![Partnership for Quality Measurement]

Pre-Rulemaking Measure Review (PRMR) 2023 Measures Under Consideration (MUC), Post-Acute Care/Long-Term Care (PAC/LTC) Measures Listening Session

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Agenda

- Welcome and introduction

- Ground rules

- CMS opening remarks

- Overview of CMS programs; PAC/LTC workgroup

- Discussion of PAC/LTC 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
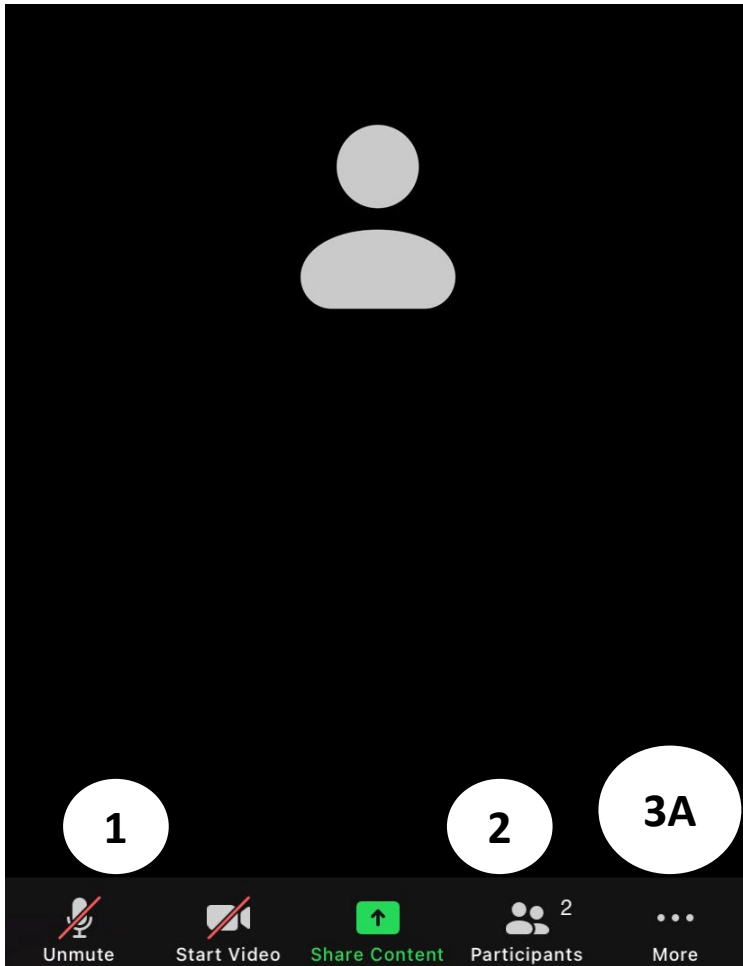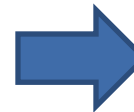
Using the Zoom Platform

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

3B

3C

Chat

Show Captions

Meeting Settings

Background & Effects

Disconnect Audio

🖐 Raise Hand

Cancel
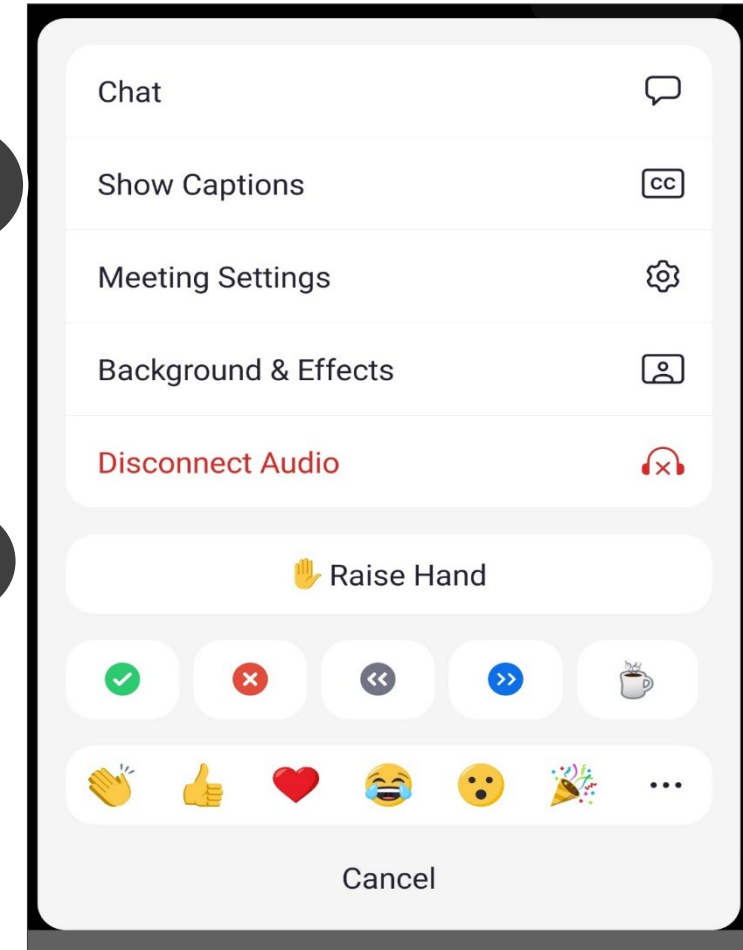
Meeting Ground Rules

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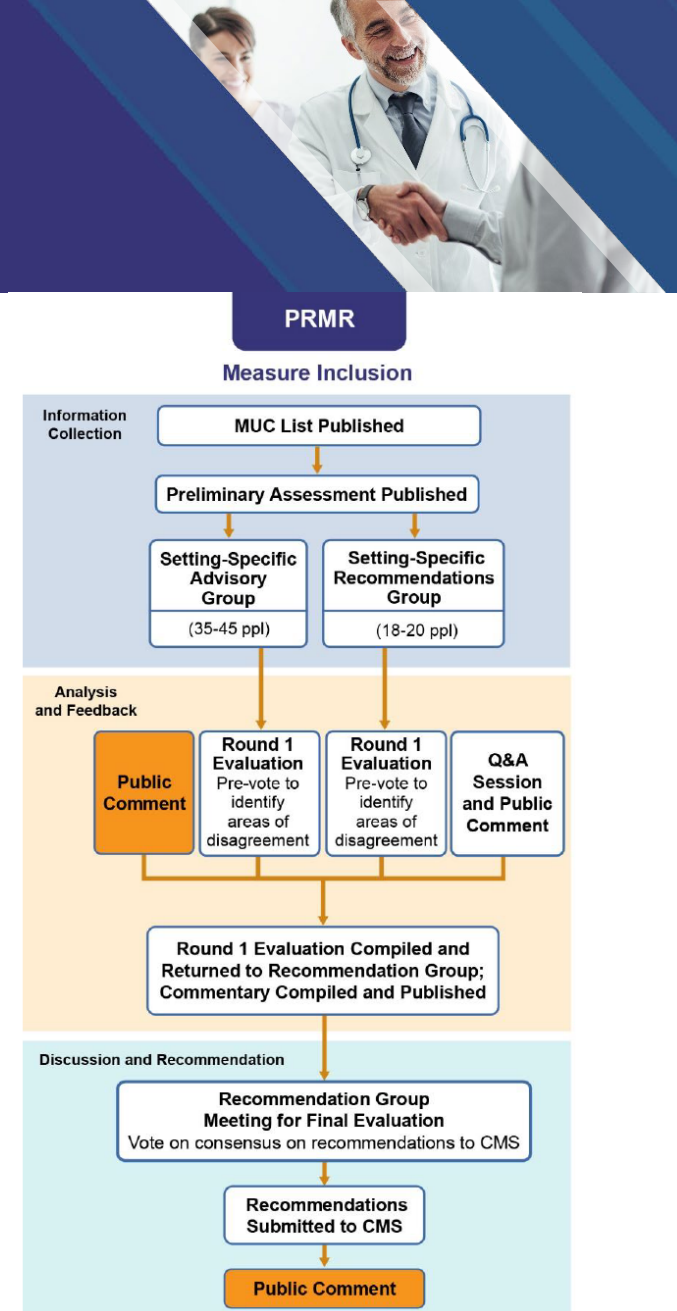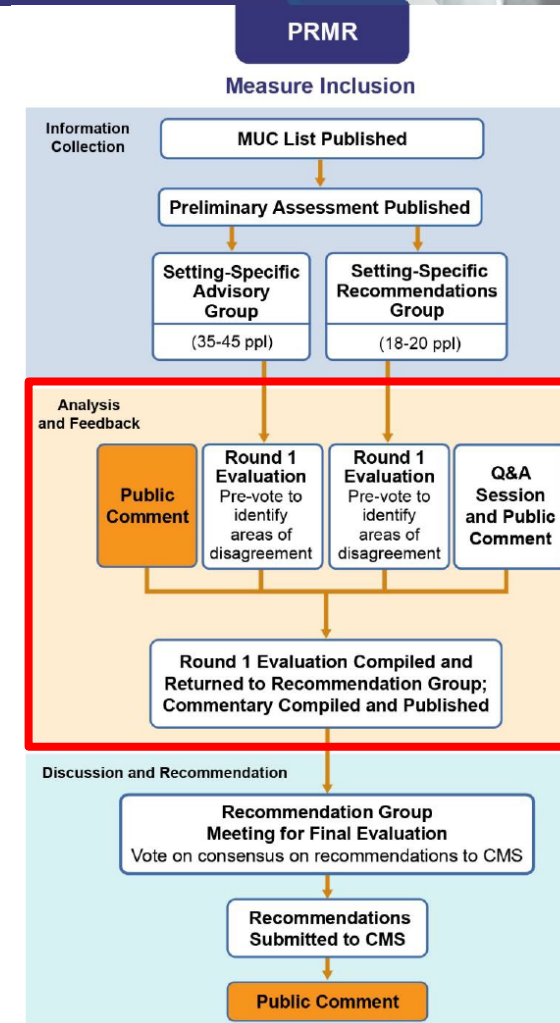
  - Ratings are used to determine areas of non-consensus. This helps focus discussion during the recommendation group meeting.

- ## 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
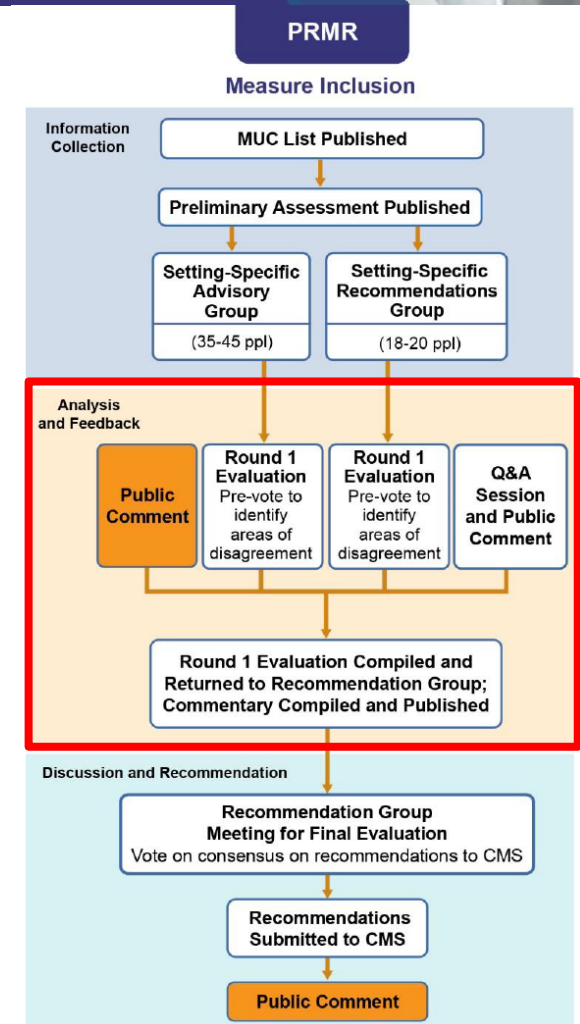- Recommendations Submitted to CMS
- Public Comment

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

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

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.
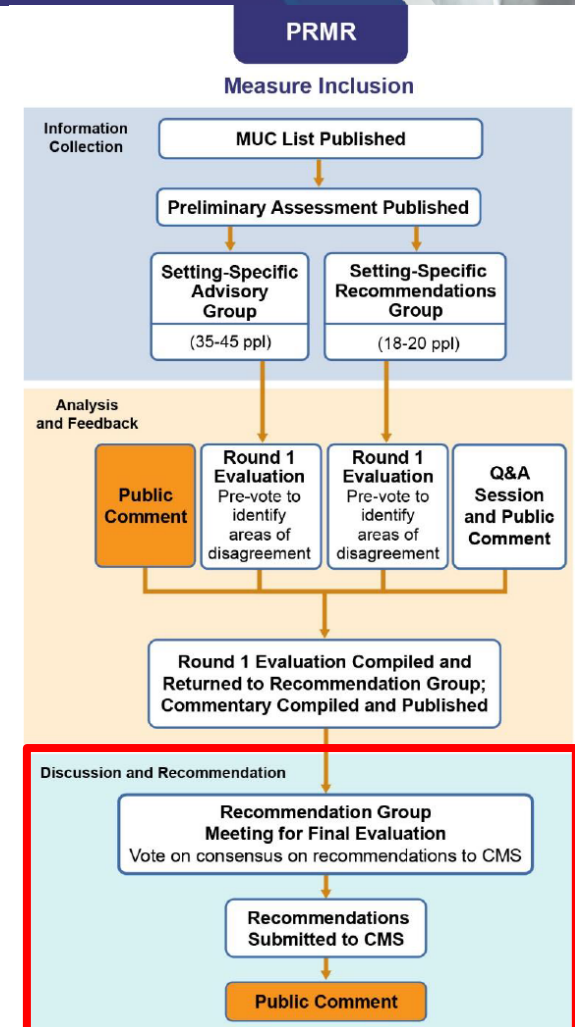
PRMR Process: Discussion and Recommendation (cont.)

- Final recommendations from the recommendation group are 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.
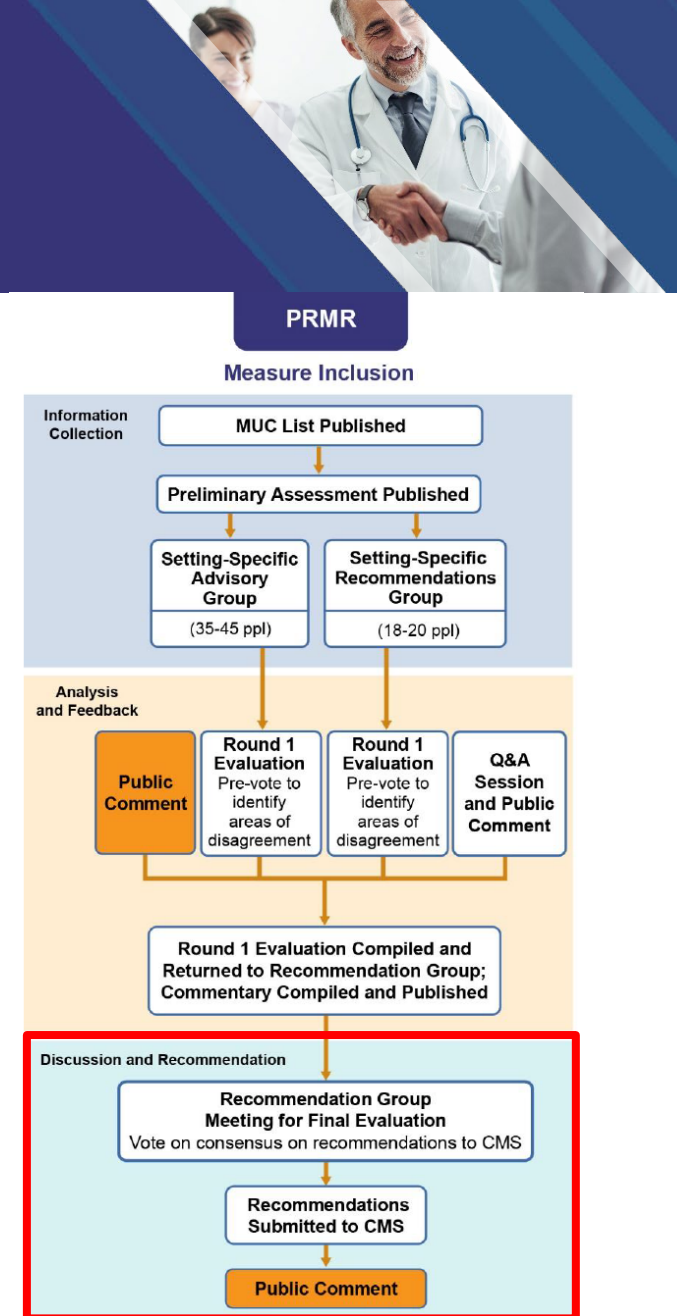
Review of PAC/LTC Programs

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

PAC/LTC Committee Measures

Pain and Symptom Management

MUC2023-163 Timely Reassessment of Pain Impact

- **Measure Steward:** Centers for Medicare & Medicaid Services (CMS)

- **Brief Description of Measure:**

    - The Timely Reassessment of Pain Impact measure captures the percent of hospice patient assessments that have a pain reassessment within 2 days when pain impact was initially assessed as moderate or severe.

    *New Measure

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

MUC2023-166 Timely Reassessment of Non-Pain Symptom Impact

- **Measure Steward:** CMS

- **Brief Description of Measure:**

  - The Timely Reassessment of Non-Pain Symptom Impact measure captures the percent of hospice patient assessments that have non-pain symptom(s) reassessment within 2 days when symptom impact was initially assessed as moderate or severe.

  *New Measure

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

Pain and Symptom Management

MUC2023-163 Timely Reassessment of Pain Impact

Measure Steward: Centers for Medicare & Medicaid Services (CMS)

MUC2023-166 Timely Reassessment of Non-Pain Symptom Impact

Measure Steward: CMS

Opportunity for Public Comment

- MUC2023-163 Timely Reassessment of Pain Impact
- MUC2023-166 Timely Reassessment of Non-Pain Symptom Impact

Questions

- MUC2023-163 Timely Reassessment of Pain Impact
- MUC2023-166 Timely Reassessment of Non-Pain Symptom Impact

CAHPS Hospice Survey Measure

Begins at 2:10 pm ET

MUC2023-183 CAHPS Hospice Survey-Care Preferences

- **Measure Steward:** CMS

- **Brief Description of Measure:**

  - Care Preferences is a multi-item measure derived from the CAHPS Hospice Survey, Version 9.0, a 39-item standardized questionnaire and data collection methodology. The survey is intended to measure the care experiences of hospice decedents and their primary caregivers. The Care Preferences measure is composed of responses that address the care team's effort to listen to the things that mattered most to the patient/family and provision of care that respected patient wishes.

  *New Measure

Measure Type	Target Population	Endorsement Status	Level of Analysis
PRO-PM or Patient Experience of Care	All Payer	Endorsed	Facility

MUC2023-191 CAHPS Hospice Survey Hospice Team Communication

- **Measure Steward:** CMS

- **Brief Description of Measure:**

  - Hospice Team Communication is a multi-item measure derived from the CAHPS Hospice Survey, Version 9.0, a 39-item standardized questionnaire and data collection methodology. The survey is intended to measure the care experiences of hospice decedents and their primary caregivers. The Hospice Team Communication measure is composed of responses to the following five Hospice Team Communication focused survey items.

    - How often did the hospice team let you know when they would arrive to care for your family member?

    - How often did the hospice team explain things in a way that was easy to understand?

    - How often did the hospice team keep you informed about your family member's condition?

    - How often did the hospice team listen carefully to you when you talked with them about problems with your family member's hospice care?

    - While your family member was in hospice care, how often did the hospice team listen carefully to you?

    *Existing Measure

Measure Type	Target Population	Endorsement Status	Level of Analysis
PRO-PM or Patient Experience of Care	All Payer	Endorsed	Facility

MUC2023-192 CAHPS Hospice Survey Getting Hospice Care Training

- **Measure Steward:** CMS

- **Brief Description of Measure:**

  - Hospice Team Communication is a multi-item measure derived from the CAHPS Hospice Survey, Version 9.0, a 39-item standardized questionnaire and data collection methodology. The survey is intended to measure the care experiences of hospice decedents and their primary caregivers. The Getting Hospice Care Training measure is composed of responses to a survey item on receipt of training on caring for a family member.

  *Existing Measure

Measure Type	Target Population	Endorsement Status	Level of Analysis
PRO-PM or Patient Experience of Care	All Payer	Endorsed	Facility

CAHPS® Hospice Survey

MUC2023-183,191 & 192 CAHPS Hospice Survey

Measure Steward: Centers for Medicare & Medicaid Services (CMS)
Includes: Care Preferences, Hospice Team Communication, and Getting Hospice Care Training

Opportunity for Public Comment

- MUC2023-183,191 & 192 CAHPS Hospice Survey

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Questions

- MUC2023-183,191 & 192 CAHPS Hospice Survey

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

- **PRMR CMS Program and Measure Lead Preparation Meeting (CMS Leads Only):** January 4, 2024, 12:00-3:00 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