Implementing Outcome-Based Quality Measures Using the MDS-HC

Marybeth McCaffrey  
*University of Massachusetts Medical School*

Rebecca Laes-Kushner  
*University of Massachusetts Medical School*

Ann G. Lawthers  
*University of Massachusetts Medical School*

*See next page for additional authors*

Follow this and additional works at: [https://escholarship.umassmed.edu/commed_pubs](https://escholarship.umassmed.edu/commed_pubs)

Part of the Health Economics Commons, Health Law and Policy Commons, Health Policy Commons, Health Services Administration Commons, and the Health Services Research Commons

Repository Citation  
[https://escholarship.umassmed.edu/commed_pubs/153](https://escholarship.umassmed.edu/commed_pubs/153)
Implementing Outcome-Based Quality Measures Using the MDS-HC

Authors
Marybeth McCaffrey, Rebecca Laes-Kushner, Ann G. Lawthers, and Kelly Love

Keywords
home and community-based health services, outcome-based measures

Comments
Presented at the World interRAI Conference, Toronto.

This presentation is available at eScholarship@UMMS: https://escholarship.umassmed.edu/commed_pubs/153
Implementing Outcome-Based Quality Measures Using the MDS-HC

UMass Medical School’s Center for Health Law and Economics
Marybeth McCaffrey, JD, Principal
Rebecca Laes-Kushner, MA, MPA, Senior Research Policy Analyst
Ann Lawthers, Sc.D., Senior Manager
Kelly Anthoula Love, JD, Senior Policy Analyst

April 13, 2016
World interRAI Conference, Toronto

The Long Term Services and Supports (LTSS) Policy Lab is a resource to aid Executive-level decision-makers in program planning, policy evaluation and fiscal forecasting in the LTSS arena and is an outgrowth of UMass Medical School’s long-standing partnership with the family of state agencies in the Commonwealth of Massachusetts. For more information on the LTSS Policy Lab, contact: Abbie Averbach, Director, Office of Data Analytics, Abigail.Averbach@umassmed.edu or Frederick Perro, Senior Director, Data Management Services, Rick.Perro@umassmed.edu.
Overview

• Need for Outcome Measures for Community-Based Services
• Study Methodology
• Implementing Quality Measures
Need for Outcome Measures for Community-Based Services

• Current measures: process, medical, consumer survey

• Need reliable and objective outcome measures community services
  - Help improve program services
  - Support alternative payment models
Need for Outcome Measures, con’t

• Measures based on MDS-HC
  - Outcome-based
  - Validated
  - Existing data
  - Used in Ontario, Manitoba and Michigan
  - Population-level analysis

• Research question
  Can State use its assessment data to implement interRAI’s outcome measures?
Set up analysis

- Map MDS-HC to assessment questions
  - Identify any textual differences between questions (e.g., “last 30 days” vs. “last 2 weeks”)

<table>
<thead>
<tr>
<th>Measure</th>
<th>MDS-HC Question</th>
<th>Corresponding State Assessment Question</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prevalence of unintended weight loss</td>
<td>W24. Unintended weight loss of 5% or more in last 30 days (or 10% or more in last 180 days)</td>
<td>Q.1243 Unintended weight loss of 5% or more in last 30 days</td>
</tr>
<tr>
<td>Prevalence of delirium</td>
<td>C3.1. Sudden or new onset/change in mental function -OR- Client has become agitated or disoriented</td>
<td>Q.1148 Sudden or new onset/change in mental function -OR- Q.1149 Client has become agitated or disoriented</td>
</tr>
</tbody>
</table>
Set up analysis, con’t

• Create study protocols
  – Link client assessments to program enrollment date
  – Develop filters \((\text{age, target programs, etc.})\)

• Gain in-depth understanding of how assessments are given

• Utilize iterative process
Analyze results

• **Response Rates per question (%)**
  – Overall response rates
  – Longitudinal questions
  – Response rates overall vs. by program

• **Response Patterns per question (answer options)**
  – Examined face validity of patterns
  – Compared patterns for low vs. high LOC programs
Response pattern for entire population

Ability to use the toilet

- Independent 55%
- Intermittent supervision or minimal physical assistance 4%
- Supervision 4%
- Limited Assistance 7%
- Extensive Assistance 3%
- Unwilling to perform 1%
- Activity did not occur 0%
- Total Dependence 1%
- Unwilling to perform 1%
- Activity did not occur 0%
- Total Dependence 1%

Figures drawn from feasibility study
Response pattern by program

Ability to use the toilet

1. Independent
2. INDEPENDENT - but experiences difficulty
3. Intermittent supervision or minimal physical assistance
4. Supervision
5. Limited Assistance
6. Extensive Assistance
7. Total Dependence
8. Unwilling to perform
9. Activity did not occur

Figures drawn from feasibility study

Programs based on level of Care (LOC) – Skilled Nursing Facility (SNF) vs. lower level

World interRAI Conference | April 13, 2016
Implementing Outcome Quality Measures Using the MDS-HC
Implementing Quality Measures

• Complete additional data work
  – Apply interRAI’s member-level screens (e.g., filter out cancer patients from measure on weight loss)
  – Re-analyze questions overall and by program

• Implement measures
  – 5 ready for use

• Resolve data issues
  – Additional 8 - 11 measures may be ready after data issues resolved
Potential application: Using quality measures to compare providers

Prevalence of unintended weight loss (rate of negative outcomes)

(mock data for illustrative purposes)

Boxes show average score per provider; horizontal lines show range of scores with confidence intervals. Green boxes show 75th %ile achievability level. Successful providers can share best practices.
Questions?

Marybeth McCaffrey, Principal
Center for Health Law and Economics (CHLE)
University of Massachusetts Medical School
Marybeth.McCaffrey@umassmed.edu
office: (617) 886-8302
cell: (802) 349-3936