

Statewide Quality Advisory Committee (SQAC) Meeting

Friday, November 09, 2012

11:30 a.m. – 1:00 p.m.

MEETING MINUTES

Location:

Division of Health Care Finance and Policy
2 Boylston Street, 5th Floor
Boston, MA 02116

Co-Chairs: Áron Boros (CHIA)

Committee Attendees: Dianne Anderson, Dr. Richard Lopez, Amy Whitcomb Slemmer, Ann Lawthers (for Dr. Julian Harris), Dr. James Feldman, Jon Hurst, Dolores Mitchell, Katherine Shea Barrett (for Dana Gelb Safran)

Committee Members Not Present: Dana Gelb Safran, Dr. Julian Harris

Other Attendees: Miriam Drapkin (CHIA)

1. Co-Chair Boros described the changes to Committee structure made by chapter 224.
 - a. Chapter 224 assigns another health plan representative to the Committee (there will now be two health plans represented rather than one.).
 - i. Dolores Mitchell suggested that to fill the new appointment, the Committee consider reaching out to plans serving members west of Massachusetts-128, such as Fallon or Health New England.
 - b. Chapter 224 removes DPH from the SQAC; Co-Chair Boros expects this will be rectified with a technical amendment.
2. Approval of minutes from SQAC meeting on August 10, 2012
 - a. Motion to approve meeting minutes passed unanimously.
3. Miriam Drapkin discussed staff research on aligning measurement suitability categories
 - a. Miriam reminded the Committee of the process it proposed for aligning suitability categories and then described staff findings: there was no alignment of suitability categories; terms were not clearly-defined; and alignment proved to be a more complex task than originally anticipated.
 - b. Miriam recommended to the Committee that this task be taken up in the next meeting cycle. She also mentioned that these findings are presented in the SQAC final report.
 - i. Co-Chair Boros stated that the first “future priority area” named in the final report is measure suitability and use.
 - ii. Dolores Mitchell agreed that suitability and use are sensitive issues and suggested that defining the Committee’s philosophy may be a valuable next step.
 - iii. Co-Chair Boros stated that staff recognizes the complexity of the issue and that assigning suitability will be a major task in the next meeting cycle. He added that

the regulatory process will be the start of the measure set implementation process, after which the Committee might consider an analysis of the set.

4. Co-Chair Boros asked the Committee for their feedback on the SQAC final report.
 - a. Amy Whitcomb Slemmer thanked the staff for their work.
 - b. Dr. Feldman stated that the next steps section was appropriate and well-written; the Committee was in a good position to move forward. He also thanked committee staff for their work.
 - c. Dr. Lopez stated that the final report was well-written and the meetings were also well-moderated. He said the issue of measure suitability is important and that he appreciated that the report mentions not wanting to add to providers' administrative burdens.
 - d. Diane Anderson agreed that the final report is comprehensive of the Committee's activities. She said the Committee should consider keeping the SQMS consistent and limiting changes in the future, especially in regards to expanding the measure set.
 - i. In response, Co-Chair Boros said the Committee might consider in the future other provider types; in its first year, the Committee focused on hospitals and community health centers.
 - e. Dolores Mitchell also commended the staff for their work on the final report. She said the Committee might consider in the future grouping measures by diagnoses, in order to make the SQMS more useful to consumers.
 - f. Ann Lawthers agreed that it is difficult to construct families of measures. In practice, different organizations often assign the same measure to different families. For this reason it can be difficult to reach consensus. But it is important to consider how a measure is grouped across all users.
 - g. Amy Whitcomb Slemmer stated that she hoped the SQMS would allow people to adopt measures more quickly; this is an opportunity to support the state and providers in moving more quickly on quality improvement. She also noted that she supported a structure for grouping measures into families if it would help consumers use the SQMS.
 - h. Katherine Shea Barrett stated that Blue Cross Blue Shield has thought a lot about composite measures and how to group measures based on suitability to certain uses. She also noted, however, that composites of measures are statistically not the same among different stakeholders. Discussing how measures will roll up should be a priority for the Committee. She added that the SQAC should consider adding measures that capture patient-reported outcomes and specialty practice areas.
 - i. Jon Hurst agreed with both of the priority areas recommended by Katherine Shea Barrett
 - j. Co-Chair Boros asked if the Committee approved the SQAC final report.
 - i. Motion to approve the final report passed unanimously.
5. Co-Chair Boros stated three next steps:
 - a. Staff will publish a schedule of meetings for 2013. There will likely be between 4-6 meetings in the next meeting cycle.
 - b. The regulatory process will begin soon. Staff is currently working on details and will reach out to Committee members for an informational/non-public call about this process. The SQAC will not reconvene during this time.
 - c. Co-Chair Boros requested that Committee members send recommendations for the new health plan representative seat.
 - d. Dolores Mitchell asked if current Committee members were automatically reappointed.

- i. Co-Chair Boros said yes.

The meeting was adjourned.
