



Optimizing Patients' Health by Improving the Quality of Medication Use

Quality Metrics & Immunizations

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Discussion Objectives

1. Describe the types and distribution of quality metrics
2. Describe the expanding influence of quality metrics and their connection to CMS incentive structures
3. Explore the immunization measures included throughout federal quality programs
4. Discuss current immunization quality measure development activities



Who is the Pharmacy Quality Alliance?

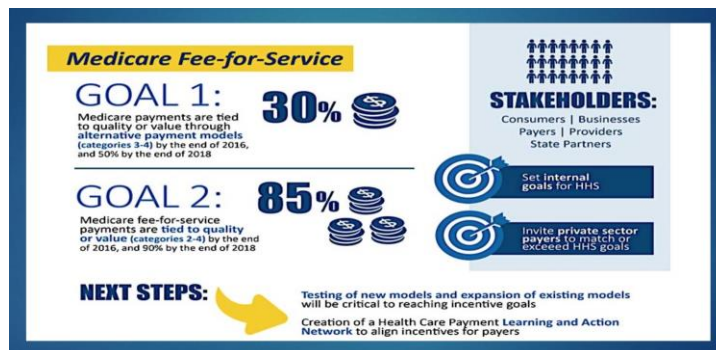
Mission Statement:

Improve the quality of medication management and use across health care settings with the goal of improving patients' health through a collaborative process to develop and implement performance measures and recognize examples of exceptional pharmacy quality.

- Created in 2006 as a public-private partnership
- Multi-Stakeholder, Member-Based, Non-Profit
- Transparent & Consensus Based Process
- Nationwide Measure Developer



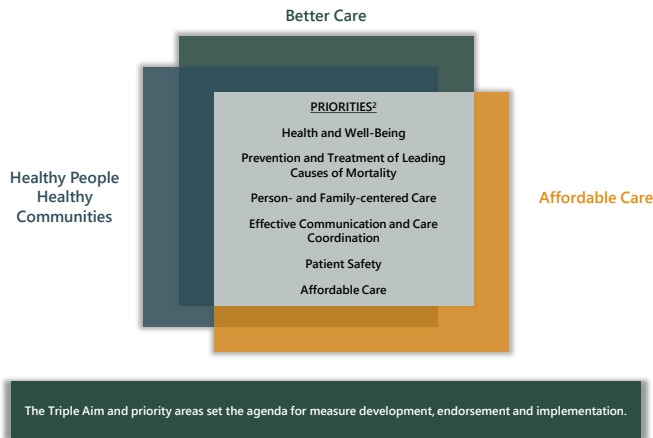
The Shift from Volume to Value



Burwell SM. Setting Value-Based Payment Goals – HHS Efforts to Improve U.S. Health Care. N Engl J Med 2015 Jan 26; 372(10):897-899.



HHS¹ National Quality Strategy (NQS): Direction for Measure Development



1. HHS: Department of Health and Human Services
2. National Priorities Partnership. (2011). Input to the Secretary of Health and Human Services: Priorities for the National Quality Strategy.



Medicare Access and CHIP Reauthorization Act (2015) - MACRA

- Medicare Access and CHIP Reauthorization Act of 2015, bipartisan legislation signed into law on April 16, 2015
- **Repeals** the Sustainable Growth Rate (SGR) Formula
- **Changes the way that Medicare pays clinicians** and establishes a new framework to reward clinicians for **value** over volume
- **Streamlines** multiple quality reporting programs into 1 new system (MIPS)
- **Provides bonus payments** for participation in *eligible* alternative payment models (APMs)

Medicare Access and CHIP Reauthorization Act of 2015, Pub. L. No. 114-10, 129 Stat. 87 (2015).



Federal Quality Improvement Programs

Hospital Quality	Physician Quality	PAC Quality	Payment Models	Population Health
<ul style="list-style-type: none"> • Meaningful use EHR incentive • Inpatient quality reporting • Outpatient quality reporting • Ambulatory surgical centers • Readmission reduction program • HAC payment reduction program • PPS-exempt cancer hospitals • Inpatient psychiatric facilities 	<ul style="list-style-type: none"> ▪ Merit-based Incentive Payment (MIPS) ▪ Maintenance of certification 	<ul style="list-style-type: none"> ▪ Inpatient rehabilitation facility ▪ Nursing Home Compare measures ▪ LTCH quality reporting ▪ Hospice quality reporting ▪ Home health quality reporting 	<ul style="list-style-type: none"> ▪ Medicare Shared Savings Program (ACOs) ▪ Hospital value-based purchasing ▪ Physician Feedback ▪ ESRD QIP ▪ Innovations Pilots 	<ul style="list-style-type: none"> ▪ Medicare Part C ▪ Medicare Part D ▪ Medicaid Adult Core Measures ▪ Medicaid Child Core Measures ▪ Health Insurance Exchange Quality Reporting System (QRS)



*If you cannot measure it...
you cannot monitor it.*

*If you cannot monitor it...
you cannot manage it.*

*If you cannot manage it...
you cannot improve it*

Dr. H. James Harrington

What is a Healthcare Performance Measure?

- Healthcare performance measures are tools used to *quantify* the quality or cost of care provided to patients and their families.
- They allow us to *gauge* the quality of care that is provided and help us understand whether and how much improvement activities *improve* care and outcomes .



Source: National Quality Forum
Image: http://www.atlasinteriors.co.uk/how_to_measure

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How is a Performance Measure Calculated?

Numerator

People who actually receive the action

Denominator — *Exclusions*

People who are eligible to receive the action (such as treatment or screening)

People who are not eligible for the action for specific, defined reasons

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Types of Measures

Outcomes <i>(the "holy grail")</i> <ul style="list-style-type: none">• Hospital readmission rate post discharge	Intermediate Outcomes <ul style="list-style-type: none">• Adherence measures	Patient Experience/ Patient Satisfaction <ul style="list-style-type: none">• HCAHPS
Access <ul style="list-style-type: none">• Plans make timely decisions about appeals	Process <ul style="list-style-type: none">• MTM CMR completion rate	Structure <ul style="list-style-type: none">• Policies and procedures for reporting adverse drug event

Process Measures

- Show whether steps proven to benefit patients are followed correctly
- Measures whether an action was completed
 - Writing a prescription
 - Administering a drug
 - Having a conversation
- **Example:** Childhood Immunization Status
Percentage of children 2 years of age who had
 - four DtaP/DT
 - three IPV
 - one MMR
 - three H influenza type B
 - three hepatitis B
 - one chicken pox vaccine (VZV)
 - four pneumococcal conjugate vaccines by their second birthday

Outcome Measures

- Take stock not of the processes; results of care
- Most relevant measures for patients
- Measures that providers most want to change
- **Example:** Surgical Site Infections
 - Percentage of surgical site infections occurring within 30 days after the operative procedure

Source: NQF ABC's of Measurement



Composite Performance Measures

- Combines the result of multiple performance measures to
 - Produce a single score
 - Provide a more comprehensive picture of quality care
- **Example:** Mortality for Selected Conditions
 - Measure of in-hospital mortality indicators for selected conditions

Source: NQF ABC's of Measurement



Immunization Measures in Federal Programs

Measure	Total Federal Programs	Programs
Adolescent IZ Status	4	PQRS; Medicaid CHIPRA; Health Insurance Marketplaces; MIPS
Childhood IZ Status	4	PQRS; Medicaid CHIPRA; Health Insurance Marketplaces; MIPS
Hepatitis A	1	PQRS
HPV in females	1	Medicaid CHIPRA
Influenza	9	Hospital Inpatient Quality Reporting; Inpatient Rehabilitation Facility; Nursing Home Compare Measures; LTCH Quality Reporting; Home Health Quality Reporting; Medicare Shared Savings Program; Medicaid Adult Core; Health Insurance Marketplaces; Medicare Part C
Influenza Healthcare Professionals	8	Hospital Inpatient Quality Reporting; Outpatient Quality Reporting; Ambulatory Surgical Center Quality Reporting; Inpatient Rehabilitation Facility; LTCH Quality Reporting; PPS Exempt Cancer Hospitals; Inpatient Psychiatric Facilities; ESRD QIP
Influenza Screening	4	PQRS; Home Health Quality Reporting; Medicare Shared Savings Program; MIPS
Pneumococcal	6	Hospital Inpatient Quality Reporting; PQRS; Nursing Home Compare Measures; Home Health Quality Reporting; Medicare Shared Savings Program; MIPS
Pneumococcal Screening	1	Home Health Quality Reporting
Registry Submission Capability	1	Medicare and Medicaid EHR Incentive: Meaningful Use Stage 2 Core

CMS Part C Star Ratings Program

2017 Measure Number	Measure	2014 Average Star	2015 Average Star	2016 Average Star	2017 Average Star
C03	Annual Flu Vaccine	3.4	3.3	3.3	3.3

Measure Development

How are Measures Developed?

- Identify focus/measure concept(s)
- Literature review/evidence review
- Expert input, e.g., Expert Advisory Panel
- Measure identification
- Measure specifications
- Public comment
- Testing
- NQF endorsement
- Implementation

Recommended Adult Immunization Schedule

Recommended Adult Immunization Schedule—United States - 2016
 Note: These recommendations must be read with the footnotes that follow containing number of doses, intervals between doses, and other important information.

Figure 1. Recommended immunization schedule for adults aged 19 years or older, by vaccine and age group¹

Vaccine	19-21 years	22-26 years	27-49 years	50-69 years	65-69 years	≥ 65 years
Influenza ^{2,3}	1 dose annually					
Tetanus, diphtheria, pertussis (Td/Tdap) ^{2,3}	Substitute Tdap for Td once, then Td booster every 10 yrs					
Varicella ⁴	2 doses					
Human papillomavirus (HPV) Female ⁵	3 doses					
Human papillomavirus (HPV) Male ⁶	3 doses					
Zoster ⁷	1 dose					
Measles, mumps, rubella (MMR) ²	1 or 2 doses depending on indication					
Pneumococcal 13-valent conjugate (PCV13) ⁸	1 dose					
Pneumococcal 23-valent polysaccharide (PPSV23) ⁹	1 or 2 doses depending on indication					
Hepatitis A ¹⁰	2 or 3 doses depending on vaccine					
Hepatitis B ¹¹	3 doses					
Meningococcal 4-valent conjugate (MenACWY) or polysaccharide (PPSV4) ¹²	1 or more doses depending on indication					
Meningococcal B (MenB) ¹³	2 or 3 doses depending on vaccine					
Rotavirus influenza type b (RIVB) ¹⁴	1 or 3 doses depending on indication					

¹ Recommended for all persons who meet the age requirement, lack documentation of vaccination, or lack evidence of prior infection, unless vaccine is recommended regardless of prior episode of disease.
² Recommended for persons with a risk factor (medical, occupational, lifestyle, or other indication).
³ No recommendation.

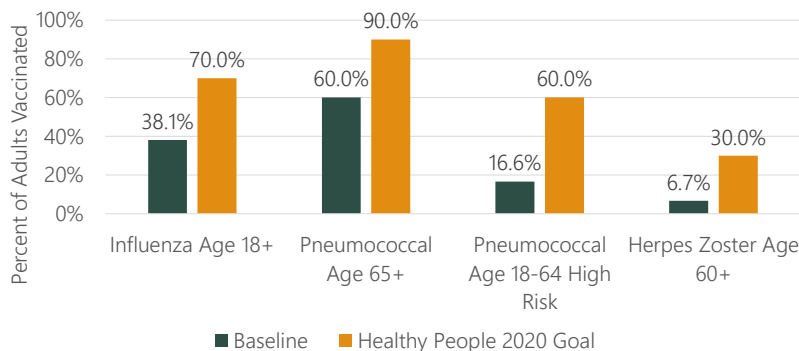
Report all clinically significant adverse events to the Vaccine Adverse Event Reporting System (VAERS). Reporting forms and instructions on filing a VAERS report are available at www.vaers.hhs.gov or by telephone, 800-822-7962.
 Information on how to file a Vaccine Injury Compensation Program claim is available at www.hrsa.gov/vaccinecompensation or by telephone, 800-338-2382. To file a claim for vaccine injury, contact the U.S. Court of Federal Claims, 717 Madison Place, N.W., Washington, D.C. 20005; telephone, 202-357-6400.
 Additional information about the vaccines in this schedule, extent of available data, and contraindications for vaccination is also available at www.cdc.gov/vaccines/imz/ or from the CDC-INFO Contact Center at 800-CDC-INFO (800-352-4353) in English and Spanish, 9:00 a.m. - 6:00 p.m. Eastern Time, Monday - Friday, excluding holidays.
 Use of trade names and commercial sources is for identification only and does not imply endorsement by the U.S. Department of Health and Human Services.
 The recommendations in this schedule were approved by the Centers for Disease Control and Prevention's (CDC) Advisory Committee on Immunization Practices (ACIP), the American Academy of Family Physicians (AAFP), the American College of Physicians (ACP), the American College of Obstetricians and Gynecologists (ACOG), and the American College of Nurse-Midwives (ACNM).



U.S. Department of Health and Human Services
 Centers for Disease Control and Prevention



Healthy People 2020 Goals



- Baseline data for influenza vaccination represents the percentage of adults who received the vaccine during the 2010-2011 influenza season (Minimum Data Set (MDS), CMS; National Health Interview Survey (NHIS), CDC/NCHS).
- Baseline data for pneumococcal vaccination represents the percentage of adults in 2008 who had ever received the vaccine (National Health Interview Survey (NHIS), CDC/NCHS).
- Baseline data for herpes zoster represents the percentage of adults in 2008 who had ever received the vaccine (National Health Interview Survey (NHIS), CDC/NCHS).



Prioritizing Measure Gaps: Adult Immunization

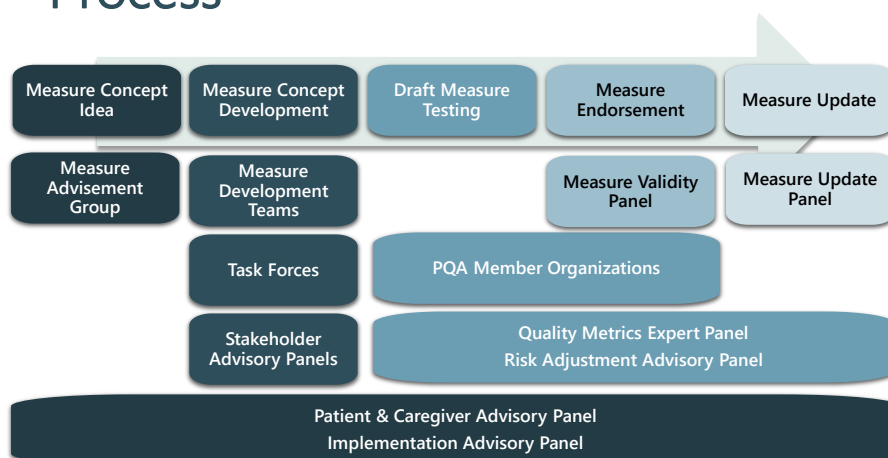
NQF Priorities for Measure Development

1. HPV catch-up for ages 19-26
2. Tdap/Pertussis vaccine for ages 19-59
3. Zoster vaccine for ages 60-64
4. Zoster vaccine for ages 65+
5. Composite with other preventative services
6. Composite—Tdap and flu for pregnant women
7. Composite—Influenza, pneumococcal, Hepatitis B in diabetes
8. Composite—Influenza, pneumococcal, Hepatitis B in ESRD
9. Composite—Hep A and B in chronic liver disease
10. Composite of all AHIP vaccines for healthcare workers

National Quality Forum. Priority Setting for Healthcare Performance Measurement: Addressing Performance Measure Gaps for Adult Immunizations. Final Report. 2015 Aug.



PQA's Measure Development Process



5 Things to Consider for Measure Development

Importance

Feasibility

Implementation

Data Source

Level of Measurement



National Quality Forum (NQF)

The NQF is a nonprofit organization that operates under a three-part mission to improve the quality of American healthcare by:

- Setting national priorities and goals for quality improvement
- **Endorsing national standards for measuring and reporting**
- Promoting the attainment of national goals through education and outreach



Current Measure Development Efforts

NAIIS Quality Metrics Workgroup

- Maternal Immunization Subgroup
 - Measure consists of flu, TDaP
- ESRD Immunization Subgroup
 - Measure consists of flu, pneumo, Hep B
- Adult Immunization Composite Subgroup
 - Successful adult measure developed by IHS (Tdap, pneumo, herpes zoster) \pm influenza

NAIIS Quality Measures Working Group, 2017 April 2017



NCQA & HEDIS

- Pneumococcal Vaccination Status for Older Adults
 - Moves away from survey data
 - Proposes using only electronic data sources

Proposed New Measure for HEDIS® 12018: Pneumococcal Vaccination Status for Older Adults (PVS).
Draft Document for HEDIS® 2018 Public Comment—Obsolete After March 22, 2017



PQA's Current Measure Concepts

1. Immunization Information System Reporting
2. Immunization Status Assessment within Medication Therapy Management (MTM)
3. ACIP Compliance following Immunization Status Assessment within MTM
4. Up-to-date Vaccination Status for Persons with Diabetes



Questions?

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