ONC Health IT-Enabled Quality Measurement Strategic Implementation Guide Overview

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Health IT-Enabled Quality Measurement Topics

- Disclosure Statements

- ONC Health IT-Enabled Quality Measurement Strategic Implementation Guide Overview

- Q&A on Implementation Guide

- Next Steps: Learning Series & In-person Convening Overview

- Open Discussion

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Health IT-Enabled Quality Measurement – Background

Learning Events

→

Affinity Groups

→

In-Person TA Convening

→

★ Health IT-Enabled Quality Measurement Strategic Implementation Guide

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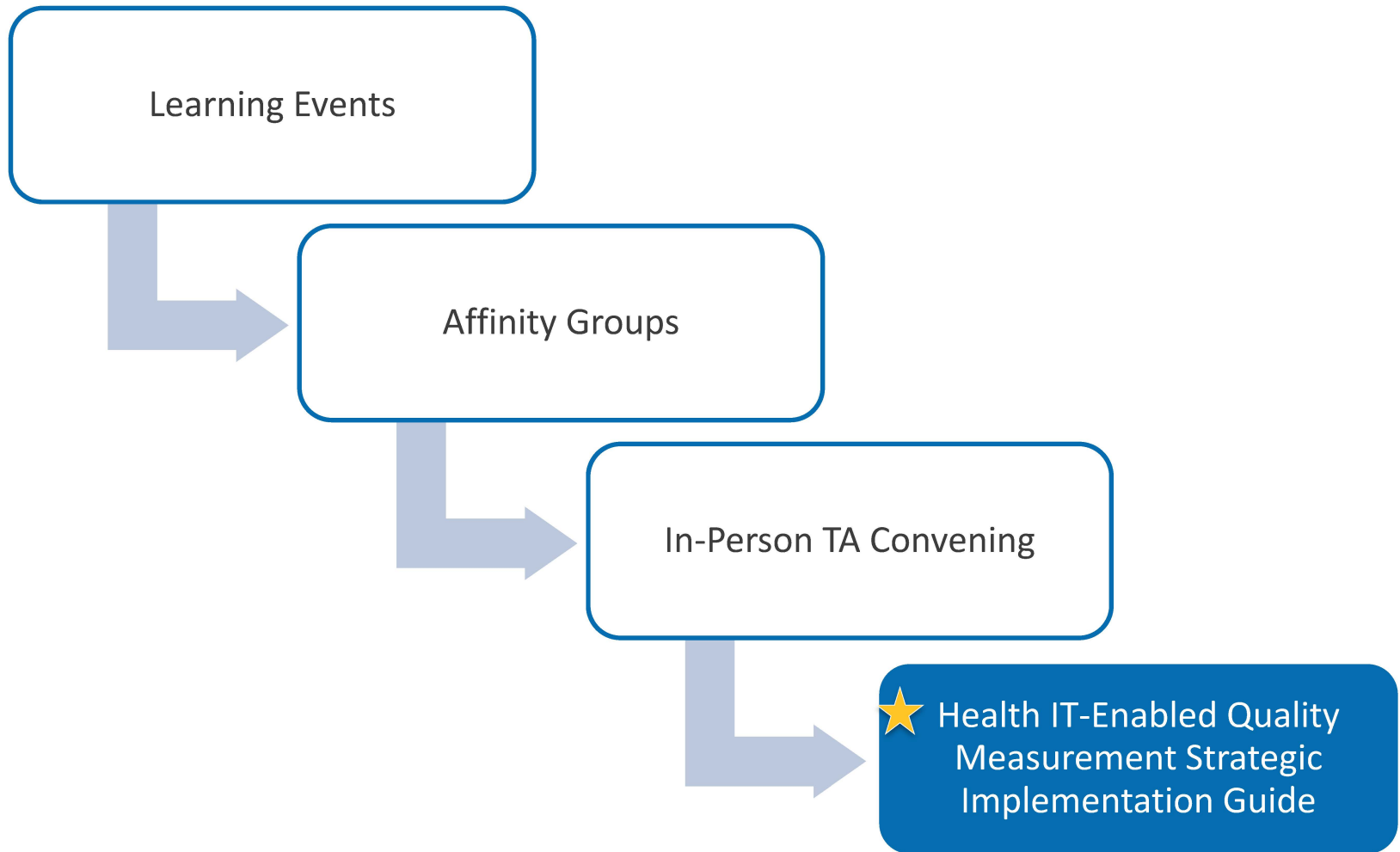
Quality measurement is a key component for

Delivery System Reform (DSR) efforts

Health IT-Enabled Quality Measurement

- Broader measurement scope than measurement done within a provider's EHR
- Enables **population-**, **community-**, and **patient-centric** measurement
- Informs total cost of care, quality of care, and improved outcomes

Cost and **quality** are measured utilizing a broader universe of:

- data sources
- data collection
- data aggregation

- analytics
- reporting
- feedback applications

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The Implementation Guide's strategic and implementation framework * includes:

- How to successfully organize a multi-stakeholder approach

- How to implement policy strategies and data infrastructure in support of alternative payment models

  » Perform patient-centric measure quality across a community and state geography

  » Reduce provider burden

  » Benefit public and private payers

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* This guide does not provide regulatory guidance to states but does include references for states to the areas of the Quality Payment Program (QPP) rule important for planning and stakeholders considerations.

Implementation Guide 10 Key Activities

Define Measurement Strategy

Identify Value Propositions

Establish Governance

Align Measures

Assess Technical Infrastructure

Identify Quality Measurement Functionality

Coordinate Implementation Planning

Align with Quality Improvement Assistance

Understand Financing

Leverage Policy Levers

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Health IT-Enabled Quality Measurement – Multi-Stakeholder Approach

Define Measurement Strategy

Align multi-payer efforts around clinical quality measures programs and common business case
- Clarity on current state
- Addressing real and perceived barriers
- Trust
- Technology Capability & Capacity
- **Appendix A: National Programs Requiring or Related to Quality Measurement**

Identify Value Propositions

The value proposition must be understood, and it must provide a sufficient reason for each party to engage and commit to a set of deliverables/outcomes
- Identify value-proposition for all stakeholders.
- **Appendix C: Value Proposition Toolkit**

Establish Governance

Establish frameworks for governance processes that include all payers, providers, and other key stakeholders
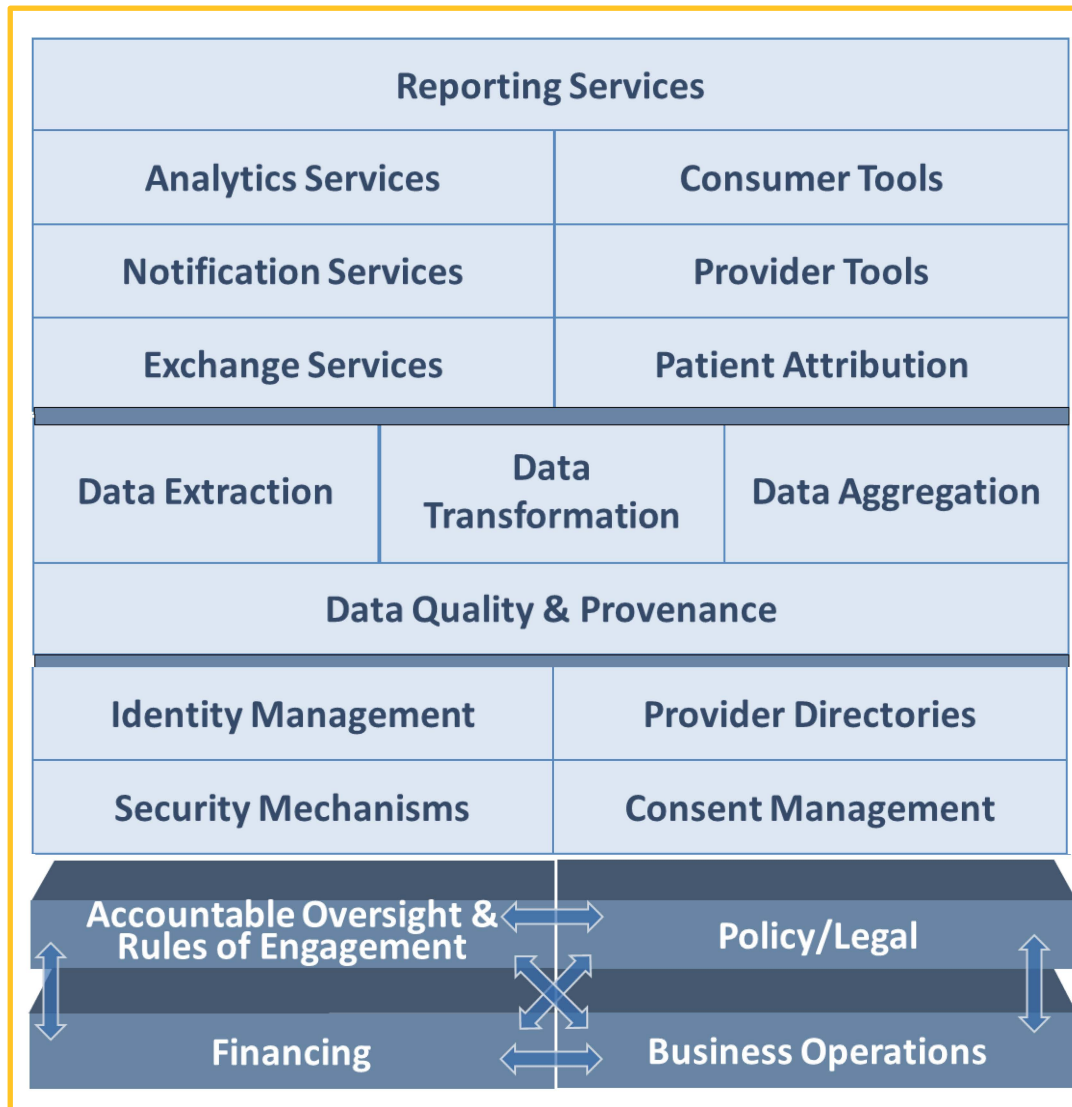- Organizational
- Legal/functional
- Technical governance
- Establish business operations/process
- **Appendix D: Assessing Quality Measurement Capacity**

Align Measures

Explore repeatable processes and alignment strategies for establishing consistent measure sets and shared infrastructure that can facilitate transitioning to APMs
- Discuss challenges with aligning programs and measures
- Identifying tactics to reaching common objectives
- **Appendix E: Aligning Quality Measures**

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Modular Health IT Functions

Reporting Services	
Analytics Services	Consumer Tools
Notification Services	Provider Tools
Exchange Services	Patient Attribution

Data Extraction	Data Transformation	Data Aggregation
Data Quality & Provenance		

Identity Management	Provider Directories
Security Mechanisms	Consent Management

Accountable Oversight & Rules of Engagement	Policy/Legal
Financing	Business Operations

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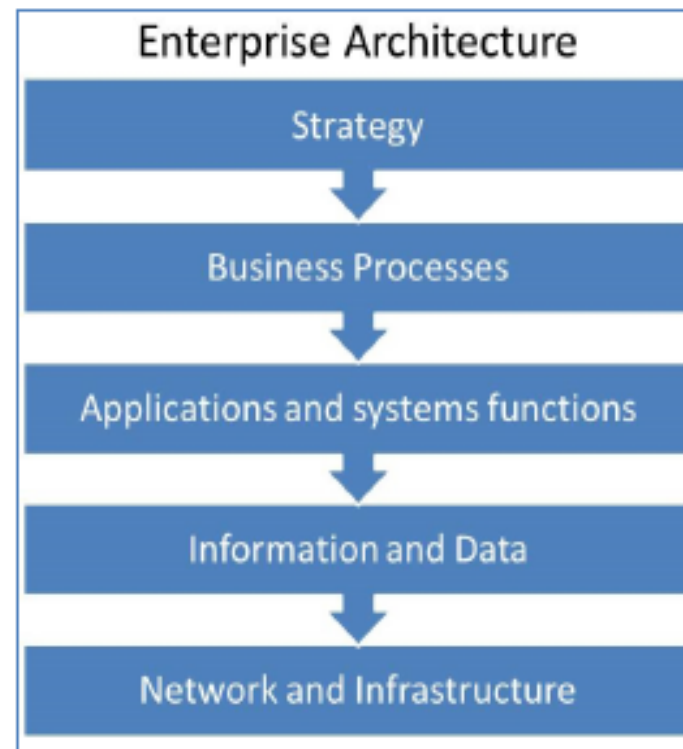Health Information Technology

Assess Quality Measurement Technical Architecture

Assess Technical Infrastructure

- Architect for the future business and operational demands of government, payers, and providers within the context of APMs
- Implement for the current business demands
- Scalable to address future requirements, such as multi-payer APMs.
- Anticipate the advancement of technology and the evolution of standards and interoperability.
- Multi-stakeholder evaluation of existing systems and technology currently under development.
- **Appendix B: Modular Health IT Functions Guide**
- **Appendix F: Quality Measurement Technical Architecture**

Enterprise Architecture

Strategy

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Business Processes

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Applications and systems functions

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Information and Data

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Network and Infrastructure

Quality Measurement Capacity Building

Provider/ Practice/ Encounter Level Data

Patient-Centric Reporting Provider-Centric Reporting Practice-Centric Reporting System-centric Reporting Population-level Reporting

Claims-based Quality Measurement

Claims data quality measurement and/or HEDIS data collected from surveys, chart reviews, and claims data

Self-reported

Data captured, eCQM calculated in EHR and only, and numerator/ denominator reported

Live Automated clinical/admin. data

Automated data acquisition from EHRs to central aggregator tool for calculation, comparison, reporting, and population level measures

Integrated data

Claims and clinical data integrated to analyze quality and address population health needs

Advanced quality improvement ecosystem to collect, share, and use data

Choosing a Strategy for Using EHR Data for Quality Measurement

To help determine an actionable strategy for using clinical data from EHRs to measure quality, there two distinctly different approaches to using data from EHRs to generate results of clinical quality measures (CQMs)

Measure Extraction

Each organization or provider site generates measure results (numerator, denominator) using their own EHR data and a set of measure specifications.

Data Extraction

Patient level data is transmitted from each EHR to a centralized infrastructure where measure results are generated for all participant sites.

- **Appendix G: Application of Data Extraction Principles**
- **Appendix H: Data Extraction Taxonomy**
- **Appendix I: Data Extraction Provider Readiness Tool**

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Health IT-Enabled Quality Measurement – Implementation and Operations

Coordinate Implementation Planning

Develop implementation roadmap to meet the desired state and create a critical path for data senders and information users.

- Identify achievable milestones over an agreed upon timeline
- Enabling maturing data extraction capabilities
  Quality measure reporting requirements

Quality Improvement Assistance Alignment

Plan the support that should be in place to assist providers and community with ongoing improvement .

- Quality Measurement Feedback Tools (Dashboard)
- Quality Measurement Education
- Data Quality Technical Assistance

Understand Financing

Shared, cost-allocated funding for development and implementation of reusable health IT infrastructure and functions .

- 90-10 FFP
- Multi-payer participation

Incentives can be applied specifically to health IT policies or infrastructure, with a transition plan to move from reporting capability to improved outcomes.

- Pay for reporting
- Pay for performance improvement

Leverage Policy Levers

Advance measure alignment, data collection, standards, data aggregation, and reporting systems through Policy Levers, such as legislation, regulation, and statewide policies.

- Private contracting language or requirements
- Technology requirements and reporting standards
- State employees, public health, Medical Boards
- MCO contractual requirements
- **ONC HIT Resource Center State Health IT Policy Lever Compendium**

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- The guide also includes multiple supporting guidance documents listed below:

  » National programs requiring or related to quality measurement

  » State examples

  » Quality measurement industry resources

- The guide is available online on the ONC SIM Resource Center page, under electronic clinical quality measure resources

https://www.healthit.gov/providers-professionals/state-innovation-model-health-it-resource-center

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- Next version of the Health IT-Enabled Quality Measurement Implementation Guide

  » Break the Guide into smaller pieces

  » What is missing?

  » What topics need additional information or more details?

  » Others

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Next Steps – Learning Series

February
Learning Event

- ONC Health-IT Enabled Quality Measurement Strategic Implementation Guide
- Toolkits

April
ONC In-Person TA Convening #1

- Executing Multi-Payer Quality and Health IT (non-CPC+ states)

March
Learning Event

- SIM & CPC + Alignment (invite CPC+ audience)

May
ONC In-Person TA Convening #2

- Executing Multi-Payer Quality and Health IT (CPC+ states)

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- **Focus** - Operational activities related to executing on multi-payer quality and health IT initiatives. The content will be customized based on attendees, with an emphasis on alignment of multiple initiatives (e.g., CPC+) so states can leverage SIM successfully.

- <u>SIM Test states are invited to attend **only one** in-person TA convening.</u>

Item	In-Person TA Convening #1	In-Person TA Convening #2
Recommended States:	Non CPC+ multi-payer models (VT, WA, ID, IA, DE, ME, MA, MN, CT)	Confirmed CPC+ states (CO, NY, MI, OR, OH, RI, TN)
Recommended Attendees:	SIM and state program staff, providers, commercial payers, and community partners	SIM and state program staff, CPC+ payers and practice leaders, and community partners
Dates/Times:	Tuesday, April 25, 2017 and Wednesday, April 26, 2017 (8:30am – 4:30pm ET)	Tuesday, May 16, 2017 and Wednesday, May 17, 2017 (8:30am – 4:30pm PT)
Location:	At state location	At state location

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Listening Event

ONC Health IT-Enabled Quality Measurement Strategic Implementation Guide Walkthrough and Next Steps

Mar 01, 2017 4:00 PM EST

Please register for Listening Event Registration
https://attendee.gotowebinar.com/register/7868957710438778114

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