All Things Quality Measurement

Quality & Performance Measures (QPM) Workgroup (WG)

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QPM WG: Represented Organizations

- Federal Agencies
  - Centers for Disease Control & Prevention (CDC)
  - Centers for Medicare and Medicaid Services (CMS)
  - Department of Defense (DoD)
  - Department of Veterans Affairs (VA)
  - Health Resources and Services Administration (HRSA)
  - Indian Health Service (IHS)

- Professional Associations/Networks
  - Infectious Diseases Society of America (IDSA)
  - Adult Vaccine Access Coalition (AVAC)
  - American Academy of Family Physicians (AAFP)
  - American Association of Nurse Practitioners (AANP)
  - American College of Nurse Midwives (ACNM)
  - American Immunization Registry Association (AIRA)
  - Heartland Kidney Network
  - Immunization Action Coalition (IAC)
  - Kidney Care Quality Alliance (KCQA)
  - March of Dimes
  - Pharmacy Quality Alliance (PQA)
  - Quality Innovation Network-Quality Improvement Organizations (QIN-QIOs)

- Academia
  - Johns Hopkins Bloomberg School of Public Health (JHBSPH)
  - University of Arkansas for Medical Science (UAMS)
  - University of Kansas Medical Center (KUMC)

- Local/State Health Departments
  - California Department of Public Health
  - Michigan Department of Health and Human Services
  - Minnesota Department of Health
  - New York City Department of Health and Mental Hygiene
  - New York State Department of Health
  - Virginia Department of Health

- Corporations
  - GlaxoSmithKline (GSK)
  - Merck
  - Pfizer
  - Rite Aid
  - Sanofi Pasteur
Session Agenda

I. Quality Measure Adoption Pathways
   • Healthcare Quality Reporting (e.g. CMS)
   • Health Plans (e.g. HEDIS)

II. Update on Measures
   • Current WG Status
   • Pharmacy Quality Alliance (PQA) – Adult Immunization Task Force

III. Announcements

I. QUALITY MEASURE ADOPTION PATHWAYS
5 Things to Consider for Measure Development

- Importance
- Feasibility
- Implementation
- Data Source
- Level of Measurement

Federal Quality Improvement Programs

<table>
<thead>
<tr>
<th>Hospital Quality</th>
<th>Physician Quality</th>
<th>PAC Quality</th>
<th>Payment Models</th>
<th>Population Health</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Meaningful use EHR incentive</td>
<td>• Merit-based Incentive Payment (MIPS)</td>
<td>• Inpatient rehabilitation facility</td>
<td>• Medicare Shared Savings Program (ACOs)</td>
<td>• Medicare Part C</td>
</tr>
<tr>
<td>• Inpatient quality reporting</td>
<td>• Maintenance of certification</td>
<td>• Nursing Home Compare measures</td>
<td>• Hospital value-based purchasing</td>
<td>• Medicare Part D</td>
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<tr>
<td>• Outpatient quality reporting</td>
<td></td>
<td>• LTCH quality reporting</td>
<td>• Physician Feedback</td>
<td>• Medicaid Adult Core Measures</td>
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<tr>
<td>• Ambulatory surgical centers</td>
<td></td>
<td>• Hospice quality reporting</td>
<td>• ESRD QIP</td>
<td>• Medicaid Child Core Measures</td>
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<tr>
<td>• Readmission reduction program</td>
<td></td>
<td>• Home health quality reporting</td>
<td>• Innovations Pilots</td>
<td>• Health Insurance Exchange Quality Reporting System (QRS)</td>
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<tr>
<td>• HAC payment reduction program</td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>
## Immunization Measures in Federal Programs

<table>
<thead>
<tr>
<th>Measure</th>
<th>Total Federal Programs</th>
<th>Programs</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adolescent IZ Status</td>
<td>4</td>
<td>PQRS; Medicaid CHIPRA; Health Insurance Marketplaces; MIPS</td>
</tr>
<tr>
<td>Childhood IZ Status</td>
<td>4</td>
<td>PQRS; Medicaid CHIPRA; Health Insurance Marketplaces; MIPS</td>
</tr>
<tr>
<td>Hepatitis A</td>
<td>1</td>
<td>PQRS</td>
</tr>
<tr>
<td>HPV in females</td>
<td>1</td>
<td>Medicaid CHIPRA</td>
</tr>
<tr>
<td>Influenza</td>
<td>9</td>
<td>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</td>
</tr>
<tr>
<td>Influenza Healthcare Professionals</td>
<td>8</td>
<td>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</td>
</tr>
<tr>
<td>Influenza Screening</td>
<td>4</td>
<td>PQRS; Home Health Quality Reporting; Medicare Shared Savings Program; MIPS</td>
</tr>
<tr>
<td>Pneumococcal</td>
<td>6</td>
<td>Hospital Inpatient Quality Reporting; PQRS; Nursing Home Compare Measures; Home Health Quality Reporting; Medicare Shared Savings Program; MIPS</td>
</tr>
<tr>
<td>Pneumococcal Screening</td>
<td>1</td>
<td>Home Health Quality Reporting</td>
</tr>
<tr>
<td>Registry Submission Capability</td>
<td>1</td>
<td>Medicare and Medicaid EHR Incentive: Meaningful Use Stage 2 Core</td>
</tr>
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</table>

### HEDIS as a pathway – what can land in 2019?

<table>
<thead>
<tr>
<th>HEDIS 2017 Measures</th>
<th>Applicable to:</th>
<th></th>
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<tbody>
<tr>
<td></td>
<td>Commercial</td>
<td>Medicaid</td>
</tr>
<tr>
<td>Flu Vaccinations for Adults Ages 18-64</td>
<td>✔️</td>
<td>✔️</td>
</tr>
<tr>
<td>Flu Vaccinations for Adults Ages 65 and Older</td>
<td></td>
<td></td>
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<tr>
<td>Pneumococcal Vaccination Status for Older Adults</td>
<td></td>
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</table>

*Source: HEDIS 2017 Measures*
## II. UPDATE ON MEASURES

### Current WG Activities

<table>
<thead>
<tr>
<th>Subgroup</th>
<th>Composite Measures</th>
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</thead>
<tbody>
<tr>
<td>Maternal Immunization</td>
<td>Tdap and influenza</td>
</tr>
<tr>
<td>Adult Immunization</td>
<td>Tdap, pneumococcal, and zoster (influenza is under consideration)</td>
</tr>
<tr>
<td>End-Stage Renal Disease</td>
<td>Influenza, pneumococcal, and Hepatitis B</td>
</tr>
</tbody>
</table>
Rationale for Composite Measure

• Provides a broad perspective on the system of vaccination at a facility
  – Rather than a campaign to increase coverage with one vaccine, encourages a systematic approach for all vaccines

• Multiple measures make it challenging to implement broad-based immunization quality improvement activities

• “Composite measures can enhance measurement to extend beyond tracking performance on separate measures and can provide a potentially deeper view of the reliability of the care system”


Maternal Immunization Subgroup

• Maternal Composite Measure
• Testing currently underway with National Committee for Quality Assurance (NCQA)
• Goal: Incorporation into the Healthcare Effectiveness Data and Information Set (HEDIS)
• Public comment early 2018 (Handout)
Maternal Immunization (Cont’d)

Measure Development Activities & Timeline

- **Review Evidence**
  - Winter 2017
  - Clinical guidelines supporting influenza and Tdap vaccines for pregnant women
  - Consider how vaccinations fit within overall pregnancy health recommendations

- **Field Testing**
  - Spring/Summer/Fall 2017
  - Collect and analyze data from a variety of health plans and data sources

- **Stakeholder Feedback**
  - Ongoing
  - Test sites
  - Advisory panels
  - Public comment

- **Seek Approval**
  - Winter/Spring 2018
  - Committee on Performance Measurement
  - NCQA Board of Directors

If interested in participating in the field test, contact Lindsey Roth (roth@ncqa.org)

III. ADULT MEASURES
PQA's Current Measure Concepts

- **Immunization Information System Reporting (IISR)** [Seeking measure testers]
  - The percentage of claims for administered adult vaccinations that are recorded in Immunization Information Systems
  (Handout)
- **Companion Medication Therapy Management (MTM) Measures** [PQA QMEP Review]
  - **Immunization Status Assessment within MTM**
    - The percentage of adult health plan members who met eligibility criteria for medication therapy management (MTM) services who receive an immunization status assessment within the eligibility period
  - **ACIP Compliance following Immunization Status Assessment within MTM**
    - The percentage of immunization status assessments completed in an adult health plan MTM eligible member population that are documented as ACIP compliant
- **Up-to-date Vaccination Status for Persons with Diabetes** [early development]
  - The percentage of adult patients with diabetes mellitus who are up to date on all routinely recommended Advisory Committee for Immunization Practices (ACIP)/Centers for Disease Control and Prevention (CDC) vaccinations.

Adult Immunization Subgroup*

- Update on testing and timelines at the next Jun/July working group meeting
- Discussion on components v. composite in feasibility and likelihood of adoption
Adult Immunization (Cont’d)

Components

• Age 19-59 Tdap ever and Tdap/TD in the last 10 years
• Age 60-64 add zoster*
• Age 65+ one dose of pneumococcal (either) at age 65
• +/- Influenza

*to/will align with ACIP recommendations

End Stage Renal Disease Subgroup

• Influenza - CMS testing data this Fall
• Hepatitis B - Understanding CMS TEP concerns and challenges to feasibility
• Pneumococcal - Unclear how can this be constructed for this Medicare beneficiary population?
• Engagement with CMS ESRD, ESRD QUIP, ESRD Networks
Current State – What we know

• Coverage for adult vaccines is low

• Testing and development of immunization measures are occurring

• Current adult immunization measures are mostly limited to influenza and pneumococcal

IV. ANNOUNCEMENTS
Recruitment

• Health Plan Recruitment for Field Testing
  – PQA (see handout)
  – NCQA (see handout)

• Recruitment of QM SME for Expert Panel
  – CMS’s Technical Expert Panel for the Skilled Nursing Facility Quality Reporting Program. Nomination is due **THIS FRIDAY, May 12, 2017. Call for Technical Expert Panel (TEP) related to Quality Measure Development from CMS**

Please complete the evaluation form!!!
Questions?

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BACK-UP SLIDES
HHS Measurement Policy Council (MPC)

• **Background**
  – MPC is an inter-agency council established in 2012 with the goal of aligning measures across HHS
  – NVPO met with MPC in March 2017 to present current measurement gaps of adult immunization and seek feedback on approaches to measure development

• **Takeaways**
  – NQF endorsement is highly recommended but not mandatory for all programs
  – Successful elements for program adoption:
    • Demonstrated evidence of performance gap (e.g. disease burden)
    • Feasibility is an important factor in considering measure types (i.e. process/outcome/composite)

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### CMS Quality Reporting Programs

<table>
<thead>
<tr>
<th>Implemented Measures (CMS MUC List, Feb 2017)</th>
<th>Medicare Programs</th>
<th>NQF Endorsed?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Influenza Vaccination Coverage Among Healthcare Personnel (HCP)</td>
<td>1) Ambulatory Surgical Center Quality Reporting; 2) Hospital Inpatient Quality Reporting; 3) Hospital Outpatient Quality Reporting; 4) Inpatient Psychiatric Facility Quality Reporting; 5) Inpatient Rehabilitation Facility Quality Reporting; 6) Long-Term Care Hospital Quality Reporting</td>
<td>Yes (#0431)</td>
</tr>
<tr>
<td>1) Influenza Immunization Contraindicated; 2) Influenza Immunization Offered and Refused For Current Flu Season; 3) Influenza Immunization Received for Current Flu Season; 4) Pneumococcal Polysaccharide Vaccine Contraindicated; 5) Pneumococcal Polysaccharide Vaccine Ever Received; 6) Pneumococcal Polysaccharide Vaccine Offered and Refused</td>
<td>Home Health Quality Reporting</td>
<td>Endorsement Removed: 1) #0522 &amp; 2) #0525</td>
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<tr>
<td>Influenza Immunization</td>
<td>1) Hospital Inpatient Quality Reporting; 2) Hospital Value-Based Purchasing; 3) Inpatient Psychiatric Facility Quality Reporting</td>
<td>Yes (#1659)</td>
</tr>
<tr>
<td>Pneumococcal Immunization</td>
<td>Hospital Inpatient Quality Reporting</td>
<td>Yes (#1653)</td>
</tr>
<tr>
<td>Percent of Residents or Patients Who Were Assessed and Appropriately Given the Seasonal Influenza Vaccine (short stay)</td>
<td>1) Inpatient Rehabilitation Facility Quality Reporting; 2) Long-Term Care Hospital Quality Reporting</td>
<td>Yes (#0680)</td>
</tr>
<tr>
<td>Pneumococcal Vaccination Status for Older Adults (PNU)</td>
<td>Medicare Shared Savings Program</td>
<td>Endorsement Removed #0043</td>
</tr>
<tr>
<td>Preventive Care and Screening: Influenza Immunization</td>
<td>Medicare Shared Savings Program</td>
<td>Yes (#0041)</td>
</tr>
</tbody>
</table>
**CMS – Medicare: Quality Reporting Programs**

1) Ambulatory Surgical Center Quality Reporting Program (ASCQR)
2) Home Health Quality Reporting Program (HH QRP)
3) Hospital Inpatient Quality Reporting Program (HIQR)
4) Hospital Outpatient Quality Reporting Program (HOQR)
5) Hospital Value-Based Purchasing Program (HVBP)
6) Inpatient Psychiatric Facility Quality Reporting Program (IPFQR)
7) Inpatient Rehabilitation Facility Quality Reporting Program (IRF QRP)
8) Long-Term Care Hospital Quality Reporting Program (LTCH QRP)
9) Medicare Shared Savings Program (MSSP)
10) End-Stage Renal Disease Quality Incentive Program (ESRD QIP)
11) Medicare and Medicaid EHR Incentive Program for Eligible Hospitals (EHS) and Critical Access Hospitals (CAHs)
12) Merit-based Incentive Payment System (MIPS)
13) Prospective Payment System (PPS)-Exempt Cancer Hospital Quality Reporting Program (PCHQR)
14) Skilled Nursing Facility Quality Reporting Program (SNF QRP)

*Source: CMS Program Priorities and Needs (Apr 2017) & CMS Quality Measures Inventory (Feb 2017)*

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**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 ACIP vaccines for healthcare workers

*Source: NQF Prioritizing Measure Gaps: Adult Immunization*