

Guide to US Quality Measurement Organizations

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By Allison Viola, MBA, RHIA, and Crystal Kallem, RHIA, CPHQ

With the federal government ramping up efforts to further tie healthcare reimbursement to quality of care through initiatives like value-based purchasing and accountable care organizations, quality measurement organizations are gaining more national prominence.

Many different organizations develop, endorse, implement, and promote performance measures. Trying to decipher and understand the intended interplay of organizations involved with quality measures can be challenging.

The following list serves as a current guide to the country's quality improvement and measurement efforts.

Healthcare Quality Organizations

Agency for Healthcare Research and Quality

www.ahrq.gov

AHRQ develops strategies for quality measurement and improvement by:

- Supporting more than 90 projects in a multiyear effort to improve patient safety.
- Overseeing the Patient Safety Task Force, a federal effort to integrate research, data collection, and analysis of medical errors and promote interagency collaboration in reducing the number of injuries resulting from these errors.
- Facilitating patient safety organizations, which share the goal of improving the quality and safety of healthcare delivery. Organizations that are eligible to become PSOs include public or private entities, profit or not-for-profit entities, provider entities such as hospital chains, and other entities that establish special components to serve as PSOs.

By providing both privilege and confidentiality, PSOs create a secure environment where clinicians and healthcare organizations can collect, aggregate, and analyze data, thereby improving quality by identifying and reducing the risks and hazards associated with patient care.

PSOs provide hospitals, health data organizations, and states with enhanced quality assessment tools that they can use with their own hospital administrative data to highlight potential quality concerns and track changes over time in three areas: ambulatory care sensitive conditions, inpatient quality (volume, mortality, and resource use), and patient safety.

Ambulatory Care Quality Alliance

www.aqaalliance.org

AQA improves healthcare quality and patient safety through a collaborative process in which key stakeholders agree on a strategy for measuring performance at the physician or group level; collecting and aggregating data in the least burdensome way; and reporting meaningful information to consumers, physicians, and other stakeholders to inform choices and improve outcomes.

Centers for Medicare and Medicaid Services

www.cms.gov/QualityInitiativesGenInfo

CMS conducts a variety of quality initiatives targeting hospitals, physician offices, nursing homes, home health agencies, and end-stage renal disease facilities. Physicians and other eligible professionals can participate in the Physician Quality Reporting Initiative (PQRI), the Hospital Inpatient Quality Reporting program, and the EHR meaningful use incentive program.

CMS quality measures address both Medicare and Medicaid populations. Medicaid quality and care management programs are run by state organizations, though not all states have such programs. AHRQ helps states develop quality measurement programs.

While CMS typically uses NQF-endorsed quality measures, when certain measures don't exist CMS develops the measures.

Health IT Standards Committee Clinical Quality Workgroup

<http://healthit.hhs.gov>

The HIT Standards Committee serves as an advisory body to the Office of the National Coordinator for Health IT. Its Clinical Quality Workgroup makes recommendations to the committee on the quality measures that should be included in the meaningful use program and EHR certification requirements.

Hospital Quality Alliance

www.hospitalqualityalliance.org

HQA improves the quality of care provided by the nation's hospitals by measuring and publicly reporting on that care. Quality performance information collected from the more than 4,000 participating hospitals is reported on *Hospital Compare*, a Web site tool developed by CMS.

Institute for Healthcare Improvement

www.ihl.org

IHI focuses on identifying and testing new models of care to reduce waste, address healthcare disparities, and save lives. The nonprofit organization achieves these goals by promoting measureable healthcare progress. An example of its work is the IHI Improvement Map, an initiative to "help hospitals make sense of countless requirements and focus on high-leverage changes to transform care."

Institute of Medicine

www.iom.edu

IOM advises the nation's public and healthcare decision makers on ways to improve health. The independent, nonprofit organization has written foundational reports focusing on quality issues that have changed healthcare, including "Crossing the Quality Chasm: A New Health System for the 21st Century," "For the Public's Health: The Role of Measurement in Action and Accountability," and "Health Professions Education: A Bridge to Quality."

Joint Commission

www.jointcommission.org

The Joint Commission identifies, tests, and specifies standardized performance measures. It engages in performance measurement research and development activities.

The commission presides over a growing, national, comparative performance measurement database that can inform internal healthcare organization quality improvement activities, external accountability, and pay-for-performance programs and advance research.

Leapfrog Group

www.leapfroggroup.org

Leapfrog mobilizes employer purchasing power to promote healthcare safety, quality, and customer value and recognize improvements with rewards. Leapfrog is a voluntary program that works with employer members to encourage transparency and easy access to healthcare information as well as rewards for hospitals that have a proven record of high quality care.

Participating hospitals can take part in Leapfrog's public reporting initiatives, which provide quality benchmarks for both healthcare providers and employer purchasers.

National Committee for Quality Assurance<http://web.ncqa.org>

NCQA provides programs and services that reflect a straightforward formula for improvement: Measure. Analyze. Improve. Repeat. NCQA develops quality standards and performance measures for a broad range of healthcare entities. These measures and standards are the tools that organizations and individuals can use to identify opportunities for improvement.

NCQA is also the developer of the Healthcare Effectiveness Data and Information Set (HEDIS), a tool used by more than 90 percent of America's health plans to measure performance on important dimensions of care and service.

National Committee on Vital and Health Statistics Subcommittee on Qualitywww.ncvhs.hhs.gov/wg-qual.htm

NCVHS assists and advises the secretary of Health and Human Services on health data, statistics, privacy, national health information policy, and the Department of Health and Human Services' strategy to address these issues. The subcommittee addresses information needs related to assessing and improving the quality of care and services and improving public access to those services and outcomes of care.

National Priorities Partnershipwww.nationalprioritiespartnership.org

NPP developed a core set of national priorities and goals that center on improving healthcare in areas of payment, public reporting, quality improvement, and consumer engagement. Its work has successfully influenced many aspects of healthcare reform in areas of patient and family engagement in healthcare and population health reporting.

National Quality Forumwww.qualityforum.org

NQF improves the quality of American healthcare by setting national priorities and goals for performance improvement, endorsing national consensus standards for measuring and publicly reporting on performance, and promoting the attainment of national goals through education and outreach programs. NQF does not develop measures but endorses measures using a consensus standards process.

Physician Consortium for Performance Improvementwww.ama-assn.org

PCPI enhances quality of care and patient safety by developing, testing, and maintaining evidence-based clinical performance measures and providing measurement resources for physicians. PCPI was convened by the American Medical Association.

PCPI measure development processes are viewed as a gold standard in the industry. Its 266 measures are available for 43 clinical topics and conditions, from asthma to radiology to stroke.

Premierwww.premierinc.com

An alliance of healthcare providers, Premier collects clinical and financial data from participating hospitals to establish a quality performance baseline. Web-based tools allow hospitals to use Premier's database to compare their performance in specific areas to peers and best performers, find opportunities for improvement, and track the results of their efforts. The Food and Drug Administration uses this data warehouse for drug surveillance, and CMS uses it to evaluate next-generation payment models.

The Premier QUEST program uses quality measures, such as frequency of readmissions, to measure 200 participating hospitals' performance.

Quality Alliance Steering Committeewww.healthqualityalliance.org

QASC implements measures that improve the quality and efficiency of healthcare in the US. Made up of quality alliances and healthcare stakeholders, it developed the High-Value Health Care Project, which works to make consistent and useful information about the quality and cost of healthcare widely available to patients, physicians, hospitals, health insurers, and others who need information about healthcare delivery.

Quality Improvement Organizations

www.cms.gov/QualityImprovementOrgs

QIOs help implement CMS Medicare quality programs, support providers, and improve the quality of healthcare for Medicare consumers.

CMS contracts with one organization in each state to serve as a private, mostly not-for-profit organization. They are staffed by healthcare professionals trained to review medical care and help beneficiaries with complaints about the quality of care in various organizations. In part, QIOs use quality measures to help implement improvements in healthcare organizations.

Regional Extension Centers

http://healthit.hhs.gov/portal/server.pt/community/healthit_hhs_gov_rec_program/1495

Working under federal contracts, the centers provide outreach and support services to eligible hospitals and eligible professionals to support adoption and meaningful use of health IT. Their work includes the use of technology to improve healthcare quality and to enable organizations to submit quality measure data to the federal government for the payment of EHR implementation incentives.

AHIMA Resources on Quality Measurement

www.ahima.org/advocacy/dataquality.aspx

AHIMA's Advocacy and Public Policy Web site tracks a variety of data quality management and data content issues, including quality measurement initiatives. The site offers an overview of standards and activities, resource links, and analysis.

Allison Viola (allison.viola@ahima.org) is director of federal relations and Crystal Kallem (crystal.kallem@ahima.org) is director of practice leadership at AHIMA.

Article citation:

Viola, Allison F.; Kallem, Crystal. "Guide to US Quality Measurement Organizations" *Journal of AHIMA* 82, no.4 (April 2011): 40-42.

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