



2016 Quality Measure Recommendations

Statewide Quality Reporting and Measurement System (SQRMS) Public Forum June 22, 2015

Dina Wellbrock Project Manager

MNCM Background

- Collaboration started in 2002
- Became separate 501(c)3 entity in 2005
- Our mission is to accelerate the improvement of health by publicly reporting health care information
 - Provide credible, statewide performance data on quality, cost and patient experience
 - Build a robust, extensive set of measures through our multistakeholder process
 - Fulfill our vision of public reporting both through our annual <u>Health</u>
 <u>Care Quality and Disparities reports</u>

 through <u>MNHealthscores.org</u>
- Collaborative effort of providers, hospitals, purchasers, consumers and health plans



Background continued

- In 2008, MDH contracted with MNCM to assist with implementing SQRMS
- MNCM subcontracts with the Minnesota Hospital Association, and Stratis Health to assist with key activities
- Specifically MNCM (1) facilitates data collection and management of information (2) reviews existing measures and the development of new measures (3) develops annual recommendations of a uniform set of quality measures for the state's consideration







2016 Quality Measure Recommendations

Physician Clinics

2015 Measures Recommendation Process

- Measure Review Committee
- April Preliminary slate of measures (clinics); evaluation of existing measures and measure specifications incorporated
- October March
 — Stratis convened the Hospital Quality
 Reporting Steering Committee for hospital
 recommendations
- Late April May Public commentary convened by MDH for the preliminary slate of measures
- June Final slate of measures (clinics and hospitals);
 incorporates public comments obtained by MDH
- Late June MDH Public Forum



Optimal Diabetes Care Composite

- HbA1c (less than 8 percent)
- Blood pressure control (less than 140/90 mm Hg)
- Daily aspirin use if patient has diagnosis of IVD (or valid contraindication to aspirin)
- Documented tobacco free
- Statin use
- Eligible Providers: Family Medicine; General Practice; Internal Medicine; Geriatric Medicine; Endocrinology
- Established patients ages 18-75



Optimal Vascular Care Composite

- Blood pressure control (less than 140/90 mm Hg)
- Daily aspirin use or contraindication to aspirin
- Documented tobacco free
- Statin Use
- Eligible Providers: Family Medicine; General Practice;
 Internal Medicine; Geriatric Medicine; Cardiology
- Established patients ages 18-75



Depression Remission at 6 Months

- Patients with major depression or dysthymia <u>and</u> an initial PHQ-9 score > nine whose PHQ-9 score at six months (+/- 30 days) is less than 5.
- Eligible Providers: Family Medicine; General Practice; Internal Medicine; Geriatric Medicine; Psychiatry; and Licensed Behavioral Health (if a physician on site)
- Adults ages 18 and older



Optimal Asthma Control Composite

- Asthma is well controlled demonstrated by specified assessment tool
- Patient is not at risk for future exacerbations (patient reports less than two total emergency department visits and hospitalizations during previous 12 months)
- Eligible Providers: Family Medicine; General Practice; Internal Medicine; Pediatrics; Allergy/Immunology;
 Pulmonology
- Established patients ages 5-17; patients ages 18-50



Colorectal Cancer Screening

- Patient is current with colorectal cancer screening (allowable screens: colonoscopy within 10 years, sigmoidoscopy within 5 years, FOBT or FIT within the reporting period)
- Eligible Providers: Family Medicine; General Practice; Internal Medicine; Geriatric Medicine;
 Obstetrics/Gynecology
- Established patients ages 50-75



Maternity Care - C-Section Rate

- Percentage of cesarean deliveries for first births
- Eligible Providers: Family Medicine; General Practice;
 Obstetrics/Gynecology; Perinatology
- Cesarean: All live, singleton, vertex, term (≥ 37 weeks gestation) deliveries to nulliparous women performed by a medical clinic site, including all cesarean and all vaginal deliveries
- All clinics part of a medical group in which the medical group has providers who perform C-sections



Total Knee Replacement

- Average post-operative status at one year
 - Function measured by the Oxford Knee Score tool
 - Quality of Life measured using specified health related quality of life tool
- Eligible Providers: Orthopedic Surgery
- Adult patients ages 18 and older undergoing a primary total or a revision total knee replacement during the required dates of procedure



Lumbar Spine Surgery

- Average postoperative status as measured by
 - Oswestry Disability Index (low back)
 - Specified health related quality of life tool
 - Visual analog pain scale
- Discectomy/Laminotomy population assessed at three months postop
- Lumbar spinal fusion population assessed at one year postop
- Eligible Providers: Orthopedic Surgery, Neurosurgery
- Adult patients ages 18 and older undergoing a lumbar discectomy/ laminotomy or a lumbar spinal fusion during the required dates of procedure



Pediatric Preventive Care: Adolescent Mental Health and/or Depression Screening

- Patient has a mental health and/or depression screening using specified assessment tools documented in medical record
- Eligible Providers: Family Medicine; General Practice; Internal Medicine; Pediatric/Adolescent Medicine
- Patients ages 12-17
- Clinics that provide well-child visit services



Pediatric Preventive Care: Obesity/BMI & Counseling

- Patient with a BMI percentile >85 has documentation of both physical activity and nutrition discussion, counseling or referral documented in the medical record
- Eligible Providers: Family Medicine; General Practice; Internal Medicine; Pediatric/Adolescent Medicine
- Patients ages 3-17
- Clinics that provide well-child visit services



Health Information Technology (HIT) Survey

- Web Survey
- Topics cover adoption of HIT, use of HIT, exchange of information, and on-line services
- Eligible Providers: All Specialties
- Collecting mid-February on current HIT status



Patient Experience of Care

- Survey Topics Cover:
 - Getting care when needed / access to care
 - Provider Communication
 - Helpfulness of office staff
 - Provider Rating
- Current CG-CAHPS Survey
- Eligible Providers: all specialties except Psychiatry
- All patients aged 18 and older with a face to face visit at the clinic during the timeframe
- Sample size calculation based on provider-scaling/clinic size according to CAHPS protocol
- Surveying on dates of service for: September 1, 2016 through November 30, 2016





Questions

For questions related to SQRMS, Patient Experience or HIT survey: Dina Wellbrock

wellbrock@mncm.org

For questions related to measure development:

Jasmine Larson

jlarson@mncm.org

General questions:

support@mncm.org

The Mission of MN Community Measurement is to accelerate the Improvement of health by publicly reporting health care information.