

# Next Generation of Quality Reporting

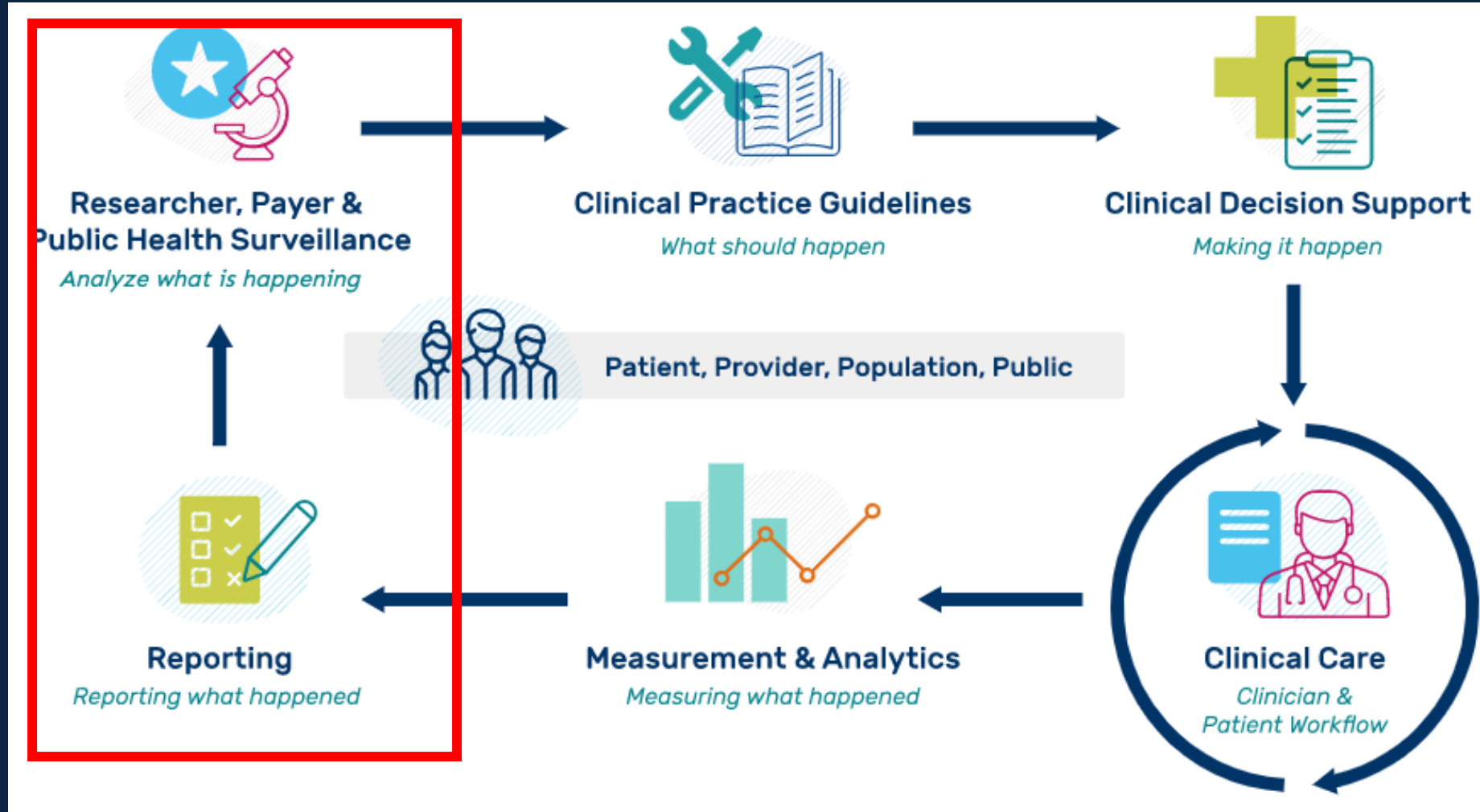
Samuel Sayer

# About Me

- Samuel Sayer
- Chief Engineer, Health Policy & Operation
- Former Data Exchange for Quality Measures (DEQM) Co-Chair
- MITRE



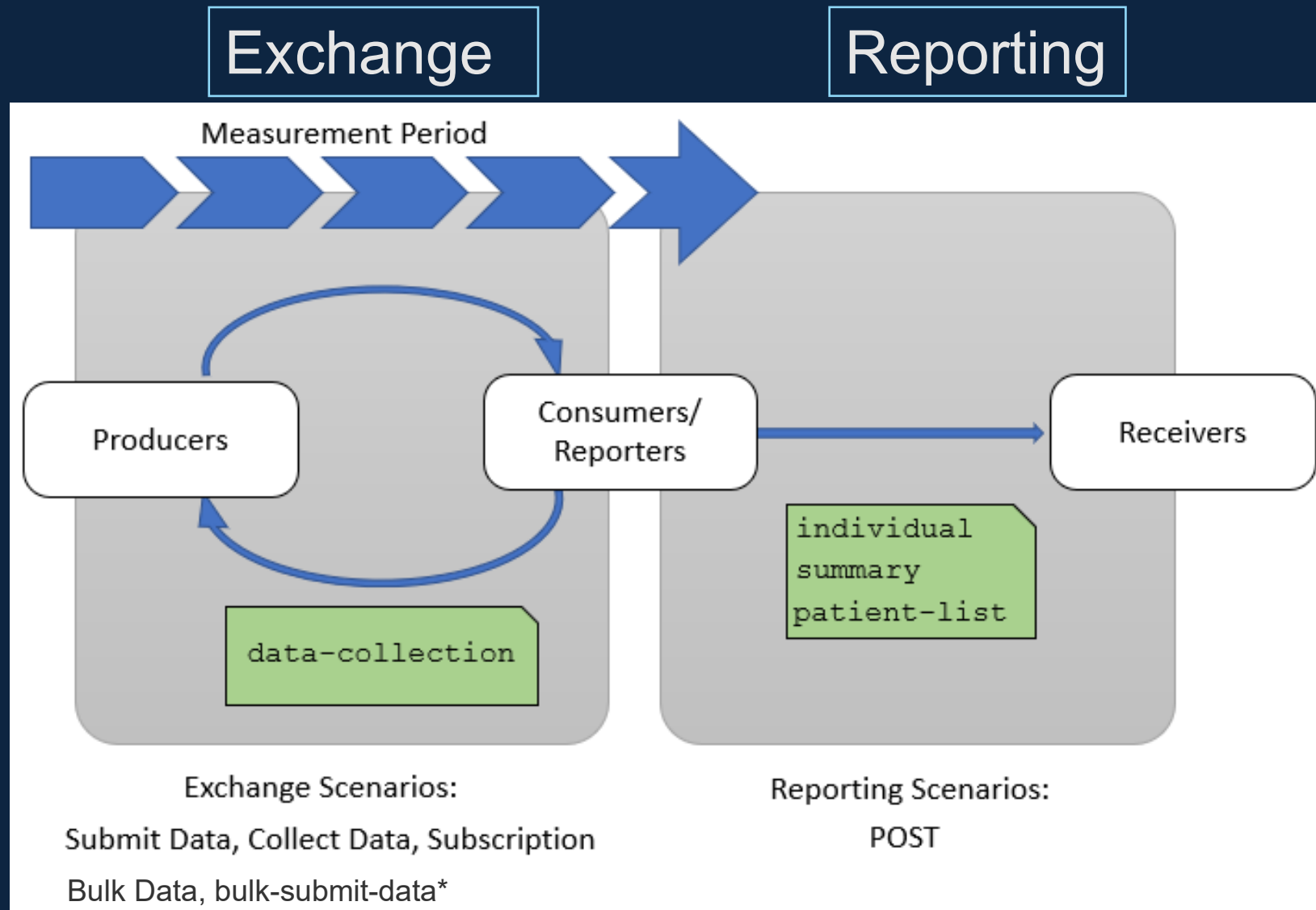
# Learning Health System



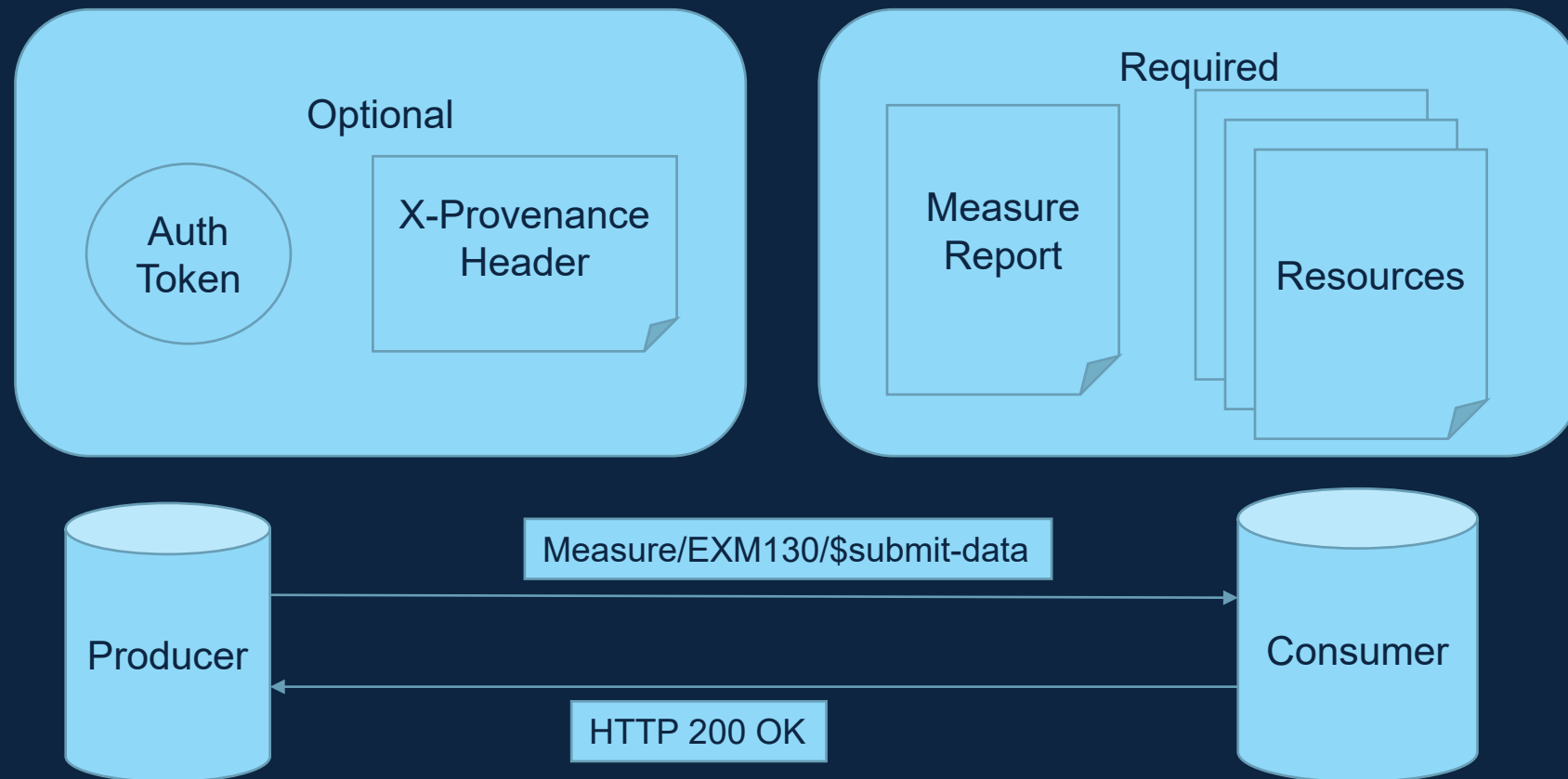
# Background

- The Data Exchange for Quality Measures (DEQM) implementation guide started development in 2018 under the Da Vinci FHIR Accelerator
  - DSTU1 focused on medication reconciliation and simple use cases
  - DSTU2 included more advanced reporting functionality
  - DSTU3 added support for care gap reports
  - DSTU4 (currently undergoing ballot reconciliation) will add support for bulk transactions and more advance care gap reports

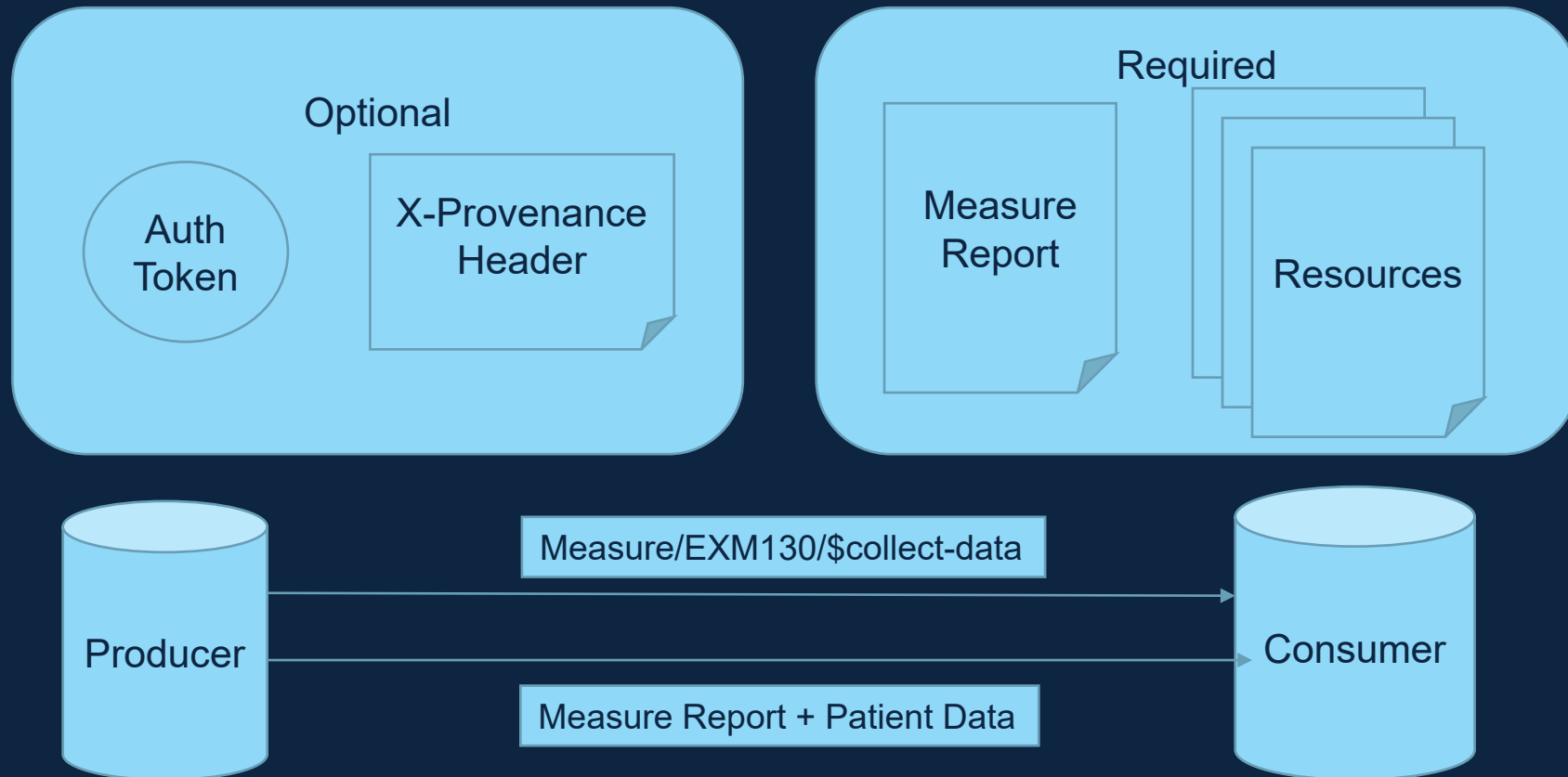
# DEQM: Exchange vs Reporting



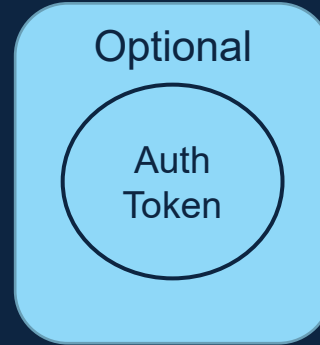
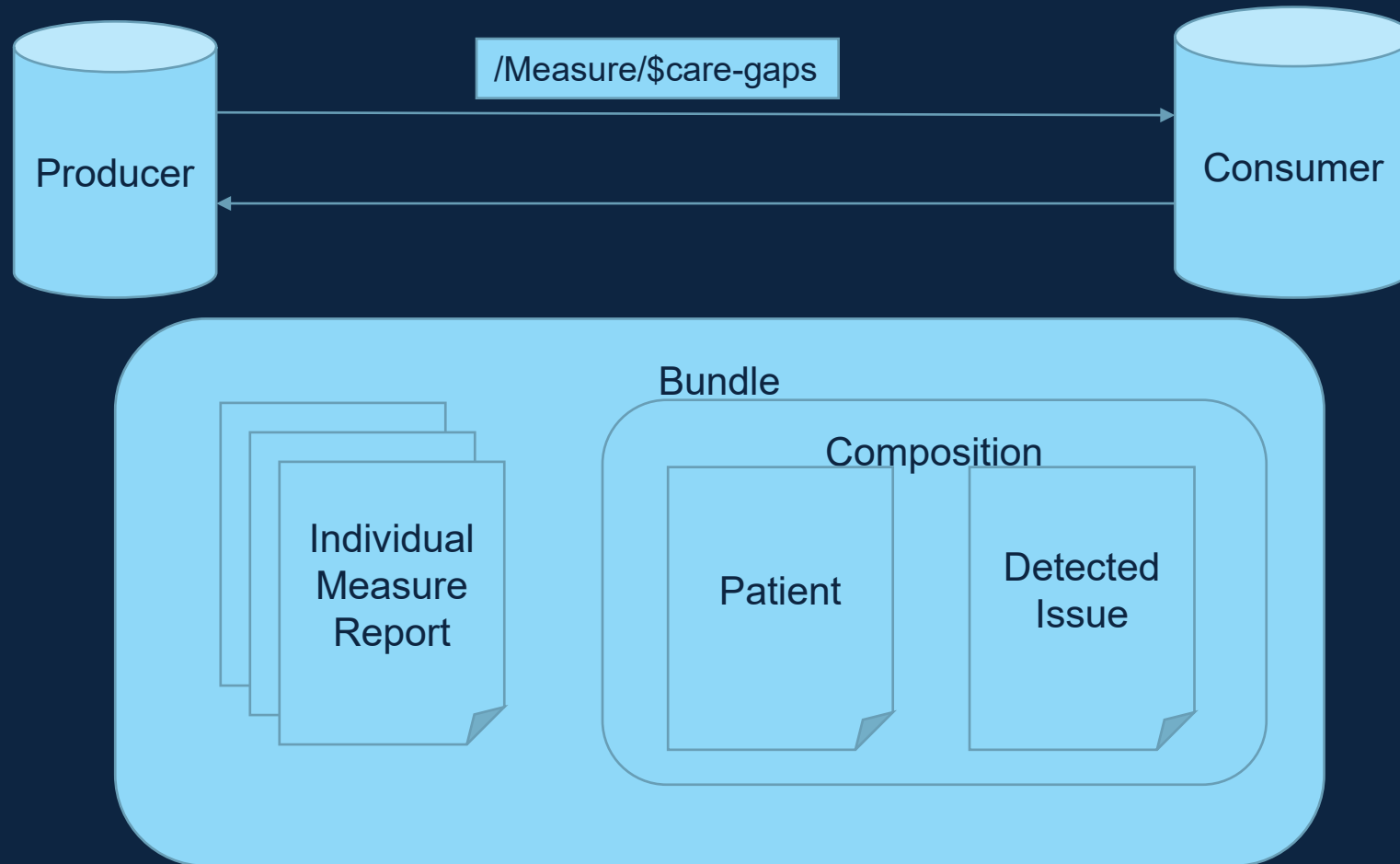
# DEQM Reporting



# DEQM Data Collection

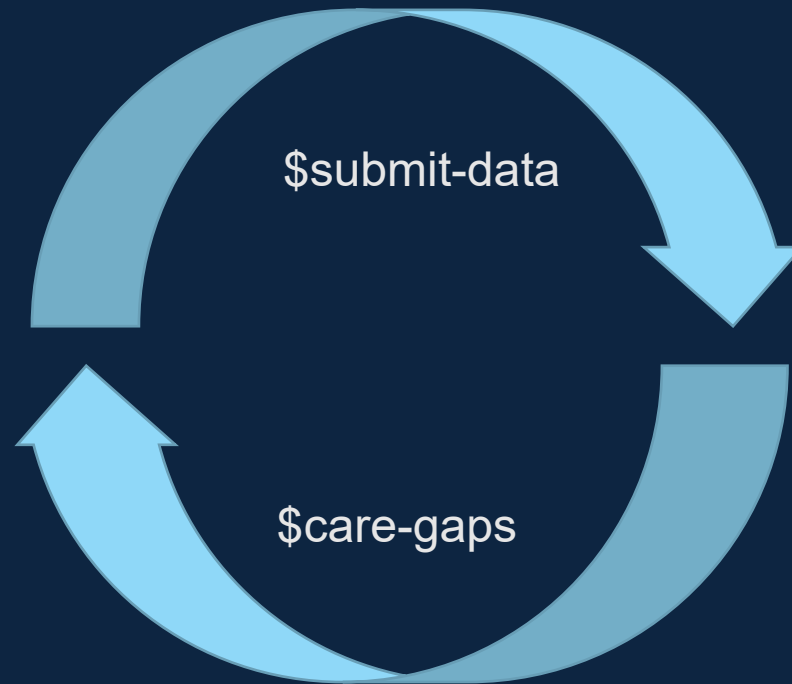


# DEQM Gaps in Care





# Reporting Cycle

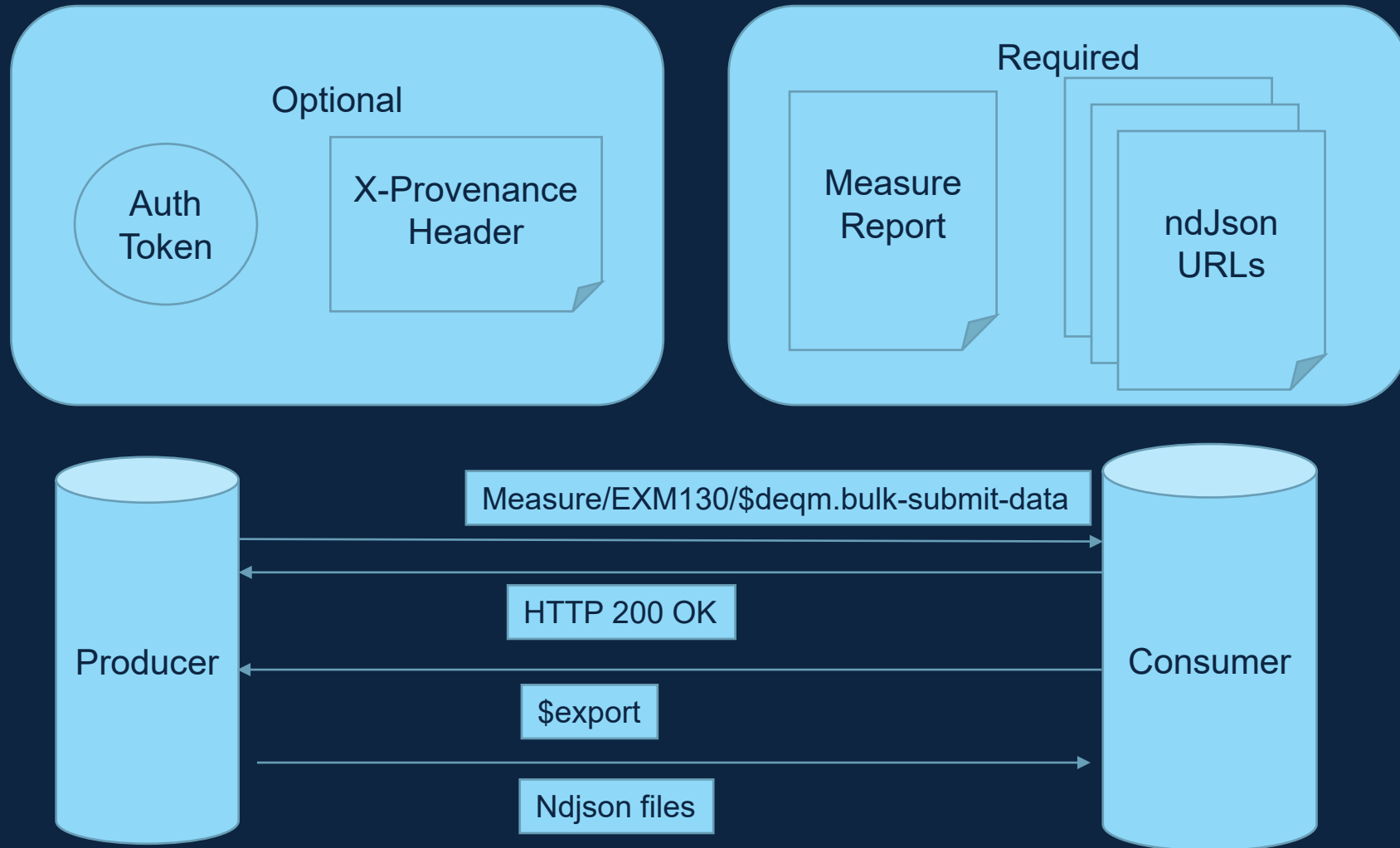


# DEQM DSTU4

# Summary of New Features

- Bulk Data Support
- Detailed Care Gaps
- Additional \$collect-data/\$submit-data functionality

# DEQM Bulk Reporting



# Example Measure – Care Gaps

```
define "Initial Population":
  AgeInYearsAt(date from start of "Measurement Period")in Interval[46, 75]
  and exists AdultOutpatientEncounters."Qualifying Encounters"

define "Denominator":
  "Initial Population"

define "Denominator Exclusions":
  Hospice."Has Hospice Services"
  or exists "Malignant Neoplasm"
  or exists "Total Colectomy Performed"
  or AIFrailleTCF."Is Age 66 or Older with Advanced Illness and Frailty"
  or AIFrailleTCF."Is Age 66 or Older Living Long Term in a Nursing Home"
  or PalliativeCare."Palliative Care in the Measurement Period"

define "Numerator":
  exists "Fecal Occult Blood Test Performed"
  or exists "Fecal Immunochemical Test DNA Performed"
  or exists "Flexible Sigmoidoscopy Performed"
  or exists "CT Colonography Performed"
  or exists "Colonoscopy Performed"
```

# Detailed Care Gaps

- Can we tell the provider which data elements caused a care gap based on quality measure CQL definition?
  - "No valid colonoscopy found for patient"
- How much detail can we give them?
  - "Patient is overdue for colonoscopy; last colonoscopy was 12 years ago"
- Measure logic introduces difficult edge cases

# Negative Improvement Notation, Multiple Paths

## ▲ Numerator

"Has Most Recent HbA1c Without Result"  
or "Has Most Recent Elevated HbA1c"  
or "Has No Record Of HbA1c"

# Patient Characteristics

```
define "Numerator":  
    exists "Cervical Cytology Within 3 Years"  
        or exists "HPV Test Within 5 Years for Women Age 30 and Older"
```



# Multiple ways to close a Gap

```
define "Numerator":  
    exists "Colonoscopy Performed"  
    or exists "Fecal Occult Blood Test Performed"  
    or exists "Flexible Sigmoidoscopy Performed"  
    or exists "Fecal Immunochemical Test DNA"  
    or exists "CT Colonography Performed"
```

# Counts

```
define "Numerator":  
  "Encounter with Two or More Concurrent Opioids at Discharge"  
  union "Encounter with a Concurrent Opioid and Benzodiazepine at Discharge"
```

# Detailed Care Gaps

Differential Table










Key Elements Table

Snapshot Table

Statistics/References

All

This structure is derived from [DetectedIssue](#)

Name	Flags	Card.	Type	Description & Constraints
 DetectedIssue		0..*	DetectedIssue	Clinical issue with action
 modifierExtension:gapStatus	?! S	1..1	DEQMGapStatusModifierExtension	Gap Status
 code	S	1..1	CodeableConcept	Issue Category, e.g. drug-drug, duplicate therapy, etc.
 coding		1..*	Coding	Code defined by a terminology system
 system		1..1	uri	Identity of the terminology system
 code		1..1	code	Symbol in syntax defined by the system
 patient	S	1..1	Reference(QICore Patient)	Associated patient
 evidence	S	1..*	BackboneElement	Supporting evidence
 detail	S	1..1	Reference(DEQM Individual MeasureReport Profile   Detailed Care Gap Guidance Response)	This references either a DEQM Individual MeasureReport or a GuidanceResponse resource. Note that referencing the GuidanceResponse resource allows potential profiling on GuidanceResponse in the future without breaking backward compatibility.

 [Documentation for this format](#)

# Guidance Response

Differential Table

Key Elements Table

Snapshot Table

Statistics/References

All

This structure is derived from [GuidanceResponse](#)

Name	Flags	Card.	Type	Description & Constraints
GuidanceResponse		0..*	GuidanceResponse	The formal response to a guidance request
reasonCode		0..*	CodeableConcept	Why guidance is needed <b>Binding:</b> Care Gap Reasons Value Set (preferred) <b>URL:</b> <a href="http://hl7.org/fhir/us/davinci-deqm/StructureDefinition/reasonDetail">http://hl7.org/fhir/us/davinci-deqm/StructureDefinition/reasonDetail</a>
detail		0..1	(Complex)	Which data element attribute is the cause of the care gap
dataRequirement				
valueFilter		0..*	(Complex)	What values are expected <b>URL:</b> <a href="http://hl7.org/fhir/us/cqfmeasures/StructureDefinition/cqfm-valueFilter">http://hl7.org/fhir/us/cqfmeasures/StructureDefinition/cqfm-valueFilter</a>

[Documentation for this format](#)

### 11.19.1.1.1 Terminology Bindings (Differential)

Path	Conformance	ValueSet
GuidanceResponse.reasonCode	preferred	CareGapReasons (a valid code from Care Gap Reasons Code System)

Code
NotFound
Missing
Present
InvalidAttribute
DateInRange
DateOutOfRange
ValueInRange
ValueOutOfRange
CountInRange
CountOutOfRange

# Grouping Gaps

- Multiple care gaps may exist for a single patient
- **OR gaps**
  - A set of gaps for which **only one gap** needs to be closed in order for the patient to meet standards for quality of care
- **AND gaps**
  - A set of gaps for which **every gap** must be closed in order for the patient to meet standards for quality of care

# Additional Functionality

- `$collect-data` -> `$deqm.collect-data`
  - Optional validation of data elements
  - Filter queries by a location
- `$submit-data` -> `$deqm.submit-data`
  - Support for submission for multiple measures (also in `$bulk-submit-data`)

*Driving Value With Interoperability: Building a Digital Quality Ecosystem, Yale, NCQA and CMS –*  
Thursday 4:00-5:00pm

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