

QUALITY MEASURES DEVELOPMENT OVERVIEW

Background:

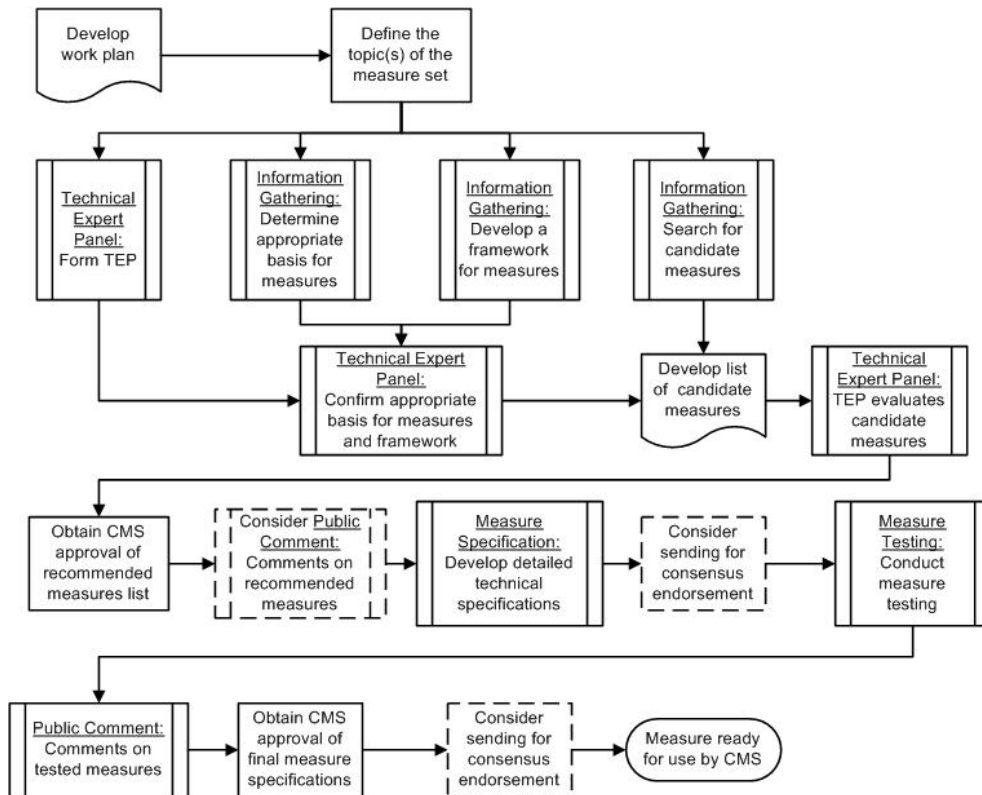
The Centers for Medicare & Medicaid Services (CMS) has developed a standardized approach for the development and maintenance of the quality measures it uses in its various quality initiatives and programs. Known as the Measures Management System, this system is composed of a set of business processes and decision criteria that CMS funded measure developers (or contractors) follow in the development, implementation, and maintenance of quality measures. Measures developed following the Measures Management System have been found to meet the high standards required by the National Quality Forum (NQF) for consensus endorsement. The Measures Management System was developed to help CMS manage an ever-increasing demand for quality measures to use in its various public reporting and quality programs as well as in value based purchasing initiatives.

The full Measures Management System set of business processes and decision criteria are documented or described in the Measures Management System Blueprint, Version 6 (“the Blueprint”), which will be available summer 2008.

Measure Development Summary Steps

The following is a summary of the steps in the Blueprint that CMS measure contractors follow when developing measures, as displayed in Figure 1. Complete details for each step will be provided in the Blueprint, Version 6 to be available summer 2008.

Figure 1: Overview of CMS Quality Measures Development Process



1. Develop a work plan. The work plan articulates the various steps or tasks to be completed and the assigned due dates and resources associated with each step or tasks in the measure development process.
2. Define the topic(s) of the measure set. The specific measurement topic(s) may be defined by CMS or the measure contractor may identify potential topics within the measurement area of interest by conducted various analyses to determine priority areas or gaps where quality measures are needed.
3. Convene a Technical Expert Panel (TEP). The TEP is composed of individuals with expertise in various topics that provide input/assistance to the measure contractor during the measure development process.
4. Information Gathering: Determine the appropriate basis for potential measures. Based on the material gathered during this step, including the review of clinical practice guidelines and input from the TEP, the measure contractor determines the appropriate basis for potential measures. The appropriate basis will vary by type of measure.
5. Information Gathering: Develop a framework for potential measures. Based on the material gathered in this step and step 4, the measure contractor develops a framework for the potential measures. The framework should be based on a typology of measures, with an indication of the types of measures already developed and used extensively. The goal of the framework is to identify gaps in measurement or identify gaps in the type of measures that are not currently in use.
6. Information Gathering: Search for candidate measures. The search for candidate measures includes a search for: relevant clinical guidelines from which potential measures can be developed; existing measures that can be adopted (used without change) or adapted (used after some changes have been made); related measures that can serve as models for new measures; studies that can be used as the evidence for new measures. The candidate measures should correspond to the draft framework developed in step 5.
7. Compile a list of candidate measures. Candidate measures identified in step 6 are documented using high-level statements that include tentative description of the proposed denominator and numerator for the measures.
8. TEP evaluates the candidate measures. A meeting with the TEP is convened to review and to provide input on the candidate measures proposed by the measure contractor and to discuss any other potential measures that a TEP member may recommend. A measure evaluation criteria worksheet is prepared on each candidate measure that documents various aspects of the candidate measure. At this stage in the measure development process, the measure contractor will prepare a proposed list of candidate measures to submit to CMS for approval prior to developing measure specifications and testing the measures.

9. CMS reviews/approves the recommended list of candidate measures proposed by the measures contractor. At this step CMS reviews the candidate measures and determines which measures should go forward for completion. CMS may ask the measures contractor to solicit public comment on the candidate measures prior to approving the measures. If public comment is solicited at this stage, the measure contractor shall review/revise the candidate measures based on the public input, present the revisions to the TEP for feedback and resubmit the revised candidate measures to CMS.
10. CMS approves recommended list of candidate measures, modified based on public comments. CMS determines which candidate measures will go forward for completion.
11. Develop detailed technical specifications. The measures contractor develops the technical specifications for data collection and calculation of the proposed measures.
12. CMS approves detailed specifications. At this step CMS reviews and approves the detailed specifications of the proposed measures. At this stage, CMS may request that the measure(s) be submitted for consensus endorsement prior to being tested. This may occur if CMS plans to use the propose measures in one of its quality programs before the testing of the measure(s) can be fully completed. A time-limited endorsement may be provided for two year.
13. Measure testing is conducted. At this step, the measures are tested to determine feasibility and reliability.
14. Solicit public comment on the measures. Public input is solicited on the tested measures to receive comments primarily on the measure's feasibility and usability. If the public comments indicate a need to refine the measure(s), the measure contractor will review the comments with the TEP and revise the measure(s) as needed.
15. CMS approves the measures and submits the measures for consensus endorsement.