



Health Policy Commission  
Attn: Catherine Harrison  
50 Milk St., 8<sup>th</sup> Floor  
Boston, MA 02109

January 29, 2016

Dear Ms. Harrison,

Massachusetts Health Quality Partners (MHQP) is pleased to share lessons learned from 20 years of working with providers, health plans and consumers and some practical solutions for the measurement program you are proposing for Accountable Care Organizations (ACOs) in Massachusetts.

As a multi-stakeholder collaborative organization committed to expanding the use of actionable quality data, we believe that including the voice of the patient and consumers in assessing ACOs is essential for all parties. Fortunately, there is a tremendous body of work and experience in Massachusetts to build upon for this effort. Our comments on the proposed certification standards for ACOs reflect our experience in ensuring full and authentic engagement with consumers in quality measurement and improvement, our long history with Patient Experience surveying, and successful public reporting of quality measures.

#### *Patient and Consumer Participation in ACO Governance and Operations*

Consumers have been actively engaged in our governance and initiatives, and have educated us about the support needed for meaningful participation. Effective participation from consumers on a sustained basis requires

- systematic attention to building and maintaining the relationship with the organization,
- attention to ensuring the participation is not symbolic or token due to lack of communication around the organization's goals and challenges, and
- support for the logistics of participation.

It is not uncommon for the consumer participants to be the only individuals who do not have the work as part of their current employment or standing commitments.

Your interest in evaluating "meaningful participation" is important. We recommend that you go beyond the process measures that are typically assessed (e.g., meeting attendance, turnover in this appointment, etc) and hear directly from the consumer participants. This need not be a lengthy survey or interview, and getting common information about the experience directly from the consumer participants will ultimately help all organizations. One additional advantage in soliciting feedback directly from consumers is the option of getting the data without administratively burdening the ACOs.

#### *Effectiveness of Collaboration Across the Continuum of Care*

This aspect of evaluating ACO effectiveness is similar to Consumer Participation in that direct feedback from patients and consumers will be important. This information may be gained at least in part from the coordination of care domain in MHQP's statewide Patient Experience Survey, which will afford you statewide performance insights and benchmarks for understanding variation in this area. Depending on

the specific collaborations you wish to evaluate, additional questions or alternative approaches to surveying the collaborating providers may be required.

### *Analytic Capacity and Quality Reporting*

We strongly urge you to adopt measures that are reported and compared statewide, and to use a survey that has been administered for adults and pediatric patients. Massachusetts providers have improved tremendously in long-standing measures, and currently have relatively little variation across the state. MHQP has updated the reporting options to help providers see these gains, understand the variation that exists even when performance is tightly clustered. This attention to providing meaningful reports supports further improvement.

We are able to provide a view of performance on newer measures as providers become familiar with them and implement improvement efforts. Our forthcoming reports on Patient Experience and Clinical Quality in 2015 offer clear examples of this for select Behavioral Health and Self-Management measures.

MHQP has been reporting quality measures of physician organizations publicly since 2005, and can provide trend information for many HEDIS measures that are generally accepted as valuable measures... This data can be reported at various levels and is available electronically.

### *Annual Patient Experience Survey*

Again, we urge you to rely on a statewide survey to understand variation across organizations, populations, and regions. A significant advantage to using a statewide survey that has been fielded over many years is the ability to look at trends and to undertake analytics that address the questions you pose about targeting improvement areas. MHQP's annual PES includes adult and pediatric patients, and is modified periodically, with stakeholder involvement, to increase the relevance of the survey results for all patient populations. The additional reporting and support provided to participants in MHQP's survey supports analysis that allows providers to identify areas for improvement that matter most to their patients. The fact that multiple private payers already use MHQP's statewide survey as the basis for their incentive programs mean that provider organizations take these survey results very seriously and can focus their improvement efforts for greater impact.

Despite the remarkable technological advances, collecting patient experience data still requires significant financial investment and administrative resources from participating organizations. Given the enormous value of a statewide survey, we urge you to take advantage of the efficiencies afforded by using the collaboratively supported annual PES survey currently administered in Massachusetts by MHQP. We believe that this robust data is responsive to the intent of this accreditation program and is sufficiently flexible to adapt to developing needs.

We applaud your thoughtful attention to consumers and meaningful performance data as you undertake this program. MHQP would be delighted to support this effort and collaborate in the next stages of design and implementation.



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Massachusetts Health Quality Partners