Statewide Quality Advisory Committee (SQAC) Meeting





Agenda

- Approval of Minutes Meeting 3 and Meeting 4
- Discussion of Care Coordination and Care Transitions
 Measures
- Behavioral Health Expert Presentation
 - Dr. Deborah Garnick and Dr. Constance Horgan
- Discussion of Behavioral Health Measurement
- Next Steps



Committee



Dr. Madeleine Biondolillo

DISCUSSION OF CARE COORDINATION AND CARE TRANSITIONS MEASURES

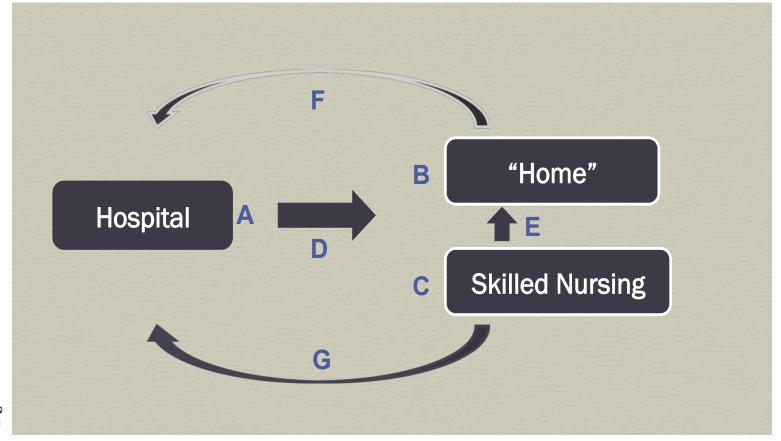
A Reminder of Scope

 The year-one focus for the SQAC selection and evaluation process is selection of quality measures that will aid state government in measuring the performance of integrated healthcare systems, such as ICOs, ACOs, and PCMHs. The development of such systems is critical to the state goal of encouraging high-quality, coordinated, and affordable healthcare. The opportunity for the SQAC to assist in developing the means to measure the success of this initiative will support state efforts to monitor the transformation of the delivery system.



Measures In and Beyond Hospitals & CHCs

Care Transitions & Care Coordination: Complementary
 Measurement May Hasten Improvement





Measures In and Beyond Hospitals & CHCs

- Hospitals & CHCs:
 - Readmission measures:
 - Yale, NCQA, UHG
 - Aligned intervention across settings: discharge instructions, medication reconciliation, and post discharge follow up, e.g.
 - CMS: HF1-Discharge Instructions
 - HCAHPS: Communication about medications
 - HEDIS: follow up after hospitalization for mental illness
 - And more, from publicly nominated sets such as IQIs and PSIs
 - Care coordination measures:
- CTM-3 → HCAHPS

An Opportunity to Consider Expanding our Walls

- Many stakeholders (including on the SQAC) have noted that care coordination and care transitions require multi-pronged, multi-setting approaches
- Reporting infrastructure exists for long term care (including nursing homes and home health)
- STAAR initiative, 3026, and other similar ventures have reinforced that concerted efforts are essential
- Proposal: a pilot of de-identified public reporting for select postacute measures

Measures In and Beyond Hospitals & CHCs

- Home Health (OASIS)
 - Timely Initiation of Care
 - Acute Care Hospitalization
 - Emergency Department Use without Hospitalization
- Nursing Homes (MDS):
 - Percent of residents with pressure ulcers that are new or worsened (short stay)
 - Percent of high-risk residents with pressure ulcers (long stay)
 - Percent of Residents Who Self-Report Moderate to Severe Pain (Long-Stay)
 - Percent of Residents Who Self-Report Moderate to Severe Pain (Short-Stay)



Measure Evaluation

	Sufficient Practicality	Insufficient Practicality
Sufficient Validity	Strongest recommendation	Measure is considered valid, but further infrastructure development is needed for a strong recommendation
Insufficient Validity	Measure is considered not sufficiently valid, and further work on the methodology is needed for a strong recommendation	Weakest recommendation



Preliminary Ratings

	Strong Recommendation	Moderate Recommendation
	 Timely Initiation of Care Percent of Residents Who Self-Report Moderate to Severe Pain (Long-Stay) Percent of Residents Who Self-Report Moderate to Severe Pain (Short-Stay) Acute care hospitalization (risk-adjusted) Emergent care (risk adjusted) Percent Pressure Ulcers New or Worsened (Short-Stay) Percent of High Risk Residents with Pressure Ulcers (Long Stay) 	CTM-3: 3-Item Care Transition Measure
Weak Recommendation		



Drs Constance Horgan and Deborah Garnick

BEHAVIORAL HEALTH EXPERT PRESENTATION

Co-Chairs & Experts

DISCUSSION OF BEHAVIORAL HEALTH MEASUREMENT



Time-Check

#8 #1 #2 #3 #4 #5 #6 #7 July Feb 21 March 30 Jan 25 April 12 May 18 June 14 July 1. Review Mandated D Measures 1. Review of Introductions E Formal 2. Nominate 2. Scope of Community Approval Other Task and Evaluate All Measures for Care **Behavioral** 2. Discuss **Population Nominated** 3. DPH **Transitions** Review Health Additional Health Measures Regulatory V Measures 3. Preliminary **Process** Proposed in "Straw Poll" on E 4. Adopt Meeting #2 Measure R **Bylaws** Recommendati -ons A В **Quality Measurement** Webinar **Experts to Discuss Potential Measures** E Review Drafts

Discussions to Complete in Meetings 6-8

- Complete Expert Presentations
- Determine Final Ratings for All Nominated Measures
- Discuss DPH Framework for Standard Quality Measure Set
- Discuss *Draft* Future Year Plan for Quality Measurement in Massachusetts
- Finalize Deliverables

Nominated Measure Status

- Of nearly 200 initially nominated, ~85 measures were proposed by Committee members for consideration
- All are currently being evaluated by staff and consultant teams. Preliminary ratings (including all expert-nominated measures) will be disseminated to Committee by June 21 for review.
- Measures are highly diverse, both in areas of focus and measure quality.
 - AHRQ Inpatient Quality Indicators (IQIs)
 - AHRQ Patient Safety Indicators (PSIs)
 - CMS Children's Asthma Measures (CAC)
 - Joint Commission Hospital Based Inpatient Psychiatric Services & Maternity Measures
 - AMA-PCPI Substance Use Disorders
 - ORYX Substance Use Disorders (SUB)
 - Children's Hospital Boston Inpatient Experience Survey (PIES)



Review of Deliverables

Annual Standard Quality Measure Set

 the list of measures recommended for inclusion in the Standard Quality Measure Set, categorized by the strength of recommendation derived from alignment with the evaluation criteria.

Measure Evaluation Reports

 brief reports outlining how given measures align with the evaluation criteria, and any relevant discussion points. These reports will be released intermittently, following the Committee's decision whether or not to recommend a given measure or measure set.

Annual Priorities Report

 the document describing the Committee's recommendation for the future direction for the Commonwealth's quality measurement priorities as informed by the Co-Chairs, Committee, and the public at SQAC meetings.



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Questions to Consider for Discussion of SQMS Framework in Meeting 6

- Should there be a targeted number of measures? What should that target be?
- How could or should the Standard Quality Measure Set:
 - consider applicability of measures to some providers versus all providers?
 - be used within statutory guidance?
 - be used outside of statutory guidelines (P4P, QI, public reporting, etc)?
 - target a set of populations, settings or conditions?
 - balance structure/process/outcome?
 - align with principles from other quality initiatives (STEEP, Triple Aim, etc)?
 - be used for public reporting versus confidential improvement?

be linked to cost containment?

For more information

- www.mass.gov/dhcfp/sqac
- sqac@state.ma.us
- Next Meeting

June 14, 4:00PM-6:00PM

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