

Measure Set Review (MSR): Preliminary Assessment Overview

Background and Context

The goal of the Measure Set Review (MSR) process is to optimize the Centers for Medicare & Medicaid Services (CMS) Medicare quality programs' measure portfolio via recommendations on continued use of measures in their designated programs. The recommendations are based on updated information on the measure's properties, performance trends, and whether the measure continues to support a given program's needs and priorities. To facilitate committee member review of measures, preliminary assessments (PAs) were developed for each measure in the 2024 measure set.

2024 Measure Set

For the 2024 MSR cycle, the focus of review is measures under the <u>Cascade of Meaningful Measures</u> priority of Affordability and Efficiency. Measures under this priority area address financial and operational aspects of health care delivery. Of the measures within this domain currently in CMS quality programs, 35 measures were selected for review based on input from our Partnership for Quality Measurement (PQM) committee members, public comment, expert review of the measure portfolio, and CMS input on rulemaking considerations.

These 35 measures span nine CMS programs including:

- Ambulatory Surgical Center Quality Reporting Program
- Home Health Quality Reporting Program
- Hospital Outpatient Quality Reporting
- Inpatient Rehabilitation Facility Quality Reporting Program
- Long-Term Care Hospital Quality Reporting Program

- Medicare Part C & D Star Ratings
- Merit-Based Incentive Payment System
- Prospective Payment System-Exempt Cancer Hospital Quality Reporting Program
- Skilled Nursing Facility Quality Reporting Program

Preliminary Assessment Methodology

The PAs were developed by a team of reviewers, analysts, and measurement scientists internal to Battelle. During PA refinement, drafts were shared widely with CMS program leads and measure stewards and developers for review of completeness and accuracy. This collaboration also allowed sharing of updated information on the MSR measures that was not yet documented in publicly accessible sites.

Information for these PAs was sourced from measure specification information cataloged in the <u>CMS</u> <u>Measures Inventory Tool (CMIT)</u> and the <u>PQM Submission Tool and Repository (STAR)</u>. Measure performance data for 2020-2022 was sourced from multiple publicly accessible CMS program data sets to help committee members and the public evaluate measure importance and reliability. These data sources are noted in each PA. In cases where measure stewards and developers were able to offer additional data or supplementary analyses from prior CBE submissions, this information was included in the PAs and this contribution was noted in a footnote.



In general, PAs display boxplots to show performance score trends over time. Additionally, importance tables report the mean performance score by decile to provide reviewers information about the potential impact of performance improvement. When sufficient data were available, reliability was calculated using the Adams¹ or Empirical Bayes² methodology, as appropriate, to demonstrate the measure's ability to assess quality across measured entities. Tables and figures provided in the PAs are accompanied by plain language interpretations and brief description of methods.

¹ Adams, John L., The Reliability of Provider Profiling: A Tutorial. Santa Monica, CA: RAND Corporation, 2009.

² Morris, C. N. (1983). Parametric Empirical Bayes Inference: Theory and Applications. *Journal of the American Statistical Association*, *78*(381), 47–55.