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QASC National-Regional Implementation Workgroup
Conference Call Notes – April 21, 2010

The following is a review of the discussion points from the April 21 National-Regional Implementation (NRI) workgroup conference call.

Min Gayles Kim, Joachim Roski, and Adam Wilk of Brookings welcomed the call's participants. Jim Chase, the workgroup's chairperson, also greeted the workgroup.

Jim Chase walked through a brief overview of the primary goals of the Advanced Measurement Best Practices Project (AMP), for which the NRI workgroup now serves as an Advisory Group. Additional details regarding this project in general are available among the materials for previous NRI workgroup discussions.

Min Gayles Kim provided a general status update regarding recent staff progress on the AMP project. Since the workgroup's last discussion, eight sites have been identified to participate in the project, and a ninth (a physician group practice) is currently being recruited. These eight organizations span a wide array of organization types, as the workgroup had previously recommended. Each organization meets previously specified site-selection criteria as well. For example, each site:

- Has been actively conducting performance measurement activities for at least two years
- Relies on multiple data sources to calculate its clinically enriched performance measures
- Collects much of these data via electronic means rather than chart abstraction

As part of Phase I of the AMP project, project staff are currently conducting telephone interviews with staff at these participating organizations to obtain general background information and context for their performance measurement activities. In Phase II, which will likely kick off next week, project staff will begin a detailed review of all documentation provided by these organizations regarding their performance measure calculation processes and data sources. Efforts are also underway to finalize contracting arrangements with each participating organization.

Min Gayles Kim walked the workgroup through the three documents distributed prior to the discussion – draft data collection templates that project staff will complete as part of Phase II of the project. Staff will populate the documents for each site with information gathered from publicly available documentation and through interviews with participating organization staff. Ms. Kim requested feedback from the workgroup regarding whether these documents were sufficiently comprehensive for capturing the information that would be needed to identify best practices in data collection and measure calculation processes and whether they contained questions that were superfluous or unduly burdensome to populate. Ms. Kim solicited input on the Demographics data collection template first.

- One workgroup member noted that while this document asks when the organization was founded, it will be important to clarify how long the organization has been involved in performance measurement activities specifically. Min Gayles Kim noted that this information had already been collected during the initial survey process conducted earlier this year.

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- Jim Chase noted that it will be important to be able to describe the process by which measurement decisions (e.g., around which measures were chosen, around levels of measurement) were made at each organization. Min Gayles Kim agreed and suggested that project staff had hoped to collect this information while completing the organizations' Measure Implementation Mapping templates, but this information may also be gathered through the Demographics template.

Ms. Kim then solicited input on the Measure Implementation Mapping templates, which projects staff will complete for each measure selected for the AMP project that the organization calculates and reports. Ms. Kim also noted that information for a Diabetes HbA1c control measure was also circulated to workgroup members as a sample completed template.

- One workgroup member expressed satisfaction to see that it would be taken into consideration a meaningfully diverse collection of organization stakeholders was involved in the measure's selection and implementation process.
- Jim Chase noted that since this project in some respects will function as a "point-in-time" assessment of measurement practices, it will be important, if possible, to prompt participating organizations to speak to how their decisions regarding data collection and measure implementation have evolved over time.
- A workgroup member pointed out that if her organization were completing the template themselves, they might not think to provide information about measures they did at one time calculate but no longer do. She was aware of numerous organizations that at one time did calculate a measure of depression management but subsequently terminated the process because of the difficulties inherent in the measure.
- A few workgroup members noted that, looking forward, the increasingly common use of EMR and EHR systems in organizations like those participating in the AMP project may serve as a context within which to ask how key measurement decisions are anticipated to change in the future. For example, will the organization consider using EMR systems as a data source for measures they currently calculate with data collected via chart abstraction?
- One workgroup member recommended that project staff be clear in the document's Reporting section whether they mean to discuss public reporting specifically or all forms of reporting for internal or external audiences.
 - This may be important for some payers or large physician groups, for example, whose standards regarding sample size may be higher for public reporting than if they were providing feedback only to the individual physician him/herself.
- In response to a question from a workgroup member, Min Gayles Kim clarified that project staff are planning to gather measure-by-measure detail as noted in the Measure Implementation Mapping template so as to capture differences between measures calculated by the same organization. While this may require significant time and resources, project staff will work to complete as much of this information as they can using documentation provided by the participating organizations rather than obtaining the information via in-person or telephone interviews.

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- When Min Gayles Kim asked the workgroup whether this template asked too many questions and would be unnecessarily burdensome, workgroup members generally agreed that it would be better to ask too many questions than to ask too few, which is the risk if some of the current template's questions are deleted. They should be retained at least for the first few rounds of data collection activities.

Min Gayles Kim reminded workgroup members of the project's next steps, including Phase II data collection activities. She also noted that much of this initial data collection process will be complete by the time of the workgroup's next call on June 9. Jim Chase indicated that he thought it would be very interesting to see what project staff find through this process and also what the project's consultants make of that information, particularly with respect to what should be considered a best practice for future measure implementation processes to emulate.