

# Advancing Digital Quality Transformation

December 1, 2023 Brad Ryan, MD – Chief Growth Officer, NCQA

The webinar will begin momentarily...

### **Introduction & Objectives**



**Brad Ryan**, **MD** Chief Growth Officer, National Committee for Quality Assurance (NCQA)



Why digital quality and why the industry transformation is occurring now



How digital quality supports a learning health system & value-based care



Development layers supporting digital quality transformation and NCQA offerings



#### Roadmap to digitalize HEDIS® measures



**Questions & Answers** 



Why Digital Quality? Quality, while important, has been fragmented and burdensome

Emerging standards and regulations are enabling a digital transformation

Quality will be better aligned with care delivery and a learning health system

It will lead to reduced burden and costs, better alignment, more relevant measures and ultimately, better care & outcomes

### Why Now?



#### **Industry Feedback**

The market is asking for reduced measure burden, a more effective learning health system, and more support for value-based care.

# Ш

#### **Maturity of Standards**

The industry has taken steps to adopt interoperability standards as regulatory forces drive investment, and quality is the top use case.



#### **Payment Arrangements**

The financial shift from fee-forservice to value-base care continues, driving new priorities and creating greater need for accountability and measurement at all levels and contexts of healthcare.



### Industry Insights: What Are We Hearing?





Measures content can be developed and distributed easily and seamlessly to reduce interpretation, development, and maintenance needed today.





#### Support Learning Health System Use Cases

Measures content can be configurable and used in different workstreams for different use cases, including quality improvement, population management, and analytics.

#### Better Value-Based Care Support

Quality measures must move beyond signals or gates to meet evolving VBC needs. The industry needs connected (data) and consistent (methodology), built around priority populations and conditions, to be relevant and actionable across contexts and accountability models.



In 2016, the 21st Century Cures Act was signed into law "to help accelerate medical product development and bring new innovations and advances to patients."

It included requirements to:

- Promote health information interoperability
- Improve data sharing with patients



### The federal government has also embraced FHIR® and CQL to promote trusted data exchange.

In 2020, ONC and CMS issued rules requiring EHR technologies and health plans to implement FHIR®-based application programming interfaces.

#### The Office of the National Coordinator for Health Information Technology

#### 2020 ONC Rule

 Certified EHR technology (CEHRT) required FHIR<sup>®</sup>-based application programming interfaces (APIs) supporting exchange of all United States Core Data for Interoperability (USCDI) version 1 data elements according to the US Core Implementation Guide (IG) by December 31, 2022



#### 2020 CMS Rule

- Regulated health plans must've implemented FHIR<sup>®</sup>-based APIs
- For patient access of claims, encounter, and USCDI data by July 2021
- To transfer USCDI data among payers by January 2022



More recently, CMS has prioritized digital quality measures to improve the quality and usefulness of clinical data.

CMS has set a goal of transitioning to all digital measures by 2030.

Its "Universal Foundation" aims to align quality measures across CMS quality programs.





Year 1 Year 2 DATA QUALITY 1 Capture 2 Standardize 3 Share USCDI expansion, released Repeats ONC every July, considered for SVAP yearly yearly 0 ~ Define dQM data needs for USCDI consideration and identify data CMS standards priorities for measurement via other pathways (USCDI+) CMS ONC Access the CMS  $( \Diamond )$ **Digital Quality** Strategic Roadmap TECHNOLOGY at: Map data and stand-up FHIR APIs CMS Co) Develop prototype MCT CMS https://ecqi.healthit CMS .gov/sites/default/fil DATA AGGREGATION 3 Share 4 Analyze es/CMSdQMStrate 7 7 Identify role for aggregators for dQM gicRoadmap 0328 CMS 57 22.pdf смз 😰 🏹 party actors/data aggregators J=I Engage federal, state, and industry partners 0. Rapid-Cycle CMS Focus: data, tool, measure alignment

Other Federal/ Centers for Medicare ⊘ Standard-Setting Bodies 😰 Third-Party Actors Private Payers ADVANCING DIGITAL QUALITY MEASUREMENT & Medicaid Services State Agencies CMS Office of the National STRATEGIC ROADMAP 然 EHR Vendors Patients/Caregivers Providers Coordinator for Health Information Technology 🔽 Data Aggregators IT Developers Measure Developers Year 5 And Beyond — Year 3 Year 4 Year 6 Repeats Repeats Repeats Repeats yearly yearly yearly Advance additional digital data sources and data standards to CMS 📿 🔘 🤤 🛞 ONC 😵 support digital measurement and other use cases Advance USCDI+ use cases, as an extension to the USCDI Maintain and expand FHIR standards and Implementation Guides, and maintain alignment with interoperability standards (USCDI, USCDI+) 3 Share 4 Analyze 5 Interpret and apply Stand up FHIR server for Measure Calculation Tool Expand dQMs, leveraging MCT infrastructure and validation (MCT) testing compliant with US-Core capabilities Full Digital Quality MCT development and testing MCT development MCTs ready for production Measurement and testing 5 Interpret and apply Participate in the dQM enterprise Develop guidelines/processes for dQM data aggregation with input from third-Use rapid-cycle K feedback enabled by Rapid-Cycle MEASURE ALIGNMENT 1 Capture 2 Standardize 3 Share 4 Analyze 5 Interpret and apply MCT to improve care Implement accountability measure of interoperability Develop common dQM portfolio in Public and private sector begin to CMS implement common dQM portfolio, consideration of building on standardized data and data quality and interoperability requirements interoperability (staged, as appropriate) Engage stakeholders throughout Strategic Roadmap development and rollout to advance the digital quality measurement and a learning health system STRATEGIC ROADMAP To meet certification requirements, ONC requires health IT developers (e.g., EHR vendors) to: • Make available standardized data (USCDI v1) via FHIR APIs by December 31, 2022 CMS requires regulated health plans to: • Implement FHIR-based API for patient access by July 1, 2021 FOUNDATION Interoperability ONC Requirements Make available all electronic health information in any computable format by August 2023 Transfer USCDI among payers by January 2022

**NCQA** 





ATAO OT NOITO





# Building Blocks of a Learning Health System

How have these activities and organizations worked together in the past?





# Building Blocks of a Learning Health System

How have these activities and organizations worked together in the past?







### **Industry Standardization**

Industry standards bring these previously separate domains into a common expression language (aka interoperability)

# STANDARDS & GUIDELINES

Clinical Decision Support (CDS)

Clinical Practice Guidelines (CPG, PD)

#### ENABLEMENT (INFRASTRUCTURE, TOOLS & RESOURCES)

Fast Health Interoperability Resources (FHIR) Clinical Quality Language (CQL)

#### MEASUREMENT

Digital Quality Measures (dQMs)

Electronic Clinical Quality Measures (eCQMs)

#### DATA COLLECTION & TRANSFER

FHIR® Data Standards: USCDI, Carin for Blue Button, Electronic Case Report, Gravity

## **NCQA Alignment**

How NCQA is building products and programs to deliver on digital quality



STANDARDS & GUIDELINES  Build practice guidance and standards into digital quality content. Configurable measures become usable for quality improvement and population mgt.

#### ENABLEMENT (INFRASTRUCTURE, TOOLS & RESOURCES)

Build resources and stakeholder engagement to support digital quality adoption and implementation.

DATA COLLECTION & TRANSFER Build programs that help standardize data expectations for quality, validate data used for reporting and performance, and build trust in data.



### **Development Layers To Support Digital Quality Transformation**



### **Digital Quality Offerings**

	Offerings	Now	Next
Actionable Content (Standards & Guidelines)	Configurable HEDIS® DQMs with encoded clinical guidance to support expanded use cases	Begin using NCQA Digital HEDIS® content for quality improvement and population management applications.	Use more consistent, prospective guideline content encoded for quality improvement.
	Digital Content Services		
Measurement (Digital Measures)	All HEDIS® measures available as Digital Quality Measures	Gain familiarity with NCQA Digital HEDIS® content and begin using measures on reference CQL engine.	Run digital measures on supported vendor CQL engine. Test against reference CQL engine as desired.
$\square$	Data Aggregator Validation - FHIR	Access your data quality and maturity	Source and validate more electronic

	Data Aggregator Validation - FHIR
	Bulk FHIR® Data Quality Coalition
Data Collection	Data Quality Self-Assessment Tool*
(1111(@)	Automation-First FHIR ® Validation*
	***************************************

 Open-Source Reference CQL Engine

 Digital Quality Implementers Community

 HEDIS® Core Implementation Guide

 Digital Community (Resources, Peer Learning, etc.)

Assess your data quality and maturity against FHIR® standards for quality uses. Optimize your data pipeline (inputs and outputs) for quality use. Source and validate more electronic data for trusted quality insights and measure reporting at lower cost and burden.

Leverage open-source code and Digital Quality Implementer Community to develop and test CQL engines to support digital HEDIS® and other common use cases (e.g., CMS). Leverage Implementers Community to improve CQL engine in alignment with common requirements (e.g., NCQA, CMS, ONC).

Dotted Line = NCQA Applications \*- Future

### **HEDIS® Content: Deciding Your Delivery Method**



### **Digital Quality Transition Highlights By Phase**



### **Digital HEDIS® Transition: NCQA's Phased Approach**

#### PAPER SPECS

**FULLY DIGITAL** 

	Phase 1: Digital Introduction	Phase 2: Digitally Enabled	Phase 3: Fully Digital	Phase 4: Digital Only
Measure Years Implemented What measure years will these characteristics be effective for?	2023	2024-2026	TBD dependent on hybrid measure conversion roadmap (timeline will be announced in 2024)	Dependent on market maturity ~2030
Measure Delivery Method	Traditional Vol 2 Paper Specs	Traditional Vol 2 Paper Specs	Traditional Vol 2 Paper Specs	Digital Delivery through Digital Content Services
What path is taken to receive measure requirements and logic?	Subset of measures digital Delivery via Digital Content Services	Digital delivery through Digital Content Services (no longer available via store "bundles")	Digital Delivery through Digital Content Services	
Digital Measure Availability Which measures are available as digital quality measures?	Subset of measures digital	Admin components of measures fully digital	All measures fully digital	All measures fully digital
Use Cases What different uses will digitalized measures support?	Quality improvement and population mgt	Quality improvement and population mgt HEDIS health plan reporting	Quality improvement and population mgt HEDIS health plan reporting	Quality improvement and population mgt HEDIS health plan reporting
Certification Logic/Validation How does NCQA certify measure logic and execution for reporting?	Traditional Measure Certification	Three options: Pre-Certified, Digital Certification, Traditional Measure Certification (depending on execution framework)	Three options: Pre-Certified, Digital Certification, Traditional Measure Certification (depending on execution framework)	Two options: Pre-Certified or Digital Certification (depending on execution framework)
<b>Execution Engine</b> What path is taken to execute measure requirements and logic?	Traditional development: Build Based on Vol 2 Access CQL reference engine in Digital Content Services	Reference CQL engine through Digital Content Services Use any supported CQL engine Traditional development: Build Based on Vol 2	Reference CQL engine through Digital Content Services Use any supported CQL engine Traditional development: Build Based on Vol 2	Reference CQL engine through Digital Conter Services Use anu supported CQL engine
Hybrid Data Collection	Traditional collection methods	Traditional collection methods	Sunset hybrid sampling collection measure by	Hybrid measure retired and replaced with

What is the methodology for collecting data for hybrid measures? Traditional collection methods

(including hybrid sampling)

measure until all full population

measures using full population data collection

### **Digital Quality Transition Highlights: Deeper Dive**

MEASURES & GENERAL	<ul> <li>Digital measure bundles will no longer be offered in the NCQA store.</li> <li>The only way to access digital HEDIS measures will be through Digital Content Services.</li> <li>As measures are transitioned to digital, narrative descriptions will continue to be available for reference.</li> </ul>
HYBRID REPORTING & DATA COLLECTION	<ul> <li>Administrative portion of measure is fully digital with measures available through Digital Content Services.</li> <li>The digital measure can use clinical data from the clinical data source (e.g. EHR).</li> <li>The "medical record" component for sampling of the clinical data retrieval and collection of clinical data from medical records will use the traditional protocol.</li> <li>Over time, Hybrid measures will be phased out measure-by-measure</li> </ul>
MEASURE CERTIFICATION	<ul> <li>Certified measures delivered with the Digital Content Services reference engine.</li> <li>If using your own or a third-party proprietary engine, digital certification will include:         <ul> <li>Share test decks via API</li> <li>Automatic Scoring</li> <li>API for submission</li> </ul> </li> <li>New Certification methods will be significantly less burdensome and offer real time feedback.</li> </ul>
PROPRIETARY CQL ENGINES	<ul> <li>The Digital Certification Process will validate the engine to support NCQA dQM requirements or any changes to the NCQA code.</li> <li>Recommend joining the Digital Quality Implementers' Community for consistent standards and requirements for implementors.</li> <li>Consider parallel (Digital &amp; Traditional) measurement for a period of time.</li> </ul>



### **Key Takeaways**

NOW



All HEDIS<sup>®</sup> measures will be digitalized and delivered through NCQA Digital Content Services.

#### WHAT IT MEANS

- Use digitalized measures on any CQL engine that meets standard-based requirements.
- Begin to build infrastructure, test, and compare results to traditional HEDIS<sup>®</sup>.
- Using digital measures will reduce Measure Certification burden.
- Hybrid measures will be phased out measure by measure. Over time, this will lessen the need for medical chart review.

In the future, organizations that reference HEDIS<sup>®</sup> Volume 2 to build measures will instead use digital content.

**NEXT** 

#### WHAT IT MEANS

- Eliminates the need to interpret HEDIS<sup>®</sup> specs and code measures.
- Measures will run on any standards-based CQL engine.
- Eliminates the need for traditional Measure Certification.
- CQL engine maintainers should begin planning for this transition.

#### LATER



NCQA will create more clinically meaningful measures that are better connected to VBC priorities and uses.

#### WHAT IT MEANS

- Paves the way for better more meaningful content built around populations and conditions.
- Measures will better support value-based care needs.
- Measures will be able to be released and updated faster.

### **NCQA Digital Content Benefits and Approach**



- 2. Easier to Model Data (FHIR)
- 3. Easier to Collect Data (Policy Alignment)
- 4. Reduced Variability in Logic and Scores

Paper to Software

5. Easy to Update/ Manage



#### Support Full Learning Health System Use Cases

- 1. Content for Data, Guidance and Measures in Each Quality Domain
- 2. Configurable for Many Use Cases (e.g., quality improvement, population management)
- Flexible, Timely Data (across clinical, administrative, lab, registry, etc.)

#### **New Architecture**



- Relevant Across Healthcare Contexts (e.g., payer, provider) and Accountability Models (e.g., ACO)
- 2. Address Top Priority Quality Domains for VBC
- 3. Higher Resolution ("finer brush" than traditional measures)
- 4. Scoped to Highest Value Levers (processes and outcomes) in Each Quality Domain

#### Better Measurement System

### What Path To Choose

If you want to...

Start **using digital content now for** population health and quality improvement and preparing for digital transition

#### Then you should consider...

**Digital Content Services** 

**Digital Community** 

**HEDIS® Core Implementation Guide** 

Build/modify a CQL engine or other infrastructure and tools

Develop your FHIR® data strategy and begin to build data pipelines

Digital Quality Implementer Community

HEDIS® Core Implementation Guide

**Open-Source Reference CQL Engine** 

**Digital Community** 

**Digital Community** 

**HEDIS® Core Implementation Guide** 

**Bulk FHIR® Quality Coalition** 

Data Aggregator Validation - FHIR



# Thank you!

Questions?

More information: www.ncqa.org/digital