

Pre-Rulemaking Measure Review (PRMR) Committee Member Education Meeting

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November 7, 2024

The analyses upon which this publication is based were performed under Contract Number 75FCMC23C0010, entitled, "National Consensus Development and Strategic Planning for Health Care Quality Measurement," sponsored by the Department of Health and Human Services, Centers for Medicare and Medicaid Services.

Meeting Agenda



Meeting Agenda



1:00 PM	Welcome and introduction
1:05 PM	Housekeeping reminders
1:07 PM	CMS opening remarks
1:10 PM	Introduction to PQM
1:20 PM	PRMR process
1:35 PM	PRMR measure evaluation
1:50 PM	PRMR meeting processes
2:20 PM	Key timeline
2:30 PM	Q&A

* All times listed in ET

Housekeeping Reminders



We are so pleased to have you join us and want to create a meaningful exchange.



To participate in the discourse, type in the chat or raise your hand. Battelle staff will serve as virtual moderators.



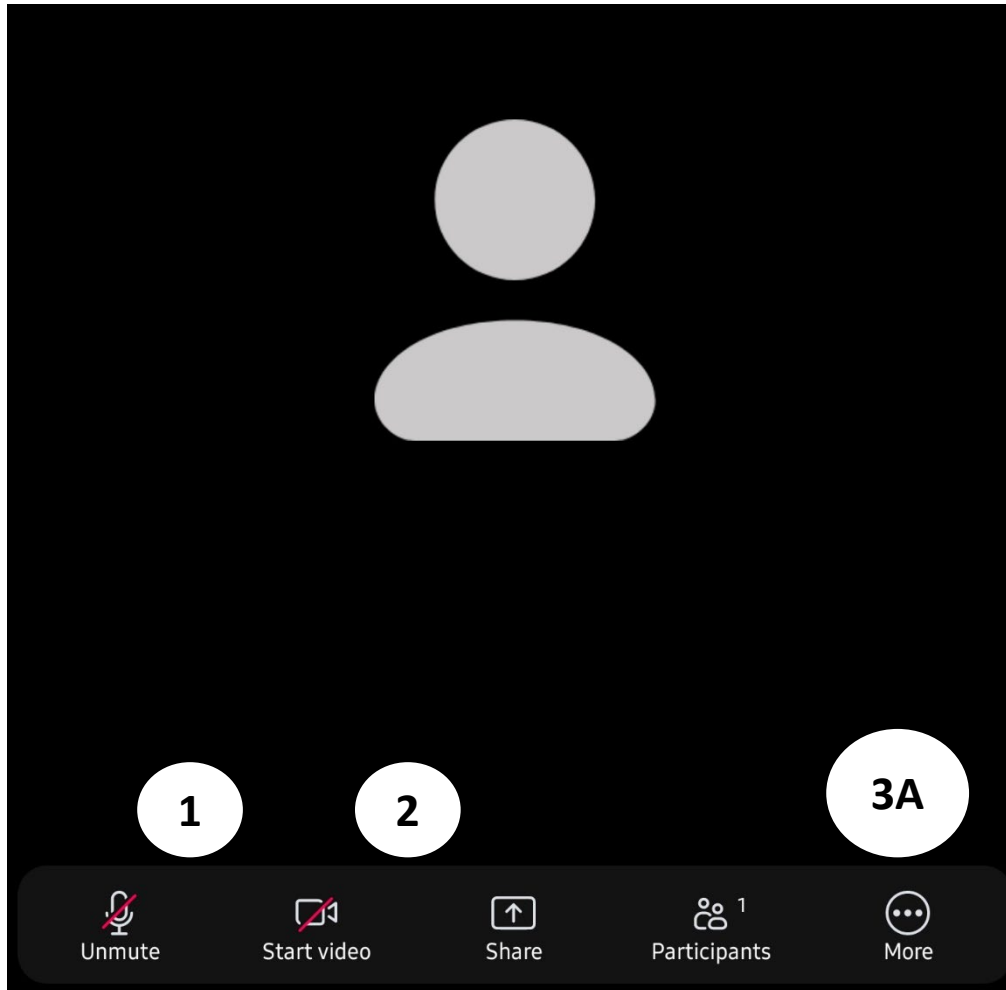
If you are experiencing technical issues, please contact the project team via chat on the virtual platform or at PQMsupport@battelle.org.

Using the Zoom Platform

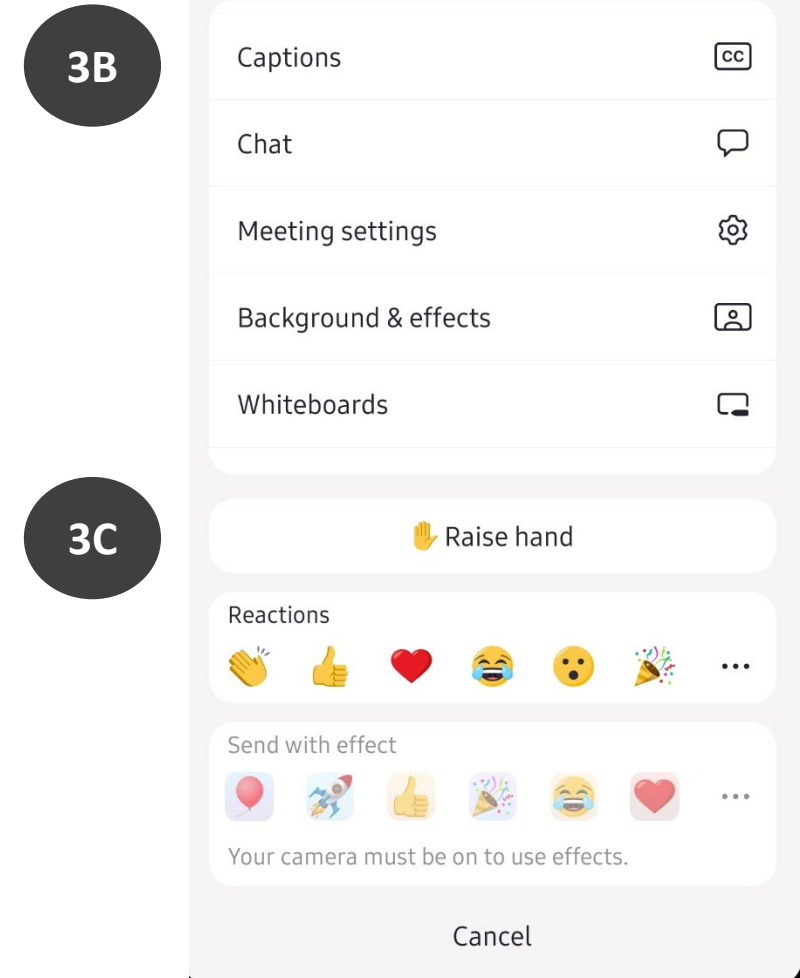


- 1 Click the lower part of your screen to mute/unmute, start, or pause video.
- 2 Click on the participant or chat button to access the full participant list or the chat box.
- 3 To raise your hand, select the raise hand button under the react tab.

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 (3C) to raise your hand. To raise your hand, select the raised hand function under the reactions tab.



Acronyms



- AG: Advisory Group
- CBE: Consensus-Based Entity
- CMS: Centers for Medicare & Medicaid Services
- CoMM: Cascade of Meaningful Measures
- MSR: Measure Set Review
- MUC: Measures Under Consideration
- MUD: Measure Under Development
- NHDNG: Novel Hybrid Delphi and Nominal Groups
- PA: Preliminary Assessment
- PAC/LTC: Post-Acute Care/Long-Term Care Workgroup
- PRMR: Pre-Rulemaking Measure Review
- PIE: Pre-Meeting Initial Evaluation
- PQM: Partnership for Quality Measurement
- RG: Recommendation Group
- STAR: Submission Tool and Repository

CMS Opening Remarks

Melissa Gross | Centers for Medicare & Medicaid Services (CMS)



Introduction to PQM

Brenna Rabel | Battelle



The Partnership for Quality Measurement

Powered by Battelle



- **Battelle** is a consensus-based entity funded through the *CMS National Consensus Development and Strategic Planning for Health Care Quality Measurement Contract* to oversee the endorsement and maintenance of clinical quality measures as well as the engagement of interested parties in the CMS pre-rulemaking process.
- **Vision:** The quality measure endorsement and review processes should be reliable, transparent, attainable, equitable, and, most of all, meaningful.

PRMR Approach



The **PRMR process** makes consensus-based recommendations about measures on the MUC List.



Process Overview

PRMR is the process to seek input on the measures CMS is considering for use in specific CMS Medicare quality programs



Building Recommendations

- Novel Hybrid Delphi and Nominal Group Technique
- Multi-step review ensuring rigor
- Meaningful opportunities for public engagement ensuring transparency
- Recommendations are evidence based and quantifiable



Community Voices

- Diverse representation
- Emphasis on patients'/care recipients' and caregivers' voices
- Emphasis on underrepresented voices
- Rural health and health equity expertise embedded into the committees, reducing siloed discussions

PRMR Committees

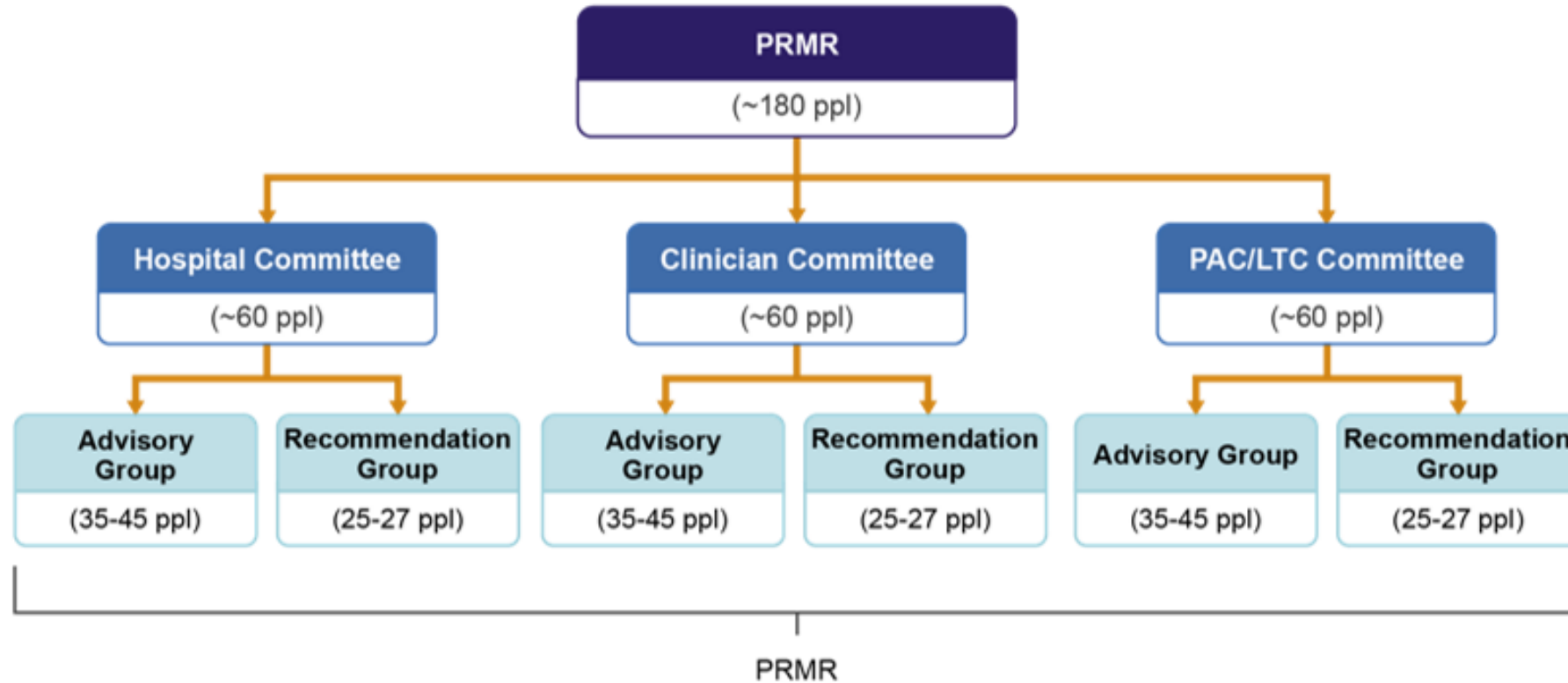


Committees consist of a combination of those who are the most impacted by adoption and implementation of the measures and those who bring broader and system perspectives to PRMR.



The committee membership is composed of both individual and organizational seats.

Committee Organization



- **Advisory and Recommendation Groups provide written feedback**
- **Advisory Groups meet to help shape RG meeting discussions**
- **Recommendation Groups meet to review and recommend**

Time Commitment

(pt.1)



- For each annual PRMR cycle, the time commitment ranges from 40 to 60 hours, distributed over three months and varying based on the assigned committee group.
 - All committee members are expected to answer emails requesting availability, attend a virtual orientation meeting, and conduct assessments of assigned measures under consideration for that PRMR cycle.
 - Note: Members will complete written feedback on a subset of measures but should be familiar with all measures.
 - RG members are required to review the meeting materials in advance of the review meetings, which will be 1- to 2-day all-day sessions, depending on the committee.
 - The Hospital measure review meeting is in person. Clinician and PAC/LTC measure review meetings will be held virtually.

Time Commitment (pt.2)



- AG members are required to attend a virtual meeting to discuss the measures under consideration with other AG members and RG co-chairs in advance of the RG measure review meetings.
 - AG meetings identify discussion topics for the RG meetings.
- Committee members can opt to attend listening sessions in December.
 - Listening sessions are an opportunity for members of the public to provide live comments and ask questions about measures under consideration.

PRMR Process

Meridith Eastman | Battelle



PRMR Cycle



The Department of Health & Human Services (HHS) annually publishes a list of measures under consideration (MUC) for future federal rulemaking by December 1.



The PRMR process results in consensus-based recommendations about MUCs for CMS programs.

PRMR committees assess whether a measure is appropriate for use in a specific CMS program and for a population of Medicare beneficiaries.



2024 Changes to PRMR Process



Increased Recommendation Group (RG) size: The RG size increased from 20 people to 25-30 people to help reduce occurrence of “consensus not reached” outcome.



New Advisory Group (AG) meeting: The AG, with the RG co-chairs, will meet prior to measure review meetings to ensure adequate AG input.



Pre-Meeting Initial Evaluation (PIE) forms: The brief PIE forms help members evaluate the measures based on meaningfulness criteria, appropriateness of scale, and time to value realization.

2024 Changes to PRMR Process (cont.)



Additional information about the “**recommend with conditions**”: We have clarified this PRMR voting status, including how conditions are identified and agreed upon.



Clarification on voting procedures for instrument-based measures

Advisory Group



Prior to the RG meetings, the AG convenes* to discuss their PIE form feedback and help generate discussion questions for the RG meeting.



RG co-chairs facilitate the session and ensure that the AG perspective is represented throughout RG discussions.

* AG members and RG co-chairs are required to attend their committee's AG meeting. Other RG members, CMS personnel, measure developers, and measure stewards can opt to attend AG meetings as members of the public in listen-only mode.

Recommendation Group



Battelle shares PIE results with the RG at least 2 weeks prior to the meeting.



The RG meets* to discuss issues/concerns raised during the AG discussion, public comment period, and via PIE forms.



RG members vote after each discussion, with the aim of reaching consensus about whether to recommend the measure(s) for use in the CMS program(s).

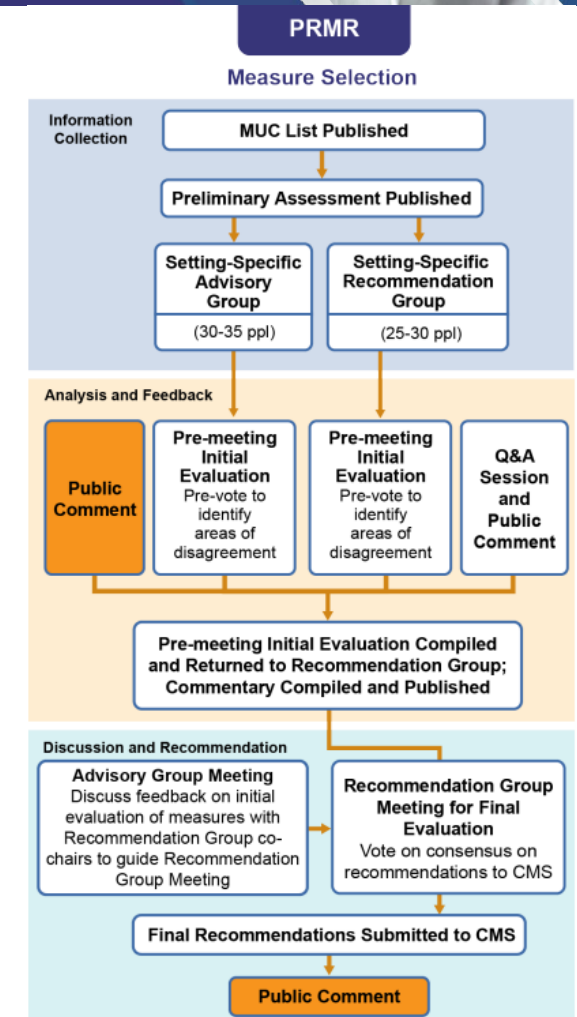
PRMR Process



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

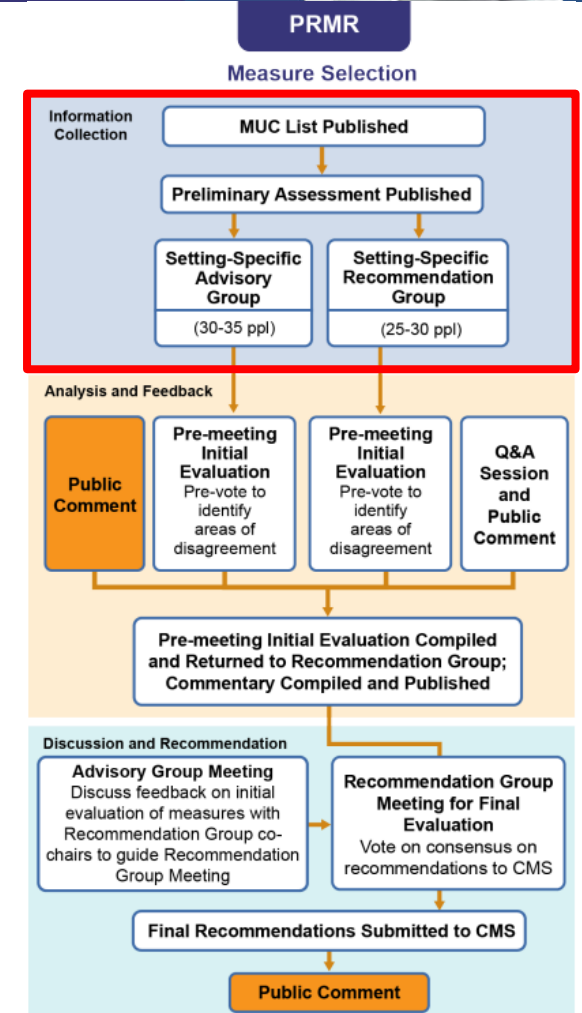


PRMR Process: Information Collection



Preliminary Assessment

- Battelle does a preliminary assessment (PA) for each measure using information from the CMS MERIT submission.
- Each PA focuses on the PRMR evaluation criteria and intentionally avoids rehashing topics better suited to endorsement & maintenance (E&M) discussions.
- Battelle creates PAs using information directly from the measure steward/developer. They are also reviewed by CMS leads and measure stewards/developers to ensure accuracy.
- PAs are made available to all committee members (AG & RG) immediately following the release of the MUC List.



PRMR Process: Analysis and Feedback

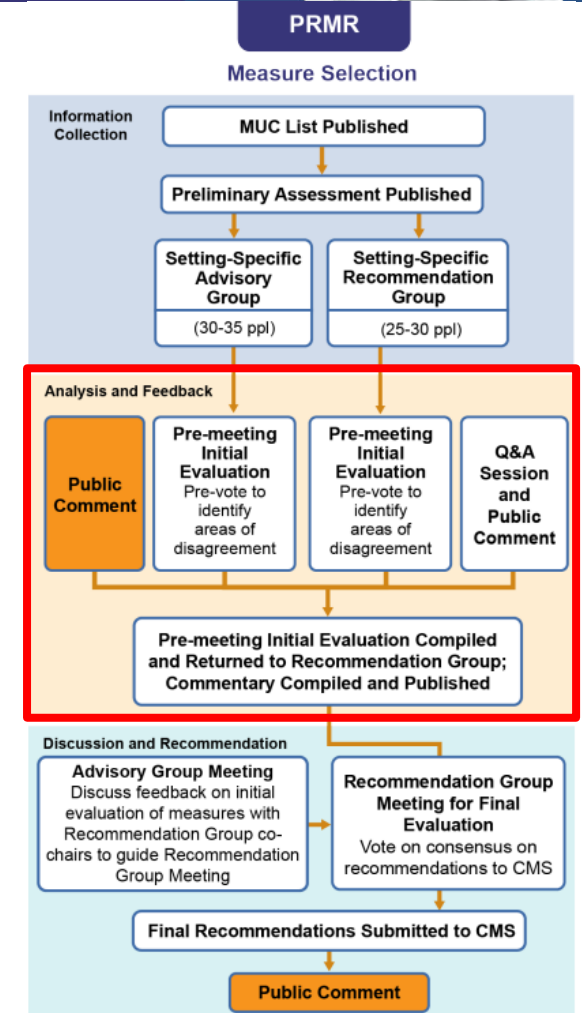


Pre-Meeting Initial Evaluation (PIE)

- All committee members submit evaluations on a subset of measures via the Pre-Meeting Initial Evaluation (PIE) form.
- Along with PAs, each committee member receives a PIE form for each measure they evaluate which includes guidance on questions to consider when evaluating the criteria.

Public Comment and Listening Sessions

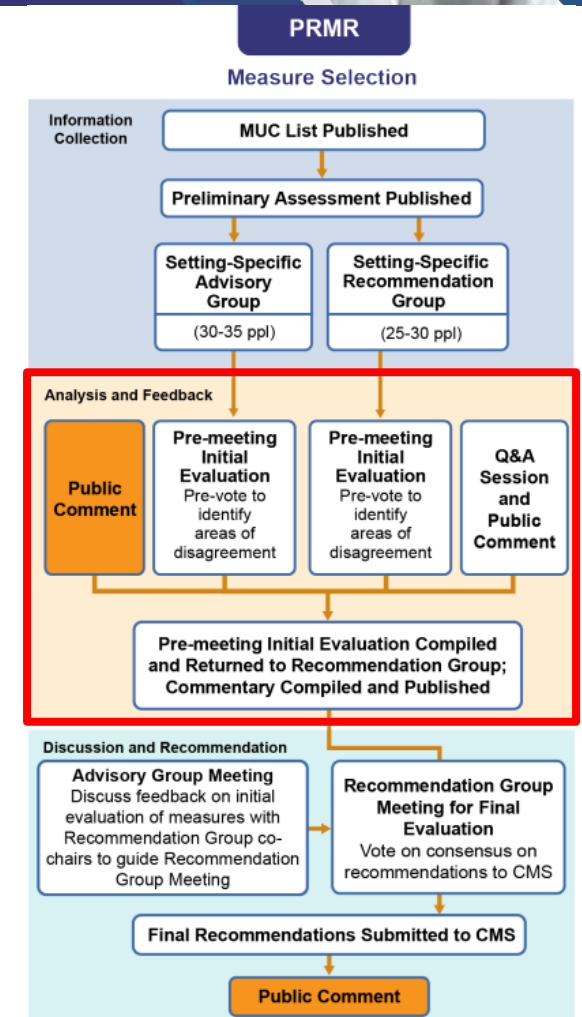
- The MUC List will be posted for a 21-day public comment period upon release.
- PQM hosts three public listening sessions, one per setting, where CMS, Battelle staff, and measure developers/stewards hear brief oral statements on measure(s) of interest. CMS answers MUC-related questions live and/or in writing after the call. Developers may also be asked to weigh in.
- Comments received through the comment process and during listening sessions will be made publicly available on the PQM website.



PRMR Process: Analysis and Feedback (cont.)



- Battelle compiles feedback from the PIE forms, public comment, and listening sessions in advance of the RG meeting for the following purposes:
 - to help Battelle facilitators identify areas of non-consensus, so they may be discussed during the RG meetings
 - to give to RG members in advance of the RG meeting to help them prepare for the discussion
 - to provide to CMS leads in advance of the RG meeting to help them anticipate questions and topics where more context or clarity may be needed to inform the RG discussion.



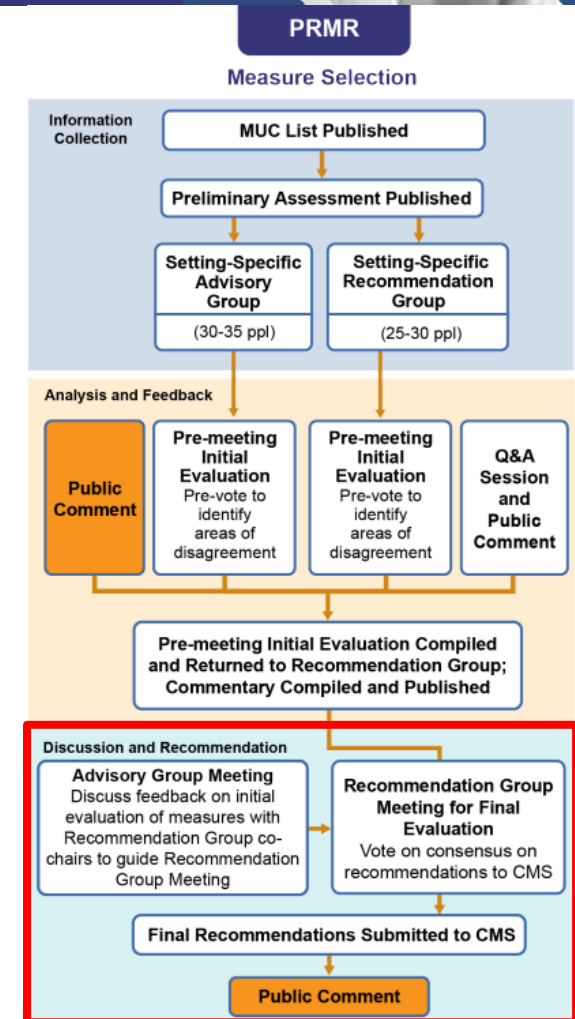
PRMR Process: Discussion and Recommendation (pt.1)



AG Discussion Session*

- Prior to the RG meetings, members of the AG convene to discuss their feedback from the PIE forms and help generate discussion questions for the RG meeting.
- The AG feedback is critical guidance for the RG discussion.
- RG co-chairs facilitate the session, and relevant Battelle staff attend.
- The co-chairs ensure that the AG perspective is represented throughout the RG meetings.

* AG members and RG co-chairs are required to attend their committee's AG meeting. Other RG members, CMS personnel, measure developers, and measure stewards can opt to attend AG meetings as members of the public in listen-only mode.

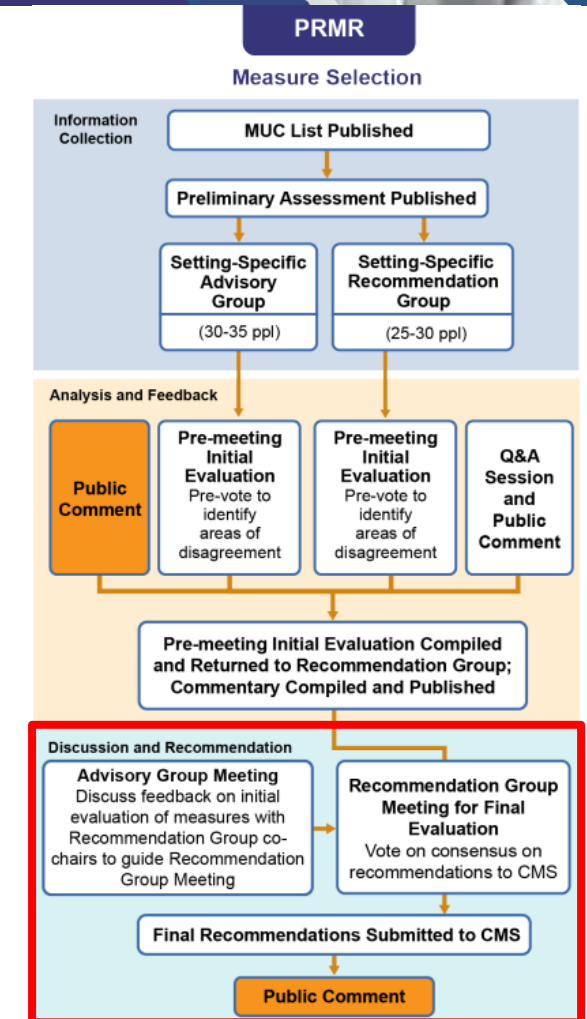


PRMR Process: Discussion and Recommendation (pt.2)



Recommendation Group Meeting for Final Evaluation*

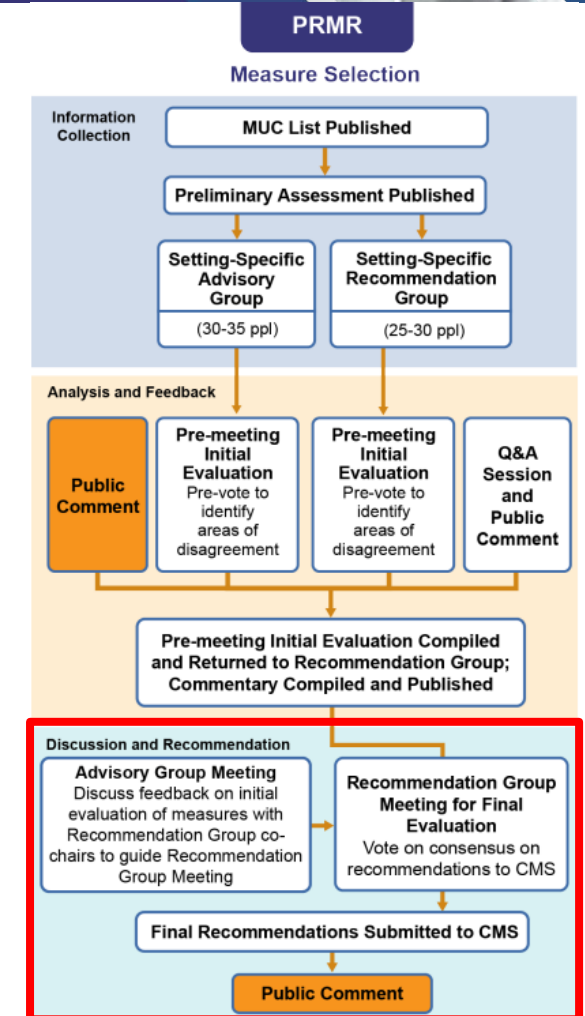
- The RG meets to discuss issues/concerns raised during the AG discussion, public comment period, and via PIE forms.
- Battelle shares PIE results with the RG at least 2 weeks prior to the meeting to assist the RG in prioritizing their discussions on areas of non-consensus.
- Meeting procedures for each measure:
 - Step 1: Battelle staff provides review of PA for each MUC using PRMR criteria, public comment summary, PIE results, and programmatic objectives; co-chairs provide an overview of AG feedback
 - Step 2: CMS staff provides brief overview and/or contextual background on the MUC
 - Step 3: Committee discusses
 - Step 4: Committee votes



*RG members are required to attend their committee's RG meeting. AG members can opt to attend RG meetings as members of the public in listen-only mode.

PRMR Process: Discussion and Recommendation (pt.3)

- Recommendation Group final recommendations are published February 1 on the [PQM website](#) where they are open for public comment for 15 days.
- The intent of this opportunity is to provide CMS with additional feedback on MUCs and final recommendations. The public comment does not impact the final RG recommendations.



PRMR Measure Evaluation

Lydia Stewart-Artz | Battelle



PRMR Assertions

(pt.1)



Meaningfulness: Concept of Interest

- When evaluating meaningfulness of the concept of interest, committees should evaluate whether the measure provides:
 - ✓ Evidence that the measure focus is associated with a material outcome for persons and entities (Importance)
 - ✓ Measure components and specifications that align with the intent of the measure focus and target population (Conformance)
 - ✓ Demonstration that the tools, process, and people necessary to implement and report on the measure are reasonably available (Feasibility)

PRMR Assertions

(pt.2)



Meaningfulness: Context of Use

- When thinking about how meaningful a measure is, committees should evaluate if the submission:
 - ✓ Explains why using this measure in the quality program will bring more benefits than costs (Importance)
 - ✓ Shows with data or reasoning that there are effective methods for improving the measure (Validity)
 - ✓ Provides data showing that most differences in performance are due to those effective methods (Reliability)
 - ✓ Identifies and addresses any obstacles or supports that might affect how the methods can be used (Usability)

PRMR Assertions (pt.3)



Appropriateness of scale:

- Is the measure appropriate and tailored to the specific goals of the program and its target population?
 - ✓ To evaluate this, we look at the evidence regarding how benefits and risks or harms are spread among different groups. We also need to consider how those risks or harms can be reduced.



PRMR Assertions

(pt.4)



Time-to-value realization:

- Does the measure include a plan for achieving positive effects in the short and long term?
 - ✓ Time-to-value realization is based on the idea that measuring something over time can lead to long-term benefits or harms as the measure matures.
 - ✓ To assess this, committees should look at how the benefits and harms might change over time. They should consider how to extend the benefits and prevent potential harms as the measure matures.



Preliminary Assessments



- Battelle provides committee members with measure-specific preliminary assessments (PAs).
- PAs include:
 - Descriptive information about measure specification, endorsement, and use
 - CMS-provided rationale for measure inclusion in the CMS program
 - Summary of performance on PRMR criteria
 - Considerations for statutorily required measure topic areas
 - Reliability & validity testing results and analysis

Preliminary Assessment Inputs



Content submitted through the CMS Measures Under Consideration (MUC) Entry/Review Information Tool (MERIT)



Information in the PQM Submission Tool and Repository (STAR) database



Results from reliability and validity testing



Findings from the scientific literature



Learnings from conversations with measure developers/measure stewards and CMS

Pre-Meeting Initial Evaluation (PIE) Forms



- Committee members will be assigned a selection of PRMR measures to review ahead of the meeting.
- PIE forms include detailed instructions and plain-language version of criteria.
- Based on the PAs and personal experience, committee members answer if the measure meets each criterion.
 - Yes/No and free-text response options
- The PIE forms are administered via Microsoft Forms format with the ability to download the completed form.
- Committee responses will inform discussion question development for the PRMR RG meeting.

Transition to Screen Share

Preliminary Assessment Example

Pre-meeting Initial Evaluation Example



Listening Sessions

Kate Buchanan | Battelle



Listening Session Structure



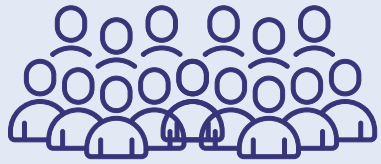
- Each setting (Clinician, Hospital, PAC/LTC) has one listening session.
- CMS leads, measure developers and stewards, Battelle staff, and members of the public attend.
- Agenda structure:
 - Battelle opens
 - Battelle moderates comments
 - CMS leads respond to questions with input from stewards/developers, as needed. CMS leads can also respond to questions in writing following the listening session.
- Measures are grouped by similar topic, not by program.

Meeting Process

Meridith Eastman | Battelle



PRMR Advisory Group Meeting



The virtual **PRMR Advisory Group meetings** (one per setting) will be held prior to the Recommendation Group meetings.

- The Advisory Group convenes to discuss their PIE forms feedback and help generate discussion questions for the Recommendation Group meeting.
- Recommendation Group co-chairs facilitate the session alongside Battelle staff.
- The meetings are open to the public to attend in listen-only mode.



PRMR Recommendation Group Measure Review Meeting



The **PRMR Recommendation Group meetings** will be held in January. The Hospital RG meeting will be held in person, while Clinician and PAC/LTC RG meetings will be virtual.

- RG committee members, Battelle staff, CMS, measure developers, and measure stewards are expected to attend the meetings.
- The meetings are open to the public to attend in listen-only mode.
- A measure review schedule will be available prior to the meeting.



PRMR Recommendation Group Meeting Agenda



- 1 **Welcome, Disclosures of Interest (DOIs), CMS Opening Remarks**
- 2 **Summary of MUC List; Measure Evaluation Criteria; Voting Process**
- 3 **Measure Review**
 - Battelle will provide an overview of the measure.
 - CMS will provide contextual background.
 - Battelle will review PA for each MUC using the PRMR criteria, public comment summary, and PIE results.
 - Committee will discuss.
 - Committee will vote.
- 4 **Feedback on PRMR Process**
- 5 **Next Steps and Adjourn**



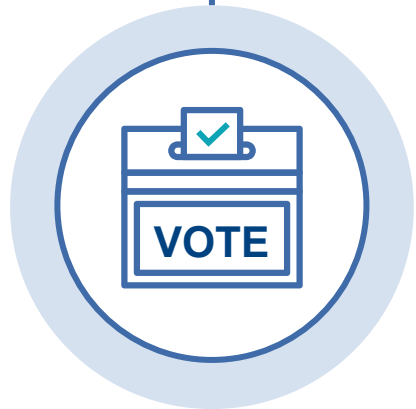
Disclosures of Interest (DOIs)



- Prior to the meeting, committee members are asked to complete a “measure-specific DOI” form for each measure, or batch of measures, assigned to the committee.
- During the RG meeting, committee members must verbally disclose relevant interests.
- If there is a perceived or actual conflict of interest (COI), Battelle requires affected members to recuse themselves from the discussion and any voting regarding the applicable measure(s).

Voting Procedure – Quorum

(pt.1)



Discussion quorum: The discussion quorum requires the attendance of at least 60% of the Recommendation Group members at roll call at the beginning of the meeting.

Voting quorum: The voting quorum requires at least 80% of active Recommendation Group members who have not been recused.

Voting Procedure – Quorum (pt.2)



- **It is extremely important to the process to have voting quorum, and we kindly request you stay for the entirety of discussion and voting.**
 - To ensure accurate quorum counts, please notify Battelle through the meeting chat if you need to leave the meeting for any reason.
 - If voting quorum is not met, we will collect the votes for those present and follow up with absent participants offline until a voting quorum is reached.



Voting Procedure – Consensus



Battelle staff will work with co-chairs to establish meeting ground rules and goals, keep discussion on track, prevent discussions from being dominated by a small number of participants, and ensure decisions are reached.

Battelle will utilize an online voting system to capture votes by committee members.

Consensus is a minimum of 75% agreement among members

PRMR Recommendation Voting



Committee votes on overall recommendation of the measure



Recommend that the measure be **added** to the intended CMS program(s)



Recommend that the measure be **added** to the intended CMS program(s) **with conditions**



Do not recommend that the measure be added to the intended CMS program(s)

PRMR Recommendation



Consensus voting for final recommendations

Recommend (A)	Recommend with Conditions (B)	Do not recommend (C)	Consensus Voting Status
75% or More			A (Recommend)
	75% or More		B (Recommend with conditions)
		75% or More	C (Do not recommend)
75% or More			B (Recommend with conditions)
		Greater than 25% and less than 75%	No consensus

Recommend With Conditions

(pt.1)



- The RG may identify certain short-term or long-term conditions that, if met, would lead them to a vote to fully recommend the measure.
- Short-term conditions may include:
 - Stratification in reporting
 - Obtaining consensus-based entity endorsement
 - Performing additional testing to demonstrate measure meaningfulness
- Longer-term conditions might include:
 - Re-specification of the measure focus or target population
 - The addition or removal of factors in the measure's risk-adjustment model

Recommend With Conditions

(pt.2)



- RG members do not need to agree on the conditions that would accompany a recommend with condition status.
- Each committee member who submits a “recommend with conditions” vote provides the relevant condition(s) they believe should precede the measure’s implementation in a CMS program.
- Battelle documents the identified conditions in the PRMR Recommendations Report for CMS’s consideration.

Recommendation Report



Following the PRMR Recommendation Group review, Battelle synthesizes the results into a report for CMS.

The report includes:

- Committee recommendations and rationale
- Committee and interested parties' concerns or areas of dissent



The report is submitted to CMS and posted on the PQM website.

Key Timeline



PRMR Timeline



Month	Dec	Dec	Dec	Dec	Jan	Jan	Jan	Jan	Jan	Feb	Feb
Week	1	2	3	4	1	2	3	4	5	1	2
CMS releases MUC List; the public comments on MUC List	X	X	X								
PRMR committees provide written feedback (PIE)	X	X	X								
CMS and Battelle host listening sessions to facilitate Q&A and public comment		X									
Battelle synthesizes feedback from public comment and PIE			X	X	X						
Advisory Group meetings					X						
Recommendation Group meetings						X	X				
Battelle compiles and summarizes PRMR recommendations								X	X		
Battelle publishes PRMR recommendations spreadsheet										X	
Public comment on final recommendations spreadsheet										X	X

2024 PRMR Meetings (pt.1)



Event	Dates
PRMR Committee Member Education Meeting	11/7/2024 *this meeting
Clinician Listening Session[†]	12/17/2024 (1-4 PM ET)
Hospital Listening Session[†]	12/18/2024 (1-4 PM ET)
PAC/LTC Listening Session[†]	12/19/2024 (1-2 PM ET)

† Committee members can opt to attend listening sessions. Listening sessions are an opportunity for interested parties to provide live comments and ask questions about measures under consideration.



2024 PRMR Meetings (pt.2)



Event	Dates
Public Comment on MUC List	12/2/2024-12/23/2024
Committee Members Complete PIE forms	12/3/2024-12/30/2024
Clinician Advisory Group Meeting*	1/7/2025 (1-3 PM ET)
Hospital Advisory Group Meeting*	1/8/2025 (1-3 PM ET)
PAC/LTC Advisory Group Meeting*	1/9/2025 (1-2 PM ET)

* AG members and RG co-chairs are required to attend their committee's AG meeting. Other RG members, CMS personnel, measure developers, and measure stewards can opt to attend AG meetings as members of the public in listen-only mode.

2024 PRMR Meetings

(pt.3)



Event	Dates
Virtual PAC/LTC Recommendation Group Meeting*	01/13/2025 (1-4 PM ET)
In-Person Hospital Recommendation Group Meeting (Baltimore, MD)*	01/15/2025-01/16/2025 (10 AM-6 PM ET)†
Virtual Clinician Recommendation Group Meeting*	01/21/2025-01/22/2025 (10 AM-6 PM ET)†
Public Comment on RG Final Recommendations	2/3/2025-2/17/2025

* RG members are required to attend their committee’s RG meeting. AG members can opt to attend RG meetings as members of the public in listen-only mode.

†Hours apply to both days

Resources

[The PRMR and MSR Guidebook](#)

introduces processes and incorporates changes as suggested by interested parties through a public comment period.

[The Measures Management System](#)

[\(MMS\) Hub](#) is a great plain-language general resource on quality measures.

[Become a PQM member](#) – it's free!



Guidebook of Policies and Procedures for Pre-Rulemaking Measure Review (PRMR) and Measure Set Review (MSR)



Transition to Screen Share

PRMR Committee Workspace at <https://p4qm.org/>



Questions or Comments?

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





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