



Moving to Digital Measurement

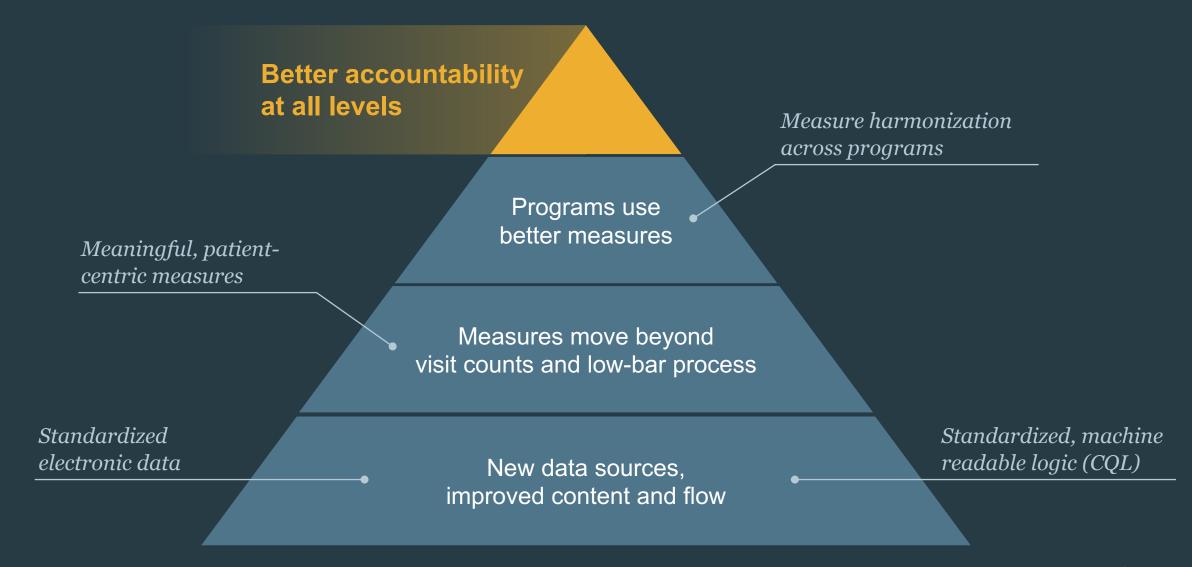
The Need, Challenges and Principles

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



Current HEDIS Measure Framework

Differentiating Measure Format from Reporting Methodology

Quality Measures

Program **Measure Format** CMS MIPS **Digital Quality** Measure (dQM) **NCQA HEDIS CMS** Paper Quality Measure (pQM) **NCQA HEDIS**

Reporting Method Administrative **ECDS** Administrative **Hybrid**

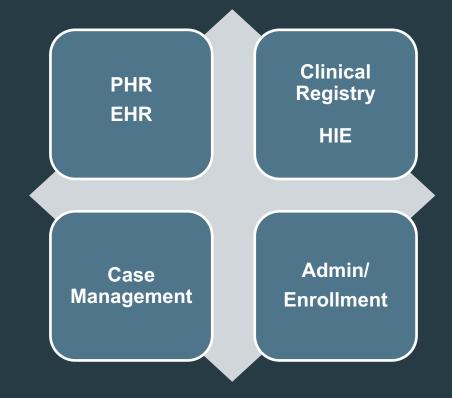
Electronic Clinical Data Systems (ECDS)

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.ncga.org/ecds



Measures available for ECDS reporting

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

8 Measures *Originally Introduced* into HEDIS
with ECDS Reporting

Prenatal Immunization Status

Adult Immunization Status

Depression Screening and Follow-Up for Adolescents and Adults

Utilization of the PHQ-9 to Monitor Depression Symptoms for Adolescents and

Adults

Depression Remission or Response for Adolescents and Adults

Unhealthy Alcohol Use Screening and Follow-Up

Prenatal Depression Screening and Follow-Up *new*

Postpartum Depression Screening and Follow-Up *new*

3 Traditional HEDIS
Measures *Newly*Specified for ECDS
Reporting

Breast Cancer Screening

Follow-Up Care for Children Prescribed ADHD Medication

Colorectal Cancer Screening

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)?

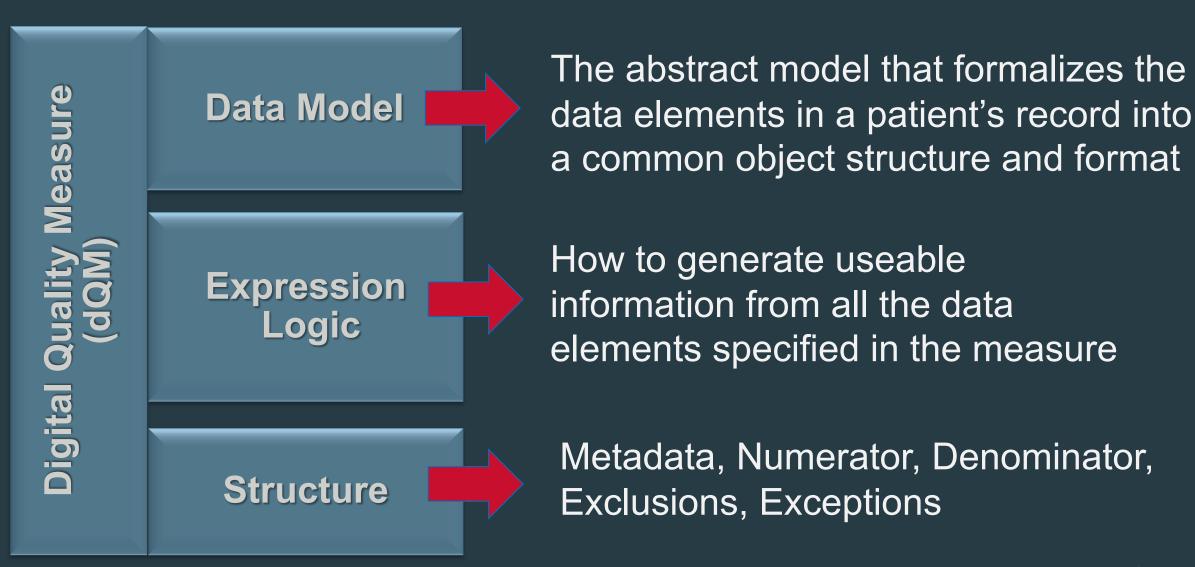
Sample "Human Readable" Measure Code

```
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)



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



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



- **#1** Reduces provider burden by easing data gathering efforts
- **#2** Aligns with other key stakeholders (*e.g., CMS*)



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

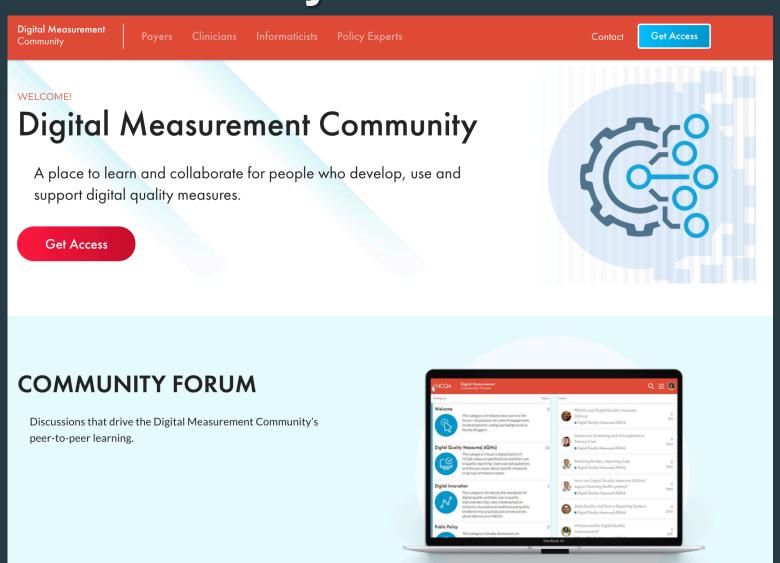
Digital Measurement Community

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

Join Today!

(a)

digitalcommunity.ncqa.org



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

A Roadmap to Guide a Digital Measurement Future

Principles and Recommendations

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





- 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



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)



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



- 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



- 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



- 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



Provide Timely and Targeted Analysis and Feedback

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