

# Pre-Rulemaking Measure Review (PRMR) 2024-2025 Post-Acute Care/Long-Term Care (PAC/LTC) Advisory Group Meeting

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January 9, 2025

*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 & Medicaid Services.*

# Welcome to the PRMR PAC/LTC Advisory Group Meeting



This meeting helps ensure PRMR Advisory Group (AG) feedback and expertise on the 2024 Measures Under Consideration (MUC) is brought to the Recommendation Group (RG).



Committee co-chairs are liaisons between the AG and RG; they will bring your comments and questions to the PRMR PAC/LTC RG meeting on January 13, 2025.



Please note, public comment is not collected during this meeting. We invite written public comments on our final recommendations from February 3-17, 2025.

# PAC/LTC Advisory Group Meeting Agenda



# PAC/LTC Advisory Group Meeting Agenda



1:00 PM	Welcome and introduction
1:05 PM	Roll call, disclosures of interest, and co-chair introductions
1:15 PM	PRMR process overview
1:20 PM	Advisory Group measure discussion process overview
1:23 PM	PRMR measure evaluation
1:30 PM	Measure discussion
1:55 PM	Next steps
2:00 PM	Adjourn

\* All times listed in ET

# Housekeeping Reminders (pt. 1)



We are 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. Please unmute yourself when called on.

# Housekeeping Reminders (pt. 2)



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.



If you are experiencing technical issues, contact the project team via chat on the virtual platform or at [PQMsupport@battelle.org](mailto:PQMsupport@battelle.org).



# Community Guidance



- 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.

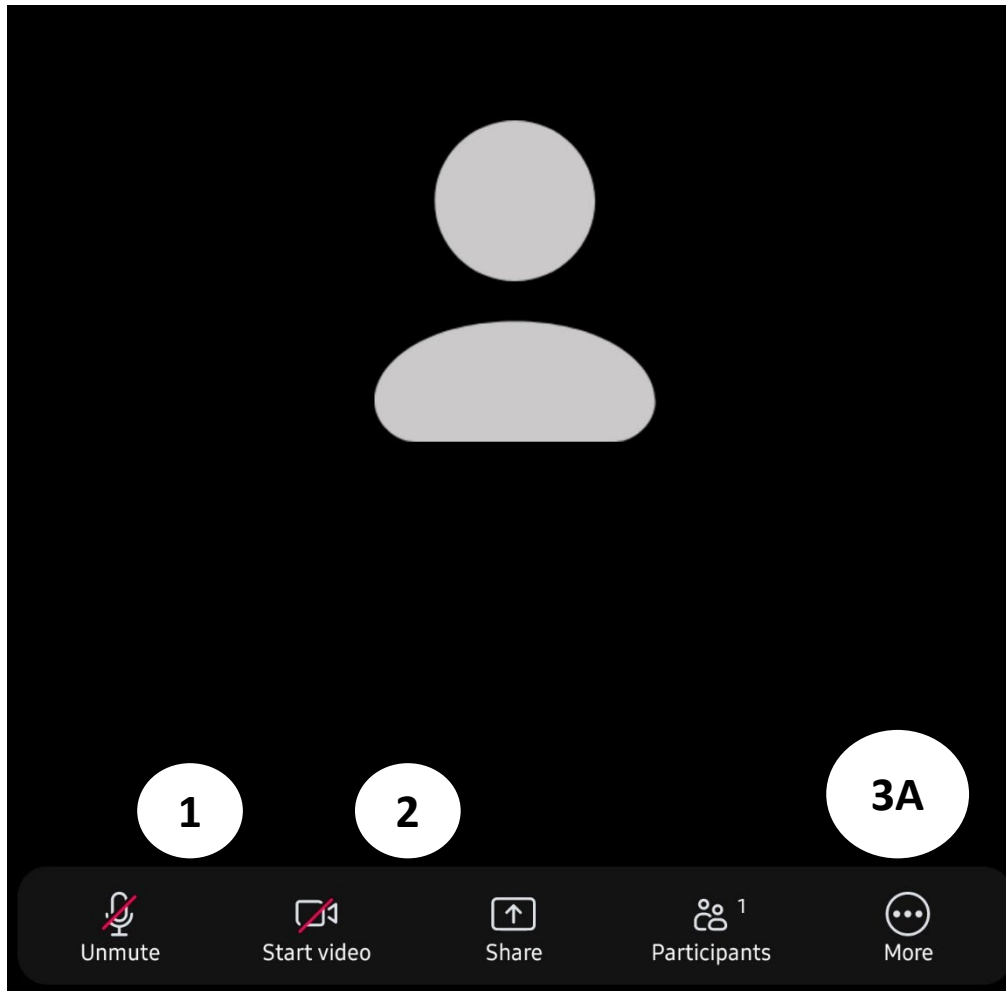
# Using the Zoom Platform



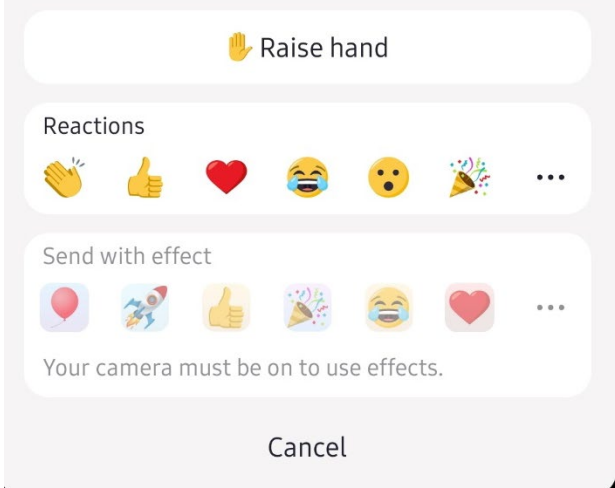
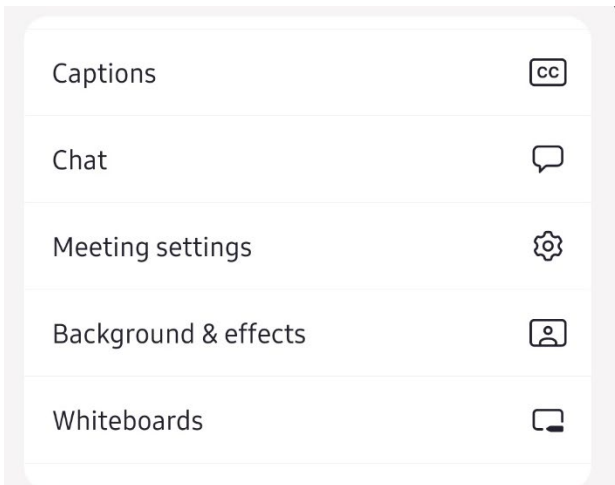
- 1 Click the lower part of your screen to mute/unmute, start, or pause video.
- 2 Click on the participant or chat button to access the full participant list or the chat box.
- 3 To raise your hand, select the raise hand button under the react tab.



# 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) to 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
- CMS: Centers for Medicare & Medicaid Services
- MUC: Measures Under Consideration
- PA: Preliminary Assessment
- PAC/LTC: Post-Acute Care/Long-Term Care
- PIE: Pre-Meeting Initial Evaluation
- PRMR: Pre-Rulemaking Measure Review
- PQM: Partnership for Quality Measurement
- RG: Recommendation Group

# Roll Call and Disclosures of Interest

Kate Buchanan | Battelle



# Disclosures of Interest (DOIs)



- Prior to the meeting, committee members were asked to complete a “measure-specific DOI” form for each measure, or batch of measures, assigned to the committee.
- During Advisory Group and Recommendation Group meetings, committee members verbally disclose relevant interests.
- If there is a perceived or actual conflict of interest (COI), Battelle requires affected members to recuse themselves from discussing and voting\* on the applicable measure(s).

\* Voting only applies to Recommendation Group members.

# Roll Call and Disclosures of Interest

## *PAC/LTC Advisory Group Members*



### RG Co-chairs: Christine von Raesfeld and Kiran Sreenivas

Robert C. Accetta

Theresa Edelstein

Janet Pue

Maureen Albertson

Jodi Eyigor

Kimberly Rask

Susan Battaglia

Danielle Grotzky

Pamela Roberts

Donna Bednarski

Patricia Harris

Andrea Schweiger

Jeremy Benton

Laura Hofmann

Carol Siebert

Caroline Blaum

Andrew Jakubik

Janice Tufte

Lara Burrows

Kate Lally

Crystal Ukaegbu

Melissa Butler

Cathy Lerza

Melanie Wascom

Anthony D'Alonzo

Sing Palat

Mary Ellen DeBardleben

Rosa Plasencia

# PRMR PAC/LTC Co-Chair Introductions

Christine von Raesfeld

Kiran Sreenivas





# PRMR Process

Dr. Meredith Eastman | Battelle



# PRMR Cycle



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



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

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



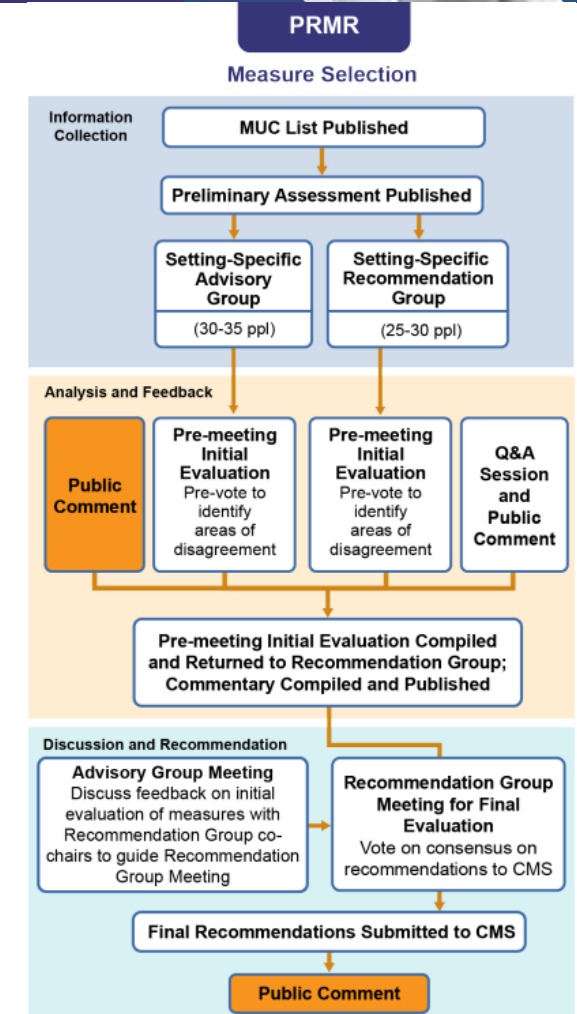
# PRMR Process



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



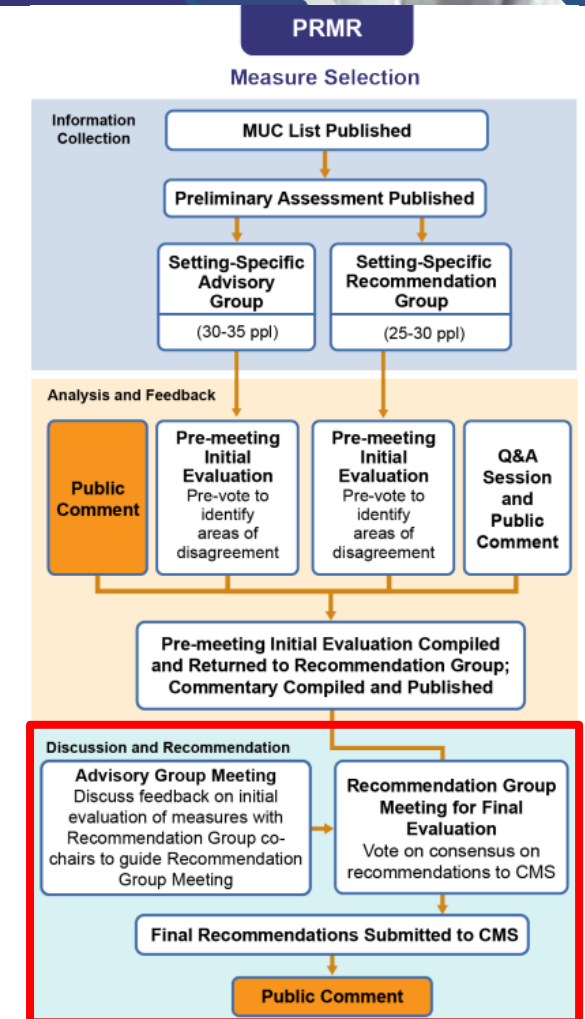
# PRMR Process: Discussion and Recommendation



## AG Discussion Session\*

- Prior to the RG meetings, AG members convene to discuss their feedback from the Pre-Meeting Initial Evaluation (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.

\*Battelle reserves AG meeting discussions for AG members and RG co-chairs. Others can opt to attend AG meetings as members of the public in listen-only mode.



# Advisory Group Meeting Process



# Advisory Group Meeting

## Measure Discussion Process



1. Battelle introduces each measure.

Battelle highlights key details about the measure, such as its description, type, endorsement status, and current program use.



2. RG co-chairs open the floor to AG members to discuss the measure.

Recommendation Group co-chairs facilitate Advisory Group member discussions, encouraging them to ask questions and share their thoughts on each measure.



3. AG input will inform discussion topics at the RG meeting.

Battelle assists co-chairs by recording Advisory Group questions and considerations for discussion at the Recommendation Group meeting.



# PRMR Measure Evaluation

Dr. 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 improvement. (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)

# MUC2023-219 Central Line-Associated Bloodstream Infection (CLABSI) Standardized Infection Ratio Stratified for Oncology Locations *PRMR Assertion Example*



## • Evidence of Measure Meaningfulness

- The 2023 Hospital PRMR Recommendation Group considered the addition of this measure to the Hospital Inpatient Quality Reporting (HIQR) Program
  - The committee reviewed clinical guidelines and cited literature supporting measure relevance to the HIQR program population. (Importance-Concept of Interest & Context of Use)
  - The committee considered this measure against the existing CLABSI measure used in acute care units, specifically focusing on the practical implications of expanding use into oncology units. (Feasibility-Concept of Interest, Usability-Context of Use)
  - An oncologist committee member raised the issue of unintended consequences related to blood culture orders being cancelled or not ordered to avoid raising the CLABSI rate. (Usability-Context of Use)
  - Committee members suggested the measure account for dialysis patients with catheters in stratification, and to evaluate different types of oncology units, e.g., hematology-oncology vs. solid organ. (Validity-Context of Use)
  - Committee members commented on low reliability of the measure for some entities and requested clarification from the steward on potential causes. (Reliability-Context of Use)

# 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.



# MUC2023-219 Central Line-Associated Bloodstream Infection (CLABSI) Standardized Infection Ratio Stratified for Oncology Locations *PRMR Assertion Example*



## • Evidence of Measure Appropriateness of Scale

- The 2023 Hospital PRMR Recommendation Group considered the addition of this measure to HIQR
  - One committee member expressed concerns about the reporting period being too short for smaller or rural facilities with lower volumes to report the measure and asked whether the reporting period could be expanded.
  - The committee discussed potential implications of this reporting period on overall measure performance across different types of oncology sites.





# 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.



# MUC2023-219 Central Line-Associated Bloodstream Infection (CLABSI) Standardized Infection Ratio Stratified for Oncology Locations *PRMR Assertion Example*



## • Evidence of Measure Time-to-Value Realization

- The 2023 Hospital PRMR Recommendation Group considered the addition of this measure to HIQR
  - The committee considered barriers to initial roll-out of this measure across the program, discussing implementation facilitators and barriers in rural and urban sites.
  - The committee discussed how short-term implementation barriers could impact performance and measure benefit for facilities with lower patient volumes.



# Preliminary Assessments



Battelle provided committee members with measure-specific preliminary assessments (PAs).

## PAs included:



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 and validity testing results and analysis

# PAC/LTC Measure Discussion



- MUC2024-054a CAHPS® Home Health Care Survey Care of Patients
- MUC2024-054b CAHPS® Home Health Care Survey Communications Between Providers and Patients
- MUC2024-054c CAHPS® Home Health Care Survey Talk About Home Safety
- MUC2024-054d CAHPS® Home Health Care Survey Review Medicines
- MUC2024-054e CAHPS® Home Health Care Survey Talk About Medicine Side Effects



# MUC2024-054a CAHPS® Home Health Care Survey Care of Patients



Item	Description
<b>Considered For</b>	Home Health Quality Reporting Program
<b>Measure Description</b>	Care of Patients is a multi-item measure derived from the updated CAHPS® Home Health Care Survey, also referred to as “HHCAHPS.” This is a standardized survey instrument and data collection methodology for measuring home health patients’ perspectives on their home health care in Medicare-certified home health care agencies.
<b>Developer/Steward</b>	Agency for Healthcare Research and Quality (AHRQ); Centers for Medicare & Medicaid Services (CMS)
<b>Measure Background</b>	Measure currently used in a Medicare program, but the measure is undergoing substantive change

Measure Type
PRO-PM or Patient Experience of Care

Endorsement Status
Endorsed

Current Program Use
HHQRP; HHVBP

Level of Analysis
Facility



# MUC2024-054b CAHPS® Home Health Care Survey Communications Between Providers and Patients



Item	Description
<b>Considered For</b>	Home Health Quality Reporting Program
<b>Measure Description</b>	Communications Between Providers and Patients is a multi-item measure derived from the updated CAHPS® Home Health Care Survey, also referred to as “HHCAHPS.” This is a standardized survey instrument and data collection methodology for measuring home health patients’ perspectives on their home health care in Medicare-certified home health care agencies.
<b>Developer/Steward</b>	Agency for Healthcare Research and Quality (AHRQ); Centers for Medicare & Medicaid Services (CMS)
<b>Measure Background</b>	Measure currently used in a Medicare program, but the measure is undergoing substantive change

Measure Type	Endorsement Status	Current Program Use	Level of Analysis
PRO-PM or Patient Experience of Care	Endorsed	HHQRP; HHVBP	Facility

# MUC2024-054c CAHPS® Home Health Care Survey

## Talk About Home Safety



Item	Description
<b>Considered For</b>	Home Health Quality Reporting Program
<b>Measure Description</b>	Talk About Home Safety is a single-item measure derived from the updated CAHPS® Home Health Care Survey, also referred as “HHCAHPS.” This is a standardized survey instrument and data collection methodology for measuring home health patients’ perspectives on their home health care in Medicare-certified home health care agencies.
<b>Developer/Steward</b>	Agency for Healthcare Research and Quality (AHRQ); Centers for Medicare & Medicaid Services (CMS)
<b>Measure Background</b>	Measure currently used in a Medicare program, but the measure is undergoing substantive change

Measure Type
PRO-PM or Patient Experience of Care

Endorsement Status
Endorsed

Current Program Use
HHQRP; HHVBP

Level of Analysis
Facility

# MUC2024-054d CAHPS® Home Health Care Survey Review Medicines



Item	Description
<b>Considered For</b>	Home Health Quality Reporting Program
<b>Measure Description</b>	Review Medicines is a single-item measure derived from the updated CAHPS® Home Health Care Survey, also referred as “HHCAHPS.” This is a standardized survey instrument and data collection methodology for measuring home health patients’ perspectives on their home health care in Medicare-certified home health care agencies.
<b>Developer/Steward</b>	Agency for Healthcare Research and Quality (AHRQ); Centers for Medicare & Medicaid Services (CMS)
<b>Measure Background</b>	Measure currently used in a Medicare program, but the measure is undergoing substantive change

Measure Type	Endorsement Status	Current Program Use	Level of Analysis
PRO-PM or Patient Experience of Care	Endorsed	HHQRP; HHVBP	Facility

# MUC2024-054e CAHPS® Home Health Care Survey

## Talk About Medicine Side Effects



Item	Description
<b>Considered For</b>	Home Health Quality Reporting Program
<b>Measure Description</b>	Talk About Medicine Side Effects is a single-item measure derived from the updated CAHPS® Home Health Care Survey, also referred as “HHCAHPS.” This is a standardized survey instrument and data collection methodology for measuring home health patients’ perspectives on their home health care in Medicare-certified home health care agencies.
<b>Developer/Steward</b>	Agency for Healthcare Research and Quality (AHRQ); Centers for Medicare & Medicaid Services (CMS)
<b>Measure Background</b>	Measure currently used in a Medicare program, but the measure is undergoing substantive change

Measure Type
PRO-PM or Patient Experience of Care

Endorsement Status
Endorsed

Current Program Use
HHQRP; HHVBP

Level of Analysis
Facility

# Next Steps

Kate Buchanan | Battelle



# Upcoming PAC/LTC Events



Event	Dates
<b>PAC/LTC Advisory Group Meeting (TODAY'S MEETING)</b>	<b>1/9/2025 1:00-2:00 PM ET</b>
<b>PAC/LTC Recommendation Group Virtual Meeting</b>	<b>1/13/2025 1:00 PM-3:45 PM ET</b>
<b>Final Recommendations Published to PQM Website</b>	<b>2/3/2025</b>
<b>Public Comment on RG Final Recommendations</b>	<b>2/3/2025-2/17/2025</b>

# PAC/LTC Recommendation Group Meeting



- Questions and considerations raised to the co-chairs in this meeting will guide discussion topics at the PRMR PAC/LTC Recommendation Group meeting on January 13, 2025.
  - Members of the PAC/LTC Advisory Group and the public are invited to observe the virtual PAC/LTC Recommendation Group meeting by directing their browser to the [Zoom webinar event link](#).



# Questions or Comments?

Contact us at [p4qm.org/contact](https://p4qm.org/contact)  
or by emailing [PQMsupport@battelle.org](mailto:PQMsupport@battelle.org)







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