Test Site Engagement: CMS MACRA Grant-Pathology Measures

Project Purpose:

The Centers for Medicare & Medicaid Services (CMS) has provided funding to American Society for Clinical Pathology (ASCP) to develop pathology electronic clinical quality measures (eCQMs). The cooperative agreement name is Medicare Access and CHIP Reauthorization Act of 2015 (MACRA) Funding Opportunity: Measure Development for the Quality Payment Program. As part of its measure development process, CMS requests the support of hospitals to serve as test sites for this project.

The purpose of this project is to develop pathology-focused electronic clinical quality performance measures (eCQMs) that incentivize value-based care both within laboratory medicine and among allied medical specialties.

The end-to-end processes required to support the development of electronic clinical quality measures (eCQMs) for use in electronic health records (EHRs) include testing with real world data. As part of this measure development process, the Project Team is seeking to engage with potential hospital and laboratory test sites, and vendor organizations to provide support for testing of future state NPQR eCQMs under development that will be considered for use in national quality reporting programs.

Benefits of Support

As a result of supporting eCQM testing, participating sites and vendors can expect value-added benefit in several areas, including:

1. **Added Opportunities for Improved Patient Care** — Early insight into measure concepts and specification approaches intended to drive improved patient care and elevated outcomes along with more meaningful measures.

2. **Improved positioning for future measure implementation should the tested measure(s) be included in national quality measure programs** — Healthcare organizations who participate in measure testing efforts will:
    - Benefit from working directly with the measure development team to fully understand all measure requirements, thereby minimizing ambiguities during implementation;
    - Have already incorporated the necessary workflows and technical capabilities required in advance of formal requirements for reporting the measure(s); and
    - Have the opportunity to evaluate measure specifications and recommend changes that better reflect real-world clinical practice and improve performance in advance of implementation in federal programs.

3. **Improved opportunities for more closely aligned interaction with the EHR vendor and collaboration with internal laboratory and clinical champions and Information Technology (IT) staff** — The most successful eCQM testing approach is one that includes early engagement across the measure development team, hospital clinical and laboratory champions, IT staff and

the EHR vendor(s). The Project Team can help facilitate the process of engaging with EHR vendors (if necessary) to help support implementation of the measure(s). Additionally, EHR vendor(s) participating in measure testing efforts will have an early look into the technical implementation requirements to enhance services to other users.

Financial Considerations

Committing the time and effort necessary to participate in measure testing collaboration can be intensive and challenging for prospective test sites. Since government contracts and funding constraints prevent measure developers from fully reimbursing incurred costs, there is typically an honorarium amount determined at the time of agreement to help offset a portion of the test site costs. CMS continues to explore options for acknowledging organizations that support measure testing activities. Ultimately, participation in early testing efforts allows both the measure developer and site to collaborate on approaches to strengthen measures, while also allowing the prospective site to gain insights into new measurement areas CMS is considering, as noted above.

Testing Approach

The testing approach aligns with current National Quality Forum endorsement criteria[1] and standards and will involve EHR feasibility, implementation, reliability and validity testing requirements for a minimum of one (1) eCQM. Prospective test sites may be asked to support one or more of the phases described:

- **Phase I (Feasibility Testing)—**Ability to perform feasibility testing via a structured online survey tool in order to provide qualitative and quantitative data to determine the following: data element availability, data accuracy, clinical and technical workflows and application of national standards
- **Phase II (Implementation Testing)—**Ability to demonstrate capability to electronically evaluate simulated test data and generate a performance report from the EHR (or associated business intelligence or analytics application platform) with calculated measure outcomes; and then to use that measure programming against a sample of LIVE patient data to provide a similar performance report for project team adjudication during Phase III Reliability and Validity Testing
- **Phase III (Reliability and Validity Testing)—**Ability to allow for project team clinical abstractors to access (onsite and/or remote, with proper clearances/IRB) a sample of LIVE patient records within the sites EHR system to conduct parallel forms testing. This testing involves comparing and adjudicating performance report outcomes generated by the EHR (or associated business intelligence application or analytic platform) against clinical abstractor manually abstracted results.

[1] http://www.qualityforum.org/WorkArea/linkit.aspx?LinkIdentifier=id&ItemID=88439

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Desired Test Site Characteristics

Characteristic	**Description**
Leadership Buy-In	At the organizational leadership level, the site must be willing to collaborate with the project team (e.g., standing meetings), their EHR vendor or Business Intelligence (BI)/Analytics Application Team, to design and implement the field-testing work. As a collaborative process, multiple decisions would be made regarding policies and practices, such as clinical documentation, workflow, and assignment of roles that require multiple perspectives. It is recommended that the site have an established leadership team or advisory group that can review/approve requests for changes to these policies and practices within a 30-day timeframe
Engaging Internal Clinical and Technical Staff	Both clinical and IT representation is needed to support measure testing as evaluation of both clinical workflow and technical capabilities and implementation is involved depending on the stage of testing
Engaging Vendor Contacts	While local IT staff can and have been used to support measure testing, it is important to engage the respective EHR Vendor or BI/Analytics Application Team early in the process since database queries require access to backend data and subsequent reliability and validity testing will require direct access to the system data (for a sample of patients) and the need for performance report generation from the EHR or connected BI tool or application
Certified EHR Product	The site should have an EHR product that is on the current edition of the ONC CEHRT list, preferably with experience in electronic clinical quality measures implementation and reporting as an indicator of capability to use EHR system in care
Ongoing Education and Training	The site should have a framework in place to educate and train clinical personnel on new EHR or BI/Analytics Application functionality. Training may be accomplished via in-person training, video, or recorded webinars
Institutional Review Board (IRB) Process	If needed, the site should have the experience or ability to obtain IRB approval and HIPAA waivers as required for reliability and validity testing of EHR data against medical records. While testing protocols remain standard, specific requirements can vary from site to site and may depend on the nature of the measure and the extent to which there is access to Personally Identifiable Information/Protected Health Information (PII/PHI) details