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# What Matters: Eliciting Patient Healthcare Goals and the CMS Hospital Measure

*Part 3 of the CMS Hospital Measure Webinar Series*

Monday, October 27, 2025  
3–4 pm EST

Moderated by:



**Don Melady, MD, MSc(Ed)**  
Professor, University of Toronto  
Emergency Physician  
Mount Sinai Hospital, Toronto, Canada



**Danya Khoujah, MBBS, MEHP**  
Emergency Physician  
AdventHealth, Tampa, Florida

# Five Domains to Prioritize Older Adults' Healthcare Needs

**Domain 1:** Eliciting Patient Healthcare Goals

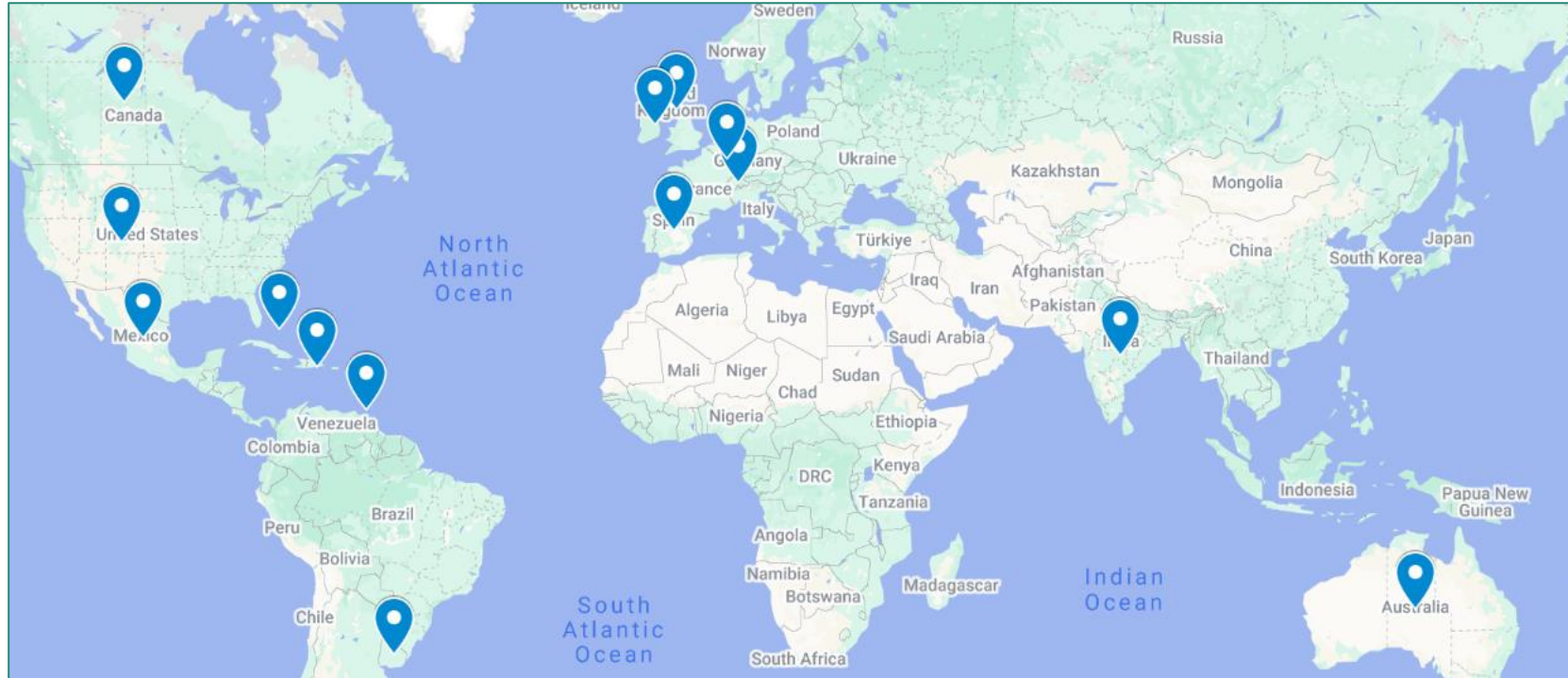
**Domain 2:** Responsible Medication Management

**Domain 3:** Frailty Screening and Intervention

**Domain 4:** Social Vulnerability

**Domain 5:** Age-Friendly Care Leadership

# Global attendance joining us today:



1. United Arab Emirates
2. Australia
3. Bahamas
4. Canada
5. Switzerland
6. Dominican Republic
7. Spain
8. United Kingdom
9. Ireland
10. India
11. Luxembourg
12. Mexico
13. Trinidad & Tobago
14. United States
15. Uruguay

**400 Registrants across 15 Countries**

## Aside from more time, what would make it easier to establish health care goals in the ED?

**A shared sense that this is important**

**Improved access to information systems**

**Dedicated or designated staff to do it**

**Some guidance about talking points or scripts or prompts; a conversation guide**

Establishing the “proper forum”

Better connection with the community/outpatient setting

Integrating more staff into the process, i.e. interdisciplinary team

Tools in the Electronic Record

Common sense!

Access to palliative care consultation in the ED

Connection with primary care in the community

Ensuring family and caregivers are present

Leveraging the EHR for reminders and shortcuts

Having a chart about the most important issues

Engaging a wider range of team members, not just doctors



# GEDC

THE GERIATRIC  
EMERGENCY DEPARTMENT  
COLLABORATIVE

EDUCATE IMPLEMENT EVALUATE

[gedcollaborative.com](https://gedcollaborative.com)

## Mission & Vision

A world where all emergency departments provide the highest quality of care for older patients.

We transform and evaluate interdisciplinary best practice in geriatric emergency medicine, and then build and distribute practical, evidence-based clinical curriculum and quality improvement tools that support sustainable, quality care for older adults.

<https://gedcollaborative.com/membership/>

## Membership

Join the ranks of hospitals that are providing the best possible care to older adults in the ED, while helping to define best practices.

### Member Benefits:

- Unlock ED Resources
- Access Tailored Content
- Track your Team's Progress
- Get Individualized Support
- Engage in Consulting Engagements
- Make Global Connections
- Learn about ED Leadership Engagement

## Join the GEDC

# Meet Your Expert Panel

## What questions do you have for our panelists?

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**Susan Bower, MSN, RN**  
Geriatric Emergency Department Nurse Coordinator  
Assistant Professor of Nursing  
Mayo Clinic, Minnesota



**James van Oppen, FRCEM, MRCP, PhD**  
Clinical Lecturer in Emergency Medicine  
University of Sheffield & Sheffield Teaching  
Hospitals  
Sheffield, England, United Kingdom



**Anita Chary, MD, PhD**  
Assistant Professor, Baylor College of Medicine  
Center for Innovations in Quality, Effectiveness and Safety  
Michael E. DeBakey VA Medical Center  
Texas



**Jessica Stanich, MD**  
Geriatric Emergency Medical Director  
Department of Emergency Medicine  
Assistant Professor of Emergency  
Medicine and Geriatric Medicine  
Mayo Clinic, Minnesota



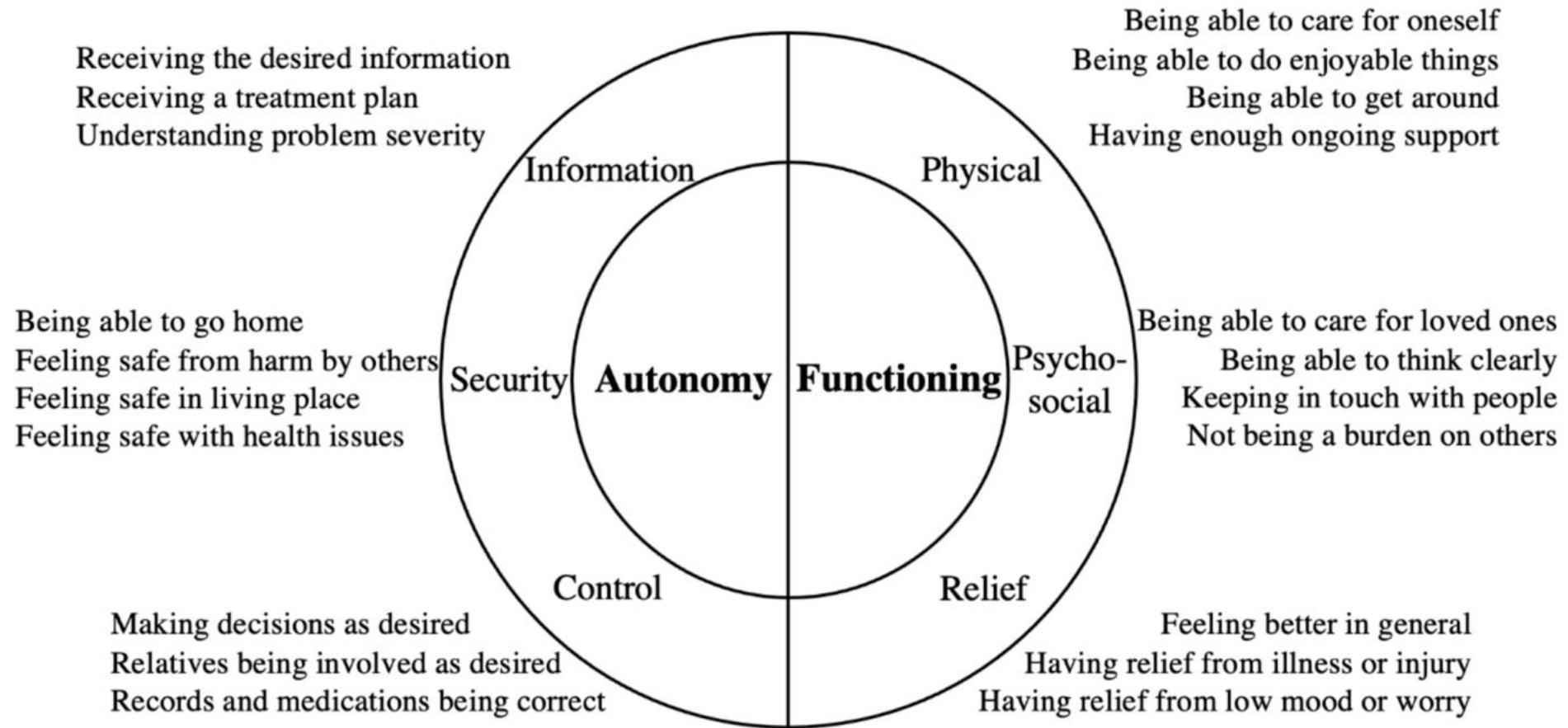
**Cameron Gettel, MD, MHS**  
Assistant Professor  
Department of Emergency Medicine  
Yale University School of Medicine  
Connecticut

# FY25 CMS Age-Friendly Hospitals Measure

|          | <b>Title</b>                               | <b>Measure</b>   |
|----------|--|--|
| Domain 1 | <b>Eliciting Patient Healthcare Goals:</b> | Our hospital has protocols in place to ensure patient goals related to healthcare (i.e., health goals, treatment goals, living wills, identification of health care proxies, advance care planning) are obtained/reviewed and documented in the medical record. These goals are updated before major procedures and upon significant changes in clinical status. |

# Fig. 1

From: [What matters most in acute care: an interview study with older people living with frailty](#)



Framework of acute healthcare outcome goals among older people living with frailty

<https://bmcgeriatr.biomedcentral.com/articles/10.1186/s12877-022-02798-x/figures/1>














# Bringing the 4M's to Life

**An Attempt to Align Care with what Matters Most**

Jessica Stanich M.D. & Susan Bower R.N.

## ED Track Board (ROMB ED)

 Arrival  Refresh  Visit Contacts  Visit Messaging |  Sign In  Tx Team ▾  Associate Devices |  Narrators ▾  Quick Updates

|                |                      |   |  |                 |             |            |            |              |
|----------------|----------------------|---|--|-----------------|-------------|------------|------------|--------------|
| My Pts (0)     | <b>All Pts (135)</b> | Expected Pts/Held Beds (24)   | Wtg Room (27)  | Intake (0)      | Subwait (0) | Garage (0) | Resus (1)  | Center 1 (0) |
| South (0)      | Joseph 1B (0)        | Triage/Need VS (26)   | All Waiting Pts (27)   | Charge RN (159) | Admits (12) | BH (0)     | ED Obs (0) | Disaster (0) |
| MCI Yellow (0) | Boarders (0)         |  <b>Geriatrics</b> |  |                 |             |            |            |              |



# Geriatrics

| Bed | Patient       | Age | Complaint             | Matters         | Mentation   | Critical Home Meds | Pharmacist Medication Reconciliation | Mobility                  | Diet                                | Facility                      | Clinical Comments     |
|-----|---------------|-----|-----------------------|-----------------|-------------|--------------------|--------------------------------------|---------------------------|-------------------------------------|-------------------------------|-----------------------|
| C1  | Margret Smith | 92  | Shortness of breath   | ACP (hyperlink) |             |                    | <input checked="" type="checkbox"/>  | 1 staff assist walker     | <input checked="" type="checkbox"/> | Charter House Assisted Living |                       |
| C2  | Bob Jones     | 79  | Altered Mental Status |                 |             |                    | <input type="checkbox"/>             | independent               | <input checked="" type="checkbox"/> |                               | Social work transport |
| C3  | Amy Nichols   | 89  | Confusion             |                 | Alzheimer's |                    | <input type="checkbox"/>             | 2 staff assist wheelchair | <input type="checkbox"/>            | Edenbrook Memory Care         | PT to evaluate        |

# Takeaway points: Jessica Stanich & Susan Bower

1. The Geriatric Tab helps organize details specific to older adults.
2. Provides a visual aid drawing attention to core geriatric priorities.
3. Automatic inclusion of the tab promotes consistent use and buy-in across the care team.

# Takeaway points: Anita Chary

- Patients may not think of care "goals" but rather **worries, concerns, and/or expectations** of what will happen from the visit.
- Situations where healthcare goals in the ED are most useful:
  1. Serious illness (e.g., resuscitation decisions)
  2. Disposition decisions (admit, discharge, care transitions)
  3. Non-traditional approach to the clinical presentation
- Information about caregiving context and functional status makes a patient's healthcare goals more actionable for clinicians.

# Takeaway points: Cameron Gettel

1. Simple “What Matters” questions uncover older adults’ true priorities - often beyond the chief complaint - and can be asked in under 3 minutes.
2. Integrating these conversations into ED care improves alignment with patient goals, prompting earlier engagement of supports and more proactive care.
3. Documenting “What Matters” can fulfill CMS’s new Age-Friendly Hospital Measure domain on eliciting patient healthcare goals, positioning EDs for success.

# Takeaway points: James van Oppen

- **Person-centered emergency care** for older adults with frailty requires understanding and prioritizing individual values and goals, rather than relying solely on standardized protocols.
- **‘What matters most’ frameworks** might help clinicians to structure consultations around patient-defined outcomes - such as situational security and maintaining independence.
- **Patient-Reported Outcome Measures (PROMs)** could provide a practical way to measure and improve person-centered care by capturing how well services fulfill individual-level priorities



## Q & A

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Ask your questions  
in the chat!

We will try to get to everyone

# More Resources: CMS & Eliciting Patient Healthcare Goals

## CMS Resource: All 5 Domains

### CMS Age Friendly Hospital Measure

Resources for Emergency Departments

Share on   

On August 1, 2024, the Centers for Medicare & Medicaid Services (CMS) released the [Age-Friendly Hospital Measure](#) that will take effect January 1, 2025. The measure, developed in collaboration with the [American College of Surgeons \(ACS\)](#), the [Institute for Healthcare Improvement \(IHI\)](#), and the [American College of Emergency Physicians \(ACEP\)](#), aims to improve older adult patient care and outcomes.

The Age Friendly Hospital Measure targets five domains to prioritize older adults' healthcare needs:

1. Eliciting patient healthcare goals
2. Responsible medication management
3. Frailty screening and intervention
4. Social vulnerability
5. Age-friendly care leadership

The emergency department (ED) plays an important role in ensuring your hospital meets the Age-Friendly Hospital measure. Below we highlight key resources relevant to each domain from our resource library and our collaborators.

 BLOG

OCTOBER 22, 2025

## Eliciting Healthcare Goals in the ED

WHAT MATTERS

<https://gedcollaborative.com/article/cms-hospital-measure-resources-for-eds/>

# GEDC Consulting Services

## IMPROVE GERIATRIC CARE AND OUTCOMES

- The GEDC Team will work with your site and health system leaders to create a consulting engagement package that will help your ED or health system reach its goals.

## AGE-FRIENDLY GUIDELINES SUPPORT

- The GEDC offers specialized Consulting Services to help your site or system meet its unique needs.
  - Achieving GED accreditation or leveling up to achieve Level 1 or 2 status
  - Excelling on the CMS Age-friendly Guidelines
  - Your hospital or system's needs, challenges, or goals for geriatric care



<https://gedcollaborative.com/consulting-and-services/>





OUR NEXT GEDC  
EXPERT PANEL WEBINAR

## Frailty Screening and Intervention and the CMS Hospital Measure

Part 4 of the CMS Hospital Measure Webinar Series

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February 23, 2026  
3pm EST

Register Now

<https://gedcollaborative.com/resource/frailty/frailty-screening-and-intervention-and-the-cms-hospital-measure/>



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