

Collaborative for Performance Measure Integration with EHR Systems

Description of Activity

January 5, 2007

Co-sponsored by:

**American Medical Association
and
National Committee for Quality Assurance**

An Opportunity

The concept of measuring clinical performance is recognized as a means to improving the quality of health care. Today, many sectors of the industry collect and report performance measure data in an effort to improve the quality of care provided to patients. Measure development organizations such as the Physician Consortium for Performance Improvement (“PCPI”) and the National Committee for Quality Assurance (“NCQA”) have developed performance measures intended to assist physicians in improving the quality of patient care delivered in the ambulatory environment. Many of these measures have been recognized by other organizations, such as the Centers for Medicare and Medicaid Services (“CMS”), the National Quality Forum (“NQF”) and the Ambulatory Care Quality Alliance (“AQA”) as being evidence-based and used in a number of large testing programs (e.g., DOQ-IT, AQA demonstrations).

The process of developing, implementing and testing performance measures is evolving, especially as the tools necessary for widespread performance measure reporting within healthcare settings continue to improve. In today’s environment, the use of administrative data for calculating performance measurement is common, despite the widely recognized limitations. Data available in electronic health record (“EHR”) systems will reduce dependence on the use of large administrative data sets for performance measurement. Moreover, with the use of EHRs, physicians will be better able to reliably and efficiently capture the clinical data necessary for improving quality.

Despite the opportunities that EHRs present for clinical quality improvement, there is variation in the way performance measures are specified, captured and reported. Some elements of performance measures (such as observations, time contexts, etc.) are challenging to implement in an electronic environment. But, EHR vendors have expressed interest in incorporating these PCPI and NCQA performance measures into their products based on several factors:

- Anticipated requests from physician practices to incorporate measures such as these into their product for quality improvement initiatives
- Expectation that private health plans and the federal government will require reporting of performance measures

This project will create a process to communicate the data necessary for EHR vendors to implement performance measure reporting functionality within their products and develop

standards for performance measure reporting. It will also enable updates to that information on a regular basis in a way that is not disruptive to the core EHR product and its functionality and that will assist measure developers in learning the best ways to support vendors in integrating performance measures with their products.

Work Group Objectives

The overall goal of this initiative is to bring together experts in the field of ambulatory performance measure development and implementation in order to remove the obstacles of measuring performance in the ambulatory care setting and to facilitate use of performance measure functionality in EHR systems by physicians. This objective will be addressed by two work groups made up of representatives of performance measure development organizations, EHR vendors, measure implementers, and clinical end users. The work groups will be presented a test set of two measures that have been endorsed by NQF and are currently being tested by CMS and AQA. The test set will serve as use cases for the work groups.

The activities of each work group are shown below. For details on the current membership of the work groups, please refer to the “Governance Structure”. The sponsors of this project will be responsible for coordinating and communicating the respective efforts of these work groups with related organizations (e.g., AHIC, HITSP, CCHIT), that may leverage this knowledge. The work groups met on October 31, 2006 to kick off this initiative. The objectives shown below were agreed upon by each work group at that time.

Work Group A Objectives – Performance Measures for Practice Improvement:

1. Using the test set of two performance measures (Diabetes: HbA1c Control and Coronary Artery Disease: Antiplatelet Therapy) as use cases, for each critical concept that applies across all performance measures:

- Identify and document current practices across EHRs and practice sites
- Propose a best practice model

First set of critical concepts:

- Identifying patients with the target condition
- Determining whether or not the encounter occurred in the patient’s “medical home”
- Determining how long patient has been receiving care at that “medical home”

- Determining who the responsible party is (parties are) for the care delivered
 - Linking exclusions with the treatment decision
2. Make recommendations for possible “structural measures” (e.g., assuring an accurate and current problem list) that would be stepping stones toward the use of EHRs to assist physicians in quality improvement and reporting

Work Group B Objectives – Performance Measures Integration and Reporting:

1. Identify work group deliverables, timeline for production of those deliverables, and implementation schedule for EHR vendors

Performance Measure Delivery from Measure Developers to EHR Vendors

2. Determine a standard process for presenting clinical and technical specifications for performance measures to EHR vendors that would minimize the effort necessary for a vendor to include and coordinate clinical logic on which the measures are based
3. Establish a method and a schedule for providing updates to the underlying data that are not disruptive and minimizes coding changes on the part of the software vendor

Performance Measure Data Export from EHR Products

4. Establish a standardized report of performance measures
5. Provide implementation guides for the standard set of data elements required to accurately report performance measures to CMS and for anticipated health plan and others’ reporting requirements
6. Test the feasibility of a defined data extraction standard for data integrity, clinical accuracy and comparability

Deliverables and Product Description

In order to meet the objectives of this project the following deliverables will be developed.

Work Group A Deliverables – Performance Measures for Practice Improvement:

1. Defined set of data elements for a test set of PCPI and NCQA measures that includes all data elements necessary for calculating and reporting the test set of performance measures
2. Gap analysis of data elements that are currently difficult to capture electronically
3. Documentation of variances across clinical sites and EHR systems for each of the critical concepts identified
4. Model of best practice for addressing each of the critical concepts
5. Recommendations for structural measures that would assist physicians in quality improvement and reporting

Work Group B Deliverables – Performance Measures Integration and Reporting:

Import from measure developers to EHR vendor

1. Defined method, format, content and schedule of performance measure specification delivery to EHR vendors
2. Plan for development of implementation guides for performance measure calculation, including data elements and calculation methodology
3. Test implementation guidelines for public review by EHR vendor community

Export of performance measure report

4. Plan for development of standardized report for performance measure reporting
5. Plan for adoption of standard report for performance measure reporting
6. Establish a standardized report of performance measures and test the feasibility of a defined standard report for data integrity, clinical accuracy and comparability