Attachment 1: Crosswalk Between Contract Evaluation Measures, Existing Data Sources, and Proposed Data Collection for Outcome and Impact Evaluation of CMS QIN-QIO Program for Task C.2. Reducing Healthcare-Acquired Conditions in Nursing Homes

Outcome Evaluation Data Needs	Existing Measures/Sources	Proposed New Measures
To reduce biases affecting outcome analyses by matching nursing homes participating in the QIN-QIO program intervention with facilities not participating	 Percentage of One-Star Category Target Number recruited for Collaborative I¹/ Deliverable and Data Submission Tool (DDST) Percentage of Recruitment Target Number recruited for Collaborative I¹/DDST Nursing home characteristics (e.g., bed size)/Nursing Home Compare (NHC) Resident characteristics (e.g., age, number of comorbidities)/ Master Beneficiary Summary File (MBSF) 	None
To understand the drivers and barriers to participating in the QIN-QIO program for nursing homes	None	Open ended questions/ Interviews or focus groups with QIN-QIO Task Leads
To gain insight into findings from analysis of claims data	None	• Open-ended questions/Interviews or focus groups with QIN-QIO Task Leads

Outcome Evaluation Data Needs	Existing Measures/Sources	Proposed New Measures
To understand the usefulness of tools and activities in the National Nursing Home Quality Care Collaborative (NNHQCC) program to help nursing homes meet Quality Assurance and Performance Improvement (QAPI) requirements and/or tools in need of improvement (e.g., Composite score, Learning Action Networks (LANs), webinars, etc.)	Records of use/quarterly reports	 Perceived usefulness from QIN-QIO Task Leads/Interviews or focus groups Perceived usefulness from nursing home administrators/ Nursing home administrator interviews Nursing home administrators' awareness of resources/ Nursing home administrators awareness of resources/ Nursing home administrator survey Peer coach perceptions of effectiveness/Peer coach interviews
To ascertain nursing homes' uptake of major QAPI strategies and activities (e.g. performing root cause analysis, plan-do-study-act cycles, etc.)	• None	 Perceived use of QAPI-related resources by QIN-QIO Task Leads/Interviews or focus groups Nursing home use of QAPI-related resources / Nursing home administrator survey Nursing home awareness of QAPI and use of resources/Nursing home administrator interviews
To assess whether Medicare spending is associated with antipsychotic use	 Antipsychotic use/Minimum Data Set (MDS) 3 Medicare program spending/CMS 	None
To access associations between the NNHQCC composite score and health status and Medicare spending	 NNHQCC Quality Composite Measure Score¹/DDST Health proxies (Emergency department (ED) visits, observations, number of hospitalizations)/Claims Parts A & B Medicare spending/Claims Parts A & B 	None

Outcome Evaluation Data Needs	Existing Measures/Sources	Proposed New Measures
To analyze trends in HACs and clinical outcomes among nursing home residents in QIO and non-QIO facilities during the 11th SOW	 Percentage of residents who received antipsychotic medications¹/MDS 3 Percentage of residents who were physically restrained/ MDS 3 Percentage of residents who had worsening pressure ulcers/MDS 3 Number of residents infected by <i>C. diff</i> /NHSN Percentage of residents who required ED visits, observations, or hospitalization/Claims Parts A & B 	None
To calculate the proportion of the effect size estimates found following the analyses performed in addressing the quality measure and clinical outcomes that can be directly attributed the QIN-QIO program	None	Nursing home administrators' perceived proportion of influence/ Nursing home administrator survey and interviews
To calculate the return on investment for CMS from the Collaborative program	 Claims Parts A, B & D for beneficiary spending CMS program officers for program spending 	None

¹Data collected as part of contract evaluation