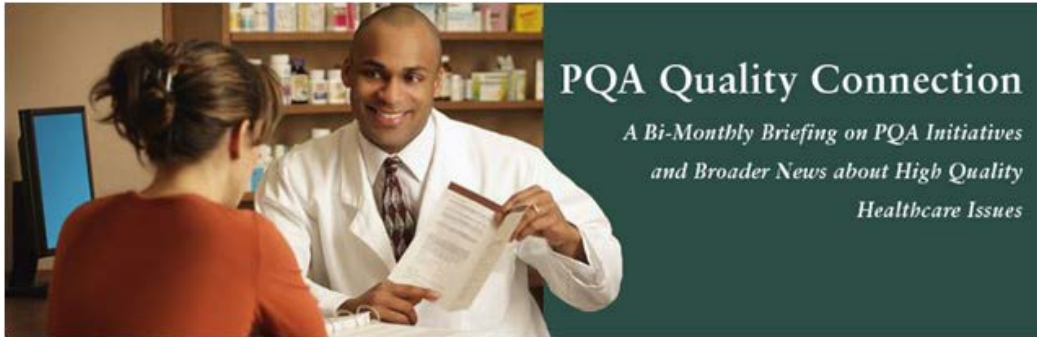




Hot off the Press: Connections to Key Quality Publications

Hot off the Press seeks to connect the reader to the most relevant and recent trials, reviews and commentaries related to health care quality within a focus on medication- and pharmacy-related topics.

Topic: Core Metrics for Health and Health Care Progress:

- **Citation:** Institute of Medicine of the National Academies. Vital signs: Core metrics for health and health care progress. 2015 Apr 28. Available from: http://iom.nationalacademies.org/~media/Files/Report%20Files/2015/Vital_Signs/VitalSigns_RB.pdf.
- **Description:** Currently, there are a plethora of health measures in the marketplace, but there is a lack of consistency between many of them and they tend to narrowly focus on technical processes, instead of system performance and health outcomes. The Committee on Core Metrics for Better Health at Lower Cost, convened by the Blue Shield of California Foundation, California Healthcare Foundation, Robert Wood Johnson Foundation and Institute of Medicine, set out to streamline 15 standardized measures within a core measure set and provide guidance for health performance in the highest-priority areas across the nation. The committee used a four-domain framework—healthy people, care quality, lower cost, and engaged people—to help identify these core measures. This core measure set is designed to be outcomes-oriented and could deliver widespread applications that are meaningful and cross-cutting through multiple levels of the healthcare system. These *Vital Signs* recommendations aim to improve health performance and promote better health care while reducing costs and reporting burden.

Topic: Future of Quality Measurement

- **Citation:** Cassel CK, Kronick R. Learning from the past to measure the future. JAMA. 2015 Sep 1;314(9):875-6.
- **Description:** In a recent viewpoint article, Drs. Christine Cassel and Richard Kronick discussed challenges to national improvement in healthcare quality measurement and the importance of ensuring measures are practical, meaningful, timely, and reliable. A group of 23 quality experts were brought together by the National Quality Forum and Agency for Healthcare Research and Quality to formulate a vision for the future of quality care. During this process, three overarching actions were identified. The first is to align and decrease the number of measures, while targeting measures of high priority. Secondly, the group suggests considering intrinsic factors that motivate physicians to improve care, rather than focusing on extrinsic motivation such as monetary incentives. Engagement of patients, direct-care providers, purchasers, and patient representatives in the measure development process to ensure that measures developed match patients' needs is the third action identified. Additionally, it was noted that timely communication between front-line clinicians and measure developers can facilitate improvement of measures and better refine implementation. The authors also highlight the fact that advances in technology, data availability and delivery system integration are helping to drive the future of healthcare quality measurement and better patient care.

Topic: Sociodemographic Risk Adjustment

- **Citation:** Eisenberg W, Butterfield K. What roles do patient characteristics play in value-based performance? Am J Pharm Benefits. 2015 Jul;7(4):165-167.
- **Description:** In the increasingly value-based healthcare landscape, it is becoming more and more important to control for risk factors that may impact an organization's performance on quality metrics. This is especially true as financial incentives are awarded to high-performing organizations, while low-performing organizations are financially penalized. Controlling for socioeconomic (eg, income, education, occupation) and demographic factors (eg, age, race, ethnicity, primary language) through risk adjustment is emerging as a new standard in measure development. This statistical approach attempts to create a level playing field across healthcare organizations that may be serving a different mix of higher-risk individuals. Socioeconomic and demographic risk factors are the target for

adjustment because they can affect a measure outcome yet have no effect on quality of care. The National Quality Forum is in the midst of a two-year trial program that began in April 2015 in which they are now considering risk adjusting all newly submitted measures for endorsement, as well as previously endorsed measures. PQA has launched a sociodemographic status (SDS) Risk Adjustment Advisory Group to help identify PQA measures that should be risk adjusted and to recommend a risk adjustment methodology. Risk adjustment models are currently in development for the three PQA adherence measures and should be finalized this fall.