

<Date sent>

Dear <Insert Contact Name>:

Thank you for taking the time to talk with me recently. Your willingness to assist Booz Allen Hamilton (BAH), the National Committee for Quality Assurance (NCQA), the American Medical Association (AMA)-convened Physician Consortium for Performance Improvement (PCPI), and the Dartmouth Institute (TDI) staff in formative testing of the Patient-reported Functional Status Assessment Heart Failure measure is greatly appreciated.

The purpose of this letter is to confirm the date of the visit chosen during our conversation, and to provide you with further information in regard to preparing for our visit. As per our discussion, BAH, NCQA, AMA-PCPI, and TDI staff will arrive on <DAY, DATE, at approximately TIME>. Attached is the agenda that includes a suggested list of focus group participants and an overview document of the Patient-reported Functional Status Assessment Heart Failure measure testing project.

The following staff will be in attendance for the visit:

Booz Allen Hamilton

- Pamela Edison, MHS, PMP, Lead Associate
- Chana West, RN, MSN, Associate

National Committee for Quality Assurance

- Jenna Williams-Bader, MPH, Assistant Director, Performance Measurement

The Dartmouth Institute

- Melanie Mastanduno, BSN, MPH, Managing Director, Patient Reported Measures

American Medical Association-Physician Consortium for Performance Improvement

- Meredith Jones, MPH, Analyst, Performance Improvement

Our goal for this focus group is to discuss the framework, feasibility of implementation, and key aspects of clinical data for measuring goal setting and achievement in conjunction with functional status assessments. We would be most grateful if you could arrange to have the focus group participants in attendance. Additionally critical to our testing project is participation by someone from your organization who can inform us about your clinical workflow processes for patients with heart failure, electronic health record systems and related forms specifically related to conducting and documenting patient-reported functional status assessments.

We look forward to seeing you on the <DAY, DATE, at approximately TIME>. Thank you in advance for participating in this important endeavor. Please e-mail me at Meredith.Jones@ama-assn.org or call me at (312)464-4923 if you have any questions.

Sincerely,

Meredith Jones, MPH, Analyst, Performance Improvement

American Medical Association, Physician Consortium for Performance Improvement

Agenda

Booze Allen Hamilton (BAH), National Committee for Quality Assurance (NCQA), American Medical Association- Physician Consortium for Performance Improvement

<Site name>

Patient-reported Functional Status Assessment (PR FSA) Heart Failure Measure

<Date>

<u>Time</u>	<u>Topic</u>	<u>Presenter(s)</u>
20 minutes	1. Introductions and Project Overview: <ul style="list-style-type: none">• Purpose of the site visit• How the measure was developed• Future work	AMA, BAH, NCQA, TDI
30 minutes	2. Site workflow processes (and related electronic and paper forms) and Related Measuring/Monitoring Activities for: <ul style="list-style-type: none">• Heart failure patients• Functional status assessments• Patient-reported functional status assessments	Site staff members
2 hours	3. Focus Group Discussions: <ul style="list-style-type: none">a. General questionsb. Presentation of:<div style="border: 1px solid black; padding: 5px; margin: 5px 0;">Patient-reported Functional Status Assessment (PR FSA) Heart Failure Measure: Percentage of patients age 65 and older with heart failure who completed initial and follow-up PR FSAs, who set a goal using the initial FSA and who achieved that goal according to a follow-up PR FSA</div>c. Brief Overview of Test Site's:<ul style="list-style-type: none">o Workflow processes (and related electronic or paper forms) and related Measuring/Monitoring Activitieso Technical/ EHR Feasibility and considerations	Site staff members, AMA, BAH, NCQA, TDI
30 minutes	4. Forms/Questionnaire Completion	Site staff members
	5. Adjourn	

Suggested focus group composition:

- Physicians
- Quality review coordinator
- Quality manager
- Risk manager
- Social worker
- Medical director for quality
- Cardiologists and Primary Care Physician treating cardiology patients
- Functional Status Assessment Research Coordinator
- IT manager
- Medical records
- Clinical Informaticists

Patient-reported Functional Status Assessment Heart Failure Measure Testing Project

Booz Allen Hamilton (BAH)

Booz Allen serves as a trusted advisor to Department of Defense (DoD), Veterans Administration Department (VA) and HHS in advancing our ability as a nation to measure and improve the quality of healthcare delivery. Booz Allen successfully works with diverse healthcare stakeholders to further public and private sector quality measurement programs, methods of performance data collection and reporting processes, and the development of clinical support tools. We have experienced personnel actively engaged in the development of quality measures and the corresponding industry standards required to support electronic clinical quality measure development and testing. Our team is currently leading efforts to develop and test new electronic clinical quality measures for potential use in the Electronic Health Record (EHR) Incentive Program.

National Committee for Quality Assurance (NCQA)

NCQA is a private, non-profit organization dedicated to improving health care quality. NCQA accredits and certifies a wide range of health care organizations. It also recognizes clinicians and practices in key areas of performance. NCQA's Healthcare Effectiveness Data and Information Set (HEDIS®) is the most widely used performance measurement tool in health care. NCQA's Web site (ncqa.org) contains information to help consumers, employers and others make more informed health care choices.

The Dartmouth Institute for Health Policy & Clinical Practice (TDI)

TDI is dedicated to improving health care through education, research, policy reform, addressing the questions of how health care can be delivered more effectively, with better outcomes, improved patient and provider satisfaction, and at less cost. Over the past several years, the TDI faculty has been working with national measurement stakeholders to identify a parsimonious, high-leverage set of patient-reported health outcome and experience measures. The aim is to capture critical domains of measurement that are meaningful to consumers and useful for improvement, including health outcomes (e.g., functional status); patient experience, including whether patient was well-informed of treatment options (informed patient choice); and health risks (degree to which individual has reduced their future risk of death).

American Medical Association Physician Consortium for Performance Improvement (AMA-PCPI)

The AMA-PCPI is committed to enhancing quality of care and patient safety by taking the lead in the development, testing, and maintenance of evidence-based clinical performance measures and measurement resources for physicians. The AMA PCPI is comprised of over 100 national medical specialty and state medical societies; the Council of Medical Specialty Societies; American Board of Medical Specialties and its member-boards; experts in methodology and data collection; the Agency for Healthcare Research and Quality; and Centers for Medicare & Medicaid Services.

Patient-reported Functional Status Assessment Heart Failure Measure

The Office of the National Coordinator (ONC) for Health Information Technology has contracted with Booz Allen Hamilton (BAH), the National Committee for Quality Assurance (NCQA), and the Dartmouth Institute to develop clinical quality measures that can be used to assess and track patient-reported functional status over time using data from electronic health records.

Under this contract, BAH, Dartmouth, NCQA, TDI, and AMA-PCPI will develop and test a clinical quality measure for using patient-reported functional status to set and track goals over time for patients with heart failure. This project includes assessing the feasibility of collecting relevant data and an evaluation of the measure's face validity. The goal of pilot testing is to obtain feedback that will result in improved measures, which accurately measure clinician and organizational performance. Data garnered from test sites will be used to revise and improve the measures.