

FOR DISCUSSION PURPOSES ONLY – DO NOT CITE OR QUOTE

QASC National-Regional Implementation Workgroup
Conference Call Notes – January 6, 2010

The following is a review of the discussion points from the January 6 National-Regional Implementation (NRI) Workgroup conference call.

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

Jim Chase led the workgroup through a brief overview of the workgroup's activities during 2009. In particular, he highlighted that since the workgroup's formation in January 2009, it had marked the following accomplishments:

- Two regional coalition representatives, Jim Chase and Shannon Robshaw, became full members of the Quality Alliance Steering Committee.
- Workgroup members reviewed and provided input regarding the content and means of disseminating the findings of the Performance Measurement and Reporting Database System (MARS) survey findings collected through the efforts of the High-Value Health Care Project.
- The workgroup developed and refined a brief describing ways in which the capabilities of regional collaborative organizations could be best leveraged moving forward; this document provided impetus for the "Best Practices" project proposal to be discussed later in the meeting.
- This proposal was granted funding by the Robert Wood Johnson Foundation toward the end of December 2009.

Joachim Roski walked through an overview of the "Performance Measures and Data Collection Best Practices" project. In general, the project is intended to address a growing need for consistency in the methods used to implement measures nation-wide with respect to data collection, data aggregation, and other issues that may differ based on the implementing organization's available data sources and infrastructures. The expanding development and use of measures relying on datasets more sophisticated than administrative claims data alone (e.g., using clinical data available in electronic health records) particularly introduces a growing need for consistency in measurement methods to support comparability. The project will consist largely of the identification of measures that could be consistently implemented (if they are not already) and the evaluation of the methods used to implement them by a diverse set of leading sites in the area of performance measurement (e.g., regional collaborative organizations, integrated delivery systems, small and large physician practice groups). The final deliverable is intended to be a description of the best practices in these methodological areas to support broad consistency moving forward.

- Jim Chase added that the project will also serve to identify what barriers exist today that hinder real consistencies across the methods of current implementation efforts.
- Joachim Roski and Jim Chase both noted that project staff will be monitoring other external factors that would inform this project's component tasks. Such factors include:
 - The proposed rule for the definition of "Meaningful Use" of HIT

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- Any impacts of health reform legislation on CMS's efforts to collect and analyze performance measurement data nationally
- Joachim Roski asked that the NRI workgroup serve as an Advisory Group for the project throughout most of the 2010.

Joachim Roski pointed out that this project is intended to reflect ongoing practices in the measure implementation arena beyond those currently undertaken by regional collaborative organizations such as those composing the NRI workgroup to date. As such, Min Gayles Kim and other project staff have begun extending invitations to representatives of integrated delivery systems, payer organizations, and other entities who could also provide input regarding the issues facing those who are working to implement these measures and help to improve the structure of this project. Three of the individuals who have accepted their invitations and were able to participate on this workgroup call – Elysa Ferrara of Aetna, Ann Woo of Hill Physicians Medical Group, and Denise Love of the National Association of Health Data Organizations – made brief introductions to the rest of the workgroup. An updated list of the NRI workgroup's membership is included below.

Min Gayles Kim noted that the project team has also reached agreements with three consultants to support the project's activities and provide insights regarding developments in HIT, measurement methods, and the measures themselves. These individuals are Scott Endsley of the Cleveland Clinic, Cheryl Damberg of the RAND Corporation, and Karen Kmetik of the American Medical Association, respectively.

Jim Chase drew the workgroup's attention to the Project Charter that had been shared with the workgroup prior to the call and asked Min Gayles Kim to provide some further discussion of the project team's expectations around the NRI workgroup's input in the near term. Min clarified that the project team would welcome input from workgroup members on many of the components included in the Project Charter, including the project's research questions.

- Denise Love inquired as to whether the project's participating sites might include state databases, such as those she works with through NAHDO. Joachim Roski noted that to the extent a state is already calculating one or more of the measures included in the project, project staff would certainly consider including such a state among the participating sites. However, the project's funds to support the piloting of new measures and measurement methodologies among sites not currently undertaking such activities are very limited.
- Ted Rooney asked whether the measures included in the project would include cost measures as well as quality measures. Joachim Roski clarified that while cost measures are certainly important and will not be ignored in the project team's analyses of current measurement methods, the project's target measures will be limited to those that have already been endorsed by the National Quality Forum (i.e., quality measures, for now).

To provide the workgroup with further insights into the project and expectations for the NRI workgroup's involvement, Min Gayles Kim walked through the NRI Advisory Group Workplan. This document highlighted the key items that staff anticipate reviewing with the workgroup during each of its planned calls during the first eight months of 2010 and during its newly planned in-person meeting scheduled for January 20.

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- **This January 20 meeting will be held at Brookings from 9:00 am until approximately 2:30 pm ET. Accommodations will be made for workgroup members who cannot participate in person to participate telephonically.**

Min Gayles Kim invited workgroup members to provide feedback on this workplan, as well as the project charter, at their convenience via e-mail or via phone. Members will also be invited to provide feedback on the materials distributed in anticipation of the in-person workgroup meeting. It is anticipated these materials will be made available to the workgroup during the week of January 11.

Jim Chase and Joachim Roski closed the meeting by noting that this new project is planned only as the first of a multi-phase effort to disseminate recommendations and guidance about the best practices for measurement implementation nationally over the coming years. The overarching goal here is to leverage and demonstrate the widespread feasibility of current efforts in this arena to the greatest extent possible.

Updated National-Regional Implementation Workgroup Roster

Name/Title	Organization
Jim Chase, chair	Minnesota Community Measurement
Marc Bennett	HealthInsight
Karen Wolk Feinstein	Jewish Healthcare Foundation
Elysa Ferrera	Aetna
Alan Glaseroff	Humboldt Del Norte IPA
Aparna Higgins	America’s Health Insurance Plans
Denise Love	National Association of Health Data Organization
Peggy McNamara	Agency for Healthcare Research and Quality
Harold Miller	Network for Regional Healthcare Improvement
Jill Nault	Healthy Memphis Roundtable
Michael Painter	Robert Wood Johnson Foundation
Kerri Petrin	Puget Sound Health Alliance
Barb Rabson	Massachusetts Health Quality Partners
Ted Rooney	Maine Health Management Coalition/Quality Counts
Chris Schultz	Indiana Health Information Exchange
Jennifer Sweeney	National Partnership for Women & Families
Andrew Webber	National Business Coalition on Health
Ann Woo, PharmD	Hill Physicians Medical Group
Scott Young, MD	Kaiser Permanente
TBD	National Quality Forum
TBD	Integrated Delivery Health System
TBD	Small Physician Group Practice representative