Annual Updates Workgroup

Focus:

The Annual Updates Workgroup was comprised of CMS personnel, contractors and stakeholders who develop, update and/or implement the electronic clinical quality measures (eCQMs). The Workgroup was established to improve the quality, timing, transparency, and definition of eCQM changes published annually.

History and Background:

The Annual Updates Workgroup came out of the December 8-12, 2014, eCQM Kaizen Event. The discussion at this meeting led to identification of challenges and a desired future state. A summary of the Kaizen Event is provided at this link https://ecqi.healthit.gov/file/12536 on the eCQI Resource Center.

Goals and Objectives:

Challenges:

- A definition of "substantive" change to a measure is needed to enable prioritization of changes.
- The standard changes planned to be implemented in 2015 will be extensive. It is unclear as to whether health IT vendors and providers have a sense of the extent of these planned changes.
- The annual update process is evolving, making it difficult to plan resources and turnaround times from one year to the next.
- Health IT vendors, providers, and developers need notification from NLM regrading what code system versions will be used in the measure update when they are finalized in January.

Desired Future State:

- Develop release notes that show how measures have changed line-by-line to address the needs of health IT vendors, providers and stakeholders.
- Create an agile change review process that 1) quickly posts potential changes and their solutions for public comment, and 2) makes informed recommendations to developers and stewards as to which changes should be made.
- Define timeliness targets for responses to JIRA tickets.

Workgroup Metrics:

1) JIRA tickets resolved faster.
2) Greater transparency of upcoming changes.
3) Updates to technical release notes.
4) Review effort decreased by health IT vendors and providers.
5) Reduction in measure errors.

Results – December 2014 to April 2016 Annual Update:

1) JIRA tickets resolved faster

In the past year Mathematica has been working to improve three metrics;

    i.   the time it takes for tickets to be properly triaged within JIRA to the appropriate measure development teams.

ii. the time it takes for assigned measure development team to post responses to these tickets (response time).
iii. the accuracy and consistency of the responses posted.

To address the first concern, Mathematica created new usernames, "Mathematica EP CQM Team" and "Mathematica EH CQM Team," so reporters may easily recognize who the appropriate contact is for a given issue. Additionally, Mathematica communicated with JIRA staff to refine their auto-assigning system. If reporters do not specify an "Assignee" in JIRA, but reference an EP or EH measure, the tickets will be properly assigned.

To address the second and third concerns, Mathematica developed a program that automatically recognizes when tickets in JIRA are assigned to Mathematica and initiates a workflow for posting responses. This system reduces response time by eliminating email exchange which allows Mathematica to more systematically track JIRA responses and easily recognize patterns across measures and projects for accuracy and consistency of responses.

Since making these changes, response time has decreased across both projects. Response time on EP has decreased by ~15 days and on EH it has decreased by ~30 days.

2) Greater transparency of upcoming changes
In an effort to increase transparency with stakeholders, CMS sought feedback regarding proposed changes to measures for the 2016 Annual Update. Stakeholders had an opportunity to review proposed changes and draft measures in advance of the publication of the 2016 measures.

From June to November of 2015, stakeholders were invited to participate in a Change Review Process (CRP) to review and provide recommendations on potential changes. Measure developers presented changes planned for the 2016 Annual update at monthly webinars. CRP attendees discussed the changes and voted on recommendations. Recommendations focused on minimizing provider and health IT vendor burden in the collection, capture, calculation, and reporting of eCQMs.

In January 2016, CMS posted a sample of sixteen draft measure packages to provide health IT vendors with a preview of the changes to measures resulting from standards updates. In February, CMS provided stakeholders an opportunity to review all 93 draft measures that included all planned measure value set, logic and header changes for the 2016 annual update. These postings offered provider program participants and health IT vendors the opportunity to preview draft specifications and provide CMS feedback on their technical capability to test Health Quality Measures Format (HQMF) code by directly consuming machine readable XML files for eCQMs. This review allowed CMS to identify instances where XML code produced errors so that issues could be resolved before posting the updated measures in April 2016.

3) Updates to Technical Release Notes
The Annual Update Workgroup sought feedback on the technical release notes (TRNs) to determine how they could be redesigned to meet the needs of health IT vendors and eCQM implementers. Feedback was compiled and grouped into themes: value sets, format, and content. The workgroup discussed feedback and determined which suggestions would be feasible for immediate implementation and upcoming updates.

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For the 2016 Annual Update, the TRNs were redesigned to include two new columns: "Measure Section" and "Source." In previous years, the TRNs included the "type of TRN" (header, logic, or value set), however the redesigned TRNs also include the measure section (e.g. Initial Population, Denominator, Numerator, etc.). If a change affects multiple sections of the measure, the TRN is repeated for each applicable section. The "source" column will identify the source of the change (e.g. measure lead, expert work group review, or JIRA CQM ticket). For those changes identified by a CQM ticket, a link will be provided to that ticket for further transparency. The redesigned TRN format was shared with a few heath IT vendors for their reaction and input. Feedback was positive and indicated that the detail, specificity of the measure section, and links to JIRA added value and would help to meet short implementation timelines. Additional feedback that could not be implemented for the 2016 Annual Update will be considered for future updates.

The following metrics are still being evaluated:

4)   Review effort decreased for vendors and providers.
5)   Reduction in measure errors.

For more information on the Annual Updates Workgroup, contact Jenna Williams-Bader at Bader@ncqa.org.

For information on current opportunities to engage with the eCQI Community visit the eCQI Resource Center at https://ecqi.healthit.gov/ecqi/engage-ecqi.