

Next steps in measuring quality in Medicare

ISSUE: In its June 2014 report to the Congress, the Commission discussed a small set of population-based outcome measures to evaluate quality in each of Medicare’s three payment models—FFS Medicare, Medicare Advantage (MA), and Medicare accountable care organizations (ACOs)—within a local area. The June report chapter examined the potential use of population-based outcome measures such as rates of potentially preventable hospital admissions and emergency department visits, readmissions, mortality, and patient experience.

KEY POINTS: Staff will present preliminary results from an analysis of another potential population-based outcome measure called “healthy days at home.” Staff also will briefly discuss a type of quality measure called a “patient-reported outcome measure” (PROM).

ACTION: Commissioners are requested to discuss the “healthy days at home” and PROM measures, and provide staff with guidance for further research.

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