The Future of Quality Measurement and Improvement

IHA Pay for Performance Summit

March 4, 2015
A Look Back: A young, but rapidly growing movement

<table>
<thead>
<tr>
<th>Year</th>
<th>Event</th>
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<tbody>
<tr>
<td>1995</td>
<td>Early 1990's Healthcare Effectiveness Data and Information Set (HEDIS) founded.</td>
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<td>1999</td>
<td>National Quality Forum (NQF) launches in September.</td>
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<td>2001</td>
<td>Institute of Medicine publishes <em>To Err is Human</em>.</td>
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<td>2004</td>
<td>Institute of Medicine publishes <em>Crossing the Quality Chasm</em>.</td>
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<td>2010</td>
<td>IHA's California Pay for Performance program.</td>
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<td>CMS value-based purchasing.</td>
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<td>2010</td>
<td>Patient Protection and Affordable Care Act. (Facebook launches; Twitter launches)</td>
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Growth of value-based purchasing
Creating Rapid Change: What might the future hold?

2011
- Measure Applications Partnership established
- National Quality Strategy
- IHA Medicare Five-Star Reporting of Physician Organizations

2014
- PCAST report calls for better measures, big data and analytics

2015
- Considering endorsement for intended use
- Harvesting and incubating better measures

2016
- Public-private alignment (health plans/CMS)
- Big data sources
- Interoperability

2017
- Predominant move to e-measures
- Measures of system performance
- Digital advances in patient surveys
- State-federal alignment

2018-2020
- Accelerate value-based purchasing?
- Other payment models?

Increasing emphasis on reducing cost
NQF’s Unique Role

- **Gold Standard for Quality**—endorses best healthcare quality measures
- **An Essential Forum**—420 organizational members and more than 800 volunteer leaders that span healthcare
- **Advisor**—to CMS and Congress on quality measurement
- **National Quality Leadership**—convenes private and public sector leaders to reach consensus on healthcare’s leading complex issues
National Quality Results—Making Care Safer

WHY MEASURES MATTER
For the past eight years, CLABSI initiatives have saved as much as $1.8 billion in excess healthcare costs.*

> 50,000 lives saved from total reductions in hospital acquired infections

$1.8 BILLION SAVED

46% REDUCTION

2008 .......................................................... 2013
National Quality Results—A Better Start

RESULTS

2014 Leapfrog survey shows that early elective deliveries (EED) dropped from 17% to 4.6% between 2010 and 2013.

73% IMPROVEMENT

2010 ———————————— 2013

...AND RESEARCH SHOWS THAT Reducing EEDs to less than 2% will avoid approximately 500,000 NICU days.

SAVE $1B IN HEALTHCARE COSTS ANNUALLY
More Medicare beneficiaries are healing at home rather than returning to the hospital.
HHS is focused on moving the US health system toward paying providers for quality, rather than quantity of care.

2015-2018 HHS Goals

- 30% of fee-for-service Medicare payments to be tied to quality or value through ACOs or other alternative payment models by the end of 2016; 50% achieved by 2018

- Overall, 85% of all Medicare payments to be tied to quality or value by 2016; 90% by 2018
Evolving payment and risk structures

Good measures are increasingly important at each stage.
Tensions in Measurement

- Between a few good outcome measures for accountability and process measures to guide improvement.
- Between burden for providers/clinicians and comprehensiveness for consumers/purchasers.
  - Today, clinicians wrestling with high stress, low morale, and low confidence in data and measurement.
- Between system level measurement and individual clinician level measurement.
- Between a small set of measures and having metrics that meet the needs of different specialists and settings.
A Quality Measure Vision

- Align measures to reduce burden and accelerate improvement; end duplication within and across settings and providers
  - Reduce cacophony of “look-alike measures”

- Identify more measures that are actionable, meaningful, and lead to better health outcomes

- Advance measurement to accurately and reliably assess value

- Achieve consistency and rigor in consumer information
  - Hospital Rankings (*Health Affairs*, March 2, 2015)
Key Issues in Realizing this Vision

- Leveraging new technology and big data to advance measurement science

- Ensuring measures capture quality differences, such as by adjusting for sociodemographic (SDS) factors.

- Attributing results to specific providers (hospital, medical group, individual clinician)

- Fully engaging consumers in understanding and advancing quality
Complex Measurement Science Questions

- Risk adjustment for sociodemographic factors
- Attribution
- Comparability
- Intended Use
Getting to Measures that Matter: Reduce Variation and Enhance Innovation

One Idea: A Measure Incubator
- Concept
- Technical expertise
- Data sources
- Analytics and feedback
- Resources

Criteria for Impact
- Credible
- Timely
- Useable
- Meaningful