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DATE: December 26, 2023

SUBJECT: Statewide Quality Reporting and Measurement System Technical Update—2024 Reporting Year

The Minnesota Department of Health (MDH) has updated the Minnesota Statewide Quality Reporting and Measurement System (Quality Reporting System), a system for physician clinic and hospital quality measurement. MDH continuously works with providers, measurement organizations, and other stakeholders to create an evolving set of standard health care quality measures that are rooted in evidence and informed by national discussions on measurement progress. MDH publishes changes to the measurement set annually.

Without changing any part of Minnesota Rules, chapter 4654, MDH removed one critical access hospital measures to maintain alignment with federal programs. Accordingly, and to ease administrative burdens, MDH is not promulgating a rule for the 2024 reporting year. In its place, MDH is issuing technical guidance about the changes.¹

A list of Quality Reporting System measures, measure specifications, and other information is available online at the Quality Measures, 2024 Report Year webpage (<https://www.health.state.mn.us/data/hcquality/measures/index.html>).

Physician clinic quality measures

Modifications

MN Community Measurement (MNCM) updated exclusion criteria for the Colorectal Cancer Screening measure to align with those of the National Committee for Quality Assurance. MNCM discontinued the permanent nursing home resident exclusion for the Depression Remission at Six Months, Optimal Asthma Care, and Optimal Diabetes Care measures. MDH is discontinuing this exclusion for the Asthma Education and Self-Management measure.

Hospital quality measures

Prospective payment system hospital measure modification

The Centers for Medicare & Medicaid Services (CMS) is resuming use of the Hospital 30-Day, All-Cause, Risk-Standardized Readmission Rate following Pneumonia Hospitalization measure beginning with federal fiscal year 2024. This measure is included in the Hospital Readmission

¹Quality Rule Appendices A, B, and E indicate that quality measures are required for reporting in 2018 and every year thereafter.

Reduction Program Excess Readmission Ratio. CMS suppressed this measure during federal fiscal year 2023 in response to the COVID-19 public health emergency.

Critical access hospital measure removals

CMS removed one measure—Elective delivery (PC-01)—from its inpatient reporting program that is also in the Quality Reporting System. To stay in alignment with federal reporting, thereby limiting reporting burden, MDH is discontinuing this measure beginning with January 1, 2024, reporting.

Supplemental information

From September 5 through 25, 2023, MDH invited public input on physician clinic and hospital quality measurement topics; opportunities for alignment; the Quality Reporting System and MDH's role in quality measurement and improvement of health care and equity; and other items of interest to inform future system updates and advancement. MDH received 14 comments from providers, payers, advocacy groups, and nonprofit and professional organizations.

Providers and payers appreciate quality measurement that is aligned with local and federal efforts and established workflows to maximize value and lessen administrative burdens. Commenters support the collection of social risk factor data to improve patient care and had different perspectives on whether and when to mandate such collection and reporting for quality measure stratification purposes. Commenters observed that the Quality Reporting System is valuable for bringing statewide focus to health care quality improvement priorities. Some commenters voiced support for new areas of measurement, including disability and Alzheimer's. MDH anticipates reaching out to commenters during 2024 to explore broader questions about health care quality measurement, and the role of the Quality Reporting System and MDH.

MDH is pilot testing a new measurement framework with partners. This framework offers a meaningful way to measure and improve health and equity through partnership, accountability, action, and learning. MDH expects pilot results and framework implementation to inform future Quality Reporting System updates, as well as the general approach to assessing and reporting on clinical care quality. Updates about implementation of the Measurement Framework (<https://www.health.state.mn.us/data/hcquality/measfrmwk.html>) will be available online.

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QUALITY REPORTING SYSTEM

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To obtain this information in a different format, call: 651-201-4520.