

# Measure Applications Partnership (MAP)



In convening MAP, the National Quality Forum (NQF) brings together representatives of consumers, businesses and purchasers, labor, health plans, clinicians and providers, communities and states, and suppliers. MAP's careful balance of these stakeholder interests ensures that the federal government will receive varied and thoughtful input on performance measure selection. As of this year, MAP involves approximately 150 healthcare leaders and experts representing nearly 90 private-sector organizations, as well as liaisons from seven federal agencies.

## WHAT IS MAP?

MAP is a multistakeholder partnership that guides the U.S. Department of Health and Human Services (HHS) on the selection of performance measures for federal health programs. Congress recognized in 2010 the benefit of an approach that encourages consensus building among diverse private- and public-sector stakeholders. Importantly, it provides a coordinated look across federal programs at performance measures being considered.<sup>1</sup>

MAP's work fosters the use of a more uniform set of measures in federal programs and across the public and private sectors. This uniformity helps providers better identify key areas in which to improve quality; reduces wasteful data collection for hospitals, physicians, and nurses; and helps to curb the proliferation of redundant measures which could confuse patients and payers.

Given the impact of MAP's work, healthcare leaders have growing interest in becoming involved in MAP workgroups; participation in MAP discussions is increasing; and the public increasingly engages with MAP reports.

## WHAT DOES MAP DO?

Since 2011, HHS has called upon MAP to recommend measures most appropriate for public reporting, performance-based payment, and other uses. One of MAP's key initiatives is to convene stakeholders for an intensive annual review of the quality measures being considered by HHS for around 20 federal

health programs. Additionally, MAP has provided input to HHS on assessing the quality of care for the nearly 10 million Americans enrolled in both Medicare and Medicaid due to very low income and complex healthcare needs. Another recent initiative is recommending core measures for assessing the quality of care for adults and children enrolled in Medicaid and ensuring that the measure set evolve over time. HHS is guided by the recommendations from all of these projects as it finalizes measures for programs, which helps to improve care quality for the more than 100 million Americans covered by these federal health programs.

## SUCCESSSES

MAP has accomplished a variety of projects, ranging from guidance on measures for use in Medicare and Medicaid programs to more focused activities on strategic topics and specific populations, including:

- **Pre-rulemaking input** – MAP provides input on performance measures being considered for

<sup>1</sup> MAP is in contrast to traditional rulemaking where there are no forums for upfront discussion, and, once initial rules are issued, the federal government can only provide responses to clarifying questions. With MAP, there is an opportunity to look at programs in a strategic and coordinated way.



**150**  
INDIVIDUALS

**90**  
ORGANIZATIONS

Consumer advocacy organizations  
Purchasers  
Health plans  
Clinicians and providers  
Suppliers  
Accreditation and certification entities  
Communities and states  
Regional collaboratives

federal programs, and its feedback informs the rulemaking process that finalizes programs' measures. It completed its fifth pre-rulemaking cycle in 2016, which culminated in a **report** examining measures for 16 different federal programs. MAP works continuously to improve, and, in 2014, it completed a major redesign of its processes to enhance the work it produces.

- **Core Set for Adults in Medicaid** – MAP provides continued **input** on the core set of measures for adults enrolled in Medicaid. States are not required to report on these measures but are encouraged to do so voluntarily. MAP has examined state experiences in implementing this set and makes recommendations to strengthen the measure set going forward.
- **Core Set for Children in Medicaid and CHIP** – Beginning in 2014, MAP expanded its role to provide regular input on a core set of measures for children enrolled in Medicaid. Similarly, state reporting on these measures is voluntary.
- **Families of Measures** – Families of measures provide a tool that stakeholders can use to identify the most relevant available measures for particular measurement needs; to promote uniformity by highlighting important measurement categories; and to apply to other measurement initiatives. With its **2014 report**, MAP has now produced 10 families that assess all 6 priorities within the National Quality Strategy.
- **Dual Eligible Beneficiaries** – To improve health outcomes for the vulnerable population of Americans enrolled in both Medicare and Medicaid,

MAP regularly produces guidance on quality measurement driven by an updated family of measures for dual eligible beneficiaries. MAP also highlights promising measurement activities for this patient population and considers the field's progress in filling high-priority measurement gaps.

- **Health Insurance Exchanges** – MAP has provided **recommendations** to HHS on measures to use in the initial Quality Rating System for the Health Insurance Marketplaces to enable consumer choice and support regulatory oversight. Starting in 2016, exchanges will be required to publicly report measures, although some exchanges are voluntarily doing so already.

## STRUCTURE AND MEMBERSHIP

MAP's overall strategy is set by the Coordinating Committee. Working directly under the Coordinating Committee, MAP workgroups advise the Coordinating Committee on measures needed for specific care settings, care providers, and patient populations. Time-limited task forces consider specific topics, such as families of measures, and provide further information to the Coordinating Committee and workgroups. The MAP Coordinating Committee provides final input to HHS in reports and other deliverables.

MAP's processes are transparent. All MAP meetings are open to the public, and reports and other materials are made available on NQF's website, <http://www.qualityforum.org>. Public comments are sought on MAP recommendations, and MAP reviews and considers every comment received.