CMS to Begin Accepting Suggestions for Potential Physician Quality Reporting System Measures and/or Measures Groups in May 2013

In May, the Centers for Medicare & Medicaid Services (CMS) will begin accepting quality measure suggestions for potential inclusion in the proposed set of quality measures in the Physician Quality Reporting System for future rule-making years.

Each measure submitted for consideration **must** include all required supporting documentation.

Documentation requirements will be posted on the <u>Measures Management System Call for Measures Webpage</u> on or around May 1, 2013. <u>Only those measures submitted in the provided format will be accepted for consideration.</u>

When submitting measures for consideration, please ensure that your submission is not duplicative of another existing or proposed measure. CMS is not seeking duplicative measures in this process.

CMS is seeking a quality set of measures that are outcome-based rather than clinical process measures and fall into one of the National Quality Strategy (NQS) Priorities domains where there are known measure and performance gaps. The measure gaps that CMS most wishes to fill include clinical outcomes, patient-reported outcomes, care coordination, safety, appropriateness, efficiency, and patient experience and engagement. CMS is less interested in clinical process or intermediate outcome measures.

Measures submitted for consideration will be assessed to ensure that they meet the needs of the Physician Quality Reporting Program, based upon the stated objectives outlined in this announcement. In addition, CMS encourages eligible providers to submit measures that do not have an adequate representation within the program for participation.

Suggested measures must address CMS' measure selection core criteria (listed below) to be considered for inclusion in the Physician Quality Reporting System. Measure submissions omitting the required core criteria will be disqualified from consideration.

CMS' Measure Selection Core Criteria (must meet all elements):

- Measure addresses an important condition/topic with a performance gap and has a strong scientific
 evidence base to demonstrate that the measure, when implemented, can lead to the desired outcomes
 and/or more appropriate costs (i.e., the National Quality Forum's Importance criteria)
- Measure addresses one or more of the six National Quality Strategy Priorities (safer care, effective communication and care coordination, preventing and treating leading causes of mortality and morbidity, person- and family-experience of care, better health in communities, making care more affordable)
- Promotes alignment with specific program attributes and across CMS and HHS programs
- Program measure set includes consideration for health care disparities
- Measure reporting is feasible

The measure selection criteria requirements seek to support the NQS' three-part aim of better health care for individuals, better health for populations, and lower costs for health care. CMS strives to utilize measures that balance breadth while minimizing provider burden, and take into account measures that address, as fully as possible, the six domains of measurement from the NQS priorities:

- Patient Safety
- Person and Caregiver-Centered Experience and Outcomes
- Communication and Care Coordination
- Effective Clinical Care
- Community/Population Health
- Efficiency and Cost Reduction.

This Call for Measures will run from May 1, 2013 through July 1, 2013. <u>All required documentation</u> must be completed for each measure submitted for consideration no later than 5:00 p.m. EDT July 1, 2013.

Note: Suggesting individual measures or measures for a new or existing measures group does not guarantee the measure(s) will be included in the proposed or final sets of measures of any Proposed or Final Rules that address the Physician Quality Reporting System. CMS will determine which individual measures and measures group(s) to include in the proposed set of quality measures, and after a period of public comment, the agency will make the final determination with regard to the final set of quality measures for the Physician Quality Reporting System.