



# eCQM Design Group

April 18, 2017

10:00 am – 11:00 am



**CEDARBRIDGE**  
GROUP

# Agenda

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<b>Welcome / Roll Call</b>	Karen Bell, MD	10:00 AM
<b>Approve 4/11/17 Meeting Summary</b>		
<b>Today's Meeting Objectives</b>	Karen Bell, MD	10:05 AM
<b>Review and Finalize Governance, Operational, and General Recommendations</b>	Design Group Members	10:10 AM
<b>Discuss and Validate Final Report and Recommendations</b>	Design Group Members	10:30 AM
<b>Meeting Wrap-up and Next Steps</b>	Karen Bell, MD	10:55 AM

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# Meeting Objectives?

- Finalize Governance, Operational, and General Recommendations
- Validate Final Report and Recommendations
- Finalize Logistics for April 20, 2017 Health IT Advisory Council Meeting

# Design Group Workflow

Roadmap for the Development of a Clinical Quality Measurement System

Validate Stakeholders and Value Propositions

Identify Clinical Data Sources and Data Flows

Validate Components of a Clinical Quality Measurement System and the Scope of Design Group Work

Confirm Functional and Business Requirements and Supporting Use Cases

Discuss Future Planning Needs  
(Governance, Operational, etc.)

# Design Group Timeline

Milestones/Deliverables	Date
Validate value proposition summary Validate clinical electronic data sources necessary for clinical quality measures Review components of a statewide system and priority use case categories	3/07/17
Review preliminary themes from environmental scan/ stakeholder engagement Validate priority use case categories for statewide system Validate progress report to 3/16 Health IT Advisory Council Consider details around the components of a statewide system	3/14/17
Consider draft business and functional requirements for a statewide system	3/21/17
Review synthesis of input and validate recommendations for business and functional requirements for a statewide system	3/28/17
Continued review of synthesis of input and validate recommendations for business and functional requirements for a statewide system	4/04/17
Validate stakeholder business requirements and supporting use cases Consider ongoing planning for operational components and governance of a statewide system	4/11/17
<b>Validate the Final Report and Recommendations to the Health IT Advisory Council</b>	4/18/17
<b>Present Final Report and Recommendations to Health IT Advisory Council</b>	4/20/17

Review and Finalize Governance,  
Operational, and  
General Recommendations

# Governance Recommendations

**A governing entity be established to address the following needs:**

1. Governance authorities
2. Compliance and auditing mechanisms
3. Accountability to and transparency with stakeholders
4. Bylaws and policies
5. Maintenance of a policy framework
6. Clear decision-making processes
7. Principles to guide prioritization of programs and processes
8. Well-defined roles of governance entity and operations
9. Sustainable business model
10. Data governance



# Operational Recommendations

## Operational requirements to be addressed:

1. Hiring and retention of experienced staff
2. Interoperability with existing health IT infrastructure
3. Electronic consent management
4. Quality assurance and quality control programs
5. Technical assistance and communication





# General Recommendations

The **development of a statewide CQM system:**

- 1. Should focus on the Quadruple Aim** of better health, better care, lower costs, and a positive healthcare workforce;
- 2. Should keep the patient as the “north star”** with a vision for a person-centered system;
- 3. Should incorporate all types of quality-related, structured data;** and ingest and create quality measures from different data sources;
- 4. Should include the Design Group’s Functional Requirements;**
- 5. Should interface with provider-specific reporting systems** (such as behavioral health and long-term and post-acute care providers) to the extent possible;



# General Recommendations, cont.

The **development of a statewide CQM system:**

- 6. Should adopt specifications for aligned measures** as they become available [through the efforts of CMS, America's Health Insurance Plans (AHIP), and other national initiatives];
- 7. Should maintain flexibility** as quality measurement improves from measuring processes to measuring outcomes, including patient-reported outcomes;
- 8. Should integrate with other components of Connecticut's health IT infrastructure**, including the state's APCD;
- 9. Should address transparency of costs** and availability of public-facing data over time; and
- 10. Should recognize the key challenges** that will be faced as the system is implemented.



Discuss and Validate  
Final Report and Recommendations

# Final Changes and Outstanding Questions

- Developing Future Use Cases
- Received changes from Design Group members
- Any outstanding questions?

# Next Steps

- **Thursday April 20, 2017 (1:00 – 3:00 pm EDT)**
  - Final Report and Recommendations presented to Health IT Advisory Council



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