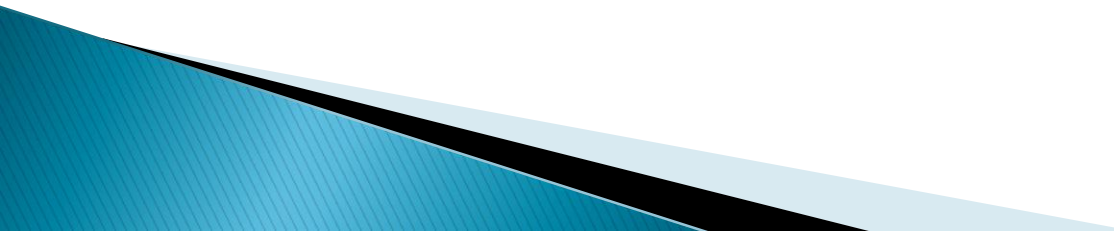


Quality Measure Development for Complex Populations

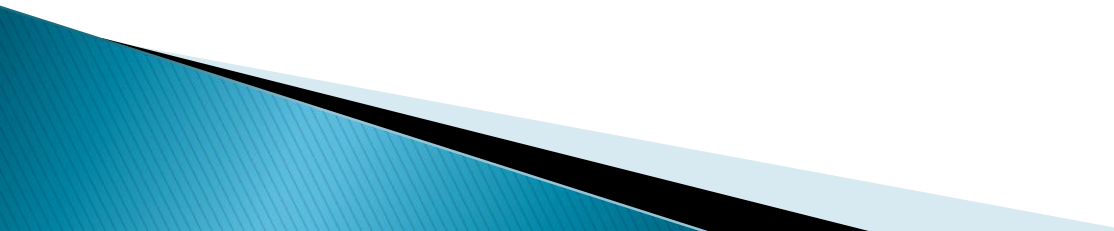
A Look at the Players and the Work-to-Date



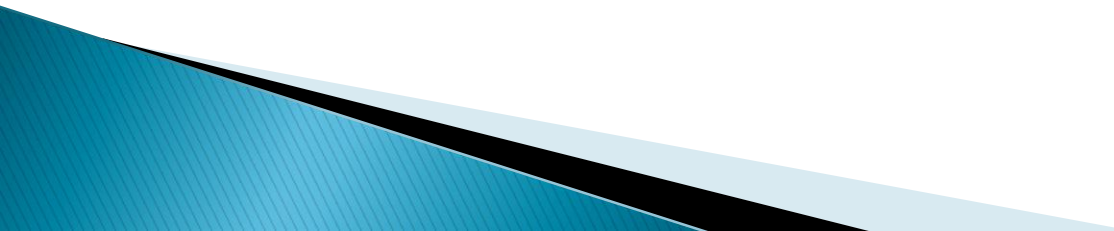
Introductions

- ▶ Susan Reinhard
 - ▶ Jennie Chin Hansen
 - ▶ Jessica Briefer French
 - ▶ Ellen O'Brien
 - ▶ Participants
- 

Agenda

- ▶ Setting the Context
 - ▶ Panelist Insights
 - ▶ Group and Table Discussion
- 

Setting The Context

- ▶ Affordable Care Act
 - Shift from acute, medical, hospital-based measures to long-term, person-centered measures that capture what is most important to the person
 - ▶ Construct Void for Home and Community Based Services (HCBS)
 - In Play = Health Plans, Hospitals, Physicians, and Nursing Homes
 - In Development = HCBS
- 

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Co-Chair, [National Quality Forum,](#)
[Dual Eligibles MAP](#)
(Measures Application Partnership)

This workgroup provides input to the Department of Health and Human Services on issues related to the quality of care for Medicare/Medicaid dual eligible beneficiaries.



NATIONAL
QUALITY FORUM

Jessica Briefer French

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National Committee for Quality Assurance (NCQA)

NCQA works to transform health care quality through measurement, transparency and accountability. As a central figure in driving improvement throughout the health care system, NCQA has helped to elevate the issue of health care quality to the top of the national agenda.



Ellen O'Brien, Ph.D.

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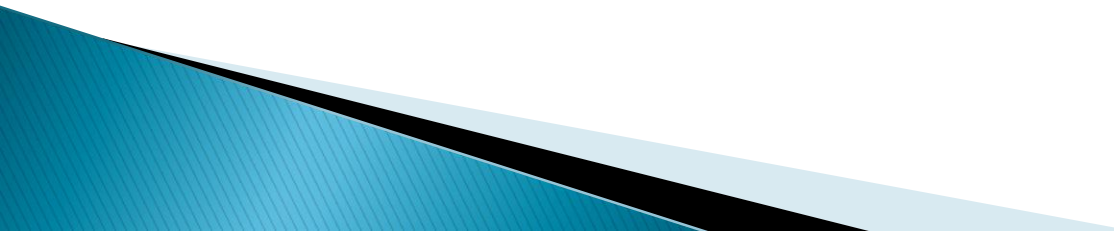
Together with its members, AcademyHealth works to improve health and the performance of the health system by supporting the production and use of evidence to inform policy and practice.

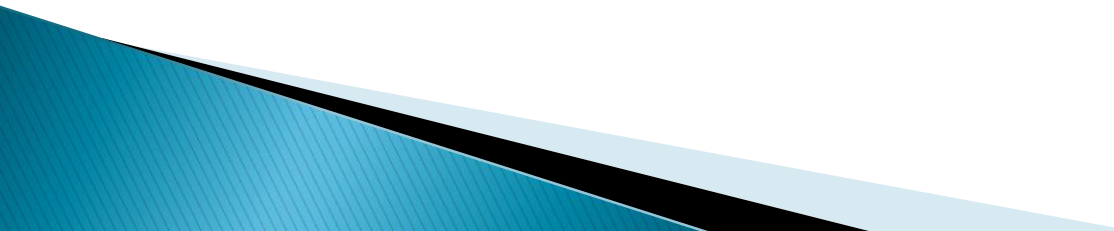


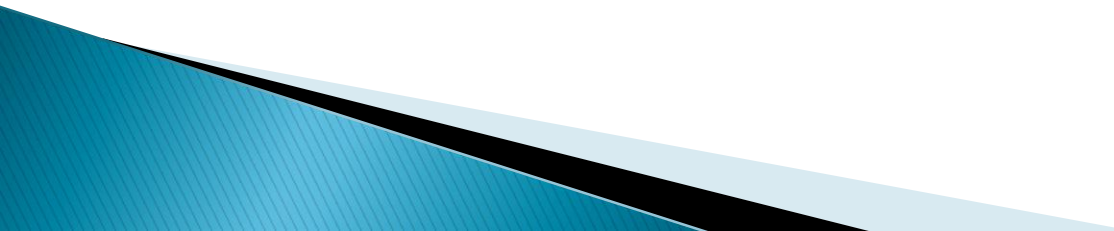
AcademyHealth

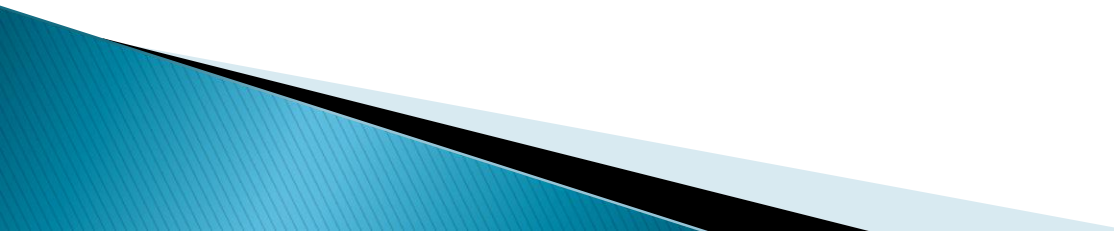
Advancing Research, Policy and Practice

Group Discussion:

- ▶ What is quality in HCBS?
 - ▶ How will a large purchaser of HCBS know how to evaluate quality and how to assure accountability?
 - ▶ What sorts of HCBS quality measures will be most useful to older adults and their families?
 - ▶ Can we measure the aspects of quality older adults and their family caregivers care most about?
- 

- ▶ How can we advance HCBS quality measurement?
 - ▶ Where are the policy opportunities for building consistent and reliable HCBS quality measures across states?
 - ▶ What are some promising opportunities to advance quality measurement in HCBS?
 - ▶ What vehicles (legislation, regulation, government purchasing) are most promising for driving HCBS quality measurement?
 - ▶ Who needs to champion HCBS quality measurement to get quality measures developed and implemented?
- 

- ▶ Table Discussion: To get a meaningful picture of HCBS quality, what are the most important outcomes to measure?
 - Utilization outcomes (e.g., time to nursing home admission)
 - Health outcomes (e.g., worsening pressure ulcers)
 - Functional outcomes
 - Quality of life
 - Caregiver outcomes (burden)
 - Person and family experience of care/satisfaction with care
 - Goal-centered outcomes (extent to which services help older adults with things that matter most to them)
- 

- ▶ How do you ensure that unlicensed service providers are trustworthy and capable? What sort of vetting do you do prior to hiring/contracting?
 - ▶ What are the best systems for communicating around a transition to or from the hospital? How should such communications flow, and who do you know is doing this especially well?
 - ▶ What value do you find in documenting goals? Is it useful for care and service planning or is it just meeting a requirement? Who else does goal documentation help?
- 

What's Next?

▶ Comment Opportunities:

- Federal comment period open to shape future Medicare physician payment framework (*Merit-Based Incentive Payment System*). Open until **November 2nd**.
- NQF HCBS workgroup often seeks public comment.

▶ New Initiatives:

- NCQA pilot project to test structure and process measures in integrated care
 - Testing Experience and Functional Tools (TEFT) piloting common assessment tool CMS' Post-acute payment reform demonstration (IMPACT)
 - National Core Indicators Pilot
 - CMS testing managed LTSS measures (upcoming)
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