximately two to four teleconference meetings between June 2017 and September 2018. Teleconference meetings will last two hours.

TEP Requirements:

We are seeking a TEP of approximately 12 to 20 individuals with the following perspectives and areas of expertise.

Subject Matter Expertise: The MIPS applies to many types of clinicians. The measures for this project will assess the quality of outpatient care for patients with common acute or chronic diseases. We are therefore seeking involvement of individuals with experience in the following settings or who have the following areas of expertise:

- Clinicians practicing in individual practice or small group practice settings as well as clinicians practicing in rural communities and/or federally qualified health centers.
- Clinicians practicing in patient-centered medical homes.
- Diverse clinical experts from multiple specialties that provide ambulatory care to the patient populations measured. These specialties include but are not limited to those who treat patients with one or more of the following conditions that are prevalent and costly in the Medicare population:
 1. Acute myocardial infarction;
 2. Alzheimer's disease and related disorders or senile dementia;
 3. Atrial fibrillation;
 4. Chronic kidney disease;
 5. Chronic obstructive pulmonary disease and asthma;
 6. Depression;
 7. Diabetes;
 8. Heart failure; or
 9. Stroke and transient ischemic attack.
- People bringing the perspective of a healthcare consumer, acute or chronic disease patient, or family (caregiver) of an acute or a chronic disease patient.
- Experts in healthcare disparities.
- Experts in performance measurement.
- Experts in quality improvement.
- Healthcare purchasers.
- Individuals from clinician professional societies.

Patient and Caregiver Nominees: CORE is seeking patients, patient advocates, and caregivers to participate on the TEP. We are seeking patients, patient advocates, and caregivers who have direct experience with care related to acute or chronic disease. They can provide unique and essential

input on quality measures based on their own experience and perspective. Patient nominees should submit a completed and signed TEP Nomination Form and letter of interest as described below but are not required to submit a curriculum vitae.

Participation on the TEP is voluntary. As such, individuals wishing to participate on the TEP should understand that their input will be recorded in the meeting minutes. Proceedings of the TEP will be summarized in a report that is disclosed to the general public. If a participant has disclosed private, personal data by his or her own choice, then that material and those communications are not deemed to be covered by patient-provider confidentiality. If patient, patient advocate, and caregiver participants (only) wish to keep their names confidential, that request can be accommodated. Any questions about confidentiality will be answered by the TEP organizers.

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

Instructions:

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

- A letter of interest (not to exceed two pages) 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.
 - Patient, patient advocate, and caregiver participants are not required to submit a curriculum vitae and may elect to keep their names confidential in public documents.

Please send this completed and signed TEP 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 May 16, 2017.

*All potential TEP 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 the TEP. The intent of full disclosure is to inform the measure developer, other TEP members, and CMS about the source of TEP members’ perspectives and how that might affect discussions or recommendations.

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 TEP. 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 TEP. 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 TEP.

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 TEP my conflict of interest status changes, I will notify the measure developer and the TEP chair.
- It is anticipated that there will be <approximate time commitment that is required>. I am able to commit to attending the TEP meetings in person, by teleconference, or by mutually agreed-upon alternative means.
- If selected to participate in the TEP and the measures are submitted to a measure endorsement organization (such as the 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 the TEP is voluntary. As such, I understand that my input will be recorded in the meeting minutes. Proceedings of the TEP will be summarized in a report that is disclosed to the general public. If I have disclosed private, personal data 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 the TEP, I will keep all materials and discussions confidential until such time that CMS authorizes their release.

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

Signature: _____ Date: _____

For patient, patient advocate, and caregiver participants only: I wish to keep my name confidential.

☐ Yes ☐ No