

# CHIPRA Pediatric Quality Measures Program

2nd Annual CMS Medicaid/CHIP Quality Conference  
Improving Care and Proving It!  
June 14-15, 2012

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# The Basics

- The Children's Health Insurance Program Reauthorization Act – Public Law 111-3 – signed by the President Feb. 2009
- AHRQ-CMS Partnership
  - Phase I: Identify initial core set of measures by January 1, 2010
    - For voluntary use by Medicaid and CHIP programs
    - Programs report data to CMS
    - Secretary DHHS reports to Congress
  - Phase II: Develop a Pediatric Quality Measures Program by January 2011
    - Develop and enhance measures
      - Improved core sets for voluntary use by Medicaid and CHIP – Annually beginning January 1, 2013
      - Measures for use by public and private purchasers and programs

# Pediatric Quality Measures Program

- Since Early 2011
- Components
  - 7 Centers of Excellence in Pediatric Quality Measure Development (COEs)
    - 4 year Cooperative Agreements with AHRQ awarded in February 2011
  - 1 CHIPRA Coordinating and Technical Assistance Center (CCTAC)
    - Contract with AHRQ awarded in April 2011
    - Support for COEs collaborative activities; TA to AHRQ, CMS, COEs
  - 2 Representatives from CHIPRA Quality Demonstration Grantees
    - Illinois
    - Massachusetts
  - SNAC (Subcommittee on Children's Healthcare Quality Measures of the AHRQ National Advisory Council on Healthcare Research and Quality)
  - CHIPRA Federal Quality Workgroup
  - AHRQ Staff
  - CMS Staff
  - Public nominators of measures

# The 7 COEs

Acronym	Site	Principal investigator	Sample measure topic
Q-Metric	U Michigan	Gary Freed, MD, MPH	SCD treatment
CAPQuaM	Mount Sinai School of Medicine, NY	Lawrence Kleinman, MD, MPH	Availability of services for high-risk OB
COE4CCN	University of Washington, Seattle	Rita Mangione-Smith, MD, MPH	Care coordination for CSHCN
PMCoE	University of Wisconsin, Milwaukee	Ramesh Sachdeva, PhD, JD	Dental treatment
NCINQ	National Committee for Quality Assurance, Washington, DC	Sarah Hudson Scholle, DrPH	Adolescent depression screening and followup
CEPQM	Children's Hospital, Boston	Mark Schuster, MD, PhD	Readmissions
CHOP	Children's Hospital of Philadelphia	Jeffrey H. Silber, MD, PhD	Duration of enrollment

# PQMP Activities: Scientific and Feasibility Workgroup

- Goal: CHIPRA requires measures that are:
  - Evidence-based,
  - Understandable,
  - Able to identify disparities,
  - Able to measure quality at the State, health plan, and provider levels of aggregation (at a minimum)
- Above a charge to SNAC; Scientific and Feasibility Workgroup fleshed out
- Workgroup Participants: COEs, State grantees, CCTAC
- Chair: Lawrence Kleinman, MD, CAPQUAM
- Activities to date:
  - Identification of “desirable attributes” for assessing measures
  - Creation of CHIPRA Candidate Measure Nomination Form (CPCF)
- Challenges:
  - Science of quality measurement relatively new
  - Other measurement standards may not apply
  - Assessment of measures will require judgment by SNAC

# CPCF – Components

Section	Topic	Example
I	Basic Measure Information	Numerator statement
II	Summary Statement	
III	Detailed Specifications	
IV	Importance of the Measure	Importance to Medicaid/CHIP
V	Reliability and Validity	Evidence for Measure Focus
VI	Identification of Disparities	Efforts to Stratify by Race
VII	Feasibility	Data Availability
VIII	Levels of Aggregation	Health plan – intended?/used?
IX	Understandability	Describe usefulness to families
X	Health Information Technology	Capture in routine workflow
XI	Additional information	Submitter contact information
Other	Glossary	

# PQMP Activities: Aggregation Workgroup

- Goal: CHIPRA requires that measures be reported at the following levels at a minimum:
  - State (e.g., for reporting to CMS and then Congress)
  - Health Plan
  - Provider
- Workgroup Participants: COEs and State Grantees
- Co-chairs: Eric Schneider, COE4CCN; Robert Saunders, NCINQ
- Activities to date:
  - Identify varying levels of aggregation at which measure results can be reported
  - Construct a worksheet that measure nominators can use
  - Produce a product
- Challenges:
  - Many potential categories of aggregation
  - Definitions (e.g., provider)
  - Level of detail for CPCF

# PQMP Activities: Race/Ethnicity/Socioeconomic Status Workgroup

- Goal: Identification and elimination of disparities required by CHIPRA
- Participants: COEs, State grantees
- Chair: Jeffrey Silber, CHOP
- Activities:
  - Meaning of disparities (Paula Braveman, RTI subcontractor)
  - Matching approach (Jeff Silber)
  - RAND approach (Marc Elliott)
  - Product to come
- Challenges:
  - Availability/variability of data
  - Defining a disparity versus a difference

# PQMP Activities: Informatics Workgroup

- **Goals: e-specification of measures**
  - Share knowledge on approaches
  - Standardize across COEs if possible
- **Participants: COEs, State Grantees, CCTAC, AHRQ**
- **Activities:**
  - Identify which States are using EHRs for quality measurement
  - Share strategic information across COEs
    - Share activities of ONC contract work on CHIPRA measures
    - Share how COEs are e-specifying measures
    - Share other guidance
- **Challenges**
  - E-measurement is an emerging activity – learning as we go

# PQMP Activities: Early and Periodic Screening, Diagnosis and Treatment (EPSDT) Workgroup

- Goals: Explore expansion of EPSDT measures to include technical quality
- Participants: COEs, State Grantees, CCTAC, AHRQ, CMS
- Chair: Christina Bethell, CAPQuaM
- Activities:
  - Developed workgroup discussion guide to frame key issues and questions
  - Developed starting point EPSDT logic model
  - Gap analysis of existing quality measures relevant to EPSDT
  - Held 3 workgroup teleconferences and other one-on-one calls
  - Product: EPSDT Workgroup Summary, December 2011
- Challenges:
  - Concurrent CMS National EPSDT Work Group

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Subcommittee on Children's Healthcare  
Quality Measures of the AHRQ National  
Advisory Council on Healthcare Research  
and Quality (SNAC)  
Process 2012

# Charge to SNAC

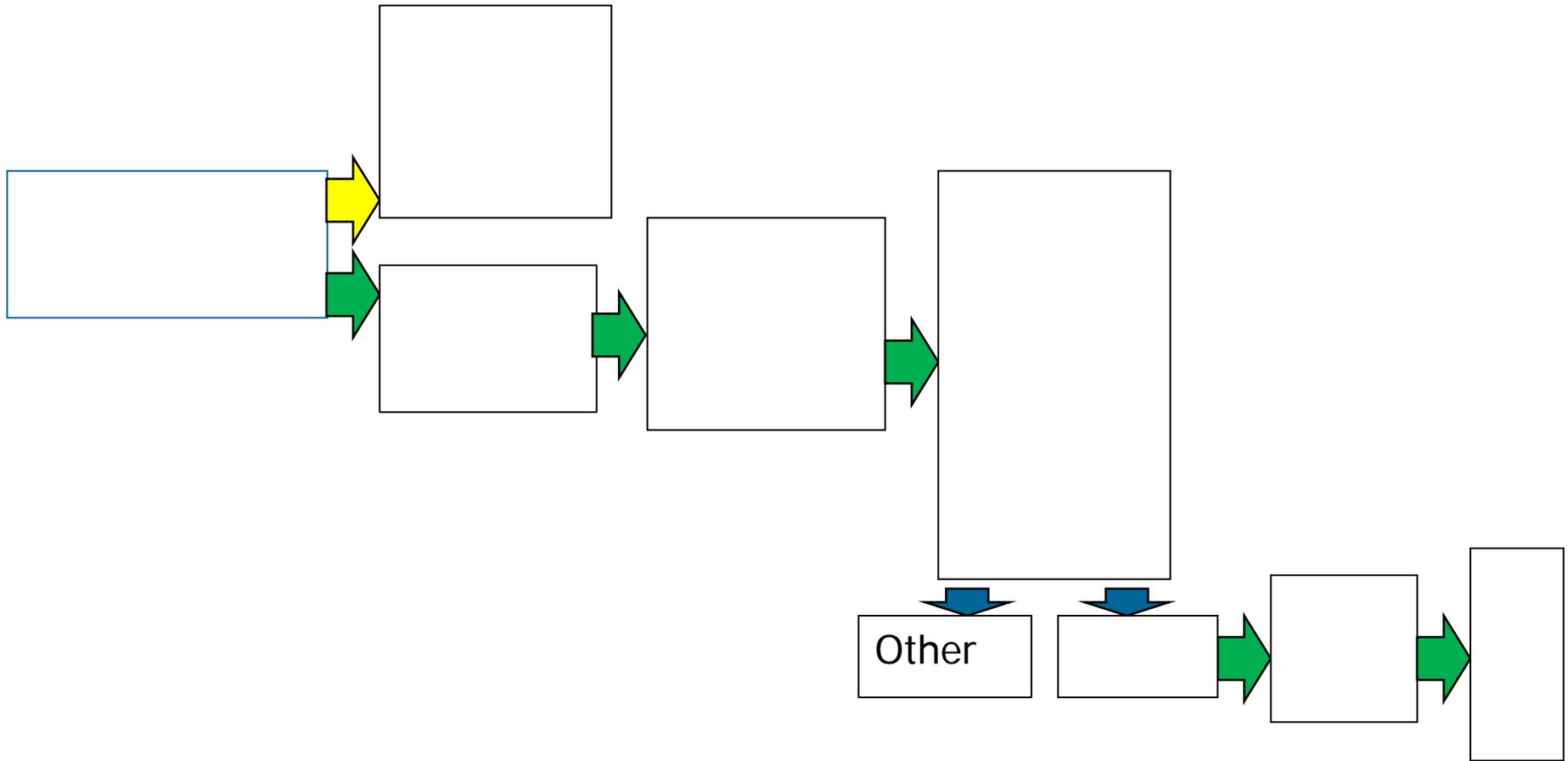
- Assess measures submitted by the public and COEs for potential recommendation as:
  - Improved core measures for voluntary use by Medicaid and CHIP programs
  - Measures for use by other public and private programs
- Use CHIPRA criteria
- Report to the Chair, NAC

# SNAC Members

Charles Gallia*	Mary Evans	Diane Rowley
Charles Irwin*	Glenn Flores	Stephen Saunders
Elizabeth (Betsy) Anderson	Paul Glassman	Alan Spitzer
Andrea Benin	Sherrie Kaplan	Rajenu Srivastava
Gerard Carrino	Clint Koenig	Carole Stipelman
Stephen Downs	Sharon-Lise Normand	Jeffery Thompson
Naihua Duan	Ann Page	Kirsten Thomsen
Kim Elliott	Laura Pickler	Feliciano Yu

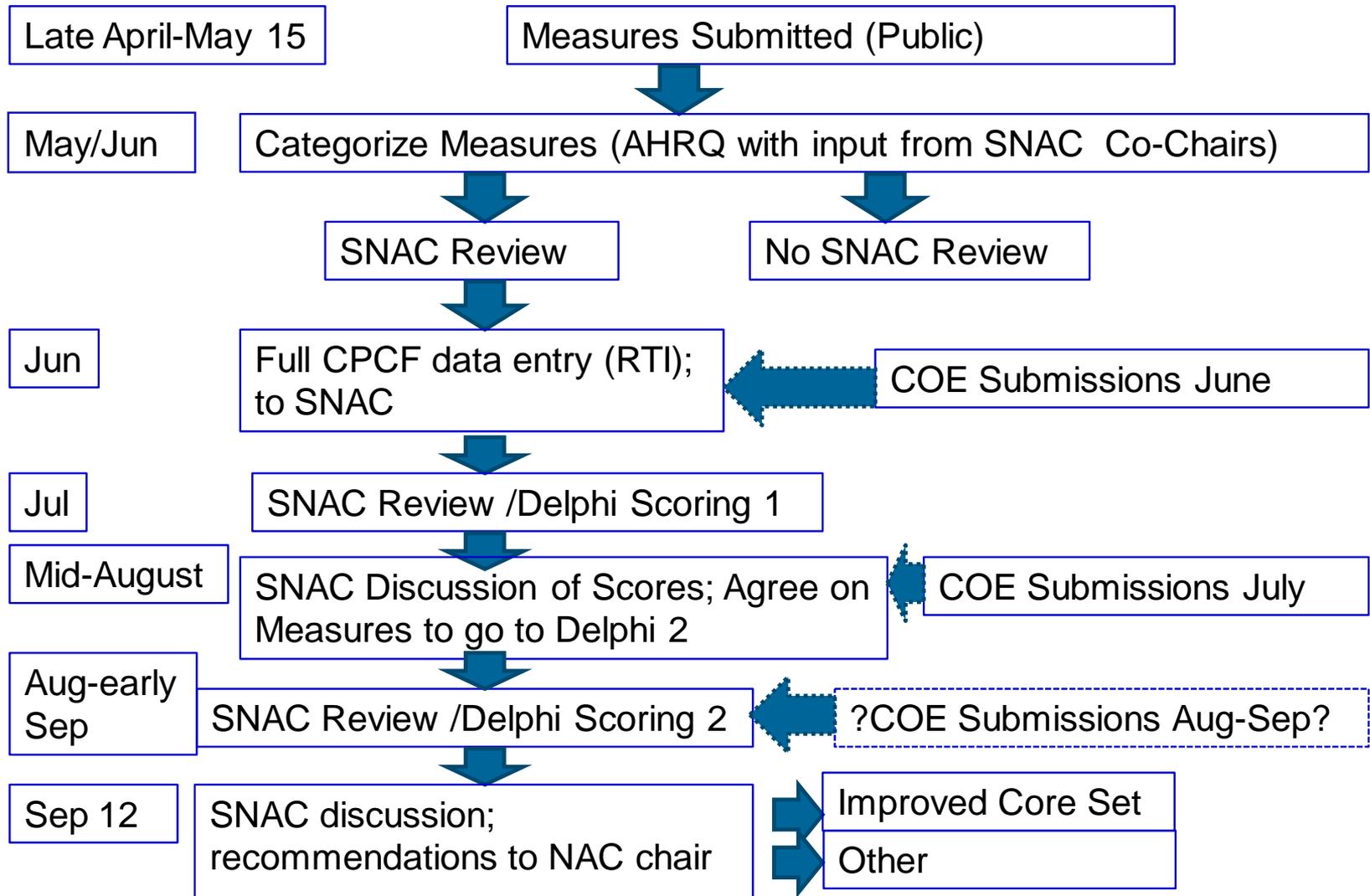
\* Co-Chair

# PQMP Overall Flow 2012



Legend: SNAC - Subcommittee of the AHRQ NAC ; NAC – AHRQ National Advisory Council on Healthcare Research and Quality ; CMS – Center for Medicare & Medicaid Services; ImCS – Improved Core Set; Secy – Secretary; FRN – Federal Register Notice for Public Posting

# DRAFT SNAC Process 2012



# 2012 Nominations Summary

- Public Nominations:
  - <http://www.gpo.gov/fdsys/pkg/FR-2012-02-24/html/2012-4267.htm>
  - N = 77 (as of May 15, 2012)
- Expected COE Nominations (Summer 2012—Measure development and testing)
  - NCINQ
    - Adolescent Well-Visits
      - Chlamydia Screening and Followup
      - Tobacco Use Screening and Followup
      - Adolescent Depression Screening (Followup to come)
  - CHOP
    - Duration of coverage
  - PMCoE
    - ADHD
    - Perinatal Content
    - Dental Treatment

# Summary

- CHIPRA is an unprecedented opportunity for
  - Children's healthcare quality measurement - building the science
  - Children's healthcare quality improvement (driven by measurement)
  - Broad stakeholder involvement
- Measure enhancements
  - 43 Topics for COEs
- Challenges
  - Small numbers of children in specific settings
  - Disparities identification
  - Capacity of Medicaid and CHIP programs
    - Number of measures
    - The best measure or the most feasible measure?
- Stay tuned: <http://www.ahrq.gov/CHIPRA>