

Measure Selection Tool

User Instructions

This tool offers a six-step process for developing a measure set that is tailored to local needs while facilitating alignment with measure sets used by private purchasers and payers, as well as by state and federal programs.

STEP 1

Define Goals & Audiences for the Measure Set

When beginning the process of creating a new measure set or aligning several existing measure sets, it is important to establish a framework for deciding which measures to use. The [Getting Started Questionnaire](#) provides a series of questions to consider with regard to the overall goals of your program or project, the specific purpose(s) of the measure set and the context in which it is being created.

STEP 2

Decide on Criteria for Choosing Measures

Before selecting measures, you must first determine how to evaluate them against the goals and objectives you identify in Step 1, and relative to measure sets already in use in situations similar to your own. The [Measure Selection Criteria Worksheet](#) guides users in considering potential technical and programmatic criteria and selecting the criteria that best fit their needs. The worksheet enables you to choose from among common national measure selection criteria and to add locally chosen criteria. Criteria can and should be applied both at the individual measure level and at the measure set level, the latter to ensure that the entirety of the measure set “hangs together.” The criteria listed in this tool do not represent all possible selection criteria; your program may wish to adopt additional criteria.

Users transfer the criteria from the worksheet to the [Measure Selection Tool](#) spreadsheet by using drop-down menus for common national criteria that are chosen and by manually entering locally chosen criteria (Columns T through AM).

Resource document:

- ☐ [Examples of Measure Selection Criteria from Six Different Programs](#)

STEP 3

Pick Existing Measure Sets as Reference Points

Before beginning to choose measures, you need to identify measure sets for programs and purposes similar to your own to serve as reference points for your decisions. Otherwise, you risk both “flying blind” and “reinventing the wheel.”

The [Measure Sets to Identify and Review](#) before Seeking Alignment document provides a list of existing measure sets for this purpose. Start with the 18 measures sets in the master list contained in the **Measure Crosswalk** embedded in the [Measure Selection Tool](#) spreadsheet. Any set you choose there will automatically provide you with a comparison for the candidate measures you decide on in Step 4. You will need to manually add other relevant comparison measure sets, e.g., existing state program and commercial measure sets in use locally, directly into Column BC through BI the **Measure Selection Tool** tab in the spreadsheet.

The **Measure Crosswalk** includes the following 19 measure sets.

There are 13 federal and other national measure sets included in the tool:

Name of Measure Set	Version Date
Federal Measure Sets	
CMMI Primary Care First	CY 2025
CMS Core Set of Children’s Health Care Quality Measures for Medicaid and CHIP (Child Core Set)	CY 2025
CMS Core Set of Health Care Quality Measures for Adults Enrolled in Medicaid (Medicaid Adult Core Set)	CY 2025
CMS Electronic Clinical Quality Measures (eCQMs) for Eligible Professionals/Eligible Clinicians	CY 2025
CMS Health Home Measure Set	FY 2025
CMS Medicare Part C & D Star Ratings Measures	Contract Year 2024
CMS Medicare Shared Savings Program (MSSP) ACO and Next Generation ACO	CY 2025
CMS Merit-based Incentive Payment System (MIPS)	CY 2025

Name of Measure Set	Version Date
Federal Measure Sets	
CMS Universal Foundation	April 2025
Core Quality Measures Collaborative Core Sets	April 2025
National Hospital Measure Sets	
CMS Hospital Value-Based Purchasing	FY 2025
CMS Medicare Hospital Compare	April 2025
Joint Commission Performance Measure List	CY 2025

Additionally, there are six state measure sets included in the tool:

Name of Measure Set	Version Date
California AMP Medi-Cal Managed Care Measure Set	CY 2025
Massachusetts Aligned Measure Set	CY 2025
Minnesota Integrated Health Partnership Measures	CY 2025
Oregon Coordinated Care Organizations (CCO) Incentive Measures	CY 2025
Rhode Island Office of the Health Insurance Commissioner (OHIC) Aligned Measure Set for ACOs	CY 2025
Washington State Common Measure Set for Health Care Quality and Cost	CY 2025

Resource documents:

- ☐ [Measure Selection Tool \(notably the Measure Crosswalk tab\)](#)
- ☐ [Measure Sets to Identify and Review before Seeking Alignment](#)

STEP 4

Create a List of Candidate Measures to Consider

The measure sets in the master list cited above provide measure ideas and a useful starting point for the construction of the user's new measure set. Users choose a list of candidate measures for consideration from those measure sets, locally identified measures of interest and the following resource documents:

- [Most Frequently Used State Program Measures, By Domain](#) for a list of most frequently used state program measures, by domain, based on a 2013 study of 48 state measure sets that included over 1200 measures,¹ and
- [Key Measure Domains with Limited Measure Availability](#) for examples of measures that have been created to fill gaps in the measures landscape. The document includes the following domains:
 - i. Care Coordination/Care Management;
 - ii. Long Term Services and Supports;
 - iii. Cost;
 - iv. Dental Care; and,
 - v. Quality of Life measures.

Users can now filter through the over 900 measures included in the **Measure Crosswalk** in the Buying Value tool, which is updated every winter. Users can search for measures using the following criteria:

Domain (Column I): Includes 17 measure taxonomies that are used to categorize measures by subject matter (e.g., Acute Care, Hospital, Prevention/Early Detection).

Condition (Column J): Includes 21 measure taxonomies that are used to categorize measures by a specific clinical condition (e.g., Cardiovascular, Diabetes, Substance Use Disorder).

Measure Type (Column K): Includes 7 measure taxonomies that are used to categorize measures by type (e.g., Outcome, Process, Structure).

Populations (Column L): Includes 9 measure taxonomies used to categorize measures by age-defined patient population group (e.g., Adult, Pediatric).

¹ http://www.bailit-health.com/articles/091113_bhp_lackofalignment.pdf

Data Source (Column M): Includes 13 measure taxonomies used to categorize measures by the data source utilized for each measure (e.g., Claims, Clinical Data).

Disparities-sensitive Status (Column N): Indicates whether there is evidence of disparity in the provision of care captured by this measure. This classification is based on an environmental scan conducted by the NQF Disparities Standing Committee in 2017. Buying Value also included measures that it identified to be nearly identical to measures selected by NQF. More information can be found in [NQF's 2017 Disparities Project Final Report](#).

For a complete list of Domains, Conditions, Measure Types, Populations, and Data Sources used in the tool, please refer to the [Measure Categorization Schematic](#).

Resource documents:

- ☐ [Measure Selection Tool \(notably the Measure Crosswalk tab\)](#)
- ☐ [Most Frequently Used State Program Measure, By Domain](#)
- ☐ [Key Measure Domains with Limited Measure Availability](#)
- ☐ [Measure Categorization Schematic](#)

STEP 5

Add Measures to the Measure Selection Tool Spreadsheet

The **Measure Selection Tool** tab is the heart of the [Measure Selection Tool](#) spreadsheet. It is designed as a decision aid for measure set creators when selecting measures for performance measure sets. It serves as a living measure library by tracking and displaying detailed information from a number of important sources to consider when selecting measures. You will need to complete five tasks in this step:

First, for each measure that has a CBE ID, enter the measure's CBE ID in Column C (note: you must enter a 4-digit number for automatic lookup to work properly, e.g., '0002' and not '2' or '02'. You do not need to identify whether it is an e-measure or approved for trial use). If the measure is included in the **Measure Crosswalk**, the following information about the measure will auto-populate into the tool:

Name (Column B)

CBE Endorsement Status as of April 2025 (Column D)

Steward (Column E)

CMS Quality ID (Column F)

CMS eQIM ID as of April 2025 (Column G)

Description (Column H)

Domain (Column I)

Condition (Column J)
Measure Type (Column K)
Populations (Column L)
Data Source (Column M)
Disparities-sensitive Status (Column N)
Alignment with federal, national and select state measure sets
 (Columns BJ through CB)

Please note that if the measure does not have a CBE ID and is not included in the **Measure Crosswalk**, the measure's information will not auto-populate and information must be manually entered.

Second, for measures that do not have CBE IDs and are included in the Buying Value measure library or for measures that are not included in the Buying Value **Measure Crosswalk**, the measure's information will not auto-populate and the following information must be manually entered:

Name (Column B)
CBE Endorsement Status as of April 2025 (Column D)
Steward (Column E)
CMS Quality ID (Column F)
CMS eQIM ID as of April 2025 (Column G)
Description (Column H)
Domain (Column I)
Condition (Column J)
Measure Type (Column K)
Populations (Column L)
Data Source (Column M)
Disparities-sensitive Status (Column N)
Alignment with federal, national and select state measure sets
 (Columns BJ through CB)

Note: if the measure is included in the Buying Value **Measure Crosswalk** tab, the information can be copied and pasted directly into the **Measure Selection Tool** tab.

Third, decide whether you want to enter additional information about the measures:

Measure Origin (Column O): You may choose to track how the measure found its way into your measure set (e.g., the measure set in which you originally found the measure, or the name of the person who requested that you consider the measure).

Fourth, check candidate measures against the measure sets that do not appear in the **Measure Crosswalk** that you added in Step 4. Compare the measures with the measure sets added to the **Measure Selection Tool** tab in Step 3. Check the candidate measures against these and enter “Yes” when a candidate measure appears in one of the commercial or state measure sets (Columns BC through BI).

Fifth, check candidate measures against measure selection criteria. Systematically evaluate each measure against each selection criterion and add your assessment (“yes,” “somewhat,” “no”) in the corresponding columns (Columns T through AM). An entry of “Yes” equals 2 points, an entry of “Somewhat” equals 1 point and an entry of “No” equals 0 points toward the Selection Criteria Score. There is a column available next to each active selection criterion column that provides space for you to record the rationale for each assessment if you wish to do so.

STEP 6

Review Results from Spreadsheet Comparisons & Finalize the Measure Set

At this point, data entry in the [Measure Selection Tool](#) spreadsheet is complete and the tool automatically assesses alignment with all of the measures included in the tool, including those pre-loaded and those which you may have entered (if any). The toolkit produces six measure alignment scores:

- a. **Alignment score with all measures sets in the tool** (Column AX)
- b. **Alignment score with commercial and state measure sets** (Column AY)
- c. **Alignment score with federal ambulatory care measure sets** (Column AZ)
- d. **Alignment score with national hospital measure sets** (Column BA)
- e. **Alignment score with a sample of state measure sets** included in the **Measure Crosswalk** (Column BB)

The toolkit also provides a total score for agreement with the user’s measure selection criteria (Column S).

Using the comparative results displayed in the [Measure Selection Tool](#) spreadsheet, you may evaluate candidate measures based on the scores given above and select the measures for the measure set by entering “Yes,” “No,” “Maybe,” or “Not Yet Considered” in the Measure Status column (Column P). You may want to use the Rationale column (Column Q) to record the reason for the measure’s status or the Notes column (Column R) to document any additional information about the measure.

The **Summary Sheet** tab includes key information about each of the measures in your measure set, including how well the measure aligns with your measure selection criteria and measure sets of interest. It is a helpful resource to utilize when reviewing the measure set as a whole.

APPENDIX

Glossary of Terms

Accountable Care Organization	ACO	A group of doctors, hospitals, and other health care providers that agree to share responsibility for the quality, cost, and overall care of its patients.
Calendar Year	CY	The time period of January through December.
Center for Medicare & Medicaid Innovation	CMMI	Also known as “The Innovation Center,” this unit of CMS supports the development and testing of innovative health care payment and service delivery models.
Centers for Medicare & Medicaid Services	CMS	An agency of the U.S. Department of Health & Human Services which administers Medicare, Medicaid, and the State Children’s Health Insurance Program (CHIP).
CMS Consensus-Based Entity	CBE	The CMS CBE endorses quality measures through a transparent, consensus-based process that incorporates feedback from diverse groups of stakeholders to foster health care quality improvement.
CMS Quality ID	-	The identification number that CMS uses to identify measures that utilize claims data.
CMS eCQM ID	-	The identification number that CMS uses to identify measures that utilize electronic health record (EHR) data.
Fiscal Year	FY	The federal fiscal year, which begins on October 1 and ends on September 30.
Healthcare Effectiveness Data and Information Set	HEDIS	A tool developed by NCQA that is used to measure health plan performance on dimensions of care and service.
Merit-based Incentive Payment System	MIPS	A program under CMS’s Medicare Access & CHIP Reauthorization Act of 2015 (MACRA) rule that combines parts of the Physician Quality Reporting System (PQRS), the Value Modifier, and Medicare EHR incentive program.

National Committee for Quality Assurance	NCQA	An organization that has helped to build consensus around important health care quality issues, such as performance measurement and improvement, by working with large employers, policymakers, doctors, patients and health plans.
Pay for Performance	P4P	A payment model that provides financial incentives to hospitals, physicians, and other health care providers that demonstrate improvement on specified performance measures.
Patient-Centered Medical Home	PCMH	A care delivery model that emphasizes care coordination and communication. Patient treatment is coordinated through a primary care provider to ensure timely and necessary care.
State Innovation Model	SIM	An initiative led by CMMI that provides financial and technical support to states for the development and testing of state-led, multi-payer health care payment and service delivery models.