



## American Association on Health & Disability

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*AAHD - Dedicated to better health for people with disabilities through health promotion and wellness*



# LAKESHORE

June 30, 2020

**Re: Core Quality Measures Collaborative – National Quality Forum  
CQMC [Value-Based Program Quality Measure] Implementation Guide, June  
29 draft for public comment. The primary audience of the guide are health plans.**

To: <http://www.qualityforum.org/cqmc/> comment portal.  
And The Core Quality Measures Collaborative [cqmc@qualityforum.org](mailto:cqmc@qualityforum.org)

The American Association on Health and Disability and the Lakeshore Foundation appreciate the opportunity to provide comments on the draft report.

The American Association on Health and Disability (AAHD) ([www.aahd.us](http://www.aahd.us)) is a national non-profit organization of public health professionals, both practitioners and academics, with a primary concern for persons with disabilities. The AAHD mission is to advance health promotion and wellness initiatives for persons with disabilities.

The Lakeshore Foundation ([www.lakeshore.org](http://www.lakeshore.org)) mission is to enable people with physical disability and chronic health conditions to lead healthy, active, and independent lifestyles through physical activity, sport, recreation and research. Lakeshore is a U.S. Olympic and Paralympic Training Site; the UAB/Lakeshore Research Collaborative is a world-class research program in physical activity, health promotion and disability linking Lakeshore's programs with the University of Alabama, Birmingham's research expertise.

One of the CQMC report 4 key elements of CQMC value-based program quality measure success is “**stakeholder engagement and partnership**” (pages 10-13). Agreed, however:

**The draft report needs to better recognize, focus, and emphasize the importance of person, patient, consumer, participant, beneficiary and their families engagement.**

The guide mentions:

Include providers and other stakeholders in the program design process – page 11

Patients are mentioned in passing – page 11

Plans should solicit ideas from providers – page 12

Plans should identify providers who serve patients with social risk factors – page 12

Patient organizations are listed as a possible stakeholder – page 13

The CQMC report largely ignores the recently released (June) NQF report – “**The Care We Need: Driving Better Health Outcomes for People and Communities.**” The Care We Need report identifies 4 areas where “improvement requires focus.” The very first of the 4 is: “**Supporting Activated Consumers:** To help consumers make informed healthcare decisions, care options must consider evidence as well as individual goals and needs. Use evidence and consumer priorities to define what quality is and how it is measured and reported.” [NQF fact sheet excerpt]

The CQMC report largely ignores the recently released (June) NQF final draft report for public comment: **PRO (Patient-Reported Outcomes): Best Practices on Selection and Data.** “The term ‘patient’ is intended to be inclusive of all persons, including patients, families, caregivers, and consumers more broadly, as well as all persons receiving support services, such as those with disabilities” [NQF page 4]

The CQMC report ignores the recently released (April) **NQF– Person-Centered Planning and Practice:** Draft Final Report for Comment. Person-Centered Planning is a way to organize community living services and supports (in LTSS programs including health plans). Person-Centered Planning is based on the core belief that one has the right to make choices and take risks.

The CQMC report ignores the relatively recently released (November 2019) **NQF Hospital Quality Star Rating Summit** issue brief. The issue brief identified 3 recommendations. Recommendation #3: “design data presentation to meet **consumer priorities and other user needs**” (page 3). The issue brief identified 11 considerations. Consideration #10: “Expand the data sources to include a more comprehensive representation of patient populations served...” (page 4)

The CQMC report undermines the recently released (May) **HHS Health Quality Roadmap**: The HHS objective – create a “transparent multi-stakeholder mechanism” to “govern the measure development and stewardship process,” to “include both clinical and **patient-reported outcomes** (PROs) (page 4). An HHS objective is to establish a coordinated governance and oversight structure to oversee health care quality programs, quality measures and standards, and related quality activities (page 5), including aligning federal program measures (page 6). The governance structure shall “**develop and implement a plan for incorporating patient and provider input.**” (page 8)

The CQMC report neglects the **National Managed LTSS Health Plan Association “Model LTSS Performance Measurement and Network Adequacy Standards for States”** (April 2017). Five domains are identified. Domain #4 is Person-Centered Planning and Coordination, with 11 suggested measures. Domain #5 is “Satisfaction” (by health plan enrollees and beneficiaries); 7 measures are suggested.

**Conclusion: The draft report needs to better recognize, focus, and emphasize the importance of person, patient, consumer, participant, beneficiary and their families engagement.**

Sincerely,



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Member, National Quality Forum (NQF) workgroup on Medicaid adult measures (December 2017-present), Medicaid-CHIP Scorecard Committee (October 2018-present) and Measure Sets and Measurement Systems TEP (June 2019-present). Member, National Quality Forum (NQF) workgroup on persons dually eligible for Medicare and Medicaid (July 2012-July 2017) and NQF population health task force (2013-2014) (<http://www.qualityforum.org/>) and NQF representative of the Consortium for Citizens with Disabilities (CCD) Task Force on Long Term Services and Supports ( <http://www.c-c-d.org/>). 2017 member, NQF MAP workgroup on Medicaid adult measures. 2016-2017 NQF duals workgroup liaison to the NQF clinician workgroup. 2015-2016 and 2014-2015 NQF duals workgroup liaison to the NQF PAC/LTC workgroup. Member, NQF Medicare Star Ratings Technical Expert Panel (June-November 2019). AAHD Representative to the CMS-AHIP-NQF Core Quality Measures Collaborative (2019-present). Member, ONC (Office of the National Coordinator for Health Information Technology) Health IT Policy Committee, Consumer Workgroup, March 2013-November 2015; Consumer Task Force, November 2015-April 2016. (<http://www.healthit.gov/policy-researchers-implementers/federal-advisory-committees-facas/consumer-empowerment-workgroup>). Member, SAMHSA Wellness Campaign National Steering Committee – January 2011-September 2014. (<http://promoteacceptance.samhsa.gov/10by10/>).

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