

# Performance Measures Coordinating Committee Council Meeting

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Monday, December 9, 2024  
1:00 p.m. – 3:00 p.m.

# Housekeeping

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- ▶ No formal break, so feel free to step out briefly if needed.
- ▶ For committee members:
  - ▶ Please keep your phone line muted when not speaking.
- ▶ For members of the public:
  - ▶ Please keep your phone line muted at all times.
  - ▶ There will be dedicated time for questions and comments.
  - ▶ Please use the chat box to submit your question/comment and it will be addressed in the order received.

# Public Process

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- ▶ Maintaining a transparent process is important.
- ▶ Public comment opportunities:
  - ▶ PMCC meetings are open to the public.
  - ▶ There is time on the agenda for public comment prior to action on measures.
  - ▶ Meeting materials are posted on the Health Care Authority website\*
  - ▶ Comments can be submitted to HCA anytime at [hcapmcc@hca.wa.gov](mailto:hcapmcc@hca.wa.gov)

\*<https://www.hca.wa.gov/about-hca/who-we-are/washington-state-common-measure-set>

# Today's Objectives

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- ▶ Welcome and Introductions
- ▶ Recap of the October PMCC meeting
- ▶ Leap Frog Presentation
- ▶ Ongoing discussion of the Health Equity Ad Hoc workgroup Recommendations
- ▶ Looking forward to 2025 and Priorities for the PMCC
- ▶ The PMCC Year in Review 2024
- ▶ Public Comment
- ▶ Wrap Up

# Welcome & Introductions

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- ▶ Please share the following
  - ▶ Your Name
  - ▶ Your Role
  - ▶ Your organization

# Recap of the October PMCC Meeting

Sharon Eloranta, MD, WHA

# Recap of the October 2024 PMCC Meeting

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- ▶ NCQA HEDIS measure updates for 2025
- ▶ Rural Health Collaborative Ad Hoc Workgroup Next Steps
- ▶ Health Equity Ad Hoc Workgroup Recommendations
- ▶ Primary Care Measures Ad Hoc Workgroup Discussion and Final Vote on Core and Alternative Measure Sets
- ▶ Public Comment

# Guest Presentation: Leapfrog Hospital Safety Grade

Missy Danforth, Senior Vice President of Health Care Ratings

# ▶ The Leapfrog Group's Approach to Hospital Quality Measurement

Presented by:

Missy Danforth, Senior Vice President, Health  
Care Ratings

December 9, 2024

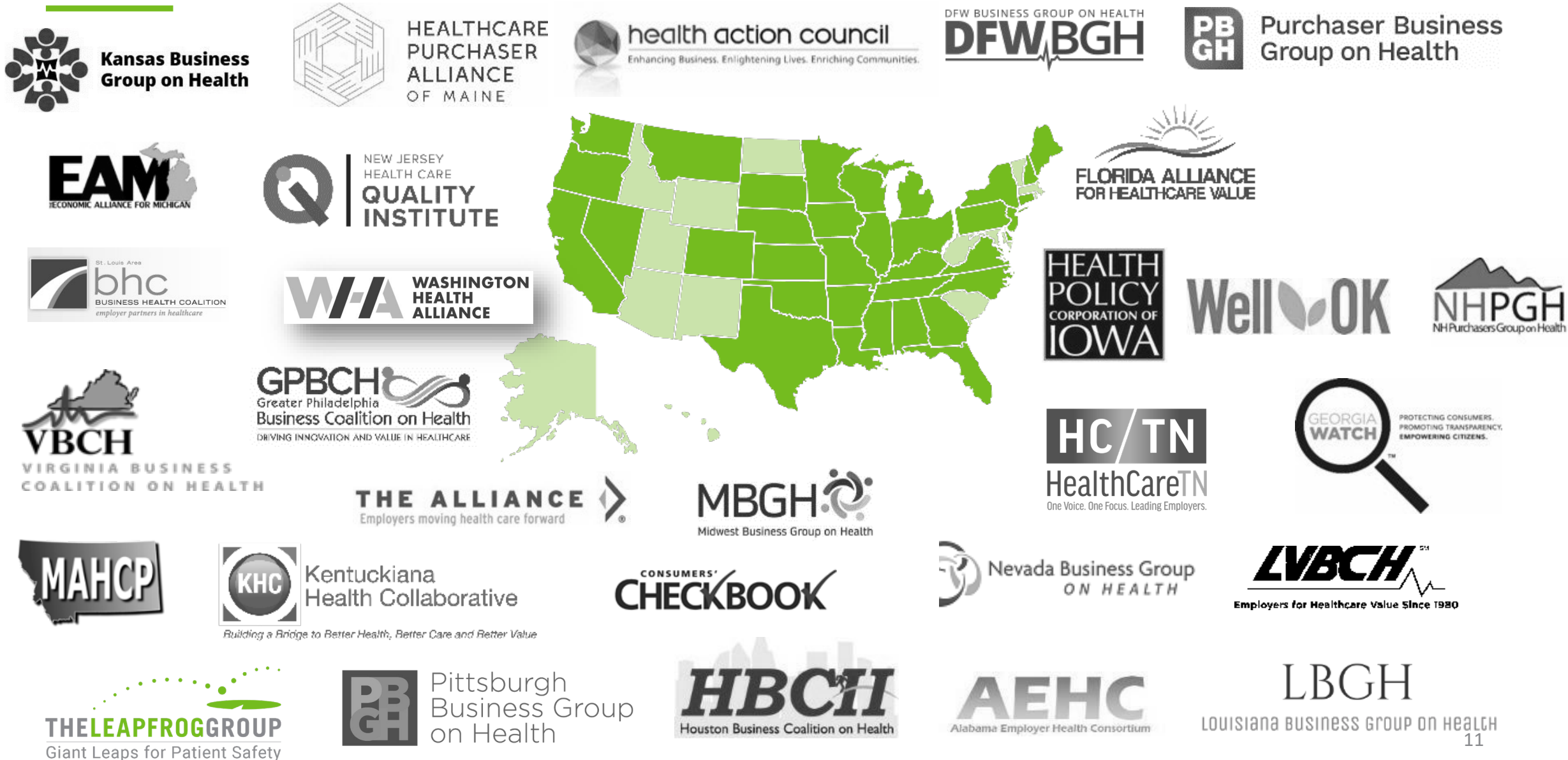


# About The Leapfrog Group

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- Premier purchaser-driven nonprofit born out of the movement for health care transparency
- Founded by purchasers in 2000 in response to 1999 IOM Report *To Err is Human*
- Driving change by empowering purchasers and consumers
- Used by national and regional health plans, employers, transparency vendors, and consumers

# Regional Leaders Drive National Improvement



# Types of Health Care Quality Measures Used by Leapfrog

Measures used to assess and compare the quality of health care organizations are commonly classified as either a structure, process, or outcome measure.

## Structural Measures

Are the right structures in place to keep patient safe and provide quality care?

- Whether the health care organization uses electronic medical records or medication order entry systems.
- The number or proportion of board-certified physicians.

## Process Measures

Are evidence-based clinical guidelines being followed?

- The percentage of women undergoing cesarean section who received DVT prophylaxis prior to incision.
- The percentage of newborns who had their bilirubin levels tested prior to discharge.

## Outcome Measures

How are patients being impacted by the care provided?

- The rate of healthcare associated infections such as central-line associated blood stream infections.
- The rate of falls with trauma or surgical complications.

# Leapfrog's Approach to Measurement: Maternity Care Example

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1. Wherever possible, use existing outcome measures:
  - Joint Commission Elective Delivery and Cesarean Birth measures
2. Work with national technical experts to develop process and structure measures where outcomes aren't available:
  - Volume of High-Risk Deliveries
3. Report services to round out quality of care data:
  - Use of Midwives, Doulas, Routine VBAC, lactation services, and tubal ligation following delivery

# National Measure Endorsement

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Battelle is a [Centers for Medicare & Medicaid Services \(CMS\)](#) new certified consensus-based entity. Previously, this role was filled by the National Quality Forum.

Battelle's Partnership for Quality Measurement (PQM) uses a consensus-based process involving a variety of experts - clinicians, patients, measure experts, and health information technology specialists - to ensure informed and thoughtful endorsement reviews of qualified measures.

Measures that have gone through the endorsement process must demonstrate an evidence-base, performance gap, and validity and reliability.

Leapfrog prefers endorsed measures as endorsement is an indication that the measure is rigorous and has been specifically approved for use in public reporting and payment.

# Leapfrog's Initiatives to Collect and Analyze Hospital Data

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## Collection of Data



## Analysis of Data



The logo for the Leapfrog Hospital Survey. It features a green square icon with a white dot pattern on the left, and the text "LEAPFROG" in green and "HOSPITAL SURVEY" in white to its right.

# LEAPFROG HOSPITAL SURVEY



## EXPLORES QUALITY AND SAFETY

The Survey is annual, includes broad range of patient safety, quality, and resource use measures, and is applicable to all hospitals.



## HOSPITALS SUBMIT A SURVEY

Hospitals voluntarily submit data via an Online Survey Tool.



## PROGRESS TOWARDS MEETING NATIONAL STANDARDS IS REPORTED

Expert panels establish national standards for performance on each measures, and progress is publicly reported.


# Hospital Survey Results – ratings.leapfroggroup.org


LEAPFROG RATINGS


About ▾FAQsTHELEAPFROGGROUP


Search Leapfrog's Hospital and Surgery Center Ratings


Search by:

Facility Name

Location

Same-Day Procedure


Maternity Care

Guided Search

Facility name


Start typing the name of the facility here

Search



The highest-performing hospitals on the Leapfrog Hospital Survey are recognized annually with the prestigious Leapfrog Top Hospital award.

View List



The highest-performing surgery centers on the Leapfrog ASC Survey are recognized annually with the prestigious Leapfrog Top ASC award.

View List

## Harborview Medical Center

325 Ninth Avenue  
Seattle, Washington 98104-2499  
Survey Submission Date: August 13, 2024  
[Facility info, location, and more](#)

### All measures:

 Expand all

#### PATIENT SAFETY

 Patient Rights and Ethics

 Preventing Patient Harm

 Medication Safety

 Healthcare-Associated Infections

#### SPECIALTY CARE

 Critical Care


 Pediatric Care

 Maternity Care

#### SURGERY

 Complex Adult Surgery




 Elective Outpatient Surgery - Adult

 Elective Outpatient Surgery - Pediatric

 Care for Elective Outpatient Surgery Patients

# Hospital Survey Results – ratings.leapfroggroup.org (cont..)

## Preventing Patient Harm

Measure name	Leapfrog's Standard	Hospital's Progress
Nursing and Bedside Care for Patients	Hospitals should have nurse staffing plans in place that ensure there are enough nurses of all types (i.e., registered nurses, licensed practical nurses, or unlicensed assistive personnel) to provide direct care to patients in medical, surgical, or med-surg units each day.	 ACHIEVED THE STANDARD
▲ SHOW LESS ▲		
This hospital's total number of nursing hours per patient day is: 10.80		
This hospital did achieve Magnet status, nationally recognized for nursing excellence.		
Nursing Care for Patients	Hospitals should have nurse staffing plans in place that ensure there are enough registered nurses (RNs) to provide direct care to patients in medical, surgical, or med-surg units each day.	 ACHIEVED THE STANDARD
▼ SHOW MORE ON THIS HOSPITAL'S PERFORMANCE ▼		
Percentage of Nursing Staff who are Registered Nurses (RNs)	Hospitals should have nurse staffing plans in place that ensure the proportion of nursing hours performed by registered nurses (RNs) is adequate.	 CONSIDERABLE ACHIEVEMENT
▼ SHOW MORE ON THIS HOSPITAL'S PERFORMANCE ▼		

# LEAPFROG HOSPITAL SAFETY GRADE



## EXCLUSIVELY FOCUSED ON PATIENT SAFETY

The Safety Grade is biannual, only includes measures of accidents, injuries, and errors, and is only calculated for general acute-care hospitals.



## HOSPITALS RECEIVE LETTER GRADES

Safety Grades, A through F, are calculated using 22 measures, regardless of Hospital Survey participation.



## GRADES ARE ASSIGNED USING VARIOUS DATA SOURCES

Sources include the Hospital Survey Results, CMS data, and other secondary data sources (such as imputed scores).

# Hospital Safety Grade – hospitalsafetygrade.org

LEAPFROG

HOSPITAL

SAFETY GRADE

What is

Patient Safety?

Your Hospital's

Safety Grade

What You Can Do

to Stay Safe

For Hospitals

Licensure

& Permissions

About

Our Movement

A program of

THE LEAPFROG GROUP

A

B

C

D

F

How Safe is Your Hospital?

Search below to find the fall 2023 Leapfrog Hospital Safety Grade of your general hospital.

Search By City/State

City

- Choose -

Use My Location

Search

How Safe is Your Hospital?

Search by Hospital

virginia mason

Search

1

Recent Searches

Hospital Matches

1 hospital matching hospital name virginia mason

List

Map

Sort by

Grade

This Hospital's Grade

A

FALL 2023

Virginia Mason Medical Center

1100 Ninth Avenue

Seattle, WA 98101-2756

[View the full Score](#)

Hospital Matches

24 hospitals matching Seattle, WA

List

Map

Sort by

Distance

Map

Satellite


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Giant Leaps for Patient Safety

© The Leapfrog Group 2024

# Hospital Safety Grade – hospitalsafetygrade.org (cont..)

This Hospital's Grade










**A**  
FALL 2023

**Virginia Mason Medical Center**

1100 Ninth Avenue  
Seattle, WA 98101-2756  
[Map and Directions](#)

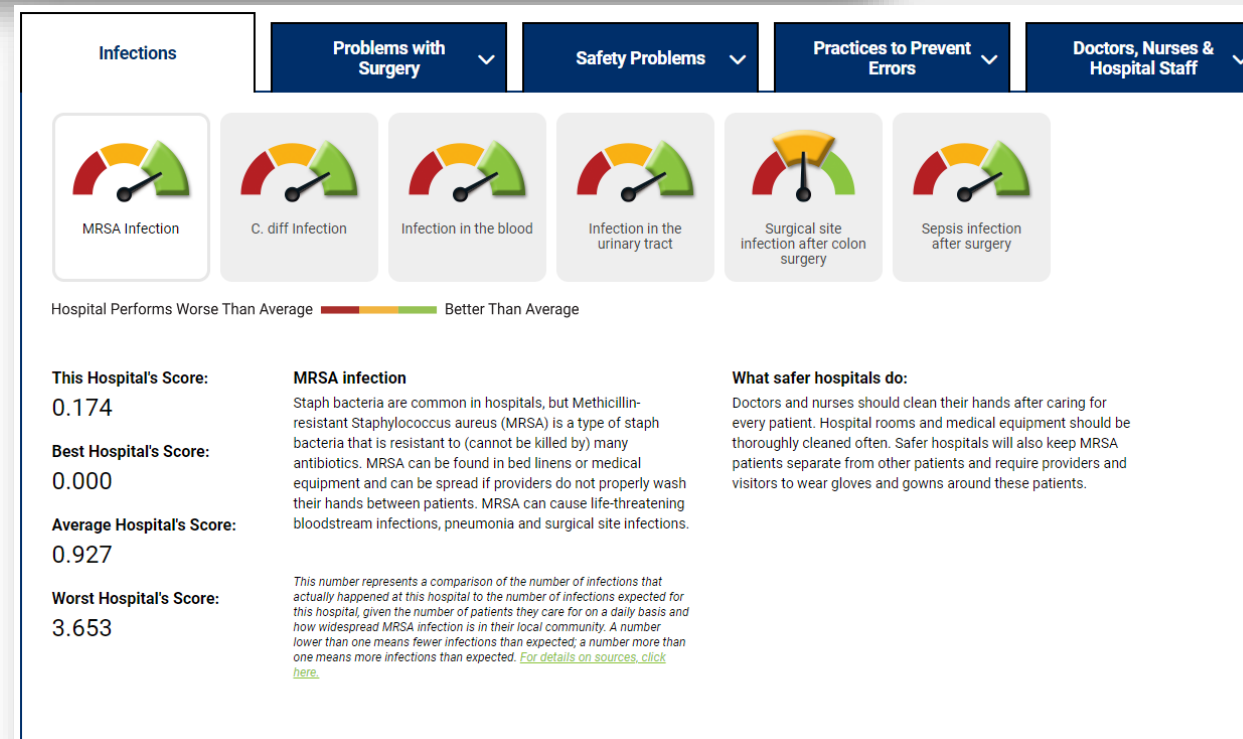
[View this hospital's Leapfrog Hospital Survey Results](#)

▼ Hide Recent Past Grades

2023	2022	2021	2020
	 	 	 

[More about past grades](#)

[Detailed table view](#)



# Participation in WA State

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## Leapfrog Hospital Survey

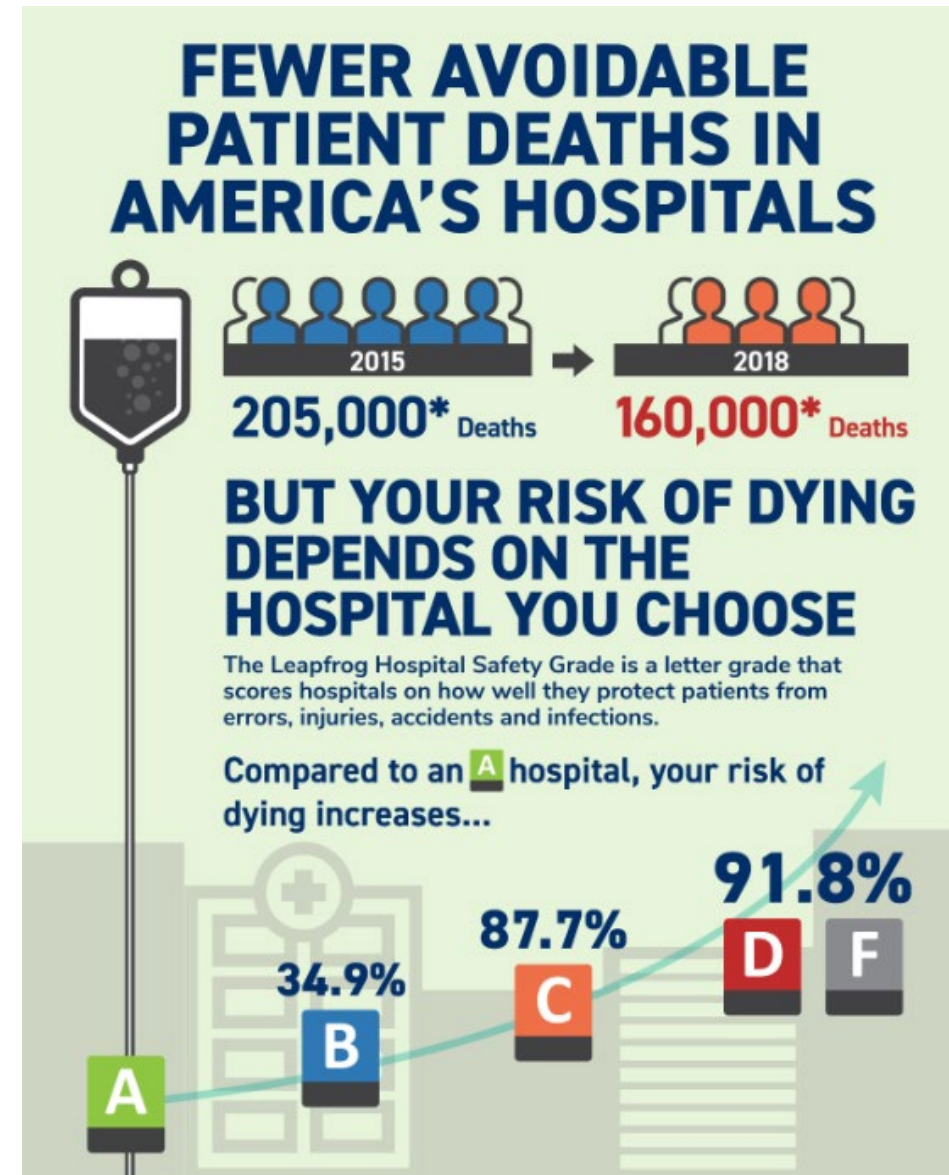
- Survey participation is up from 54% of hospitals in 2023 to **72%** of hospitals in 2204 submitting a Survey

## Leapfrog Hospital Safety Grades

- 49 general acute care hospitals received a Safety Grade this fall
- With 16 of the 49 hospitals earning an A grade
- This ranks WA as **17<sup>th</sup>** in the nation for % of A hospitals
- In spring 2024, WA was ranked 25<sup>th</sup> with only 12 A graded hospitals

# Safety FIRST

A range of existing, publicly reported patient safety measures are available from Leapfrog and CMS.



# Service Line Excellence

### Search Leapfrog's Hospital and Surgery Center Ratings

Search by:

Facility Name

Location

Same-Day Procedure

Maternity Care

Guided Search

Leapfrog collects information about certain maternity care services. Use our filters to find the right hospital for you.

SERVICES

☒ Certified nurse-midwives for delivery

☒ Doulas for labor and delivery

☒ Breastfeeding/lactation services

☐ Vaginal delivery after cesarean section (VBAC)

☐ Postpartum tubal ligation during labor/delivery admission

MEETS THE STANDARD FOR

☒ Cesarean sections 1

☒ Episiotomies 1

☐ Screening newborns for jaundice before discharge 1

☐ Preventing blood clots in women undergoing cesarean section 1

☐ Protecting women and newborns from early elective deliveries 1

Do you want to only show facilities near you?

Yes

Distance

10 Miles

50 Miles

100 Miles

200 Miles

Any Distance

Location

Seattle, WA, USA

6 facilities matched

Show these results

Don't see what you're looking for? Search for hospitals and ASCs near you to find ratings on safety and patients' experience.

Maternity Care		
Measure name	Leapfrog's Standard	Hospital's Progress
High-Risk Deliveries	Hospitals should deliver at least 50 very-low birth weight babies per year OR the hospital must maintain a lower-than-average morbidity/mortality rate for very-low birth weight babies.	DOES NOT APPLY
Cesarean Sections	This is defined as first-time mothers giving birth to a single baby, at full-term, in the head-down position who deliver their babies through a C-section. Hospitals should have a rate of C-sections of 23.6% or less.	<div><div></div><div></div><div></div><div></div><div></div></div> <div>ACHIEVED THE STANDARD</div> <div>▲ SHOW LESS ▲</div> <div>This hospital's rate of Cesarean sections is 22.0%</div>
Episiotomies	This is defined as mothers having an incision made in the perineum (the birth canal) during childbirth. Hospitals should have a rate of episiotomies of 5% or less.	<div><div></div><div></div><div></div><div></div><div></div></div> <div>ACHIEVED THE STANDARD</div> <div>▲ SHOW LESS ▲</div> <div>This hospital's rate of episiotomies is 1.4%</div>
Screening Newborns for Jaundice Before Discharge	Hospitals should screen at least 90% of babies for jaundice.	<div><div></div><div></div><div></div><div></div><div></div></div> <div>ACHIEVED THE STANDARD</div> <div>▼ SHOW MORE ON THIS HOSPITAL'S PERFORMANCE ▼</div>
Preventing Blood Clots in Women Undergoing Cesarean Section	At least 90% of women undergoing a cesarean section receive treatment to prevent blood clots.	<div><div></div><div></div><div></div><div></div><div></div></div> <div>ACHIEVED THE STANDARD</div> <div>▼ SHOW MORE ON THIS HOSPITAL'S PERFORMANCE ▼</div>
More Information		
Number of Live Births	The hospital had 901 live births (i.e., liveborn infants) at this hospital location for the reporting time period.	
Midwives	This hospital does have certified nurse-midwives and/or certified midwives deliver newborns.	
Doulas	This hospital allows patients to bring their own doulas.	
Lactation Services	This hospital offers lactation services in the hospital.	
Vaginal Delivery After Cesarean Section (VBAC)	This hospital does offer vaginal delivery after cesarean section (VBAC).	
Tubal Ligation	This hospital does offer tubal ligation during the labor and delivery admission.	
Policy to Prevent Early Elective Deliveries	This hospital does have a policy to prevent early elective deliveries.	

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Giant Leaps for Patient Safety

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# Patient-Centered Care and Experience

A range of patient-centered care measures are available from Leapfrog including Billing Ethics, Health Care Equity, and Informed Consent.

Leapfrog and CMS combined also offer patient experience reporting on hospitalized adults, hospitalized children, and outpatient surgery in hospitals and ambulatory surgery centers.

Measure name	Leapfrog's Standard	Hospital's Progress
Billing Ethics	Hospitals should provide patients with complete billing information and access to a representative that can quickly resolve billing issues. In addition, hospitals should not sue patients over late or unpaid bills.	 SOME ACHIEVEMENT
<div>▲ SHOW LESS ▲</div> <div>This hospital provides a detailed bill within 30 days of receiving insurance payments: No</div> <div>This hospital provides access to a representative who can quickly investigate billing errors and establish payment plans: Yes</div> <div>This hospital sues patients: No</div>		

# Thank you!

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More information about Leapfrog and our Health Care Ratings at [www.leapfroggroup.org](http://www.leapfroggroup.org).

# Continued Discussion of the Health Equity Ad Hoc Workgroup

Heleena Hufnagel, HCA

## Approach

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### Scope

- In Scope (including)
  - WSCMS performance measures
  - Federal and State guidance for advancing HE
  - Qualitative and Quantitative data sources accessible to the PMCC
  - WA Community collaboratives (i.e. state agencies, tribal, local health systems, advocacy groups, etc.)
- Out of Scope
  - We will not be reviewing/selecting new clinical performance measures (CPM) at this meeting.
  - We will not be voting on any changes to the current roles/responsibilities of the PMCC members in this meeting.

# Group Discussion

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## Discussion

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1. How do we define health equity? What are the current gaps?
  2. What are the opportunities for the PMCC to address health equity in a meaningful way? How do we monitor progress?
  3. What would the PMCC need to accomplish these goals? How can the PMCC engage partners and organizations in these efforts?
-

# Final Recommendations

Measure Set	1.) Begin with the existing Measure Set and determine if the current measures we have are able to identify health disparities and if there is a potential to advance health equity.
Data Focus	2.) Identify and leverage the existing data streams available to the PMCC.
Relationship Building	3.) Promote participation with WA community partners in PMCC activities to inform the Committee as to how the WSCMS is achieving the goal of improving public health outcomes.

# 1.) Final Recommendations Continued

## Measure Set

- The PMCC can promote a smaller set of core measures.
- Consideration for subset of measures
- The PMCC can promote outcomes and QOL measures.
- Add an equity component to the set of measures where possible.
- Conduct small scale evaluation annually, high level and ad hoc as needed.

## Data Focus

- National data can be used as starting point( North Star)
- Focus on identifying strengths and limitations of data sources.
- WA Specific: Potential to also use the ADI or other tools used by WHA to home in on the measures we select to take a deep dive.
- Potential to build in disaggregation of measures to support HE review.
- Health Equity Data/ PEAR annual presentation.
- Outreach to community partners to understand what data they are collecting and how we can collaborate.

## Relationship Building

- Collaborate with community representatives to understand how individuals may be impacted by these identified disparities.
- PMCC can share public level data that may be used by partners in their community engagement and request feedback from them.
- Support community participation in the PMCC and ad hoc workgroups to address health inequities identified in the WSCMS.

# Next Steps

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- ▶ Health Equity is difficult to define.
- ▶ Health Equity is multifaceted and means different things to different people.
- ▶ Health Equity is more than measuring clinical performance.
- ▶ Achieving the outcomes we want is going to take time.
- ▶ There is no right or wrong starting point, only that we need to begin somewhere.
- ▶ Ask for the PMCC: Agree as a Committee to begin the steps forward, with the understanding this may evolve over time.

# Looking forward to 2025: Priorities for PMCC

Laura Pennington, HCA

# PMCC Priorities in 2025

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- ▶ Implementation of the rural ad hoc workgroup
- ▶ Continuation of health equity discussions
  - ▶ Continue to explore opportunities for engagement community partners
- ▶ WSCMS biennial review
- ▶ Explore opportunities to incorporate data reports/presentations into committee discussions



# Additional Considerations for 2025

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## ▶ State priorities

- ▶ Upcoming 2025 WA Legislative session
- ▶ Transition to a new Governor

## ▶ Federal priorities

- ▶ Timelines for implementation
  - ▶ NCQA HEDIS Roadmap
    - R/E stratification and ECDS 2030
  - ▶ CMS Roadmap
    - FHIR HL7
    - CMS final rule
    - HE Framework 2032
  - ▶ OMB updated R/E reporting

# PMCC 2025 priorities discussion

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- ▶ Are there topics of interest that the committee may want to explore?
- ▶ What are people in Washington talking about and are there any conversations that the PMCC should be tracking?
- ▶ Other ideas?
  - ▶ We can also send out a brief survey to committee members as we prepare for the February meeting to solicit additional input/ideas

# PMCC Year in Review 2024

Judy Zeran-Thul, HCA



# WELCOME!

- ▶ (4) new members to our board:
  - ▶ March: Darcy Jaffe, WA State Hospital Association
  - ▶ May: Theresa Hattori, Tribal and Community Health Plan of WA
  - ▶ Kelly Shaw, Department of Health
  - ▶ October: Alastair Matheson, Data Modernization Director at Public Health—Seattle & King County

# Accomplishments:

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- ▶ Guest Presentations:
  - ▶ MA Medicaid Quality Alignment Task Force – Clara Filice and Joshua Twombly
  - ▶ Leap Frog Hospital Grade – Missy Danforth
- ▶ Rural Health Collaborative introductory meeting and planning
- ▶ Health Equity
  - ▶ PMCC 101 introductory presentation to PEAR CAT partners
  - ▶ Ad Hoc workgroup June 2024
    - recommendations for incorporating HE lens in PMCC WSCMS review in 2025
  - ▶ SME meetings with community partners and HCA PEAR's Ashley Bennett to discuss additional opportunities in 2025.
- ▶ Primary Care Measures Ad Hoc Workgroup
  - ▶ Approval of core and alternative measure sets to support Primary Care Transformation Initiative

## Thank you to retired members in 2024

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- ▶ Pat Justis
- ▶ Eli Kern



# In Remembrance of PMCC Member Dale Reisner

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- Dr. Dale Reisner was a longtime member of the PMCC, having joined in 2014 as an original appointee selected by the Governor.
- She was a very passionate champion of women's health issues, including helping to develop the [WA Safe Deliveries Roadmap](#).
- She was a very active and valuable member of the committee.
- She will be dearly missed.



# Public Comment

Sharon Eloranta, MD

# Public Comment

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- ▶ Please enter your question or comment into the chat box.
- ▶ If you prefer to speak, enter your name into the chat box and unmute yourself when called upon.
- ▶ If speaking, please limit your comments to 2 minutes.

# Wrap Up and Next Steps

Judy Zerzan-Thul, MD

# Wrap Up/Next steps

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- ▶ Action Items

- ▶ Next Meeting:

- ▶ February 21, 2025, 9:00 a.m. –11:00 a.m.

- ▶ Proposed agenda topics:

- Begin discussion on improvement of WSCMS

- Timeline of Activities

- Other?

- Send additional topics to [hcapmcc@hca.wa.gov](mailto:hcapmcc@hca.wa.gov) ATTN: Heleena H. and Laura P.