TECHNICAL EXPERT CLINICAL USER PATIENT PANEL AND MEASURE SPECIFICATION PANEL CHARTER (TECUPP-MSP)

Project Title: Palliative Care Measures Project

Dates:

The Palliative Care Measures Project was awarded funding by the Centers for Medicare and Medicaid Services (CMS) in September 2018, and, pending funding renewal, will run for three years.

Project Overview:

The Centers for Medicare & Medicaid Services (CMS) has contracted with the American Academy of Hospice and Palliative Medicine (AAHPM) as part of the Medicare Access and CHIP Reauthorization Act of 2015 (MACRA) to develop patient reported outcome performance measures, in the areas of pain and symptom management and communication, for patients with serious illness (including those receiving palliative care). The contract name is the "Palliative Care Measures Project". The contract number is 1V1CMS331639-01-00. As part of its measure development process, CMS asks measure developers to convene groups of stakeholders and experts who contribute direction and thoughtful input to the measure developer during measure development and maintenance. To this end, AAHPM is working with the National Coalition for Hospice and Palliative Care and RAND Health Care to convene a technical expert clinical user patient panel (TECUPP) to provide input on the development of the measures for patients with serious illness. In addition, AAHPM is seeking individuals with expertise in measure development and testing methodologies to also serve on a measure specification panel (MSP), a subset of the TECUPP, that will aid with the technical aspects of measure development and testing.

Project Objectives:

Under this MACRA cooperative agreement, AAHPM is working to advance clinical quality measure development for palliative care patients with serious illness through the engagement of stakeholders such as measure development technical experts, clinicians, clinical specialty societies, patient advocacy groups, patients/families/caregivers, healthcare systems and other stakeholder groups. The objectives for this project are:

- Develop, test and implement at minimum two (2) patient reported outcome performance measures for patients with serious illness while incorporating the patient voice and patient preferences.
- Develop cross-cutting measures broadly applicable to patients with serious illness and their families receiving care in palliative, primary or specialty care settings.
- Convene an innovative technical expert panel that incorporates patient, caregiver, and family input directly into the measure development, specification, testing and implementation processes.
- Submit palliative care measures for endorsement by the National Quality Forum (NQF) and for inclusion into CMS'
 Quality Payment Programs (QPP) including Merit-based Incentive Payment System (MIPS) and Alternative
 Payment Models (APMs) so that clinicians can measure and improve the quality of care that patients with serious
 illness receive.

TEP Objectives:

- 1. Help to develop and continually refine the proposed measure concepts.
- 2. Assist in measure specification development.
- 3. Discuss and provide feedback on measure testing results.
- 4. Review and incorporate public comment into measure specifications.
- 5. Approve final measure specifications and implementation method(s).
- 6. Assist with developing risk adjustment methodology.
- 7. Defend measures during endorsement process at NQF and inclusion in the CMS QPP.
- 8. Help develop materials for measure dissemination and implementation.
- 9. Further Project Objectives above and the additional goals of:
 - a. Ensuring dignity, respect, and autonomy in serious illness care.
 - b. Involving persons and families in the care process and demonstrate knowledge, skill, and confidence to self-manage health care, with the potential to improve person-centered care.

c. Helping to assure that patients feel heard and understood to improve communicating prognosis and treatment options and assuring adherence to the treatment plan.

Scope of Responsibilities:

TECUPP Responsibilities:

The responsibilities of the TECUPP include:

- 1. Participation over the course of three years.
- 2. Participation in one in-person meeting in Chicago on April 10, 2019.
- 3. Participation in approximately six virtual meetings over three years.
- 4. Provide expertise and feedback on quality measures for patients with serious illness throughout the measure development lifecycle, as requested.
- 5. Review meeting materials in advance of the in-person meeting. Prepare to participate in the discussion and provide recommendations during the meeting.
- 6. Provide periodic expert advice and feedback, as needed via conference calls or webinars.
- 7. Provide expertise and feedback on measures post-public comment and testing phases, as requested.
- 8. Provide expertise and feedback on measures during the measure endorsement process with NQF, as requested, and on submissions to CMS for implementation in the QPP, as requested.

MSP (subset of the TECUPP) Responsibilities:

In addition to the commitment expected of all TECUPP members, MSP participants should expect to participate in additional meetings throughout the course of the 3-year project.

- Participate in an additional ½ 1 day meeting in-person on April 11, 2019 in Chicago, IL.
- Review and provide expertise on measure specifications including numerator, denominator, exceptions, exclusions, and other methodological considerations.
- Provide technical feedback following public comment periods and required measure specification updates through periodic conference calls.
- Review measure testing methodologies and results and provide feedback, as requested.

Guiding Principles:

The TECUPP will be guided by the following principles:

- 1) Person centered: TECUPP Members are committed to working together at each stage of this project to ensure that measures are meaningful to seriously ill patients and their caregivers.
- 2) Transparent: TECUPP Members are committed to a transparent process in which patients, caregivers, and the public will have equal access to measurement information and be able to provide input. In addition to the work of the TECUPP, public comment periods will be made available at appropriate intervals.
- 3) Understandable information: The TECUPP is committed to ensuring that any resulting measures and information will be communicated in a way that is understandable to patients, families and caregivers.
- 4) Co-created: TECUPP Members will work together throughout this project to create an environment that facilitates co-creation of measures by experts, end-users, and most importantly the patients, families and caregivers.
- 5) Consensus: Decisions will be made by the group by consensus and occasionally by a modified Delphi voting process.
- 6) Voluntary: Participation on the TECUPP is voluntary. As such, individuals participating on the TECUPP should understand that their input will be recorded in the meeting minutes. Proceedings of the TECUPP will be summarized in a report that may be disclosed to the public. If a participant has chosen to disclose private, personal data by his or her own choice, then that material and those communications are not deemed to be covered by patient-provider confidentiality. Patient/caregiver participants may elect to keep their names confidential in public documents.
- 7) COI Disclosure: All potential TECUPP members must disclose any current and past activities that may pose a potential conflict of interest for performing the tasks required of the TECUPP. It is unethical to conceal (or fail to disclose) conflicts of interest. However, the disclosure requirement is not intended to prevent individuals with particular perspectives or strong points of view from serving on the TECUPP. The intent of full disclosure

is to inform the TECUPP organizers, other TECUPP members and CMS about the source of TECUPP members' perspectives and how that might affect discussions or recommendations.

Estimated Number and Frequency of Meetings:

There will be a MANDATORY in-person meeting held on April 10, 2019 from 9:00-5:00 pm at the AAHPM Headquarters in Chicago, IL. The nominee must be available to attend this in-person meeting to be considered for a position on the TECUPP and MSP. The costs for travel for the nominee to attend the in-person meeting and all virtual TECUPP related meetings (i.e. conference calls and webinars) will be reimbursed in accordance with General Services Administration (GSA) Schedule rates. A modest stipend will be provided to each TECUPP member.

Year 1:

- Participate in a kick-off TECUPP webinar and conference call in early 2019.
- Required: Attend a 1-day meeting on April 10, 2019 in Chicago, IL.
- MSP only: Attend a ½ 1-day meeting on April 11, 2019 in Chicago, IL.

Year 2:

• Provide expert advice and feedback, via 1-2 scheduled conference calls and/or webinars.

Year 3:

• Provide expert advice and feedback, via 1-2 scheduled conference calls and/or webinars.

All potential TECUPP/MSP members should be able to commit to the anticipated time frame needed to perform the functions of the TECUPP/MSP.

Date Approved by TEP:

<List the date the charter was approved.>

TEP Membership:

<Attach the TEP Membership List.>