

**MN Community Measurement
Slate of MNMCM Measures for 2018 Reporting – MARC Recommendation (FINAL)**

	Measure Type	Reported Entity C = Clinic MG = Med Grp H = Hospital	Data Source	Data Collection Method	Endorsement/Use				Key changes	Recommend for Public Reporting in 2018?
					NQF	QPP	Health Plans	SQRMS		
AMBULATORY CARE SETTING										
Community/Population Health										
Breast Cancer Screening	process	MG	Health Plan	Claims	•	•	•		None	Yes
Childhood Immunization Status (Combo 10)	process	MG	Health Plan	Claims/Chart/reg	•	•	•		None	Yes
Cervical Cancer Screening	process	MG	Health Plan	Claims/chart	•	•	•		None	Yes
Colorectal Cancer Screening	process	C, MG	Groups/clinics	DDS	•	•	•	•	Exclusion, encounter type	Yes
Chlamydia Screening in Women	process	MG	Health Plan	Claims	•	•	•		None	Yes
Immunizations for Adolescents	process	MG	Health Plan	Claims/Chart/reg	•	•	•		Combo 2	Yes
Adolescent Depression/MH Screening	process	C, MG	Groups/clinics	DDS				•	None	Yes
Effective Clinical Care										
Comprehensive Diabetes Care: Eye Exams	process	MG	Health Plan	Claims	•	•	•		None	Yes
Controlling High Blood Pressure	outcome	MG	Health Plan	Claims/Chart	•	•	•		None	Yes
Depression - 6 Month Remission	outcome	C, MG	Groups/clinics	DDS	◊	•	•	•	None	Yes
Depression - 6 Month Response	outcome	C, MG	Groups/clinics	DDS	◊					Yes
Depression - PHQ-9 Follow-up at 6 Months	process	C, MG	Groups/clinics	DDS						Yes
Depression - 12 Month Remission	outcome	C, MG	Groups/clinics	DDS	◊	•				Yes
Depression - 12 Month Response	outcome	C, MG	Groups/clinics	DDS	◊					Yes
Depression - PHQ-9 Follow-up at 12 Months	process	C, MG	Groups/clinics	DDS						Yes
Depression - Utilization of PHQ-9	process	C, MG	Groups/clinics	DDS	◊	•			None	Yes
Follow-up Children Prescribed ADHD Meds	process	MG	Health Plan	Claims	•	•	•		None	Yes
Optimal Asthma Control – Adults & Children	composite	C, MG	Groups/clinics	DDS		•	•	•	None	Yes
Optimal Diabetes Care	composite	C, MG	Groups/clinics	DDS	◊	^	•	•	None	Yes
Optimal Vascular Care	composite	C, MG	Groups/clinics	DDS	◊	^	•	•	None	Yes
Osteoporosis Mgmt. in Women with Fracture	process	MG	Health Plan	Claims	•	•	•			2019
Spine: Lumbar Fusion, PRO tool use	process	MG	Groups/clinics	DDS					None	Yes
Spine: Lumbar Fusion – Functional status	outcome	MG	Groups/clinics	DDS	◊	^		•	None	Yes
Spine: Lumbar Fusion – HRQoL	outcome	MG	Groups/clinics	DDS				•	None	Yes
Spine: Lumbar Fusion – Pain (Back)	outcome	MG	Groups/clinics	DDS		•		•	None	Yes
Spine: Lumbar Fusion – Pain (Leg)	outcome	MG	Groups/clinics	DDS		^		•	None	Yes
Spine: Lumbar Disc/Lami, PRO tool use	process	MG	Groups/clinics	DDS					None	Yes
Spine: Lumbar Disc/Lami – Functional status	outcome	MG	Groups/clinics	DDS		^		•	None	Yes
Spine: Lumbar Disc/Lami – HRQoL	outcome	MG	Groups/clinics	DDS				•	None	Yes
Spine: Lumbar Disc/Lami – Pain (Back)	outcome	MG	Groups/clinics	DDS		•		•	None	Yes
Spine: Lumbar Disc/Lami – Pain (Leg)	outcome	MG	Groups/clinics	DDS		•		•	None	Yes
Spirometry Testing Assess/Diagnosis of COPD	process	MG	Health Plan	Claims	•	•	•		None	Yes
Total Knee Replacement, PRO tool use	process	MG	Groups/clinics	DDS					None	Yes
Total Knee Replacement – Functional status	outcome	MG	Groups/clinics	DDS	◊	^		•	None	Yes
Total Knee Replacement - HRQoL	outcome	MG	Groups/clinics	DDS				•	None	Yes
<i>Symptom Control During Chemo – in dev.</i>	outcome	C, MG	Groups/clinics	DDS						TBD
Efficiency and Cost Reduction										
Avoidance of Antibiotic Treatment in Adults with Acute Bronchitis	process	MG	Health Plan	Claims	•	•	•		None	Yes
Total Cost of Care	efficiency	MG	Health Plan	Claims	•				None	Yes
Average Unit Price	efficiency	MG	Health Plan	Claims					None	Yes
Relative Resource Use	efficiency	MG	Health Plan	Claims	•				None	Yes
Utilization Metrics	efficiency	MG	Health Plan	Claims					None	Yes
HOSPITALS										
CMS: -3 mortality measures -2 Medicare Incentive Program Composites -5 Readmission measures	outcome	H	MHA	Hospital claims/ Medical Record	•		•	•	None	Yes
AHRQ Quality Indicators – 1 safety composite	outcome	H	MHA	Hospital claims	•		•	•	None	Yes
CDC's National Healthcare Safety Network (NHSN) – 1 Infection measure composite (HAC-HAI component)	outcome	H	MHA	Medical Record	•		•	•	None	Yes
HCAHPS Survey -10 Domains	outcome	H	MHA	Survey	•		•	•	None	Yes
1 ED Transfer Communications Composite	process	H	MHA	Medical Record				•	None	Yes

Legend: ◊ MNMCM is measure steward ^ On CMS Measures Under Consideration (MUC) list

- NQF - National Quality Forum (endorsed) ■ QPP – Quality Payment Program (includes MIPS, MSSP, ACO or e-CQM) ■ SQRMS - MN Statewide Quality Reporting and Measurement System
- HEDIS - Health Effectiveness Data & Information Set

List of MNMCM's Retired Measures:

- Pediatric Overweight Counseling (DDS measure). Last reported in the 2017 Health Care Quality Report.
Rationale: Statewide rates have topped out with no room for improvement.
- Maternity Care: C-Section Rate (DDS measure). Last reported in the 2017 Health Care Quality Report.
Rationale: The statewide rate was below the national average (lower is better) and remained the same for three straight years. While C-Section is necessary and appropriate for some women, an acceptable target rate is unknown.
- Appropriate Treatment for Children with URI (HEDIS measure). Last reported in the 2017 Health Care Quality Report.
Rationale: Statewide rates have topped out with no room for improvement.
- Patient Experience of Care Survey. Last reported in the 2017 Health Care Quality Report.
Rationale: No longer required by SQRMS and little interest in voluntary participation.
- Health Information Technology (HIT) Survey. Last reported in the 2015 Health Care Quality Report.
Rationale: The 2016 survey had significant changes that no longer corresponded with the public reporting display framework. MNMCM will continue to collect this information on behalf of MDH as part of our SQRMS contract.
- Ambulatory Surg. Center Measures: Timing of Prophylactic IV Antibiotics, Surgical Site Hair Removal, Hospital Transfer
Rationale: Retired in 2015 due to lack of performance gap and removal from SQRMS.
- Well Child Visits (HEDIS measure). Last reported in the 2006 Health Care Quality Report.
Rationale: Did not align with ICSI guidelines.
- Cancer Screening Combined (HEDIS measure). Last reported in the 2010 Health Care Quality Report.
Rationale: Retired when Colorectal Cancer Screening HEDIS measure was retired because used the same denominator.
- Appropriate Testing Children w/ Pharyngitis (HEDIS measure). Last reported in the 2016 Health Care Quality Report.
Rationale: Retired when NQF endorsement removed.

Retired and replaced with another measure:

- Depression Treatment – Continuous Phase Medication Management (HEDIS measure). Last reported in the 2006 Health Care Quality Report. It was replaced with a suite of depression measures.
Rationale: More robust depression measures developed and data collected directly from practices which made it possible to report results at the clinic level and for results to include all patients.
- Use of Appropriate Medications for People with Asthma (HEDIS measure). Last reported in the 2010 Health Care Quality Report. Replaced with the Optimal Asthma Control measure.
Rationale: A more robust asthma measure was developed and data was collected directly from practices which made it possible to report results at the clinic level and for results to include all patients.
- Colorectal Cancer Screening (HEDIS measure). Last reported in the 2010 Health Care Quality Report. It was replaced with the Colorectal Cancer Screening DDS measure.
Rationale: A colorectal cancer screening measure was developed that allowed data to be collected directly from practices which made it possible to report results at the clinic level and for results to include all patients.
- Childhood Immunization Status (Combos 2 & 3) (HEDIS measures). Replaced with Combo 10.
Rationale: The combo 10 HEDIS measure included additional vaccines: chicken pox, Hepatitis A, Rotavirus, influenza.

Withdrawn Measure Development Concepts:

- High tech diagnostic imaging. This measure development concept was deemed not feasible due to lack of data source.
- Readmissions. This measure development concept was deemed not feasible due to lack of data source.
- Colonoscopy Quality. Measures have been specified but not tested.

MNMCM Developed Measures without plans for data collection:

- Health Care Homes: Advance Care Planning
- Health Care Homes: Follow Up After Discharge
- Optimal Risk Reduction (Cross-cutting composite measure including blood pressure, tobacco status and BMI)