Quality Measures
Justin Martello, MD
AAN Quality and Safety Subcommittee

Objectives
• Why you should care?
• What are quality measures (QMs)?
• QM Creation Process
• QM example
• Axon Registry
• QM resources
AAN QMs are required to...

- Have a strong evidence-base
- Address an objectively-identified gap in patient care
- Are relevant to users and actionable in the clinical setting
- Are feasible to collect, measure, and track over time
- Directly measure or lead to desired healthcare outcomes
- Improve or maintain health outcomes, patient safety, quality of life, cost of care, the patient experience, or coordination of care
- Have the capability to be developed into an e-measure (preferred)

AAN QMs are NOT...

- A standard of care or new clinical practice guidelines for providers
- Mandates for clinical practice
- Expected to be fulfilled 100% of the time by 100% of clinicians
- An effort to penalize physicians
- Intended for use as practice standards in malpractice claims
- Intended for use to approve or deny insurance claims

Literature requirements

- Minimum requirement for literature to be considered to support a measure
  - Systematic review
    - Must meet AGREE II requirements
  - Guideline
    - Housed on AHRQ Guideline Clearinghouse
    - Or meets all the requirements to be on the website
  - Other studies
    - Rate articles based on AAN classification system
    - Case series and case reports cannot be used
AAN Measures
• 17 measure sets
• 139 measures
• 33 components included in the 12 stroke measures
• 4 sets pending release
• 4 sets in development
• 2 sets yet to kick-off

What Does a Measure Look Like?
• Measure Components
  • Numerator Statement
  • Denominator Statement
  • Denominator Exclusions
  • Evidence-base
• Rationale for Measure
• Measure Designations (e.g., type of measure, care settings, level of measurement)

New measure specifications
Measure Purpose

- Quality Improvement
  - Individual provider and practice efforts to improve care
  - AAN piloted Axon Registry to assist in benchmarking

- Accountability
  - Not all measures are appropriate for these programs
  - Merit-based Incentive Payment System (MIPS) (formerly PQRS)
  - Private Payers

Exclusions

- Previous measurement sets have exceptions and exclusions
- New AAN measurement sets have required and allowable exclusions
  - Required exclusions remove patients from an initial population and prevent them from entering the denominator
  - Allowable exclusions remove patients from the denominator and prevent them from being calculated in the numerator
Measure Development Process

AAN Measure Development Cycle

- Identify Opportunities to Develop or Revise Measures
- Review evidence: Identify gaps in care for desired outcomes
- Draft Measures
- Public Comment
- AAN e-specs/submission for CMS MIPS Testing
- Finalize & Release Measures
- Review by Registry for specification feasibility

Standing Measure Work Groups

- Content Chair
- Methodology Chair (non-voting member)
- 11-13 work group members
  - Physicians, APP’s, patients, subspecialty organizations, advocacy groups, consumer organizations, insurer reps
  - NO PHARMA
- Review evidence every 6m
- 2yr terms to be cycled out max 6yrs
electronic Clinical Quality Measure
- eCQM (CMS preferred term) aka eMeasure
- Provides ALL requirements for measure calculation without the need for a manual chart review
- Data pulled automatically

Axon Registry
- Axon Registry is a quality improvement registry.
- A registry is a structured way to collect quality data on a set of patients and to track practice patterns and patient outcomes.

Benefits to members
Data in Axon Registry

- The entire patient visit from the electronic medical record.
  - Specifically
    - Data extracted from EMR system and related sources (billing, imaging, labs, Rx)
    - Data on diagnosis, procedures, vitals, medications
    - Structured and unstructured data (Natural Language Processing by FigMD)
    - Cost data – practice management and finance systems

Axon Registry Work Flow

Axon Registry Statistics*

<table>
<thead>
<tr>
<th></th>
<th>Totals</th>
</tr>
</thead>
<tbody>
<tr>
<td>Practices</td>
<td>149</td>
</tr>
<tr>
<td>Number of Visits</td>
<td>2,005,000</td>
</tr>
<tr>
<td>Number of Patients</td>
<td>741,000</td>
</tr>
<tr>
<td>Number of Providers</td>
<td>1,082</td>
</tr>
<tr>
<td>Number of EMRs</td>
<td>33</td>
</tr>
<tr>
<td>Waitlist Practices</td>
<td>46</td>
</tr>
</tbody>
</table>

*As of 7/14/17
Practice Type Breakdown*

<table>
<thead>
<tr>
<th>Practice Type</th>
<th>Registry Total</th>
<th>Receiving Data</th>
</tr>
</thead>
<tbody>
<tr>
<td>Solo Practice</td>
<td>58</td>
<td>19</td>
</tr>
<tr>
<td>Neurology Group</td>
<td>64</td>
<td>47</td>
</tr>
<tr>
<td>Multispecialty Clinic</td>
<td>15</td>
<td>9</td>
</tr>
<tr>
<td>Academic Centers</td>
<td>7</td>
<td>2</td>
</tr>
<tr>
<td>Government Based</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Hospital Groups</td>
<td>4</td>
<td>1</td>
</tr>
<tr>
<td><strong>Total</strong>:</td>
<td><strong>149</strong></td>
<td><strong>78</strong></td>
</tr>
</tbody>
</table>

*As of 7/14/17

Future Uses for the Data
- Inform guideline development
- Inform QM development
- Identify gaps in care
- Create quality improvement tools and resources

How to enroll:
AAN.com/view/Axon
or
Email registry@aan.com
“Quality” of Measures

• Participate in a QM standing work group
• Public comment period (every response answered)
• Apply to be on AAN QSS (Quality and Safety Subcommittee)

GET INVOLVED!

Questions?