## Agenda IV: Follow-Up from October Advisory Committee Meeting

HCAI Leadership Team

Bruce Spurlock, Hospital Quality Measure Expert & HCAI Consultant



# Discuss Two Options for Measure Selection

HCAI Leadership Team





### What are we aiming for?

• Each hospital to report around **13 measures** total, including:

- Structural equity measures (to be discussed today)
- **Stratified quality** measures (4 recommended in October, continued discussion today)
- Why 13?
  - Alignment with other state-wide efforts:
    - Covered California (6 measures)\*
    - Department of Managed Health Care (13 measures)\*\*

<u>\* https://www.healthaffairs.org/content/forefront/california-s-marketplace-innovations-driving-health-plan-accountability-quality-and</u>
<u>\*\* https://www.dmhc.ca.gov/AbouttheDMHC/DMHCPublicMeetings/OtherMeetings/HealthEquityMaterials.aspx</u>



# Important Points to Consider

The statute requires "measures recommendations" by 12/31/22.

 Recommendations on data submission format and action plans in 2023

Disparities are not the same as overall quality performance.

• High performing hospitals could have many major disparities and low performing hospitals may not have as many.

Some measures, like volume measures, are more effectively analyzed at the state (HCAI) level.

This is the beginning – our collective understanding and insights will grow and evolve.



#### **Option A:** Core + Supplemental Quality Measures

<b>Structural Measures</b> (All hospitals to report)	<b>Core Measures</b> (All applicable hospitals report)		<b>Supplemental Measures</b> (Each hospital to report on 5 of their	
- Structural health equity	 1 НС	Confirmed on 10/6 CAHPS – Would recommend		choosing) 1.
<ul> <li>Structural health equity measure(s)</li> <li>To be discussed 11/3</li> </ul>	ho AC 2. HC ed AC 3. Ho (re ad 4. Bre	CAHPS – Would recommend ospital (recommended by C on 10/3/22 to adopt) CAHPS – Received information ducation (recommended by C on 10/3/22 to adopt) ospital-wide readmission rate ecommended by AC on 10/3/2 dopt) reastfeeding rate (recommend C on 10/3/22 to adopt)	22 to	<ol> <li>To be discussed 11/3</li> <li></li> </ol>

- Hospital waivers for core measures where services aren't provided e.g., non-birthing hospitals
- Hospital waivers for alternate measures where a special circumstance goes outside 12-15 measure options



#### Option B: All Quality Measures Required

<b>Structural Measures</b> (All hospitals to report)	Core Measures (All applicable hospitals report)
<ul> <li>CMS Culture of Equity Measure(s) (To be discussed on 11/3/22)</li> <li>To be discussed 11/3</li> </ul>	<ol> <li>HCAHPS – Would recommend hospital (recommended by AC on 10/3/22 to adopt)</li> <li>HCAHPS – Received information and education (recommended by AC on 10/3/22 to adopt)</li> <li>Hospital-wide readmission rate (recommended by AC on 10/3/22 to adopt)</li> <li>Breastfeeding rate (recommended by AC on 10/3/22 to adopt)</li> <li>Breastfeeding rate (recommended by AC on 10/3/22 to adopt)</li> <li>To be discussed 11/3</li> </ol>

- Hospital waivers for core measures where services aren't provided e.g., non-birthing hospitals
- Hospital waivers for alternate measures where a special circumstance goes outside 12-15 measure options
- Some hospitals will submit fewer measures because not all measures will apply



#### Committee Discussion: Option A vs. B

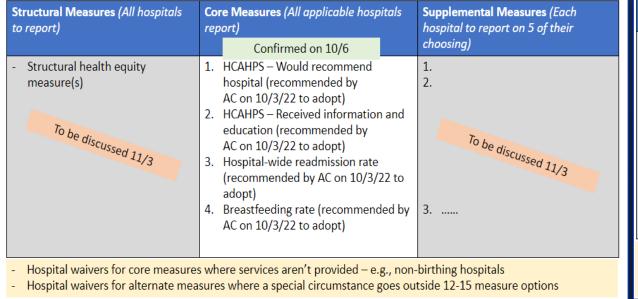
	Pros	Cons
Option A: Core + Supplemental Quality Measures	<ul> <li>Provide flexibility for hospitals to report on measures that align with existing efforts or are otherwise most relevant to their communities</li> <li>HCAI to receive data across a wider variety of measures, which may yield greater insight into existing disparities and inform future iterations of the reporting program</li> </ul>	<ul> <li>Potential for hospitals to "cherry pick" measures</li> </ul>
Option B: All Quality Measures Required	<ul> <li>Ensures that all hospitals report on all applicable measures that the committee deems highest priority</li> </ul>	<ul> <li>Fewer number of measures will be recommended and reported on</li> <li>Some hospitals will report fewer measures due to applicability constraints</li> </ul>



#### Committee Vote

The Committee votes for one of the following options as a framework for the hospital quality measures selection and reporting process:

#### **Option A:** Core + Supplemental Quality Measures



#### Option B: All Quality Measures Required

<b>Structural Measures</b> (All hospitals to report)	Core Measures (All applicable hospitals report)		
<ul> <li>CMS Culture of Equity Measure(s) (To be discussed on 11/3/22)</li> <li>To be discussed 11/3</li> </ul>	<ol> <li>HCAHPS – Would recommend hospital (recommended by AC on 10/3/22 to adopt)</li> <li>HCAHPS – Received information and education (recommended by AC on 10/3/22 to adopt)</li> <li>Hospital-wide readmission rate (recommended by AC on 10/3/22 to adopt)</li> <li>Breastfeeding rate (recommended by AC on 10/3/22 to adopt)</li> <li>Breastfeeding rate (recommended by AC on 10/3/22 to adopt)</li> <li>To be discussed 11/3</li> </ol>		
<ul> <li>Hospital waivers for core measures where services aren't provided – e.g., non-birthing hospitals</li> <li>Hospital waivers for alternate measures where a special circumstance goes outside 12-15 measure options</li> <li>Some hospitals will submit fewer measures because not all measures will apply</li> </ul>			

#### **Public Comment**

