Policy & Practice

New RA Quality Measures Drafted

The National Committee for Quality Assurance, the American Medical Association, and Mathematica Policy Research Inc. have released a draft set of 22 clinical measures that assess physician performance in rheumatoid arthritis; palliative and end-of-life care; endoscopy and polyp surveillance; and chronic wound care. When made final, the measures will be submitted to the Centers for Medicare and Medicaid Services for possible inclusion in its pay-for-reporting program, according to NCQA. The measures also could be used in other quality improvement initiatives, in maintenance of certification programs, or as part of pay-for-performance programs. The development of the measures will help CMS officials and others "drive quality improvement," Margaret E. O'Kane, NCQA president, said in a statement. The draft set six measures related to rheumatoid arthritis, which were developed in collaboration with the American College of Rheumatology.

Feds Seek Help in Bone Campaign

The federal government is reaching out to organizations that promote bone health and girls' health to help to increase national awareness of behaviors that contribute to good bone health in girls. The Department of Health and Human Services' Office of Women's Health recently issued a request for groups to offer advice on the development and dissemination of campaign materials related to the National Bone Health Campaign. The campaign is aimed at helping girls increase their calcium and vitamin D consumption and weight-bearing physical activity with the goal of building strong bones. The national social marketing campaign will target girls, parents, and health care providers.

Vioxx Victories

Merck & Co. cannot be sued for the cost of medical monitoring associated with past use of Vioxx (rofecoxib), according to a recent ruling from the New Jersey Supreme Court. That court overruled an appellate court and found that individuals who used Vioxx, but had not suffered an injury related to the drug, could not sue the company for the cost of monitoring, such as electrocardiograms or follow-up cardiology consultations. Merck also scored a victory in Texas when a state appeals court overturned a 2005 jury verdict against the company. In that case, *Ernst v. Merck*, the jury had originally awarded the plaintiff more than $24 million in compensatory damages and $229 million in punitive damages. The punitive damages award had already been reduced to $1.65 million under a Texas law that limits punitive damages.

AHIP Proposes Reform Plan

The United States could reduce total health care spending by $145 billion in the next 7 years while improving the quality of patient care by implementing five proposals, according to a plan from the industry group America's Health Insurance Plans. The AHIP plan endorsed a combination of measures to improve the U.S. health care system and save money, including prevention; better disease management and care coordination; a move to electronic transactions; a transition to a value-based payment system; and new technology. The group also called for replacing the current medical liability system with dispute resolution that would put in place an objective, independent administrative process to provide a quick and fair end to disputes and promote evidence-based medicine. AHIP President and CEO Karen Ignagni said that most pieces of her group's proposal now are in use by health insurance companies. "Plans have made measurable progress, but the nation needs a coordinated approach across the public and private sectors to maximize the impact of these strategies," she said in a statement.

CMS Outlines Hospice Rights

CMS has made final regulations that give Medicare beneficiaries with terminal illnesses the right to determine how they receive end-of-life care. The provisions, contained in an overhaul of regulations governing the hospice industry, include explicit language on patient rights that had not existed under the previous regulations, CMS said. According to the new rule, patients who choose hospice or palliative care over curative treatment are entitled to such things as participation in their treatment plan, the right to effective pain management, the right to refuse treatment, and the right to choose their own physician. CMS noted that although many hospice patients already are active in their own treatment plans, this regulation is the first to set out a detailed list of patient rights. "End-of-life care has changed markedly in the past 25 years and it is time to update our regulations to reflect advances in medicine and hospice industry practices as well as patient rights," said CMS Acting Administrator Kerry Weems in a statement.

—Mary Ellen Schneider