

Technical Expert Panel (TEP) Charter

Project Title: Hospice Quality Reporting Program (HQRP) & Home Health (HH) QRP Health Equity Structural Composite Measure Development

TEP Expected Time Commitment

The total project duration is October 2022 – February 2023. The Health Equity Technical Expert Panel (HE TEP) will convene no more than twice via teleconference:

- Meet and Greet Meeting, late October 2022
- HE TEP 1-Day Meeting, mid-November 2022

Additional TEP time commitments will include:

- Reviewing materials in preparation for the HE TEP 1-Day Meeting, which will be sent to members one week prior to the meeting (i.e., early November).
- Providing one round of feedback on the HE TEP summary report, which will be drafted by the measure developer and distributed to HE TEP members for review in January-February 2023.

Project Overview:

The Centers for Medicare & Medicaid Services (CMS) contracted with Abt Associates, Inc. to provide quality measure maintenance and support including the development of a home health and hospice health equity structural quality measure. The contract name is Measure & Instrument Development and Support (MIDS): Home Health and Hospice Quality Reporting Program Quality Measures and Assessment Instruments Development, Modification and Maintenance, & Quality Reporting Program Oversight Support. The contract number is 5FCMC18D0014, Task Order number 75FCMC19F0001. As part of its measure development process, Abt convenes groups of stakeholders who contribute to the direction and provide thoughtful input to the measure developer during measure development and maintenance.

Project Objective:

To consider a health equity structural composite measure that includes organizational activities to address access to and quality of hospice and home health care for underserved populations.

Technical Expert Panel (TEP) Objectives:

1. Review a summary of findings from information gathering activities related to health equity in hospice and home health settings.
2. Review the proposed health equity structural composite measure concept as set forth in the FY 2023 Hospice Notice of Proposed Rulemaking (NPRM), CY 2023 Home Health NPRM, and a summary of public comments received on health equity and the measure concept.

3. Assess face validity of the proposed health equity measure concept.
4. Assess the feasibility of the proposed health equity measure concept by considering potential data sources and other factors that may impact the ability of home health and hospice staff to implement the measure; if it is determined that the proposed measure concept is not feasible, identify alternative health equity measure concept(s) that may be feasible in hospice and home health settings.
5. Based on the TEP review and assessment, provide feedback on the health equity structural composite measure concept for MUC submission.

TEP Requirements:

A TEP of approximately 10 individuals will be charged with reviewing health equity related findings and a summary of rulemaking public comments, assessing the proposed health equity structural composite measure concept, and providing input to refine the measure concept. The TEP will be composed of individuals with differing areas of expertise and perspectives, including representatives from patient advocacy groups, clinical and administrative staff from home health and hospice providers, and health equity experts. Health equity experts may include (but will not be limited to) representatives from diversity, equity, and inclusion initiatives in health care; methodologists and researchers who focus on health equity in clinical settings; and others with expertise in health equity related quality measurement.

Scope of Responsibilities:

The HE TEP's role is to provide input and advice to the measure developer on the health equity structural measure concept under development. The scope of responsibilities will include review of relevant materials (e.g., literature reviews, a summary of findings from key informant interviews, and a summary of public comments on a Health Equity RFI), discussing quality measure concerns such as face validity and feasibility, providing input on the measure concept and potential alternatives, and offering feedback on a report summarizing the HE TEP's findings.

Guiding Principles:

Participation as a HE TEP member is voluntary. The measure developer will record the TEP input in meeting minutes, and a summary report of TEP input may be released to the public. If a participant has chosen to disclose private, personal data, then related material and communications are not covered by patient-provider confidentiality. Patient/caregiver participants may elect to keep their names confidential in public documents. HE TEP organizers will answer any questions about confidentiality.

All potential HE TEP members must disclose any significant financial interest or other relationships that may influence their perceptions or judgment. It is unethical to conceal (or fail to disclose) conflicts of interest. However, there is no intent for the disclosure requirement to prevent individuals with perspectives or strong points of view from serving on the HE TEP. The intent of full disclosure is to

inform the measure developer, other HE TEP members, and CMS about the source of HE TEP members' perspectives and how that might affect discussions or recommendations.

The HE TEP is intended to provide expert input regarding the needs of the hospice and home health populations, especially those that have traditionally been underserved in these settings. Its members are committed to reducing inequities in access and quality of care. The HE TEP will ensure that the developed health equity measure concept is meaningful for the hospice and home health populations and transparent to providers in these settings.

In addition to the individual expertise of each of its members, the HE TEP will collaboratively consider previously gathered health equity information and public comments to assess the validity and feasibility of the health equity structural measure concept. The HE TEP will be responsive to project timelines. Its members will provide timely responses to requests for input, insights, and feedback. The HE TEP will deliberate, provide feedback, and actively engage in virtual interactive vehicles such as polling, chat box discussion, break-out room activities, or whiteboard exercises. Workgroup chairs will help facilitate discussion and resolve points of disagreement.

Estimated Number and Frequency of Meetings:

The HE TEP will convene no more than two times in Fall 2022.

Date Approved by TEP:

TBD.

TEP Membership:

TBD.