

PUBLIC WEBINAR

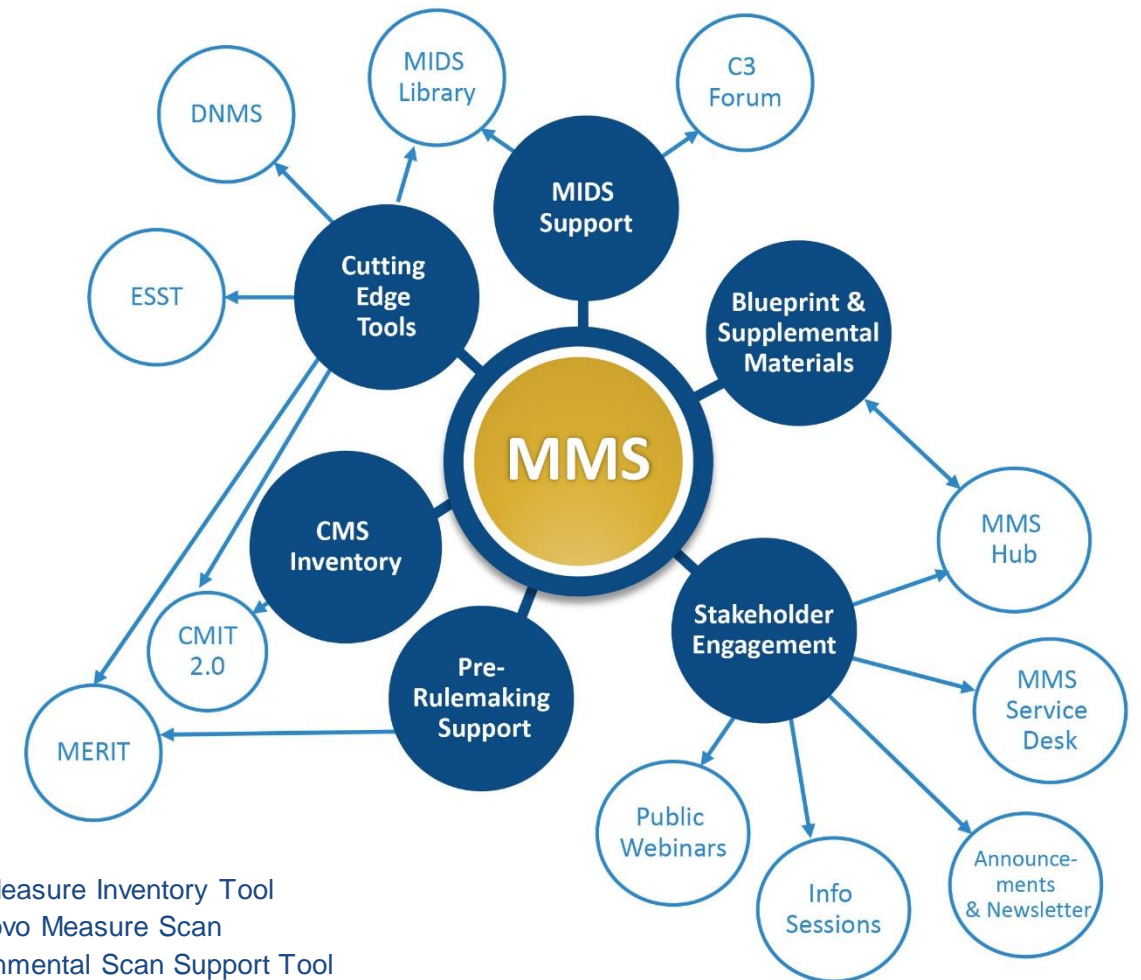
# Advancing Excellence: CMS National Quality Strategy



**Michelle Schreiber, MD**  
**Doug Jacobs, MD, MPH**

# Overview of the Measures Management System (MMS)

- CMS developed the **MMS** to foster and support standardization, flexibility, and innovation in quality measurement.
- The MMS contract supports stakeholder outreach and education, which **includes annual public webinars**, monthly information sessions, a newsletter, and other ad hoc outreach activities.



**CMIT** - CMS Measure Inventory Tool  
**DNMS** - De Novo Measure Scan  
**ESST** - Environmental Scan Support Tool  
**MERIT** - MUC Entry/Review Information Tool  
**MIDS** - Measure and Instrument Development and Support

CMS is committed to providing Education and Outreach opportunities about the quality measure development process to interested stakeholders to improve understanding of the process. CMS also seeks continual feedback to improve and/or expand its offerings to the healthcare quality measure development community and interested stakeholders.

To date, CMS has implemented an Education and Outreach webinar series and has created resource materials that break down and explain various components and challenges in the measure development process. There are dedicated websites, listservs, and roadmap documents that are available to support those that are working in quality measure development, or are just curious and want to learn more about how it is done.



# Welcome and Learning Objectives

Participants will:

- **Hear about the National Quality Strategy**, CMS' long-term initiative promoting quality outcomes, safety, equity, and accessibility for all individuals.
- **Learn about the Universal Foundation of quality measures** that advances the National Quality Strategy and increases alignment across CMS programs.



In March of 2023 the New England Journal of Medicine (NEJM) published an article titled “Aligning Quality Measures Across CMS: The Universal Foundation,” authored by Dr. Michelle Schreiber and Dr. Doug Jacobs.


# Today's Presenters

- **Dr. Michelle Schreiber**

- Deputy Director of the CMS Center for Clinical Standards and Quality (CCSQ) and the Group Director for the Quality Measurement and Value-Based Incentives Group (QMVIG).

- **Dr. Doug Jacobs**

- Chief Transformation Officer at the Center for Medicare (CM), leading center-wide efforts to move the health care system toward value-based care, advance health equity, and promote delivery system transformation.



# Advancing Excellence: CMS National Quality Strategy

Promoting Quality Health Care

- ✓ CMS is committed to striving to ensure the highest quality and safest care for all individuals, coupled with cost-efficient care.
- ✓ Quality and safety initiatives across HHS, such as efforts to improve maternal care, nursing home safety, and behavioral and mental health.
- ✓ CMS will continue to refine the strategy to support continuous and ongoing improvement, which builds upon prior quality strategies such as Meaningful Measures, the AHRQ, National Quality Strategies of earlier years, and incorporates new quality insights from the COVID pandemic into a cohesive quality framework across CMS spanning the entire continuum of care.



# Mission and Vision

## Mission

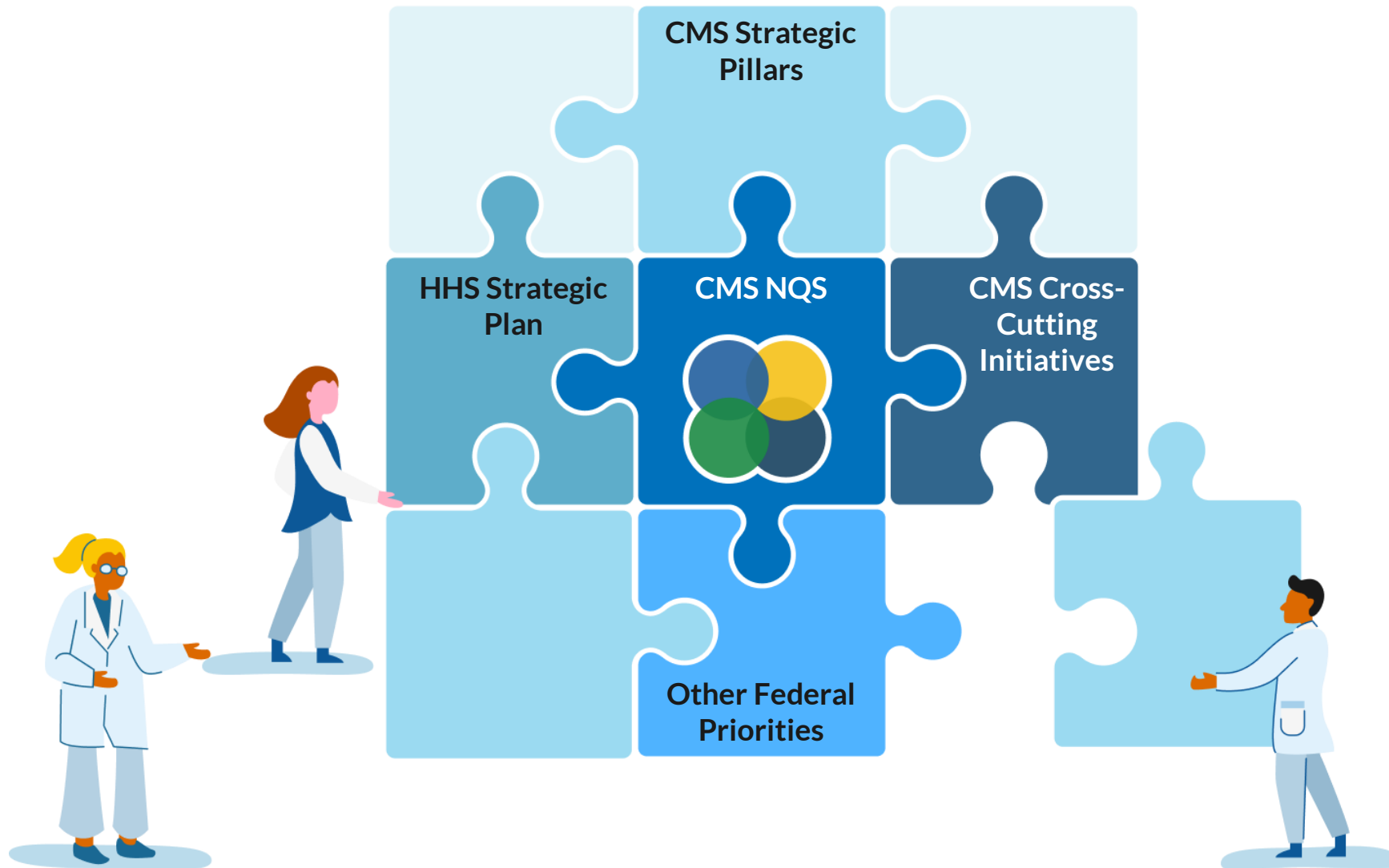
To achieve optimal health and well-being for all individuals.

## Vision

CMS, a trusted partner, is shaping a resilient, high-value American health care system that delivers high-quality, safe, and equitable care for all.



# The CMS NQS Is Part of a Larger Strategy to Improve Health Quality



NQS works to align its quality efforts, not only across CMS but with other federal partners, such as the CDC, AHRQ, FDA, ONC, the VA and DOD healthcare systems, as well as others.

# The CMS NQS Is Part of a Larger Strategy to Improve Health Quality – Specific Areas of Overlap

## CMS Strategic Pillars

- ❖ Advance Equity
- ❖ Engage Partners

## CMS Cross-Cutting Initiatives

- ❖ Elevating Stakeholder Voices through Active Engagement
- ❖ Behavioral Health
- ❖ Maternity Care
- ❖ Rural Health
- ❖ Supporting Health Care Resiliency
- ❖ Safety and Quality of Care in Nursing Homes
- ❖ Data to Drive Decision-Making
- ❖ Integrating the 3Ms (Medicare, Medicaid & CHIP, Marketplace)

## HHS Strategic Plan

- ❖ Health Equity
- ❖ Improve Health Outcomes
- ❖ Behavioral Health Integration
- ❖ Maternal Health

## **Other Federal Priorities**

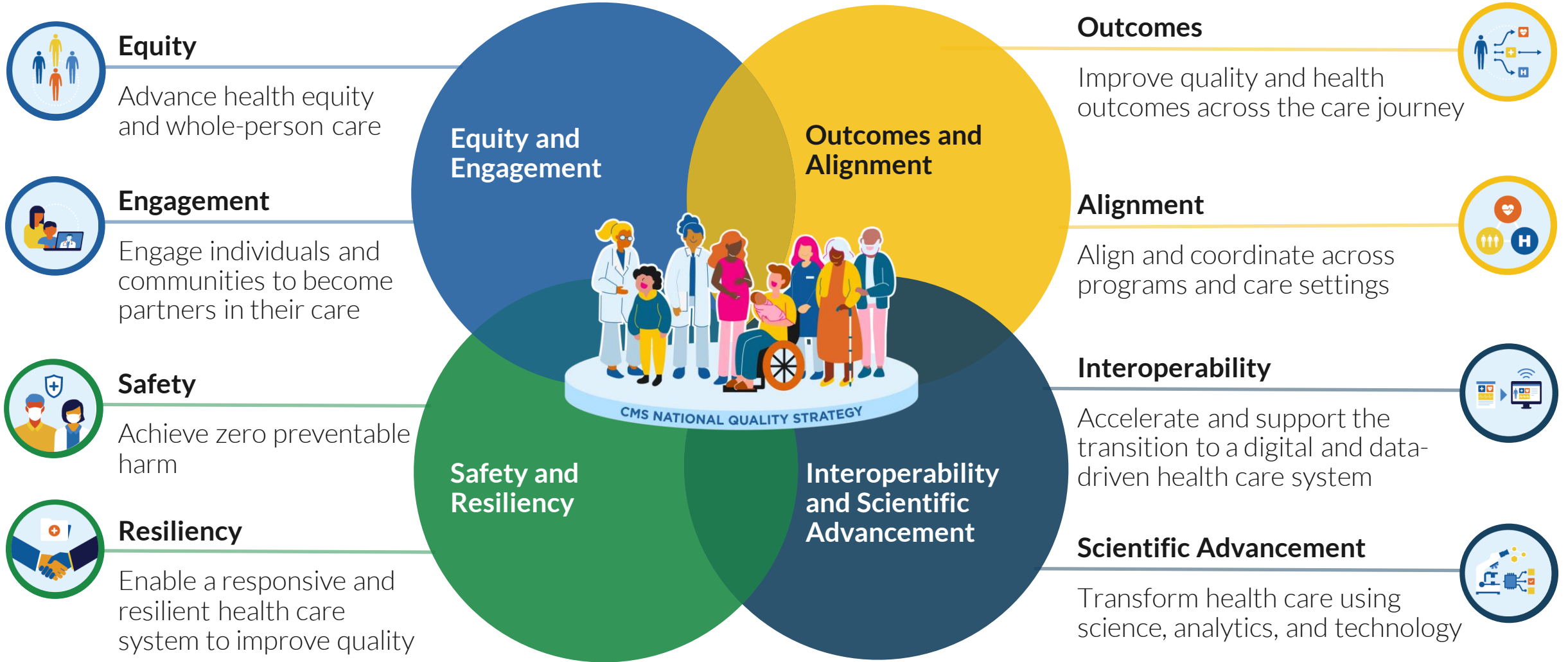
- ❖ Nursing Home Safety
- ❖ Equitable Long-Term Recovery and Resilience
- ❖ Patient Safety

The NQS is not only incorporated into these crosscutting initiatives, but conversely these crosscutting activities are embedded into the quality framework such as improvements in behavioral health, rural health, safety in nursing homes, health equity, patient safety and resiliency, as well as advancing digital data to drive decision making.



# CMS National Quality Strategy Goals

The Eight Goals of the CMS National Quality Strategy are Organized into Four Priority Areas:

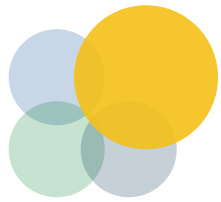


***Engagement and equity***—Care for all individuals, including the whole-person care center focused on the individual, the caregivers, families, across the continuum of care from birth to end of life. Equity ensures all individuals are provided with the highest quality and safest care, and care that reflects their individual goals.

***Safety and resiliency***—Key successes due to reductions in HAIs; however, during COVID we experienced performance declines. The safety systems were not resilient in times of significant stress. We must recommit to a systemic approach to ensuring safety with patients as well as the workforce. Preparation for the next major event through a responsive healthcare system, at the ready to respond to climate change, workforce shortages and new work patterns.

***Outcomes and alignment***—Focus on several areas for improvement, including maternal safety, patient safety, nursing home quality, behavioral and mental health, cancer care, HIV, hepatitis C and sickle cell disease. We work to align quality approaches, as well as quality metrics in multiple VBPs in comprehensive initiatives to support these outcomes.

***Interoperability and scientific advancement***—We experienced great strides during COVID through the rapid development of new vaccines and therapeutics, and advances in IT continue to transform healthcare through interoperable digital data, technologies such as telehealth that allow for care everywhere, and the power of advanced analytics and predictive modeling.



## Outcomes and Alignment

# Outcomes: Improve Quality and Health Outcomes Across the Care Journey



### OBJECTIVE

Improve quality in high-priority clinical areas and support services.

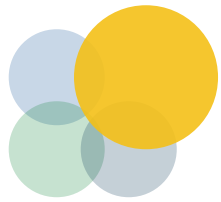
### SUCCESS TARGET

Implement a Universal Foundation\* of impactful adult and pediatric measures across all CMS quality and value-based programs and across the care journey by 2026, stratified for equity.

### HIGHLIGHTED INITIAL ACTIONS

- ❖ Focus on high-impact areas: maternal health, behavioral health, equity, and safety.
- ❖ Deploy comprehensive quality improvement approaches, leveraging evidence-based interventions.
- ❖ Develop dashboards to inform quality improvement, quality performance, and policy decisions.

\*The Universal Foundation is a building-block approach to streamline quality measures across CMS quality programs for the adult and pediatric populations. More information is highlighted on the Universal Foundation Spotlight.



## Outcomes and Alignment

# Alignment: Align and Coordinate Across Programs and Care Settings



### OBJECTIVE

Increase alignment by focusing provider and health care system attention on a universal set of quality measures that address high-priority clinical areas and support services.

### SUCCESS TARGET

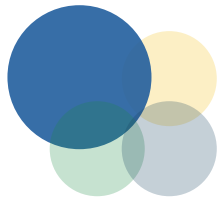
Promote standardized approaches to quality metrics, quality improvement initiatives, and quality and value-based programs across CMS through use of universal measure sets and aligned quality policies.

### HIGHLIGHTED INITIAL ACTIONS

- ❖ Implement relevant measures from the Universal Foundation in applicable CMS quality programs across the care journey by 2026.
- ❖ Pursue greater program alignment across Medicare, Medicaid & CHIP, Marketplace, and Innovation Center models through standardization of data collection and reporting and stratification by sociodemographic data elements.
- ❖ Collaborate with other federal agencies and external partners (e.g., VA, AHRQ, CDC, CQMC) to promote alignment in quality measurement.

We welcome continual engagement with external parties outside of CMS in strategizing how to best align and coordinate across these care programs and settings. Much may be said regarding the alignment in terms of reducing provider burden and knowing what actually works in driving quality improvement and what does not. This topic will be addressed in a bit more detail later in this slide deck about the Universal Foundation.





# Equity: Advance Health Equity and Whole-Person Care



## OBJECTIVE

Reduce health disparities and promote equitable care for all by using standardized methods for collecting, reporting, and analyzing health equity data across CMS quality and value-based programs.

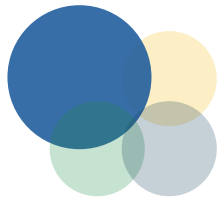
## SUCCESS TARGET

Incorporate equity into the measurement strategy of every CMS quality and value-based program in order to reward high-quality care for underserved populations, beginning in 2022 with full implementation to follow in subsequent years.

## HIGHLIGHTED INITIAL ACTIONS

- ❖ Collect social drivers/determinants of health (SDOH) data across programs and health care settings.
- ❖ Implement and utilize health equity scores and equity-specific measures, such as the proportion of adults screened for SDOH and a commitment to equity attestation measure.
- ❖ Support health equity through regulations, standards, oversight, Conditions of Participation, and quality improvement assistance.

We have proposed to reward excellent care delivered to underserved populations in the Hospital Value-Based Purchasing Program (HVBP), and in the skilled nursing facility (SNF) value-based purchasing programs. We've finalized policies in the Medicare Shared Savings Program (MSSP) to also reward excellent care delivered to underserved populations.



## Equity and Engagement

# Engagement: Engage Individuals and Communities to Become Partners in Their Care



### OBJECTIVE

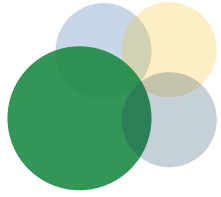
Ensure individuals and caregivers have the information needed to make the best choices for their health, as well as a direct, significant, and equitable contribution to how CMS evaluates quality and safety.

### SUCCESS TARGET

Improve individual and caregiver access to information relevant to health care decision-making and amplify the voice of individuals and communities through expanded outreach and increased use of person-reported measures (comprising a minimum of 25% of the overall measure set or 25% of the overall score calculation weighting).

### HIGHLIGHTED INITIAL ACTIONS

- ❖ Expand individual and community outreach efforts to obtain meaningful, bi-directional engagement and include diverse perspectives in CMS strategy and policy.
- ❖ Promote interoperability of health care data to ensure all individuals have access to their personal health information through patient portals.
- ❖ Increase access to and utilization of public reporting websites (e.g., Care Compare) to promote informed and collaborative decision-making.
- ❖ Integrate feedback from individuals and communities through person-reported quality metrics.



# Safety: Achieve Zero Preventable Harm



## OBJECTIVE

Improve performance on key patient safety metrics through the application of CMS levers such as quality measurement, payment, health and safety standards, and quality improvement support.

## SUCCESS TARGET

Improve safety metrics with a goal to return to pre-pandemic levels by 2025 and reduce harm by an additional 25% by 2030 through expanded safety metrics, targeted quality improvement, patient engagement, and Conditions of Participation.

## HIGHLIGHTED INITIAL ACTIONS

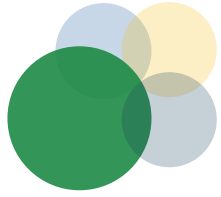
- ❖ Implement tracking to show progress towards reducing harm (e.g., healthcare-associated infections) to pre-pandemic levels and beyond.
- ❖ Expand the collection and use of safety indicator data across programs, including data on key areas such as maternal health, behavioral health, adverse events, and workforce issues.
- ❖ Align across HHS to implement actions from the President's Council of Advisors on Science and Technology (PCAST) to further enhance patient safety.

Zero harm may likely not be achievable as humans do make errors, but our goal is always to strive to eliminate preventable harm through continuous improvement and commitment to the principle of that centuries old Hippocratic Oath, “First do no harm.” We are examining all of our CMS levers, including our VBPs, and our direct quality improvement TA through quality improvement networks. We’ve introduced new eCQMs for safety and are working on a new structural measure to ensure systems, processes, and cultures of safety.

We’re expanding the collection and use of safety indicator data across all of our programs, especially in maternal health with the birthing-friendly designation, behavioral health, and the tracking of adverse events and workforce issues. We encourage the use of IHI and the AHRQ national patient safety action plan, including its valuable self-assessment instrument.

We invite your participation in the free webinar series “Leadership Action Alliance for Safety” cosponsored by AHRQ, CMS, CDC, and the FDA, which is a series of summer webinars focused on what actions can be taken to improve safety in a collaborative mechanism.





Safety and Resiliency

# Resiliency: Enable a Responsive and Resilient Health Care System to Improve Quality



## OBJECTIVE

Foster a more resilient health care system that is better prepared to respond to future emergencies.

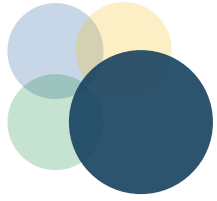
## SUCCESS TARGET

Safeguard vital health care needs by ensuring support for health care workers and systems and addressing workforce issues to reduce burnout and staff shortages.

## HIGHLIGHTED INITIAL ACTIONS

- ❖ Implement quality-focused components of the CMS Supporting Health Care Resiliency Cross-Cutting Initiative by 2025.
- ❖ Implement one or more CMS-specific quality actions consistent with the Office of the Assistant Secretary of Health (OASH) work on the Federal Plan for Equitable Long-Term Recovery and Resilience by 2030.

- ✓ A more resilient healthcare system requires the preparation for a next major event, that we are able to adapt and recover quickly, including safeguards with systems in place for events such as climate change, potential next world-line infectious disease or supply chain shortages.
- ✓ Training/supporting a flexible workforce includes ensuring appropriate staffing, reducing burnout and ensuring psychologic safety.



# Interoperability: Accelerate and Support the Transition to a Digital and Data-Driven Health Care System



## OBJECTIVE

Support data standardization and interoperability by developing and expanding requirements for sharing, receipt, and use of digital data, including digital quality measures, across CMS quality and value-based programs.

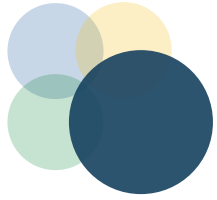
## SUCCESS TARGET

Transition to all digital quality measures and digital data collection by 2030 to reduce burden and enable timely availability of quality data.

## HIGHLIGHTED INITIAL ACTIONS

- ❖ Annually increase the percentage of digital quality measures used in CMS quality programs.
- ❖ Build one or more CMS quality data receiving systems that can receive data using the FHIR standard with API delivery by 2030.
- ❖ Collaborate with ONC to promote interoperability and ensure standardized digital data elements for quality measures through USCDI and USCDI+.

- ✓ Billions of dollars spent in high tech and meaningful use, resulted in high use of advanced EMR systems across most hospitals and clinicians.
- ✓ Began the journey for interoperability and bidirectional exchange, and support through HIE, TEFCA, and the widespread use of patient portals.
  - Patient portals are actively utilized with examples such as translating portal information into multiple languages which results in better patient comprehension.



Interoperability and Scientific Advancement

# Scientific Advancement: Transform Health Care Using Science, Analytics, and Technology



## OBJECTIVE

Support and drive innovation and access through advanced data analytics and streamlined evidence-based reviews of novel technologies and devices for coverage decisions.

## SUCCESS TARGET

Utilize advanced data analytic models to support data-driven policy decisions for quality care.

## HIGHLIGHTED INITIAL ACTIONS

- ❖ Develop policy options to create an accelerated approval pathway for evidence-based review of novel medical devices relevant to the Medicare population.
- ❖ Ensure equity in data collection and algorithms by identifying and addressing bias in health care data and applications.

- ✓ Advanced data analytics models to support data-driven policy decisions for clinical care and identify areas of potential disparity through the stratification of data.
- ✓ Evaluating the underlying algorithms to ensure there is not bias in evaluating artificial intelligent models.
- ✓ Developing policy options for novel therapeutics, such as the approach to new medications with improved outcomes through clinical research.



# The Universal Foundation

## Aligning Quality Measures Across CMS



## Where we are now

- ❖ CMS runs over twenty different quality programs, including programs for individual clinicians, hospitals, SNFs, health insurance plans, and various value-based arrangements, each with different statutory authorities.
- ❖ CMS uses over 500 quality measures for quality reporting and performance evaluation.
- ❖ Quality measures used in different value-based care and quality reporting programs are not always aligned. As a result:
  - ❖ It is difficult to make quality and equity comparisons across programs and settings.
  - ❖ Provider attention is not focused on the most meaningful measures.
  - ❖ The complexity of reporting requirements contributes to provider burden.
- ❖ There is inherent tension between incorporating measures that capture important aspects of quality in our health care system and developing a streamlined set of measures to drive quality improvement.
- ❖ CMS convened the National Quality Strategy Quality Working Group (QWG), overseen by an Executive Steering Committee (CCSQ, CM, CMCS, CMMI, CCIIO, OMH, MMCO, OBRHI), to figure out a path forward.

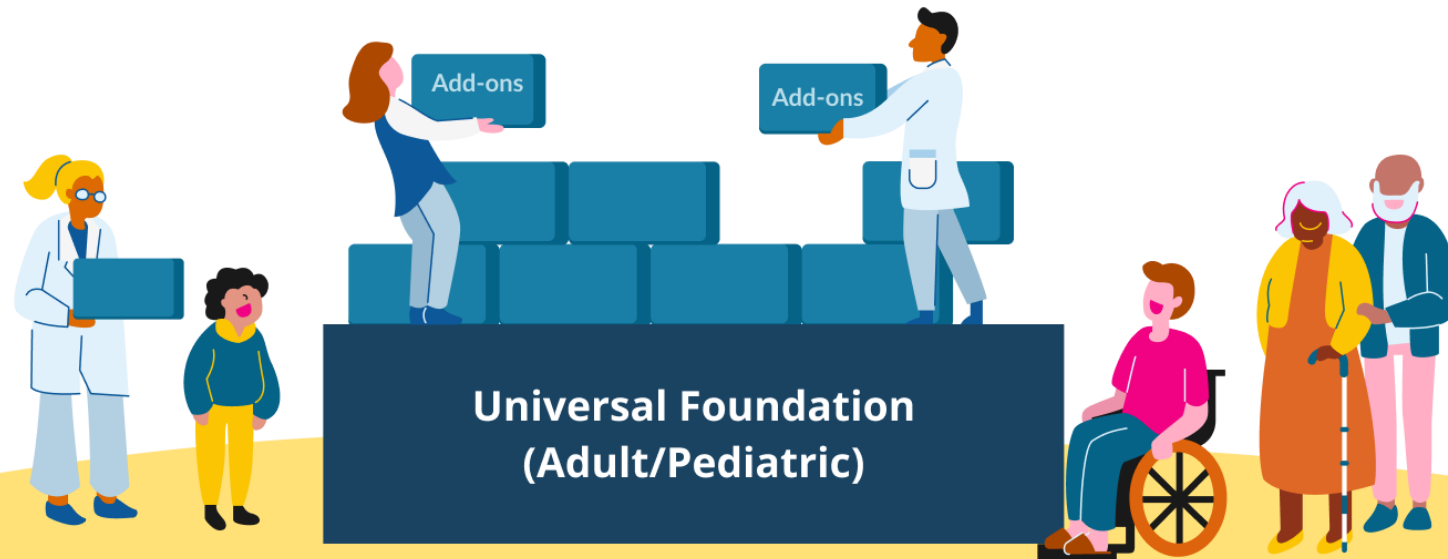
## The Universal Foundation

# Overview

CMS is introducing a “Universal Foundation” of quality measures to advance the overall vision of the National Quality Strategy and increase alignment across CMS quality programs.

The preliminary adult and pediatric measures were announced in a [NEJM article](#) published in February.

- ❖ Additional measures for specific settings or populations will be identified as “add-ons” that can be implemented consistently across programs. These add-ons may include:
  - Maternal
  - Hospital
  - Specialty (MIPS Value Pathways)
  - Post-acute Care
  - Long-term Care



The Universal Foundation of quality measures will span as many programs as is appropriate; however, it will not capture all important aspects of quality across all populations and settings.

The Universal Foundation  
**Intended Impacts**

## The Universal Foundation of quality measures will:

- ❖ **Improve health outcomes** by focusing provider attention on high-priority areas and measures that are:
  - Meaningful
  - Broadly applicable
  - Digitally reported
  - Capable of being stratified to identify and track disparities
- ❖ **Reduce provider burden** by streamlining and aligning measures across programs
- ❖ **Improve standardization** of measurement (e.g., stratification for equity)
- ❖ **Promote interoperability** by prioritizing measures for transition to interoperable digital data

A digital reporting NQS goal involves the seamless automatic transmission of data and information for quality reporting pulled directly from EMRs.

The Universal Foundation  
**Selection Criteria**

- ❖ The measure is of a high national impact
- ❖ The measure can be benchmarked nationally and globally
- ❖ The measure is applicable to multiple populations and settings
- ❖ The measure is appropriate for stratification to identify disparity gaps
- ❖ The measure has scientific acceptability
- ❖ The measure is feasible and computable (or capable of becoming digital)
- ❖ The measure has no unintended consequences

**These measures will be used across CMS quality programs and are prioritized for stratification and digitization. CMMI retains the role to test new and innovative measures.**

- ✓ Morbidity/mortality measures showed potential for improvement.
- ✓ Measures could be benchmarked nationally/globally.
  - Many measures are consistent in the U.S., but there is additional work required to internationally benchmark some measures.
- ✓ Even if the measure is not currently digital, a prioritized list allows one to prioritize measures for digital reporting going forward.

***Unintended consequences***—Putting the measure in place doesn't create unintended consequences that create patient safety issues or any kind of clinical harm to befall patients.



# The Universal Foundation Adult Measures

Domain	Measure Identification Number and Name
Wellness and prevention	139: Colorectal cancer screening 93: Breast cancer screening 26: Adult immunization status
Chronic conditions	167: Controlling high blood pressure 204: Hemoglobin A1c poor control (>9%)
Behavioral health	672: Screening for depression and follow-up plan 394: Initiation and engagement of substance use disorder treatment
Seamless care coordination	561 or 44: Plan all-cause readmissions or all-cause hospital readmissions
Person-centered care	158 (varies by program): Consumer Assessment of Healthcare Providers and Systems overall rating measures (CAHPS)
Equity	Identification number undetermined: Screening for social drivers of health

Domains are from [Meaningful Measures 2.0](#)  
Names and identification numbers are from the [CMS Measures Inventory Tool](#)



These domains are from the Meaningful Measures 2.0, which include the measure CMIT numbers where available.

***Wellness and prevention***—Colorectal/breast cancer effectively screened for and prevented through methodologies of screening, also incorporated into the CMS and Biden administration Cancer Moonshot. Pandemic brought to light the importance of immunization, which looks at immunization across a broad set of preventable diseases.

***Chronic conditions***—Controlling high blood pressure/hemoglobin A1c poor control are exceedingly important measures to improve management of high blood pressure and diabetes which may prevent secondary complications, such as heart disease and stroke and kidney disease.

***Behavioral health***—Includes screening for depression/follow-up plan, and the initiation/engagement of substance use disorder treatment, important in particular due to overdose death spike during the pandemic.

***Seamless care coordination***—Plan all-cause readmissions/all-cause hospital readmissions, depending on what level the measurement is happening, either at a plan level or a provider/hospital level.

***Person-centered care***—Specifically the overall rating measure, which is a push towards more patient experience measures, initiated through the most widely used CAHPS measures here.

***Equity***—Measure in place for the screening of social drivers of health initially in the hospital inpatient quality reporting (IQR).



# The Universal Foundation Pediatric Measures

Domain	Measure Identification Number and Name
<b>Wellness and prevention</b>	761 and 123: Well-child visits (well-child visits in the first 30 months of life; child and adolescent well-care visits) 124 and 363: Immunization (childhood immunization status; immunizations for adolescents) 760: Weight assessment and counseling for nutrition and physical activity for children and adolescents 897: Oral evaluation, dental services
<b>Chronic conditions</b>	80: Asthma medication ratio (reflects appropriate medication management of asthma)
<b>Behavioral health</b>	672: Screening for depression and follow-up plan 268: Follow-up after hospitalization for mental illness 264: Follow-up after emergency department visit for substance use 743: Use of first-line psychosocial care for children and adolescents on antipsychotics 271: Follow-up care for children prescribed attention deficit-hyperactivity disorder medicine
<b>Person-centered care</b>	158 (varies by program): Consumer Assessment of Healthcare Providers and Systems overall rating measures (CAHPS)

Domains are from [Meaningful Measures 2.0](#)  
Names and identification numbers are from the [CMS Measures Inventory Tool](#)

***Wellness and prevention***—Immunization is crucially important to preventing a whole host of different diseases.

***Chronic conditions***—Asthma is one of the most common chronic conditions amongst pediatric populations, and it is the cause of significant morbidity.

***Behavioral health***—Amongst pediatric populations has become an especially acute need amidst the pandemic and beyond.

The Universal Foundation

# Measures for The Future That Might Require Development



## Adult measures

- ❖ Well-being measure
- ❖ Diabetes composite measure
- ❖ Safety-focused measure
- ❖ Tobacco cessation measure



## Pediatric measures

- ❖ Contraception measure

We have identified some gaps for further measure development, and will therefore continually obtain feedback from stakeholders on future steps.

***Adult measure***—Identified an appropriate wellbeing measure to address more holistic measures of wellbeing. Also, a diabetes composite measure looking at all the types of care required by individuals with diabetes.

# CMS NQS Resources

## Universal Foundation

[Aligning Quality Measures across CMS – the Universal Foundation, NEJM article](#)

[Aligning Quality Measures across CMS – the Universal Foundation, website](#)

## CMS NQS Additional Information

[The CMS National Quality Strategy: A Person-Centered Approach to Improving Quality, blog post](#)

[CMS National Quality Strategy Fact Sheet, PDF](#)

## CMS NQS Website

[CMS National Quality Strategy Website](#)

This is our framework to advancing excellence and promoting quality healthcare for all individuals. On this slide are several web links to resources that cover the strategy, including articles and websites with additional information which contain the most recent information on the CMS NQS, as well as the Universal Foundation.

## We need your input to succeed.

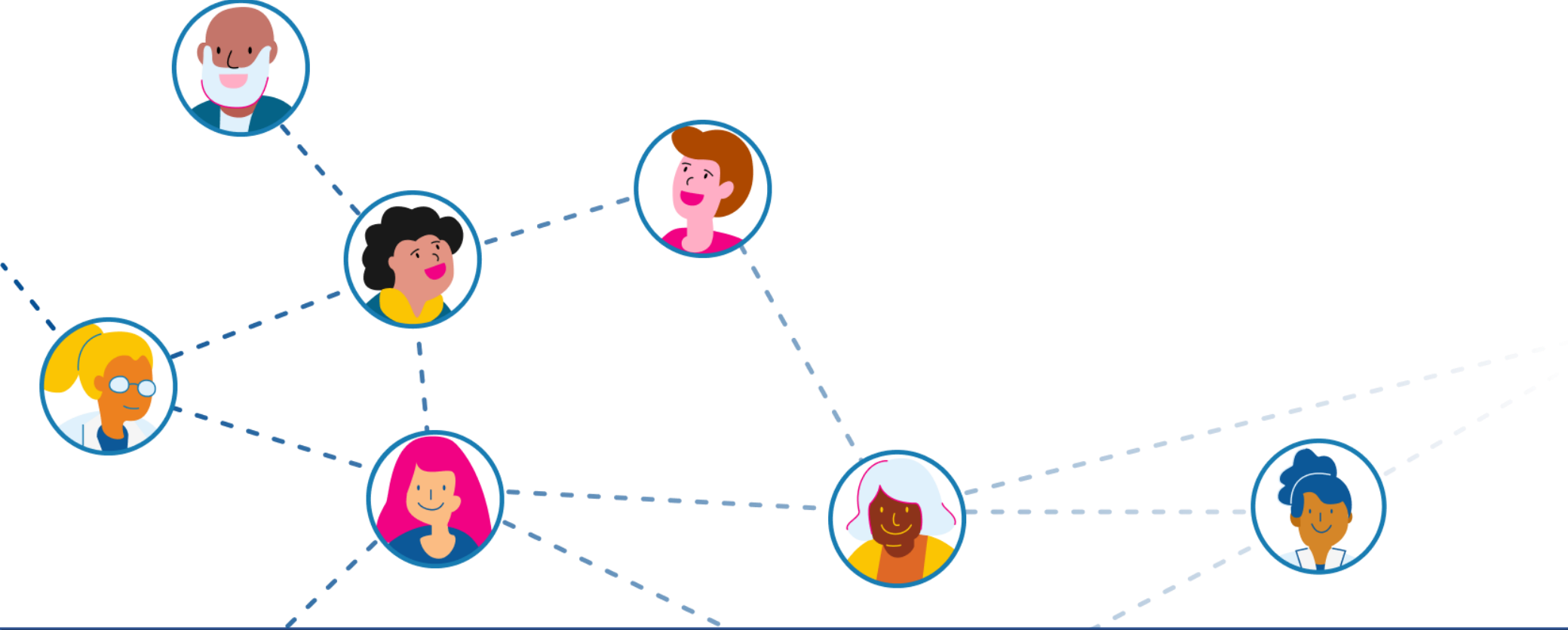
CMS needs the collaboration and concentrated efforts of partners like you to continue to advance the goals of the NQS. Your input is critical to help us forge a high-quality health care system that is impactful to all individuals, families, providers, and payers.

Send feedback to:

[QualityStrategy@cms.hhs.gov](mailto:QualityStrategy@cms.hhs.gov)







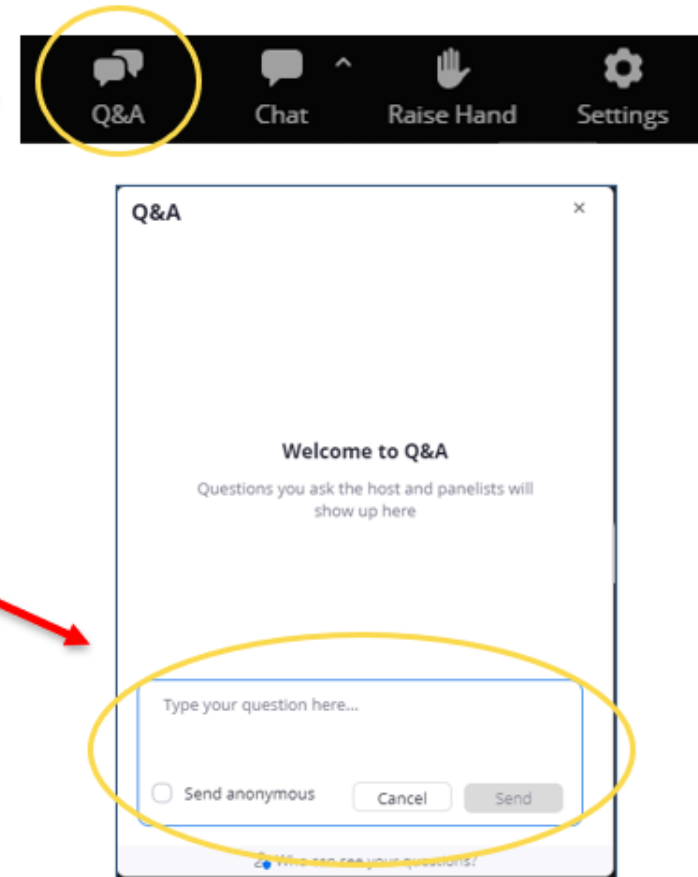
Thank you!

Thank you for all of your efforts in healthcare, for everything that you did during the stressful years of COVID, and for your dedication to promoting the highest quality and safest care for all individuals.

# Questions

Open the Zoom Q&A function

- Type your **question** into the question box
- Press **send** to submit



# Get Connected

Want to learn more?

Visit: <https://mmshub.cms.gov/>



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**CMS**

Gequincia Polk (CMS COR)  
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