Key Domains With Limited Measure Availability

There are several measurement domains for which there are relatively few standardized measures. These domains include: 1) Care Coordination/Care Management; 2) Long-Term Services and Supports; 3) Cost; 4) Dental Care and 5) Quality of Life Measures. This document provides a list of measures, both standardized and non-standardized, that are available within these domains.

1. Care Coordination/Care Management

Measure Name	Steward	NQF#	Details or Link to Measure Specifications (for non-NQF Measures Only)
3-Item Care Transition Measure (CTM-3)	University of Colorado Health Sciences Center	228	
Home management plan of care document given to patient/caregiver	CAC-3	338 (no longer endorsed)	
Medication reconciliation after discharge from an inpatient facility	NCQA	97	
Medication reconciliation post-discharge	NCQA (HEDIS)	554	
Timely initiation of care	CMS: OASIS	526	
Effective doctor-patient communication	WCHQ	NA	WCHQ Measures
Mental and physical health assessment within 60 Days for children in DHS custody	Oregon Health Authority	NA	Oregon CCO Data

Measure Name	Steward	NQF#	Details or Link to Measure Specifications (for non-NQF Measures Only)
Out-of-Home Placements: The percentage of managed care members enrolled in Family Mosaic Project discharged to an out-of-home placement during measurement period	CA: Medi-Cal Managed Care Division	NA	DHCS Aggregate Report
Received test results from the doctor's office	WCHQ	NA	WCHQ Measures
% of patients in the Highest Risk Registry who have a documented self-management goal during the measurement period	MA PCMHI	NA	* (Row 25:PCMHI 0016)
% of patients who have completed a formal patient satisfaction tool during the measurement period. The patient satisfaction tool should be designed as a formal patient feedback process that assesses patient experience/satisfaction.	MA PCMHI	NA	* (Row 65: PCMHI 0037)
% of patients with one documented self-management goal during the measurement period (this measure is included in the set of measures for every targeted disease/condition patient population)	MA PCMHI	NA	* (Row 64: PCMHI 0036)
% of hospitalized patients who have clinical, telephonic or face-to-face follow-up interaction with the care team within 2 days of discharge during the measurement month	MA PCMHI	NA	* (Row 21: PCMHI 0012)
% of patients in the Highest Risk Registry who have documented contact/interaction with the care manager at least once during the measurement period	MA PCMHI	NA	* (Row 24: PCMHI 0015)
% of patients listed in the practice's Highest Risk Registry during the measurement month who have a care plan that has been developed by the care manager with patient input and in collaboration with the care team	MA PCMHI	NA	* (Row 23: PCMHI 0014)
% of patients who have been seen in the emergency room with a documented chronic illness problem, who have clinical telephonic or face-to-face follow-up	MA PCMHI	NA	* (Row 22: PCMHI 0013)

Measure Name	Steward	NQF#	Details or Link to Measure Specifications (for non-NQF Measures Only)
interaction with the care team within 2 days of the ER visit during the measurement month.			
* Source for all of the above MA PCMHI measures	MA PCMHI	NA	

2. Long-Term Services and Supports (LTSS) – Nursing Facility and Community-Based Services Measures

Measure Name	Steward	NQF#	Details or Link to Measure Specifications (for non-NQF Measures Only)
Number of falls	American Nurses Association	0141	
Percent of high-risk long-stay nursing home residents with pressure ulcers	CMS	0679	
Rate of falls resulting in injury	CMS	0674	
Long-term care overall balance measure	State-Specified Measure - used by NY and OH	NA	Measure reports the number of enrollees who did not reside in a nursing facility as a proportion of the total number of enrollees in a plan.
Long-term care rebalancing measure	State-Specified Measure - used by NY and OH	NA	Reporting of the number of enrollees who were discharged to a community setting from a nursing facility and who did not return to the nursing facility during the current measurement year as a proportion of the number of enrollees who resided in a nursing facility during the previous year.
Medicaid LTSS participant years per 100 adults age 21+ with ADL disability in nursing homes or at/below 250% poverty in community	LTSS Scorecard	NA	Long-Term Scorecard Report (accessed 4-21-14) Appendix B.2
Nursing Facility Diversion Measure	State-Specified Measure - used by NY and OH	NA	This measure reports the number of enrollees who lived outside the nursing facility during the current measurement year as a

Measure Name	Steward	NQF#	Details or Link to Measure Specifications (for non-NQF Measures Only)
			proportion of the enrollees who lived outside the nursing facility during the previous year.
Percent of high-risk nursing home residents with pressure sores	LTSS Scorecard	NA	Long-Term Scorecard Report (accessed 4-21-14) Appendix B.2
Percent of home health episodes of care in which interventions to prevent pressure sores were included in plan of care for at-risk patients	LTSS Scorecard	NA	Long-Term Scorecard Report (accessed 4-21-14) Appendix B.2
Percent of home health patients with a hospital admission	LTSS Scorecard	NA	Long-Term Scorecard Report (accessed 4-21-14) Appendix B.2
Percent of long-stay nursing home residents who were physically restrained	LTSS Scorecard	NA	Long-Term Scorecard Report (accessed 4-21-14)
Percent of long-stay nursing home residents with a hospital admission	LTSS Scorecard	NA	Long-Term Scorecard Report (accessed 4-21-14) Appendix B.2
Percent of new Medicaid LTSS users first receiving services in the community	LTSS Scorecard	NA	Long-Term Scorecard Report (accessed 4-21-14) Appendix B.2
Percent of people dying in preferred location	Oregon Health Authority	NA	proposed 4-18-14 for consideration of use in an incentive pool for coordinated care organizations
Percent of people living in preferred location	Oregon Health Authority	NA	proposed 4-18-14 for consideration of use in an incentive pool for coordinated care organizations
Percent of population with an interdisciplinary team in place and an integrated care plan	Oregon Health Authority	NA	proposed 4-18-14 for consideration of use in an incentive pool for coordinated care organizations
Percent of Population with Physician Orders for Life Sustaining Treatment (POLST) and/or Advanced Directive Completed	Oregon Health Authority	NA	proposed 4-18-14 for consideration of use in an incentive pool for coordinated care organizations
Transition of members between community, waiver and long-term care services	State-Specified Measure - used by IL, SC, VA	NA	This measure reports number of members moving from: institutional care to waiver services, community to waiver services,

Measure Name	Steward	NQF#	Details or Link to Measure Specifications (for non-NQF Measures Only)
	and WA		community to institutional care, and waiver services to institutional care (exclude institutional stays less than equal to 90 days).

3. Cost

Measure Name	Steward	NQF#	Details or Link to Measure Specifications (for non-NQF Measures Only)
Total cost of care population-based PMPM Index	HealthPartners	1604	
Total resource use population-based PMPM Index (resource use measure)	HealthPartners	1598	
Cost savings from improved chronic care coordination and management	Iowa Financial Alignment Demonstration	NA	CMS IA Proposal
Medicaid spending within global cap	NY Medicaid Redesign Initiative	NA	Medicaid Quality Indicators

4. Dental

Measure Name	Steward	NQF#	Details or Link to Measure Specifications (for non-NQF Measures Only)
Annual dental visits	NCQA HEDIS	1388	
Multiple	Dental Quality Alliance	NA	Measures developed by the Dental Quality Alliance may be found here.

5. Quality of Life Measures

Measure Name	Steward	NQF#	Details or Link to Measure Specifications (for non-NQF Measures Only)
Hospice and palliative care – pain assessment	University of North Carolina-Chapel Hill	1637	
Hospice and palliative care – treatment preferences	University of North Carolina-Chapel Hill	1641	
Percentage of hospice patients with documentation in the clinical record of a discussion of spiritual/religious concerns or documentation that the patient/caregiver did not want to discuss.	Deyta, LLC	1647	
Percent of residents who self-report moderate to severe pain (long-stay)	CMS	677	
Ambulatory Care Experiences Survey (ACES) Ambulatory Patient Experiences of Care Survey (for adults and children)	Mass Health Quality Partners demonstr-ation project in part-nership with re-searchers from The Health Institute at Tufts-New England Medical Center	NA	MHQP Quality
Advance Directives Determination (Do Not Resuscitate)	NY Medicaid Redesign Initiative	NA	Medicaid Quality Indicators
Disruptive/Intense Daily Pain (*A low rate is desirable)	NY Department of Health	NA	Medicaid Quality Indicators

Measure Name	Steward	NQF#	Details or Link to Measure Specifications (for non-NQF Measures Only)
How's Your Health Survey	Dartmouth Medical School	NA	How's Your Health?
Improvement in participant health-related quality of life (Increase in "Healthy Days") At least a 35% survey response rate and a relative increase in "Healthy Days" of up to 5% over baseline (using survey module from The World Health Organization Quality of Life Assessment (HQROL-4))	The World Health Org-anization Quality of Life Assess-ment (HQROL-4)	NA	WHO Mental Health
Functional Status: Applied Cognition	Activity Measure for Post-Acute Care (AM-PAC)	NA	BU Instuments
Functional Status: Basic Mobility	Activity Measure for Post-Acute Care (AM-PAC)	NA	BU Instruments
Functional Status: Daily Activities	Activity Measure for Post-Acute Care (AM-PAC)	NA	BU Instruments