



DATE: December 18, 2018
TO: Performance Measures Coordinating Committee (PMCC)
FROM: Emily Transue, MD, Co-Chair PMCC
Susie Dade, Washington Health Alliance

At our September 27, 2018 PMCC meeting, a small ad hoc group was asked to clarify the purpose of measures in the Common Measures Set. The group consisted of four individuals: Emily Transue, Susie McDonald, Laura Pennington and Susie Dade.

Specifically, the group was asked to make a recommendation to the PMCC, identifying which measures approved for the Common Measure Set are appropriate for: (1) Population Health Monitoring and Value-Based Contracting and Payment, *versus* (2) Population Health Monitoring only (i.e., not appropriate for value-based contracting/payment).

The group was asked to clarify the criteria used to determine which measures are appropriate for each of the two categories. These criteria are listed below.

Measures are appropriate **for population health monitoring AND inclusion in value-based contracting** for payment between health plans, purchasers and/or provider organizations when:

- there are valid and reliable results available by contracting entity (e.g., medical group/clinic, hospital or health plan); and
- when improvement is reasonably thought to be within the sphere of influence of the contracting entity.

Measures are appropriate for **population health monitoring ONLY** when:

- data is only collected at a geographic level (e.g., state or county);
- results cannot be reasonably attributable to a contracting entity; and/or
- measure results are small numbers (cell size) making them inappropriate for payment/ contracting.

The group went through the full list of measures in the State-approved Common Measure Set and each measure was put into one of these two categories. Please see Attachment A for this listing. Forty-six of the 63 measures (2019 Common Measure Set) fall into the category of measures appropriate for Population Health Monitoring AND Value-based Contracting. To clarify, this does not mean that all 46 measures must be used at the same time in value-based contracting; rather, the list of 46 should be viewed as a menu of measures that may be used in value-based contracting.

Attachment A constitutes the group's recommendations to the PMCC.