

# Behavioral Health Measures Development and Inpatient and Outpatient Measure Maintenance Technical Expert Panel (TEP) Charter

**Project Title:** Behavioral Health Measures Development & Inpatient and Outpatient Measures Maintenance

**TEP Expected Time Commitment and Dates:**

TEP members will participate in no more than quarterly working meetings throughout the duration of the contract (2024-2029). Workgroup meetings of 90-120 minutes each will be scheduled based on need and TEP member availability. All TEP meetings will be conducted via webinar and audio recorded.

**Project Overview:**

The Centers for Medicare & Medicaid Services (CMS) contracted Mathematica to develop measures for select quality reporting and payment programs (listed below). The contract name is Behavioral Health Measures Development and Inpatient and Outpatient Measure Maintenance (BHIOMM). The contract number is 75FCMC18D0032 and the task order number is 75FCMC24F0136.

As part of its measure development process, Mathematica convenes groups of interested parties who contribute guidance and thoughtful input to Mathematica during measure development and maintenance.

Convening the TEP is an important step to promoting transparency and obtaining balanced input from multiple interested parties of diverse backgrounds and perspectives.

**Project Objectives:**

The Behavioral Health Measures Development & Inpatient and Outpatient Measures Maintenance (BHIOMM) project supports the development and/or maintenance of quality measures for the following hospital quality reporting programs:

- Hospital Inpatient Quality Reporting (IQR) Program
- Hospital Outpatient Quality Reporting (OQR) Program
- Rural Emergency Hospital (REH) Program
- Hospital Value-based Purchasing (HVBP) Program
- Hospital-Acquired Condition (HAC) Reduction Program
- Ambulatory Surgery Center Quality Reporting (ASCQR) Program
- PPS-Exempt Cancer Hospital (PCH) Quality Reporting Program
- Inpatient Psychiatric Facility Quality Reporting (IPFQR) Program
- Promoting Interoperability (PI) Program for Eligible Hospitals

These activities enable CMS to develop new measures; continually update measures to reflect the latest evidence; support the latest health information technology standards; and address implementers' feedback in the form of measure revisions, implementation guidance, and insights for rulemaking.

**Technical Expert Panel (TEP) Objectives:**

As part of its measure development and maintenance process, Mathematica requests input from a broad group of interested parties. A well-balanced representation of interested parties on the TEP can

contribute diverse perspectives to consider during measure selection, development, and maintenance. The objective of the TEP is to provide feedback and perspective on the identification, development, specification, testing, maintenance, re-evaluation, and implementation of health-related quality measures used in CMS's quality programs.

**TEP Requirements:**

A TEP of approximately desired 14-16 individuals will meet virtually to provide feedback to measure developers on various measure activities, such as new measure development, drafting measure specifications, and interpreting and applying results from alpha and beta testing and public comment. The TEP will be composed of individuals with differing perspectives and areas of experience or expertise in inpatient psychiatric facilities, hospitals, or hospital outpatient settings, such as:

- Patients and caregivers
- Consumer/patient advocates
- Health care providers (psychiatrists, psychiatric nurses, clinical social workers, psychologists, and others with experience in inpatient psychiatric facilities and other mental health and substance use disorder treatment settings)
- Health system and hospital representatives
- Policymakers
- Epidemiologists and other researchers
- Rural providers and/or providers who can help advance CMS's Rural Health Strategy<sup>1,2</sup> by applying a rural lens to the work, keeping in mind the objectives of the Rural Health Strategy that are relevant to quality measures.<sup>3</sup>
- State health, mental health, and substance use agency representatives
- Experts in measurement science and data sources used to support measurement

**Scope of Responsibilities:**

The TEP will advise Mathematica and its partners (the project team) on the identification and development of clinical quality measures in terms of their importance, scientific acceptability, feasibility, and usability. Additional TEP input may be requested for existing measures. The TEP's specific duties include the following:

- Reviewing proposed measure concepts based on findings from the environmental scan and gap analysis conducted by the project team
- Advising the project team on the prioritization of quality measures
- Evaluating issues related to the importance and implementation of measures identified and developed under this contract
- Providing feedback on the development and specifications of select measures for implementation in CMS's quality reporting programs
- Reviewing and aiding in interpretation of measure testing results
- Reviewing and providing feedback on existing measures
- Reviewing and providing feedback on TEP Summary Reports

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<sup>1</sup> <https://www.cms.gov/newsroom/press-releases/cms-announces-agencys-first-rural-health-strategy>

<sup>2</sup> <https://www.cms.gov/About-CMS/Agency-Information/OMH/Downloads/Rural-Strategy-2018.pdf>

<sup>3</sup> Objectives of CMS's Rural Health strategy that are relevant to quality measures include reducing reporting burden for rural providers, and ensuring that measure sets are streamlined, outcomes-based, and meaningful to rural providers and patients.

TEP members are expected to commit to the anticipated time frame needed to perform the functions of the TEP. To participate fully in discussions, members should read the briefing materials prepared for their review before meetings. They may also be called upon periodically to review information and provide comments between meetings.

**Guiding Principles:**

Participation as a TEP member is voluntary. As part of the TEP meeting, the measure developer will record participants' input in the meeting minutes, which will be summarized in a report that may be disclosed to the public. TEP members will keep TEP materials and discussions confidential until CMS approves materials to be made publicly available. The project team will provide confidentiality in TEP reports by summarizing the discussion topics and removing the names of TEP members who make comments during meetings. 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. TEP organizers will answer any questions about confidentiality.

All potential 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 particular perspectives or strong points of view from serving on the TEP. The intent of full disclosure is to inform the measure developer, other TEP members, and CMS about the source of TEP members' perspectives and how that might affect discussions or recommendations.

Mathematica and its partners will use the following criteria to identify concepts and assess measures for development and maintenance:

Relevance and importance to patients and their caregivers

- Program appropriateness
- Evidence of importance
- Feasibility, usability, and scientific acceptability of measures
- Existence of competing measures
- CMS and federal measurement priorities

The TEP will make decisions by voting or by consensus, depending on the topic. Mathematica will confirm a quorum of 66 percent of members available to consider a vote valid. A consensus recommendation will further require a threshold of voting members greater than or equal to 60 percent of attendees and at least 60 percent of that number voting in agreement. Abstentions will not count in the denominator.

**Estimated Number and Frequency of Meetings:**

TEP members will participate in approximately one virtual meeting per quarter from 2024-2029, with each meeting lasting between 90 to 120 minutes. There may be material to review prior to each meeting which will take no more than 30 minutes.

**Date Approved by TEP:**

TBD

**TEP Membership:**

TBD