Metrics Technical Advisory Workgroup

July 28, 2016

PLEASE DO NOT PUT YOUR PHONE ON HOLD – IT IS BETTER IF YOU DROP OFF THE CALL AND REJOIN IF NEEDED

Today's Agenda

- Updates
- Tobacco Technical Assistance
- Food Insecurity Screening specifications (continued)
- Year 4 Guidance Document
- MACRA

Dashboards

- July dashboard was released July 27th
  - Rolling 12 months: April 1, 2015 – March 31, 2016
  - Improvement targets for EHR-based measures
  - Updated opioid PIP files

- August dashboard will be released by August 31st.

Business Objects Access

- Change to the account set up / access request process

Immunization Call

- Requested at previous TAG meeting: dedicated time for you to talk to each other about ALERT immunization data.

- Call scheduled for 10 AM, Monday August 1st.

- Email metrics.questions@state.or.us if you are not on the list and would like to participate.

Metrics & Scoring Committee

- Met June 17th and agreed to keep the measure set the same for 2017 – **<u>will not add or drop any measures.</u>**

- Met July 15th and selected most 2017 benchmarks.

- Upcoming meeting: August 19th
  - Remaining 2017 benchmark selection
  - 2017 challenge pool
  - 2018 measure selection work plan

Hospital Metrics

- Year 3 specifications now available online http://www.oregon.gov/oha/analytics/Pages/Hospital-Baseline-Data.aspx

- Year 3 improvement targets to be released this week

- Hospital TAG continues to develop emergency department-based opioid measure.

New Hospital Metrics Committee

Hospital Performance Metrics Advisory Committee: Effective July 1, 2016			
Role	Name	Organization	Term
Quality expert	Laura Duffey	Kaiser	July 2016 – June 2018
Quality expert	Mark Tomlinson	Physician (OB) / Oregon Perinatal Collaborative	July 2016 – June 2018
Quality expert	Jeff Luck	Oregon State University	Feb 2014 – June 2017
Hospital rep.	Manny Berman	Tuality Healthcare	Feb 2014 – June 2017
Hospital rep.	Doug Koekkoek	Providence	Feb 2014 – June 2017
Hospital rep.	Aisha Furbach	Legacy	July 2016 – June 2018
Hospital rep.	Sheri Johnson	Good Samaritan	July 2016 – June 2018
CCO rep.	Maggie Bennington-Davis	Health Share of Oregon	July 2015 – June 2017
CCO rep.	Ken House	PacificSource	July 2015 – June 2017

Transformation Center Incentive Measure TA

Colorectal Cancer Screening TA

Webinars – The final colorectal cancer screening webinar took place on July 20. To listen to the recordings, visit: https://www.oregon.gov/oha/Transformation-Center/Documents/CRC-Webinar-Series.pdf

Consultation calls – ORPRN conducted consultations with 10 CCOs and met with OHA to review the TA requests compiled during those calls. OHA will communicate next steps within the next couple of weeks.

Adolescent Well Visit TA – webinar series

The Oregon Pediatric Improvement Partnership is continuing to provide the following three webinar series to address the adolescent well-care visits:

Series 1: Adolescents – What, Why, and How You Educate About Adolescent Well-Visits

- September 29

Series 2: From Recommendations to Implementation: Key Learnings Related to Implementing Adolescent Well-Visits and Documenting in a Way that is Aligned with the CCO Incentive Metrics

- July 27 & September 8

Series 3: Going to Them! Leveraging Partnerships with School Based Health Centers

- August 18 & September 20

For more information and to register for these series, visit: http://www.oregon.gov/oha/Transformation-Center/Pages/Resources-Metric.aspx

Adolescent Well Visit TA – Eye-to-Eye

CCO staff and clinic partners are invited to an interactive youth-led **Eye to Eye training: Discussing Sensitive Topics with Youth**, presented by the Oregon School-Based Health Alliance and the Statewide Youth Action Council. By the end of the training participants will be able to:

- identify the type and quality of health advice young people want to receive;
- describe the importance of confidentiality in a youth/adult mentor relationship;
- recognize areas of direct application to their work;
- develop a stronger rapport with young people/teens;
- convey a non-judgmental attitude in talking with teens;
- connect biases to their impact on treatment for teens; and
- provide services in accordance with minor consent laws.

Eye-to-Eye Training Dates & Locations

Training #1:

- **When:** Wednesday, August 10, 2016, 1–4 p.m.
- **Where:** Pine Room (lobby of Lincoln building) – 421 SW Oak Street, Portland OR 97204
- **Register here**: https://eyetoeyeportland.eventbrite.com

Training #2:

- **When:** Monday, September 19, 2016, 8–11 a.m.
- **Where:** Pacific Source Suite 210 (second floor) – 2965 NE Conners Bend, OR 97701
- **Register here**: https://eyetoeyebend.eventbrite.com

Questions? Contact Laura.E.Kreger@state.or.us

Immunization Technical Assistance

- Western Oregon Advance Health recently completed the root cause analysis TA offered by the Transformation Center.

- WOAH will receive continued TA from the Transformation Center's two immunization consultants while initiating interventions.

Technical Assistance Description	Timeline
1. Root cause analysis consultation for CCO-level and clinic-level quality improvement 2. Regional community convenings	Completed by 12/31/16
Want to participate in the immunization TA? Email metrics.questions@state.or.us to initiate a request.	

Smoking Cessation Technical Assistance

- Needs assessment call with CCOs identified EHR supports at CCO and provider level, as well as provider training on cessation counseling as primary needs.
  - EHR support at clinic and CCO levels available through OHIT. Email metrics.questions@state.or.us.
  - Provider training on cessation counseling support available in later 2016 through Carol Gelfer's TA to the Transformation Center.

Description	Timeline
1. Tobacco cessation counseling training for providers and care teams: a. Current, easily accessible training resources for CCOs for use with providers. b. Training plan to complement existing training resources with emphasis on specific populations and culturally responsiveness developed..	Completed by 12/31/16
Are you involved in the smoking cessation metric work for your CCO and are available for a brief conversation with Carol? Email metrics.questions@state.or.us to initiate a request.	

Smoking Cessation TA Update: Carol Gelfer

Activities for 2016

- **Assess**: Connecting with people in CCOs to identify current practices and TA needs related to this metric
- **Create a best-practices resource document** for use by CCOs
- **Develop a training plan** to promote evidence-based approaches to tobacco cessation in clinical practices
- **Identify culturally responsive materials** and support networks relevant to specific populations

Longer Term Activities - into 2017

- **Conduct training** for CCOs on smoking cessation

Food Insecurity Screening Specifications

Recap

After several months of reviewing draft specifications and discussing intent for the proposed PIP measure, in April TAG suggested a bifurcated approach and writing two versions of the measure specifications:

- Population-based
- Provider / clinic-based

June TAG reviewed this approach and ultimately agreed to just focus on a provider / clinic level measure.

Today: final review of specifications

- Are there places where more detail is needed?
  - Qualifying visits?
  - Limitations of provider types?

- How should results be aggregated?
  - Numerator / denominator = rate for each clinic, then averaged across CCO for all clinics?

  - Add numerators / denominators across all clinics, calculate one CCO-wide rate?

Next Steps

- Make any final edits to the specifications
- Post online
- Share with Lisa Bui – Quality Improvement for additional discussion about PIP selection

Year 4 Guidance for EHR-Based Measures

Kate Lonborg

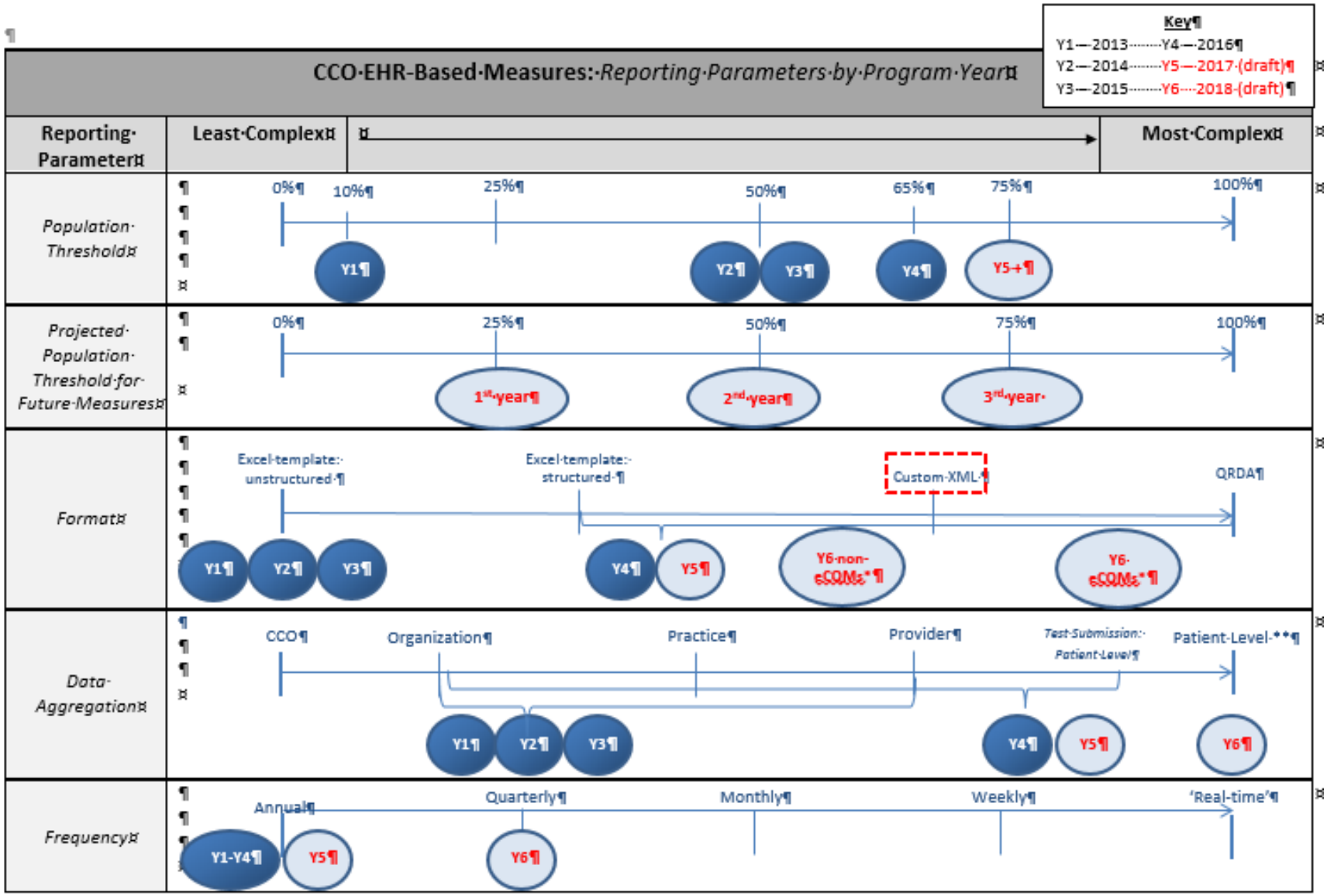
Year 4 Guidance for EHR-Based Measures

- Year 4 materials published [DATE] http://www.oregon.gov/oha/analytics/Pages/CCO-Baseline-Data.aspx
  - Year Four EHR-Based Measure Reporting Guidance Documentation
  - Year Four Data Proposal Template
  - Year Four Data Submission Template (aggregate)
- Yet to be published: Template for Patient Level Data Test Submission component of Data Submission

Draft Patient Level Data Test Submission Template

- Patient level data template mirrors the aggregated data submission template
- Template requires patient's Medicaid ID
  - This can be used as a back-up check to make sure the submission is limited to CCO Medicaid only
- Please send feedback to katrina.m.lonborg@state.or.us by Friday, Aug. 12
- Template will be finalized in August

Appendix D: Reporting Parameters by Program Year



*eCQMs refer to electronically specified measures included in Meaningful Use. Non-eCQMs refer to Oregon measures such as smoking prevalence, which do not have electronic specifications. OHA anticipates that non-eCQMs are unlikely to be reported in QRDA format.

**With patient-level data submissions, OHA plans to calculate CCO incentive measures based on CCO Medicaid member data only.

Clinical Quality Metrics Registry (CQMR) RFP

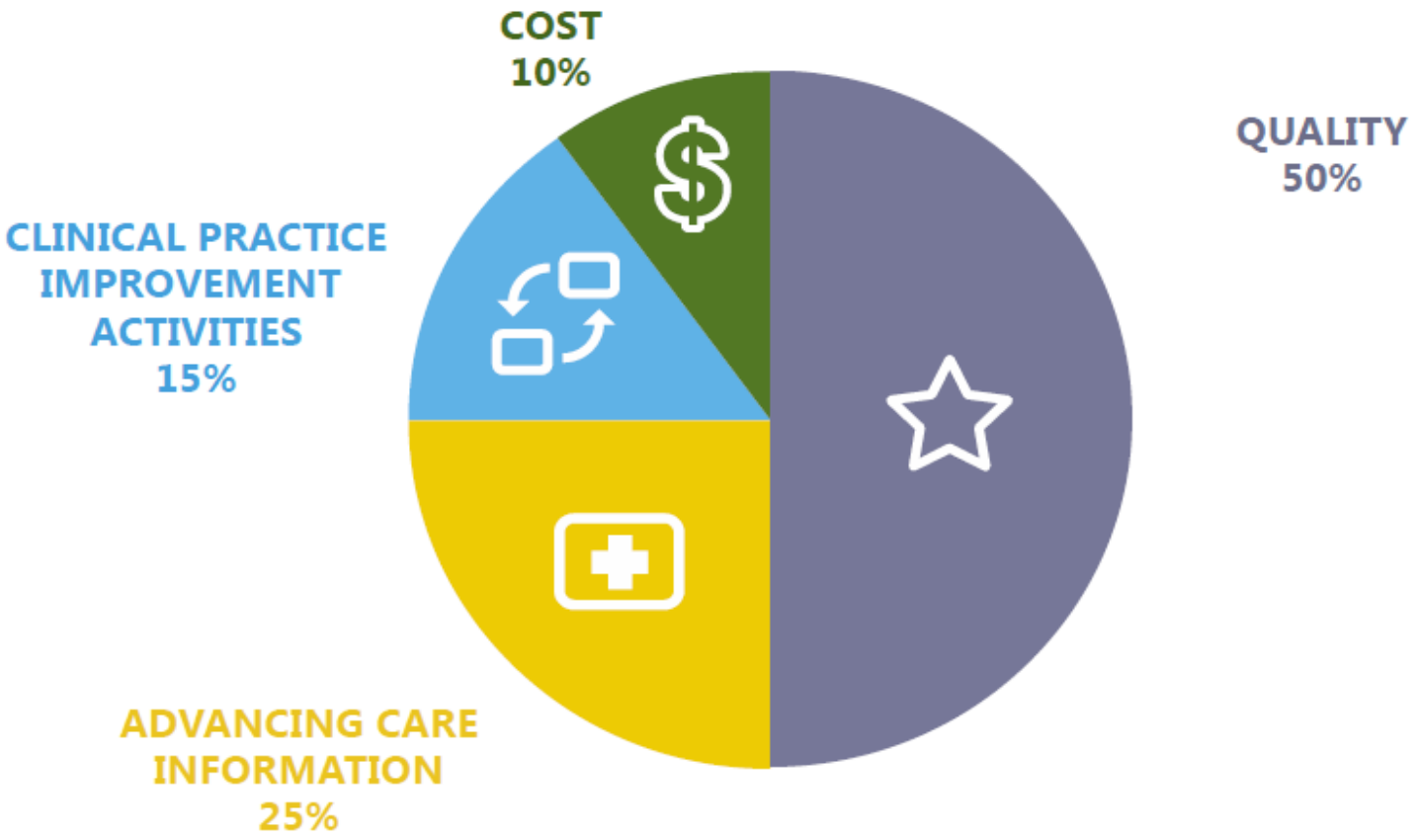
- Upcoming CQMR RFP
  - Notice posted in ORPIN (Notice # DASPS-2642-16)
  - RFP release August – September 2016
  - Vendor evaluation October – November 2016
- Aiming to have CQMR solution in place for Year 5 (2017) Data Proposals and Data Submissions
- Please tell Kate Lonborg katrina.m.lonborg@state.or.us if you are interested in participating in vendor evaluation demos
  - Anticipate 3 demos, each a 3-hour webinar
  - Non-disclosure agreements will be required

2015 Medicare Access and CHIP Reauthorization Act (MACRA)

- Establishes Merit-based Incentive Payment System (MIPS), which combines 3 existing programs:
  - Medicare EHR Incentive Program for eligible professionals
  - Physician Quality Reporting System (PQRS)
  - Value-based Payment Modifier (VM) Programs
- Establishes incentives for participation in alternative payment models (APMs)
- CMS released the MACRA Notice of Proposed Rulemaking (NPRM) 4/27/16 and public comment closed 6/27/16

https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/Value-Based-Programs/MACRA-MIPS-and-APMs/MACRA-MIPS-and-APMs.html

Proposed MIPS Year 1 (2017) Performance Score



https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/Value-Based-Programs/MACRA-MIPS-and-APMs/Quality-Performance-Category-training-slide-deck.pdf

CMS Quality Measure Development Plan for MIPS and APMs

CMS published guidance on its planning for quality measure development to support the Merit-Based Incentive Payment System (MIPS) and advanced Alternative Payment Models (APMs)

- Process and timeline for measure development and updates
- Gaps in current measures and priorities for development

https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/Value-Based-Programs/MACRA-MIPS-and-APMs/Final-MDP.pdf

Summary of Priorities and Gaps

- ***Clinical Care***
  - Measures incorporating personal preferences and shared decision-making
  - Outcome measures
  - Cross-cutting measures that may apply to more than one specialty
  - Focused measures for specialties that have clear gaps
- ***Safety***
  - Measures of diagnostic accuracy
  - Medication safety such as related to the following drug classes: Anticoagulants, Diabetes agents, Opioids
- ***Care Coordination***
  - Assessing team-based care (e.g., timely exchange of clinical information)
  - Effective use of new technologies such as telehealth
- ***Patient and Caregiver Experience***
  - Patient-reported outcome measures (PROMs)
  - Additional topics that are important to patients and families/ caregivers
- ***Population Health and Prevention***
  - Developing or adapting outcome measures at a population level to assess effectiveness of health promotion and preventive services
  - Detection or prevention of chronic disease (e.g., chronic kidney disease)
- ***Affordable Care***
  - Overuse measures (e.g., overuse of clinical tests/procedures)

MIPS Options for Reporting through Intermediaries

- For all 3 reported MIPS categories, CMS proposes to allow data submission by third party intermediaries
  - Qualified Registry
  - Qualified Clinical Data Registry (QCDR)
  - Health IT vendors that obtain data from eligible clinicians' CEHRT
- For *quality* category, MIPS eligible clinicians receive a bonus point for each measure using end-to-end electronic reporting
  - Bonus points capped at 10% of denominator for quality category
  - This option requires reporting all-payer data, not just Medicare

Environment for Reporting

As we look toward the future for quality reporting and CQMR…

- Is the Merit-based Incentive Payment System (MIPS) on your radar screen / your network's radar screen?
- Have you started thinking about qualified registries or qualified clinical data registries (QCDRs) as part of your strategies?

Next TAG meeting?

- August 25th scheduled – propose cancelling.
  - Will send written updates to TAG after Committee meeting decisions.

- Next meeting: September 22nd