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DATE: December 17, 2018

SUBJECT: 2019 Statewide Quality Reporting and Measurement System Technical Update

The Minnesota Department of Health (MDH) has updated the Minnesota Statewide Quality Reporting and Measurement System (Quality Reporting System). We continuously work with providers and other stakeholders to create an evolving set of standard health care quality measures that are rooted in evidence. We publish changes to the measurement set annually.

We did not promulgate the Quality Rule for the 2019 reporting year because we are not making significant changes to reporting requirements for physician clinics and hospitals.¹ Instead, we are issuing technical guidance about the:

- Changes measure stewards have made to specifications for two physician clinic measures and one hospital measure;
- Transition to a biennial Health Information Technology Ambulatory Survey; and
- Removal of two hospital measures.

We made these modifications to reduce reporting burden, as much as possible, through aligning measurement with other local and federal initiatives.

During 2019, we will continue making progress in the development of the legislatively required quality measurement framework that will inform Minnesota's approach to measurement in the future, and will begin implementing it in 2020. Through this initiative, which we began earlier this year, we have communicated to providers that we would not require the reporting of new measures during the 2019 calendar year. For more information, please visit [Quality Framework](http://www.health.state.mn.us/data/hcquality/measfrmwk) (<http://www.health.state.mn.us/data/hcquality/measfrmwk>).

Here is a summary of the 2019 changes to the state's health care quality measures.

Physician Clinic Quality Measures

- The steward of the Colorectal Cancer Screening and Depression Remission at 6 Months quality measures—MN Community Measurement (MNCM)—made modifications to specifications to enhance alignment with the Centers for Medicare & Medicaid Services' (CMS) Quality Payment Program.
 - MNCM added one exclusion and eliminated one exclusion for the **Colorectal Cancer Screening** measure.

¹Quality Rule Appendices A, B, and E indicate that quality measures are required for reporting in 2018 and every year thereafter.

- New exclusion: Patient age 65 or older in Institutional Special Needs Plans (SNP) or residing in long-term care with POS code 32, 33, 34, 54, or 56 any time during the measurement period.
- Discontinued exclusion: Patient had only urgent care visits during the measurement period.
- MNMCM modified the **Depression Remission at 6 Months** measure by moving the denominator identification period by back one month from December through November to November through October.
- To reduce reporting burden, we will shift the **Health Information Technology Ambulatory Clinic Survey** from an annual to biennial survey. The next survey will be in 2020; there will not be a survey in 2019.

Hospital Quality Measures

Prospective Payment System (PPS) Hospitals

- CMS modified the specifications for the **Hospital Value-Based Purchasing Total Performance Score** by removing three measures from the Efficiency and Cost Reduction domain, effective October 1, 2018:
 - Hospital-Level, Risk-Standardized Payment Associated With a 30-Day Episode-of-Care for Acute Myocardial Infarction;
 - Hospital-Level, Risk-Standardized Payment Associated With a 30-Day Episode-of-Care for Heart Failure; and
 - Hospital-Level, Risk-Standardized Payment Associated With a 30-Day episode-of-Care for Pneumonia).

Critical Access Hospitals (CAH)²

- CMS removed two measures from its inpatient reporting program that are also in the Quality Reporting System; therefore, we are discontinuing these measures for CAHs:
 - **Influenza Immunization (IMM-2)**, effective with January 1, 2019 discharge dates; and
 - **Median time from Arrival to ED Departure for Admitted ED Patients – Overall Rate (ED-1a)**, effective with January 1, 2019 discharge dates.

Please visit [Quality Measures: 2019 Report Year](http://www.health.state.mn.us/data/hcquality/measures) (<http://www.health.state.mn.us/data/hcquality/measures>) for a list of Quality Reporting System measures, measure specifications, and other information.

²Of note, CMS removed Influenza Vaccination Coverage Among Healthcare Personnel (OP-27) from its outpatient reporting program. CAHs will continue to report **Influenza Vaccination Coverage Among Healthcare Personnel (HCP)** via the National Healthcare Safety Network (NHSN) to meet Quality Reporting System requirements.

QUALITY REPORTING SYSTEM TECHNICAL UPDATE

Minnesota Department of Health
Health Economics Program
PO Box 64882
St. Paul, MN 55164-0882
651-201-3550
health.sqrms@state.mn.us
www.health.state.mn.us/data/hcquality

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