ONC Policy Committee October 27, 2009

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Registries and Quality Measures

5) In the context of meaningful use care goals and objectives, what do you see as the most effective, efficient process for arriving at a set of measures that would apply to all or more specialties?

The membership of the Physician Consortium for Performance Improvement® (PCPI) and the established processes of the PCPI for developing performance measures render the organization uniquely positioned to arrive at a set of measures for all specialties.

The PCPI includes more than 100 national medical specialty societies (see attached membership listing) and already has developed more than 200 measures across 40 clinical areas. When measures were needed by CMS for the PQRI program, the PCPI, working with collaborating organizations, developed measures suitable for that implementation program. PCPI now is focusing its efforts on:

- Assuring every specialty has clinically-relevant measures that meet multi-stakeholder objectives (each measurement set to include process, composite, and outcomes measures as appropriate).
- Developing the needed e-specifications so that measures can be integrated in EHR systems.
- Testing the query and reporting capabilities in practice through an "incubator group" called Cardio-HIT (summary attached) and supporting other incubator groups.

Sample of clinical areas represented in PCPI portfolio of measures:

Acute otitis externa / otitis media with effusion Adult diabetes Anesthesiology and critical care Atrial fibrillation and atrial flutter Asthma Care Transitions Chronic kidney disease Chronic obstructive pulmonary disease Chronic stable coronary artery disease Chronic wound care Community-acquired bacterial pneumonia Emergency medicine End stage renal disease - Adult End stage renal disease - Pediatric Endoscopy and polyp surveillance Eye care Gastroesophageal reflux disease Geriatrics Heart failure Hematology Hepatitis C HIV/AIDS Hypertension Major depressive disorder - Adult Major depressive disorder - Child & Adolescent

Melanoma Nuclear medicine Obstructi∨e sleep apnea Oncology Osteoarthritis Osteoporosis Outpatient parenteral antimicrobial therapy Palliative care Pathology Pediatric acute gastroenteritis Perioperati∨e care Prenatal testing Preventive care and screening Prostate cancer Radiology Rheumatoid arthritis Stroke and stroke rehabilitation Substance abuse

Adult influenza immunization*; Colorectal cancer screening*; Problem drinking*; Screening mammography*; Tobacco use*

*Asterisk indicates performance measures included in the preventive care and screening measures collection.

4) What are the benefits, impediments to participating in registries?

Currently, registries receive data from several different sources, including manual entry of data into a web portal. If we envision a registry that receives data from EHRs,

Potential benefits include:

- Assistance to sites re: integration of measures and reporting of measures as well as using data to improve practice.
- A forum for dialogue among physician participants to share issues and best practices.
- Physician practices receive measurement data from their EHR for rapid action but also timely benchmarking reports from the registry.

Current impediment:

• Lack of a widely used standard for exporting data from an EHR to a registry.

8) How are data elements captured and quality measures defined?

The PCPI suggests comprehensive tracking (sample table below) to assure that clinically-relevant measures supported by many stakeholders are developed, specified for EHR integration, tested, and that required functionalities exist.

		PCPI Clinically Relevant Measure / NQF- endorsed® or in Process	Level I and II Specs Available	EHR Vendor/ Physician User Review	Incubator Group Testing	Queriable Fields and Data Coded
Data Elements	Process	$\sqrt{1}$	\checkmark	\checkmark	\checkmark	Outstanding: RxNorm, NDC automatic population of ejection fraction
	Intermediate Outcome					
	Outcome					
	Cost/ Utilization					
	Bundle/ Composite					
	Patient Experience					

Once measures are defined, Level I and Level II EHR specifications are developed as follows:

Level I EHR Specifications

- Describe measure data elements, logic and calculation
- Explicit detail regarding intent of measure
- Human readable

Three components:

- Identification of data elements, including context, relevant code sets, and corresponding code lists
- Visual representation of measure logic (flow diagram)
 Mathematical calculation

Level II EHR Specifications

• For use by software vendors to integrate measure specifications into system

The Physician Consortium for Performance Improvement[®] Membership As of September 30, 2009

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American Gastroenterological Association American Geriatrics Society American Institute of Ultrasound in Medicine American Medical Association American Medical Directors Association American Osteopathic Association American Psychiatric Association American Society for Aesthetic Plastic Surgery American Society for Clinical Pathology American Society for Dermatologic Surgery American Society for Gastrointestinal Endoscopy American Society for Therapeutic Radiology & Oncology American Society of Abdominal Surgeons American Society of Addiction Medicine American Society of Anesthesiologists American Society of Cataract and Refractive Surgery American Society of Clinical Oncology American Society of Colon and Rectal Surgeons American Society of Echocardiography American Society of General Surgeons American Society of Hematology American Society of Neuroradiology American Society of Pediatric Nephrology American Society of Plastic Surgeons American Society of Retina Specialists American Society of Transplant Surgeons American Thoracic Society American Urological Association College of American Pathologists Infectious Diseases Society of America International Spine Intervention Society National Medical Association North American Spine Society Renal Physicians Association Society for Cardiovascular Angiography and Interventions Society for Maternal-Fetal Medicine Society for Vascular Surgery Society of Critical Care Medicine Society of Hospital Medicine Society of Interventional Radiology Society of Nuclear Medicine Society of Thoracic Surgeons The Endocrine Society

Health Care Professional Organizations

American Academy of Audiology American Academy of Physician Assistants American Association of Oral and Maxillofacial Surgeons American Chiropractic Association American Dental Association American Dietetic Association American Nurses Association American Occupational Therapy Association American Optometric Association American Physical Therapy Association American Podiatric Medical Association American Psychological Association American Speech-Language-Hearing Association National Association of Social Workers

The PCPI membership also includes the American Board of Medical Specialties and Member Boards, twenty-eight State Medical Societies and several Federal health care agencies.

Cardio-HIT Incubator Group

A Brief Summary

Cardio-HIT is a physician-led collaborative model for improving cardiovascular care by using evidencebased, nationally recognized, clinical performance measures integrated into electronic health record systems (EHRs).

Participating Sites: Different specialties, practice sizes and EHRs products in use

Site Name	Location	EHRs product
Fox Prairie Medical Group	St. Charles, IL	NextGen
Primary Care		
Midwest Heart Specialists	Lombard, IL	Hybrid EHR
Cardiology		
North Ohio Heart Center	Lorain, OH	Allscripts Touchworks [™]
Cardiology/Primary Care		
Northwestern Medical Faculty Foundation	Chicago, IL	Epic
(Phase I only)		
Physicians Health Alliance (PHA)	Scranton, PA	GE Centricity
Primary Care		
University of Pittsburgh Medical Center (UPMC)	Pittsburgh, PA	Epic
Primary Care	_	

*Sites selected based on 4+ years experience with EHRS

<u>Status</u>

- ACC/AHA/PCPI Coronary Artery Disease and Heart Failure measures
 - NQF-endorsed[™]
 - Included in CMS PQRI and EHRS demo
- Mapped data elements into five different EHRS products
- Resolved implementation issues
- Submitted patient de-identified data to warehouse
- Made benchmarking reports available to sites
- Audited data
- Analyzed exception reporting
- Analyzed location of data in EHRS

Funding

Phase I: Physicians' Foundation for Health System Excellence **Phase II:** Agency for Healthcare Research and Quality

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PHA: Carmen Brutico, MD; Karen Murphy, PhD; Pat Gallacher
UPMC: Gary Fischer, MD; David Pietrzyk
Northwestern: Steve Persell, MD; Jason Thompson