![Partnership for Quality Measurement logo]

Pre-Rulemaking Measure Review (PRMR) 2023 Measures Under Consideration (MUC), Clinician Measures Listening Session

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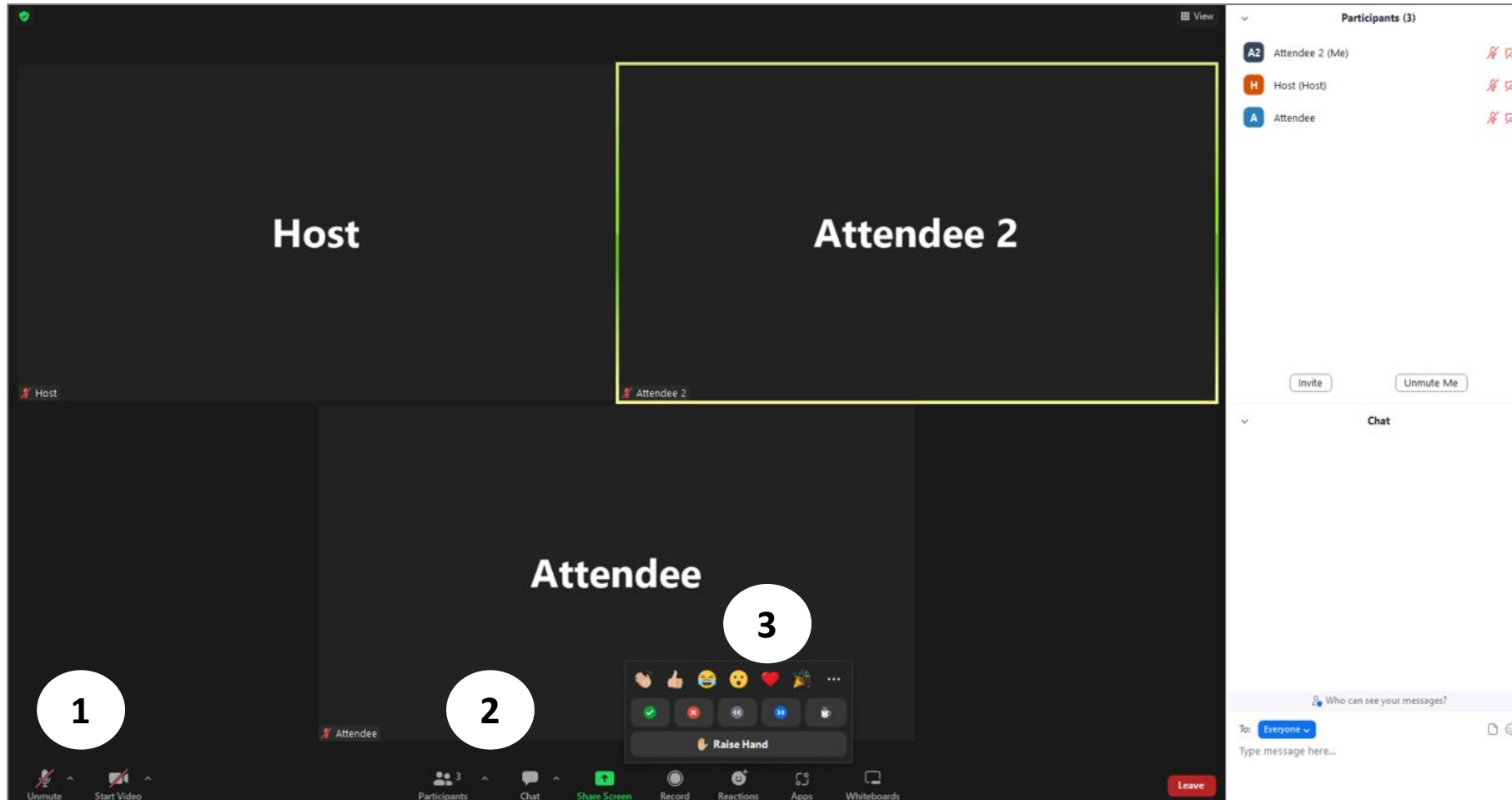December 14, 2023

Contract Number 75CMC230010

Agenda

- Welcome and introduction
- Ground rules
- CMS opening remarks
- Overview of CMS programs; clinician workgroup
- Discussion of clinician committee measures by group
- Next steps and key timeline
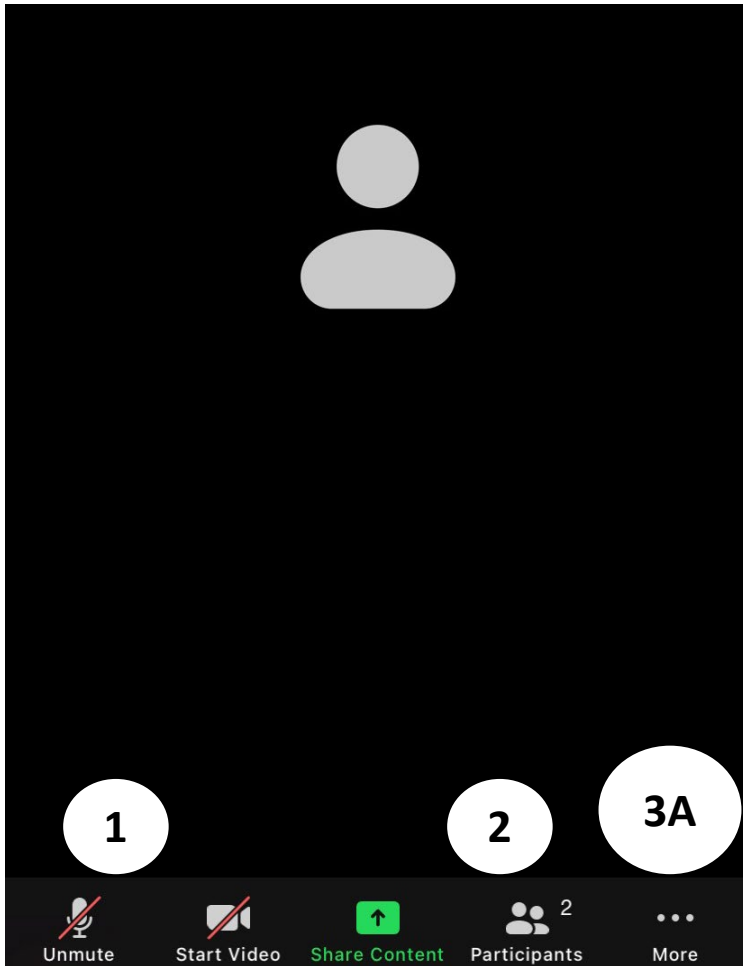
Housekeeping Reminders

- Housekeeping reminders:
  - The system will allow you to mute/unmute yourself and turn your video on/off throughout the event
  - Please raise your hand and unmute yourself when called on
  - Please lower your hand and mute yourself following your question/comment
  - Please state your first and last name if you are a call-in user
  - We encourage you to keep your video on throughout the event
  - Feel free to use the chat feature to communicate with Battelle staff
- If you are experiencing technical issues, please contact the project team via chat on the virtual platform or at PQMsupport@battelle.org
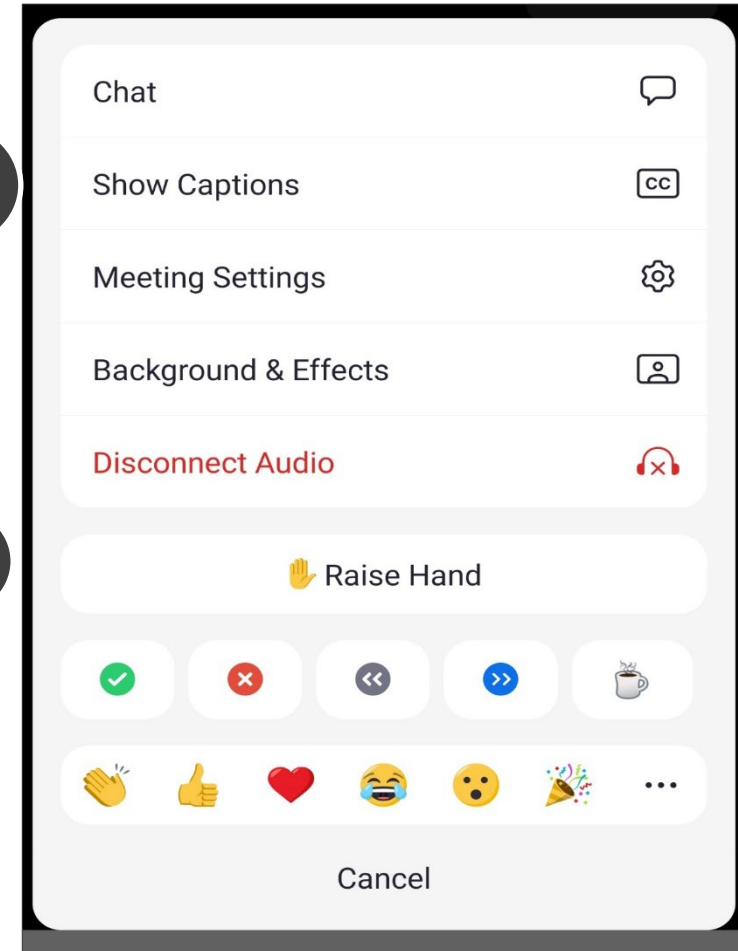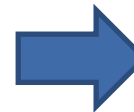
Using the Zoom Platform

1. Click the lower part of your screen to mute/unmute, start, or pause video

2. Click on the participant or chat button to access the full participant list or the chat box

3. To raise your hand, select the raised hand function under the reactions tab

Using the Zoom Platform (Phone View)

1. Click the lower part of your screen to mute/unmute, start or pause video

2. Click on the participant button to view the full participant list

3. Click on "more" button to (3A) view the chat box, (3B) show closed captions, or to (3C) raise your hand. To raise your hand, select the raised hand function under the reactions tab

Meeting Ground Rules

- Respect all voices

- Remain engaged and actively participate

- Keep your comments concise and focused

- Be respectful and allow others to contribute

- Share your experiences
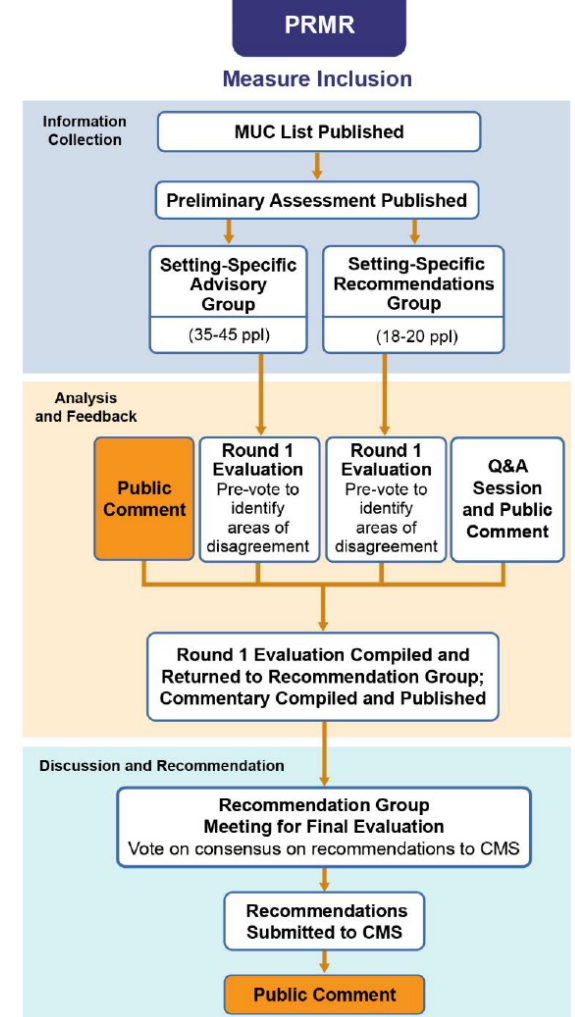
- Learn from others

PRMR Process

PRMR Process

The PRMR process builds consensus regarding MUC list measures as to whether they are appropriate for consideration for CMS quality reporting programs and value-based programs

Three major phases:
1. Information collection
2. Analysis and feedback
3. Discussion and recommendation
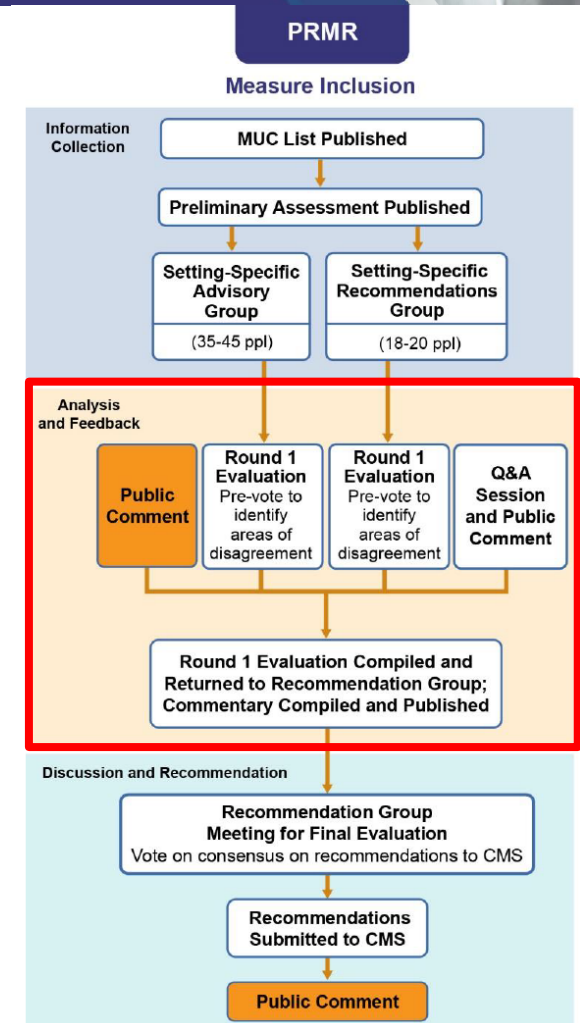
PRMR Process: Analysis and Feedback

- ## Round One Evaluation

  - Advisory group and recommendation group members review PAs. They submit initial ratings on the measures with explanations.

  - Ratings are used to determine areas of non-consensus. This helps focus discussion during the recommendation group meeting.

- ## Public Comment and Listening Sessions

  - A 21-day call for public comment occurs with the MUC list release.

  - PQM will host three public listening sessions, one per setting, where CMS, Battelle staff, and measure developers/stewards address questions.

  - Comments received through the comment process and during listening sessions will be made publicly available on the PQM website.

PRMR
Measure Inclusion

Information Collection
- MUC List Published
- Preliminary Assessment Published
- Setting-Specific Advisory Group (35-45 ppl)
- Setting-Specific Recommendations Group (18-20 ppl)

Analysis and Feedback
- Public Comment
- Round 1 Evaluation Pre-vote to identify areas of disagreement
- Round 1 Evaluation Pre-vote to identify areas of disagreement
- Q&A Session and Public Comment
- Round 1 Evaluation Compiled and Returned to Recommendation Group; Commentary Compiled and Published

Discussion and Recommendation
- Recommendation Group Meeting for Final Evaluation Vote on consensus on recommendations to CMS
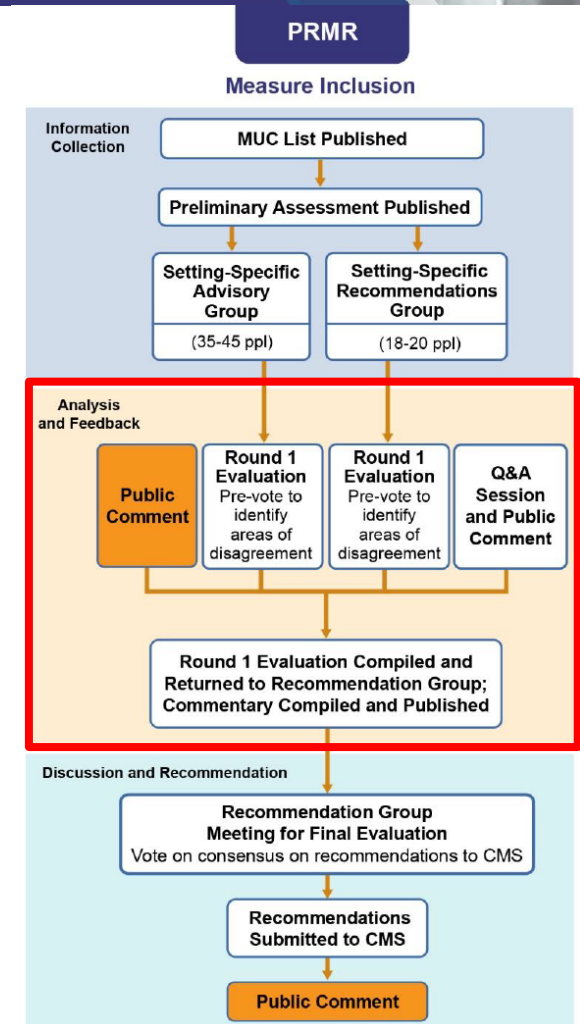- Recommendations Submitted to CMS
- Public Comment

PRMR Process: Analysis and Feedback (cont.)

- Information collected from the public comment process, listening sessions, and written feedback from PRMR groups is compiled and synthesized.

  - Round One Evaluations are used to identify areas of non-consensus. Areas of non-consensus are emphasized in the recommendation group meetings for final evaluation agenda.

  - Feedback from the advisory groups and recommendation groups, along with public comments, are provided to the recommendation groups to consider as they vote.

PRMR

Measure Inclusion

Information Collection
- MUC List Published
- Preliminary Assessment Published
- Setting-Specific Advisory Group (35-45 ppl)
- Setting-Specific Recommendations Group (18-20 ppl)

Analysis and Feedback
- Public Comment
- Round 1 Evaluation Pre-vote to identify areas of disagreement
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Discussion and Recommendation
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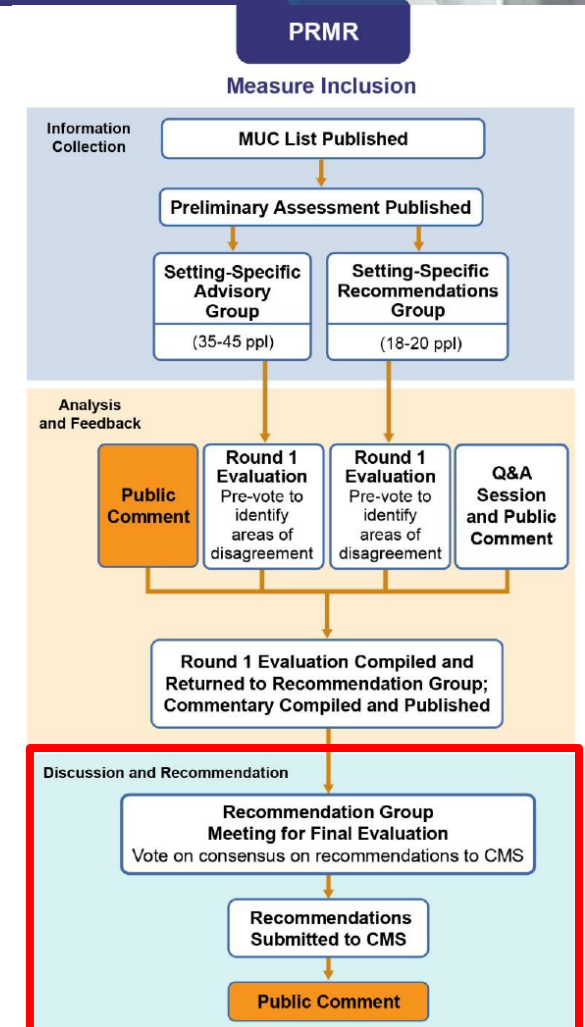- Recommendations Submitted to CMS
- Public Comment

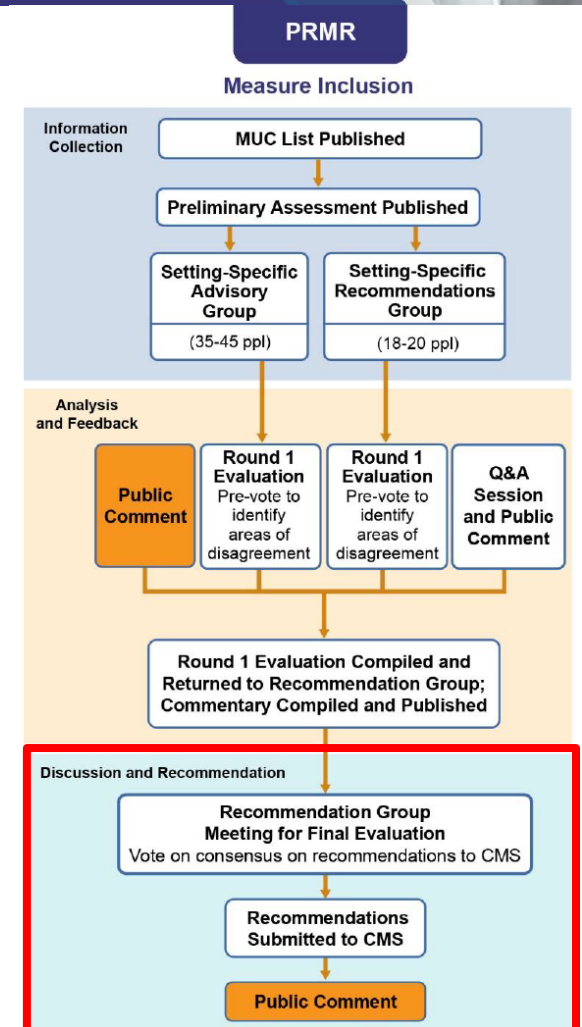# PRMR Process: Discussion and Recommendation

Recommendation Group Meeting for Final Evaluation

- In January, the recommendation groups meet to discuss issues/concerns raised during the public comment period and feedback from the advisory groups.

- The meeting agenda prioritizes areas of non-consensus identified in the analysis and feedback phase.

- The recommendation group meetings for final evaluation involves:

  - An efficient iterative voting process to ensure a meaningful approach for making final recommendations

  - Trained facilitators and committee-selected lead discussants

- Recommendations from the meeting are submitted to CMS.

PRMR Process: Discussion and Recommendation (cont.)

- Final recommendations from the recommendation group will be published February 1 on the [PQM website](#).

- There is a 15-day second public comment period.

- The intent of this comment opportunity is to provide additional feedback on MUC and the final recommendations to CMS.

CMS Opening Remarks & Review of Clinician Programs

Michelle Schreiber, MD, Deputy Director of the Center for Clinical Standards and Quality (CCSQ) for the Centers for Medicare & Medicaid Services (CMS)

Clinician Committee Measures

Cancer Care

MUC2023-141 Positive PD-L1 Biomarker Expression Test Result Prior to First-Line Immune Checkpoint Inhibitor Therapy

- **Measure Steward:** Society for Immunotherapy of Cancer (SITC)

- **Brief Description of Measure:**

  - Percentage of patients aged 18 years and older, with a diagnosis of metastatic non-small cell lung cancer or squamous cell carcinoma of head and neck on first-line immune checkpoint inhibitor (ICI) therapy, who had a positive PD-L1 biomarker expression test result prior to giving ICI therapy.

  *Existing measure submitted previously but was not included in MUC List.

Measure Type	Target Population	Endorsement Status	Level of Analysis
Process	Medicare Fee for Service	Not Endorsed	Clinician: Individual Only

MUC2023-161 Appropriate Germline Testing for Ovarian Cancer Patients

- **Measure Steward:** American Society of Clinical Oncology (ASCO)

- **Brief Description of Measure:**

  - Percentage of patients, aged 18 and older, diagnosed with epithelial ovarian, fallopian tube, or primary peritoneal cancer who undergo germline testing within 6 months of diagnosis.

  *New Measure

Measure Type	Target Population	Endorsement Status	Level of Analysis
Process	• Medicare Fee for Service • All Payer	Not Endorsed	Clinician: Individual and Group

MUC2023-211 Melanoma: Tracking and Evaluation of Recurrence

- **Measure Steward:** American Academy of Dermatology (AAD)

- **Brief Description of Measure:**

  - Percentage of patients who had an excisional surgery for melanoma or melanoma in situ with initial AJCC staging of 0, I, or II, in the past 5 years in which the operating provider examines and/or diagnoses the patient for recurrence of melanoma.

  *This measure is currently used in the Merit-based Incentive Payment System (MIPS). It has been used since 2022 and is being submitted as is, aligning with the current version.

Measure Type	Target Population	Endorsement Status	Level of Analysis
Outcome	All Payer	Not Endorsed	Clinician: Individual and Group

MUC2023-207 Prostate Cancer

- **Measure Steward:** Centers for Medicare & Medicaid Services

- **Brief Description of Measure:**

  - The Prostate Cancer episode-based cost measure evaluates a clinician's or clinician group's risk-adjusted and specialty-adjusted cost to Medicare for patients who receive medical care to manage and treat prostate cancer.

*New Measure

Measure Type	Target Population	Endorsement Status	Level of Analysis
Cost/Resources Use	Medicare Fee-for-Service (FFS)	Not Endorsed	Clinician Group

Cancer Care

MUC2023-141 Positive PD-L1 Biomarker Expression Test Result Prior to First-Line Immune Checkpoint Inhibitor Therapy

Measure Steward: Society for Immunotherapy of Cancer (SITC)

MUC2023-161 Appropriate Germline Testing for Ovarian Cancer Patients

Measure Steward: American Society of Clinical Oncology (ASCO)

MUC2023-211 Melanoma Tracking and Evaluation of Recurrence

Measure Steward: Measure Steward: American Academy of Dermatology (AAD)

MUC2023-207 Prostate Cancer

Measure Steward: American Society of Clinical Oncology (ASCO)

Opportunity for Public Comment

- MUC2023-141 Positive PD-L1 Biomarker Expression Test Result Prior to First-Line Immune Checkpoint Inhibitor Therapy
- MUC2023-161 Appropriate Germline Testing for Ovarian Cancer Patients
- MUC2023-211 Melanoma Tracking and Evaluation of Recurrence
- MUC2023-207 Prostate Cancer

Questions

- MUC2023-141 Positive PD-L1 Biomarker Expression Test Result Prior to First-Line Immune Checkpoint Inhibitor Therapy
- MUC2023-161 Appropriate Germline Testing for Ovarian Cancer Patients
- MUC2023-211 Melanoma Tracking and Evaluation of Recurrence
- MUC2023-207 Prostate Cancer

Patient-Reported Measures

Begins at 12:30 pm ET

MUC2023-190 Patient-Reported Fatigue Following Chemotherapy among Adults with Breast Cancer

- **Measure Steward:** Purchaser Business Group on Health (PBGH)

- **Brief Description of Measure:**

  - The PRO-PM will assess fatigue following chemotherapy administered with curative intent to adult patients with breast cancer.

  *Submitted previously but not included in MUC List

Measure Type	Target Population	Endorsement Status	Level of Analysis
PRO-PM or Patient Experience of Care	• Medicare Fee for Service • Medicare Advantage • Medicaid • All Payer • All adult cancer patients not restricted by payer type	Endorsed	Clinician: Individual and Group

MUC2023-162 Patient-Reported Pain Interference Following Chemotherapy among Adults with Breast Cancer

- **Measure Steward:** PBGH

- **Brief Description of Measure:**

  ▪ The PRO-PM will assess pain interference following chemotherapy administered with curative intent to adult patients with breast cancer.

  *New Measure

Measure Type	Target Population	Endorsement Status	Level of Analysis
PRO-PM or Patient Experience of Care	• Medicare Fee for Service • Medicare Advantage • Medicaid • All Payer • All adult cancer patients not restricted by payer type	Endorsed	Clinician: Individual and Group

Patient-Reported Measures

MUC2023-190 Patient-Reported Fatigue Following Chemotherapy among Adults with Breast Cancer

Measure Steward: Purchaser Business Group on Health (PBGH)

MUC2023-162 Patient-Reported Pain Interference Following Chemotherapy among Adults with Breast Cancer

Measure Steward: PBGH

Opportunity for Public Comment

- MUC2023-190 Patient-Reported Fatigue Following Chemotherapy among Adults with Breast Cancer
- MUC2023-162 Patient-Reported Pain Interference Following Chemotherapy among Adults with Breast Cancer

Questions

- MUC2023-190 Patient-Reported Fatigue Following Chemotherapy among Adults with Breast Cancer
- MUC2023-162 Patient-Reported Pain Interference Following Chemotherapy among Adults with Breast Cancer

Kidney Health

Begins at 1:00 pm ET

- **Measure Steward:** CMS

- **Brief Description of Measure:**

  - The Chronic Kidney Disease (CKD) episode-based cost measure evaluates a clinician's or clinician group's risk-adjusted and specialty-adjusted cost to Medicare for patients who receive medical care to manage and treat stage 4 or 5 chronic kidney disease.

*New Measure

Measure Type	Target Population	Endorsement Status	Level of Analysis
Cost/Resource Use	Medicare Fee for Service	Not Endorsed	Clinician Group

MUC2023-204 End-Stage Renal Disease

- **Measure Steward:** CMS

- **Brief Description of Measure:**

  - The End-Stage Renal Disease (ESRD) episode-based cost measure evaluates a clinician's or clinician group's risk-adjusted and specialty-adjusted cost to Medicare for patients who receive medical care to manage ESRD.

*New Measure

Measure Type	Target Population	Endorsement Status	Level of Analysis
Cost/Resource Use	Medicare Fee for Service	Not Endorsed	Clinician Group

MUC2023-206 Kidney Transplant Management

- **Measure Steward:** CMS

- **Brief Description of Measure:**

  - The End-Stage Renal Disease (ESRD) episode-based cost measure evaluates a clinician's or clinician group's risk-adjusted and specialty-adjusted cost to Medicare for patients who receive medical care to manage ESRD.

*New Measure

Measure Type	Target Population	Endorsement Status	Level of Analysis
Cost/Resource Use	Medicare Fee for Service	Not Endorsed	Clinician Group

Kidney Health

MUC2023-203 Chronic Kidney Disease

Measure Steward: CMS

MUC2023-204 End-Stage Renal Disease

Measure Steward: CMS

MUC2023-206 Kidney Transplant Management

Measure Steward: CMS

Opportunity for Public Comment

- MUC2023-203 Chronic Kidney Disease
- MUC2023-204 End-Stage Renal Disease
- MUC2023-206 Kidney Transplant Management

Questions

- MUC2023-203 Chronic Kidney Disease
- MUC2023-204 End-Stage Renal Disease
- MUC2023-206 Kidney Transplant Management

COVID-19 Vaccination and Social Drivers of Health

Begins at 1:40 pm ET

MUC2023-164 Adult COVID-19 Vaccination Status

- **Measure Steward:** CMS

- **Brief Description of Measure:**

  - Percentage of patients aged 18 years and older seen for a visit during the performance period that are up to date on their COVID-19 vaccinations as defined by CDC guidelines on current vaccination.

*Existing Measure

Measure Type	Target Population	Endorsement Status	Level of Analysis
Process	All Payer	Not Endorsed	Clinician: Individual and Group

MUC2023-199 Connection to Community Service Provider

- **Measure Steward:** OCHIN

- **Brief Description of Measure:**

  - Percent of patients 18 years of age or older who screen positive for one or more of the following health-related social needs (HRSNs): food insecurity, housing instability, transportation problems, utility help needs, or interpersonal safety; and had contact with a Community Service Provider (CSP) for at least one of their HRSNs within 60 days after discharge.

  *Existing Measure: previously submitted to the 2022 MUC List for consideration in the Merit-Based Incentive Payment System (MIPS) program. The measure has been refined and resubmitted for consideration in the Hospital IQR program.

Measure Type	Target Population	Endorsement Status	Level of Analysis
Process	All Payer	Not Endorsed	Facility

MUC2023-210 Resolution of At Least 1 Health-Related Social Needs

- **Measure Steward:** OCHIN

- **Brief Description of Measure:**

  - Percent of patients 18 years or older who screen positive for one or more of the following health related social needs (HRSNs): food insecurity, housing instability, transportation problems, utility help needs, or interpersonal safety; and report that at least 1 of their HRSNs was resolved within 12 months after discharge.

  *Previously submitted to the 2022 MUC List for consideration in the Merit-Based Incentive Payment System (MIPS) program. The measure has been resubmitted for consideration in the Hospital IQR program.

Measure Type	Target Population	Endorsement Status	Level of Analysis
Outcome	All Payer	Not Endorsed	Facility

COVID-19 Vaccination and Social Drivers of Health

MUC2023-164 Adult COVID-19 Vaccination Status

Measure Steward: CMS

MUC2023-199 Connection to Community Service Provider

Measure Steward: OCHIN

MUC2023-210 Resolution of At Least 1 Health-Related Social Need

Measure Steward: OCHIN

Opportunity for Public Comment

- MUC2023-164 Adult COVID-19 Vaccination Status
- MUC2023-199 Connection to Community Service Provider
- MUC2023-210 Resolution of At Least 1 Health-Related Social Need

Questions

- MUC2023-164 Adult COVID-19 Vaccination Status
- MUC2023-199 Connection to Community Service Provider
- MUC2023-210 Resolution of At Least 1 Health-Related Social Need

Break

Meeting resumes at 2:35 pm ET

Surgical Procedures

Begins at 2:35 pm ET

MUC2023-201 Cataract Removal with Intraocular Lens (IOL) Implantation

- **Measure Steward:** CMS

- **Brief Description of Measure:**

  - The Cataract Removal with Intraocular Lens (IOL) Implantation episode-based cost measure evaluates a clinician's or clinician group's risk-adjusted cost to Medicare for patients who undergo a procedure for cataract removal with IOL implantation.

*Existing Measure

Measure Type	Target Population	Endorsement Status	Level of Analysis
Cost/Resource Use	Medicare Fee for Service	Not Endorsed	Clinician: Group only

Opportunity for Public Comment

MUC2023-201 Cataract Removal with Intraocular Lens (IOL) Implantation

Questions

MUC2023-201 Cataract Removal with Intraocular Lens (IOL) Implantation

Substance Use Disorder

Begins at 2:55 pm ET

MUC2023-137 Initial Opioid Prescribing for Long Duration (IOP-LD)

- **Measure Steward:** Pharmacy Quality Alliance (PQA)

- **Brief Description of Measure:**

  - The IOP-LD measure analyzes the percentage of Medicare Part D beneficiaries, 18 years or older, with at least one initial opioid prescription for more than 7 cumulative days' supply.

*New Measure

Measure Type	Target Population	Endorsement Status	Level of Analysis
Process	All Payer	Endorsed	Health Plan

MUC2023-179 Initiation and Engagement of Substance Use Disorder Treatment (IET)

- **Measure Steward:** National Committee for Quality Assurance (NCQA)

- **Brief Description of Measure:**

  - The percentage of new substance use disorder (SUD) episodes that result in treatment initiation and engagement. Two rates are reported:

    - Initiation of SUD Treatment: The percentage of new SUD episodes that result in treatment initiation through an inpatient SUD admission, outpatient visit, intensive outpatient encounter, partial hospitalization, telehealth visit or medication treatment within 14 days. (Presented in this MERIT submission form.)

    - Engagement of SUD Treatment: The percentage of new SUD episodes that have evidence of treatment engagement within 34 days of initiation. (Presented in Attachment 1 – IET Measure Engagement Rate of this MERIT submission.)

    *New Measure

Measure Type	Target Population	Endorsement Status	Level of Analysis
Process	All Payer	Not Endorsed	• Administrative Data (non-claims) • Claims Data • Electronic Clinical Data (non-EHR) • Electronic Health Record

Substance Use Disorder

MUC2023-137 Initial Opioid Prescribing for Long Duration (IOP-LD)

Measure Steward: PQA

MUC2023-179 Initiation and Engagement of Substance Use Disorder Treatment (IET)

Measure Steward: NCQA

Opportunity for Public Comment

- MUC2023-137 Initial Opioid Prescribing for Long Duration (IOP-LD)
- MUC2023-179 Initiation and Engagement of Substance Use Disorder Treatment (IET)

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Questions

- MUC2023-137 Initial Opioid Prescribing for Long Duration (IOP-LD)
- MUC2023-179 Initiation and Engagement of Substance Use Disorder Treatment (IET)

Cardiovascular Care

Begins at 3:35 pm ET

MUC2023-205 Inpatient (IP) Percutaneous Coronary Intervention (PCI)

- **Measure Steward:** CMS

- **Brief Description of Measure:**

  ▪ The Inpatient (IP) Percutaneous Coronary Intervention (PCI) episode-based cost measure evaluates a clinician's or clinician group's risk-adjusted cost to Medicare for patients who present with a cardiac event and emergently receive PCI as treatment.

*Existing Measure

Measure Type	Target Population	Endorsement Status	Level of Analysis
Cost/Resource Use	Medicare Fee-for-Service (FFS)	Not Endorsed	Clinician Group

Opportunity for Public Comment

MUC2023-205 Inpatient (IP) Percutaneous Coronary Intervention (PCI)

Questions

MUC2023-205 Inpatient (IP) Percutaneous Coronary Intervention (PCI)

Health Care Management

Begins at 4:00 pm ET

MUC2023-212 Level I Denials Upheld Rate Measure

- **Measure Steward:** Federation of American Hospitals (FAH)

- **Brief Description of Measure:**

  - This rating shows how often a Medicare Advantage Organization review found their original determination decision to deny coverage to be reasonable.

  *Existing Measure: submitted previously but not included in MUC List

Measure Type	Target Population	Endorsement Status	Level of Analysis
Process	Medicare Advantage	Not Endorsed	Health Plan

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Opportunity for Public Comment

MUC2023-212 Level I Denials Upheld Rate Measure

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Questions

MUC2023-212 Level I Denials Upheld Rate Measure

Disease Management

Begins at 4:20 pm ET

MUC2023-208 Respiratory Infection Hospitalization

- **Measure Steward:** CMS

- **Brief Description of Measure:**

  - The Respiratory Infection Hospitalization episode-based cost measure evaluates a clinician's or clinician group's risk-adjusted cost to Medicare for patients who receive inpatient treatment for a respiratory infection.

*Existing Measure

Measure Type	Target Population	Endorsement Status	Level of Analysis
Cost/Resource Use	All Payer	Not Endorsed	Clinician Group

MUC2023-209 Rheumatoid Arthritis

- **Measure Steward:** CMS

- **Brief Description of Measure:**

  - The Rheumatoid Arthritis episode-based cost measure evaluates a clinician's or clinician group's risk-adjusted and specialty-adjusted cost to Medicare for patients who receive medical care to manage and treat rheumatoid arthritis.

*New Measure

Measure Type	Target Population	Endorsement Status	Level of Analysis
Cost/Resource Use	Medicare Fee for Service	Not Endorsed	Clinician Group

Disease Management

MUC2023-208 Respiratory Infection Hospitalization

Measure Steward: CMS

MUC2023-209 Rheumatoid Arthritis

Measure Steward: CMS

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Opportunity for Public Comment

- MUC2023-208 Respiratory Infection Hospitalization
- MUC2023-209 Rheumatoid Arthritis

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Questions

- MUC2023-208 Respiratory Infection Hospitalization
- MUC2023-209 Rheumatoid Arthritis

Next Steps

Public Comment and Review Meetings

- **CMS measure and program leads had the opportunity to review the Preliminary Analyses prior to publication.**
  - Received November 13 and due back to Battelle on November 28.

- **Public comments will be made public approximately 1 week after the public comment period closes for review.**
  - Estimated timeline: delivery December 29-January 3.

- **CMS measure and program leads will have an opportunity to meet with Battelle staff to discuss the areas of consensus and disagreement across the measures.**
  - Meeting January 4 for all programs (CMS leads only).
  - Battelle will provide one-page summary of public comment themes and verbal discussion of comments.
  - CMS leads, measure developers, and stewards will receive updated written materials week prior to the review meetings.

November 2023

S	M	T	W	T	F	S
29	30	31	1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	1	2

December 2023

S	M	T	W	T	F	S
26	27	28	29	30	1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30

January 2024

S	M	T	W	T	F	S
30	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	31	1	2	3

PRMR Meetings

- **Listening Sessions**

  - Hospital Listening Session Meeting: December 15, 2023, 11:00 am-5:00 pm ET

  - PAC/LTC Listening Session Meeting: December 18, 2023, 11:00 am-2:00 pm ET

- **PRMR CMS Program and Measure Lead Preparation Meeting (CMS Leads Only)** – January 4, 2024, 12-3 p.m. ET

- **Measure Review Meetings (all day)**

  - Clinician Recommendation Group Meeting: January 16-17, 2024

  - Hospital Recommendation Group Meeting: January 18-19, 2024

  - PAC/LTC Recommendation Group Meeting: January 22, 2024

Questions:

Contact us at p4qm.org/contact
or by emailing pqmsupport@battelle.org