

Characteristics of Optimal Clinical Quality Measures for Health IT Tiger Team

Karen Kmetik, Chair

April 30, 2012 - 10:00 to 11:30/Eastern

Tiger Team Membership

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Karen Kmetik

American Medical Association

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National Partnership

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Healthbridge

Federal Ex Officio

Patrice Holtz, CMS, HHS

P. Jon White MD, AHRQ

Staff

Amy Gleason, ONC

Jacob Reider, ONC

April 30th Discuss clinical and patient-reported outcomes measures

May 11-May 18 Email exchange on summary recommendations

Outcome Measure

Bolded Baseline Requirement



Required for 2016



Not Required for 2014

Usability	Feasibility	Accuracy	Standard Terminology
<p><u>☑The patient population is consistent enough to track the outcomes for the necessary timeframe.</u></p>	<p>Functionality requirements? Who should have access to outcomes information (eg, primary care physician being aware of readmissions)</p> <p>How to handle outcomes that are “avoidance of..”</p>	<p><u>☑</u> Data are available to risk adjust the measure. (and is there a validated algorithm?)</p>	<p>Any unique terminology issues?</p>

Patient Reported Outcome Measure

Bolded Baseline Requirement



Required for 2016



Not Required for 2014

Usability	Feasibility	Accuracy	Standard Terminology
<input checked="" type="checkbox"/> A reasonable workflow change would enable patient-reported information to be collected in proper time interval (eg, 1 and 3 months post surgery) and incorporated into the EHR.	<input checked="" type="checkbox"/> <u>There exists a “place” and “method” to record the data in the EHR.</u>	<input checked="" type="checkbox"/> Any need to verify accuracy? Scale interpreted correctly by patient?	<input checked="" type="checkbox"/> There is an existing standard terminology.

An example of this type of measure is patient reported outcome after knee replacement.

Discussion