## **Measures Management and You**

Centers for Medicare & Medicaid Services

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#### Welcome!

This month's newsletter discusses Measures Under Development, as well as a review of the Implementation Phase of the CMS Measures Management System (MMS). Every edition includes a link to the latest CMS Blueprint as well as a calendar of upcoming opportunities and events.

We hope you find this newsletter useful and we welcome any feedback or suggestions to make it even better.

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Please send comments or suggestions for future newsletters to <a href="MMSSupport@battelle.org">MMSSupport@battelle.org</a>.

# Measures Management & You Measures Under Development

The Centers for Medicare and Medicaid Services (CMS) Quality Measures Inventory has been updated! On July 1, 2016, the updated Quality Measures Inventory was uploaded onto the CMS Measures Inventory Webpage.

While publishing the CMS Quality Measures Inventory meets the Affordable Care Act's requirement for the Department of Health and Human Services (HHS) to develop a process for dissemination of quality measures, it also serves as a tool for CMS to communicate with valued health care partners who are dedicated to optimizing health outcomes.

CMS posts an updated, full list of quality measures used within CMS programs bi-annually. Measures include those which have been proposed, finalized, implemented or removed through the federal rulemaking process. The CMS Quality Measures Inventory lists each measure by program, and reports measure specifications including, but not limited to, numerator, denominator, exclusion criteria, National Quality Strategy (NQS) domain, measure type, and National Quality Forum (NQF) endorsement status. CMS Quality Measures Inventory serves as a resource for a variety of stakeholders to identify measures currently used in CMS programs. Additionally, the Inventory serves as a valuable resource as CMS strives to align,

prioritize, and implement the development of new, innovative measures.

New to the inventory is the addition of the measures for the Merit Based Incentive Payment System (MIPS), Adult and Child Medicaid Core measures, and the Qualified Health Plan Quality Rating System.

CMS has also released a list of Measures under Development. These are measures which are

currently in the development process and have not yet been accepted into a CMS program via either the pre-rulemaking or rulemaking process.

Updates and helpful hints on how to use the CMS Quality Measures Inventory are highlighted in the accompanying CMS Quality Measures Inventory User Guide. Have questions regarding the CMS Quality Measures Inventory? Email the Quality Measures Manager at MMSSupport@battelle.org.

## Measures Management Up Close

Each month, we will bring you an introspective look at a measures management topic.

## Implementation Phase of the Measures Management System Process

Many factors impact the implementation of a measure, such as the program to which it is being added or the health care provider being measured. Major steps to complete measure implementation include: 1) develop a coordination and rollout plan; 2) develop the business processes; 3) develop data management processes; 4) develop an audit and validation plan; 5) implement educational processes; 6) conduct a dry run; and 7) roll the measure out.

Depending on the program to which it is added, some proposed measures may be placed on the Measures under Consideration list for comment and/or submitted for consensus endorsement by the National Quality Forum (NQF). CMS reviews the comments and feedback for all measures while prioritizing the CMS final selection list and making a decision on whether to reject a measure or to move forward.

Once the Centers for Medicare & Medicaid (CMS) has selected a measure for use, the developer

provides the coordination and roll-out plan which will include the anticipated business processes, the data management processes, and the audit and validation plan. A critical piece of the plan and of a measure's success is educating providers and communicating the measure's purpose and value. The developer might provide user guides and manuals, hold conference calls, give presentations, and hold workshops. It is also important to provide the public the opportunity to give feedback on the measure. Conducting a dry run ensures data can be collected as planned as well as identifying and minimizing unexpected negative impacts or issues. Simultaneously, the measure will go through the Federal Rulemaking process prior to final implementation.

At the end of the implementation phase, CMS approved measures go into the reporting phase. For more detailed information on implementation, see Section 2, Chapter 4 of the <u>latest version of the MMS Blueprint</u>.

## **Upcoming Events**

- Skilled Nursing Facility (SNF) Quality Reporting Program (QRP) Call on July 12, 2016 at 1:30-3:00 p.m. ET
  - o Register for the event here
- ESRD QIP: Reviewing Your Facility's PY 2017 Performance Data webinar on August 2, 2016 at 2:30-4:00 p.m. ET
  - o Register for the event here
- PQRS Feedback Reports and the PQRS Informal Review Process for Program Year 2015 Results webinar on August 10, 2016 at 1:30-3:00 p.m. ET
  - o Register for the event here

## **Upcoming Opportunities**

### **Opportunities for Public Comment on quality measures**

- Hospital Inpatient and Outpatient Process and Structural Measure Development and Maintenance (Hospital-MDM). Electronic specification for one new measure, the Safe Use of Opioids -Concurrent Prescribing
  - o Public comment period opens July 1, 2016, and will close on July 31, 2016.

Please check the <u>CMS Quality Measures Public Comment Web Page</u> for current Public Comment announcements and summary reports.

#### **Opportunities to participate in a Technical Expert Panel (TEP)**

- MACRA Episode-Based Resource Use Measures Clinical Committee Nominations
  - o Clinical Committee nominations open July 5 and will close July 19.

Please check the CMS Quality Measures Call for TEP Web Page for current TEP membership lists and meeting summaries.

#### Opportunity to provide public comments on **Patient Relationship Categories**

• CMS is announcing the public posting of the Patient Relationship Categories draft list as required under section 101(f) of the Medicare Access and CHIP Reauthorization Act of 2015 (MACRA).

Please submit any comments to <u>patientrelationshipcodes@cms.hhs.gov</u> by August 15, 2016.

You can find all the previous Measures Management & You newsletters on the Listserv page of the MMS website.

New to the listserv or miss a month? Find all of our announcements <u>here</u>.

Please send comments and suggestions to <u>MMSSupport@battelle.org</u>.

