The Buying Value Measure Selection Tool

Strategies for Selecting Measures and Developing Aligned Measure Sets
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The Robert Wood Johnson Foundation’s State Health and Value Strategies Program

- Supports state efforts to **enhance the quality and value** of health care by improving population health and reforming health care delivery

- **Works directly with states**—including Medicaid agencies, governors’ offices, and more—to promote peer-to-peer learning

- **Connects states with technical assistance experts** to develop tools for new quality improvement and cost management initiatives

- **Collaborates with other funders and stakeholders** to produce issue briefs and host convenings, focusing on best practices for states
Webinar Presenters: Bailit Health

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Dedicated to working with public agencies and private purchasers to improve health care system performance.

http://www.bailit-health.com/

Support for this project provided through a grant from the Robert Wood Johnson Foundation’s State Health and Value Strategies program.
Logistics

- This webinar is being recorded.
  - The recording and slides will be available following the webinar.

- Telephone lines will be open to allow for questions.
  - Please mute your line. Please do not put your line on hold.

- Questions can be submitted electronically at any time.
Asking Questions Electronically

- Right click on the Chat button in the top right of the WebEx program.

- Type your question in the chat box. Select “All Panelists” and click “Send.”

- The “Q&A” function can also be used in a similar way.
Goals for Today’s Presentation

1. Understand the History of Buying Value
2. Review Resources to Help Create Aligned Measure Sets
3. Explain Updates to the New Buying Value Measure Selection Tool (BVMST)
4. Demonstrate the BVMST
5. Learn About Vermont’s Experience
6. Respond to Questions and Share Resources
The History of Buying Value

- The Buying Value Measure Selection Tool (BVMST) was developed as part of a suite of nine resources to assist state agencies, private purchasers and other stakeholders in creating aligned measure sets.

- The tool was first published in 2014. Since then, it has been used by a number of states, including:
  - Connecticut
  - Oregon
  - Rhode Island
  - Vermont
  - Washington

- In 2016, with SHVS support, Bailit Health updated the tool to include current measure sets and add new functionality.
Once upon a time…there were no measures

- In 1989 large employers were complaining that they had **no data** to assess the value generated by their health plans.

- In response, a group of health plans decided to work with a small group of large employers to identify **standard measures that could be used to demonstrate value**.

- The result of that effort – **HEDIS “1.0”** – was released in 1991 with a limited number of quality measures – most of which were focused on prevention.
And now here we are today!

- 26 years later, we are awash in measures!

- The 2013 Buying Value study of measure sets in 25 states and three regional collaboratives found:
  - 1,367 measures in use across 48 measure sets, of which **509** were distinct, non-duplicated measures
  - Only 20% of the 509 measures were used in 2+ measure sets

- There were 650 NQF-endorsed measures as of 11-28-16.
1. Providers can’t respond to the large number of measures they are being asked to improve.

2. The measure-related requirements on providers for coding claims and medical records is a significant contributor to primary care burnout.

3. Constant change in measure set composition only worsens these problems for providers.
The Current Landscape of Measure Alignment

- There are national initiatives designed to create alignment, but they have had limited effect so far.
  - National Initiatives:
    - CMS Core Quality Measure Set
    - IOM’s Core Metrics

- States have not waited for national alignment, and have facilitated their own measure alignment processes.
  - Statewide Initiatives:
    - Rhode Island: SIM Aligned Measure Sets
    - Washington: Common Measure Set on Healthcare Quality and Cost
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How to Create an Aligned Measure Set

- The RWJF-supported Buying Value Project developed a suite of tools in 2014, titled “How to Build A Measure Set,” to assist state agencies, private purchasers, and other stakeholders in creating aligned performance measure sets.

- The full suite of resources is available on the Buying Value website (www.buyingvalue.org).
How to Build a Measure Set

How To Build A Measure Set is a suite of tools intended to assist state agencies, private purchasers and other stakeholders in creating health care quality measure sets. The tools are centered around an interactive spreadsheet into which users enter data and review in one document a variety of important decision inputs for consideration. In addition, users receive an alignment score for the measure set under consideration.

The tool emphasizes local needs and decision-making for quality measurement while maximizing opportunities for alignment with federal, state and commercial measure sets.
How to Create an Aligned Measure Set (Cont.)

How to Build a Measure Set

How To Build A Measure Set is a suite of tools intended to assist state agencies, private purchasers and other stakeholders in creating health care quality measure sets. The tools are centered around an interactive spreadsheet into which users enter data and review in one document a variety of important decision inputs for consideration. In addition, users receive an alignment score for the measure set under consideration.

The tool emphasizes local needs and decision-making for quality measurement while maximizing opportunities for alignment with federal, state and commercial measure sets.

Users can now filter through the 600+ measures included in the “Measure Crosswalk” tab of the Buying Value Measure Selection Tool by each measure’s Domain (e.g., Acute Illness Care, Prevention), Condition (e.g., Cardiovascular, Diabetes), Measure Type (e.g., Outcome, Process), Population (e.g., Adult, Pediatric), and Data Source (e.g., Claims, Clinical Data). For a complete list of the criteria used, please refer to the Measure Categorization Schematic.
Step 1: Define Goals & Audiences for the Measure Set

Users establish a framework for decision-making on the measure set by completing the Getting Started Questionnaire.
Step 3: Pick Existing Measure Sets as Reference Points

Users identify existing measure sets from programs and purposes similar to their own in the “Measure Crosswalk” tab of the Measure Selection Tool Spreadsheet as reference points to compare the candidate measures they will consider. The supplementary Measure Sets to Identify and Review document provides a comprehensive list of measure sets that may be used locally. For an introductory walkthrough of the Measure Selection Tool Spreadsheet, click the video to the left or refer to the Measure Selection Tool User Instructions.
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2016 Buying Value Measure Selection Tool Updates

1. Refreshed all measure sets in the tool, including:
   a. Updating measures included in current federal, national, and state measure sets
   b. Adding new notable federal measure sets (e.g., Merit-based Incentive Payment System (MIPS) Measures)
   c. Removing measure sets that are no longer in use

2. Created a new function that allows users to search through 600+ measures by domain, condition, measure type, population, and data source
## Measure Sets Included in the Tool

### Federal and National Measure Sets Included in the Tool (15)

- **Catalyst for Payment Reform Employer-Purchaser Measure Set**
- **CMMI Comprehensive Primary Care Plus (CPC+)**
- **CMMI SIM Recommended Model Performance Metrics**
- **CMS Core Set of Children’s Health Care Quality Measures for Medicaid and CHIP (Child Core Set)**
- **CMS Core Set of Health Care Quality Measures for Adults Enrolled in Medicaid (Medicaid Adult Core Set)**
- **CMS Core Quality Measures Collaborative**
- **CMS Health Home Measure Set**
- **CMS Hospital Value-Based Purchasing**
- **CMS Medicare Hospital Care**
- **CMS Medicare-Medicaid Plans (MMPs) Capitated Financial Alignment Model (Duals Demonstrations)**
- **CMS Medicare Part C & D Star Ratings Measures**
- **CMS Medicare Shared Savings Program (MSSP) ACO**
- **CMS Merit-based Incentive Payment System (MIPS)**
- **CMS Physician Quality Reporting System (PQRS); CMS EP EHR Incentive Clinical Quality Measures (eCQMs); and CMS Cross Cutting Measures (CCMs)**
- **Joint Commission Accountability Measures List**

*This measure set was added to the tool.

#This measure set replaced an existing measure set.
State Measure Sets Included in the Tool

- Medi-Cal P4P Measure Set*
- Oregon CCO Incentive Measures
- Oregon CCO State Performance “Test” Measures
- Rhode Island SIM Aligned Measure Set for ACOs*
- Vermont ACO Pilot Core Performance Measures for Payment and Reporting
- Washington State Common Measure Set for Health Care Quality and Cost

*This measure set was added to the tool.
## Buying Value Tool Search Function

<table>
<thead>
<tr>
<th>Domain</th>
<th>Condition</th>
<th>Condition</th>
</tr>
</thead>
<tbody>
<tr>
<td>▪ Acute Illness Care</td>
<td>▪ Auditory</td>
<td>▪ Genitourinary</td>
</tr>
<tr>
<td>▪ Ambulatory Surgery</td>
<td>▪ Cancer</td>
<td>▪ Infectious Disease</td>
</tr>
<tr>
<td>Center</td>
<td>▪ Cardiovascular</td>
<td>▪ Mental Health</td>
</tr>
<tr>
<td>▪ Ambulatory Surgery</td>
<td>▪ Dental</td>
<td>▪ Musculoskeletal</td>
</tr>
<tr>
<td>Center and Hospital</td>
<td>▪ Diabetes</td>
<td>▪ Neurology</td>
</tr>
<tr>
<td>▪ Chronic Illness Care</td>
<td>▪ Emergency Care</td>
<td>▪ Obesity</td>
</tr>
<tr>
<td>▪ Health/Drug Plan</td>
<td>▪ Gastrointestinal</td>
<td>▪ Ophthalmology</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>▪ Health Information Technology</td>
<td></td>
<td>▪ Patient Safety</td>
</tr>
<tr>
<td>▪ Home Health</td>
<td></td>
<td>▪ Pregnancy</td>
</tr>
<tr>
<td>▪ Hospice</td>
<td></td>
<td>▪ Renal</td>
</tr>
<tr>
<td>▪ Hospital</td>
<td></td>
<td>▪ Respiratory</td>
</tr>
<tr>
<td>▪ Medication Management</td>
<td></td>
<td>▪ Substance Abuse</td>
</tr>
<tr>
<td></td>
<td></td>
<td>▪ Not Applicable (NA)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>▪ Overuse</td>
<td></td>
<td></td>
</tr>
<tr>
<td>▪ Population Health</td>
<td></td>
<td></td>
</tr>
<tr>
<td>▪ Post-Acute/Long-Term Care</td>
<td></td>
<td></td>
</tr>
<tr>
<td>▪ Prevention</td>
<td></td>
<td></td>
</tr>
<tr>
<td>▪ Not Applicable (NA)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>▪ Other</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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## Buying Value Tool Search Function (Cont.)

<table>
<thead>
<tr>
<th>Measure Type</th>
<th>Cost/Resource Use</th>
<th>Outcome</th>
<th>Patient Experience</th>
<th>Process</th>
<th>Structure</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Population</th>
<th>All Ages</th>
<th>Older Adult (65+ Years)</th>
<th>Adult (18+ Years)</th>
<th>Pediatric (0-18 Years)</th>
<th>Not Applicable</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Data Source</th>
<th>Claims</th>
<th>Clinical Data</th>
<th>Other</th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Claims/Clinical Data</td>
<td>Independent Review</td>
<td>Plan Reporting</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Claims/Social Service Data</td>
<td>Medicare</td>
<td>Provider Attestation</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Complaints Tracking</td>
<td>Survey</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Module (CTM)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Measure Crosswalk

<table>
<thead>
<tr>
<th>BV Library</th>
<th>Measure Name</th>
<th>NQF #</th>
<th>NQF Endorsement Status</th>
<th>NCQA HEDIS Abbreviation</th>
<th>CMS Number</th>
<th>Steward</th>
<th>Description</th>
<th>Domain</th>
<th>Condition</th>
<th>Measure Type</th>
<th>Populations</th>
<th>Data Source</th>
</tr>
</thead>
<tbody>
<tr>
<td>BV-1</td>
<td>Asthma Assessment of Asthma Control</td>
<td>0001</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Percentage of patients who were evaluated during at least one office visit for the frequency (number) of daytime and nocturnal asthma symptoms</td>
<td>Chronic Illness Care</td>
<td>Respiratory</td>
<td>Process</td>
<td>All Ages</td>
<td>Claim/Clinical Data</td>
</tr>
<tr>
<td>BV-2</td>
<td>Appropriate Testing for Children with Pharyngitis</td>
<td>0002</td>
<td>Not endorsed</td>
<td>CVFP</td>
<td>CMS5161</td>
<td></td>
<td>Percentage of children aged 3 to 10 that were diagnosed with pharyngitis, prescribed an antibiotic, and received a group A streptococcal test for the diagnosis of strep throat</td>
<td>Upper Airway</td>
<td>Infectious Disease</td>
<td>Process</td>
<td>Pediatric</td>
<td>Claims</td>
</tr>
<tr>
<td>BV-3</td>
<td>Initiation and Engagement of Alcohol and Other Drug Dependence Treatment</td>
<td>0004</td>
<td></td>
<td>IET</td>
<td>CMS1137</td>
<td></td>
<td>Percentage of adolescent and adult patients with a new episode of alcohol or other drug (AOD) dependence who received the following:</td>
<td>Chronic Illness Care</td>
<td>Substance Abuse</td>
<td>Process</td>
<td>All Ages</td>
<td>Claims</td>
</tr>
<tr>
<td>BV-4</td>
<td>CAHPS® Clinician/Group Surveys – Adult Primary Care, Pediatric Care, and Specialist Care Surveys</td>
<td>0005</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Adult Primary Care Survey; 17 core and 84 supplemental question survey of adult and outpatient primary care patients, adult plan members who received the following:</td>
<td>Other</td>
<td>NA</td>
<td>Patient Experience</td>
<td>All Ages</td>
<td>Survey</td>
</tr>
<tr>
<td>BV-5</td>
<td>CAHPS® Health Plan Survey v 5.0 – Adult Questionnaire</td>
<td>0008</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>50-question core survey of adult health plan members that assesses the quality of care and consumer experiences, Level of analytic health care; HIV, PRE</td>
<td>Healthy/Drug Plan</td>
<td>NA</td>
<td>Patient Experience</td>
<td>Adult</td>
<td>Survey</td>
</tr>
</tbody>
</table>

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### Measure Selection Tool

**Instructions:**
- Enter Measures for Consideration in Columns A through L.
- Begin with entering known NOF number in Column C (note: you must enter a 4-digit number (e.g., 0002, not 2 or 02)).
- "Measure Name", "Steward", "CMS Number", "Description", and "Data Source" will autopopulate for measures that have a known NOF number and are currently included in the Measure Crosswalk tab.
- Enter all remaining information manually.

<table>
<thead>
<tr>
<th>#</th>
<th>Measure Name</th>
<th>NOF Number</th>
<th>Steward</th>
<th>CMS Number</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>2</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
</tr>
<tr>
<td>3</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
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Experience with the Buying Value Measure Selection Tool

- Pat Jones, Health Care Project Director
  Green Mountain Care Board, Vermont
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5. Listen to Experiences with the BVMST
6. Respond to Questions and Share Resources
Questions?
Resources

- Webinar materials will be emailed to participants and made available on the SHVS website
  - http://statenetwork.org/resource/?tag=shran,shvs&topic=&type=

- Buying Value
  - www.buyingvalue.org/

- Bailit Health-authored brief titled “Considerations for State Development of Performance Measure Sets”