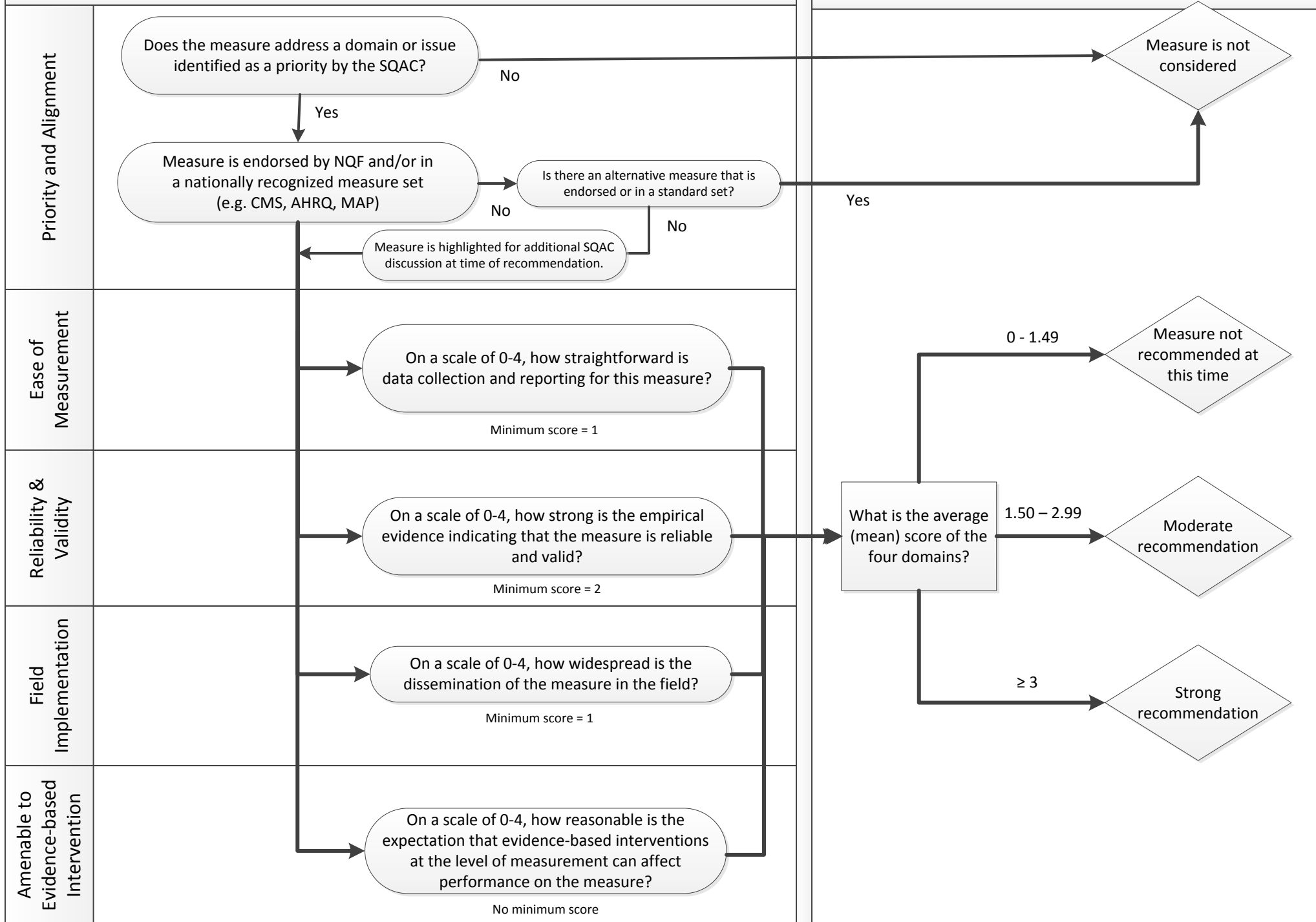


DRAFT – SQAC Non-Mandated Measure Evaluation Process

Scoring



		0	1	2	3	4
Ease of Measurement	No collection and reporting, or extreme resource cost to collect necessary data elements. Example of extreme resource cost: face-to-face interview	Some collection but no reporting, or high resource cost to collect necessary data elements. Example of high resource cost: chart review	Some collection and reporting, or moderate resource cost to collect necessary data elements. Example of moderate resource cost: EHR extraction	Commonly collected and reported, or low resource cost to collect necessary elements. Example of low cost: data currently reported to some entities	Data are available and already in use for public reporting, performance programs or accountability purposes.	
Reliability and Validity	No evidence of the measure’s Reliability: the measure can be implemented consistently, allows comparability, and produces results that can be repeated in the same population and time period, or Validity: the measure’s specifications are consistent with evidence for the measure.	The evidence of the measure’s reliability and validity is inconclusive and/or unclear.	Evidence that the measure meets each of the elements of reliability and validity exists, but not at the proposed level of measurement.	There is sufficient evidence that the measure meets each of the elements of reliability and validity at the proposed level of measurement.	There is strong evidence that the measure meets each of the elements of reliability and validity at the proposed level of analysis.	
Field Implementation	The measure has not been implemented in the field (i.e. provider practice, hospital, or plan).	The measure has been implemented in the field, but evaluation results are unavailable or inconsistent.	The measure has been implemented in the field, and evaluated positively in the literature.	The measure has been implemented in the field, and evaluated positively, but not at the indicated level of measurement.	The measure has been applied to the appropriate level of measurement and used for publicly reporting, performance programs and for accountability purposes.	
Amenable to Targeted Improvement	There is no evidence that interventions at the level of measurement can drive performance in the clinically related area.	There are minimally-evaluated interventions at the level of measurement that may drive performance in the clinically related area.	There are standard practice guidelines that fall within the scope of work at the level of measurement and that drive performance in the clinically related area.	There are interventions that impact patient outcomes, but that have not demonstrated direct correlation with improvement in the clinically related area.	There is strong evidence that targeted interventions at the level of measurement can drive performance in the clinically related area.	