

# Technical Expert Panel Nomination Form

## ***Project Title:***

Development of the Hospice Quality Reporting Program HEART Comprehensive Patient Assessment Instrument

## ***Project Overview:***

The Centers for Medicare & Medicaid Services (CMS) has contracted with RTI International to develop an expanded item set called the Hospice Evaluation & Assessment Reporting Tool (HEART), covering the comprehensive patient assessment for hospice providers. The contract name is Hospice Quality Reporting Program Measure Development, Maintenance and Support. The contract number is HHSM-500-2013-13015I. As part of its item development process, CMS asks contractors to convene groups of stakeholders and experts who contribute direction and thoughtful input to the contractor during the item development process.

The purpose of this project is to develop an item set that would allow for a broader picture of the quality of care provided by hospice agencies, as well as a more comprehensive picture of patient need and service delivery for hospice patients. Thus, the HEART instrument includes items that are critical for high-quality patient care, including those elements that help hospice providers work with patients and families to establish goals of care consistent with the individual's values. HEART will give CMS insights into the quality of care delivered to patients, generating the ability to calculate meaningful quality measures from the items, and help CMS identify patients who require the highest intensity of hospice services, which may allow CMS to explore future payment refinements. Finally, the HEART instrument will be useful for other CMS regulatory activities, including survey and care planning to ensure a multifunctional assessment that will meet all of CMS's core needs.

The purpose of this standing TEP is to explore implementation and content related topics prior to and concurrent with the pilot testing of this instrument, mindful of the necessary items for potential future quality measures and payment refinements after additional reliability, validity, and national testing has been completed. This TEP will focus on the feasibility and usability of the HEART instrument as well as identifying potential barriers to implementation. Additionally, this TEP will discuss the refinement of specific patient assessment domains and items based on pilot testing findings. After pilot testing, this TEP will explore the potential for future quality measures based on HEART patient assessment items. We aim to involve participants with diverse backgrounds and experiences. This includes, but is not limited to, hospice clinicians, those with experience in hospice quality reporting and from different types of hospice organizations with distinct organizational structures, and settings, and researchers/measure developers.

## ***Project Objectives:***

- ◆ Gather feedback on the feasibility and usability of the draft HEART instrument
- ◆ Determine potential barriers to implementing the HEART instrument in varying hospice

- settings and discuss remediation strategies
- ◆ Refine draft HEART patient assessment items
- ◆ Determine the direction of future quality measures based on HEART patient assessment items

### ***TEP Expected Time Commitment:***

- ◆ TEP members will provide input throughout the development, implementation, and refinement process. This time commitment will span from September 2017 through September 2018.
- ◆ A one to two-day webinar TEP meeting projected to take place mid to late September 2017.
- ◆ And/Or, an additional in-person meeting approximately 8-10 months following the *first* webinar meeting.
- ◆ Follow-up meetings via webinar or telephone as necessary.

### ***TEP Requirements:***

We are seeking a TEP of approximately 14-20 individuals from a broad, diverse background with the following perspectives and areas of expertise:

- ◆ Subject matter expertise: Hospice Quality related to:
  - Diagnosis, Prognosis, and Treatments
  - Symptom Management
  - Communication, Hearing, and Vision
  - Cognitive and Functional Status
  - Safety and Environment
  - Psychosocial
  - Patient & Family Preferences
  - Access, Communication, and Care Coordination
- ◆ Clinician perspective
- ◆ Electronic health records (EHR) (e.g., EHR vendors, those with experience working with EHR vendors)
- ◆ Perspective from hospices of varying:
  - Average daily census
  - Geographic locations
  - Settings (i.e., urban, rural, frontier)
  - Profit status
  - Patient populations (e.g., underserved populations)
- ◆ Quality reporting
- ◆ Performance measurement
- ◆ Quality improvement

Note: Preference will be given to candidates who have not served on a previous TEP.

Potential TEP members must be aware that 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 may be 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 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 item development.
- ◆ *Curriculum vitae* or a summary of relevant experience (including publications) for a maximum of 10 pages. (Patient participants may elect to keep their names confidential in public documents.)
- ◆ Disclosure of any current and past activities that may indicate a conflict of interest. As a contractor for the Centers for Medicare & Medicaid Services (CMS), RTI International must ensure independence, objectivity, scientific rigor, and balance in its measure development activities.\*
- ◆ ***Please send the completed and signed TEP Nomination form, statement of interest, and CV*** to RTI International with “Nomination” in the subject line at [hospice@rti.org](mailto:hospice@rti.org). Due by close of business August 9, 2017 Eastern Time.

Potential TEP members must be aware that participation on the Technical Expert Panel 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 potential patient participants wish to keep their names confidential, that request can be accommodated. Any questions about confidentiality will be answered by RTI International.

\*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 contractor, 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:

- ◆ Contact Information: (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 contractor will request the required information from the nominee.

- ◆ Name, Credentials, Professional Role:
- ◆ Organizational Affiliation, City, State:
- ◆ Contact Information: (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), RTI International 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 contractor and the TEP chair.
- ◆ It is anticipated that there will be a one to two-day webinar and/or an additional in-person meeting approximately 9 months following the first webinar meeting. 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 National Quality Forum), I will be available to discuss the measures with the organization or its representatives and work with the measure

contractor to make revisions to the measures, if necessary.

- ◆ I understand that my participation on the Technical Expert Panel 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 participants only:** I wish to keep my name confidential. Yes/No.