Quality Measurement Framework: Values and Principles

Values

The Minnesota Quality Framework fosters:

1. Fairness and equity
2. Connection and collaboration
3. Measurement that matters
4. Actionable information
5. Improvement
6. Accuracy and rigor
7. Innovation
8. Transparency and simplicity
9. Efficiency

Principles

1. Health is more than health care, and a measurement framework should recognize this by:
   a. Linking up with overarching concepts of quality (e.g., safety);
   b. Incorporating and appropriately accounting for provider, system, community, cultural, and patient factors that contribute to variation in quality measure results; and
   c. Exploring factors at the population/neighborhood level and across systems of care (e.g., ambulatory, long term, behavioral).

2. A measurement system should seek to measurably foster improvement in health outcomes, health care quality, health equity, patient experience, and population health, and reduction in costs for patients, providers, and purchasers.

3. Quality measurement should be patient-centered and produce information that is meaningful, fair, transparent, and actionable for different stakeholders (e.g., patients, providers, health plans) in different ways (e.g., decision-making, public reporting, internal improvement, value-based purchasing). Measures do not need to be used by all stakeholders for all purposes.

4. Quality measurement in Minnesota should be parsimonious, appropriately balance value for stakeholders with reporting burden, and not duplicate other efforts.

5. Minnesota must measure what is most important, not what is easiest. A measurement framework should provide “signal strength”—cohesiveness and alignment around what is important.

6. The quality framework should be regularly monitored and updated via an inclusive, transparent process to ensure it meets goals.
A QUALITY MEASUREMENT FRAMEWORK FOR MN: A CONCEPTUAL DRAFT (May 2018)

Goals: Improve health outcomes, health care quality, health equity, patient experience, population health, affordability

Values

Principles

Design & Implementation

Actionable for Patients, Payers and/or Providers, as well as other stakeholders

Measure

Evaluate

Evolve

Domains

Priorities

Criteria for selection

Subject of measurement

Measure selection

Define evaluation process

Track goal attainment

Regularly monitor and update system to ensure it meets goals

Establishes domains & goals for domains

Identifies measure areas, criteria, and targets
Measure selection

Parsimony
- Balance burden
- Avoid duplication

Qi objective
- Process
- Outcome
- Experience of patients and their care givers

Data source
- EHR
- HC claims
- Public health & population data

Reporting method
- Public/private
- Frequency
- Length of use
- Level (provider, etc.)

Drivers of variation
- Provider
- Community
- Culture
- Patient

Qi levers
- Value-based contracting
- Reporting
- Internal QI
- Patients' decision making

Considerations
- Risk adjustment, segmentation, peer grouping