MN Community Measurement (MNCM)
Measurement and Reporting Committee (MARC)
Wednesday, December 2, 2020
Meeting Minutes

Members Present: Rahshana Price-Isuk (Co-chair), Sue Knudson (Co-chair), Barb Anderson, Janet Avery, Lori Bethke, Joe Bianco, Cara Broich, Clarissa Cox, Matt Flory, Sue Gentilli, Stefan Gildemeister, Greg Hanley, Steve Inman, Jennifer Lamprecht, Asif Mujahid, Christine Norton, Christopher Restad, Jonathan Rose
Absent: Karolina Craft, David Satin
MNCM Staff: Trisha Brinkhaus, Liz Cinqueonce, Collette Cole, Jess Donovan, Sandy Larsen, Gunnar Nelson, Julie Sonier

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<td>Welcome &amp; Introductions</td>
<td>Rahshana called the meeting to order and welcomed committee members. This meeting was conducted via Zoom so a roll call of committee members was taken. MNCM staff and observers also introduced themselves.</td>
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**ACTION ITEM:**
Approval of 2021 Slate of Measures and Recommendation for Public Reporting

Sue introduced Jess Donovan, MNCM’s clinical measurement analyst, who reviewed the recommendation for public reporting and the recommended slate of measures for 2021 public reporting.

**The draft recommendation for public reporting in 2021 is as follows:**
- Medical group level performance results and ratings will be publicly reported with medical group names
- All performance results and ratings will have a clear statement cautioning against comparison to previous years because of potential impact of COVID-19 on performance
- Because the impact of COVID-19 on quality measures for 2020 will not be fully understood until data is submitted, new considerations might arise that warrant adjustment to the planned approach for reporting. MARC recommends MNCM Executive Leadership be entrusted with the responsibility to use their professional judgement in determining whether changes to the approved plan for medical group and clinic level reporting are warranted and seeking input from the Board of Directors to address any significant concerns that were not foreseen.

MRC review
The Measure Review Committee (MRC) met at the end of November to review both HEDIS and DDS measures.

**HEDIS measures**
- MRC reviewed nine out of the 11 HEDIS measures
  - 2020 report year performance rates were not yet available at the time of the meeting
  - MRC members rated impact and effort only (not performance gaps)
  - The Osteoporosis Management in Women with Fracture measure was not reviewed because it was reported for the first time last year and new information was not yet available
  - The Controlling High Blood Pressure measure was privately reported last year so was not reviewed this year since it would be the first year being publicly reported
- All reviewed HEDIS measures were recommended for continuation without changes

**DDS measures**
- MRC reviewed five DDS measures
  - Depression measure suite was not reviewed due to significant measure changes in 2020 report year
  - Orthopedic measures and cancer measure were postponed for 2020 report year and will be postponed again in 2021 so were not reviewed
- All reviewed DDS measures were recommended for continuation without changes

**Cost and hospital measures**
There are no changes to the cost or hospital measures, and all are continuing for public reporting.

**Discussion**
One member asked for clarification regarding reporting of the asthma education measures. The education component was removed as a component of the Optimal Asthma Control measure and has not been publicly reported since 2014. Although no longer publicly reported, the Minnesota Department of Health decided to continue collection of the measure. Members of the committee expressed differing points of view regarding the strength of evidence for the relationship of the asthma action plan and improvement of asthma outcomes. It was because of the discrepancies in evidence and failure of NQF endorsement that the MARC decided to remove it as a component in 2014. One member commented that
while education is extremely important in managing asthma, measurement of education became more of a check box for providers, which did not meet the original intent of the measure. Additionally, while having a written asthma action plan may be helpful to other providers (e.g., school nurses, day care providers, etc.), it is not always helpful to the patient. Another member commented that public reporting may be important in light of COVID-19.

**Chris Norton made a motion to approve the draft slate of measures and the recommendation for public reporting in 2021. Matt Flory seconded the motion. Motion passed.**

| Meeting Adjournment | The next meeting will be Wednesday, March 10, 2021. Sue adjourned the meeting. |

**Next Meeting: Wednesday, March 10, 2021**