

Measure Standardization

December 4, 2012

IHS Area GPRA Coordinators Conference

Why Harmonize to Standard Measures?

- CMS Meaningful Use Stage 2 clinical quality measures are NQF endorsed or NQF proposed measures.
- HHS initiatives use standard measures:
 - Million Hearts Initiative
 - Partnership for Patients
- The National Quality Strategy (NQS) was established in 2011 as part of the Affordable Care Act. It is led by an HHS NQS Council in coordination with AHRQ (Agency for Healthcare Research and Quality).

National Quality Strategy

- <http://www.ahrq.gov/workingforquality/index.html>
- Two annual reports (2011 and 2012) have been submitted to Congress and are publically available.
- The NQS is centered around 3 aims: better care, healthy people/healthy communities, and affordable care.
- Six priorities were developed to advance these 3 aims, and 2 HHS initiatives began in 2011 to represent 2 of the priorities: Million Hearts Campaign and Partnership for Patients.

The Six NQS priorities

- Making care safer by reducing harm caused in the delivery of care (*Partnership for Patients*).
- Ensuring that each person and family members are engaged as partners in their care.
- Promoting effective communication and coordination of care.
- Promoting the most effective prevention and treatment practices for the leading causes of mortality, starting with cardiovascular disease (*Million Hearts Campaign*).

The Six NQS priorities, cont.

- Working with communities to promote wide uses of best practices to enable healthy living.
- Making quality care more affordable for individuals, families, employers, and governments by developing and spreading new health care delivery models.
- *Many of the results for the FY 2012 newly identified measures aligned with the 6 NQS priorities will come from specific HHS agencies or national survey data.*

Standardized Measures Added to CRS in 2013

- The colorectal cancer screening measure is aligned with the HEDIS definition in 2013.
- NQF (National Quality Forum) Measure 0018, Controlling High Blood Pressure, was added to CRS 13.0 so that the IHS can report results to CDC on this Million Hearts measure in 2013. NOTE: 0018 is also designated as a Measurement Policy Council [MPC] core hypertension measure (MPC discussion soon).

AHRQ National Quality Measures Clearinghouse (NQMC)

- <http://www.qualitymeasures.ahrq.gov/hhs-measure-inventory/browse.aspx>
- The Agency for Healthcare Research and Quality hosts the NQMC which is an HHS measure inventory of 2,020 measures being used across HHS.
- Total number of measures by sample OPDIVS: IHS has 220; CMS has 782; HRSA has 148; NIH has 31; SAMHSA has 21.



hypertension

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U.S. Department of Health & Human Services (HHS) Measure Inventory

The U.S. Department of Health & Human Services (HHS) is committed to providing the public an inventory of the measures that are currently being used by the Divisions in HHS for quality measurement, improvement, and reporting. The Department's goal is to further advance collaboration among members of the quality community and to advance the effective use and harmonization of quality of care measures. The Department's transparency about the quality measures being used lays the foundation for the measurement enterprise and local users to build and improve upon. The HHS Measure Inventory is only accessible through the National Quality Measures Clearinghouse™ (NQMC) Web site.

[Read all](#)

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Browse the inventory by:

- HHS Division
- Topic or Condition
- Domain
- Care Setting

- Select HHS Division:**
- Agency for Healthcare Research & Quality (AHRQ) (182)
 - Administration on Aging (AoA) (9)
 - Centers for Disease Control and Prevention (CDC) (136)
 - Centers for Medicare & Medicaid Services (CMS) (782)
 - Health Resources and Services Administration (HRSA) (148)
 - Indian Health Service (IHS) (220)**

[Download the Indian Health Service \(IHS\) Inventory](#) (.XLS)

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1. Access to dental services (elder population of 55 and older).

- HHS Division: Indian Health Service (IHS)
- Topic or Condition: Dental
- Measure Domain: Access
- Care Setting: Ambulatory/Office-based Care
- Denominator: All patients in the user population ages 55 and older, broken down by age groups: 55-64, 65-74, 75-84, 85+
- Numerator:

Visit the HHS Measure Inventory

- Browse the Inventory**
- Measure Totals by Category
- Search the Inventory

HHS Measurement Policy Council (MPC)

- The NQS Council created the Measurement Policy Council (MPC) in 2012 to harmonize measure reporting throughout HHS around 6 specific domains.
- The HHS Deputy Secretary's charge to the MPC was to align HHS core measures across OPDIVs within the following 6 domains:
 - Hypertension Control
 - Smoking Cessation
 - Depression Screening
 - Hospital Acquired Conditions/Patient Safety
 - Patient Experience of Care Surveys
 - Care Coordination

Additional MPC Charge

- Develop a process for reviewing and making recommendations and/or approvals (as appropriate) on the following major functions:

Measure alignment

New measure development and
implementation

Measurement policy

MPC Measure Alignment

- Develop criteria on when it is appropriate/not appropriate to align measures.
- Develop consensus on the domains on which to align measures (e.g., measure concepts, measure specifications, data sources, etc.)

MPC New Measure Development and Implementation

- Implement strategic direction for future measurement priorities
- Measure submissions to the NQF-convened Measure Application Partnership
- Measures development contracts

MPC Measurement Policy

- Measure domains
- Measure selection, removal and retirement criteria
- Core sets of measures
- Other

HHS MPC Alignment

Recommendations to date

- Hypertension Control Measures
- Smoking Cessation Measures
- Depression Screening Measures

Hypertension Control Measures

- **NQF #0018, Controlling High Blood Pressure**
(percentage of patients 18-85 y.o. who had a diagnosis of hypertension and whose blood pressure was adequately controlled during the measurement year; <140/90.)
- **MU pipeline measure** (% of patients aged 18-85 y.o. with a diagnosis of hypertension and whose blood pressure improved during the measurement year.

NQF 0018: Hypertension control

NQF #	Measure Title	Measure Description	Numerator Statement	Denominator Statement
0018	Controlling High Blood Pressure	Percentage of patients 18-85 years of age who had a diagnosis of hypertension and whose blood pressure was adequately controlled (<140/90mmHg) during the measurement period.	Patients whose most recent blood pressure is adequately controlled (systolic blood pressure < 140 mmHg and diastolic blood pressure < 90 mmHg) during the measurement period.	Patients 18-85 years of age who had a diagnosis of essential hypertension within the first six months of the measurement period or any time prior to the measurement period

Smoking Cessation Measures

- **NQF #0028, Preventive Care and Screening** measure pair: Tobacco Use Assessment and Tobacco Cessation Intervention.
- **Meaningful Use Stage 1 Core Measure 9:** record smoking status for patients 13 and older.
- **Pediatric/Adolescent Smoking Cessation:** MPC will monitor an under development adolescent smoking cessation for CHIPRA (ages 12-21); and, look for pediatric smoking cessation measures that include other tobacco products.

NQF 0028: Tobacco use and tobacco cessation

NQF #	Measure Title	Measure Description	Numerator Statement	Denominator Statement
0028	Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention	Percentage of patients aged 18 years and older who were screened for tobacco use one or more times within 24 months AND who received cessation counseling intervention if identified as a tobacco user	Patients who were screened for tobacco use at least once within 24 months AND who received tobacco cessation counseling intervention if identified as a tobacco user	All patients aged 18 years and older

Depression Screening Measures

- **NQF #0418: Preventive care and screening**
(Screening for clinical depression and follow-up plan – screening tool is not specified)
- **NQF #0710: Depression remission at 12 months**
- **NQF #1401: Maternal depression screening**

NQF 0418: Depression screening

NQF #	Measure Title	Measure Description	Numerator Statement	Denominator Statement
0418	Preventive Care and Screening: Screening for Clinical Depression and Follow-Up Plan	Percentage of patients aged 12 years and older screened for clinical depression on the date of the encounter using an age appropriate standardized depression screening tool AND if positive, a follow up plan is documented on the date of the positive screen.	Patients screened for clinical depression on the date of the encounter using an age appropriate standardized tool AND if positive, a follow-up plan is documented on the date of the positive screen	All patients aged 12 years and older before the beginning of the measurement period with at least one eligible encounter during the measurement period.

NQF 0710: Depression remission

NQF #	Measure Title	Measure Description	Numerator Statement	Denominator Statement
0710	Depression Remission at Twelve Months	<p>Adult patients age 18 and older with major depression or dysthymia and an initial PHQ-9 score > 9 who demonstrate remission at twelve months defined as PHQ-9 score less than 5. This measure applies to both patients with newly diagnosed and existing depression whose current PHQ-9 score indicates a need for treatment.</p>	<p>Adults who achieved remission at twelve months as demonstrated by a twelve month (+/- 30 days) PHQ-9 score of less than five.</p>	<p>Adults age 18 and older with a diagnosis of major depression or dysthymia and an initial PHQ-9 score greater than nine during an outpatient encounter.</p>

NQF 1401: Maternal depression screening

NQF #	Measure Title	Measure Description	Numerator Statement	Denominator Statement
1401	Maternal depression screening	The percentage of children who turned 6 months of age during the measurement year, who had a face-to-face visit between the clinician and the child during child's first 6 months, and who had a maternal depression screening for the mother at least once between 0 and 6 months of life.	Children with documentation of maternal screening or treatment for postpartum depression for the mother.	Children with a visit who turned 6 months of age in the measurement period.

Justification of Additional HTN Measure(s) Request Form

HHS Agency/OpDiv		MPC Approved Measure	
Program Name			
Requested By		Measure(s) being proposed for use	
Date Submitted			

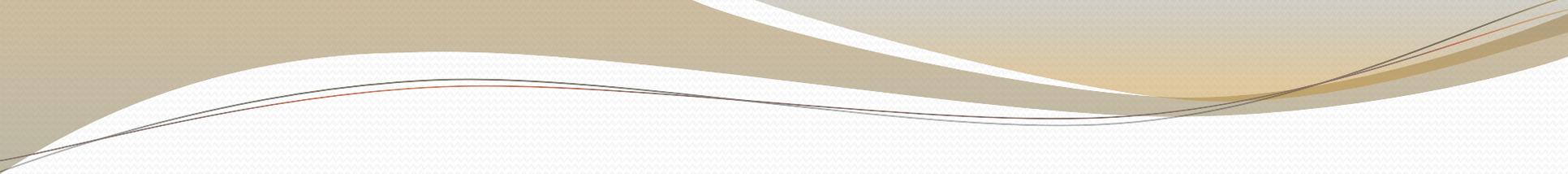
Is the proposed measure to be used in *addition* to the MPC approved measure? If yes, provide rationale for using additional measure(s).

Rationale:

Is the proposed measure to be used in *replacement* of the MPC approved measure? If yes, provide rationale for replacing MPC approved measure.

Rationale:

**Do you have plans for using the MPC approved measure in the *future*? Yes/No
If not, please provide explanation below.**



Group Work Session