

EXECUTIVE SUMMARY

MOVING FROM MEASURE MADNESS TO MEASURES THAT MATTER

While the value of measurement is clear, measurement is also clearly out of control and in need of reform.

While providers, patients, consumer groups, payers (government and commercial), and professional societies are united in their commitment to the provision of high-quality, safe, patient-centered care, they are often divided on what and how to measure and report. As noted by the American Hospital Association, opportunities to make meaningful enhancements in quality and patient safety may be lost because there is a lack of focus and agreement on which measures can help improve patient outcomes.¹

As indicated by recent calls for consensus on measures, the healthcare industry—including providers, government, managed care, and others—has begun to recognize the unintended consequences of divergent measurement demands, but much more needs to be done. This document is intended to contribute to this national dialogue.

HANYS' VISION

As we envision the future state of quality measurement, all stakeholders—healthcare providers, clinicians, commercial payers, government agencies, and patient representatives—will collaborate to achieve a sensible framework that leverages and maximizes use of a common set of valid, reliable, and evidence-based measures. These measures will inspire and improve outcomes across the continuum while contributing to provider-specific innovation and ongoing efforts toward excellence in patient care.

MEASURE MADNESS

The current environment is chaotic. Hospitals and other providers must report on hundreds of measures that are required by government and commercial payers, accreditation agencies, professional societies, and registries. Underlying the collection and reporting of each measure is a complex system of specifications, definitions, data abstraction, analysis, and reporting, consuming significant time and expenses and drawing from limited clinical, information system, and administrative resources. Despite the abundance of existing metrics, new measures are being developed to address the fundamental shifts in how care is paid for (volume to value) and delivered (integrated, preventive care at lower costs).

While many measures evaluate the same focus area or patient population, the measure specifications may be different, requiring providers to understand and implement distinct methodologies and systems. This lack of alignment and coordination, coupled with the sheer

volume of quality measures and the limitations of current electronic health record (EHR) technology, has created an environment of measure madness—displacing and redirecting resources from meaningful improvement efforts.

HANYS' CALL TO ACTION

Measures that Matter is a Call to Action, urging the healthcare field to collaborate on building a parsimonious measurement system that achieves the Triple Aim of better patient care, better health outcomes, and lower costs. HANYS urges the field to:

- ✓ **Streamline**—commit to the minimum number of measures needed to evaluate healthcare quality, outcomes, and value;
- ✓ **Align**—with nationally-endorsed, evidence-based measures;
- ✓ **Focus**—on only those measures that target the most vital aspects of care, are actionable, tailored to the patient population, and that offer opportunities to directly and positively impact patient outcomes; and
- ✓ **Collaborate**—with key healthcare stakeholders, including patients, payers, regulators, and providers, to coordinate efforts.

These basic principles aim to achieve a sensible balance that fulfills the need to measure quality and safety, without distracting limited resources from ongoing improvement, patient care, and innovation.

MEASURE MANAGEMENT STRATEGIES FOR PROVIDERS

In addition to issuing the Call to Action for external entities, HANYS' Statewide Steering Committee on Quality Initiatives encourages healthcare organizations to streamline their internally-driven measurement efforts to focus on the measures that matter. Achieving this goal may require conducting an assessment of the many internal hospital quality improvement efforts and associated data collection, and putting in place coordinated strategies such as:

- ✓ a centralized internal oversight system charged with responsibility for evaluating and determining which measures an organization will use;
- ✓ a method for evaluating and categorizing measures based on their value and utility;
- ✓ established criteria to assess the importance of specific quality measures within the organization; and
- ✓ a weighting system that applies numerical values to the evaluation process.

This document was prepared under the guidance of HANYS' Statewide Steering Committee on Quality Initiatives. HANYS and its members are committed to collaborating with others in the healthcare field to make this vision a reality, knowing that patients across the country depend on healthcare providers to use metrics that drive excellence, innovation, and quality improvement.