How to Prioritize and Implement Performance Measures in Heart Failure

11/7/2018

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Performance vs. Quality Measure

- **Performance Measures**
  - Based on highest level of evidence or opinion (Class I or III guideline recommendation).
  - Ready for pay for performance and public reporting
  - Those doing poorly on the measure are providing poor care.

- **Quality Measures**
  - Do not meet the above criteria
  - Still useful for some quality improvement programs
Performance Measure Choices

- Structure
  - Patient reported outcome collection and feedback
- Process (focus of ACC)
  - Guidelines
  - Appropriate Use
- Outcome
  - Mortality, hospitalization, days in acute care
  - Patient reported outcomes
    - NQF has endorsed gain in Patient Activation Measure
  - Patient experience
  - Intermediate
    - Adherence, blood pressure control
- Cost

Which Measures to Implement?

Highest Priority in Red

- **Important**: Related to what we care about
  - Patient’s perspective
  - Equitable population health
  - Health system survival (cost)
- **Valid**: It measures what we want
  - Will outcome be better if we go to a provider or hospital with a better metric number?
- **Measurable**: Low impact on system and clinician to provide the information
- **Actionable**: Evidence of how to improve
Which Measures to Implement?

Highest Priority in Red

- Vetted by an outside organization
  - ACC/AHA Performance Measures
  - National Quality Forum
- Best-practice data available for benchmarking
- Room to Improve

? Poor Measures: No room to improve
Beta Blockers, ACE/ARB and LVEF documentation at a High Level (Ideal Candidates)
Better Measure: Mineralocorticoid Receptor Antagonists (Ideal Candidates)

Implementation

- Focus: Facility, Provider, or Patient?
- Avoid ranking as a measure of quality
  - Below average ACE inhibitor use is still very good
  - Above average MRA use is still failing
- Set a goal that is achievable
- Adequate sample
- Consider Composite
  - Health status, mortality
  - Include balancing health measures for any cost/admission measure
VA Mortality Better, Readmission Worse than Medicare

![Bar graph showing mortality and readmission rates for VA and non-VA compared to Medicare.]

Source: Hospital Compare
Heidenreich, AHA QCOR 2016

Implementation

- Engage registries for reporting
  - EHR capture to determine numerator/denominator
- Careful attention to incentives
  - Budget neutral financial incentive can be framed as a bonus or penalty
  - One can call out best or worst providers
- Track any outcome with and without adjustment for socio-economic status
Thank You