

Quality Performance Measurement in California

Findings and Recommendations

December 2008

Prepared for

The Office of the Patient Advocate

By

University of California, Davis

Center for Healthcare Policy and Research



California's Health Plan Ratings



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The views expressed in this report are those of the authors and interviewees and do not necessarily represent the views of the Center for Healthcare Policy and Research or the California Office of the Patient Advocate.

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About The Center for Healthcare Policy and Research University of California, Davis

The University of California, Davis Center for Healthcare Policy and Research facilitates policy-relevant research in the areas of health care quality, access, delivery costs and outcomes. Established in 1994, the Center is an interdisciplinary unit comprised of UC Davis faculty and researchers with backgrounds in medicine, program evaluation, public policy, quality of care, survey research and statistics. The Center collaborates with other academic units, and provides research and consulting services for health care organizations, governmental agencies and private industry.

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Appendix D

QPM Inventories

- Health Plans
- Physician Organizations
- Hospitals
- Nursing Homes
- “Other” Sources

Inventory of Health Plan Quality Performance Measures

Measure Set/Developer	Title/Brief Description of Quality Measures	Organization(s) Managing Quality Performance Data by Product Line (Permits Individual Plan Comparison)					Measure Relevance to IOM Domains of Quality Care						Life Cycle	Type of Care	Key Health Conditions Related to Measure (as identified by OPA)	
		Individual and Composite Measures	HMO/POS	PPO	Medicare Managed Care	Healthy Families	MediCal Managed Care	Safety	Effectiveness	Patient Centeredness	Timeliness	Efficiency	Equity	Pediatric (<18) Adult (<65) Geriatric (>65)	Preventive, Acute, Management	Asthma, Cancer, COPD, Diabetes, Heart Disease, Hypertension, Mental Health, Musculoskeletal, Reproductive Health
<p>Healthcare Effectiveness Data and Information Set (HEDIS) 2007/NCQA Data Collection: NCQA is the measure set developer. Data are collected from plans nationwide and warehoused by NCQA Quality Compass. (The California Cooperative Healthcare Reporting Initiative coordinates data collection and also warehouses the data for 8 major California plans.) State and national benchmarks are available and plan-to-plan comparison is possible. Data Availability: Data publicly reported. HEDIS measure set, data and report card available at http://www.ncqa.org/tabid/177/Default.aspx Reporting Cycle: Data reported annually in late summer. (variable for Medicaid). (NCQA-QC*=PPO data collected in 2007, but not publicly available through NCQA. NCQA plans to publicly report 2008 data. California DOI will publicly report California-specific PPO information in 2009.)</p>	Adolescent Immunizations (reported individually and as "Combo 2": 2 MMR, 1 varicella, 3 HepB)	NCQA-QC	NCQA-QC*					✓					Pediatric	Preventive		
	Antidepressant Medication Management (reported individually and as combination: On meds w/ 3 practitioner contacts in 12 wk period; On meds entire 12 wk period; Remained on meds for at least 6 mos. - 18+ years old)	NCQA-QC	NCQA-QC*	NCQA-QC				✓	✓					Adult Geriatric	Acute Management	Mental Health
	Appropriate Asthma Medications for Chronic Asthma (reported individually and combined: ages 5-9; ages 10-17; ages 18-56)	NCQA-QC	NCQA-QC*		NCQA-QC	NCQA-QC	✓	✓				✓		Pediatric Adult	Management	Asthma
	Appropriate Upper Respiratory Infection Treatment for Children	NCQA-QC	NCQA-QC*			NCQA-QC		✓				✓		Pediatric	Acute	
	Appropriate Test for Children with Pharyngitis	NCQA-QC	NCQA-QC*					✓				✓		Pediatric	Acute	
	Beta-Blocker Treatment After MI (35+ years)	NCQA-QC	NCQA-QC*	NCQA-QC				✓	✓				✓	Adult Geriatric	Acute	Heart Disease
	Persistence of Beta-Blocker 6 Months Post MI	NCQA-QC	NCQA-QC*	NCQA-QC					✓					Adult Geriatric	Acute	Heart Disease
	Breast Cancer Screening (at least one screen w/in past 2 years. -- females 40-69 years old)	NCQA-QC	NCQA-QC*	NCQA-QC		NCQA-QC			✓					Adult Geriatric	Preventive	Cancer
	Cervical Cancer Screening (at least 1 Pap in past 3 years ages 21-64)	NCQA-QC	NCQA-QC*			NCQA-QC			✓					Adult	Preventive	Cancer Reproductive Health
	Childhood Immunization Status (reported individually and as "Combo 2" and "Combo 3": 4 DT(a)P; 3 IPV/OPV; 1 MMR; 3 Hib; 3 hep B; 1 VZV; 4 pneumonia conjugate)	NCQA-QC	NCQA-QC*		NCQA-QC	NCQA-QC			✓					Pediatric	Preventive	
	Chlamydia Screening (at least once during measurement year women ages 16-25 years)	NCQA-QC	NCQA-QC*			NCQA-QC			✓					Adult	Preventive	Reproductive Health
	Colorectal Screening (one of 4 tests for ages 50-80 years)	NCQA-QC	NCQA-QC*	NCQA-QC					✓					Adult Geriatric	Preventive	Cancer
	Cholesterol Management for Patients with Cardiovascular Conditions (ages 18-75 years)	NCQA-QC	NCQA-QC*	NCQA-QC					✓					Adult Geriatric	Management	Heart Disease
Comprehensive Diabetes Care (HbA1c test; poor and good HbA1c control; eye exams; LDL-C screen and control; monitor nephropathy; blood pressure control <130 and <140) (based on sample of diabetic population)	NCQA-QC	NCQA-QC*	NCQA-QC		NCQA-QC		✓	✓					Pediatric Adult Geriatric	Management	Diabetes	

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HEDIS 2007/NCQA (Continued)	Controlling High Blood Pressure for Adults w/ Hypertension (ages 18-85 years)	NCQA-QC	NCQA-QC*	NCQA-QC			✓	✓					Adult Geriatric	Management	Hypertension
	Disease Modifying Anti-Rheumatic Drug Therapy for Rheumatoid Arthritis	NCQA-QC	NCQA-QC*	NCQA-QC			✓	✓					Sample of RA patients	Management	Musculoskeletal
	Flu Shot (adults 50-64; 65+)	NCQA-QC	NCQA-QC*	NCQA-QC									Adult Geriatric	Preventive	
	Follow-Up Post Hospitalization For Mental Illness (7 day and 30 day follow up) (6+ years old)	NCQA-QC	NCQA-QC*	NCQA-QC	NCQA-QC		✓	✓		✓			Pediatric Adult Geriatric	Management	Mental Health
	Follow-up for ADHD Medication for Children (1 visit w/in 30 day initiation; 2 visits w/in 9 months)	NCQA-QC	NCQA-QC*					✓		✓			Pediatric	Prevention	Mental Health
	Glaucoma Screening (at least one exam w/in last two years)		NCQA-QC*	NCQA-QC				✓					Adult Geriatric	Acute	
	Appropriate Use of Low Back Pain Imaging (ages 18-50 years)	NCQA-QC	NCQA-QC*					✓			✓		Adult	Acute	Musculoskeletal
	Avoidance of Antibiotic Treatment for Adult Acute Bronchitis	NCQA-QC	NCQA-QC*			NCQA-QC		✓			✓		Adult	Acute Management	
	Alcohol/Drug Treatment (Treatment w/in 14 days; two more services w/in 30 days of initiation - Adolescent and Adult)	NCQA-QC	NCQA-QC*	NCQA-QC			✓	✓		✓			Pediatric Adult	Management	Mental Health
	Osteoporosis Management After Fracture		NCQA-QC*	NCQA-QC			✓	✓					Adult Geriatric	Management	Musculoskeletal
	Annual Monitoring for Patients on Persistent Medications (reported individually and as combined: ACE/ARBs, Digoxin, Diuretics, Anticonvulsants)	NCQA-QC	NCQA-QC*	NCQA-QC			✓	✓					Adult Geriatric	Management	Heart Disease
	Medical Assistance with Smoking Cessation (advice to quit; recommend medications, recommend other cessation strategies over past year)	NCQA-QC	NCQA-QC*					✓					Adult	Preventive	COPD Heart Disease Cancer Hypertension
	Prenatal/Postpartum Care (prenatal care in 1st trimester; postpartum visit 21-56 days after delivery)	NCQA-QC	NCQA-QC*			NCQA-QC		✓		✓			Adult (women only)	Preventive	Reproductive Health
	Spirometry Used to Confirm COPD diagnosis (40+ years)	NCQA-QC	NCQA-QC*	NCQA-QC				✓					Adult Geriatric	Acute	COPD
Medication Management of Elderly (Use of 1 and 2 high-risk drugs to be avoided)		NCQA-QC*	NCQA-QC			✓	✓					Geriatric	Management		
Harmful Drug-Disease Interaction in Elderly (falls, dementia, chronic renal failure and combo rates)		NCQA-QC*	NCQA-QC			✓	✓					Geriatric	Preventive		

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HEDIS 2007/NCQA (Continued)	Adult Access to Preventive/Ambulatory Health Services (ages 20-44; 45-64; 65+ years)	NCQA-QC	NCQA-QC*	NCQA-QC				✓						Adult Geriatric	Acute Preventive		
	Child/Adolescent Access to PCP	NCQA-QC	NCQA-QC*		NCQA-QC			✓						Pediatric	NA		
	Well-Child Visits 1st 15 mos. of Life	NCQA-QC	NCQA-QC*			NCQA-QC		✓						Pediatric	Preventive		
	Well-Child Visits 3, 4, 5, 6 Years of Life	NCQA-QC	NCQA-QC*		NCQA-QC	NCQA-QC		✓						Pediatric	Preventive		
	Adolescent Well-Care Visit	NCQA-QC	NCQA-QC*		NCQA-QC	NCQA-QC		✓						Pediatric	Preventive		
	Pneumonia Vaccine for Older Adults		NCQA-QC*	NCQA-QC				✓						Adult	Preventive		
	Medicare Health Outcomes Survey (Manage Urinary Incontinence 65+; Physical Activity in Older Adults; Fall Risk Management.; Osteoporosis Testing) See "Other Sources" Inventory		NCQA-QC*	NCQA-QC				✓						Geriatric	Preventive Management	Musculoskeletal	
	Annual Dental (ages 2-21 years)		NCQA-QC*											Pediatric	Preventive		
	Call Answer Timeliness	NCQA-QC	NCQA-QC*	NCQA-QC							✓						
	Call Abandonment	NCQA-QC	NCQA-QC*	NCQA-QC							✓						
	HEDIS 2008/NCQA	Lead Screening in Children	NCQA-QC			NCQA-QC	NCQA-QC		✓						Pediatric	Preventive	
		Pharmacotherapy of COPD Exacerbation	NCQA-QC		NCQA-QC				✓						Adult Geriatric	Acute	COPD
		Relative Resource Use: Cardiovascular Conditions (Relative Resource Use defined as value plan adds by delivering high quality care while using the fewest resources possible. Uses standardized price tables. Adjustments for age, gender, comorbidities are made. Reported as ratio of observed-to-expected resource use.)	NCQA-QC	NCQA-QC	NCQA-QC								✓		Adult		Heart Disease
		Relative Resource Use for Diabetes	NCQA-QC	NCQA-QC	NCQA-QC								✓		Adult		Diabetes
		Relative Resource Use for Asthma	NCQA-QC	NCQA-QC	NCQA-QC								✓		Adult		Asthma
		Relative Resource Use for Acute Low Back Pain	NCQA-QC	NCQA-QC	NCQA-QC								✓		Adult		Musculoskeletal

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		HMO/POS	PPO	Medicare Managed Care	Healthy Families	MediCal Managed Care	Safety	Effectiveness	Patient Centeredness	Timeliness	Efficiency	Equity					
HEDIS 2007/NCQA (Continued)	Relative Resource Use for COPD	NCQA-QC	NCQA-QC	NCQA-QC								✓		Adult		COPD	
	Relative Resource Use for Uncomplicated Hypertension	NCQA-QC	NCQA-QC	NCQA-QC								✓		Adult		Hypertension	
Consumer Assessment of Healthcare Providers and Systems (CAHPS) 4.0H/NCQA (CAHPS Child 3.0H is very similar to the adult survey; Child 4.0H will be implemented 2008) Data Collection: Agency for Healthcare Research and Quality developed the patient experience survey tool adopted by NCQA. Data are collected from plans nationwide and warehoused by NCQA Quality Compass. (The California Cooperative Healthcare Reporting Initiative coordinates data collection and also warehouses the data for 8 major California plans.) State and national benchmarks are available and plan-to-plan comparison is possible. Data Availability: Data publicly available through both NCQA and CCHRI. The 4.0H measure set information is available at http://www.ncqa.org/tabid/536/Default.aspx and California data are available at CCHRI http://www.cchri.org/programs/programs_CAHPS.html Reporting Cycle: Data are reported annually in late summer. (The following measures are considered "HEDIS Supplemental" in AHRQ's CAHPS 4.0 version)	Health Plan Customer Service Composite (How often easy to get care, tests, treatment through health plan; How often did HP customer service give info/help needed; How often HP treated patient w/ respect; How often were forms easy to complete)	NCQA-QC	NCQA-QC*	NCQA-QC	NCQA-QC	NCQA-QC				✓	✓			Adult (Pediatric)			
	Getting Care Quickly Composite: (For care you needed right away, how often did you get an appointment as soon as you thought you needed; How often did you get non-urgent appointment as soon as you thought you needed)	NCQA-QC	NCQA-QC*	NCQA-QC	NCQA-QC	NCQA-QC				✓	✓				Adult (Pediatric)		
	Getting Needed Care Composite: (How easy to get appointment. w/ specialist when needed; Getting tests/care when needed)	NCQA-QC	NCQA-QC*	NCQA-QC	NCQA-QC	NCQA-QC				✓	✓				Adult (Pediatric)	Acute	
	How Well Doctors Communicate Composite: (How often did this doctor explain things in a way that was easy to understand; How often did this doctor listen carefully to you; How often did this doctor show respect for what you had to say; How often did this doctor spend enough time with you)	NCQA-QC	NCQA-QC*	NCQA-QC	NCQA-QC	NCQA-QC				✓					Adult (Pediatric)	Acute	
	Screener Questionnaire for Chronic Disease: (Seen Dr. for 3 or more times for same problem; Has problem lasted at least 3 mos.; Do you now take medicine prescribed by a Dr.; Is this to treat a condition that has lasted more than 3 mos.)	NCQA-QC	NCQA-QC*	NCQA-QC		NCQA-QC				✓					Adult (Pediatric)		
	Dr. talked about specific things to prevent illness	NCQA-QC	NCQA-QC*	NCQA-QC		NCQA-QC				✓					Adult (Pediatric)		
	Dr. told patient more than one choice for treatment	NCQA-QC	NCQA-QC*	NCQA-QC		NCQA-QC				✓					Adult (Pediatric)		
	Dr. discussed pros/cons of treatment options	NCQA-QC	NCQA-QC*	NCQA-QC		NCQA-QC				✓					Adult (Pediatric)		
	Dr. asked which treatment option was best for patient	NCQA-QC	NCQA-QC*	NCQA-QC		NCQA-QC				✓					Adult (Pediatric)		
	Dr. seemed informed about care received from other Drs.	NCQA-QC	NCQA-QC*	NCQA-QC		NCQA-QC				✓					Adult (Pediatric)		
How often did website provide necessary information on how plan works	NCQA-QC	NCQA-QC*	NCQA-QC		NCQA-QC				✓					Adult (Pediatric)			

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		HMO/POS	PPO	Medicare Managed Care	Healthy Families	MediCal Managed Care	Safety	Effectiveness	Patient Centeredness	Timeliness	Efficiency	Equity	Pediatric (<18) Adult (<65) Geriatric (>65)	Preventive, Acute, Management	Asthma, Cancer, COPD, Diabetes, Heart Disease, Hypertension, Mental Health, Musculoskeletal, Reproductive Health
CAHPS 4.0H/NCQA (Continued)	Was able to find out from health plan cost of specific prescription medications	NCQA-QC	NCQA-QC*	NCQA-QC		NCQA-QC			✓				Adult (Pediatric)		
	How often plan handled claims quickly	NCQA-QC	NCQA-QC*	NCQA-QC		NCQA-QC			✓				Adult (Pediatric)		
	How often plan handled claims correctly	NCQA-QC	NCQA-QC*	NCQA-QC		NCQA-QC			✓				Adult (Pediatric)		
	Had flu shot since 9/1/06	NCQA-QC	NCQA-QC*	NCQA-QC		NCQA-QC			✓				Adult (Pediatric)		
	Number of visits patient was advised to quit smoking	NCQA-QC	NCQA-QC*	NCQA-QC		NCQA-QC			✓				Adult	Preventive	
	Number of visits medications were discussed to help patient quit	NCQA-QC	NCQA-QC*	NCQA-QC		NCQA-QC			✓				Adult	Preventive	
	Number of visits Dr. discussed quitting strategies	NCQA-QC	NCQA-QC*	NCQA-QC		NCQA-QC			✓				Adult	Preventive	
	Rating of Health Care (0-10 ("Worst possible" to "Best possible"))	NCQA-QC	NCQA-QC*	NCQA-QC	NCQA-QC	NCQA-QC							Adult (Pediatric)		
	Rating of Health Plan 0-10 ("Worst possible" to "Best possible")	NCQA-QC	NCQA-QC*	NCQA-QC	NCQA-QC	NCQA-QC							Adult (Pediatric)		
	Rating of Personal Dr. (0-10 ("Worst possible" to "Best possible"))	NCQA-QC	NCQA-QC*	NCQA-QC	NCQA-QC	NCQA-QC							Adult (Pediatric)		
	Rating of Specialist Seen Most Often (0-10 ("Worst possible" to "Best possible"))	NCQA-QC	NCQA-QC*	NCQA-QC	NCQA-QC	NCQA-QC							Adult (Pediatric)		
Consumer Assessment of Healthcare Providers and Systems (CAHPS) Health Plan Survey 4.0 Core Measures – Agency for Healthcare Research and Quality (AHRQ) <small>Data Collection: Data collected at state and national levels. No data for plan-to-plan comparison are available in the NCBD. Survey tool is available at https://www.cahps.ahrq.gov/content/products/PROD_AmbCareSurveys.asp?p=102&s=21 and data information available at https://www.cahps.ahrq.gov/content/NCBD/HP/NCBD_HP_Intro.asp?p=105&s=52 Data Availability: Limited availability in publicly reportable format. Reporting Cycle: Data reported annually</small>	Getting Needed Care Composite (How often easy to get appointment with specialist; How often easy to get care, tests or treatment you needed through the HP)	NCBD	NCBD	NCBD	NCBD	NCBD			✓	✓			Adult/Geriatric (Pediatric)	Acute	
	Getting Care Quickly Composite (For care you needed right away, how often did you get an appointment as soon as you thought you needed; How often did you get non-urgent appointment as soon as you thought you needed)	NCBD	NCBD	NCBD	NCBD	NCBD			✓	✓			Adult/Geriatric (Pediatric)	Acute	
	How Well Doctors Communicate Composite: (How often did personal Dr. explain things in a way that was easy to understand; How often did this Dr. listen carefully to you; How often did this Dr. show respect for what you had to say; How often did this Dr. spend enough time with you)	NCBD	NCBD	NCBD	NCBD	NCBD			✓				Adult/Geriatric (Pediatric)		
	Health Plan Customer Service, Information and Paperwork Composite (How often HP customer service give info/help you needed; How often staff treat you w/ courtesy and respect; How often were HP forms easy to complete)	NCBD	NCBD	NCBD		NCBD			✓				Adult/Geriatric (Pediatric)		

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CAHPS Health Plan Survey 4.0 Core Measures - AHRQ (Continued) CAHPS 4.0/AHRQ Supplemental General Measures 4.0 <small>(Grouped by topic)</small>	Rating of Health Care (0-10 ("Worst possible" to "Best possible"))	NCBD	NCBD	NCBD	NCBD	NCBD							Adult/Geriatric (Pediatric)		
	Rating of Health Plan 0-10 ("Worst possible" to "Best possible")	NCBD	NCBD	NCBD	NCBD	NCBD							Adult/Geriatric (Pediatric)		
	Rating of Personal Dr. (0-10 ("Worst possible" to "Best possible"))	NCBD	NCBD	NCBD	NCBD	NCBD							Adult/Geriatric (Pediatric)		
	Rating of Specialist Seen Most Often (0-10 ("Worst possible" to "Best possible"))	NCBD	NCBD	NCBD		NCBD							Adult/Geriatric (Pediatric)		
	Health Plan (7 questions) (Looked for and found info about how plan works in written material or on internet; Looked for and found info on cost of service or equipment; Looked for and found info on Rx cost)	NCBD	NCBD	NCBD		NCBD			✓				Adult/Geriatric		
	Personal Dr. (2 questions) (Had same personal Dr. before joining plan; Easy to get personal Dr. you are happy with)	NCBD	NCBD	NCBD		NCBD			✓				Adult/Geriatric		
	Communication (1 question) Hard time speaking with or understanding a Dr. b/c spoke different languages	NCBD	NCBD	NCBD		NCBD			✓				Adult/Geriatric		
	Interpreter (3 questions) Needed interpreter to speak w/ Dr.; How often got an interpreter when needed; Language mainly spoken at home	NCBD	NCBD	NCBD		NCBD			✓				Adult/Geriatric		
	Behavioral (4 questions) Rating of overall mental/emotional health; needed treatment for a personal/family problem; easy to get necessary treatment through health plan; overall rating of treatment	NCBD	NCBD	NCBD		NCBD			✓				Adult/Geriatric	Acute	
	Chronic (23 questions) Is personal Dr. general or specialist; # of mos./years with personal Dr.; physical or medical condition that seriously interferes with work/school/day-to-day activities; Personal Dr. understands how problems affect day-to-day life; # of visits to specialists; Easy to get Dr. to agree with pt. on best mgmt for problem; easy to get special med. equipment through health plan; easy to get therapy (speech physical, etc.) through health plan;	NCBD	NCBD	NCBD		NCBD							Adult/Geriatric	Acute, Management	

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CAHPS 4.0/AHRQ Supplemental General Measures 4.0 (Continued)	Easy to get home health care through health plan; Needed help of other persons w/ personal care needs/routine needs or getting around because of problem; Have physical problem that seriously interferes with independence or quality of life; Overall rating of how well plan providing needed equipment, services and help; Pt. in hospital overnight or longer; Seen Dr. 3 + times for same problem in last 12 mos.; Problem lasted >3 mos.; Taking RX for problem >3 mos.	NCBD	NCBD	NCBD		NCBD			✓	✓	✓		Adult/Geriatric		
	Pregnancy Care (3 questions) Consumer currently pregnant; Visited Dr. for prenatal care	NCBD	NCBD			NCBD							Adult		
	Prescription Medicine (3 questions) Got new Rx or refilled Rx; Easy to get Rx from health plan; How often got needed Rx through health plan	NCBD	NCBD	NCBD		NCBD			✓	✓			Adult/Geriatric		
	Transportation (3 questions) Contacted plan to get help w/ transportation; how often got needed help with transp. from health plan; how often plan's help w/ transp met needs	NCBD	NCBD	NCBD		NCBD			✓	✓			Adult/Geriatric		
	Referrals Easy to get referral to specialist	NCBD	NCBD	NCBD		NCBD			✓				Adult/Geriatric	Acute	
	Claims Processing (4 questions) how often plan handled claims in reasonable time; How often handled correctly; How often plan made it clear how much consumer would have to pay before care received	NCBD	NCBD	NCBD		NCBD			✓	✓			Adult/Geriatric		
	Medicaid Enrollment (4 questions) Enrolled in Medicaid mgd care plan; choice or assigned to health plan; Got info. about plan before signed up; how much info correct before signed up	NCBD	NCBD			NCBD			✓				Adult/Geriatric		
	Cost sharing does consumer/family pay for any part of cost of plan	NCBD	NCBD	NCBD		NCBD							Adult/Geriatric		
	HEDIS Set (20 questions) see CAHPS 4.0H section above	NCBD	NCBD	NCBD		NCBD			✓	✓			Adult/Geriatric (Pediatric)		

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Measure Set/Developer	Title/Brief Description of Quality Measures	Organization(s) Managing Quality Performance Data by Product Line <small>(Permits Individual Plan Comparison)</small>					Measure Relevance to IOM Domains of Quality Care						Life Cycle	Type of Care	Key Health Conditions Related to Measure <small>(as identified by OPA)</small>
		HMO/POS	PPO	Medicare Managed Care	Healthy Families	MediCal Managed Care	Safety	Effectiveness	Patient Centeredness	Timeliness	Efficiency	Equity	Pediatric (<18) Adult (<65) Geriatric (>65)	Preventive, Acute, Management	Asthma, Cancer, COPD, Diabetes, Heart Disease, Hypertension, Mental Health, Musculoskeletal, Reproductive Health
CAHPS 4.0/AHRQ Supplemental General Measures 4.0 (Continued)	Quality Improvement (26 questions) Reasons not easy to get appointment w/ specialist; Days wait time between making appointment and seeing provider; How often had to wait for appointment because of provider's lack of availability/hours; Got care from Dr. besides personal dr.; How often personal Dr. seemed up to date on care from other Dr.; Was there coordination of care among different Dr.; Who coordinated care; Satisfaction with help received to coordinate care; Visited Dr. office/clinic for after hours care; How easy to get after hours care; Reasons not easy to get care													Acute	
	Called Dr. office during regular hrs for help; How often received help pt. wanted during regular hours; Reasons pt. didn't receive help wanted during regular office hours; How often written/web-based materials provided wanted info on how plan works; How often easy to use /understand this information on how plan works; What kind of info not easy to understand/use; Where consumer got info.; Did consumer go to plan's Website looking for info; How useful was info. on site; Did consumer use site info to choose Dr., specialist or provider group; Reason consumer didn't get needed help/info from customer service; # of calls to get needed help/info from customer service	NCBD	NCBD	NCBD		NCBD		✓	✓			Adult/Geriatric			
	Parent Experience w/ Prescription Medications: How often easy to get Rx meds for your child thru his/her plan?	NCBD	NCBD			NCBD		✓				Pediatric	Acute		
	Parent Experience Getting Specialized Services for Child: How often was it easy to get special medical equipment/devices (last 12 mos.)? Therapy (last 6 mos.)? Treatment/counseling (last 6 mos.)?	NCBD	NCBD			NCBD		✓				Pediatric	Acute		
	Parent Experience w/ Child Personal Dr: Did child's Dr. talk to you about how child is feeling, growing, behaving? Does Dr. understand how the medical/behavioral/health condition affect child's daily life? Does Dr. understand how it affects family's daily life?	NCBD	NCBD			NCBD		✓				Pediatric			
	Parent Experience Shared Decision-Making: Did Dr. tell you there was more than one choice for child's treatment or health care? In last 6 mos. did Dr. present pros and cons of each choice for care? In last 6 mos. when more than 1 choice available, did Dr. ask you which was best?	NCBD	NCBD			NCBD		✓				Pediatric			

Inventory of Health Plan Quality Performance Measures															
Measure Set/Developer	Title/Brief Description of Quality Measures	Organization(s) Managing Quality Performance Data by Product Line (Permits Individual Plan Comparison)					Measure Relevance to IOM Domains of Quality Care						Life Cycle	Type of Care	Key Health Conditions Related to Measure (as identified by OPA)
		HMO/POS	PPO	Medicare Managed Care	Healthy Families	MediCal Managed Care	Safety	Effectiveness	Patient Centeredness	Timeliness	Efficiency	Equity			
CAHPS 4.0/AHRQ Supplemental General Measures 4.0 (Continued)	Parent Experience Getting Needed Info About Child's Care: In last 6 mos., how often did Dr. answer your questions?	NCBD	NCBD			NCBD			✓				Pediatric		Asthma, Cancer, COPD, Diabetes, Heart Disease, Hypertension, Mental Health, Musculoskeletal, Reproductive Health
	Parent Experience w/ Coordination of Child's Care: In last 12 mos. did you get help from Dr. in contacting child's school/daycare? Anyone from health plan, Dr. office, clinic help coordinate your child's care among these diff. providers?	NCBD	NCBD			NCBD			✓				Pediatric		
CAHPS Supplemental Item: People With (Lower-Limb) Mobility Impairments (Commercial and Medicaid -ages 18-64 years) - AHRQ	Topics in item set (21 questions): Use of mobility equip; ability to walk; getting physical/occupational therapy, speech therapy, mobility equipment; repairing mobility equip; getting weighed at dr. office; being examined on table at Dr. office; difficulty moving around restroom; pain; fatigue.	NCBD	NCBD			NCBD			✓	✓		✓	Adult		
CAHPS Supplemental Item: Children With Chronic Conditions (Can be added to child 4.0 CAHPS Health Plan Survey) - AHRQ/CAHMM (This version is already incorporated into child 4.0 Medicaid Survey)	Topics in item set (38 questions): Access to prescription meds., Access to specialized services, Having a personal Dr. or nurse who knows the child, Shared decision making, Getting needed information, Coordination of care and services	NCBD	NCBD			NCBD			✓			✓	Pediatric	Acute, Management	

Inventory of Physician Organization Quality Performance Measures

Measure Set/Developer	Title/Brief Description of Quality Measures	Data Collection Can Occur at...			Organization(s) Managing Quality Performance Data for...		Measure Relevance to IOM Domains of Quality Care						Life Cycle	Type of Care	Key Health Conditions Related to Measure (as identified by OPA)
		Local/State's regional level	State (CA) level	National level	Physician Organizations	Individual Physicians	Safety	Effectiveness	Patient Centeredness	Timeliness	Efficiency	Equity			
Pay for Performance (P4P Measurement Year 2007)/Integrated Healthcare Association/National Committee for Quality Assurance (IHA/NCQA) Data Collection: HEDIS clinical data and PAS patient experience data (see next entry) from California Physician Organizations (medical groups) are collected, managed, and analyzed by IHA. Data permits California PO to PO comparison. No national comparison data are available. Data Availability: PO data are available in a publicly reportable format; individual physician data are unavailable for public reporting. Reporting Cycle: Data reported annually in the fall. Website: http://www.iha.org/p4py6.htm	Childhood Immunization Status (w/ 24 month continuous enrollment)	✓			IHA/ NCQA		✓						Pediatric	Preventive	
	Appropriate Treatment For Children w/ Upper Respiratory Infection	✓			IHA/ NCQA		✓			✓			Pediatric	Acute	
	Breast Cancer Screening (women 40-69 years)	✓			IHA/ NCQA		✓						Adult Geriatric	Preventive	Cancer
	Cervical Cancer Screening (women 21-64)	✓			IHA/ NCQA		✓						Adult	Preventive	Cancer Reproductive Health
	Chlamydia Screening in Women (women 16-25 years)	✓			IHA/ NCQA		✓						Adult	Preventive	Reproductive Health
	Use of Appropriate Medications for Asthmatics (5-9; 10-17 years; 18-56 years)	✓			IHA/ NCQA		✓	✓			✓		Pediatric Adult	Management	Asthma
	Diabetes Care: HbAc1 Screening	✓			IHA/ NCQA		✓	✓					Pediatric Adult Geriatric	Preventive/ Management	Diabetes
	Diabetes Care: HbAc1 Poor Control	✓			IHA/ NCQA		✓	✓					Pediatric Adult Geriatric	Management	Diabetes
	Cholesterol Management LDL Screen (for cardio and diabetic patients 18-75 years)	✓			IHA/ NCQA		✓	✓					Adult Geriatric	Management	Diabetes
	Cholesterol Management LDL Control <130 (for cardio and diabetic patients 18-75 years)	✓			IHA/ NCQA		✓	✓					Adult Geriatric	Management	Diabetes, Heart Disease
	Nephropathy Monitoring for Diabetics	✓			IHA/ NCQA		✓	✓					Pediatric Adult Geriatric	Preventive	Diabetes
	Colorectal Cancer Screening	✓			IHA/ NCQA			✓					Adult Geriatric	Preventive	Cancer
	Appropriate Use of Rescue Inhalers	✓			IHA/ NCQA			✓			✓		Pediatric Adult Geriatric	Acute	Asthma
	Appropriate Testing for Children w/ Pharyngitis	✓			IHA/ NCQA			✓			✓		Pediatric	Acute	
	Appropriate Treatment For Adults w/ Bronchitis	✓			IHA/ NCQA			✓			✓		Adult	Acute	
	Appropriate Imaging for Low Back Pain (18-50 years)	✓			IHA/ NCQA			✓			✓		Adult	Acute	Musculoskeletal
	Medications Monitoring (ACE/ARBs, digoxin, diuretics, anticonvulsants statins)	✓			IHA/ NCQA		✓	✓					Adult Geriatric	Management	Heart Disease
	HbAc1 Good Control (<7)	✓			IHA/ NCQA			✓					Pediatric Adult Geriatric	Management	Diabetes

Inventory of Physician Organization Quality Performance Measures

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		Local/State's regional level	State (CA) level	National level	Physician Organizations	Individual Physicians	Safety	Effectiveness	Patient Centeredness	Timeliness	Efficiency	Equity				
Pilot Measures 2008: To Be Collected But Not Publicly Reported (Continued)	Potentially Avoidable Hospitalizations		✓		IHA/ NCQA		✓	✓				✓	Adult	Preventive		
	Evidence-Based Cervical Cancer Screening		✓		IHA/ NCQA			✓					Adult (women)	Preventive	Cancer , Reproductive Health	
	Childhood Immunization -- Hepatitis A		✓		IHA/ NCQA			✓					Pediatric	Preventive		
	Patient Experience Composites (Dr.-Pt. Interactions; Overall Ratings of Care; Specialty Care; Coordination of Care; Timely Care, and Service) from Patient Assessment Survey 2007		✓			IHA/ NCQA				✓	✓					
California Physician Performance Initiative (CPPI)/California Cooperative Healthcare Reporting Initiative (CCHRI) Data Collection: CPPI is part of the Centers for Medicare and Medicaid Services pilot program called the "Better Quality Initiative", which combines Medicare and commercial claims data to measure physician quality of care. Using HEDIS-based measures, CCHRI collects, analyzes and manages the data from three California commercial PPOs and Medicare's fee-for-service program. More than 20,000 physicians were included in this pilot project. Data Availability: Individual reports are sent to each physician with his/her performance score by measure and the percentile rank compared to physician peers. Medicare data will no longer be available for use in 2009. Health plans <u>may</u> choose to publicly report commercial reports in member material in 2009. Reporting Cycle: Unknown as this is based on a pilot program. Website: http://www.cchri.org/programs/programs_CPPI.html	Arthritis (Anti-Rheumatic Medication)	✓	✓			CCHRI	✓	✓					Adult Geriatric	Management		
	Breast Cancer Screening (women aged 42-69)	✓	✓			CCHRI		✓					Adult Geriatric (women)	Preventive	Cancer	
	Cardiovascular: LDL Test (patients aged 18-75 hospitalized for AMI, CABG, PTCA in 2006 or diagnosed with IVD in 2006/2007 who had LD test in 2007)	✓	✓			CCHRI		✓						Adult Geriatric	Preventive Management	Heart Disease
	Cardiovascular (received beta blocker medication for the 6 months post AMI)	✓	✓			CCHRI	✓	✓		✓				Adult Geriatric	Acute Management	Heart Disease
	Colorectal Cancer Screening (patients aged 51-80 who had FOBT2007, or colonoscopy or DCBE 2004-2007)	✓	✓			CCHRI		✓						Adult Geriatric	Preventive	Cancer
	Coronary Artery Disease: LDL Medication (CAD patients aged 18+, who were prescribed a lipid lowering medication in 2007)	✓	✓			CCHRI		✓						Adult Geriatric	Management	Heart Disease
	Diabetes: Eye Exam (diabetes patients, age 18-75, who had a retinal or dilated eye exam in 2007)	✓	✓			CCHRI		✓						Adult Geriatric	Management	Diabetes
	Diabetes: HbA1c Test (diabetes patients aged 18-75, who had an HbA1c screening test during 2007)	✓	✓			CCHRI		✓						Adult Geriatric	Management	Diabetes
	Diabetes: LDL Test (diabetes patients aged 18-75, who had an LDL-C screening test during 2007)	✓	✓			CCHRI		✓						Adult Geriatric	Management	Diabetes
	Glaucoma screening (patients, aged 67+ without history of glaucoma, who received a glaucoma screening in 2006 or 2007)	✓	✓			CCHRI		✓						Geriatric	Preventive	
	Heart Failure: Warfarin Medication for Patients with Atrial Fibrillation (heart failure patients aged 18+, who were hospitalized with paroxysmal or chronic atrial fibrillation during 2007 and were prescribed warfarin)	✓	✓			CCHRI		✓						Adult Geriatric	Acute	Heart Disease

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		Local/State's regional level	State (CA) level	National level	Physician Organizations	Individual Physicians	Safety	Effectiveness	Patient Centeredness	Timeliness	Efficiency				Equity
California Physician Performance Initiative/California Cooperative Healthcare Reporting Initiative (Continued)	Heart Failure: Left Ventricular Ejection Fraction Test (heart failure patients aged 18+, who were hospitalized for heart failure during 2007 and who had a left ventricular ejection fraction test sometime during 2007)	✓	✓			CCHRI		✓					Adult Geriatric	Acute	Heart Disease
	Monitoring Patients on Persistent Medications (patients aged 18+, who were prescribed a persistent medication [at least a 180-day supply] in 2007 who received a monitoring test for one or more of the following: (1) ACE inhibitors or ARBs; (2) Digoxin; or (3) Diuretics)	✓	✓			CCHRI	✓	✓					Adult Geriatric	Management	
	Osteoporosis Management in Women Who Had a Fracture (women aged 67+ with a fracture occurring between 7/1/2006-6/30/2007, who received a bone mineral density (BMD) test or prescription to treat/prevent osteoporosis within six months of the injury)	✓	✓			CCHRI	✓	✓					Geriatric	Management	Musculoskeletal
	COPD: Spirometry Test (Patients, aged 42+ with a new or newly active COPD diagnosis between 7/1/2006-6/30/2007, who received spirometry testing two years prior to diagnosis or within 6 months of diagnosis)	✓	✓			CCHRI		✓					Adult Geriatric	Acute	
Patient Assessment Survey (PAS) Group Survey 2007/California Cooperative Healthcare Reporting Initiative (CCHRI) Data Collection: Data about patient experiences with health care administered by physician groups are collected from POs (and individual physicians) statewide. California data are managed by CCHRI. California PO to PO comparison is possible. No national comparison data are available. Data Availability: PO data are available in a publicly reportable format; individual physician data unavailable for public reporting. Reporting Cycle: Data reported annually in the fall. Website: http://www.cchri.org/programs/programs_pas.html	Dr.-Pt. Interactions (MDInteract Composite) (Listened carefully to patient; Explained things in understandable manner; Spent enough time w/ patient; Showed respect to patient; Easy to understand instructions; Dr. familiar with important health history information)					CCHRI	CCHRI		✓				Adult		
	Overall Rating of Care (Rate this Dr. 0-10 (Worst to best); Rate all health care received from Doctors in same office 0-10 (Worst to best))		✓			CCHRI	CCHRI		✓				Adult		
	Specialty Care (Obtained appt. w/ specialist as soon as thought you needed it; Rate specialist Dr. (0-10))		✓			CCHRI	CCHRI		✓	✓			Adult		
	Coordination of Care (Coordination Composite) (How often Dr. office followed up w/ test results; How often was Dr. informed about care received from specialist)		✓			CCHRI	CCHRI		✓	✓			Adult		

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		Local/State's regional level	State (CA) level	National level	Physician Organizations	Individual Physicians	Safety	Effectiveness	Patient Centeredness	Timeliness	Efficiency	Equity			
Patient Assessment Survey 2007/CCHRI (Continued)	Timely Care and Service (Access Composite) (Obtained appt. for routine care as soon as needed; Get appt. w/ specialist as soon as needed; Received answer to question same day from Dr. office; Obtained appt. for care needed right away as soon as needed; Received answer to question as soon as needed when calling after-hours; See Dr. w/in 15 minutes of appt. time.)		✓			CCHRI	CCHRI				✓	✓		Adult	
	Chronic Conditions Receive clear management instructions from provider (choice); provider help set goals to manage; How often management interfered w daily life; Dr. help figure out ways to solve the problem)		✓			CCHRI	CCHRI		✓	✓				Adult	
	Health Promotion (Dr. talk about healthy eating habits; Talk about exercise)		✓			CCHRI	CCHRI		✓					Adult	
	Office Staff (Admin. staff as helpful as they should be; Did staff treat patient with respect)		✓			CCHRI	CCHRI			✓				Adult	
	PAS Pediatrician Survey (questions that differ from PCP/Specialist) Dr. talk about child growth and development; protecting child from injury (bike, car, home); give info about food and nutrition that you needed; info to help understand/deal w/ child behaviors; knowledgeable about child as person		✓			CCHRI	CCHRI			✓				Pediatric	
Consumer Assessment of Healthcare Providers and Systems-Clinician & Group Survey 4.0 (CAHPS-CG)/Agency for Healthcare Research and Quality (AHRQ) Data Collection: Data about patient experiences with physician care are collected by POs and submitted to the National CAHPS Benchmarking Database. Data Availability: Data (including benchmark data) are not publicly available. Reporting Cycle: Data submitted voluntarily annually Website: https://www.cahps.ahrq.gov/content/products/CG/PROD_CG_CG40Products.asp	Getting Appointments and Health Care When Needed Composite (Obtained appt. for routine care as soon as needed; Received answer to question same day from Dr. office; Obtained appt. for care needed right away as soon as needed; Received answer to question as soon as needed when calling after-hours; See Dr. w/in 15 minutes of appt. time.)		✓	✓		NCBD	NCBD				✓	✓		Pediatric, Adult, Geriatric	
	How Well Doctors Communicate Composite: (Dr. explain in a way that was easy to understand; Dr. listen carefully to you; Dr. give you understandable instructions about taking care of health problems/concerns; Dr. seem to know your important medical history information; Dr. show respect for what you had to say; Dr. spend enough time with you)		✓	✓			NCBD	NCBD				✓			Pediatric, Adult, Geriatric

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		Local/State's regional level	State (CA) level	National level	Physician Organizations	Individual Physicians	Safety	Effectiveness	Patient Centeredness	Timeliness	Efficiency	Equity			
Consumer Assessment of Healthcare Providers and Systems-Clinician & Group Survey 4.0 (CAHPS-CG)/AHRQ (Continued) CAHPS/AHRQ Adult Primary, Adult Specialist and Child PCP Survey Supplemental Items	Courteous and Helpful Office Staff Composite: (Clerks/receptionists as helpful as you thought they should be; Did clerks/receptionists treat you with courtesy and respect)		✓		NCBD	NCBD								Pediatric, Adult, Geriatric	
	Overall Rating of Care Composite (Rate this Dr. 0-10 (Worst to best))	✓	✓		NCBD	NCBD								Pediatric, Adult, Geriatric	
	Individual Item: (When this doctor ordered a blood test, x-ray or other test for you, how often did someone from this doctor's office follow up to give you those results)	✓	✓		NCBD	NCBD				✓				Pediatric, Adult, Geriatric	
	Cost of Care Items (Adult Primary & Specialty) (Ever worried about cost of Rx medicine; you and Dr. talk about cost)	✓	✓		NCBD	NCBD				✓				Adult, Geriatric	
	Cost of Care Items (Ever worried about cost of tests; you and Dr. talk about cost of test)	✓	✓		NCBD	NCBD				✓				Adult, Geriatric	
	Provider Communication (Adult Primary Only) (Dr. encourage you talk about health concerns; Explanations Dr. gave about (see list) were hard to understand; Explanations hard to understand because of accent or way Dr. spoke English; Feel that Dr. really cared about you as person; Dr. ignore what you told him/her; Dr. use sarcastic rude tone or manner w/ you; Dr. show interest in your questions; --At visit did Dr. listen to reasons for visit; show concern for physical discomfort; describe physical findings; explain reason for tests; describe next steps;-- Did Dr. give complete /accurate info about test, choices for care, treatment, plan for care, medications, follow-up care	✓	✓		NCBD	NCBD				✓				Adult, Geriatric	
	Care From This Dr. (Specialty) How often Dr. check to be sure you understood everything; how often encourage you to ask questions; let you talk w/out interruptions; Dr. talk about specific things you can do to manage condition; Rate Dr. knowledge of you as person; did Dr. examine you; how often was Dr. as thorough as you thought you needed	✓	✓		NCBD	NCBD				✓				Adult, Geriatric	
	Dr. Communication w/ Child (Child) Is child able to talk w/ Dr. about his health care; Dr. explain things so child could understand; Dr. encourage child to ask questions; Dr. listen carefully to child	✓	✓		NCBD	NCBD				✓				Pediatric	

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		Local/State's regional level	State (CA) level	National level	Physician Organizations	Individual Physicians	Safety	Effectiveness	Patient Centeredness	Timeliness	Efficiency	Equity			
CAHPS/AHRQ Adult Primary, Adult Specialist and Child PCP Survey Supplemental Items (Continued)	Health Improvement (Adult Primary/Child) Did Dr. talk about specific things you can do to prevent illness (in your child)		✓	✓	NCBD	NCBD			✓				Adult, Geriatric		Asthma, Cancer, COPD, Diabetes, Heart Disease, Hypertension, Mental Health, Musculoskeletal, Reproductive Health
	Health Promotion and Education (Adult Primary) Did Dr. help in making changes to prevent illness; did Dr. talk about health diet/eating habits; talk about exercise/physical activity that you get; talk about things that worry you/cause stress; Dr. ask if period when you felt sad or depressed		✓	✓	NCBD	NCBD			✓				Adult Geriatric		
	Wait Time Urgent Care (Adult Primary) When contacted Dr. for urgent care, how long did you wait between trying to get appt. and being seen		✓	✓	NCBD	NCBD			✓	✓			Adult Geriatric		
	Informed about Appt. Start (Adult Primary) After checked in for appt., were you kept informed about how long you'd need to wait for appt. to start		✓	✓	NCBD	NCBD			✓				Adult Geriatric		
	Scheduling Appt. (Child) Did after hours care from Dr. office meet your needs		✓	✓	NCBD	NCBD			✓	✓			Pediatric		
	Most Recent Visit (Adult Primary) After checked in for appt., were you kept informed about how long you'd need to wait for appt. to start; see Dr. w/in 15 min. of appt. time; explain things in understandable way; talk w/ Dr. about health concerns; Dr. give understandable instructions to take care of these concerns; Dr. know your important medical history; Dr. show concern about your health/how you felt; Dr. spend enough time w/ you; clerks/receptionists treat you courteously; rate medical care received during most recent visit (0-10); how could Dr. office improve care received at most recent visit		✓	✓	NCBD	NCBD			✓	✓			Adult Geriatric		
	Other Dr./Provider At Dr. Office (Adult Primary) Were any appt. at this Dr. office w/ another provider; Did provider explain things in understandable way; listen carefully to you; talk w/ provider about health concerns; provider give understandable instructions to take care of these concerns; show respect for what you said; spend enough time with you; had all the info. needed to provide your care; rate all health care received from providers at Dr.'s office		✓	Yes	NCBD	NCBD			✓				Adult Geriatric		

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CAHPS/AHRQ Adult Primary, Adult Specialist and Child PCP Survey Supplemental Items (Continued)	Provider knowledge of Specialist Care (Adult Primary/Child) Did your Dr. seem informed about care received from specialist; Dr. suggest you see a specialist for particular problem	✓	Yes		NCBD	NCBD			✓					Pediatric Adult Geriatric			
	Care from Specialists (Adult Primary) How easy to get appt. w/ specialist; did PCP talk about cost of seeing specialist; you worried about cost of seeing specialist; how many specialists seen in last 12 mos.; how often did specialists know your important medical history; rating of specialist seen most often (0 worst-10 best)	✓	✓		NCBD	NCBD			✓					Adult Geriatric			
	Chronic Conditions/ Disease Mgmt. Shared Decision Making (ALL) Did Dr. tell you >one treatment choice; talk about pros and cons of each choice; when > one choice, did Dr. ask what you thought was best	✓	✓		NCBD	NCBD			✓					Pediatric Adult Geriatric			
	(Adult Primary) Did Dr. help with your problems/concerns	✓	✓		NCBD	NCBD			✓					Adult Geriatric			
	(Adult Primary) Would you recommend Dr. to family/friends; how could Dr. office improve services	✓	✓		NCBD	NCBD			✓					Adult Geriatric			
	Surgery/Procedures (Specialty) Did Dr. give enough info on procedure before it was done; Dr. make sure you had enough pain relief; during and after procedure; Dr. office provide medical help you requested after procedure	✓	✓		NCBD	NCBD			✓					Adult Geriatric			
	(Adult Primary/Child) Was Dr. as thorough as you thought you needed	✓	✓		NCBD	NCBD			✓					Pediatric Adult Geriatric			
Physician Quality Reporting Initiative (PQRI) (2007)/Center for Medicare and Medicaid Services (CMS) P4P Program (Medicare FFS population only) The initiative includes incentive payments for physicians who report data on quality measures for covered services provided to Medicare beneficiaries. All measures are endorsed by NQF or AQA Data Collection: Data are submitted voluntarily by individual physicians nationwide. Data Availability: Data are not publicly available but results are shared with participating physicians. Reporting Cycle: Physicians submit data annually. Website: http://www.cms.hhs.gov/pqri/	Hemoglobin A1c Poor Control (+9%)	✓	✓			CMS		✓					Medicare eligible	Management	Diabetes		
	Low Density Lipoprotein Control in Diabetes (<100 mg/dl)	✓	✓			CMS		✓					Medicare eligible	Management	Diabetes		
	High Blood Pressure Control (<140/80)	✓	✓			CMS		✓					Medicare eligible	Management	Hypertension		
	Screened At-Risk Pts. for Future Fall Risk w/in last 12 mos.	✓	✓			CMS		✓					Medicare eligible	Preventive	Musculoskeletal		
	ACE/ARB Rx for Left Ventricular Systolic Dysfunction (LVSD) or Heart Failure	✓	✓			CMS		✓					Medicare eligible	Acute Management	Heart Disease		

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Physician Quality Reporting Initiative (PQRI) (2007)/CMS P4P Program (Continued)	Oral Antiplatelet Therapy Prescribed for Patients with Coronary Artery Disease		✓	✓		CMS		✓					Medicare eligible	Acute Management	Heart Disease
	Beta-blocker Therapy for Coronary Artery Disease Patients with Prior Myocardial Infarction		✓	✓		CMS		✓					Medicare eligible	Management	Heart Disease
	Beta-blocker Therapy for Left Ventricular Systolic Dysfunction		✓	✓		CMS		✓					Medicare eligible	Acute Management	Heart Disease
	Antidepressant Medication During Acute Phase (12 wk) for Patients with New Episode of Major Depression		✓	✓		CMS		✓		✓			Medicare eligible	Acute	Mental Health
	CT or MRI Studies w/in 24 hrs. arrival for Stroke Patients		✓	✓		CMS		✓		✓			Medicare eligible	Acute	
	Carotid Imaging Reports for specific Stroke Patients		✓	✓		CMS		✓					Medicare eligible	Acute	Hypertension
	Optic Nerve Evaluation for Pts. Diagnosed w/ Primary Open Angle Glaucoma w/in 12 mos.		✓	✓		CMS		✓		✓			Medicare eligible	Preventive	
	Age-Related Eye Disease study (AREDS) Prescribed/ Recommended w/in 12 mos. of Diagnosis (retired in 2008)		✓	✓		CMS		✓		✓			Medicare eligible	Acute	
	Age-Related Macular Degeneration: Dilated Macular Examination w/in 12 mos. (retired in 2008)		✓	✓		CMS		✓		✓			Medicare eligible	Acute Management	
	Cataracts: Assessment of Visual Functional Status w/in 12 mos. (retired in 2008)		✓	✓		CMS		✓		✓			Medicare eligible	Management	
	Cataracts: Documentation of Pre-Surgical Axial Length, Corneal Power Measurement and Method of Intraocular Lens Power Calculation w/in 6 mos. Prior to Surgery (retired in 2008)		✓	✓		CMS		✓		✓			Medicare eligible	Acute	
	Cataracts: Pre-Surgical Dilated Fundus Evaluation w/in 6 mos. Prior to Surgery (retired in 2008)		✓	✓		CMS		✓		✓			Medicare eligible	Acute	
	Diabetic Retinopathy Diagnosis: Documentation of Presence or Absence of Macular Edema and Level of Severity of Retinopathy w/in 12 mos.		✓	✓		CMS		✓		✓			Medicare eligible	Management	Diabetes
	Diabetic Retinopathy: Communication of Test Results with the Physician Managing Ongoing Diabetes Care w/in 12 mos.		✓	✓		CMS		✓		✓			Medicare eligible	Management	Diabetes
	Perioperative Care: Timing of Antibiotic Prophylaxis w/in 1 or 2 hours prior to incision - Ordering Physician		✓	✓		CMS		✓	✓		✓		Medicare eligible	Preventive Acute	

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Physician Quality Reporting Initiative (2007)/CMS P4P Program (Continued)	Perioperative Care: Selection of Prophylactic Antibiotic - First OR Second Generation Cephalosporin		✓	✓		CMS	✓	✓					Medicare eligible	Preventive Acute	
	Perioperative Care: Discontinuation of Prophylactic Antibiotics w/in 24 Hrs. of Surgical End Time (Non-Cardiac Procedures)		✓	✓		CMS	✓	✓			✓		Medicare eligible	Preventive Acute	
	Perioperative Care: Venous Thromboembolism (VTE) Prophylaxis (When Indicated in ALL Patients) w/in 24 Hrs. of Surgery		✓	✓		CMS	✓	✓			✓		Medicare eligible	Preventive Acute	
	Osteoporosis: Communication with the Physician Managing Ongoing Care Post Fracture -Pt. Should be Tested/Treated for Osteoporosis		✓	✓		CMS		✓					Medicare eligible	Management	Musculoskeletal
	Melanoma Diagnosis: Patient Medical History Taken and Asked If had Changing Moles w/in 12 mos. (retired in 2008)		✓	✓		CMS		✓			✓		Medicare eligible	Management	Cancer
	Melanoma Diagnosis: Complete Physical Skin Examination w/in 12 mos. (retired in 2008)		✓	✓		CMS		✓			✓		Medicare eligible	Preventive Management	Cancer
	Melanoma Diagnosis: Counseling on Self-Examination w/in 12 mos. (retired in 2008)		✓	✓		CMS		✓			✓		Medicare eligible	Preventive Management	Cancer
	Aspirin at Arrival for Acute Myocardial Infarction (Administered w/in 24 hrs.)		✓	✓		CMS	✓	✓			✓		Medicare eligible	Acute	Heart Disease
	Beta-Blocker at Time of Arrival for Acute Myocardial Infarction (Administered w/in 24 hrs.) (retired in 2008)		✓	✓		CMS	✓	✓			✓		Medicare eligible	Acute	Heart Disease
	Perioperative Care: Timing of Antibiotic Prophylaxis w/in 1 or 2 hours prior to incision - Administering Physician		✓	✓		CMS	✓	✓			✓		Medicare eligible	Preventive Acute	
	Deep Vein Thrombosis Prophylaxis (DVT) for Ischemic Stroke or Intracranial Hemorrhage by end of day 2		✓	✓		CMS	✓	✓			✓		Medicare eligible	Acute	Hypertension
	Stroke and Stroke Rehabilitation: Discharged on Antiplatelet Therapy		✓	✓		CMS		✓					Medicare eligible	Acute Management	Hypertension
	Stroke and Stroke Rehabilitation: Anticoagulant Therapy Prescribed for Atrial Fibrillation at Discharge		✓	✓		CMS		✓					Medicare eligible	Acute Management	Hypertension
	Stroke and Stroke Rehabilitation: Tissue Plasminogen Activator (t-PA) Considered for Symptom Onset of < 3 Hours		✓	✓		CMS		✓			✓		Medicare eligible	Acute	Hypertension
Stroke and Stroke Rehabilitation: Screening for Dysphagia Before Taking Foods, Fluids or Meds by Mouth		✓	✓		CMS	✓	✓					Medicare eligible	Acute	Hypertension	

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Physician Quality Reporting Initiative (2007)/CMS P4P Program (Continued)	Stroke and Stroke Rehabilitation: Consideration of Rehabilitation Services Documented		✓	✓		CMS		✓	✓					Medicare eligible	Management	Hypertension
	Dialysis Dose (URR>=65%) in End Stage Renal Disease (ESRD) Patients (retired in 2008)		✓	✓		CMS		✓						Medicare eligible	Acute Management	
	Hematocrit Level (>= 33) in End Stage Renal Disease (ESRD) Patients (retired in 2008)		✓	✓		CMS		✓						Medicare eligible	Management	
	Screening or Therapy for Osteoporosis for Women Aged 65 Years and Older (at least once since 60 years)		✓	✓		CMS		✓						Medicare eligible	Preventive Management	Musculoskeletal
	Osteoporosis: Management Following Fracture (DXA scan or pharmacologic therapy Rx)		✓	✓		CMS		✓						Medicare eligible	Management	Musculoskeletal
	Osteoporosis Diagnosis: Rx Pharmacologic Therapy w/in 12 mos.		✓	✓		CMS		✓		✓				Medicare eligible	Management	Musculoskeletal
	Osteoporosis Diagnosis: Counseling for Vitamin D, Calcium Intake, and Exercise w/in 12 mos. (retired in 2008)		✓	✓		CMS		✓		✓				Medicare eligible	Acute Management	Musculoskeletal
	Percentage of Internal Mammary Artery (IMA) in Coronary Artery Bypass Graft (CABG) Surgery		✓	✓		CMS		✓						Medicare eligible	Acute	Heart Disease
	Pre-Operative Beta-blocker Administered to Patients Undergoing Isolated Coronary Artery Bypass Graft (CABG) Surgery		✓	✓		CMS		✓	✓					Medicare eligible	Acute	Heart Disease
	Perioperative Care: Discontinuation of Prophylactic Antibiotics w/in 48 Hours (Cardiac Procedures)		✓	✓		CMS		✓	✓		✓			Medicare eligible	Preventive Acute	Heart Disease
	Medication Reconciliation (w/in 60 days) b/t discharge meds and Current Med. List in On-Going-Care Dr.'s Med. Record		✓	✓		CMS		✓	✓		✓			Medicare eligible	Preventive Management	
	Advance Care Plan Documented in Med. Record		✓	✓		CMS		✓						Medicare eligible	Preventive	
	Assessment of Presence or Absence of Urinary Incontinence in Women Aged 65 Years and Older w/in last 12 mos.		✓	✓		CMS		✓			✓			Medicare eligible	Preventive	
	UI Diagnosis: Characterization of Urinary Incontinence in Women Aged 65+ w/in 12 mos.		✓	✓		CMS		✓			✓			Medicare eligible	Management	
Documented Plan of Care for Urinary Incontinence in Women Aged 65 Years and Older		✓	✓		CMS		✓						Medicare eligible	Management		

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Physician Quality Reporting Initiative (2007)/CMS P4P Program (Continued)	Chronic Obstructive Pulmonary Disease (COPD): Spirometry Evaluation Results Documented		✓	✓		CMS		✓						Medicare eligible	Acute	COPD
	COPD Patients w/ FEV1/FVC<70% (w/ Symptoms) Who Were Rx Bronchodilator Therapy		✓	✓		CMS		✓						Medicare eligible	Acute Management	COPD
	Asthma Patients Prescribed Preferred Long-Term Pharmacologic Therapy		✓	✓		CMS		✓						Medicare eligible	Management	Asthma
	Electrocardiogram Performed for Non-Traumatic Chest Pain Diagnosis		✓	✓		CMS		✓						Medicare eligible	Acute	Heart Disease
	Electrocardiogram Performed for Syncope Diagnosis		✓	✓		CMS		✓						Medicare eligible	Acute	Heart Disease
	Vital Signs Documented and Reviewed for Community-Acquired Bacterial Pneumonia		✓	✓		CMS		✓						Medicare eligible	Acute	
	Assessment of Oxygen Saturation Documented and Reviewed for Community-Acquired Bacterial Pneumonia		✓	✓		CMS		✓						Medicare eligible	Acute	
	Assessment of Mental Status Assessed for Community-Acquired Bacterial Pneumonia Patients		✓	✓		CMS		✓						Medicare eligible	Acute	Mental Health
	Appropriate Empiric Antibiotic Prescription for Community-Acquired Bacterial Pneumonia		✓	✓		CMS		✓						Medicare eligible	Acute	
	Gastro esophageal Reflux Disease (GERD): Patients Assessed for Alarm Symptoms (involuntary wt. loss, dysphagia, and GI bleeding) (retired in 2008)		✓	✓		CMS		✓						Medicare eligible	Acute	
	Gastro esophageal Reflux Disease (GERD): Upper Endoscopy (referred or conducted) for Patients w/ At Least One Alarm Symptom (retired in 2008)		✓	✓		CMS		✓						Medicare eligible	Acute	
	Gastro esophageal Reflux Disease (GERD): Biopsy for Barrett's Esophagus (based on Upper Endoscopy report) (retired in 2008)		✓	✓		CMS		✓						Medicare eligible	Acute	
	GERD Diagnosis: Barium Swallow Not Ordered (Inappropriate Use) (retired in 2008)		✓	✓		CMS		✓						Medicare eligible	Acute	
	Asthma Assessment for Number of Daytime or Nocturnal Asthma Symptoms w/in 12 mos.		✓	✓		CMS		✓						Medicare eligible	Preventive	Asthma

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Physician Quality Reporting Initiative (2007)/CMS P4P Program (Continued)	Appropriate Treatment for Children with Upper Respiratory Infection (URI) (No antibiotic dispensed on or 3 days after episode date)		✓	✓		CMS		✓			✓			Medicare eligible	Acute	
	Appropriate Testing for Children with Pharyngitis (Rx antibiotic and received strep test for episode)		✓	✓		CMS		✓						Medicare eligible	Acute	
	Myelodysplastic Syndrome (MDS) and Acute Leukemias: Baseline Cytogenetic Testing Performed on Bone Marrow		✓	✓		CMS		✓						Medicare eligible	Acute	Cancer
	Myelodysplastic Syndrome (MDS): Documentation of Iron Stores in Patients Receiving Erythropoietin Therapy Prior to Initiating Therapy		✓	✓		CMS		✓						Medicare eligible	Acute	Cancer
	Multiple Myeloma: Treatment With IV Bisphosphonates w/in 12 mos. reporting period		✓	✓		CMS		✓			✓			Medicare eligible	Acute	Cancer
	Chronic Lymphocytic Leukemia (CLL) Diagnosis: Baseline Flow Cytometry Studies Performed		✓	✓		CMS		✓						Medicare eligible	Acute	Cancer
	Hormonal Therapy (tamoxifen or AI) at Time of Visit for Stage IC-III, ER/PR Positive Breast Cancer		✓	✓		CMS		✓						Medicare eligible	Acute	Cancer
	Percentage of Stage III Colon Cancer Patients Prescribed Chemotherapy		✓	✓		CMS		✓						Medicare eligible	Acute	Cancer
	Percentage of Patients for Whom a Plan for Amount Chemotherapy To be Given Documented Before Chemotherapy Administered		✓	✓		CMS		✓						Medicare eligible	Acute	Cancer
	Radiation Therapy Recommended for Invasive Breast Cancer Patients Who Have Undergone Breast Conserving Surgery (w/in 12 mos. of first office visit)		✓	✓		CMS		✓			✓			Medicare eligible	Acute	Cancer
Physician Quality Reporting Initiative (2008)/CMS P4P Program (2008 measures include all 2007 measures and the following new measures) http://www.cms.hhs.gov/pqri/	Prevention of Ventilator-Associated Pneumonia - Head Elevation		✓	✓		CMS	✓	✓						Medicare eligible	Preventive	
	Prevention of Catheter-Related Bloodstream Infections (CRBSI) - Central Venous Catheter Insertion Protocol		✓	✓		CMS	✓	✓						Medicare eligible	Preventive	
	Assessment of GERD Symptoms in Patients Receiving Chronic Medication for GERD		✓	✓		CMS		✓						Medicare eligible	Acute	
	Vascular Access for Patients Undergoing Hemodialysis		✓	✓		CMS		✓						Medicare eligible	Management	

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Physician Quality Reporting Initiative (2008)/CMS P4P Program (Continued)	Influenza Vaccination in Patients with End Stage Renal Disease (ESRD)		✓	✓		CMS		✓						Medicare eligible	Preventive	
	Plan of Care for ESRD Patients with Anemia		✓	✓		CMS		✓	✓					Medicare eligible	Preventive, Management	
	Plan of Care for Inadequate Hemodialysis in ESRD Patients		✓	✓		CMS		✓						Medicare eligible	Preventive, Management	
	Plan of Care for Inadequate Peritoneal Dialysis		✓	✓		CMS		✓						Medicare eligible	Acute	
	Testing of Patients with Chronic Hepatitis C (HCV) for Hepatitis C Veremia		✓	✓		CMS		✓						Medicare eligible	Preventive	
	Initial Hepatitis C RNA Testing		✓	✓		CMS		✓						Medicare eligible	Preventive	
	HCV Genotype Testing Prior to Therapy		✓	✓		CMS		✓						Medicare eligible	Acute	
	Consideration for Antiviral Therapy in HCV Patients		✓	✓		CMS		✓						Medicare eligible	Acute	
	HCV RNA Testing at Week 12 of Therapy		✓	✓		CMS		✓		✓				Medicare eligible	Acute	
	Hepatitis A and B Vaccinations in Patients with HCV		✓	✓		CMS		✓						Medicare eligible	Preventive	
	Counseling Patients with HCV Regarding Use of Alcohol		✓	✓		CMS		✓						Medicare eligible	Preventive	
	Counseling of Patients Regarding Use of Contraception Prior to Starting Antiviral Therapy		✓	✓		CMS		✓						Medicare eligible	Preventive	
	Acute Otitis Externa (AOE): Topical Therapy		✓	✓		CMS		✓						Medicare eligible	Acute	
	Acute Otitis Externa (AOE): Pain Assessment		✓	✓		CMS		✓	✓					Medicare eligible	Acute	
	Acute Otitis Externa (AOE): Systemic Antimicrobial Therapy - Avoidance of Inappropriate Use		✓	✓		CMS		✓						Medicare eligible	Acute	
	Otitis Media with Effusion (OME): Diagnostic Evaluation - Assessment of Tympanic Membrane Mobility		✓	✓		CMS		✓						Medicare eligible	Acute	
	Otitis Media with Effusion (OME): Hearing Testing		✓	✓		CMS		✓						Medicare eligible	Acute	
Otitis Media with Effusion (OME): Antihistamines or Decongestants - Avoidance of Inappropriate Use		✓	✓		CMS		✓						Medicare eligible	Acute		

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Physician Quality Reporting Initiative (2008)/CMS P4P Program (Continued)	Otitis Media with Effusion (OME): Systematic Antimicrobials - Avoidance of Inappropriate Use		✓	✓		CMS		✓						Medicare eligible	Acute	
	Otitis Media with Effusion (OME): Systemic Corticosteroids - Avoidance of Inappropriate Use		✓	✓		CMS		✓						Medicare eligible	Acute	
	Breast Cancer Patients who have a pT and pN Category and Histologic Grade for Their Cancer		✓	✓		CMS		✓						Medicare eligible	Acute	Cancer
	Colorectal Cancer Patients who have a pT and pN Category and Histologic Grade for Their Cancer		✓	✓		CMS		✓						Medicare eligible	Acute	Cancer
	Appropriate Initial Evaluation of Patients with Prostate Cancer		✓	✓		CMS		✓						Medicare eligible	Acute	Cancer
	Inappropriate Use of Bone Scan for Staging Low-Risk Prostate Cancer Patients		✓	✓		CMS		✓						Medicare eligible	Acute	Cancer
	Review of Treatment Options in Patients with Clinically Localized Prostate Cancer		✓	✓		CMS		✓						Medicare eligible	Acute	Cancer
	Adjuvant Hormonal Therapy for High-Risk Prostate Cancer Patients		✓	✓		CMS		✓						Medicare eligible	Acute	Cancer
	Three-dimensional Radiotherapy for Patients with Prostate Cancer		✓	✓		CMS		✓						Medicare eligible	Acute	Cancer
	Patients who have Major Depression Disorder who meet DSM IV Criteria		✓	✓		CMS		✓						Medicare eligible	Acute	Mental Health
	Patients who have Major Depression Disorder who are Assessed for Suicide Risks		✓	✓		CMS	✓	✓						Medicare eligible	Acute	Mental Health
	Disease Modifying Anti-Rheumatic Drug Therapy in Rheumatoid Arthritis		✓	✓		CMS		✓						Medicare eligible	Acute	
	Patients with Osteoarthritis who have an Assessment of Their Pain and Function		✓	✓		CMS		✓	✓					Medicare eligible	Acute	
	Influenza Vaccination for Patients ≥ 50 Years Old		✓	✓		CMS		✓						Medicare eligible	Preventive	
	Pneumonia Vaccination for Patients 65 Years and Older		✓	✓		CMS		✓						Medicare eligible	Preventive	
	Screening Mammography		✓	✓		CMS		✓						Medicare eligible	Preventive	Cancer
	Colorectal Cancer Screening		✓	✓		CMS		✓						Medicare eligible	Preventive	Cancer
Inquiry Regarding Tobacco Use		✓	✓		CMS		✓						Medicare eligible	Preventive		

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Physician Quality Reporting Initiative (2008)/CMS P4P Program (Continued)	Advising Smokers to Quit		✓	✓		CMS		✓						Medicare eligible	Preventive	
	Inappropriate Antibiotic Treatment for Adults with Acute Bronchitis		✓	✓		CMS	✓	✓						Medicare eligible	Preventive	
	Dilated Eye Exam in Diabetic Patient		✓	✓		CMS	✓	✓						Medicare eligible	Preventive, Management	Diabetes
	Angiotensin Converting Enzyme Inhibitor (ACE) or Angiotensin Receptor Blocker (ARB) Therapy for Patients with Coronary Artery Disease and Diabetes and/or Left Ventricular Systolic Dysfunction (LVSD)		✓	✓		CMS		✓						Medicare eligible	Preventive, Management	Diabetes, Heart Disease
	Urine Screening for Microalbumin or Medical Attention for Nephropathy in Diabetic Patients		✓	✓		CMS	✓	✓						Medicare eligible	Preventive	Diabetes
	ACE Inhibitor or Angiotensin Receptor Blocker (ARB) Therapy in Patients with CKD		✓	✓		CMS		✓						Medicare eligible	Preventive, Management	
	Chronic Kidney Disease (CKD): Laboratory Testing (Calcium, Phosphorus, Intact Parathyroid Hormone (iPTH) and Lipid Profile)		✓	✓		CMS		✓						Medicare eligible	Preventive	
	HIT - Adoption/Use of Health Information Technology (Electronic Health Records)		✓	✓		CMS		✓						Medicare eligible		
	HIT - Adoption/Use of e-Prescribing		✓	✓		CMS		✓						Medicare eligible		
	Diabetic Foot and Ankle Care, Peripheral Neuropathy: Neurological Evaluation		✓	✓		CMS		✓						Medicare eligible	Preventive, Management	Diabetes
	Diabetic Foot and Ankle Care, Ulcer Prevention: Evaluation of Footwear		✓	✓		CMS	✓	✓						Medicare eligible	Preventive, Management	Diabetes
	Universal Weight Screening and Follow-Up		✓	✓		CMS		✓						Medicare eligible	Preventive	
	Universal Influenza Vaccine Screening and Counseling		✓	✓		CMS		✓						Medicare eligible	Preventive	
	Universal Documentation and Verification of Current Medications in the Medical Record		✓	✓		CMS		✓						Medicare eligible		
	Pain Assessment Prior to Initiation of Patient Treatment		✓	✓		CMS		✓	✓					Medicare eligible	Acute	
	Patient Co-Development of Treatment Plan/Plan of Care		✓	✓		CMS		✓	✓					Medicare eligible	Acute, Management	
	Screening for Cognitive Impairment		✓	✓		CMS		✓						Medicare eligible	Preventive	
Screening for Clinical Depression		✓	✓		CMS		✓						Medicare eligible	Preventive	Mental Health	

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Doctor's Office Quality Information Technology DOQ-IT/Centers for Medicare and Medicaid Services (CMS) (pilot project for Medicare population only--Electronic Healthcare Record submission only; no billing data like PQRI-P4P) Sponsored by CMS, the DOQ-IT Initiative focuses on adoption of IT and includes clinical measure data. The quality improvement clinical warehouse stores data. Measures are calculated and reported at the practice level for quality improvement. Data Collection: Data are collected nationwide from individual physicians. Data Availability: Data are not publicly available but are reported back to participating physicians. Reporting Cycle: Physicians submit data voluntarily - no specific cycle Website: http://providers.ipro.org/index/doqit	Percentage of Patients With CAD Who Were Prescribed Antiplatelet Therapy			✓		CMS	✓					Medicare eligible		Heart Disease
	Percentage of Patients With CAD Who Were Prescribed a Lipid-Lowering Therapy			✓		CMS	✓					Medicare eligible	Management	Heart Disease
	Percentage of CAD Patients With Prior MI Who Were Prescribed Beta-blocker Therapy			✓		CMS	✓					Medicare eligible	Prevention Management	Heart Disease
	Percentage of CAD patients Who Had a Blood Pressure Measurement During the Last Office Visit			✓		CMS	✓					Medicare eligible	Prevention Management	Heart Disease
	Percentage of CAD Patients Receiving at Least One Lipid Profile During the Reporting Year			✓		CMS	✓					Medicare eligible	Management	Heart Disease
	Percentage of CAD Patients With Most Recent LDL Cholesterol < 130 mg/dl			✓		CMS	✓					Medicare eligible	Management	Heart Disease
	Percentage of Patients With CAD Who Also Have Diabetes and/or LVSD Who Were Prescribed ACE Inhibitor Therapy			✓		CMS	✓					Medicare eligible	Management	Heart Disease Diabetes
	Percentage of CAD Patient Visits With Blood Pressure (BP) Measurement Recorded			✓		CMS	✓					Medicare eligible	Prevention Management	Heart Disease
	Percentage of CAD Patients With Last BP < 140/90 mm Hg			✓		CMS	✓					Medicare eligible	Management	Heart Disease
	Percentage of Patient Visits With Either Systolic Blood Pressure > 140 mm Hg or Diastolic Blood Pressure > 90 mm Hg With Documented Plan of Care for Hypertension			✓		CMS	✓					Medicare eligible	Management	Hypertension
	Percentage of Patients With HF, Who Have Quantitative or Qualitative Results of LVF Assessment Recorded			✓		CMS	✓					Medicare eligible	Management	Heart Disease
	Left Ventricular Ejection Fraction Testing During the Current Year for Patients Hospitalized With a Principal Diagnosis of HF During the Current Year			✓		CMS	✓					Medicare eligible	Acute	Heart Disease
	Percentage of HF Patient Visits with Weight Measurement Recorded			✓		CMS	✓					Medicare eligible	Prevention Management	Heart Disease
	Percentage of HF Patient Visits With Blood Pressure (BP) Measurement Recorded			✓		CMS	✓					Medicare eligible	Prevention Management	Heart Disease
	Percentage of Patients With HF Who Were Provided With Patient Education on Disease Management and Health Behavior Changes During One or More Visit(s) Within a Six-month Period			✓		CMS	✓					Medicare eligible	Prevention	Heart Disease

Inventory of Physician Organization Quality Performance Measures

Measure Set/Developer	Title/Brief Description of Quality Measures	Data Collection Can Occur at...			Organization(s) Managing Quality Performance Data for...		Measure Relevance to IOM Domains of Quality Care						Life Cycle	Type of Care	Key Health Conditions Related to Measure (as identified by OPA)	
		Local/State's regional level	State (CA) level	National level	Physician Organizations	Individual Physicians	Safety	Effectiveness	Patient Centeredness	Timeliness	Efficiency	Equity				Pediatric (<18), Adult (<65) Geriatric (65+)
DOQ-IT/CMS (Continued)	Percentage of Patients With HF Who Also Have LVSD Who Were Prescribed Beta-blocker Therapy			✓		CMS		✓						Medicare eligible		Heart Disease
	Percentage of patients with HF who also have LVSD who were prescribed ACE inhibitor therapy			✓		CMS		✓						Medicare eligible	Acute Management	Heart Disease
	Percentage of Patients With HF Who Also Have Paroxysmal or Chronic Atrial Fibrillation Who Were Prescribed Warfarin Therapy			✓		CMS		✓						Medicare eligible	Acute Management	Heart Disease
	Percentage of Diabetic Patients With One or More A1c Test(s)			✓		CMS		✓						Medicare eligible	Management	Diabetes
	Percentage of Diabetic Patients With Most Recent A1c level > 9.0% (poor control)			✓		CMS		✓						Medicare eligible	Management	Diabetes
	Percentage of Diabetic Patients With Most Recent BP < 140/90 mm Hg			✓		CMS		✓						Medicare eligible	Management	Diabetes
	Percentage of Diabetic Patients With at Least One Low-density Lipoprotein (LDL) Cholesterol Test			✓		CMS		✓						Medicare eligible	Management	Diabetes
	Percentage of Diabetic Patients With Most Recent LDL Cholesterol < 130 mg/dl			✓		CMS		✓						Medicare eligible	Management	Diabetes
	Percentage of Diabetic Patients With at Least One Test for Microalbumin During The Measurement Year, or Who Had Evidence of Medical Attention For Existing Nephropathy (Diagnosis of Nephropathy or Documentation of Microalbuminuria or Albuminuria)			✓		CMS		✓						Medicare eligible	Management	Diabetes
	Percentage of Diabetic Patients Who Received a Dilated Eye Exam or Evaluation of Retinal Photographs by an Optometrist or Ophthalmologist During the Reporting Year, or During the Prior Year if Patient is at Low Risk for Retinopathy. A Patient is Considered Low Risk if All Three of the Following Criteria are Met: (1) The Patient is Not Taking Insulin; (2) Has an A1c < 8%; and (3) Has no Evidence of Retinopathy in the Prior Year			✓		CMS		✓						Medicare eligible	Prevention Management	Diabetes
	Percentage of Eligible Diabetic Patients Receiving at Least One Complete Foot Exam (Visual Inspection, Sensory Exam With Monofilament, and Pulse Exam)			✓		CMS		✓						Medicare eligible	Prevention Management	Diabetes
	Percentage of Diabetic Patient Visits With Blood Pressure (BP) Measurement Recorded			✓		CMS		✓						Medicare eligible	Prevention Management	Diabetes

Inventory of Physician Organization Quality Performance Measures

Measure Set/Developer	Title/Brief Description of Quality Measures	Data Collection Can Occur at...			Organization(s) Managing Quality Performance Data for...		Measure Relevance to IOM Domains of Quality Care						Life Cycle	Type of Care	Key Health Conditions Related to Measure (as identified by OPA)	
		Local/State's regional level	State (CA) level	National level	Physician Organizations	Individual Physicians	Safety	Effectiveness	Patient Centeredness	Timeliness	Efficiency	Equity				
DOQ-IT/CMS (Continued)	Percentage of women 50-69 years who had a mammogram during the measurement time period (24 months)		✓			CMS		✓						Medicare eligible	Prevention	Cancer
	Percentage of Patients Screened for Colorectal Cancer During the One-year Measurement Period		✓			CMS		✓						Medicare eligible	Prevention	Cancer
	The Percentage of Patients 50 Years and Older Who Received an Influenza Vaccination From September Through February of the Year Prior to the Measurement Year			✓			CMS		✓					Medicare eligible	Prevention	
	The Percentage of Patients 65 Years and Older Who Ever Received a Pneumococcal Vaccination			✓			CMS		✓					Medicare eligible	Prevention	
	Percentage of Patients With at Least One Low-Density Lipoprotein (LDL) Cholesterol Test			✓			CMS		✓					Medicare eligible	Prevention	
	Percentage of Patients With Most Recent LDL Cholesterol < 130 mg/dL			✓			CMS		✓					Medicare eligible	Prevention	
	Percentage of Patients Who Were Queried About Tobacco Use One or More Times During the Two-year Measurement Period			✓			CMS		✓					Medicare eligible	Prevention	COPD, Cancer, Hypertension, Heart Disease
	Percentage of Patients Identified as Tobacco Users Who Received Cessation Intervention During The Two-year Measurement Period			✓			CMS		✓					Medicare eligible	Prevention	COPD, Cancer, Hypertension, Heart Disease
	Percentage of Patients Who are Screened Annually for Depression in Primary Care Settings			✓			CMS		✓					Medicare eligible	Prevention	Mental Health

Inventory of Physician Organization Quality Performance Measures																
Measure Set/Developer	Title/Brief Description of Quality Measures	Data Collection Can Occur at...			Organization(s) Managing Quality Performance Data for...		Measure Relevance to IOM Domains of Quality Care					Life Cycle	Type of Care	Key Health Conditions Related to Measure (as identified by OPA)		
		Local/State's regional level	State (CA) level	National level	Physician Organizations	Individual Physicians	Safety	Effectiveness	Patient Centeredness	Timeliness	Efficiency				Equity	
DOQ-IT/CMS (Continued)	Percentage of Patients With a Positive Screen for Depression With a Follow-up Assessment or Referral			✓		CMS		✓					Medicare eligible	Prevention	Mental Health	
	Percentage of Patients With Major Depressive Disorder Who Were Continued on Medication for a Minimum of 16 Weeks Following Remission of Symptoms			✓		CMS		✓					Medicare eligible	Management	Mental Health	
Physician Recognition Program/National Committee for Quality Assurance (NCQA) Developed and managed by NCQA, this program publicly recognizes physicians meeting clinical requirements for appropriate care. The requirements are evidence-based and physician consensus-based. There are four areas of focus. Data Collection: Data are collected voluntarily at the individual or physician organization level from physicians nationwide. Data Availability: Data are publicly available for those physicians who meet the standards. Reporting Cycle: Physicians submit data voluntarily - no specific cycle. http://www.ncqa.org/tabid/58/Default.aspx	Back Pain Recognition Program: 13 Clinical Measures (initial visit, physical exam, mental health assessment, appropriate imaging for acute back pain, repeat imaging studies, medical assistance w/ smoking cessation, advice for normal activities, advice against bed rest, recommendation for exercise, appropriate use of epidural steroid injections, surgical timing, patient reassessment, share decision making) and 3 Structural Measures (patient education, post-surgical outcomes, evaluation of patient experience.)	✓	✓		NCQA-PRP	NCQA-PRP		✓	✓				Adult, Geriatric	Acute	Musculoskeletal	
	Heart/Stroke Recognition Program: Blood Pressure Controlled (<140/90mmHg), Complete Lipid Profile, Cholesterol Controlled (LDL <100mg/dL), Use of Aspirin or Other Antithrombotic, Smoking Status and Cessation Advice or Treatment.	✓	✓		NCQA-PRP	NCQA-PRP		✓						Adult, Geriatric	Preventive, Management	Heart Disease, Hypertension
	Diabetes Recognition Program: HbA1c<7.0%, HbA1c>9.0% (poor control); Blood Pressure Control (>149/90mmHg [poor control], <130/80mmHg; Cholesterol control (LDL >130mg/dL [poor control], LDL<100mg/dL; Eye Exam; Foot Exam; Nephropathy Exam; Smoking Status/Cessation Advice or Treatment	✓	✓		NCQA-PRP	NCQA-PRP		✓						Pediatric, Adult, Geriatric	Preventive, Management	Diabetes
	Primary Care Medical Home Program: Access and Communication Process and Results; Patient Tracking and Registry Functions (basic system for managing patient data, organizing clinical data, identifying important conditions, guidelines for those conditions, care management of important conditions, continuity of care); Patient Self Management Support (documenting communications needs and self-management support); Electronic Prescribing; Test Tracking; Referral Tracking; Performance Reporting and Improvement; Advanced Electronic Communications; Interoperability	✓	✓		NCQA-PRP	NCQA-PRP		✓						Pediatric, Adult, Geriatric		

Inventory of Physician Organization Quality Performance Measures														
Measure Set/Developer	Title/Brief Description of Quality Measures	Data Collection Can Occur at...			Organization(s) Managing Quality Performance Data for...		Measure Relevance to IOM Domains of Quality Care					Life Cycle	Type of Care	Key Health Conditions Related to Measure (as identified by OPA)
		Local/State's regional level	State (CA) level	National level	Physician Organizations	Individual Physicians	Safety	Effectiveness	Patient Centeredness	Timeliness	Efficiency			
Coronary Artery By-Pass Graft Surgery (2003-2004)/California Office of Statewide Health Planning and Development Reports on risk-adjusted CABG outcomes by individual surgeon throughout the state of California. Data Collection: Data are submitted to OSHPD annually by hospitals throughout California. Data Availability: Results are publicly available for 2003-2004 and soon to be released 2006. Reporting Cycle: OSHPD plans to report surgeon outcomes every two years. Website: http://www.oshpd.ca.gov/HID/Products/Clinical_Data/CABG/03-04Breakdown.html	Isolated CABG cases risk-adjusted mortality rate		✓			✓						Adult Geriatric	Acute	Heart Disease

Inventory of Hospital Quality Performance Measures

Measure Set/Developer	Title/Brief Description of Quality Measures	Organization(s) Managing Quality Performance Data for Hospitals	Measure Relevance to IOM 6 Domains of Quality Care						Life Cycle	Type of Care	Key Health Conditions Related to Measure <small>(as identified by OPA)</small>
			Safety	Effectiveness	Patient Centeredness	Timeliness	Efficiency	Equity			
HospitalCompare (Hospital Process of Care Measure Set)-Hospital Quality Alliance (HQA)/Centers for Medicare and Medicaid Services (CMS)' Data Collection: CMS offers hospitals a pay-for-participation incentive to voluntarily submit data extracted from Medicare and non-Medicare patient medical records and administrative records (retrospective data) on a quarterly basis. Clinical measures and the HCAHPS see next entry) are part of the measures set at HospitalCompare. Data Availability: Data are publicly available through hospitalcompare.hhs.gov Reporting Cycle: After the data have been processed, hospitals are given 30 days to preview data before it is publicly reported. Data are publicly available 9 months after collection (e.g. Q4 data available September of following year.) (Mortality data are published annually.)	Percent of Heart Attack Patients Given ACE Inhibitor or ARB for Left Ventricular Systolic Dysfunction (LVSD)*	CMS Hospital Compare/ QualityNet		✓					Adult Geriatric	Acute	Heart Disease, Hypertension
	Percent of Heart Attack Patients Given Aspirin at Arrival*	CMS Hospital Compare/ QualityNet		✓		✓			Adult Geriatric	Acute	Heart Disease, Hypertension
	Percent of Heart Attack Patients Prescribed Aspirin at Discharge*	CMS Hospital Compare/ QualityNet		✓					Adult Geriatric	Management	Heart Disease, Hypertension
	Percent of Heart Attack Patients Given Beta Blocker at Arrival*	CMS Hospital Compare/ QualityNet		✓		✓			Adult Geriatric	Acute	Heart Disease, Hypertension
	Percent of Heart Attack Patients Prescribed Beta Blocker at Discharge*	CMS Hospital Compare/ QualityNet		✓					Adult Geriatric	Management	Heart Disease, Hypertension
	Percent of Heart Attack Patients Given Fibrinolytic Medication Within 30 Minutes Of Arrival*	CMS Hospital Compare/ QualityNet		✓		✓			Adult Geriatric	Acute	Heart Disease, Hypertension
	Percent of Heart Attack Patients Given PCI Within 90 Minutes Of Arrival*	CMS Hospital Compare/ QualityNet		✓		✓			Adult Geriatric	Acute	Heart Disease, Hypertension
	Percent of Heart Attack Patients Given Smoking Cessation Advice/Counseling*	CMS Hospital Compare/ QualityNet		✓					Adult Geriatric	Preventive, Management	Heart Disease, Hypertension
	Percent of Heart Failure Patients Given ACE Inhibitor or ARB for Left Ventricular Systolic Dysfunction (LVSD)*	CMS Hospital Compare/ QualityNet		✓					Adult Geriatric	Acute	Heart Disease, Hypertension
	Percent of Heart Failure Patients Given an Evaluation of Left Ventricular Systolic (LVS) Function*	CMS Hospital Compare/ QualityNet		✓					Adult Geriatric	Acute	Heart Disease, Hypertension
	Percent of Heart Failure Patients Given Discharge Instructions*	CMS Hospital Compare/ QualityNet		✓					Adult Geriatric	Preventive, Management	Heart Disease, Hypertension
	Percent of Heart Failure Patients Given Smoking Cessation Advice/Counseling*	CMS Hospital Compare/ QualityNet		✓					Adult Geriatric	Preventive, Management	Heart Disease, Hypertension
	* Same measures are also available at QualityCheck.org - Joint Commission	Percent of Pneumonia Patients Assessed and Given Influenza Vaccination*	CMS Hospital Compare/ QualityNet		✓					Adult Geriatric	Preventive

Inventory of Hospital Quality Performance Measures

Measure Set/Developer	Title/Brief Description of Quality Measures	Organization(s) Managing Quality Performance Data for Hospitals	Measure Relevance to IOM 6 Domains of Quality Care						Life Cycle	Type of Care	Key Health Conditions Related to Measure <small>(as identified by OPA)</small>
	Individual and Composite Measures		Safety	Effectiveness	Patient Centeredness	Timeliness	Efficiency	Equity	Pediatric (<18), Adult (<65) Geriatric (65+)	Preventive, Acute, Management	Asthma, Cancer, COPD, Diabetes, Heart Disease, Hypertension, Mental Health, Musculoskeletal, Reproductive Health
HospitalCompare/CMS (Continued)	Percent of Pneumonia Patients Assessed and Given Pneumococcal Vaccination*	CMS Hospital Compare/ QualityNet		✓					Adult Geriatric	Preventive	
	Percent of Pneumonia Patients Given Initial Antibiotic(s) within 4 Hours After Arrival*	CMS Hospital Compare/ QualityNet		✓		✓			Adult Geriatric	Preventive, Acute	
	Percent of Pneumonia Patients Given Oxygenation Assessment*	CMS Hospital Compare/ QualityNet		✓					Adult Geriatric	Acute	
	Percent of Pneumonia Patients Given Smoking Cessation Advice/Counseling*	CMS Hospital Compare/ QualityNet		✓					Adult Geriatric	Preventive, Management	
	Percent of Pneumonia Patients Given the Most Appropriate Initial Antibiotic(s)	CMS Hospital Compare/ QualityNet		✓					Adult Geriatric	Preventive, Acute	
	Percent of Pneumonia Patients Whose Initial Emergency Room Blood Culture Was Performed Prior To The Administration Of The First Hospital Dose Of Antibiotics	CMS Hospital Compare/ QualityNet		✓		✓			Adult Geriatric	Acute	
	Percent of Surgery Patients Who Received Preventative Antibiotic(s) One Hour Before Incision*	CMS Hospital Compare/ QualityNet	✓	✓		✓			Adult Geriatric	Preventive, Acute	
	Percent of Surgery Patients Who Received the Appropriate Preventative Antibiotic(s) for Their Surgery*	CMS Hospital Compare/ QualityNet	✓	✓		✓			Adult Geriatric	Preventive, Acute	
	Percent of Surgery Patients Whose Preventative Antibiotic(s) are Stopped Within 24 hours After Surgery*	CMS Hospital Compare/ QualityNet		✓		✓			Adult Geriatric	Preventive, Acute	
	Percent Surgery Patients with Recommended Venous Thromboembolism Prophylaxis (VTE) Ordered Between Arrival and 48 Hours After Surgery End Time	CMS Hospital Compare/ QualityNet		✓		✓			Adult Geriatric	Preventive	COPD/Heart Disease
	Surgery patients who received appropriate (VTE) prophylaxis within 24 Hours prior to Surgical Incision Time to 24 Hours after Surgery End Time	CMS Hospital Compare/ QualityNet		✓		✓			Adult Geriatric	Preventive	COPD/Heart Disease

Inventory of Hospital Quality Performance Measures

Measure Set/Developer	Title/Brief Description of Quality Measures	Organization(s) Managing Quality Performance Data for Hospitals	Measure Relevance to IOM 6 Domains of Quality Care						Life Cycle	Type of Care	Key Health Conditions Related to Measure <small>(as identified by OPA)</small>
	Individual and Composite Measures		Safety	Effectiveness	Patient Centeredness	Timeliness	Efficiency	Equity	Pediatric (<18), Adult (<65) Geriatric (65+)	Preventive, Acute, Management	Asthma, Cancer, COPD, Diabetes, Heart Disease, Hypertension, Mental Health, Musculoskeletal, Reproductive Health
HospitalCompare/CMS (Continued) New Measures Requested by Healthcare Quality Alliance (HQA) Beginning 2008	30-Day Mortality Rate for Heart Failure (Annual Data June-June Medicare beneficiaries only w/ Dx)	CMS Hospital Compare/ QualityNet		✓					Geriatric		Heart Disease
	30-Day Mortality Rate for Heart Attack (Annual Data June-June Medicare beneficiaries only w/ Dx)	CMS Hospital Compare/ QualityNet		✓					Geriatric		Heart Disease
	30-Day Mortality Rate for Pneumonia (Annual Data June-June Medicare beneficiaries only w/ Dx)	CMS Hospital Compare/ QualityNet		✓					Geriatric		
	HCAHPS 18 substantive patient experience questions	CMS Hospital Compare/ QualityNet				✓	✓		Geriatric		
	Surgical Care Improvement: Appropriate Hair Removal	CMS Hospital Compare		✓					Adult Geriatric	Preventive	
	Surgical Care Improvement: Cardiac surgery patients with controlled 6AM post-op serum glucose	CMS Hospital Compare		✓			✓		Adult Geriatric	Preventive Acute	Heart Disease
	Surgical Care Improvement: Surgery patients on beta-blocker prior to arrival who received a beta-blocker during perioperative period	CMS Hospital Compare		✓			✓		Adult Geriatric	Management	Heart Disease
	Pediatric Asthma: Use of relievers for inpatient asthma care	CMS Hospital Compare		✓					Pediatric	Acute	Asthma
	Pediatric Asthma: Use of systematic corticosteroids for inpatient asthma care	CMS Hospital Compare		✓					Pediatric	Acute	Asthma

Inventory of Hospital Quality Performance Measures

Measure Set/Developer	Title/Brief Description of Quality Measures	Organization(s) Managing Quality Performance Data for Hospitals	Measure Relevance to IOM 6 Domains of Quality Care						Life Cycle	Type of Care	Key Health Conditions Related to Measure <small>(as identified by OPA)</small>
			Safety	Effectiveness	Patient Centeredness	Timeliness	Efficiency	Equity			
<p>Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) - Centers for Medicare and Medicaid Services (CMS) and Agency for Healthcare Research and Quality (AHRQ) - A patient experience survey developed by CMS and AHRQ assesses patients' perspectives on hospital care. Individual hospital comparisons will be possible. There are 18 substantive items in the 27-item survey. This is included in the CMS HospitalCompare measure set, but can be used as a stand-alone tool.</p> <p>Data Collection: Hospitals administer survey and submit data to CMS QualityNet Exchange database. 300 completed surveys per hospital should be submitted annually. Data can also be submitted to the AHRQ CAHPS database. Administered by mail/phone 48 hours to six weeks post-discharge to patients 18+ years with inpatient overnight stay. Hospitals subject to IPPS payment and RHQDAPU-eligible are required to participate to maintain Medicare (APU) funding levels. All other hospital participation is voluntary. Survey tools are available through http://www.hcahponline.org/.</p> <p>Data Availability: Access publicly reported data (newly available March 2008) through hospitalcompare.hhs.gov.</p> <p>Some hospital results are also available through the AHRQ CAHPS website.</p> <p>Reporting Cycle: HCAHPS data will be published quarterly after the initial launch in 2008 and comprised of the most recent 4 quarters.</p>	<p>Communication with Nurses Composite "How often..." (Nurses treat with courtesy and respect; Nurses listen carefully; Nurses explain things in understandable way)</p>	CMS Hospital Compare/ QualityNet			✓				Adult Geriatric		
	<p>Communication with Doctors Composite "How often..." (Dr. treat with courtesy and respect; Dr. listen carefully; Dr. explain things in understandable way)</p>	CMS Hospital Compare/ QualityNet			✓				Adult Geriatric		
	<p>Communication about Medication Composite "How often..." (Before giving meds, did staff tell you what it was for; explain possible side effects in understandable way)</p>	CMS Hospital Compare/ QualityNet			✓				Adult Geriatric		
	<p>Hospital Staff Composite "How often..." (Did you get help as soon as you wanted after pressing call button; If needed, how often obtained assistance using a bed pan as soon as you needed)</p>	CMS Hospital Compare/ QualityNet			✓	✓			Adult Geriatric		
	<p>Discharge Composite "How often..." (Did you get info. in writing about symptoms or health problems to look out for after discharge; did staff talk about whether you would have the help you needed post-discharge)</p>	CMS Hospital Compare/ QualityNet			✓				Adult Geriatric		
	<p>Pain Control Composite (If needed, how often was pain well controlled; how often did staff do everything they could to help w/ pain)</p>	CMS Hospital Compare/ QualityNet			✓	✓			Adult Geriatric		
	<p>Physical Environment Composite "How often..." (Room/bathroom kept clean; Area around room quiet)</p>	CMS Hospital Compare/ QualityNet			✓				Adult Geriatric		
	<p>Rate hospital 0 (worse)-10 (best)</p>	CMS Hospital Compare/ QualityNet							Adult Geriatric		
	<p>Would you recommend this hospital to family/friends</p>	CMS Hospital Compare/ QualityNet							Adult Geriatric		

Inventory of Hospital Quality Performance Measures

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	Individual and Composite Measures		Safety	Effectiveness	Patient Centeredness	Timeliness	Efficiency	Equity	Pediatric (<18), Adult (<65), Geriatric (65+)	Preventive, Acute, Management	Asthma, Cancer, COPD, Diabetes, Heart Disease, Hypertension, Mental Health, Musculoskeletal, Reproductive Health
Quality Check - Joint Commission¹ Data Collection: Hospitals are required to submit quality data to the independent Joint Commission and meet certain standards to receive accreditation. The Commission provides the public with information about the comparative performance of accredited and non-accredited hospitals. There is overlap between measures reported by The Commission and CMS HospitalCompare websites. Data Availability: Data is publicly available through http://www.qualitycheck.org/consumer/searchQCR.aspx Reporting Cycle: Hospitals submit data quarterly with the most recent 12 months reported on the QualityCheck website. <small>* Same measures are also available at HospitalCompare.hhs.gov HHS/CMS</small>	Percent of Heart Attack Patients Given Aspirin at Arrival*	QualityCheck		✓		✓			Adult	Acute	Heart Disease, Hypertension
	Percent of Heart Attack Patients Prescribed Aspirin at Discharge*	QualityCheck		✓					Adult	Management	Heart Disease, Hypertension
	Percent of Heart Attack Patients Given Beta Blocker at Arrival*	QualityCheck		✓		✓			Adult	Acute	Heart Disease, Hypertension
	Percent of Heart Attack Patients Prescribed Beta Blocker at Discharge*	QualityCheck		✓					Adult	Management	Heart Disease, Hypertension
	Percent Heart Attack Patients Given Smoking Cessation Counseling*	QualityCheck		✓					Adult	Preventive, Management	Heart Disease, Hypertension
	ACE Inhibitor or ARB for LVSD*	QualityCheck		✓					Adult	Acute	Heart Disease, Hypertension
	Inpatient Mortality (patients who died from AMI while in hospital)	QualityCheck		✓					Adult	Acute	Heart Disease, Hypertension
	Percent of Heart Attack Patients Given Thrombolytic Medication Within 30 Minutes Of Arrival*	QualityCheck		✓		✓			Adult	Acute	Heart Disease, Hypertension
	Percent of Heart Attack Patients Given PCI Within 120 Minutes Of Arrival*	QualityCheck		✓		✓			Adult	Acute	Heart Disease, Hypertension
	Time to PCI	QualityCheck		✓		✓			Adult	Acute	Heart Disease, Hypertension
	Time to Thrombolysis	QualityCheck		✓		✓			Adult	Acute	Heart Disease, Hypertension
	Percent of Heart Failure Patients Given ACE Inhibitor or ARB for Left Ventricular Systolic Dysfunction (LVSD)*	QualityCheck		✓					Adult	Acute	Heart Disease, Hypertension
	Percent of Heart Failure Patients Given an Evaluation of Left Ventricular Systolic (LVS) Function*	QualityCheck		✓					Adult	Acute	Heart Disease, Hypertension

Inventory of Hospital Quality Performance Measures

Measure Set/Developer	Title/Brief Description of Quality Measures	Organization(s) Managing Quality Performance Data for Hospitals	Measure Relevance to IOM 6 Domains of Quality Care						Life Cycle	Type of Care	Key Health Conditions Related to Measure <small>(as identified by OPA)</small>
			Safety	Effectiveness	Patient Centeredness	Timeliness	Efficiency	Equity			
Quality Check/Joint Commission (Continued)	Percent of Heart Failure Patients Given Discharge Instructions*	QualityCheck		✓					Adult	Management	Heart Disease, Hypertension
	Percent of Heart Failure Patients Given Smoking Cessation Advice/Counseling*	QualityCheck		✓					Adult	Management	Heart Disease, Hypertension
	Percent of Pneumonia Patients Assessed and Given Influenza Vaccination*	QualityCheck		✓					Adult	Preventive	
	Percent of Pneumonia Patients Assessed and Given Pneumococcal Vaccination*	QualityCheck		✓					Adult	Preventive	
	Percent of Pneumonia Patients Given Initial Antibiotic(s) within 4 Hours After Arrival*	QualityCheck		✓		✓			Adult	Acute	
	Antibiotic Timing	QualityCheck		✓		✓			Adult	Acute	
	Percent of Pneumonia Patients Given Initial Antibiotic(s) within 8 Hours After Arrival	QualityCheck		✓		✓			Adult	Acute	
	Percent of Pneumonia Patients Given Oxygenation Assessment*	QualityCheck		✓					Adult	Acute	
	Percent of Pneumonia Patients Given Smoking Cessation Advice/Counseling*	QualityCheck		✓					Adult	Preventive	
	Correct initial Antibiotic Selection for CAP in Immunocompetent ICU Pt.	QualityCheck		✓					Adult	Acute	
	Correct initial Antibiotic Selection for CAP in Immunocompetent Non-ICU Pt.	QualityCheck		✓					Adult	Acute	
	Percent ICU Pneumonia Patients Receive Blood Culture w/in 24 hrs prior to or after hospital arrival	QualityCheck		✓		✓			Adult	Acute	
	Percent of Pneumonia Patients Whose Initial Emergency Room Blood Culture Was Performed Prior To The Administration Of The First Hospital Dose Of Antibiotics*	QualityCheck		✓					Adult	Acute	

Inventory of Hospital Quality Performance Measures												
Measure Set/Developer	Title/Brief Description of Quality Measures	Organization(s) Managing Quality Performance Data for Hospitals	Measure Relevance to IOM 6 Domains of Quality Care						Life Cycle	Type of Care	Key Health Conditions Related to Measure (as identified by OPA)	
	Individual and Composite Measures		Safety	Effectiveness	Patient Centeredness	Timeliness	Efficiency	Equity				Pediatric (<18), Adult (<65) Geriatric (65+)
Quality Check/Joint Commission (Continued)	Percent of Surgery Patients Who Received Preventative Antibiotic(s) One Hour Before Incision*	QualityCheck	✓	✓		✓			Adult	Acute		
	Percent of Surgery Patients who Received the Appropriate Preventative Antibiotic(s) for Their Surgery*	QualityCheck	✓	✓					Adult			
	Percent of Surgery Patients Whose Preventative Antibiotic(s) are Stopped Within 24 hours After Surgery* --for the 7 surgery types listed below:	QualityCheck	✓	✓		✓			Adult	Preventive		
	Overall Performance in SIP for Pt Having Blood Vessel Surgery	QualityCheck	✓	✓					Adult	Preventive		
	Overall Performance in SIP for Pt Having Colon/Large Intestine Surgery	QualityCheck	✓	✓					Adult	Preventive		
	Overall Performance in SIP for Pt Having CABG Surgery	QualityCheck	✓	✓					Adult	Preventive		
	Overall Performance in SIP for Pt Having Hip Joint Replmt Surgery	QualityCheck	✓	✓					Adult	Preventive		
	Overall Performance in SIP for Pt Having Hysterectomy Surgery	QualityCheck	✓	✓					Adult	Preventive		
	Overall Performance in SIP for Pt Having Knee Jt. Rplmt Surgery	QualityCheck	✓	✓					Adult	Preventive		
	Overall Performance in SIP for Pt Having Open Heart Surgery (other than CABG)	QualityCheck	✓	✓					Adult	Preventive		

Inventory of Hospital Quality Performance Measures											
Measure Set/Developer	Title/Brief Description of Quality Measures	Organization(s) Managing Quality Performance Data for Hospitals	Measure Relevance to IOM 6 Domains of Quality Care						Life Cycle	Type of Care	Key Health Conditions Related to Measure <small>(as identified by OPA)</small>
	Individual and Composite Measures		Safety	Effectiveness	Patient Centeredness	Timeliness	Efficiency	Equity	Pediatric (<18), Adult (<65) Geriatric (65+)	Preventive, Acute, Management	Asthma, Cancer, COPD, Diabetes, Heart Disease, Hypertension, Mental Health, Musculoskeletal, Reproductive Health
Hospital Quality and Safety Survey - Leapfrog This report card focuses on hospital adherence to 4 categories of quality and safety practices. The database represents 50% of consumers and hospital beds in the U.S. Process measures are harmonized with the Joint Commission, CMS, STS, VON, AHRQ and NQF-endorsed measures. Leapfrog also calculates resource efficiency (as severity-adjusted average length of stay, broken down by routine care days and specialty care days, and adjusted for short-term readmission rate to the same facility). Data Collection: Hospitals voluntarily report data and affirm accuracy. Leapfrog does not verify accuracy of information. Data Availability: Data is publicly available through http://www.leapfroggroup.org/ . Reporting Cycle: Annually	Computerized Physician Order Entry (CPOE)	Leapfrog/Medstat	✓						Pediatric, Adult, Geriatric	Preventive	
	ICU Staffing	Leapfrog/Medstat	✓						Pediatric, Adult, Geriatric	Preventive	
	High Risk Treatments:										
	CABG	Leapfrog/Medstat	✓						Adult, Geriatric		Heart Disease
	PCI (angioplasty)	Leapfrog/Medstat	✓						Adult, Geriatric		Heart Disease
	Abdominal Aortic Aneurysm repair	Leapfrog/Medstat	✓						Adult, Geriatric		
	Esophagectomy	Leapfrog/Medstat	✓						Adult, Geriatric		
	Pancreatectomy	Leapfrog/Medstat	✓						Adult, Geriatric		
	Bariatric Surgery	Leapfrog/Medstat	✓						Adult, Geriatric		
	Aortic Valve Replacement	Leapfrog/Medstat	✓						Adult, Geriatric		Heart Disease
	NICU	Leapfrog/Medstat	✓						Pediatric		
	Safe Practices Score	Leapfrog/Medstat	✓						Pediatric, Adult, Geriatric	Preventive	

Inventory of Hospital Quality Performance Measures

Measure Set/Developer	Title/Brief Description of Quality Measures	Organization(s) Managing Quality Performance Data for Hospitals	Measure Relevance to IOM 6 Domains of Quality Care						Life Cycle	Type of Care	Key Health Conditions Related to Measure <small>(as identified by OPA)</small>
	Individual and Composite Measures		Safety	Effectiveness	Patient Centeredness	Timeliness	Efficiency	Equity			Pediatric (<18), Adult (<65), Geriatric (65+)
Hospital Quality and Safety Survey/Leapfrog (Continued)	Adherence to Never Events Policies	Leapfrog/Medstat			✓				Pediatric, Adult, Geriatric	Preventive	
	Quality and Efficiency Metrics:										
	AMI	Leapfrog/Medstat		✓				✓	Adult, Geriatric	Acute	Heart Disease
	PCI	Leapfrog/Medstat		✓				✓	Adult, Geriatric	Acute	Heart Disease
	CABG	Leapfrog/Medstat		✓				✓	Adult, Geriatric	Acute	Heart Disease
	Pneumonia (CAP)	Leapfrog/Medstat		✓				✓	Adult, Geriatric	Acute	
	Deliveries/Newborn	Leapfrog/Medstat		✓				✓	Pediatric	Acute	
California Hospitals Assessment and Reporting Taskforce - (CHART) (2008 Measures) This is a collaboration between various health care stakeholders that established (in 2004) a California-wide hospital performance reporting system. CHART participants represent +75% of state average daily acute census. The 2008 Measures include 11 conditions. Data Collection: CHART uses measures from OSHPD, Joint Commission, Leapfrog, HCAPHS, CPQCC and Cal-NOC. CHART-specific measures are pulled directly from hospital records and charts. Measure set information available at http://chart.ucsf.edu/ . Data Availability: Results are publicly reported through http://www.calhospitalcompare.org/ , a website maintained by the California HealthCare Foundation.	(Joint Commission) Surgical Infection Prevention -SIP- Timing of antibiotic	CHART, UCSF, CHCF-CalHospitalCompare.org	✓	✓		✓			Adult	Acute	
	SIP-Antibiotic Selection	CHART, UCSF, CHCF-CalHospitalCompare.org	✓	✓					Adult	Acute	
	SIP-Duration of Prophylaxis	CHART, UCSF, CHCF-CalHospitalCompare.org	✓	✓		✓			Adult	Acute	
	SIP-Cardiac Surgery Pts w/ Controlled PostOp Glucose	CHART, UCSF, CHCF-CalHospitalCompare.org		✓					Adult	Acute	
	SIP-Surgery Pts w/Appropriate Hair Removal	CHART, UCSF, CHCF-CalHospitalCompare.org		✓					Adult	Acute	
	SIP-Colorectal Surgery Pts w/ Immediate PostOp Normothermia	CHART, UCSF, CHCF-CalHospitalCompare.org		✓		✓			Adult	Acute	
	SIP-Surgery Pts on Beta-Blockers who Received B-B During PeriOp Period.	CHART, UCSF, CHCF-CalHospitalCompare.org	✓	✓		✓			Adult	Acute	
	SIP-Surgery Pts with Recommended VT Prophylaxis Rx Who Received Appropriate VT Prophylaxis 24 Hours Prior to 24 Hours After Surgery	CHART, UCSF, CHCF-CalHospitalCompare.org	✓	✓		✓			Adult	Acute	
	(Joint Commission) Acute Myocardial Infarction -AMI- Aspirin at Arrival	CHART, UCSF, CHCF-CalHospitalCompare.org		✓		✓			Adult	Acute	Heart Disease

Inventory of Hospital Quality Performance Measures

Measure Set/Developer	Title/Brief Description of Quality Measures	Organization(s) Managing Quality Performance Data for Hospitals	Measure Relevance to IOM 6 Domains of Quality Care						Life Cycle	Type of Care	Key Health Conditions Related to Measure <small>(as identified by OPA)</small>
			Safety	Effectiveness	Patient Centeredness	Timeliness	Efficiency	Equity			
CHART (Continued) Reporting Cycle: The data are updated quarterly, however each measure may have a different reporting period (e.g. OSHPD 2004 CABG mortality data and Joint Commission 2007 data are reported on the same report. These are the most recent data available for the respective measures.)	AMI-Aspirin Rx at Discharge	CHART, UCSF, CHCF-CalHospitalCompare.org		✓					Adult	Preventive, Management	Heart Disease
	AMI-Beta-blocker at Arrival	CHART, UCSF, CHCF-CalHospitalCompare.org		✓		✓			Adult	Acute	Heart Disease
	AMI-Beta-blocker Rx at Discharge	CHART, UCSF, CHCF-CalHospitalCompare.org		✓					Adult	Preventive, Management	Heart Disease
	AMI-ACEI for LVSD	CHART, UCSF, CHCF-CalHospitalCompare.org		✓					Adult	Acute	Heart Disease
	AMI-PCI in 120 minutes for MI	CHART, UCSF, CHCF-CalHospitalCompare.org		✓		✓			Adult	Acute	Heart Disease
	AMI-Thrombolytic 30 minutes	CHART, UCSF, CHCF-CalHospitalCompare.org		✓		✓			Adult	Acute	Heart Disease
	AMI-Smoking Cessation Counseling	CHART, UCSF, CHCF-CalHospitalCompare.org		✓					Adult	Preventive	Heart Disease
	(OSHPD) AMI - AMI Mortality	CHART, UCSF, CHCF-CalHospitalCompare.org		✓					Adult		Heart Disease
	AMI-PCI Volume	CHART, UCSF, CHCF-CalHospitalCompare.org		✓					Adult	Acute	Heart Disease
	(Joint Commission) Heart Failure - HF- LV Functional Assessment.	CHART, UCSF, CHCF-CalHospitalCompare.org		✓					Adult	Acute	Heart Disease
	HF-Discharge Instructions	CHART, UCSF, CHCF-CalHospitalCompare.org		✓					Adult	Management	Heart Disease
	HF-Patient on ACE/ARB	CHART, UCSF, CHCF-CalHospitalCompare.org		✓					Adult	Acute	Heart Disease
	HF-Smoking Cessation Counseling	CHART, UCSF, CHCF-CalHospitalCompare.org		✓					Adult	Preventive	Heart Disease
	(Joint Commission) Pneumonia - Oxygenation Assessment. w/in 24 Hours	CHART, UCSF, CHCF-CalHospitalCompare.org		✓		✓			Adult	Acute	

Inventory of Hospital Quality Performance Measures

Measure Set/Developer	Title/Brief Description of Quality Measures	Organization(s) Managing Quality Performance Data for Hospitals	Measure Relevance to IOM 6 Domains of Quality Care						Life Cycle	Type of Care	Key Health Conditions Related to Measure <small>(as identified by OPA)</small>
			Safety	Effectiveness	Patient Centeredness	Timeliness	Efficiency	Equity			
CHART (Continued)	Pneumonia-Initial antibiotic	CHART, UCSF, CHCF-CalHospitalCompare.org		✓		✓			Adult	Acute	
	Pneumonia-Blood Culture before Antibiotic	CHART, UCSF, CHCF-CalHospitalCompare.org		✓		✓			Adult	Acute	
	Pneumonia-Influenza Vaccination	CHART, UCSF, CHCF-CalHospitalCompare.org		✓					Adult	Preventive	
	Pneumonia-Pneumonia Vaccination	CHART, UCSF, CHCF-CalHospitalCompare.org		✓					Adult	Preventive	
	Pneumonia-Antibiotic Timing	CHART, UCSF, CHCF-CalHospitalCompare.org		✓		✓			Adult	Acute	
	Pneumonia-Antibiotic Administered w/in 4 Hours	CHART, UCSF, CHCF-CalHospitalCompare.org		✓		✓			Adult	Acute	
	Pneumonia-Smoking Cessation Counseling	CHART, UCSF, CHCF-CalHospitalCompare.org		✓					Adult	Preventive	
	(OSHPD) Pneumonia - Pneumonia mortality	CHART, UCSF, CHCF-CalHospitalCompare.org		✓					Adult		
	(OSHPD) CABG - CABG with Internal Mammary Artery (IMA) use	CHART, UCSF, CHCF-CalHospitalCompare.org		✓		✓			Adult	Acute	Heart Disease
	CABG-CABG Mortality	CHART, UCSF, CHCF-CalHospitalCompare.org		✓					Adult		Heart Disease
	(OSHPD/CMQCC) Maternity Measures - VBAC rate	CHART, UCSF, CHCF-CalHospitalCompare.org		✓					Adult		Reproductive Health
	Maternity-Caesarian birth rates (low risk labor NSVT rates)	CHART, UCSF, CHCF-CalHospitalCompare.org		✓					Adult		Reproductive Health
	Maternity-3rd/4th degree laceration	CHART, UCSF, CHCF-CalHospitalCompare.org		✓					Adult	Acute	Reproductive Health
	Maternity-use of antenatal steroids for at-risk pregnancies	CHART, UCSF, CHCF-CalHospitalCompare.org		✓					Adult	Preventive, Acute, Management	Reproductive Health
	(CHART/AHRQ) Patient Experience H-CAHPS + 6 - In addition to the HCAHPS measures listed above as a separate measure set, CHART added 6 questions:	CHART, UCSF, CHCF-CalHospitalCompare.org				✓				Adult	

Inventory of Hospital Quality Performance Measures

Measure Set/Developer	Title/Brief Description of Quality Measures	Organization(s) Managing Quality Performance Data for Hospitals	Measure Relevance to IOM 6 Domains of Quality Care						Life Cycle	Type of Care	Key Health Conditions Related to Measure <small>(as identified by OPA)</small>
	Individual and Composite Measures		Safety	Effectiveness	Patient Centeredness	Timeliness	Efficiency	Equity	Pediatric (<18), Adult (<65) Geriatric (65+)	Preventive, Acute, Management	Asthma, Cancer, COPD, Diabetes, Heart Disease, Hypertension, Mental Health, Musculoskeletal, Reproductive Health
CHART (Continued)	1. How organized was the admission process	CHART, UCSF, CHCF-CalHospitalCompare.org			✓				Adult		
	2. Sometimes in the hospital, one doctor or nurse will say one thing and another will say something quite different. Did this happen to you	CHART, UCSF, CHCF-CalHospitalCompare.org			✓				Adult		
	3. Did someone on the hospital staff explain the purpose of the medicines you were to take at home in a way you could understand	CHART, UCSF, CHCF-CalHospitalCompare.org			✓				Adult		
	4. Did they tell you what danger signals about your illness or operation to watch for after you went home	CHART, UCSF, CHCF-CalHospitalCompare.org			✓				Adult		
	5/6. Did you need an interpreter (screener question-not quality measure?) When you needed an interpreter to help you speak with doctors or other health providers, how often did you get one	CHART, UCSF, CHCF-CalHospitalCompare.org			✓				Adult		
	(Leapfrog) Patient Safety Measures (4 quality and safety practices survey results via link to Leapfrog website)	CHART, UCSF, CHCF-CalHospitalCompare.org	✓	✓					Adult		
	(CHART) ICU Measures -DVT Prophylaxis	CHART, UCSF, CHCF-CalHospitalCompare.org		✓					Adult	Preventive	
	ICU-Stress Peptic Ulcer Prophylaxis	CHART, UCSF, CHCF-CalHospitalCompare.org		✓					Adult	Preventive	
	ICU-VAP Prophylaxis (HOB 30)	CHART, UCSF, CHCF-CalHospitalCompare.org		✓					Adult	Preventive	
	ICU-ICU Mortality	CHART, UCSF, CHCF-CalHospitalCompare.org		✓					Adult		
	ICU-Length of Stay	CHART, UCSF, CHCF-CalHospitalCompare.org		✓					Adult		

Inventory of Hospital Quality Performance Measures											
Measure Set/Developer	Title/Brief Description of Quality Measures	Organization(s) Managing Quality Performance Data for Hospitals	Measure Relevance to IOM 6 Domains of Quality Care						Life Cycle	Type of Care	Key Health Conditions Related to Measure <small>(as identified by OPA)</small>
	Individual and Composite Measures		Safety	Effectiveness	Patient Centeredness	Timeliness	Efficiency	Equity	Pediatric (<18), Adult (<65) Geriatric (65+)	Preventive, Acute, Management	Asthma, Cancer, COPD, Diabetes, Heart Disease, Hypertension, Mental Health, Musculoskeletal, Reproductive Health
CHART (Continued)	(OSHPD, Vital Records, CMQCC/CPQCC) Pediatric Measures (Newborn): Rate of Exclusive Breastfeeding at Discharge	CHART, UCSF, CHCF-CalHospitalCompare.org		✓					Pediatric		
	Pediatric Measures (Newborn): Rate of VLBW <1500 grams @hospitals w/out Level III or CCS-designated NICU)	CHART, UCSF, CHCF-CalHospitalCompare.org		✓					Pediatric		
	NICU: Rate of Late Sepsis or Meningitis for Preemies	CHART, UCSF, CHCF-CalHospitalCompare.org		✓					Pediatric	Acute	
	NICU: Breast milk at Discharge for VLBW Babies	CHART, UCSF, CHCF-CalHospitalCompare.org		✓					Pediatric		
	NICU: Retinopathy of prematurity	CHART, UCSF, CHCF-CalHospitalCompare.org		✓					Pediatric		
	PICU: Central Line Associated Blood Stream Infections	CHART, UCSF, CHCF-CalHospitalCompare.org		✓					Pediatric	Acute	
	(CalNOC/CHART) Hospital Acquired Pressure Ulcers (HAPU)	CHART, UCSF, CHCF-CalHospitalCompare.org	✓	✓					Adult	Acute	
	(CHART) Respirator Complication Prevention (Composite: Pt. head elevated; peptic ulcer medication given, blood clot prevention performed)	CHART, UCSF, CHCF-CalHospitalCompare.org	✓	✓					Adult	Preventive	

Inventory of Hospital Quality Performance Measures

Measure Set/Developer	Title/Brief Description of Quality Measures	Organization(s) Managing Quality Performance Data for Hospitals	Measure Relevance to IOM 6 Domains of Quality Care						Life Cycle	Type of Care	Key Health Conditions Related to Measure <small>(as identified by OPA)</small>
	Individual and Composite Measures		Safety	Effectiveness	Patient Centeredness	Timeliness	Efficiency	Equity	Pediatric (<18), Adult (<65) Geriatric (65+)	Preventive, Acute, Management	Asthma, Cancer, COPD, Diabetes, Heart Disease, Hypertension, Mental Health, Musculoskeletal, Reproductive Health
<p>California Office of Statewide Health Planning and Development (OSHPD) -</p> <p>Data Collection: This state office is charged with analyzing California's health care infrastructure, collecting quality data, and communicating health care information. The office provides an interactive Internet data collection system for hospital inpatient discharges, emergency department and ambulatory surgery encounters.</p> <p>Data Availability: Publicly reported data varies by year and by topic or condition. Some reports permit hospital-to-hospital comparisons. Data and reports are publicly available through http://oshpd.ca.gov/HID/DataFlow/HospQuality.html</p> <p>Reporting Cycle: Hospitals are mandated to submit specific data to OSHPD quarterly or annually.</p>	<p>Preventable Hospitalizations: 1997-2003. This report includes the following conditions:</p>										
	Diabetes Short-Term Complications/Uncontrolled	OSHPD		✓					Pediatric, Adult, Geriatric	Acute	Diabetes
	Diabetes Long-Term Complications	OSHPD		✓					Pediatric, Adult, Geriatric	Acute	Diabetes
	Lower Extremity Amputation among Diabetes Patients	OSHPD		✓					Pediatric, Adult, Geriatric	Acute	Diabetes
	Pediatric Asthma	OSHPD		✓					Pediatric	Acute	Asthma
	Pediatric Gastroenteritis	OSHPD		✓					Pediatric	Acute	
	Low Birth Weight	OSHPD							Pediatric	Acute	
	Adult Asthma	OSHPD		✓					Adult, Geriatric	Acute	Asthma
	Chronic Obstructive Pulmonary Disease	OSHPD		✓					Adult, Geriatric	Acute	COPD
	Bacterial Pneumonia	OSHPD		✓					Adult, Geriatric	Acute	
	Hypertension	OSHPD		✓					Adult, Geriatric	Acute	Hypertension
	Congestive Heart Failure	OSHPD		✓					Adult, Geriatric	Acute	Heart Disease
	Angina without Procedure	OSHPD		✓					Adult, Geriatric	Acute	Heart Disease
	Dehydration	OSHPD		✓					Pediatric, Adult, Geriatric	Acute	
	Perforated Appendix	OSHPD		✓					Pediatric, Adult, Geriatric	Acute	
Urinary Tract Infection	OSHPD		✓					Pediatric, Adult, Geriatric	Acute		

Inventory of Hospital Quality Performance Measures											
Measure Set/Developer	Title/Brief Description of Quality Measures	Organization(s) Managing Quality Performance Data for Hospitals	Measure Relevance to IOM 6 Domains of Quality Care						Life Cycle	Type of Care	Key Health Conditions Related to Measure <small>(as identified by OPA)</small>
			Safety	Effectiveness	Patient Centeredness	Timeliness	Efficiency	Equity			
OSHPD (Continued)	Racial and Ethnic Disparities in Healthcare (inpatient analysis)	OSHPD		✓				✓	Adult		
	AMI (Heart Attack) Outcomes 1993-1998	OSHPD		✓				✓	Adult		Heart Disease
	Community-Acquired Pneumonia Outcomes 1999-2005	OSHPD		✓				✓	Adult		
	California Intensive Care Outcomes Project (CALICO) 2007	OSHPD		✓					Adult		
	CABG Mortality Outcomes (CCORP) 1997-2005	OSHPD		✓				✓	Adult		Heart Disease
California Perinatal Quality Care Collaborative ² (CPQCC) - There are 60 hospitals collaborating with health care stakeholders on developing perinatal and neonatal outcomes and information. The data system will identify perinatal improvement targets and monitor public health effects of planned interventions such as system changes, medical treatments, or care behavior modification. Data Collection: Members are required to submit quarterly updates. Existing state databases, such as birth and death files, maternal/newborn discharges, re-hospitalization and cost of care information and hospital chart information, were integrated into the CPQCC database. Data Availability: Data are available to members only through http://cpqcc.org/ . Reporting Cycle: Annually	Antenatal Steroid use all inborn babies, 401 to 1,500 grams, and 24 weeks to 33 weeks of gestation. No risk-adjustment is used to calculate expected events.	CPQCC		✓					Pediatric	Acute	
	Postnatal Steroid use for all babies 401 to 1,500 grams. Expected events are risk-adjusted.	CPQCC		✓					Pediatric	Acute	
	Nosocomial Infection incidence of babies 401 to 1,500 grams who were in the center on or after Day 3 of life. Expected events are risk-adjusted.	CPQCC		✓					Pediatric	Acute	
	Human Milk Nutrition for all babies 401 to 1,500 grams who were discharged home after their initial hospital stay. Infants who were fed with human milk only or human milk fortified by formula are contrasted to infants who were fed with formula only. No risk adjustment.	CPQCC		✓						Pediatric	

Inventory of Hospital Quality Performance Measures

Measure Set/Developer	Title/Brief Description of Quality Measures	Organization(s) Managing Quality Performance Data for Hospitals	Measure Relevance to IOM 6 Domains of Quality Care						Life Cycle	Type of Care	Key Health Conditions Related to Measure <small>(as identified by OPA)</small>
	Individual and Composite Measures		Safety	Effectiveness	Patient Centeredness	Timeliness	Efficiency	Equity	Pediatric (<18), Adult (<65), Geriatric (65+)	Preventive, Acute, Management	Asthma, Cancer, COPD, Diabetes, Heart Disease, Hypertension, Mental Health, Musculoskeletal, Reproductive Health
<p>California Nursing Outcomes Coalition (CalNOC) as part of the National Database of Nursing Quality Indicators (NDNQI) - California's CalNOC collaborates with the American Nurses Association on the NDNQI. The database captures structure, process and outcome indicators to evaluate nursing quality at the unit level. *Eight of the indicators are NQF approved.</p> <p>Data Collection: Hospital nursing units submit data to University of Kansas Medical Center School of Nursing where the database is warehoused. http://www.nursingquality.org/FAQPage.aspx#3</p> <p>Data Availability: Data are limited to participating hospitals and are not publicly reported. https://www.calnoc.org/globalPages/mainpage.aspx</p> <p>Reporting Cycle: Quarterly, except for annual RN Survey. Quarterly reports using eight consecutive quarters, with a rolling average of those 8 quarters, and national comparisons at the unit level are available in</p>	Nursing Hours per Patient Day*	ANA/University of Kansas School of Nursing							Pediatric, Adult, Geriatric		
	Patient Falls*	ANA/University of Kansas School of Nursing	✓						Pediatric, Adult, Geriatric	Preventive	
	Patient Falls with Injury (with injury level)*	ANA/University of Kansas School of Nursing	✓						Pediatric, Adult, Geriatric	Preventive	
	Pediatric Pain Assessment, Intervention, Reassessment (AIR) Cycle	ANA/University of Kansas School of Nursing		✓					Pediatric	Acute	
	Pediatric Peripheral Intravenous Infiltration Rate	ANA/University of Kansas School of Nursing		✓					Pediatric	Acute	
	Pressure Ulcer Prevalence*:										
	Community Acquired	ANA/University of Kansas School of Nursing	✓						Pediatric, Adult, Geriatric	Preventive	
	Hospital Acquired	ANA/University of Kansas School of Nursing	✓						Pediatric, Adult, Geriatric	Preventive	
	Unit Acquired	ANA/University of Kansas School of Nursing	✓						Pediatric, Adult, Geriatric	Preventive	
	Nurse Turnover Rate	ANA/University of Kansas School of Nursing									
	Restraint Prevalence*	ANA/University of Kansas School of Nursing	✓		✓				Pediatric, Adult, Geriatric		
	RN Education/Certification	ANA/University of Kansas School of Nursing									

Inventory of Hospital Quality Performance Measures											
Measure Set/Developer	Title/Brief Description of Quality Measures	Organization(s) Managing Quality Performance Data for Hospitals	Measure Relevance to IOM 6 Domains of Quality Care						Life Cycle	Type of Care	Key Health Conditions Related to Measure <small>(as identified by OPA)</small>
	Individual and Composite Measures		Safety	Effectiveness	Patient Centeredness	Timeliness	Efficiency	Equity	Pediatric (<18), Adult (<65) Geriatric (65+)	Preventive, Acute, Management	Asthma, Cancer, COPD, Diabetes, Heart Disease, Hypertension, Mental Health, Musculoskeletal, Reproductive Health
CaINOC/NDNQI (Continued)	RN Satisfaction Survey Options	ANA/University of Kansas School of Nursing									
	Skill Mix-(percent of total nursing hours supplied by RNs, LPN/LVNs, UAP, total hours by Agency Staff)*	ANA/University of Kansas School of Nursing									
	Nosocomial Infections:										
	Urinary catheter-associated urinary tract infection*	ANA/University of Kansas School of Nursing	✓						Pediatric, Adult, Geriatric	Preventive	
	Central line catheter associated blood stream infection*	ANA/University of Kansas School of Nursing	✓						Pediatric, Adult, Geriatric	Preventive	
	Ventilator-associated pneumonia*	ANA/University of Kansas School of Nursing	✓						Pediatric, Adult, Geriatric	Preventive	

¹ **HospitalCompare** and **Quality Check** report many of the same measures, however hospitals are not required to report all measures to either institution. There may be different measures reported for the same hospital on each website. CMS proposed regulations for 2009 increase reporting demands on hospitals and administer financial penalties for poor care. If adopted, this essentially would change the voluntary data submission status of CMS HospitalCompare.

² **CMQCC (California Maternal Quality Care Collaborative)** - The maternal quality care collaborative counterpart to CPQCC. Reports measures from OSHPD and CDPH. No hospital-specific data is publicly available.

Inventory of Nursing Home Quality Performance Measures

Measure Set/Developer	Title/Brief Description of Quality Measures	Organization(s) Managing Quality Performance Data for Nursing Homes	Measure Relevance to IOM 6 Domains of Quality Care						Life Cycle	Type of Care
			Safety	Effectiveness	Patient Centeredness	Timeliness	Efficiency	Equity		
Nursing Home Compare/Centers for Medicare & Medicaid Services (CMS) Data Collection: The data for the quality measures come from the Minimum Data Set (MDS) Repository. The data are collected in regular intervals for every resident in a Medicare or Medicaid certified nursing home. The Online Survey, Certification, and Reporting (OSCAR) database includes the nursing home characteristics and health deficiencies issued during the three most recent state inspections and recent complaint investigations. Information is collected on the resident's health, physical functioning, mental status, and general well-being. Nursing homes submit to CMS/MDS after review by State Survey Agency Nursing Home Inspectors. Nursing staff information is also collected. Data Availability: Data publicly reported through http://www.medicare.gov/NHCompare/	Percent of Long-Stay Residents Given Influenza Vaccination During the Flu Season	CMS-MDS		✓					Adult, Geriatric	Preventive
	Percent of Long-Stay Residents Who Were Assessed and Given Pneumococcal Vaccination	CMS-MDS		✓					Adult, Geriatric	Preventive
	Percent of Long-Stay Residents Whose Need for Help With Daily Activities Has Increased	CMS-MDS			✓				Adult, Geriatric	Acute, Management
	Percent of Long-Stay Residents Who Have Moderate to Severe Pain	CMS-MDS		✓	✓				Adult, Geriatric	Acute, Management
	Percent of High-Risk Long-Stay Residents Who Have Pressure Sores	CMS-MDS	✓	✓					Adult, Geriatric	Preventive, Acute
	Percent of Low-Risk Long-Stay Residents Who Have Pressure Sores	CMS-MDS	✓	✓					Adult, Geriatric	Preventive, Acute
	Percent of Long-Stay Residents Who Were Physically Restrained	CMS-MDS	✓	✓	✓				Adult, Geriatric	Acute
	Percent of Long-Stay Residents Who are More Depressed or Anxious	CMS-MDS		✓					Adult, Geriatric	Acute

Inventory of Nursing Home Quality Performance Measures

Measure Set/Developer	Title/Brief Description of Quality Measures	Organization(s) Managing Quality Performance Data for Nursing Homes	Measure Relevance to IOM 6 Domains of Quality Care						Life Cycle	Type of Care
			Safety	Effectiveness	Patient Centeredness	Timeliness	Efficiency	Equity		
<p>Reporting Cycle: OSCAR inspections occur at least once during a 15-month period, or any time in between as a result of a complaint received by the state. The MDS assessments are performed on the 5th, 14th, 30th and 90th day of resident admission. Public reports on quality of care are updated quarterly.</p>	Percent of Low-Risk Long-Stay Residents Who Lose Control of Their Bowels or Bladder	CMS-MDS	✓	✓					Adult, Geriatric	Acute
	Percent of Long-Stay Residents Who Have/Had a Catheter Inserted and Left in Their Bladder	CMS-MDS	✓	✓					Adult, Geriatric	Acute, Management
	Percent of Long-Stay Residents Who Spent Most of Their Time in Bed or in a Chair	CMS-MDS	✓	✓	✓				Adult, Geriatric	Acute, Management
	Percent of Long-Stay Residents Whose Ability to Move About in and Around Their Room Got Worse	CMS-MDS		✓	✓				Adult, Geriatric	Acute
	Percent of Long-Stay Residents with a Urinary Tract Infection	CMS-MDS	✓	✓					Adult, Geriatric	Acute
	Percent of Long-Stay Residents Who Lose Too Much Weight	CMS-MDS	✓	✓					Adult, Geriatric	Acute
	Percent of Short-Stay Residents Given Influenza Vaccination During the Flu Season	CMS-MDS		✓					Adult, Geriatric	Preventive
	Percent of Short-Stay Residents Who Were Assessed and Given Pneumococcal Vaccination	CMS-MDS		✓					Adult, Geriatric	Preventive
	Percent of Short-Stay Residents With Delirium	CMS-MDS							Adult, Geriatric	Acute

Inventory of Nursing Home Quality Performance Measures										
Measure Set/Developer	Title/Brief Description of Quality Measures	Organization(s) Managing Quality Performance Data for Nursing Homes	Measure Relevance to IOM 6 Domains of Quality Care						Life Cycle	Type of Care
			Safety	Effectiveness	Patient Centeredness	Timeliness	Efficiency	Equity		
NursingHome Compare/CMS (Continued)	Percent of Short-Stay Residents Who Had Moderate to Severe Pain	CMS-MDS		✓	✓				Adult, Geriatric	Acute, Management
	Percent of Short-Stay Residents With Pressure Sores	CMS-MDS	✓	✓					Adult, Geriatric	Preventive, Acute
California Nursing Home Search (CalNHS)/California HealthCare Foundation (CHCF) (2008) Data collection: CHCF compiles data from the Centers for Medicare and Medicaid Services (CMS) and the California Department of Public Health's Licensing and Certification Division. Data availability: Data publicly reported through http://www.calnhs.org/nursinghomes/index.cfm?itemID=107169 Reporting Cycle: The California Nursing Home Search website is updated quarterly.	Activities of Daily Living Worsened - Activities of daily living (ADLs) include eating, using the toilet, and moving about from one place to another. (Quality of Life)	CHCF		✓	✓				Adult, Geriatric	Acute, Management
	Spend Most of Time in Bed - Percentage of residents who were in bed or in a chair all or most of the time—22 hours or more per day. (Quality of Life)	CHCF		✓	✓				Adult, Geriatric	Acute, Management
	Ability to Move Around Worsened - Percentage of residents whose ability to move about, either by walking or using a wheelchair in their rooms and the hallways near their room, was worse in the seven days before the current assessment than their last assessment. (Quality of Life)	CHCF	✓	✓	✓				Adult, Geriatric	Acute
	Restraints - Percentage of residents who are prevented or restricted from moving by restraints. (Quality of Life)	CHCF	✓	✓	✓				Adult, Geriatric	Acute

Inventory of Nursing Home Quality Performance Measures										
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			Safety	Effectiveness	Patient Centeredness	Timeliness	Efficiency	Equity		
CalNHS/CHCF (Continued)	Low-risk Incontinence - Percentage of residents who had problems controlling their bowels or bladders yet did not have severe dementia or a limited ability to move on their own. (Clinical Care)	CHCF	✓	✓					Adult, Geriatric	Acute
	High-risk Pressure Sores - Percentage of residents who have one or more pressure ulcers or sores but are not short-stay residents. (Clinical Care)	CHCF	✓	✓					Adult, Geriatric	Acute
	Urinary Tract Infection - Percentage of residents who had infections in their urinary tracts during the 30 days before the most recent assessment. (Clinical Care)	CHCF	✓	✓					Adult, Geriatric	Acute
	Weight Loss - Percentage of residents who had unplanned weight loss of 5 percent or more in 30 days or 10 percent or more in six months. (Clinical Care)	CHCF	✓	✓					Adult, Geriatric	Acute

Inventory of Nursing Home Quality Performance Measures

Measure Set/Developer	Title/Brief Description of Quality Measures	Organization(s) Managing Quality Performance Data for Nursing Homes	Measure Relevance to IOM 6 Domains of Quality Care						Life Cycle	Type of Care
			Safety	Effectiveness	Patient Centeredness	Timeliness	Efficiency	Equity		
CalNHS/CHCF (Continued)	Short-Stay Pressure Sores - Percentage of short-stay residents—those staying 30 or fewer days—recently admitted to the nursing home following a hospital stay who have developed pressure sores, or who had pressure sores that did not get better between their 5-day and 14-day assessments in the nursing home. (Clinical Care)	CHCF	✓	✓					Adult, Geriatric	Acute
	Total Number of Nursing Staff	CHCF							Adult, Geriatric	
	Nursing Staff Turnover	CHCF							Adult, Geriatric	
	Nursing Staff Wages	CHCF							Adult, Geriatric	
	Number of Federal Deficiencies	CHCF							Adult, Geriatric	
	Number of State Deficiencies and Citations	CHCF							Adult, Geriatric	
	Number of Complaints	CHCF							Adult, Geriatric	

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			Safety	Effectiveness	Patient Centeredness	Timeliness	Efficiency	Equity		
QualityCheck/ The Joint Commission 2007-2008 Patient Safety Goals: Long-term care facilities can apply for accreditation from the Joint Commission based on adherence to patient safety standards issued by Joint Commission. Data Collection: Data submitted by nursing homes quarterly. Data Availability: Data publicly available through the Commission's website http://www.qualitycheck.org/consumer/searchQCR.aspx Reporting Cycle: Accreditation is good for three years with periodic reviews occurring within that time frame.	Improve the Accuracy of Resident Identification		✓	✓					Adult, Geriatric	Preventive
	Improve the Effectiveness of Communication Among Caregivers		✓						Adult, Geriatric	Preventive
	Improve the Safety of Using Medications		✓	✓					Adult, Geriatric	Preventive
	Reduce the Risk of Health Care-Associated Infections		✓	✓					Adult, Geriatric	Preventive
	Accurately and Completely Reconcile Medications Across the Continuum of Care		✓	✓					Adult, Geriatric	Preventive
	Reduce the Risk of Resident Harm Resulting From Falls		✓						Adult, Geriatric	Preventive
	Reduce the Risk of Influenza and Pneumococcal Disease in Institutionalized Older Adults		✓	✓					Adult, Geriatric	Preventive
	Encourage Residents' Active Involvement in Their Own Care as a Resident Safety Strategy		✓		✓				Adult, Geriatric	Preventive
	Preventive Health Care Associated Pressure Ulcers (Decubitus Ulcers)		✓						Adult, Geriatric	Preventive

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			Safety	Effectiveness	Patient Centeredness	Timeliness	Efficiency	Equity		
Consumer Assessment of Healthcare Providers and Systems (CAHPS)-Nursing Home Survey/Agency for Healthcare Research and Quality (AHRQ): Three surveys are under development for nursing homes: two resident surveys (long term and short stay [>30 days]) and one family member survey. See website for tool development information: http://www.cahps.ahrq.gov/content/products/NH/PROD_NH_Intro.asp Data collection: TBD Data availability: Currently unavailable as instruments are under development. Reporting Cycle: TBD	Residents' Survey Topics									
	Environment			✓				Adult Geriatric		
	Care			✓				Adult Geriatric		
	Communication and Respect			✓				Adult Geriatric		
	Autonomy			✓				Adult Geriatric		
	Activities			✓				Adult Geriatric		
	Family Member Survey Topics									
	Getting Care Quickly (Availability of Staff)			✓				Adult Geriatric		
	Quality of Care: Nurses and Aides			✓				Adult Geriatric		
	Communication: Nurses and Aides			✓				Adult Geriatric		
	Communication: Other Staff and Administrators			✓				Adult Geriatric		
	Nursing Home Environment			✓				Adult Geriatric		
	Global Ratings			✓				Adult Geriatric		

Inventory of Nursing Home Quality Performance Measures

Measure Set/Developer	Title/Brief Description of Quality Measures	Organization(s) Managing Quality Performance Data for Nursing Homes	Measure Relevance to IOM 6 Domains of Quality Care						Life Cycle	Type of Care	
			Safety	Effectiveness	Patient Centeredness	Timeliness	Efficiency	Equity			Pediatric (<18), Adult (<65) Geriatric (65+)
<p>Advancing Excellence in America's Nursing Homes: A two year, coalition-based campaign (of long-term care providers, health care practitioners, caregivers, medical and quality improvement experts, government agencies and consumers) established eight measurable quality goals using 4 clinical metrics from CMS Nursing Home Compare and 4 process measures. Nursing homes receive facility reports comparing their facility to state and national benchmarks and compare their facility campaign objectives to national campaign objectives.</p> <p>Data Collection: 6,100 nursing homes (43% nursing homes registered nationwide and 25% of California nursing homes registered) voluntarily submit data on 3 or more goals on a quarterly (Goals 1-5) and annual basis (Goals 6-8). Data are submitted voluntarily.</p> <p>Data Availability: No public reporting is available, but nursing homes may review their status at any time. Nursing homes have the choice to publicly report Goal 5 via the STAR program (see next entry). Website: http://www.nhqualitycampaign.org/star_index.aspx?controls=about</p> <p>Reporting Cycle: TBD</p>	Appropriate care to prevent and minimize pressure sores	AEANH	✓	✓					Adult Geriatric	Preventive	
	Residents are independent to the best of their ability and rarely experience daily physical restraints	AEANH	✓		✓					Adult Geriatric	Preventive
	Residents living in a nursing home +90 days infrequently experience moderate or severe pain (chronic pain care)	AEANH		✓	✓					Adult Geriatric	Acute, Management
	People who come to nursing homes after staying in the hospital only sometimes experience moderate to severe pain (post-acute pain care)	AEANH		✓	✓					Adult Geriatric	Acute, Management
	Set individualized targets for clinical quality improvement	AEANH	✓	✓						Adult Geriatric	

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			Safety	Effectiveness	Patient Centeredness	Timeliness	Efficiency	Equity		
Advancing Excellence in America's Nursing Homes (AEANH) (Continued)	Assess resident and family experience of care and incorporate this information into quality improvement activities (Resident/Family Member Satisfaction)	AEANH			✓				Adult Geriatric	Preventive, Acute, Management
	Measure staff turnover and develop action plans as appropriate to improve staff retention	AEANH						Adult Geriatric		
	"Consistent Assignment": Being regularly cared for by the same caregiver is critical to quality of care and quality of life	AEANH	✓	✓	✓			Adult, Geriatric		
Nursing Home Quality Initiative - Nursing Home STAR Program/NHQI Developed by quality improvement organizations under contract to the Centers for Medicare and Medicaid Services (CMS). 9,600 Nursing Homes voluntarily use STAR (Setting Targets - Achieving Results) software tool to set improvement targets,	Physical restraints	NHQI	✓	✓	✓			Adult, Geriatric	Acute	
	High-risk pressure ulcers	NHQI	✓	✓				Adult, Geriatric	Acute	
	Depression	NHQI		✓				Adult, Geriatric	Acute	
	Chronic care pain	NHQI		✓	✓			Adult, Geriatric	Acute, Management	
	Post-acute care pain	NHQI		✓	✓			Adult, Geriatric	Acute, Management	

Inventory of Nursing Home Quality Performance Measures

Measure Set/Developer	Title/Brief Description of Quality Measures	Organization(s) Managing Quality Performance Data for Nursing Homes	Measure Relevance to IOM 6 Domains of Quality Care						Life Cycle	Type of Care
			Safety	Effectiveness	Patient Centeredness	Timeliness	Efficiency	Equity	Pediatric (<18), Adult (<65) Geriatric (65+)	Preventive, Acute, Management
<p>Nursing Home Quality Initiative - Nursing Home STAR Program (Continued) track performance goals for 6 quality measures and compare to national benchmarks. The 6 clinical measures are developed and maintained by CMS and also are reported on NH Compare. (Setting STAR targets fulfills one of the 8 AEANH goals.) Data Collected: Uses NH Compare data and updates data quarterly. Compare individual facility to state and national average trended over a 4 year period. Website: http://www.nhqj-star.org/ Data Availability: Data are publicly reported. Reporting Cycle: Quarterly updates</p>	Post-acute care pressure ulcers	NHQI		✓					Adult, Geriatric	Acute

Inventory of Other Sources of Data Related to Quality Performance Measurement

Measure Set/Developer	Title/Brief Description of Quality Measures	Measure Relevance to IOM 6 Domains of Quality Care						Life Cycle	Key Health Conditions Related to Measure (as identified by OPA)
	Survey Sections	Safety	Effectiveness	Patient Centeredness	Timeliness	Efficiency	Equity	Pediatric (<18), Adult (<65) Geriatric (+65)	Asthma, Cancer, COPD, Diabetes, Heart Disease, Hypertension, Mental Health, Musculoskeletal, Reproductive Health
Behavioral Risk Factor Survey (BRFS) (California) 2007 - Centers for Disease Control and Prevention (CDC)/California Health and Human Services/Survey Research Group - Sample size: Approximately 5,000 Californians. CDC-sponsored national telephone survey that tracks health conditions and behavioral risk factors of children and adults. The survey is composed of CDC core questions, CDC optional modules, and state-added questions. Data collected annually, but embargoed for one year after the collection year for sponsor-only use (released in April of following year). Data can be analyzed at national, state, and Metropolitan Statistical Areas (MSA) levels. Demographic data collected. Data comparable by product line (Medicare, Medicaid, commercial managed care, other government plans). California-specific data and survey tools can be found at http://www.surveymethods.com/ . More information at the national level can be found at http://www.cdc.gov/brfss/ .	Health Status							Adult Geriatric	
	Healthy Days							Adult Geriatric	
	Health Care Access				✓		✓	Adult Geriatric	
	Exercise							Adult Geriatric	
	Diabetes (Core and Optional Module)		✓		✓			Adult Geriatric	Diabetes
	Hypertension Awareness		✓					Adult Geriatric	Hypertension
	Cholesterol Awareness		✓					Adult Geriatric	
	Cardiovascular Disease Prevalence							Adult Geriatric	Heart Disease
	Asthma							Adult Geriatric	Asthma
	Immunization				✓			Adult Geriatric	
	Tobacco Use							Adult Geriatric	
	Alcohol Consumption							Adult Geriatric	
	Disability							Adult Geriatric	
	Arthritis Burden				✓			Adult Geriatric	Musculoskeletal
Arthritis Management (Module 13)		✓		✓			Adult Geriatric	Musculoskeletal	

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Measure Set/Developer	Title/Brief Description of Quality Measures	Measure Relevance to IOM 6 Domains of Quality Care						Life Cycle	Key Health Conditions Related to Measure (as identified by OPA)
	Survey Sections	Safety	Effectiveness	Patient Centeredness	Timeliness	Efficiency	Equity	Pediatric (<18), Adult (<65) Geriatric (+65)	Asthma, Cancer, COPD, Diabetes, Heart Disease, Hypertension, Mental Health, Musculoskeletal, Reproductive Health
BRFS 2007/Survey Research Group (Continued)	Treatment for Chronic Conditions (state-added module)				✓		✓	Adult Geriatric	
	Fruit/Vegetable Consumption							Adult Geriatric	
	Physical Activity							Adult Geriatric	
	HIV/AIDS							Adult Geriatric	
	Emotional Support and Life Satisfaction							Adult Geriatric	Mental Health
	Gastrointestinal Disease							Adult Geriatric	
	Disability Impact							Adult Geriatric	
	Mental Illness and Stigma (Module 16)							Adult Geriatric	Mental Health
	Mental Health							Adult Geriatric	Mental Health
	Child Influenza Vaccine Supplement							Pediatric	
	Childhood Asthma Prevalence (Module 2)							Pediatric	Asthma
	Child Sunburn							Pediatric	
	Child Lead Poisoning		✓					Pediatric	

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Measure Set/Developer	Title/Brief Description of Quality Measures	Measure Relevance to IOM 6 Domains of Quality Care						Life Cycle	Key Health Conditions Related to Measure (as identified by OPA)
		Safety	Effectiveness	Patient Centeredness	Timeliness	Efficiency	Equity		
California Health Information Survey (CHIS) 2005 - UCLA Center for Health Policy Research/ California Departments of Health Care Services and Public Health - Sample size: Approximately 42,000 Californians. Statewide telephone survey administered to children, adolescents, and adults regarding health behaviors and health status. Consists of core measures and new questions rotated in to address emerging health issues. Data collected biannually and released during the subsequent data collection two years later (e.g. 2005 data publicly available in 2007). Data reported at state and state's regional and county levels. Demographic information collected. Data comparable by product line. The 2007 survey looks at different health conditions. California administers this survey in addition to participating in the CDC's National Health Interview Survey (NHIS), however CHIS is more comprehensive and uses a larger sample size. Survey tool and data available at http://www.chis.ucla.edu/ .	Health Conditions: Asthma, Diabetes, High Blood Pressure, High Cholesterol, Heart Disease, Stroke, Physical Disability, Arthritis, Epilepsy, COPD, Child Development/ADD		✓		✓			Pediatric, Adult, Geriatric	Asthma, Diabetes, Hypertension, Musculoskeletal, Heart Disease, COPD, Mental Health
	Health Behaviors: Walking, Tobacco Use, Alcohol Use, Dietary Intake, Physical Activity and Exercise, Sedentary Time, Flu Shot, Drug Use, Sexual Behavior, HIV/STD Testing, Birth Control Practices							Pediatric, Adult, Geriatric	
	Health Status							Pediatric, Adult, Geriatric	
	Women's Health: Pap and Mammography Tests, Hormone Replacement Therapy, Emergency Contraception		✓		✓			Pediatric, Adult, Geriatric	Reproductive Health
	Cancer History/Prevention: History, Colon Cancer and Prostate Cancer Screening		✓		✓			Pediatric, Adult, Geriatric	Cancer

Inventory of Other Sources of Data Related to Quality Performance Measurement									
Measure Set/Developer	Title/Brief Description of Quality Measures	Measure Relevance to IOM 6 Domains of Quality Care						Life Cycle	Key Health Conditions Related to Measure (as identified by OPA)
	Survey Sections	Safety	Effectiveness	Patient Centeredness	Timeliness	Efficiency	Equity	Pediatric (<18), Adult (<65), Geriatric (+65)	Asthma, Cancer, COPD, Diabetes, Heart Disease, Hypertension, Mental Health, Musculoskeletal, Reproductive Health
CHIS 2005/UCLA (Continued)	Health Insurance: Current Insurance Coverage, Spousal Coverage, Who Pays for Coverage, Health Plan Enrollment, Plan Characteristics, Whether Employer Offers Coverage, Respondent/Spouse Eligibility, Coverage Over Past 12 Months, Reasons for Lack of Insurance							Pediatric, Adult, Geriatric	
	Mental Health: Mental Health Status, Perceived Need/use of Mental Health Services							Pediatric, Adult, Geriatric	Mental Health
	Health Care Utilization and Access: Usual Source of Care, Delays in Getting Care (rx, tests, treatment), Communication with Doctor, ER Visits, Racial/Ethnic Discrimination in Health Care, Dr. Discussed Diet and Exercise		✓	✓	✓			✓	Pediatric, Adult, Geriatric

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	Survey Sections	Safety	Effectiveness	Patient Centeredness	Timeliness	Efficiency	Equity	Pediatric (<18), Adult (<65) Geriatric (+65)	Asthma, Cancer, COPD, Diabetes, Heart Disease, Hypertension, Mental Health, Musculoskeletal, Reproductive Health	
<p>Medical Expenditure Panel Survey (MEPS) - Agency for Healthcare Research and Quality (AHRQ) Sample Size: Approximately 32,000. The MEPS is a set of large-scale surveys of families and individuals, their medical providers, and employers across the United States. The Household Component (HC) collects data from a subsample of households that participated in the prior year's National Health Interview Survey. (Respondents provide written authorization for MEPS to collect additional information from the medical providers, insurance providers, and employers identified.) Data collected through rounds of interviewing over a two-year period to determine how changes in respondents' health status, income, employment, eligibility for insurance coverage, use of services, etc. are related. Data available at national and census-region level. No state level data available because sample size per state is generally too small and non-representative of state's population. Data comparable by product line. The Insurance Component (IC) survey collects employer-based insurance information. Survey tool and data available at http://www.meps.ahrq.gov/mepsweb/.</p>	Access to Care (CAHPS-like questions such as usual source of care, satisfaction w/ care, possible language barriers to care)		✓	✓	✓		✓	Pediatric, Adult, Geriatric		
	Preventive Care (frequency of preventive exams)		✓						Pediatric, Adult, Geriatric	
	Condition Enumeration (Identifies specific physical and mental health conditions affecting each household person and links it to health care utilization)		✓						Pediatric, Adult, Geriatric	
	Conditions (Collects more specific condition data and links it to a priority list of conditions)								Pediatric, Adult, Geriatric	
	Child Preventive Health		✓						Pediatric	
	Emergency Room (Collects information on conditions requiring ER care, medical services, surgical procedures, prescribed medicines and Dr. providing ER care)		✓						Pediatric, Adult, Geriatric	
	Health Status (More detail to assess physical and mental health including immunizations, special educ. or therapy services, ADLs, use of health aides, etc.)		✓						Pediatric, Adult, Geriatric	

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Measure Set/Developer	Title/Brief Description of Quality Measures	Measure Relevance to IOM 6 Domains of Quality Care						Life Cycle	Key Health Conditions Related to Measure (as identified by OPA)
	Survey Sections	Safety	Effectiveness	Patient Centeredness	Timeliness	Efficiency	Equity	Pediatric (<18), Adult (<65) Geriatric (+65)	Asthma, Cancer, COPD, Diabetes, Heart Disease, Hypertension, Mental Health, Musculoskeletal, Reproductive Health
MEPS/AHRQ (Continued)	Hospital Stay (Details LOS, reasons for stay, surgery performed, etc.)		✓					Pediatric, Adult, Geriatric	
	Health Insurance (Details private and public health insurance information)							Pediatric, Adult, Geriatric	
	Managed Care (Determines coverage under HMO, Other MCO, or non-MCO)							Pediatric, Adult, Geriatric	
	Medical Provider Visits (Tracks frequency of provider visits for each condition and services provided)		✓					Pediatric, Adult, Geriatric	
	Outpatient Department (Tracks nature of outpatient care contact, type of care, health conditions requiring outpatient services, treatments and services performed, prescribed medicines, and physicians providing the services)		✓					Pediatric, Adult, Geriatric	
	Priority Conditions (Select group of conditions: sore/strep throat, diabetes, asthma, hypertension, heart disease, angina, heart attacks, strokes, emphysema, joint pain and arthritis.)		✓					Pediatric, Adult, Geriatric	Asthma, Diabetes, Heart Disease, Hypertension, Musculoskeletal

Inventory of Other Sources of Data Related to Quality Performance Measurement									
Measure Set/Developer	Title/Brief Description of Quality Measures	Measure Relevance to IOM 6 Domains of Quality Care						Life Cycle	Key Health Conditions Related to Measure (as identified by OPA)
		Safety	Effectiveness	Patient Centeredness	Timeliness	Efficiency	Equity		
MEPS/AHRQ (Continued)	Prescribed Medicines							Pediatric, Adult, Geriatric	
	Satisfaction with Health Plan (Collects satisfaction information for private insurance, Medigap, Medicare, Medicaid/SCHIP, managed care, and TRICARE)		✓	✓				Pediatric, Adult, Geriatric	
Medicare Health Outcomes Survey - Centers for Medicare and Medicaid Services/NCQA - Sample Size: Approximately 100,000 beneficiaries from plans nationwide- Health outcomes self-reported by Medicare Advantage (MA) beneficiaries to assess plans' ability to maintain or improve physical and mental health function (mail/telephone survey to 1,000 members/plan). CMS provides each MA plan with a "plan performance measurement report," which describes changes in beneficiaries' health status over a two-year period. The questionnaire is based on the Veterans' RAND 12-Item Health Survey and two HEDIS measures. Demographic data are collected. Data provided to the plan to facilitate QI efforts. No efforts to link HEDIS performance data to these outcomes is consistently conducted. Plan reports are not publicly available. Survey is conducted annually in the spring. All managed care MA plans contracting with CMS must participate. Survey tools available at http://www.hosonline.org/	Physical Health							Geriatric	
	Mental health							Geriatric	Mental Health
	Depression							Geriatric	Mental Health
	Chronic Medical Conditions		✓					Geriatric	Cancer, COPD, Diabetes, Heart Disease, Hypertension, Musculoskeletal
	Activities of Daily Living							Geriatric	
	Healthy Days							Geriatric	
	Clinical Measures BMI, arthritis pain, vision and hearing		✓					Geriatric	

Inventory of Other Sources of Data Related to Quality Performance Measurement									
Measure Set/Developer	Title/Brief Description of Quality Measures	Measure Relevance to IOM 6 Domains of Quality Care						Life Cycle	Key Health Conditions Related to Measure (as identified by OPA)
		Safety	Effectiveness	Patient Centeredness	Timeliness	Efficiency	Equity		
California Cancer Registry (CCR) California Department of Public Health (CDPH) - Collaboration between the CDPH, the Public Health Institute, ten regional registries, hospitals and cancer researchers. To date, the CCR has detailed information on 2.5 million cases of cancer, with over 140,000 new cancer cases added annually. The database includes information on demographics, cancer type, extent of disease at diagnosis, treatment, and survival. Data are publicly available. Hospitals and physicians are required by law to submit data. Website: http://www.ccrca.org/aboutthecr.html	All cancers diagnosed in California (except basal and squamous cell carcinoma of the skin and carcinoma in situ of the cervix)							Pediatric, Adult, Geriatric	Cancer
California Adult Tobacco Survey (CATS) California Department of Public Health: Tobacco Control Section - Sample Size: 4,200 adults. Ongoing monthly telephone survey that collects information on a wide variety of tobacco-related behaviors, attitudes and beliefs from a random sample of adult Californians. Data are publicly available. A bi-annual children's survey is also conducted. Website: http://www.dhs.ca.gov/tobacco/	Tobacco use behaviors							Pediatric, Adult, Geriatric	
	Tobacco use beliefs							Pediatric, Adult, Geriatric	
	Health Status							Pediatric, Adult, Geriatric	
Young Adult Health Care Survey (YAHCS) - Child and Adolescent Health Measurement Initiative (CAHMI)/FAACT/NCQA/ - Over 3,000 surveys have been collected and analyzed to date. A survey, developed by CAHMI, that assesses how well the health care system provides recommended preventive care to adolescents aged 14-18 years. The survey tool is publicly available, however no benchmark data are available. Data are housed at Oregon Health and Science University. California's MRMIB used YAHCS data in 2008. Website: http://www.cahmi.org	Preventive screening and counseling on risky behaviors		✓					Pediatric	
	Preventive screening and counseling on sexual activity and sexually transmitted diseases (STDs)		✓					Pediatric	Reproductive Health
	Preventive screening and counseling on weight, healthy diet, and exercise		✓					Pediatric	
	Preventive screening and counseling on emotional health and relationship issues		✓					Pediatric	Mental Health

Inventory of Other Sources of Data Related to Quality Performance Measurement

Measure Set/Developer	Title/Brief Description of Quality Measures	Measure Relevance to IOM 6 Domains of Quality Care						Life Cycle	Key Health Conditions Related to Measure <small>(as identified by OPA)</small>
	Survey Sections	Safety	Effectiveness	Patient Centeredness	Timeliness	Efficiency	Equity	Pediatric (<18), Adult (<65), Geriatric (+65)	Asthma, Cancer, COPD, Diabetes, Heart Disease, Hypertension, Mental Health, Musculoskeletal, Reproductive Health
Young Adult Health Care Survey (YAHCS) CAHMI/FAACT/NCQA (Continued)	Private and confidential care							Pediatric	
	Helpfulness of counseling		✓	✓				Pediatric	
	Communication and experience of care		✓	✓				Pediatric	
	Personal health information							Pediatric	
California Women's Health Survey (CWHS) -California Departments of Health Care Services, Mental Health, Alcohol and Drug Programs, and Social Services, and the Public Health Institute (PHI) - Sample size: 4,000 A statewide, annual telephone survey that collects information from randomly selected adult women aged 18 years or older on a wide variety of health indicators and health-related knowledge, behaviors and attitudes. The Public Health Institute's (PHI) Survey Research Group administers the survey. Reports on the data are publicly available. http://www.dhcs.ca.gov/dataandstats/reports/Pages/DataPoints.aspx	Breast Cancer							Adult	Cancer
	Cervical Cancer							Adult	Cancer
	Mental Health							Adult	Mental Health
	Family Planning							Adult	Reproductive Health
	Breastfeeding							Adult	
	Arthritis							Adult	
	Asthma							Adult	Asthma
	Diabetes							Adult	Diabetes
	Cardiovascular Disease							Adult	Heart Disease
	Osteoporosis							Adult	Musculoskeletal
	Nutrition							Adult	
	Obesity							Adult	
	Sexual Behavior							Adult	
	Sexually Transmitted Diseases							Adult	Reproductive Health
	Personal Health Information							Adult	
	Care Giver Responsibilities							Adult	
	Hormone Replacement Therapy							Adult	
Demographic Data: Age, Educational Attainment, Race/Ethnicity, Household Income, Employment Status, Marital Status and Sexual Orientation							Adult		