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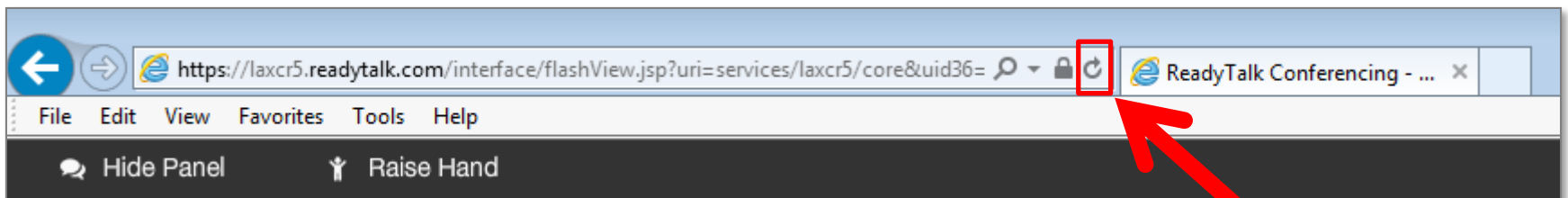


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-or-
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F5 Key
Top Row of Keyboard

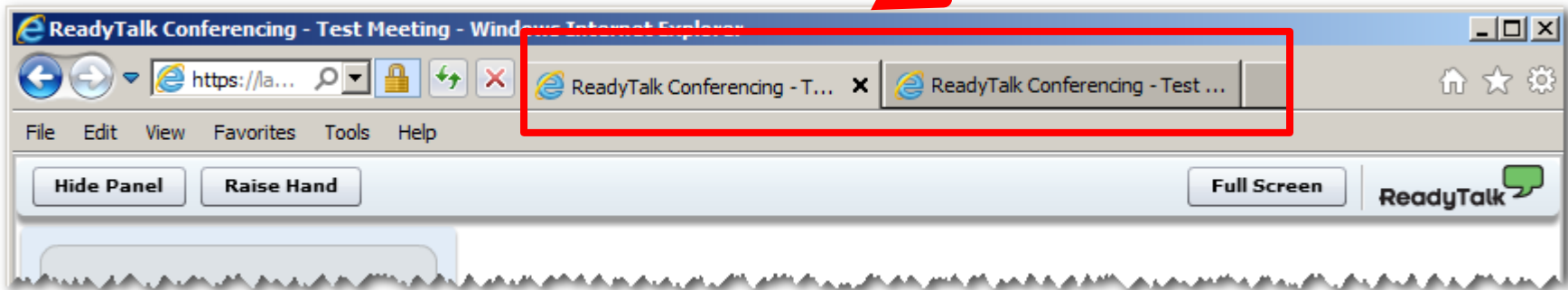


Location of Buttons

Refresh

Troubleshooting Echo

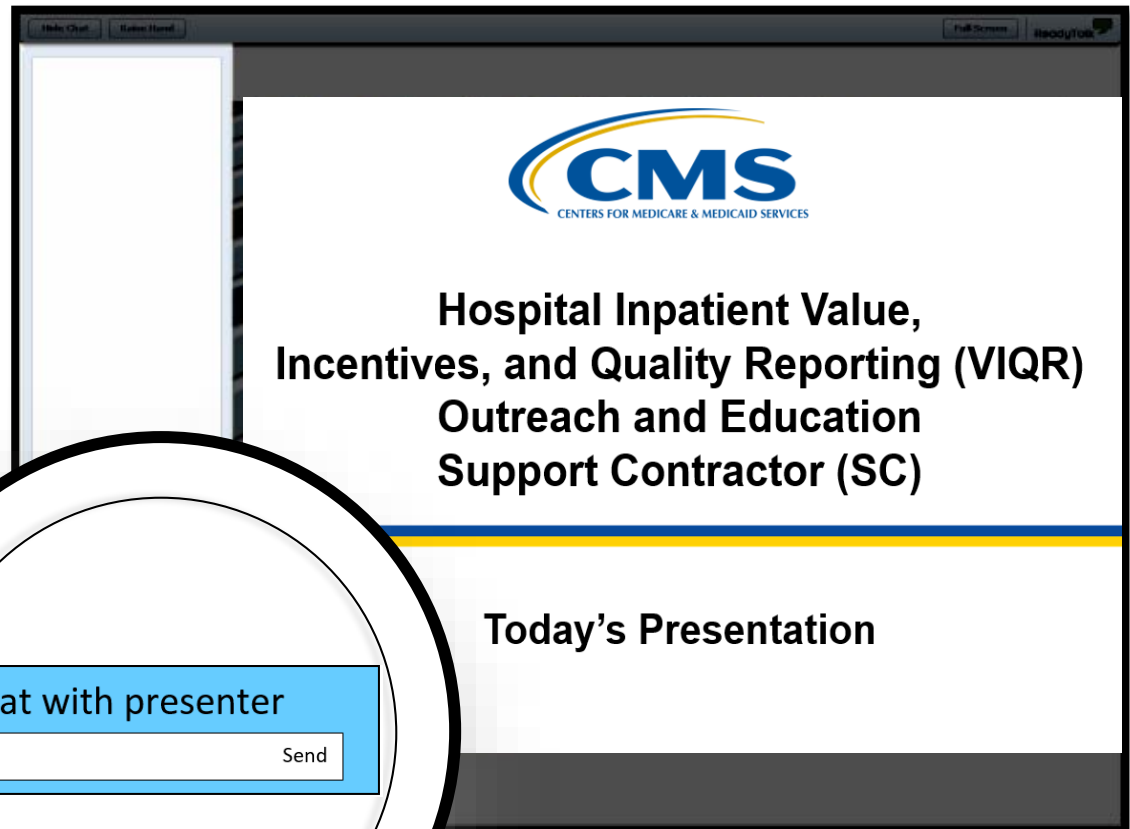
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PCHQR Program Perspective: An Examination of the CMS Meaningful Measures Initiative

March 28, 2019

Speakers

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Program Lead

PPS-Exempt Cancer Hospital Quality Reporting (PCHQR) Program
Quality Measurement and Value-Based Incentives Group
Center for Clinical Standards and Quality
Centers for Medicare & Medicaid Services (CMS)

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PCHQR Program Lead

Hospital Inpatient Value, Incentives, and Quality Reporting (VIQR)
Outreach and Education Support Contractor (SC)

Acronyms and Abbreviations

CAUTI	Catheter-Associated Urinary Tract Infection	HCP	Healthcare Personnel
CDC	Centers for Disease Control and Prevention	HQR	Hospital Quality Reporting
CDI	<i>Clostridium difficile</i> Infection	HSAG	Health Services Advisory Group
CE	Continuing Education	ICU	Intensive Care Unit
CLABSI	Central Line-Associated Bloodstream Infection	IPPS	Inpatient Prospective Payment System
CMS	Centers for Medicare & Medicaid Services	IQR	Inpatient Quality Reporting
CQM	clinical quality measure	LTCH	Long-Term Care Hospital
CST	Cancer-Specific Treatment	MRSA	Methicillin-Resistant <i>Staphylococcus aureus</i>
ED	Emergency Department	NHSN	National Healthcare Safety Network
EOL	End-of-Life	NQF	National Quality Forum
FAQ	frequently asked question	PCH	PPS-Exempt Cancer Hospital
FY	fiscal year	PCHQR	PPS-Exempt Cancer Hospital Quality Reporting
HAI	Healthcare-Associated Infection	PPS	Prospective Payment System
HCAHPS®	Hospital Consumer Assessment of Healthcare Providers And Systems	Q	Quarter
		SC	Support Contractor
		SSI	Surgical Site Infection
		VIQR	Value, Incentives, and Quality Reporting

Purpose

This presentation will provide an overview of the CMS Meaningful Measures Initiative and explore how the initiative relates to the PCHQR Program.

Objectives

Upon completion of this event, PCHQR Program participants will be able to:

- Understand the purpose and goals of the Meaningful Measures Initiative.
- Align PCHQR Program measures with Meaningful Measures Initiative Areas and National Quality Priorities.
- Locate resources related to the Meaningful Measures Initiative.

PCHQR Program Perspective:
An Examination of the CMS Meaningful Measures Initiative

Meaningful Measures Initiative

Purpose of the Meaningful Measures Initiative

- The purpose of the Meaningful Measures Initiative is to:
 - Improve outcomes for patients.
 - Reduce the data reporting burden and costs on clinicians and other healthcare providers.
 - Focus CMS quality measurement and improvement efforts to better align with items meaningful to patients.
- This initiative was launched in 2017.

Purpose of Patients Over Paperwork Initiative

Primary Goal:

Remove obstacles that get in the way of the time clinicians spend with their patients

- Shows CMS commitment to patient-centered care and improving beneficiary outcomes
- Includes several major tasks aimed at reducing burden for clinicians
- Motivates CMS to evaluate its regulations to find improvements

CMS Strategic Goals: Putting Patients First

- Empower patients and doctors to make decisions about their healthcare
- Usher in a new era of state flexibility and local leadership
- Support innovative approaches to improve quality, accessibility, and affordability
- Improve the CMS customer experience

Meaningful Measures Framework

The Meaningful Measures Framework is a strategic tool for putting **patients over paperwork** by reducing measure-reporting burdens in alignment with the national healthcare priorities.

Meaningful Measures Framework



- Promote Effective Communication & Coordination of Care**
Meaningful Measure Areas:

 - Medication Management
 - Admissions and Readmissions to Hospitals
 - Transfer of Health Information and Interoperability
- Promote Effective Prevention & Treatment of Chronic Disease**
Meaningful Measure Areas:

 - Preventive Care
 - Management of Chronic Conditions
 - Prevention, Treatment, and Management of Mental Health
 - Prevention and Treatment of Opioid and Substance Use Disorders
 - Risk Adjusted Mortality
- Work with Communities to Promote Best Practices of Healthy Living**
Meaningful Measure Areas:

 - Equity of Care
 - Community Engagement
- Make Care Affordable**
Meaningful Measure Areas:

 - Appropriate Use of Healthcare
 - Patient-focused Episode of Care
 - Risk Adjusted Total Cost of Care
- Make Care Safer by Reducing Harm Caused in the Delivery of Care**
Meaningful Measure Areas:

 - Healthcare-associated Infections
 - Preventable Healthcare Harm
- Strengthen Person & Family Engagement as Partners in their Care**
Meaningful Measure Areas:

 - Care is Personalized and Aligned with Patient's Goals
 - End of Life Care according to Preferences
 - Patient's Experience of Care
 - Patient Reported Functional Outcomes

Meaningful Measures Areas

There are 19 Meaningful Measures Areas and six quality priorities. The areas:

- Illustrate how the overarching quality priorities are being operationalized.
- Act as the connectors between CMS Strategic Goals and individual measures that demonstrate how high quality outcomes for CMS beneficiaries are being achieved.

Meaningful Measures Areas and National Quality Priorities

National Quality Priority	Meaningful Measures Area
Make Care Safer by Reducing Harm Caused in the Delivery of Care	Healthcare-Associated Infections
	Preventable Healthcare Harm
Strengthen Person and Family Engagement as Partners in their Care	Care is Personalized and Aligned with Patient's Goals
	End of Life Care According to Preferences
	Patient's Experience of Care
	Patient Reported Functional Outcomes
Promote Effective Communication and Coordination of Care	Medication Management
	Admissions and Readmissions to Hospitals
	Transfer of Health Information and Interoperability

Meaningful Measures Areas and National Quality Priorities (Cont.)

National Quality Priority	Meaningful Measures Area
Promote Effective Prevention and Treatment of Chronic Disease	Preventive Care
	Management of Chronic Conditions
	Prevention, Treatment, and Management of Mental Health
	Prevention and Treatment of Opioid and Substance Use Disorders
	Risk Adjusted Mortality
Work with Communities to Promote Best Practices of Health Living	Equity of Care
	Community Engagement
Make Care Affordable	Appropriate Use of Healthcare
	Patient-focused Episode of Care
	Risk Adjusted Total Cost of Care

Meaningful Measures Areas: Impacts

- Meaningful Measures Areas are intended to increase measure alignment across CMS programs and other public and private initiatives.
- They point to high priority areas where gaps in available quality measures may exist.
- The areas help guide CMS efforts to develop and implement quality measures to fill those gaps.
- Resource:
 - [Meaningful Measures Areas Defined](#)

Meaningful Measures: Objectives

Primary Goal:

To focus everyone's efforts on the same quality areas and lend specificity, which can help identify measures that:

- Address high-impact measure areas that safeguard public health.
- Are patient-centered and meaningful to patients, clinicians, and providers.
- Are outcome-based, where possible.
- Fulfill requirements in programs' statutes.
- Minimize level of burden for providers.
- Identify significant opportunity for improvement.
- Address measure needs for population-based payment through alternative payment models.
- Align across programs and/or with other payers.

Meaningful Measures: Progress to Date

In the Fiscal Year (FY) 2019 Inpatient Prospective Payment System (IPPS)/Long-Term Care Hospital Prospective Payment System (LTCH/PPS) Proposed Rule, CMS proposed:

- Eliminating **a total of 19 measures** that acute care hospitals are currently required to report across the five hospital quality and value-based purchasing programs.
 - This decreases duplication for an additional 21 measures.
- Removing **eight of the 16 clinical quality measures (CQMs)** to produce a smaller set of more meaningful measures, in alignment with the Hospital Inpatient Quality Reporting (IQR) Program, beginning with the FY 2020 reporting period.
- Removing certain measures that do not emphasize interoperability and the electronic exchange of health information.
- Adding new measures related to e-prescribing of opioids.

Meaningful Measures: Future Direction

- Engage with key stakeholders to help move towards achieving high value outcomes in our CMS programs.
- Improve support to providers who invest in practice innovation, care re-design, and coordination through new and revised alternative payment models.
- Advance options for feedback and data analysis, while improving data collection and submission systems through technology and enhancing population health management initiatives.

PCHQR Program Perspective:
An Examination of the CMS Meaningful Measures Initiative

Meaningful Measures Initiative and the PCHQR Program

PCHQR Program Measure Set

Under the Meaningful Measures Initiative, CMS focused their efforts to ensure that the PCHQR Program Measure Set continues to promote improved health outcomes for beneficiaries while minimizing:

- The reporting burden associated with submitting/reporting quality measures.
- The burden associated with complying with other programmatic requirements.
- The burden associated with compliance with other federal and/or state regulations (if applicable).

PCHQR Program Measures Crosswalk

Meaningful Measures Area	National Quality Priority	PCHQR Program Measure
Healthcare-Associated Infections	Make Care Safer by Reducing Harm Caused in the Delivery of Care	<ul style="list-style-type: none"> • CLABSI (NQF #0139) (PCH-4) • CAUTI (NQF #0138) (PCH-5) • SSI (NQF #0753) (PCH-6 and PCH-7) • CDI (NQF #1717) (PCH-26) • MRSA (NQF #1716) (PCH-27)
Preventive Care	Promote Effective Communication and Coordination of Care	Influenza Vaccination Coverage Among Healthcare Personnel (HCP) (NQF #0431) (PCH-28)
End-Of-Life Care According to Preferences	Strengthen Person and Family Engagement as Partners in Their Care	<ul style="list-style-type: none"> • EOL-Chemo (NQF #0210) (PCH-32) • EOL-ICU (NQF #0213) (PCH-33) • EOL-Hospice (NQF #0215) (PCH-34) • EOL-3DH (NQF #0216) (PCH-35)

PCHQR Program

Measures Crosswalk (Cont.)

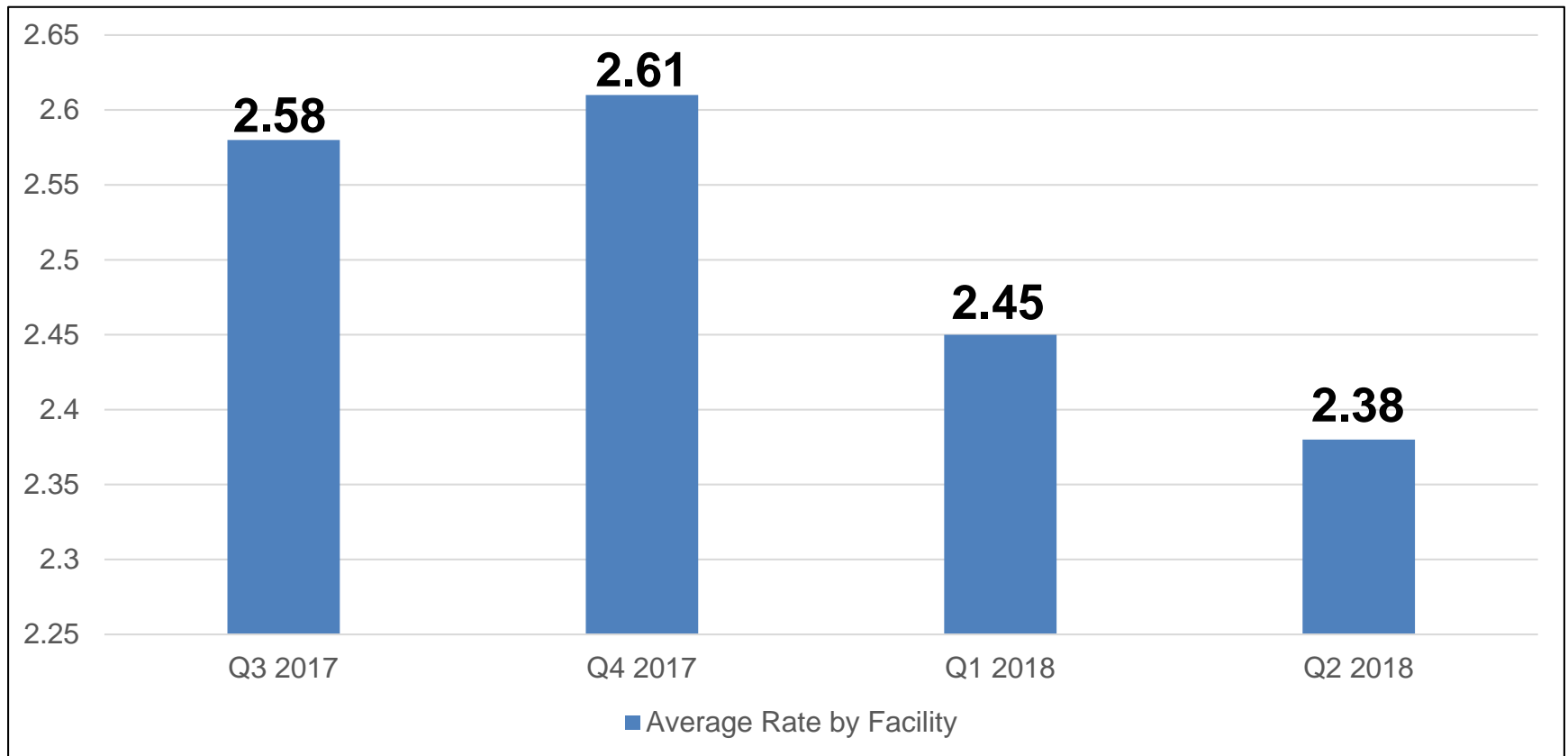
Meaningful Measures Area	National Quality Priority	PCHQR Program Measure
Patient's Experience of Care	Strengthen Person and Family Engagement as Partners in Their Care	Hospital Consumer Assessment of Health Care Providers and Systems Survey (HCAHPS) (NQF #0166) (PCH-29)
Admissions and Readmissions to Hospitals	Promote Effective Communication and Coordination of Care	<ul style="list-style-type: none"> • Admissions and ED Visits for Patients Receiving Outpatient Chemotherapy (PCH-30 and PCH-31) • 30-Day Unplanned Readmissions for Cancer Patients (NQF #3188)
Management of Chronic Conditions	Promote Effective Prevention and Treatment of Chronic Disease	Oncology: Plan of Care for Pain – Medical Oncology and Radiation Oncology (NQF #0383) (PCH-15)

Healthcare-Associated Infections

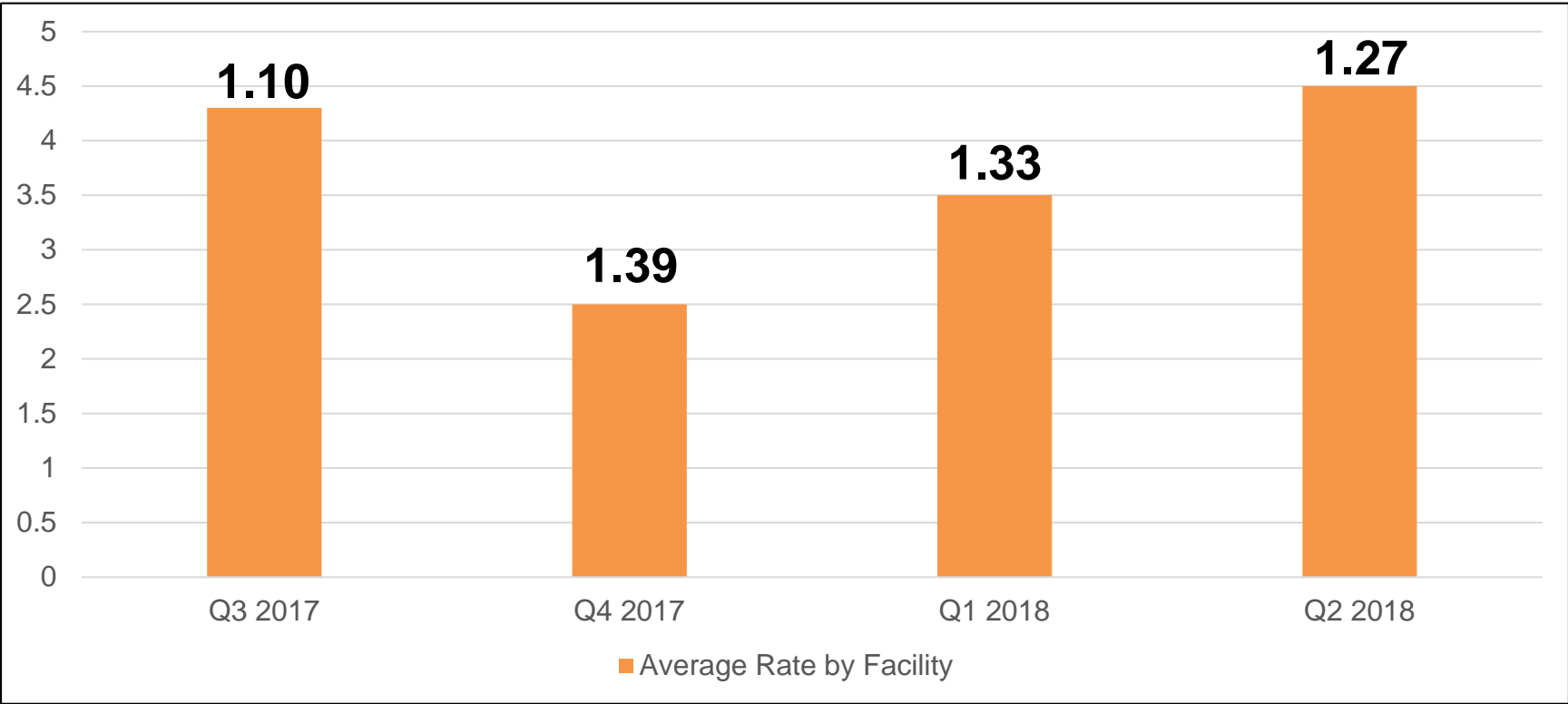
- **National Quality Priority:** Making Care Safer by Reducing Harm Caused in the Delivery of Care
- Statistics:
 - An estimated 1.5 million new cases of cancer were diagnosed in the U.S. in 2010.
 - Despite advances in oncology care, infections remain a major cause of morbidity and mortality among cancer patients.
 - Each year, 60,000 cancer patients are hospitalized for chemotherapy-induced neutropenia and infections, and one patient dies every two hours from this complication.

“Preventing Infections in Cancer Patients” Centers for Disease Control and Prevention <https://www.cdc.gov/cancer/preventinfections/index.htm>

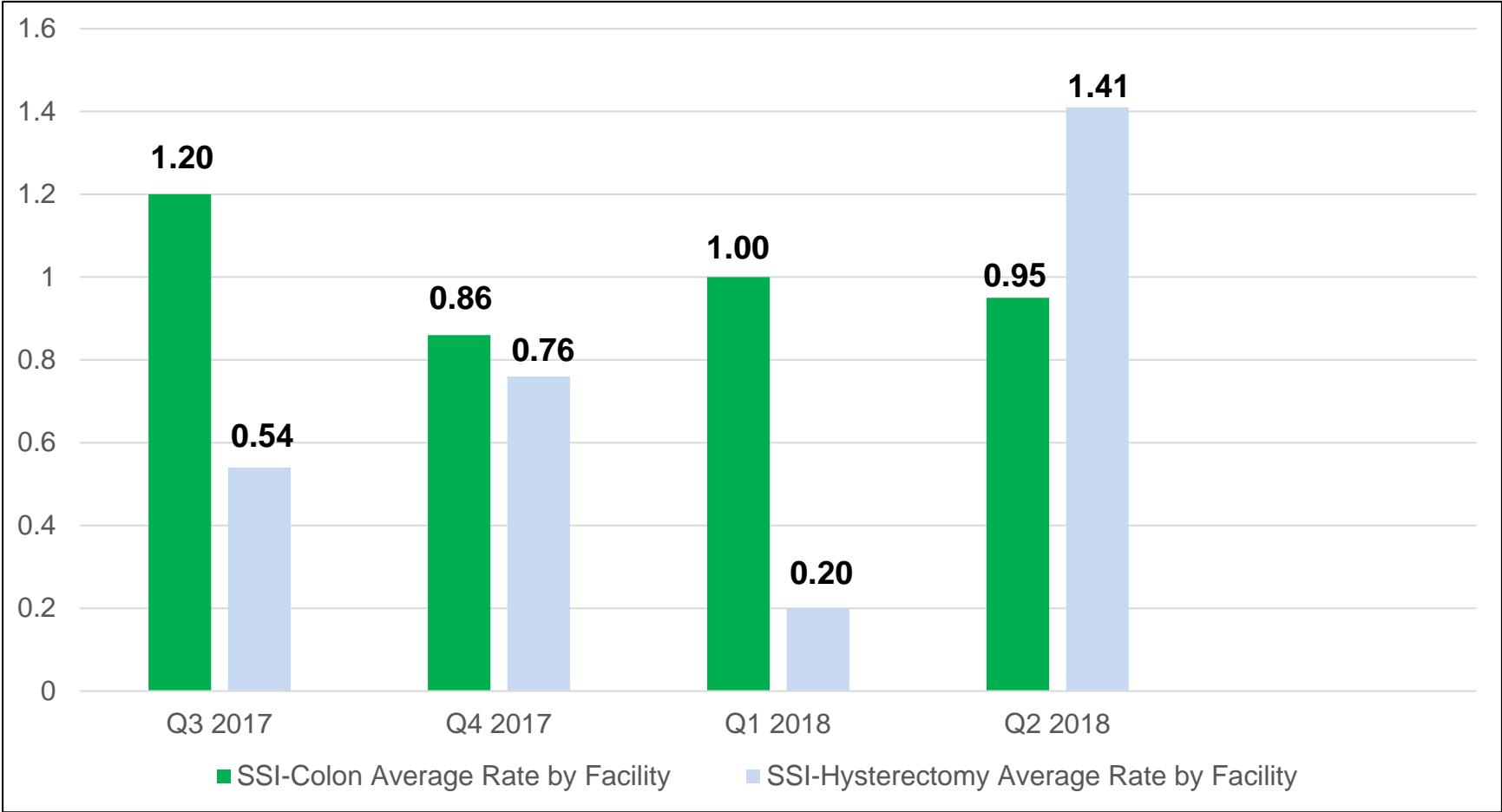
CLABSI



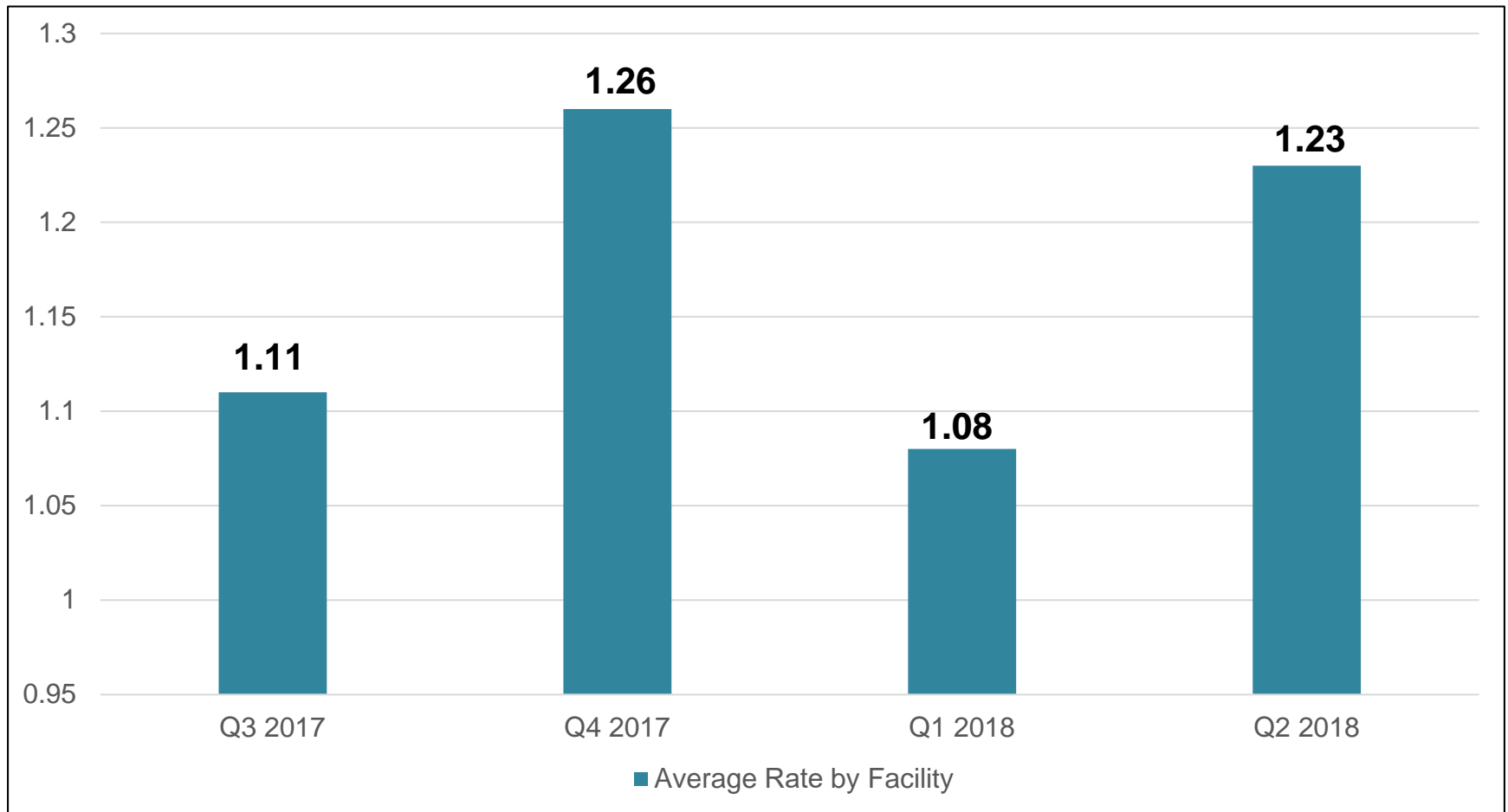
CAUTI



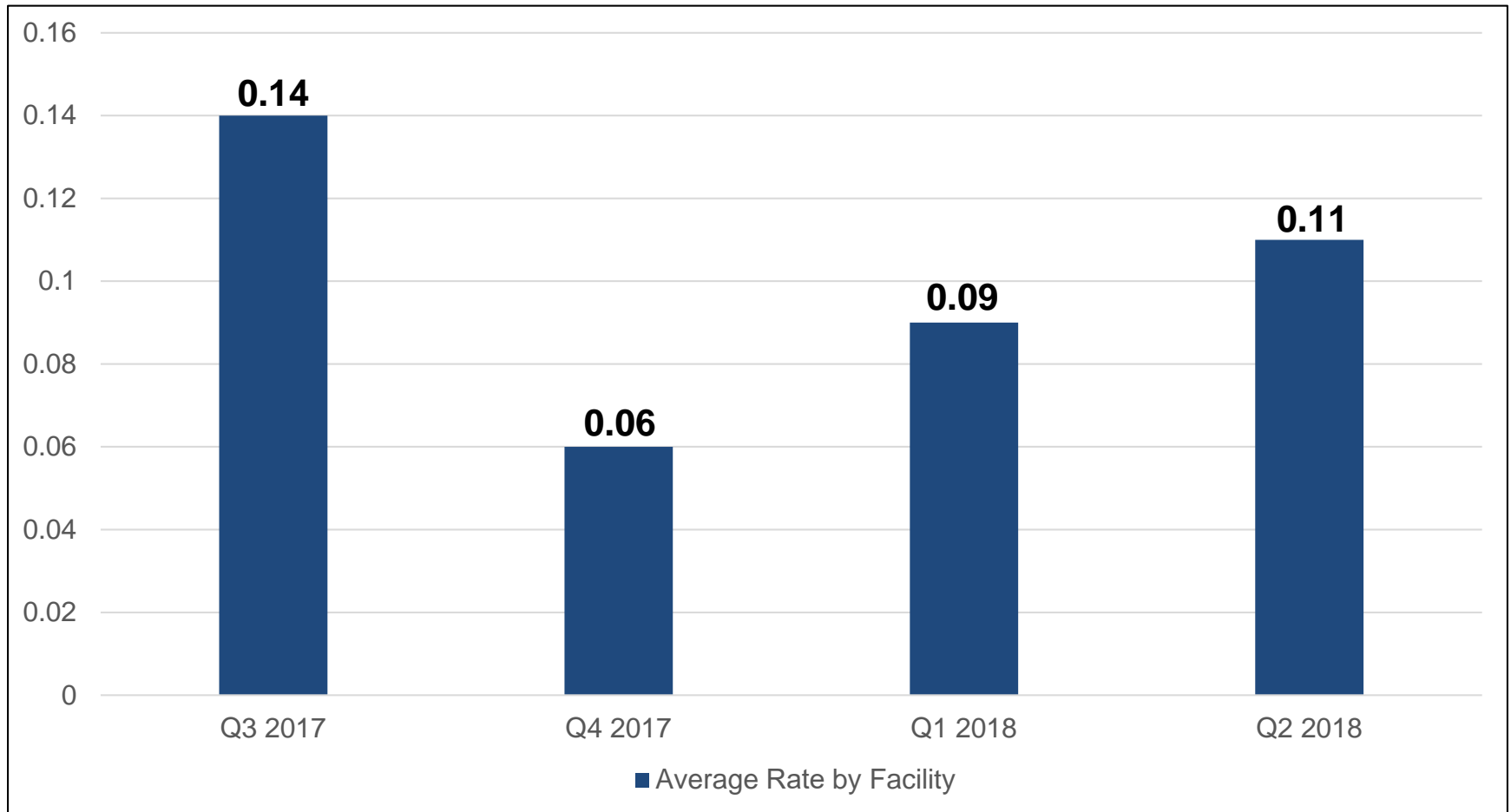
SSI-Colon and Hysterectomy



CDI



MRSA



End-of-Life Care

- **National Quality Priority:** Strengthen Person and Family Engagement as Partners in Their Care
- **PCHQR Program EOL measures**
 - Proportion of Patients Who Died from Cancer Receiving Chemotherapy in the last 14 Days of Life (EOL-Chemo) (NQF #0210) (PCH-32)
 - Proportion of Patients Who Died from Cancer Admitted to the ICU in the Last 30 Days of Life (EOL-ICU) (NQF #0213) (PCH-33)
 - Proportion of Patients Who Died from Cancer Not Admitted to Hospice (EOL-Hospice) (NQF #0215) (PCH-34)
 - Proportion of Patients Who Died From Cancer Admitted to Hospice for Less Than Three Days (EOL-3DH) (NQF #0216) (PCH-35)

EOL-Chemo

(NQF #0210) (PCH-32)

- Quality of life for both patients and families is negatively affected when patients receive unnecessary or ineffective treatment near the end of life.
- Studies link receipt of chemotherapy near the end of life to toxicity and lower quality of life without any benefit.

National Quality Forum, Technical Report. Palliative and End-of-Life Care 2015-2016 (December 23, 2016)

EOL-ICU

(NQF #0213) (PCH-33)

- Admission to the intensive care unit (ICU), particularly if a patient dies in the ICU, often causes both physical and emotional distress for the patient and family and worsens the death experience.
- Evidence links reduced ICU visits to desired outcomes, including adherence to patient and family preference to avoid the ICU.
- Evidence also supports the beneficial effect of palliative care on place of death and reduced symptom burden.

National Quality Forum, Technical Report. Palliative and End-of-Life Care 2015-2016 (December 23, 2016)

EOL-Hospice (NQF #0215) (PCH-34)

- Hospice care is considered high-quality care by both patients and their families.
- Studies link hospice admission to higher family-reported quality of end-of-life care, alleviation of anxiety and depression, and death in the decedent's preferred location.

National Quality Forum, Technical Report. Palliative and End-of-Life Care 2015-2016 (December 23, 2016)

EOL-3DH

(NQF #0216) (PCH-35)

- Patients with very short hospice stays do not gain the maximum benefit from the services that are available through hospice.
- Studies link hospice admission to higher family-reported quality of end-of-life care, alleviation of anxiety and depression, and death in the decedent's preferred location.
- Very short hospice stays remain a concern.

National Quality Forum, Technical Report. Palliative and End-of-Life Care 2015-2016 (December 23, 2016)

PCHQR Program Perspective:
An Examination of the CMS Meaningful Measures Initiative

Resources

Need More Information...

- Email feedback to:
MeaningfulMeasuresQA@cms.hhs.gov
- Visit [CMS.gov](https://www.cms.gov)
 - Quality Initiatives – General Information >
[Meaningful Measures Framework](#)
 - [Meaningful Measures Hub](#)
 - [Tools and FAQs](#)
 - Home > [Patients Over Paperwork](#)

CMS.gov Homepage

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Centers for Medicare & Medicaid Services

type search term here

Medicare **Medicaid/CHIP** **Medicare-Medicaid Coordination** **Private Insurance** **Innovation Center** **Regulations & Guidance** **Research, Statistics, Data & Systems** **Outreach & Education**




Patients Over Paperwork Reducing Opioid Misuse New Medicare cards

Meaningful Measures Website

The screenshot shows the CMS.gov website with the following elements:

- Header:** CMS.gov logo, "Centers for Medicare & Medicaid Services", navigation links (Home, About CMS, Newsroom, Archive, Share, Help, Print), and a search bar.
- Navigation Menu:** Medicare, Medicaid/CHIP, Medicare-Medicaid Coordination, Private Insurance, Innovation Center, Regulations & Guidance, Research, Statistics, Data & Systems, Outreach & Education.
- Breadcrumbs:** Quality Initiatives - General Information > Meaningful Measures Framework.
- Main Content:**
 - Section Header:** Meaningful Measures Framework
 - Text:** CMS's new comprehensive initiative "Meaningful Measures" was launched in 2017 and identifies high priority areas for quality measurement and improvement. Its purpose is to improve outcomes for patients, their families and providers while also reducing burden on clinicians and providers.
 - Image:** A photograph of a healthcare provider examining a patient's neck.
- Learn More Section:**
 - Meaningful Measures Hub
 - Shareable Tools
 - Legacy Quality Strategy
 - Webinars
 - Contact Us
- Featured video Section:**
 - Section Header:** Featured video
 - Text:** **It is recommended to view the video below with Flash disabled in Chrome, Firefox, or Internet Explorer 11 browsers, due to known usability issues with other browsers.
 - Video Player:** A video player for "Patients Over Paperwork" with a CMS logo and a red play button.

Meaningful Measures Hub

Home | About CMS | Newsroom | Archive |  Share  Help  Print

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type search term here

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[Quality Initiatives - General Information](#) > [Meaningful Measures Hub](#)

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Meaningful Measures Hub

Quick Content

- [1. General Info](#)
- [2. Measurement Areas](#)
- [3. Breaking it Down](#)
- [4. Measure Areas Defined](#)
- [5. Stakeholder Impact](#)


Patients Over Paperwork

Home > Patients Over Paperwork

Patients Over Paperwork

We're putting patients first by reviewing and streamlining our regulations so we can:

- Reduce unnecessary burden
- Increase efficiencies
- Improve the beneficiary experience



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- [Health plans](#)
- [States](#)

Learn how we're putting patients over paperwork

- [Reducing burden through coding and documentation reform](#)
- [Talking about E&M code reforms](#)
- [Reforming E&M codes](#)

Featured video

**It is recommended to view the video below with Flash disabled in Chrome, Firefox, or Internet Explorer 11 browsers, due to known usability issues with other browsers.



PCHQR Program Perspective:
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Key Program Dates and Reminders

Important Upcoming Dates

- **Tentative Save the Date – Webinars**
 - April 25, 2019
- **Upcoming Hospital Quality Reporting (HQR) Data Submissions**
 - April 3, 2019
 - Q4 2018 HCAHPS Survey data
 - May 15, 2019
 - Q4 2018 HAI data
 - ❖ CLABSI, CAUTI, SSI, CDI, and MRSA
 - Q4 2018 through Q1 2019 HCP data

California Wildfires Extraordinary Circumstances Exception

Applicable Reporting Requirements

- Chart-abstracted and National Healthcare Safety Network (NHSN) HAI data
 - November 2018 and February 2019 submission deadlines for reporting periods
 - July 1, 2017–September 30, 2017 (Q3 2017) – Adjuvant Hormonal Therapy
 - October 1, 2017–December 31, 2017 (Q4 2017) – Adjuvant Hormonal Therapy
 - April 1, 2018–June 30, 2018 (Q2 2018) – CLABSI, CAUTI, SSI, CDI, and MRSA
 - July 1, 2018–September 30, 2018 (Q3 2018) – CLABSI, CAUTI, SSI, CDI, and MRSA
- HCAHPS Survey data
 - January 2019 HCAHPS submission deadline for reporting period
 - July 1, 2018–September 30, 2018 (Q3 2018)
- HCP measure data
 - May 15, 2019 submission deadline for the 2018–2019 flu season
 - October 1, 2018–March 31, 2019 (Q4 2018–Q1 2019)

For More Information

- *QualityNet* PCHQR Program [ListServe](#) dated January 11, 2019
- Federal Emergency Management Agency (FEMA) – [DR-4407](#)

Hospital Compare Key Dates

- April 2019 contains:
 - Q1 2017 through Q4 2017 CST colon and breast data
 - Q3 2016 through Q2 2017 CST hormone data
 - Q3 2017 through Q2 2018 HCAHPS Survey data
- July 2019 contains:
 - Q4 2016 through Q3 2017 Cancer-Specific Treatment (CST) hormone data
 - Q4 2017 through Q3 2018 HCAHPS data

Accessing the *QualityNet* Questions and Answers Tool

[QualityNet Questions and Answers Tool](#)

The screenshot displays the QualityNet website interface. At the top, there is a navigation bar with the QualityNet logo, a search box, and a 'Log In' button. Below this is a secondary navigation bar with tabs for 'Home', 'My QualityNet', and 'Help'. A third navigation bar contains dropdown menus for various facility types: 'Hospitals - Inpatient', 'Hospitals - Outpatient', 'Physician Offices', 'Ambulatory Surgical Centers', 'PPS-Exempt Cancer Hospitals', 'ESRD Facilities', 'Inpatient Psychiatric Facilities', and 'Quality Improvement'. The main content area is divided into several sections:

- QualityNet Registration:** A list of facility types including Hospitals - Inpatient, Hospitals - Outpatient, Physician Offices, ASCs, Cancer Hospitals, ESRD Facilities, Inpatient Psychiatric Facilities, and QIOs.
- Getting Started with QualityNet:** A list of resources including Registration, Sign-In Instructions, Security Statement, Password Rules, and QualityNet System Security Policy, PDF.
- Join ListServes:** A section for signing up for notifications and discussions.
- QualityNet News:** A section featuring a news article titled 'CMS releases December 2017 Hospital Compare preview reports'. The article text states: 'The Centers for Medicare & Medicaid Services (CMS) is making the December 2017 Hospital Compare preview reports available on QualityNet on October 2, 2017. The preview reports are for hospitals and facilities participating in the Inpatient Quality Reporting (IQR), Outpatient Quality Reporting (OQR), Inpatient Psychiatric Facility Quality Reporting (IPFQR) and PPS-Exempt Cancer Hospital Quality Reporting (PCHQR) Programs. The Hospital Compare preview reports will be available from **October 2 through October 31**. Hospitals are encouraged to access and download reports early in the preview period in order to have time for a thorough review. The preview reports are only available during the preview period.' Below the article is a 'Full Article >>' link and a 'Headlines' section with several links related to CMS grants and program updates.
- Log in to QualityNet Secure Portal:** A section with a 'Login' button and a list of resources: 'Download Symantec ID (required for login)', 'Portal Resources', and 'Secure File Transfer Resources'.
- Questions & Answers:** A section with a list of facility types: 'Hospitals - Inpatient', 'Hospitals - Outpatient', 'Ambulatory Surgical Centers', 'Inpatient Psychiatric Facilities', and 'PPS-Exempt Cancer Hospitals'. The 'PPS-Exempt Cancer Hospitals' link is highlighted with a red box.
- Note:** A note stating 'First-time registration required'.
- Downloads:** A section for downloading resources.

PCHQR Program Perspective:
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Continuing Education

CE Approval

This program has been approved for Continuing Education (CE) credit for the following boards:

National credit

- Board of Registered Nursing (Provider #16578)

Florida-only credit

- Board of Clinical Social Work, Marriage & Family Therapy and Mental Health Counseling
- Board of Registered Nursing
- Board of Nursing Home Administrators
- Board of Dietetics and Nutrition Practice Council
- Board of Pharmacy

NOTE: To verify CE approval for any other state, license, or certification, please check with your licensing or certification board.

CE Credit Process: Three Steps

1. Complete the ReadyTalk[®] survey that will pop up after the webinar.
2. Register on the HSAG Learning Management Center for the certificate.
3. Print out your certificate.



NOTE: An additional survey will be sent to all registrants within the next 48 hours.

CE Credit Process: Survey

No

Please provide any additional comments

10. What is your overall level of satisfaction with this presentation?

Very satisfied

Somewhat satisfied

Neutral

Somewhat dissatisfied

Very dissatisfied

If you answered "very dissatisfied", please explain

11. What topics would be of interest to you for future presentations?

12. If you have questions or concerns, please feel free to leave your name and phone number or email address and we will contact you.

Done

Powered by [SurveyMonkey](#)
Check out our [sample surveys](#) and create your own now!

CE Credit Process: Certificate

Thank you for completing our survey!

Please click on one of the links below to obtain your certificate for your state licensure.

You must be registered with the learning management site.

New User Link:

<https://lmc.hshapps.com/register/default.aspx?ID=da0a12bc-db39-408f-b429-d6f6b9ccb1ae>

Existing User Link:

<https://lmc.hshapps.com/test/adduser.aspx?ID=da0a12bc-db39-408f-b429-d6f6b9ccb1ae>

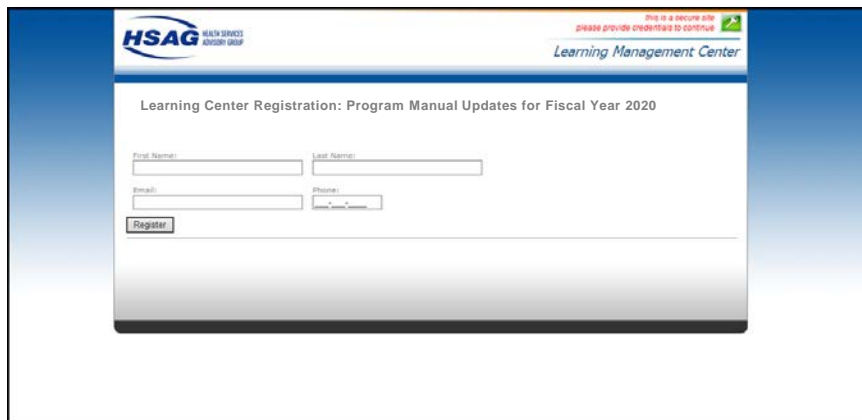
Note: If you click the 'Done' button below, you will not have the opportunity to receive your certificate without participating in a longer survey.

Done

Register for Credit

New User

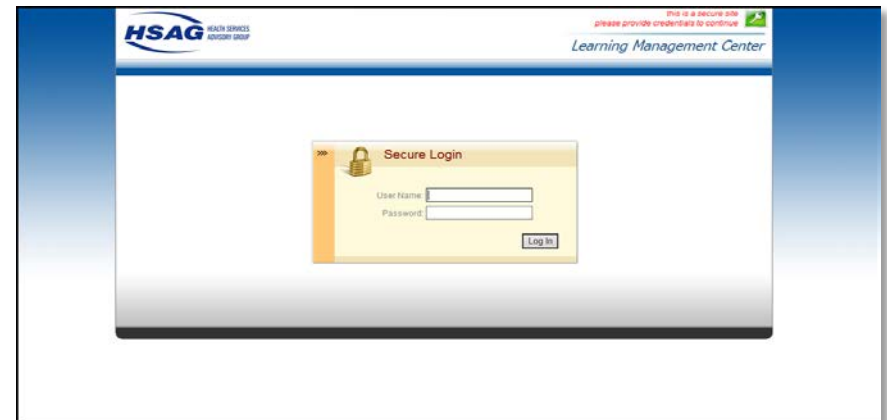
Use personal email and phone.
Go to email address and
finish process.



The screenshot shows the 'Learning Management Center' registration page. At the top, there is a blue header with the HSAG logo and the text 'HSAG HEALTH SERVICES DIVISION GROUP'. Below the header, the page title is 'Learning Center Registration: Program Manual Updates for Fiscal Year 2020'. The registration form includes fields for 'First Name', 'Last Name', 'Email', and 'Phone', along with a 'Register' button. A security warning at the top right reads 'This is a secure site please provide credentials to continue'.

Existing User

Entire email is your user name.
You can reset your password.



The screenshot shows the 'Secure Login' page. At the top, there is a blue header with the HSAG logo and the text 'HSAG HEALTH SERVICES DIVISION GROUP'. Below the header, the page title is 'Learning Management Center'. The login form includes fields for 'User Name' and 'Password', along with a 'Log In' button. A security warning at the top right reads 'This is a secure site please provide credentials to continue'.

PCHQR Program Perspective:
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Closing Remarks

Disclaimer

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