

National Committee on Vital and Health Statistics
Executive Subcommittee
Hearing on “Meaningful Use”
of Health Information Technology

Panel 10: Measuring Meaningful Use

April 29, 2009

Floyd Eisenberg, MD, MPH, FACP

Senior Vice President, Health Information Technology

feisenberg@qualityforum.org

National Quality Forum

- improve the quality of American healthcare by setting national priorities and goals for performance improvement
- endorse national consensus standards for measuring and publicly reporting on performance
- promote the attainment of national goals through education and outreach programs

28 multi-stakeholder organizations

- Consumers
- Purchasers
- Quality alliances
- Health professionals/providers
- Public sector: CMS, NGA, CDC, AHRQ, NIH
- Accreditation/certification groups
- Health plans

Co-Chairs:



Donald Berwick
Institute for Healthcare Improvement

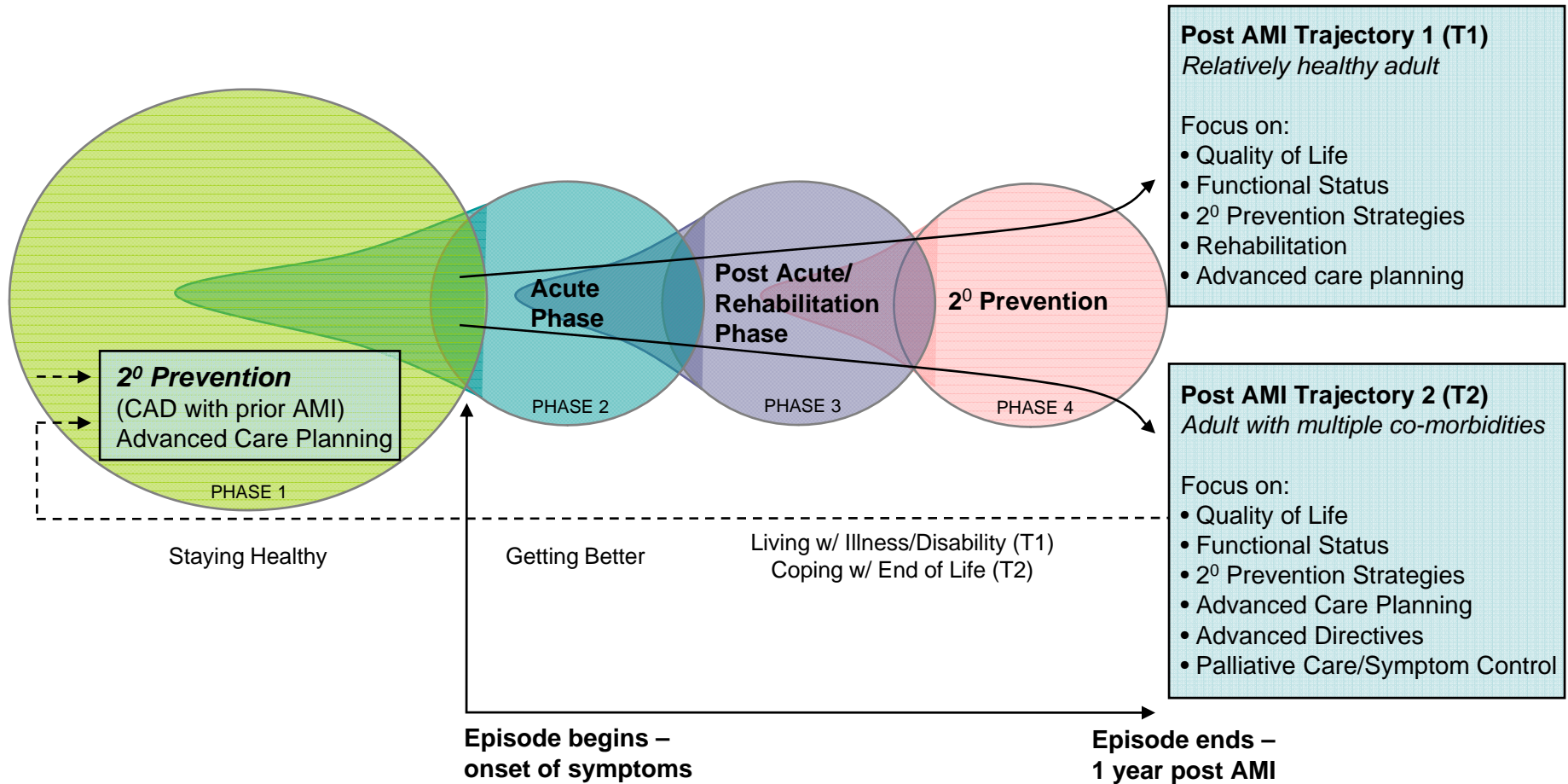


Margaret O'Kane
National Committee for Quality Assurance

- Engage patients and families in managing health and making decisions about care
- Ensure patients receive well-coordinated care across all providers, settings, and levels of care
- Improve the health of the population
- Improve the safety and reliability of America's health care system
- Guarantee appropriate and compassionate care for patients with life-limiting illnesses
- Eliminate waste while ensuring the delivery of appropriate care

Second Dimension: High Impact Conditions

Example: Acute MI Episode



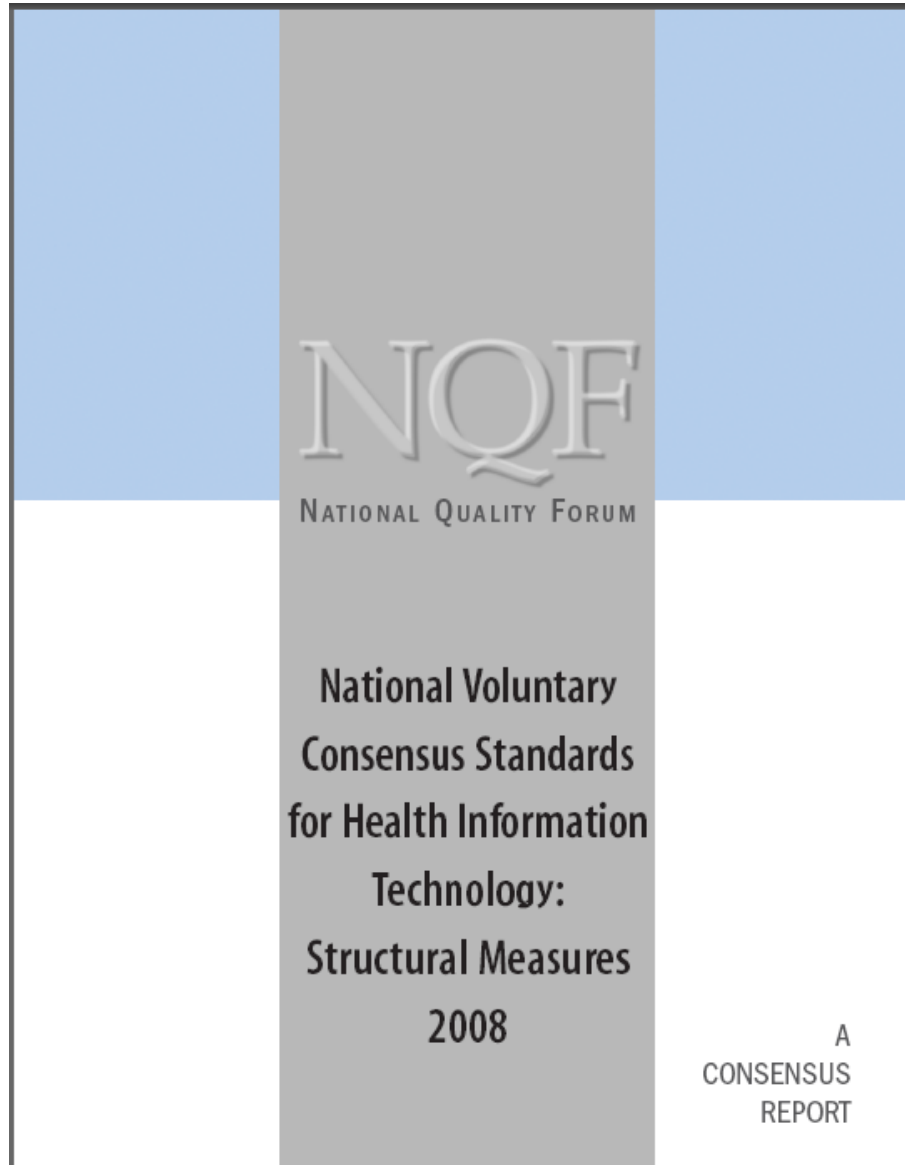


- **Importance to Measure and Report**
 - *what is the level of evidence for the measure, is there a gap in performance?*
- **Scientific Acceptability of Measure Properties**
 - *what is the reliability and validity of the measure?*
- **Usability**
 - *can the intended audiences understand and use the results for decision-making?*
- **Feasibility**
 - *can the measure be implemented without undue burden, capture with electronic data/EHRs?*





1. *What are the strengths and limitations of the various methodologies provided in the statute for demonstrating meaningful use (attestation, submission of claims with appropriate coding, survey, reporting of quality measures, or other means)? Based on this, what are the most feasible and reliable measurement methods to ascertain compliance with these requirements for meaningful EHR use and associated incentives?*



e-prescribing

1. decision support (including stand-alone/non-EHR applications)
2. in EHR

EHR interoperability

3. adoption of CCHIT or core-functional EHR
4. receive labs electronically

care management

5. @ point of care
6. between visits

quality reporting registry

7. local
8. national

9. medical home

- a. CCHIT certified EHR at the time of measurement, or
- b. If CCHIT certification is available (in primary care or a specialty) on or before August 1, 2008, but the system in use is not CCHIT certified, the EHR must meet the following criteria:
 - 1. Ability to manage a **medication list** AND
 - 2. Ability to manage a **problem list** AND
 - 3. Ability to manually enter or electronically receive, store and display **laboratory results** as discrete searchable data elements AND
 - 4. Ability to meet basic **privacy and security** elements AND
 - 5. the EHR must be CCHIT certified on or before August 1st 2011 or another CCHIT certified product must be in use for compliance after August 1, 2011 or
- c. If CCHIT certification is not available for a specialty on August 1, 2008 the EHR must have capabilities 1, 2, 3, AND 4 in section b above.

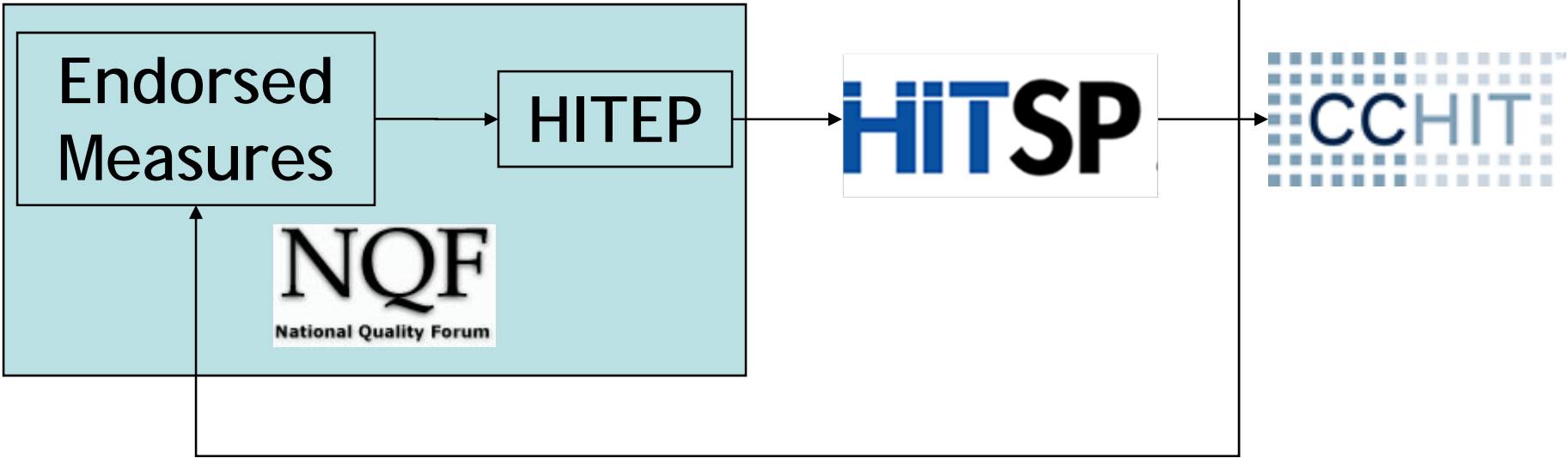
- 2. The third criterion for a provider to be determined to be a meaningful user is the reporting of quality measures using EHRs. What, if any, additional standards are needed to enable providers to report and CMS/States to successfully accept quality measures from EHRs? Are the needs different for measures applied to different settings (e.g. hospital or physician office)?*



Standardized Specifications for Measures

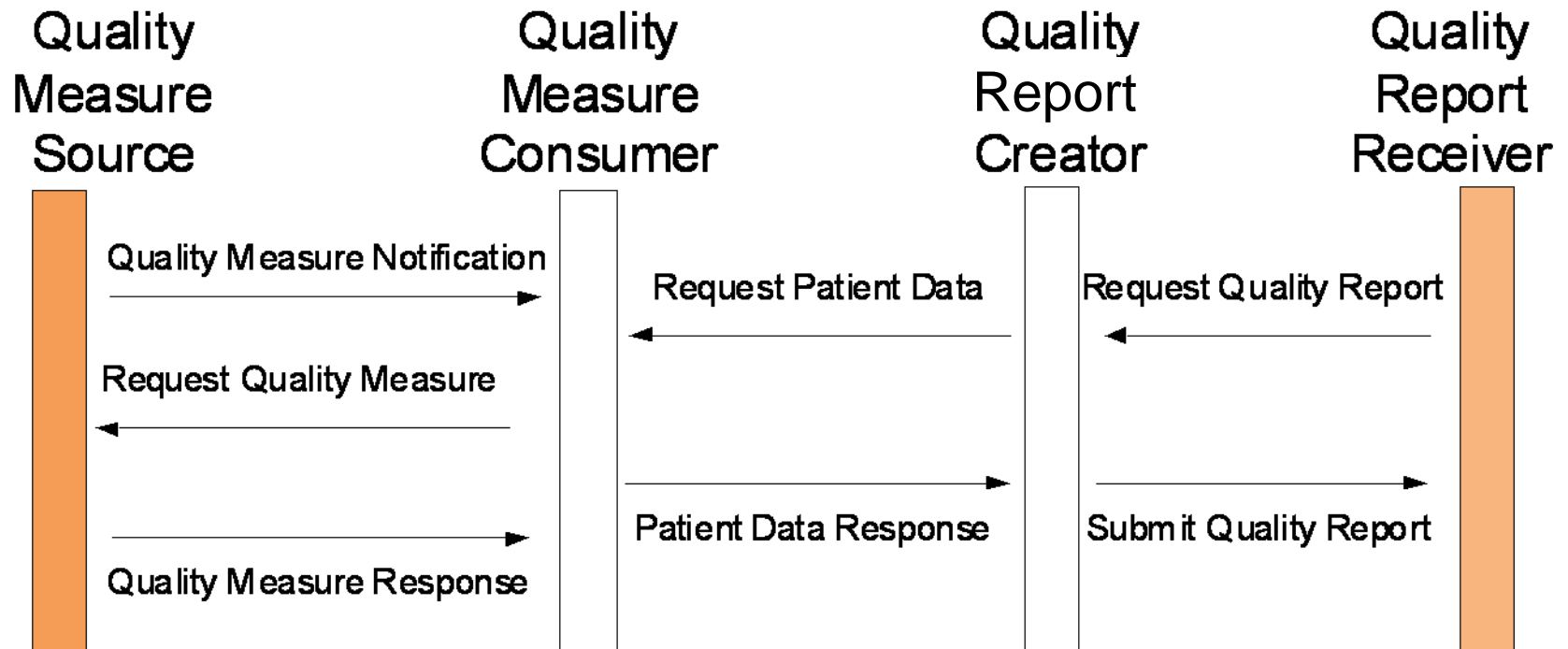
Quality Data Set (QDS)

Health IT Standards



Authoring Tool Infrastructure

Information Flow - Measure to Report



Source: Integrating the Healthcare Enterprise (IHE)
Quality, Research & Public Health Domain
Performance Quality Report Profile - In development, 2009

3. *How could the various methodologies be combined to establish an implementable mechanism for 2011, as well as a trajectory to enhanced reporting and accountability over time?*

Components (a) present for every patient, and (b) updated or reconciled with every encounter:

- Problem List
- Allergy List
- Medication List
- Orders
- Prescriptions (more ambulatory or at transitions of facility based care)
- Medical Summaries (at transitions of facility based care)
- Continuity of Care Documents (CCD) (ambulatory for each encounter)



- *What mechanism would be most appropriate (e.g., electronic mechanisms, least burdensome, most precise, etc.) to measure and verify a provider's use of EHR functionality and conduct of information exchange?*

Clinical Decision Support: Medication Interaction Tracking

#MM-027-08 Potentially Harmful Drug-Disease Interactions in the Elderly (DDE): 3 Rates and a Total Rate (NCQA)

This measure assesses the percentage of patients 65 and older who have evidence of an underlying disease / condition / health concern who were dispensed an ambulatory prescription for a contraindicated medication.

Categories:

- (1) patients with a history of falls and a prescription for tricyclic antidepressants, antipsychotics, or sleep agents,
- (2) dementia and a prescription for tricyclic antidepressants or anticholinergic agents
- (3) chronic renal failure and a prescription for nonaspirin NSAIDs or Cox-2 Selective NSAIDs. The measure is reported as three separate rates and a total rate combining all three.

Clinical Decision Support: Medication Interaction Tracking

Process

$$\text{CDS 'Success'} = \frac{\# \text{ no Rx}}{\# \text{ prompts}}$$

Outcome

$$\text{ADE Rate} = \frac{\# \text{ ADEs}}{\text{Population}}$$

- Use existing consensus development process to expand measures related to national priorities and high impact conditions
 - Provide effective care
 - Remove waste
 - Eliminate harm
 - Eradicate disparities
- Endorsed structural measures exist today
- Enhancement to measure use of essential EHR functions
 - Problem Lists
 - Allergy Lists
 - Medication Lists
 - ePrescribing