

Quality Alliance Steering Committee – Episodes of Care Workgroup
Meeting Notes – September 11, 2009

One of the Episodes of Care Workgroup's co-chairs Chuck Cutler provided opening remarks for the meeting and informed the workgroup that Gregg Meyer, the Workgroup's other co-chair, was unable to participate in the meeting.

Niall Brennan of Brookings provided a status update on the progress of the Characterizing Episodes and Costs of Care (C3) Project. Niall highlighted the following:

- Project staff continue to test and validate the episodes.
- Efforts are underway to test and validate the AMI episode constructs using Medicare data through an arrangement with CMS.
- It is expected that the NQF Call for Measures, for which the episodes under development have been intended, will now take place in November. Most of the 12 conditions for which one or more episodes have been developed will be covered by this call for measures.

Niall Brennan and Kathy Werner of the Wisconsin Collaborative for Healthcare Quality (WCHQ) provided a brief update on the progress of efforts to test and implement readmission measures in Wisconsin and in Detroit, Michigan. Devorah Rich of the Greater Detroit Area Health Council (GDAHC) later confirmed Niall's summary of the efforts underway in Michigan.

- In Wisconsin discussions are underway with many of the state's largest hospitals and hospital systems, all of whom may be interested in participating in a pilot either to calculate their own readmission rates in-house or to submit data to WCHQ's data vendor for the calculation of a readmission rate. Due to some of the limitations of this analysis (e.g., inability to track patients readmitted to hospitals outside the system where the initial hospitalization took place), WCHQ has contacted the Wisconsin Hospital Association to investigate a potential alternative database with which to compare the pilot's calculated results.
- In Detroit, Save Lives Save Dollars staff (working with GDAHC) have worked with local stakeholders to draft a data submission request specifications that will permit their pilot's participating health plans to calculate all-cause readmission rates. These specifications will also be useful to the pilot in Wisconsin.

Niall Brennan walked through a PowerPoint presentation highlighting many of the episode-based analyses that have been conducted in recent weeks for the low back pain, asthma, CAD, COPD, and AMI episodes, including analyses of denominators, related and non-related resource use, and risk adjustment findings. He also noted many of the key revisions that have been made to these episodes as a result of previously presenting these analyses to the episodes' condition-specific physician workgroups.

INTERNAL DRAFT DOCUMENT FOR DISCUSSION PURPOSES ONLY

- Jim Andrianos suggested that, given prior workgroup discussions around the potential value of re-evaluating the current denominator restrictions due to coverage (medical and pharmacy) it would be very interesting to know what the impact of relaxing these restrictions would on episode-specific resource use. Project staff indicated that this suggestion had also arisen internally and that the findings of an analysis like this would be available at the workgroup's next meeting.
- One workgroup member commented that he thought individual physicians, not just health plans, would find these results very interesting and useful in their own practices and evaluating how to improve their care.
- Chuck Cutler reminded the workgroup that project staff would find it very helpful if they could take some additional time offline to look through the output in the document and ask questions or provide other feedback via e-mail regarding the individual services or diagnoses listed in the tables.

Niall Brennan walked the workgroup through an additional presentation document reviewing the preliminary findings of the project team's efforts to define a risk adjustment model, based on CMS's Hierarchical Classification of Conditions (HCC) Model, for the Acute AMI episode.

Kevin Weiss provided brief overviews of the episodes developed for sinusitis and colon cancer developed. Workgroup members were invited to provide comments on these episodes as well as the latest asthma specifications via e-mail.

Comments or questions regarding the content of this meeting may be sent to Niall Brennan (nbrennan@brookings.edu).