

TECHNICAL EXPERT PANEL CHARTER

Project Title:

Development of Inpatient Outcome Measures for the Merit-based Incentive Payment System (MIPS)

Dates:

The Technical Expert Panel (TEP) nomination period opens on June 30, 2017 and closes on August 8, 2017.

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 adapt one or two claims-based hospital measures to assess the quality of care provided to Medicare beneficiaries by clinicians who are eligible to participate in the MIPS (hereinafter, MIPS eligible clinicians).

Previously, CMS/CORE developed a range of measures to assess hospital quality. CMS/CORE plans to adapt one or two of these existing measures to assess care provided by MIPS eligible clinicians. The measure(s) already specified for the hospital setting cover a range of acute and/or chronic conditions, and elective procedures. The adapted measure(s) will likely include one outcome measure assessing a range of hospitalized patients and one measure based on an elective procedure. The measure(s) will assess each clinician's outcome rate, such as readmission rate or complications rate, relative to that of other MIPS eligible clinicians with similar patients. 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.

CMS/CORE is recruiting experts (for example, frontline clinicians, patients/caregivers, professional societies, measure methods experts) to participate on a TEP to inform the development of inpatient outcome measures for the MIPS. The TEP will provide input on approaches to measure attribution that could apply to multiple measures and help shape the approach to one or two specific measures on a full range of measure specifications, including attribution, cohort, and risk adjustment.

CORE is completing this work under contract to CMS. The contract name is Development, Reevaluation, and Implementation of Hospital Outcome/Efficiency Measures for Hospital and Eligible Clinicians, Option Year 3; the contract number is Contract Number: HHSM-500-2013-13018I, Task Order HHSM-500-T0001.

Other CMS Opportunities for Stakeholder Engagement

In addition to the inpatient outcome measures TEP described above, CMS is providing opportunities for stakeholders to participate in other TEPs for developing outpatient quality and cost measures for the MIPS.

1. Outcome Measures TEP: CMS and its contractor, CORE, recruited a TEP to inform the development of outpatient outcome measures under the project called, "Development and Reevaluation of Outpatient Outcome Measures for the MIPS" in June 2017. The TEP will provide

input on outpatient outcome measure development through September 2018. If you have any questions about the project, please email MIPSoutcomemeasures@yale.edu.

2. **Cost Measures TEP:** CMS and its contractor, Acumen, LLC, convened a 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 recruited clinicians to participate in Clinical Subcommittees as part of the cost measure project in April 2017. If you have any questions about the project, please email macra-clinical-committee-support@acumenllc.com.

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 MIPS TEPs: inpatient outcome measure development, outpatient outcome measure development and reevaluation, and cost measure development. CMS will likely accept a limited number of individuals on more than one TEP to facilitate coordination across measure development efforts.

Project Objectives:

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

TEP Objectives:

CORE follows CMS’s structured and standardized approach to measure development, including steps to ensure substantial input from experts and the public. As part of this effort, CORE is seeking input from individuals with relevant experience and expertise who can provide critical input on the potential outcomes and specifications of the measure.

The TEP is a group of stakeholders (for example, frontline clinicians, patients/caregivers, professional societies, measure methods experts) and experts who provide input on the development of the measure for which the contractor is responsible. Convening a national TEP ensures transparency and helps measure developers obtain balanced input from multiple stakeholders. TEP members are chosen to provide input based on their personal experience and training or organizational perspective, and to represent a diversity of perspectives and backgrounds.

Scope of Responsibilities:

Specific responsibilities of TEP members will be to:

- Complete and submit all nomination materials, including the TEP Nomination Form, letter of interest, disclosure of conflicts of interests, and curriculum vitae.
- Review background materials provided by CORE prior to each TEP meeting.
- Attend and actively participate in the TEP in-person meeting(s) and webinar(s).
- Provide input and feedback to CORE on key clinical, methodological, and other decisions.

- Provide feedback to CORE on key policy or other non-technical issues.
- Review the TEP summary report prior to public release.
- Discuss recommendations following submission of the measure to CMS.

CORE recognizes that TEP members may not be able to attend all meetings, but we expect members to attend a majority of meetings and review and comment on meeting materials for the meetings they cannot attend. We will provide meeting agendas and background materials to TEP members prior to each meeting. We will summarize member comments and recommendations in a publicly available report.

Guiding Principles:

The National Quality Forum's (NQF) measure evaluation criteria will guide CORE's work. CORE will brief the TEP on these guiding principles for measure development to support the TEP's application of these measure evaluation criteria. CORE will focus the TEP discussions on measure design decisions that are most important. However, measure developers encourage the TEP to provide input on any or all the measure components as part of the TEP's deliberations. Consensus decisions will inform the completion of the NQF endorsement application following the meetings.

The list of individuals included on the TEP will be made public. However, potential patient participants will be given the option to keep their participation on the TEP confidential in public documents.

CORE will ensure confidentiality in the publicly posted TEP reports by summarizing discussion topics and removing the names of TEP members who make specific comments during the meetings. If a participant has disclosed private personal data, by his or her own choice, then that material and those communications are not subject to confidentiality laws. CORE will answer any questions about confidentiality.

Estimated Number and Frequency of Meetings:

CORE anticipates holding approximately one teleconference meeting by September 2017, and at least one in-person meeting in fall 2017. As development may occur after fall 2017, CORE will hold additional teleconference or in-person meetings as needed through September 2018. Teleconference meetings usually last between 1-2 hours. In-person meetings are generally 1 full business day and will be held in the Baltimore-Washington DC area.

In addition, the TEP members will review materials provided in advance of meetings and complete any online surveys.

Date Approved by TEP:

To be updated after TEP is convened.

TEP Membership:

To be updated after TEP is convened.