HEDIS® Digital Quality Measurement

HEDIS® is a registered trademark of the National Committee for Quality Assurance (NCQA).
Moving to Digital Measurement

The Need, Challenges and Principles

To fully achieve the potential of digital quality measures requires restructuring the quality measurement ecosystem to be more:

- patient-centered
- clinically relevant
- timely
- methodologically sound
- broadly accepted
NCQA’s Vision for Quality Measurement

Better accountability at all levels

- Programs use better measures
- Measures move beyond visit counts and low-bar process
- New data sources, improved content and flow
- Measurable, patient-centric measures
- Standardized electronic data
- Standardized, machine readable logic (CQL)
- Measure harmonization across programs
Current HEDIS Measure Framework

Differentiating Measure Format from Reporting Methodology

Quality Measures
- Digital Quality Measure (dQM)
- Paper Quality Measure (pQM)

Measure Format
- CMS MIPS
- NCQA HEDIS

Program
- CMS
- NCQA HEDIS

Reporting Method
- Administrative
- ECDS
- Hybrid
Electronic Clinical Data Systems (ECDS)  
Reporting Standard for HEDIS

A structured method to collect and report electronic clinical data for HEDIS® quality measurement and for quality improvement.

To qualify, data must use standard layouts, meet the technical specifications and be accessible by the care team upon request.

Organizations report each measure component by source system of record.

For more information on ECDS: [http://www.ncqa.org/ecds](http://www.ncqa.org/ecds)
# Measures available for ECDS reporting

11 measures available for ECDS reporting in Measurement Year (MY) 2019

<table>
<thead>
<tr>
<th>Measures Available</th>
<th>New Measures</th>
</tr>
</thead>
<tbody>
<tr>
<td>8 Measures <strong>Originally Introduced</strong> into HEDIS with ECDS Reporting</td>
<td>Breast Cancer Screening</td>
</tr>
<tr>
<td></td>
<td>Follow-Up Care for Children Prescribed ADHD Medication</td>
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<tr>
<td></td>
<td>Colorectal Cancer Screening</td>
</tr>
</tbody>
</table>

3 Traditional HEDIS Measures **Newly Specified for ECDS Reporting**

<table>
<thead>
<tr>
<th>Measures</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Prenatal Immunization Status</td>
<td></td>
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<tr>
<td>Adult Immunization Status</td>
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<tr>
<td>Depression Screening and Follow-Up for Adolescents and Adults</td>
<td></td>
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<tr>
<td>Utilization of the PHQ-9 to Monitor Depression Symptoms for Adolescents and Adults</td>
<td></td>
</tr>
<tr>
<td>Depression Remission or Response for Adolescents and Adults</td>
<td></td>
</tr>
<tr>
<td>Unhealthy Alcohol Use Screening and Follow-Up</td>
<td></td>
</tr>
<tr>
<td>Prenatal Depression Screening and Follow-Up <em>new</em></td>
<td></td>
</tr>
<tr>
<td>Postpartum Depression Screening and Follow-Up <em>new</em></td>
<td></td>
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</tbody>
</table>
2020 Results

Overall observations from HEDIS ECDS reporting

- Large increase in number of plans reporting ECDS
  (total Commercial/Medicaid submissions increased from 452 in 2019 to 811 in 2020!)
- Many plans reporting the immunization measures
- More diverse plan types reporting
- Different data source types (e.g., registry and EHR data)
- Challenges exchanging behavioral health data…
What is a Digital Quality Measure (dQM)?

Sample “Human Readable” Measure Code

```plaintext
context Patient

define "Denominator":
  "Initial Population"

define "Mastectomy Exclusion":
  ( Count("Unilateral Mastectomy Procedure") == 2 )
  or ( ( exists "Right Mastectomy Diagnosis"
     or exists "Right Mastectomy Procedure"
   )
     and ( exists "Left Mastectomy Diagnosis"
     or exists "Left Mastectomy Procedure"
   )
  )
  or exists "History Bilateral Mastectomy"
  or exists "Bilateral Mastectomy Procedure"

define "Numerator":
  exists ( ["Diagnostic Study, Performed": "Mammography"] Mammogram
    where ( Mammogram.relevantPeriod ends 27 months or less before day of
     end of "Measurement Period"
   )
  )
```

digital Quality Measure

- NCQA produces standardized measure code for customers
- Use international standards to represent measure logic
- Use U.S. standards to represent data elements
- Perform the function of measure calculation
- Use the same terminologies as paper specifications
Anatomy of a Digital Quality Measure (dQM)

Data Model
The abstract model that formalizes the data elements in a patient’s record into a common object structure and format

Expression Logic
How to generate useable information from all the data elements specified in the measure

Structure
Metadata, Numerator, Denominator, Exclusions, Exceptions
What is FHIR®?

Latest interoperability standard

Fast Healthcare Interoperability Resources (FHIR)

HL7 standard

Enables automated data exchange through APIs

Developer friendly

Web-based technology
NCQA’s Plan To Move to FHIR

NCQA believes it is time to move to FHIR and for the first set of FHIR-CQL HEDIS measures, it is targeting Measurement Year 2022.

**WHY**

#1 Reduces provider burden by easing data gathering efforts

#2 Aligns with other key stakeholders (e.g., CMS)

**WHAT**

Release a limited number of FHIR-CQL HEDIS measures for Trial Use starting in 2020

**WHEN**

Proposed release of HEDIS FHIR-CQL measures for MY2022 (reported in 2023)
Digital Measurement Community

A **NEW** interactive platform for stakeholders engaged in the development and implementation of digital quality measures

Join Today!

@
digitalcommunity.ncqa.org

https://www.ncqa.org/videos/digital-measurement-community/
A New Interactive Digital Measurement Community

Addressing Knowledge Barriers and Lack of Coordination Across Disciplines

The Digital Measurement Community will foster collaboration around three primary areas of high impact and value:

- **Sharing Best Practices**
  To promote quality and accountability in the field

- **Education**
  To facilitate the adoption of digital measures and related standards

- **Collaboration**
  Collaborating to build a vibrant digital measurement community
Appendix:

DMR Roadmap for the Future
NCQA has been working intensively with CMS, ONC and other measure developers to develop a *Roadmap* that will provide guidance and direction to stakeholders

- Consensus process – addressing a current lack of direction in the measurement space
- Seven (7) principles developed to guide stakeholders addressing:
  - National policy
  - Data interoperability
  - Measure formats and standards
  - Clinical relevance
Minimize Reporting Burden

- Use data generated in the course of planning, delivering, or paying for care
- Use common measures across programs
- Use common measure set for all providers
2

Strengthen Data’s Scope, Quality and Validity

- Use data from all suitable sources, not just payers and providers
- Independently verify data quality and validity to provide info on issues and gaps
- Strengthen knowledge generated using the most granular information possible
- Assess all sites and care types (in part by being person-centric)
7 Principles for a Digital Measure Roadmap

Establish National Systems and Data Infrastructure

- Maximize health IT and computable data’s potential to help providers improve
- Create timely point-of-care decision support based on data from many sources
- Provide community- or region-level infrastructure and support
7 Principles for a Digital Measure Roadmap

Ensure Clinical Soundness

- Align with clinical guidelines that advance quality measurement to a continuous cycle of information supporting QI
- Preserve meaningful comparison and quantifiable progress as guidelines evolve
- Aid improvement through continuous measurement, intervention, assessment
Ensure Fairness

• Avoid disadvantaging providers or patient populations
• Create a more inclusive QI approach that accommodates all people and groups
• Standardize risk adjustment for populations
• Determine population-level risk adjustment and stratification one measure at a time
• Make measurement methods, data sources and results transparent
7 Principles for a Digital Measure Roadmap

6 Align with Societal Goals

- Select measures for impact on cost, quality, social determinants, equity and wellbeing
- Prioritize measures by anticipated benefit (value = resources used/projected benefit)
- Incentivize care for complex patients based on shared savings and improving health, not on benchmarks that complex patients cannot reach
- Separate patient characteristics from provider performance to avoid cherry-picking
7 Principles for a Digital Measure Roadmap

Provide Timely and Targeted Analysis and Feedback

• Build benchmarks cautiously and include statistical results
• Provide fast, actionable information from CQMs