MEASURING THE QUALITY OF CARE

A key priority for the Centers for Medicare & Medicaid Services (CMS) is ensuring the delivery of high-quality health care services to Medicare and Medicaid beneficiaries. Through quality initiatives, incentive payments, and public reporting programs, CMS aims to continuously improve the quality of care provided, health outcomes, and beneficiaries’ experiences with care. RAND is engaged in developing and supporting the use of quality measures by CMS.

RAND helped CMS assess the impact of hospital payment systems that reward high-quality, cost-effective care.

In value-based purchasing systems, provider payments are directly linked to their performance, holding those delivering health care services accountable for both the cost and quality of care they provide. RAND researchers developed and evaluated the effects of a range of potential designs for use in hospitals, directly supporting CMS decisionmakers as they selected the design for the CMS hospital value-based purchasing program.

RAND is developing meaningful measures of performance for Medicare managed care plans, focusing on the needs of enrollees.

CMS faces a number of challenges as it seeks to improve the quality and decrease the cost of care provided by Medicare managed care plans, especially in the case of Special Needs Plans. These challenges include low enrollment in certain plans, the presence of vulnerable patient populations, and the growing number of available performance metrics, all of which present methodological difficulties. RAND researchers are helping CMS strengthen the rating system it uses to assess Medicare Advantage managed care plan performance, focusing on measures in areas that are important to enrollees.

RAND helped CMS develop quality measures for monitoring both medication management and adverse events in hospitals.

Maintaining high-quality care under Medicare Part D’s coverage for prescription medications depends in part on how effectively providers and plans promote the appropriate and consistent use of medication by patients. RAND researchers were part of a team that helped CMS develop and evaluate quality measures for monitoring medication management. Researchers are now helping CMS develop measures for identifying and preventing adverse drug events and other problems in hospitals.

RAND has given nursing home residents a voice in their care.

Thanks to a health assessment tool developed by RAND researchers, residents in all Medicare-certified nursing homes and Veterans Affairs Community Living Centers are now being asked directly about their care, pain, mood, and preferences. The assessment, known as the Minimum Data Set 3.0, has been heralded as a remarkable piece of work that will not only promote resident-centered care but also improve quality monitoring and allow gerontologists to better understand processes of nursing home care.

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