



# 2015 Quality Measure Recommendations

Statewide Quality Reporting and Measurement System (SQRMS)

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# 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 multi-stakeholder process
  - Fulfill our vision of public reporting both through our annual [Health Care Quality and Disparities reports](#), as well as through [MNHealthscores.org](http://MNHealthscores.org)
- Collaborative effort of providers, hospitals, purchasers, consumers and health plans



# Background *continued*

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

# 2015 Quality Measure Recommendations

**Physician Clinics**

# 2015 Measures Recommendation Process

- March – Data elements as risk adjusters for each quality measure; data elements incorporated into the preliminary slate of measures
- April – Preliminary slate of measures (clinics); evaluation of existing measures and measure specifications incorporated
- March - May – 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
- Eligible Providers: Family Medicine; General Practice; Internal Medicine; Geriatric Medicine; Endocrinology
- Adults 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
- Eligible Providers: Family Medicine; General Practice; Internal Medicine; Geriatric Medicine; Cardiology
- Adults ages 18-75

# Depression Remission at 6 Months

- Patients with major depression or dysthymia and 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

- 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
- 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
- Adults ages 50-75

# Maternity Care- Primary 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 ( $\geq 37$  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 functional status at one year post-operatively measured by the Oxford Knee Score tool
- Average post-operative quality of life at one year post-operatively measured using specified health related quality of life tool
- Eligible Providers: Orthopedic Surgery
- Adult patients ages 18 and older with no upper age limit undergoing a primary total knee replacement or a revision total knee replacement during the required dates of procedure

# Spine Surgery

- Average postoperative functional status as measured by the
  - Oswestry Disability Index (low back)
  - Specified health related quality of life tool
  - VAS visual analog pain scale
- Discectomy/Laminotomy population assessed at three months postop
- Lumbar fusion population assessed at one year postop
- Eligible Providers: Orthopedic Surgery, Neurosurgery
- Adult patients ages 18 and older with no upper age limit undergoing a lumbar discectomy/ laminotomy or a lumbar spinal fusion (any level of 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

- Survey topics cover adoption of HIT, use of HIT, exchange of information, and on-line services
- Eligible Providers: All Specialties
- Collecting February 15 through March 15, 2015, on current HIT status

# Patient Experience of Care

- Survey Topics Cover:
  - Getting care when needed / access to care
  - Provider Communication
  - Helpfulness of office staff
  - Doctors with an exceptional rating
- CG-CAHPS 12-Month 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
- Collecting April 2015 on dates of service for surveying: September 1, 2014 through November 30, 2014



# Questions

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

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

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**Hospitals**