



Partnership for
Quality Measurement

Spring 2024 Advanced Illness and Post-Acute Care Endorsement and Maintenance (E&M) Advisory Group Meeting

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June 5, 2024

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Agenda



- Welcome and Review of Meeting Ground Rules
- Roll Call
- Overview of E&M Process and Advisory Group Meeting Procedures
- Discussion of Spring 2024 Measures
- Next Steps
- Adjourn

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.

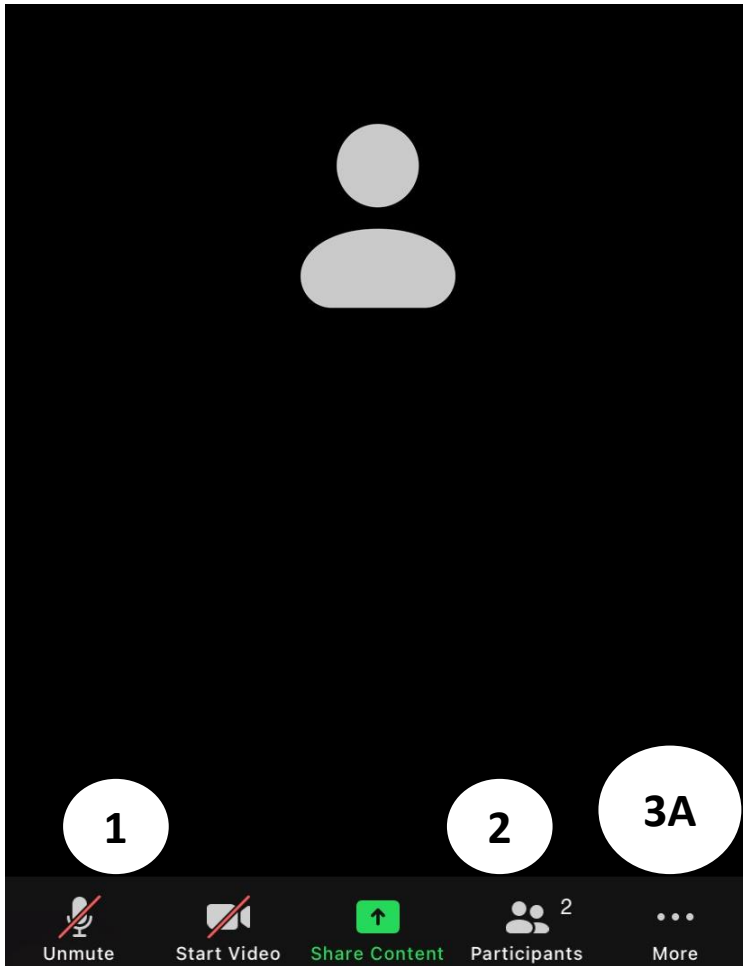
Using the Zoom Platform



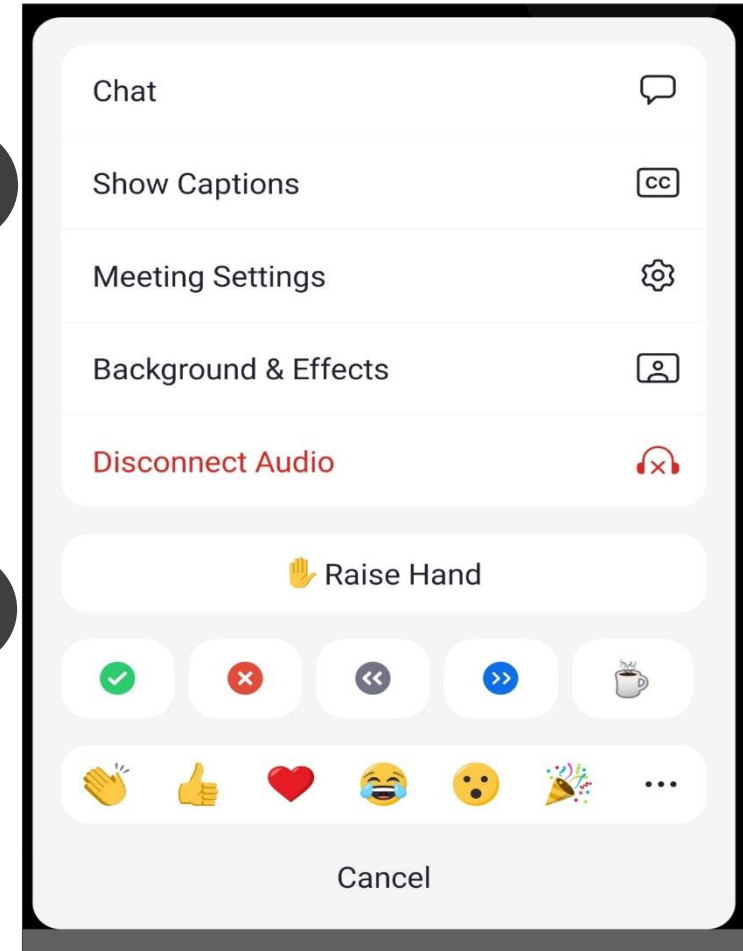
The screenshot shows a Zoom meeting interface. At the top, there are two video thumbnails: 'Host' on the left and 'Attendee 2' on the right. The 'Attendee 2' thumbnail is highlighted with a yellow border. On the right side, there is a 'Participants (3)' panel listing 'Attendee 2 (Me)', 'Host (Host)', and 'Attendee'. Below this is a 'Chat' panel. At the bottom, there is a toolbar with various icons. Three numbered callouts are present: '1' is a white circle with the number '1' inside, pointing to the bottom toolbar; '2' is a white circle with the number '2' inside, pointing to the 'Participants' button; '3' is a white circle with the number '3' inside, pointing to the 'Reactions' tab in the bottom toolbar.

- 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 raise hand button 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 (3A) “more” button to 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.

Project Team



- Nicole Brennan, MPH, DrPH, Executive Director
- Brenna Rabel, MPH, Deputy Director
- Jeff Geppert, Measure Science Team Lead
- Quintella Bester, PMP, Senior Program Manager
- Matthew Pickering, PharmD, Principal Quality Measure Scientist
- Anna Michie, MHS, PMP, Social Scientist IV
- Beth Jackson, PhD, MA, Social Scientist IV
- Adrienne Cocci, MPH, Social Scientist III
- Stephanie Peak, PhD, Social Scientist III
- Isaac Sakyi, MSGH, Social Scientist III
- Jessica Lemus, MA, Social Scientist II
- Olivia Giles, MPH, Social Scientist I
- Elena Hughes, MS, Social Scientist I
- Sarah Rahman, Social Scientist I

Roll Call



Advanced Illness and Post-Acute Care Committee

Advisory Group Members



- Alicia Staley, MBA, MSIS
- Brenda Groves, LPN, CADDCT, CDP
- Donna M. Sternberg, RN, BSN
- Emily Martin, MD, MS, FAAHPM
- Gerri Lamb, PhD, RN
- Heather Thompson, LMSW, CPHQ, CPXP
- Jonathan Nicolla, MBA
- Kyle Matthews
- Lea Dooley, DHA, MPH
- Maria Regnier, MSN, BSN, RN, CNN
- Milli West, MBA, CPHQ
- Nicole Keane, MSN, RN, CPHQ
- Omar Latif, MD
- Raina Josberger, MS
- Rebecca Swain-Eng, MS, CAE
- Sassy Outwater-Wright
- Sheila Clark
- Shelby Moore, MPA, CFRE
- Stephanie Wladkowski, PhD, LMSW, APHSW-C
- Yaakov Liss, MD

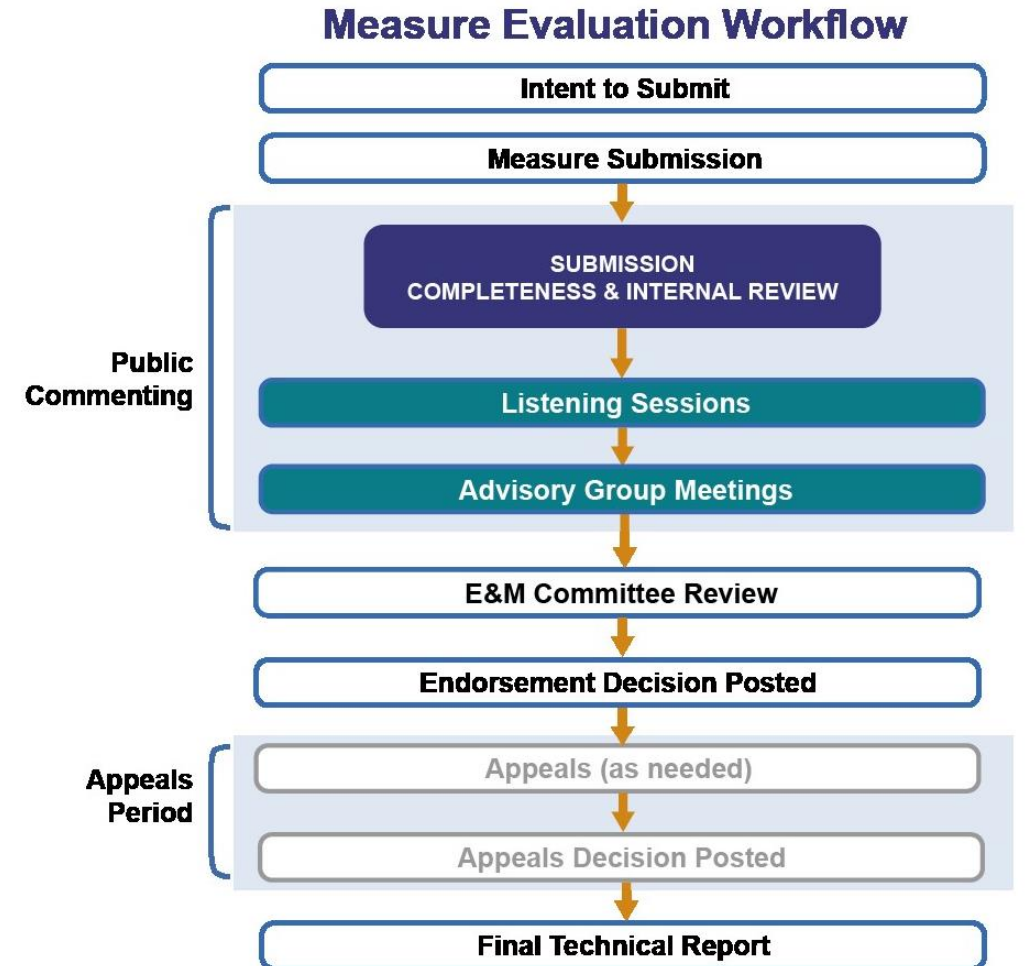
Overview of E&M Process



Six Major Steps of the E&M Process



1. Intent to Submit
2. Full Measure Submission
3. Measure Public Comment Period
 - Public Comment Listening Sessions
 - Advisory Group Meetings
4. E&M Committee Review
5. Endorsement Decision
 - Recommendation Group Meetings
6. Appeals Period (as warranted)



Advisory Group Meeting



- **Step:**

- Advisory Group members convene to comment on strengths and limitations of the measure(s) and ask questions toward developers/stewards.
- Developers/stewards respond to Advisory Group member questions and feedback.

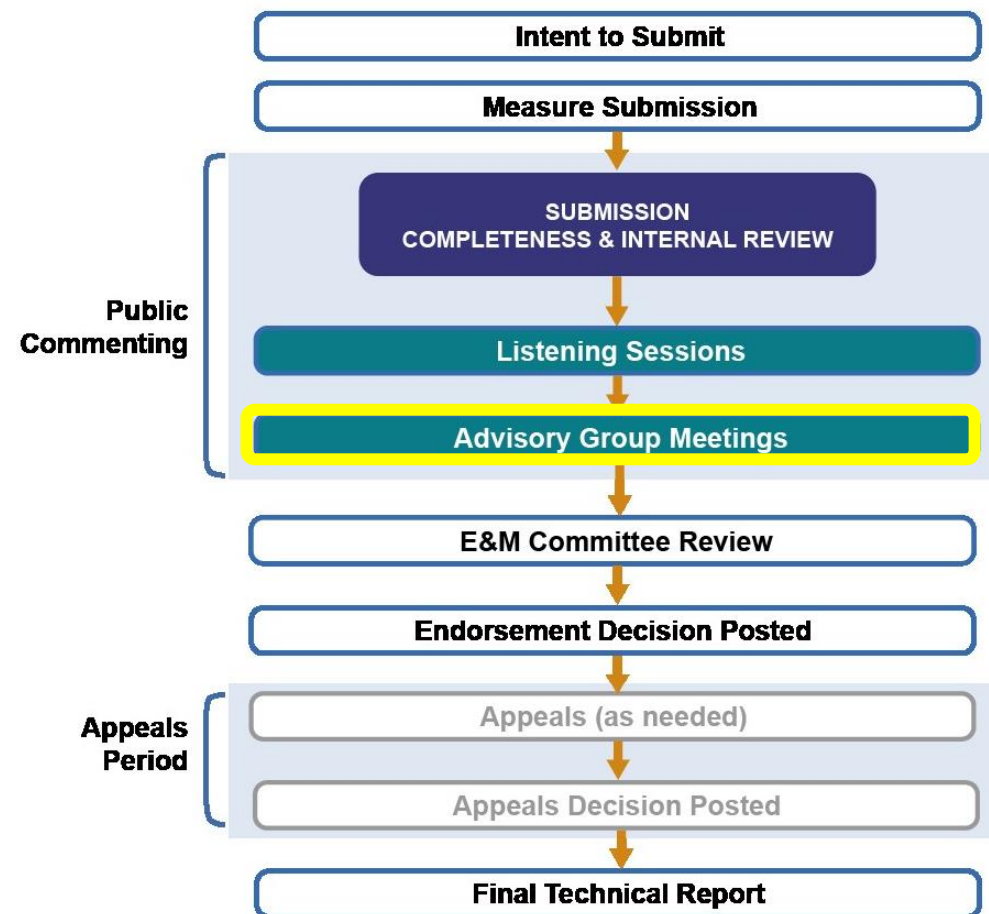
- **Timing:**

- One to two months prior to endorsement meeting

- **Outputs:**

- Summary of Advisory Group member feedback, including frequently asked questions (FAQs), and developer/steward responses to Advisory Group feedback and FAQs, to be posted to the Partnership for Quality Measurement (PQM) website.

Measure Evaluation Workflow



Advisory Group Meeting Procedures



Advisory Group Measure Review



1. Measure introduction by Battelle



2. Floor is open for Advisory Group member feedback and questions



3. Developer/steward asked to respond to feedback and questions

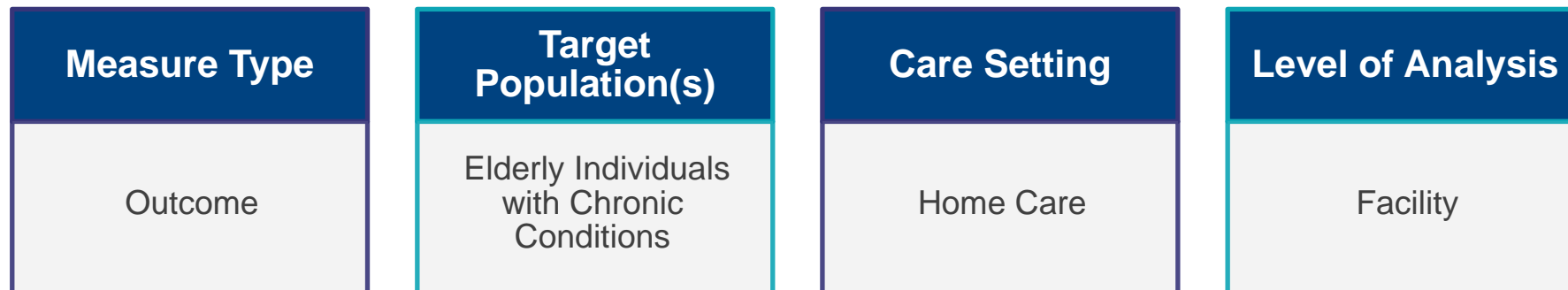
Discussion of Spring 2024 Measures



CBE #0167 – Improvement in Ambulation/Locomotion



Item	Description
Measure Description	Percentage of home health episodes of care during which the patient improved in ability to ambulate.
Developer/Steward	Abt Associates/CMS
New or Maintenance	Maintenance (last reviewed: Fall 2018)
Current or Planned Use	Public Reporting; Payment Program; Quality Improvement with Benchmarking (external benchmarking to multiple organizations); Quality Improvement (Internal to the specific organization)



CBE #0167 – Improvement in Ambulation/Locomotion

Measure Review Questions



Rubric Domain	Example Discussion Questions
Importance	<ul style="list-style-type: none">• To what extent is there an adequate business case supported by evidence for the measure/measure focus?• Does the business case indicate the potential for sufficient gains in health care quality where there is variation in or overall less-than-optimal performance?• Is there sufficient evidence the target population (e.g., patients) finds the measure/measure focus meaningful?
Feasibility	<ul style="list-style-type: none">• Do the measure specifications require data that are available in electronic health records, are routinely generated during the normal delivery of care, AND are readily available or could be captured without undue burden?<ul style="list-style-type: none">• If data are not readily available, is there a near-term (within 1 year) path to support such routine and electronic data capture?
Scientific Acceptability	<ul style="list-style-type: none">• Does the measure, as specified, produce consistent (reliable) and credible (valid) results about the quality of care when implemented?
Equity	<ul style="list-style-type: none">• Does the measure sufficiently identify disparities in care across relevant populations, the results of which can be used to make actionable improvements in health equity?
Use & Usability	<ul style="list-style-type: none">• To what extent is the measure used for accountability, or to what extent is there a near-term plan to be used for accountability?• To what extent can the interested parties, including the accountable entities, use the measure results to achieve high-quality, efficient care?

CBE #0174 – Improvement in Bathing



Item	Description
Measure Description	Percentage of home health episodes of care during which the patient got better at bathing self.
Developer/Steward	Abt Associates/CMS
New or Maintenance	Maintenance (last reviewed: Fall 2018)
Current or Planned Use	Public Reporting; Payment Program; Quality Improvement with Benchmarking (external benchmarking to multiple organizations); Quality Improvement (Internal to the specific organization)

Measure Type	Target Population(s)	Care Setting	Level of Analysis
Outcome	Elderly Individuals with Chronic Conditions	Home Care	Facility

CBE #0174 – Improvement in Bathing

Measure Review Questions

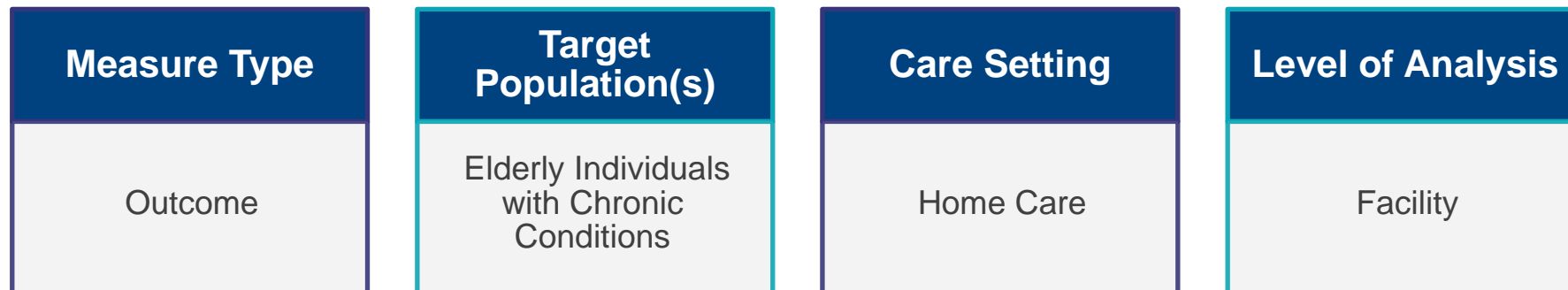


Rubric Domain	Example Discussion Questions
Importance	<ul style="list-style-type: none">To what extent is there an adequate business case supported by evidence for the measure/measure focus?Does the business case indicate the potential for sufficient gains in health care quality where there is variation in or overall less-than-optimal performance?Is there sufficient evidence the target population (e.g., patients) finds the measure/measure focus meaningful?
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Use & Usability	<ul style="list-style-type: none">To what extent is the measure used for accountability, or to what extent is there a near-term plan to be used for accountability?To what extent can the interested parties, including the accountable entities, use the measure results to achieve high-quality, efficient care?

CBE #0175 – Improvement in Bed Transferring



Item	Description
Measure Description	Percentage of home health episodes of care during which the patient improved in ability to get in and out of bed.
Developer/Steward	Abt Associates/CMS
New or Maintenance	Maintenance (last reviewed: Spring 2019)
Current or Planned Use	Public Reporting; Payment Program; Quality Improvement with Benchmarking (external benchmarking to multiple organizations); Quality Improvement (Internal to the specific organization)



CBE #0175 – Improvement in Bed Transferring

Measure Review Questions



Rubric Domain	Example Discussion Questions
Importance	<ul style="list-style-type: none">• To what extent is there an adequate business case supported by evidence for the measure/measure focus?• Does the business case indicate the potential for sufficient gains in health care quality where there is variation in or overall less-than-optimal performance?• Is there sufficient evidence the target population (e.g., patients) finds the measure/measure focus meaningful?
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Equity	<ul style="list-style-type: none">• Does the measure sufficiently identify disparities in care across relevant populations, the results of which can be used to make actionable improvements in health equity?
Use & Usability	<ul style="list-style-type: none">• To what extent is the measure used for accountability, or to what extent is there a near-term plan to be used for accountability?• To what extent can the interested parties, including the accountable entities, use the measure results to achieve high-quality, efficient care?

Break

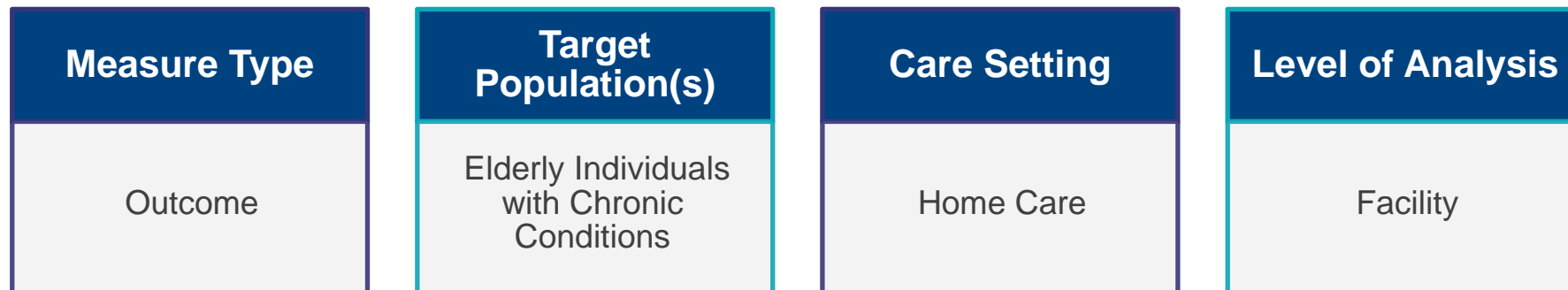
Meeting Resumes at 12:15 PM ET



CBE #0176 – Improvement in Management of Oral Medications



Item	Description
Measure Description	The percentage of home health episodes of care during which the patient improved in ability to take their medicines correctly, by mouth.
Developer/Steward	Abt Associates/CMS
New or Maintenance	Maintenance (last reviewed: Fall 2018)
Current or Planned Use	Public Reporting; Payment Program; Quality Improvement with Benchmarking (external benchmarking to multiple organizations); Quality Improvement (Internal to the specific organization)



CBE #0176 – Improvement in Management of Oral Medications

Measure Review Questions



Rubric Domain	Example Discussion Questions
Importance	<ul style="list-style-type: none">• To what extent is there an adequate business case supported by evidence for the measure/measure focus?• Does the business case indicate the potential for sufficient gains in health care quality where there is variation in or overall less-than-optimal performance?• Is there sufficient evidence the target population (e.g., patients) finds the measure/measure focus meaningful?
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CBE #2967 – Home and Community-Based Services (HCBS) Consumer Assessment of Healthcare Providers and Systems (CAHPS®) Measure



Item	Description
Measure Description	CAHPS Home- and Community-Based Services measures derive from a cross disability survey to elicit feedback from adult Medicaid beneficiaries receiving home and community-based services (HCBS) about the quality of the long-term services and supports they receive in the community and delivered to them under the auspices of a state Medicaid HCBS program. The unit of analysis is the Medicaid HCBS program, and the accountable entity is the operating entity responsible for managing and overseeing a specific HCBS program within a given state.
Developer/Steward	The Lewin Group/CMS
New or Maintenance	Maintenance (last reviewed: Fall 2016)
Current or Planned Use	Quality Improvement (Internal to the specific organization)

Measure Type

Patient-Reported
Outcome-Based
Performance Measure

Target Population(s)

Medicaid participants,
18 years and older,
receiving long-term
services and supports

Care Setting

Home and community-
based services

Level of Analysis

Health Plan; Population
or Geographic Area
(State)

CBE #2967 HCBS CAHPS® Measures

Measure Review Questions



Rubric Domain	Example Discussion Questions
Importance	<ul style="list-style-type: none">To what extent is there an adequate business case supported by evidence for the measure/measure focus?Does the business case indicate the potential for sufficient gains in health care quality where there is variation in or overall less-than-optimal performance?Is there sufficient evidence the target population (e.g., patients) finds the measure/measure focus meaningful?
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Equity	<ul style="list-style-type: none">Does the measure sufficiently identify disparities in care across relevant populations, the results of which can be used to make actionable improvements in health equity?
Use & Usability	<ul style="list-style-type: none">To what extent is the measure used for accountability, or to what extent is there a near-term plan to be used for accountability?To what extent can the interested parties, including the accountable entities, use the measure results to achieve high-quality, efficient care?

CBE #3453 – Continuity of Care After Inpatient or Residential Treatment for Substance Use Disorder



Item	Description
Measure Description	Percentage of discharges from inpatient or residential treatment for substance use disorder (SUD) for Medicaid beneficiaries, ages 18–64, which were followed by a treatment service for SUD. SUD treatment services include having an outpatient visit, intensive outpatient encounter or partial hospitalization, telehealth encounter, or filling a prescription or being administered or dispensed a medication for SUD. (After an inpatient discharge only, residential treatment also counts as continuity of care.) Two rates are reported, continuity within 7 and 14 days after discharge.
Developer/Steward	The Lewin Group/CMS
New or Maintenance	Maintenance (last reviewed: Fall 2018)
Current or Planned Use	Quality Improvement with Benchmarking (external benchmarking to multiple organizations); Quality Improvement (Internal to the specific organization)

Measure Type	Target Population(s)	Care Setting	Level of Analysis
Process	Patients ages 18-64 with SUD treatment	Behavioral Health: Inpatient, Outpatient; Clinician Office/Clinic; Emergency Department; Hospital: Acute Care, Critical Access, Inpatient, Outpatient, Post-Acute Care, Pharmacy	Population or Geographic Area (State)

CBE #3453 – Continuity of Care After Inpatient or Residential Treatment for Substance Use Disorder

Measure Review Questions



Rubric Domain	Example Discussion Questions
Importance	<ul style="list-style-type: none">• To what extent is there an adequate business case supported by evidence for the measure/measure focus?• Does the business case indicate the potential for sufficient gains in health care quality where there is variation in or overall less-than-optimal performance?• Is there sufficient evidence the target population (e.g., patients) finds the measure/measure focus meaningful?
Feasibility	<ul style="list-style-type: none">• Do the measure specifications require data that are available in electronic health records, are routinely generated during the normal delivery of care, AND are readily available or could be captured without undue burden?<ul style="list-style-type: none">• If data are not readily available, is there a near-term (within 1 year) path to support such routine and electronic data capture?
Scientific Acceptability	<ul style="list-style-type: none">• Does the measure, as specified, produce consistent (reliable) and credible (valid) results about the quality of care when implemented?
Equity	<ul style="list-style-type: none">• Does the measure sufficiently identify disparities in care across relevant populations, the results of which can be used to make actionable improvements in health equity?
Use & Usability	<ul style="list-style-type: none">• To what extent is the measure used for accountability, or to what extent is there a near-term plan to be used for accountability?• To what extent can the interested parties, including the accountable entities, use the measure results to achieve high-quality, efficient care?

Next Steps



Next Steps for Spring 2024 E&M Cycle



Compiled Comments

- We will share Advisory Group feedback and questions with developers/stewards for written response.
- We will share Advisory Group feedback and questions, along with developer/steward responses, publicly and with the Recommendation Group in advance of the endorsement meetings.



Upcoming Meetings

- **Advisory Group Meetings:** June 3-6, 2024.
- **Endorsement Meetings:** July 26-August 1, 2024.



Upcoming Public Comment

- **Draft E&M Guidebook:** June 4-June 24, 2024.

Questions:

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





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