



Attachment 3

TO: Performance Measures Coordinating Committee (PMCC) FROM: Dan Lessler, MD and Nancy Giunto, Co-Chairs, PMCC Re: Purpose and Role of PMCC

As you know, the PMCC will spend time in 2018 considering a sustainability plan to shape and inform the work of the committee going forward. We'd like to begin this process by reviewing and agreeing upon purpose and role statements. We spent some time in conversation with one another and developed the following draft statements. Our goal for the meeting on March 30 will be to gain agreement on these two statements. In the interest of time, we'll ask that you focus on the concepts rather than on detailed wordsmithing.

PURPOSE OF THE PMCC

The **<u>purpose</u>** of the PMCC is to identify and recommend a Washington State Common Measure Set on Health Care Quality and Cost* (Common Measure Set) for monitoring population health status and health care delivery system performance on key measures of quality and cost.

*To the extent possible, the Common Measure Set must include dimensions of prevention, effective management of chronic disease, care coordination and patient safety, and use of lowest cost/highest quality care for preventive, acute and chronic conditions. Intended use of the Common Measure Set may be both narrowly defined and broadly defined as follows:

NARROW: For State as Leader of Healthier Washington and as Purchaser of Health Care Benefits	BROAD: For (non-State) public and private purchasers and payers
 Stakeholder input to validate and	 Stakeholder input to validate and
endorse measures of focus Selected measures provide focus for	endorse measures of focus Selected measures provide focus for
state's health care contracting	state-wide public reporting (e.g.,
(Medicaid, PEBB) Selected measures provide focus for	Community Checkup) Selected measures recommended as
state health improvement initiatives	aligned platform for (non-State) public
such as Healthier Washington and the	and private payers/purchaser
Transformation Demonstration	contracting

ROLE OF THE PMCC

The **role** of the PMCC includes three key elements:

- 1. The PMCC is responsible for annually reviewing and recommending measures for the Common Measure Set. To fulfill this role, the PMCC must generally stay abreast of performance measurement and reporting trends, including nationally vetted measure sets and the availability of reliable data sources to support public reporting of Washington state results.
 - a. The PMCC may form one or more ad hoc workgroups (with specific expertise) to help fulfill this role.
 - b. Measures may be added or retired annually, with recommendations to the Health Care Authority no later than December for implementation during the following year.
 - c. In this role, the PMCC recommends criteria for measure inclusion (i.e., what criteria must be met for a measure to be approved for inclusion in the Common Measure Set). At a minimum, these criteria must include the following:
 - Preference given to nationally vetted and reported measures whenever possible but not exclusively; and
 - Measures must be based on *readily available* data in the state of Washington that is trusted, credible and robust enough to support statewide reporting.
- 2. The PMCC will review results from the Common Measure Set over time and, based on these results, may provide advice to the Health Care Authority and other appropriate health care organizations on priorities for improvement activities within Washington.
- 3. The PMCC will utilize its forum and membership to promote use of the Common Measure Set in health plan and provider contracting, to align and simplify performance measurement and to send clearer signals about health and health care in Washington state.

The following is **<u>out-of-scope</u>** for the PMCC based on available resources and other considerations:

- 1. Establishing performance targets where national benchmarks do not exist.
- 2. Sponsoring and leading specific quality improvement initiatives.
- 3. Assuming responsibility for incorporating measures into contracting.
- 4. Evaluating the *impact* of the Common Measure Set (i.e., correlating the Common Measure Set with movement, or lack of movement, on measures of quality).