



**NATIONAL
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Day 1

Consensus Standards Approval Committee (CSAC)

Measure Evaluation Meeting

November 30, 2021

Funded by the Centers for Medicare & Medicaid Services under contract HHSM-500-2017-000601 Task Order HHSM-500-T0001

Welcome

Housekeeping Reminders

- This is a Cisco WebEx meeting with audio and video capabilities
- Please place yourself on mute when you are not speaking
- We encourage you to use the following features
 - ▣ Chat box: to message NQF staff or the group
 - ▣ Raise hand: to be called upon to speak
- Meeting breaks
- Member and public comment opportunities

If you experience technical issues, please send a message to NQF staff through the chat box or email CSAC@qualityforum.org

Welcome Remarks

- *Dana Gelb Safran, Sc.D., President & CEO, NQF*
- *CSAC Committee Chairs:*
 - ▣ *Melissa Danforth, Chair*
 - ▣ *John Bulger, DO, MBA, Vice-Chair*

Day 1 Agenda: November 30, 2021

- Welcome at 10:00 am ET
- Introductions, roll call, Disclosures of Interest, test vote
- Discussion and Voting
 - ▣ **Patient Experience and Function**
 - ▣ **Perinatal and Women's Health**
 - ▣ **Neurology**
 - ▣ **Behavioral Health and Substance Abuse**
- First opportunity for Member and Public Comment (Morning)
- Break- 11:50am
- Discussion and Voting- 12:30pm
 - ▣ **Prevention and Population Health**
 - ▣ **Cost and Efficiency**
 - ▣ **All-Cause Admissions and Readmissions**
 - ▣ **Cardiovascular**
- Second opportunity for Member and Public Comment (Afternoon)
- Adjourn

Roll Call and Disclosure of Interest



CSAC Members

- Melissa Danforth (Chair)
- John Bulger, DO, MBA (Vice-Chair)
- Dan Culica, MD, MA, PhD
- Dana Cyra, MA, CPHQ
- Lisa Freeman
- Kevin Kavanagh, MD, MS, FACS
- Rebecca Kirch, JD
- Laura Pennington
- Leslie Schultz, RN, BSN, PhD
- Edward Septimus, MD
- Jeffrey Susman, MD
- Kelly Trautner, JD

Voting Procedure

- For each topic area, the first vote will ask CSAC members if they would like to vote on all the measures at once or on each measure individually
 - ▣ If any committee member elects to *not* vote on all measures at once, or a member must recuse themselves from voting on a measure, the committee will vote on each measure separately for that topic area
- CSAC members then vote on acceptance of the Standing Committee's recommendation
 - ▣ Accept the Standing Committee's recommendation (i.e., to endorse or not endorse)
 - ▣ Do not accept the Standing Committee's recommendation and return the measure back to the committee for reconsideration



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Patient Experience and Function Spring 2021 Review Cycle

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contract HHSM-500-2017-00060I Task Order HHSM-500-T0001*

Patient Experience and Function Standing Committee Recommendations

- **One measure reviewed for Spring 2021**
 - ▣ **One measure reviewed by the Scientific Methods Panel**
 - » **#3622** passed SMP on reliability. SMP did not reach consensus on validity
- **One measure recommended for endorsement**
 - ▣ **#3622** National Core Indicators for Intellectual and Developmental Disabilities (ID/DD) Home and Community-Based Services (HCBS) Measures (Human Services Research Institute) (new)

Patient Experience and Function: Public and Member Comment and Member Expressions of Support

- 13 comments received for **#3622** National Core Indicators for Intellectual and Developmental Disabilities (ID/DD) Home and Community-Based Services (HCBS) Measures (Human Services Research Institute)
 - ▣ 10 in support of measure under review
 - ▣ Two comments were supportive of the measure but contained future suggestions for improving the PROM
 - ▣ One comment was supportive and included suggestions for improving the PROM and one comment for the Standing Committee to consider
- No NQF members provided expressions of support or non-support

Patient Experience and Function Team Contact Information

- NQF Project Team:
 - ▣ Tamara H. Funk, MPH, Director
 - ▣ Erin Buchanan, MPH, Manager
 - ▣ Yemsrach Kidane, PMP, Project Manager
 - ▣ Hannah Ingber, MPH, Senior Analyst
 - ▣ Sean Sullivan, MA, Coordinator
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Perinatal and Women's Health Spring 2021 Review Cycle

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HHSM-500-2017-000601 Task

Order HHSM-500-T0001

Perinatal and Women's Health Standing Committee Recommendations

- **Four measures were reviewed for spring 2021**
 - ▣ Three measures were reviewed by the Scientific Method Panel
 - » #2902, #2903, and #2904 passed SMP on reliability and validity.
- **Four measures were recommended for endorsement**
 - ▣ **#0033** Chlamydia Screening in Women (CHL), NCQA, maintenance
 - ▣ **#2902** Contraceptive Care – Postpartum HHS Office of Population Affairs (OPA)/Fair Harbor, maintenance
 - ▣ **#2903** Contraceptive Care – Most & Moderately Effective Methods, HHS OPA/ Fair Harbor, maintenance
 - ▣ **#2904** Contraceptive Care – Access to Long-Acting Reversible Contraception (LARC), HHS OPA/Far Harbor, maintenance

Overarching Issues for Perinatal and Women’s Health Measures

■ Population and Social Risk Data

- ▣ The Standing Committee requested that each measure submission include stratified performance data by clinical, demographic, and social risks to provide greater population-specific performance gaps. Overwhelming evidence demonstrates outcome disparities for women and infants based on race, ethnicity, language, education, and income.

■ Evolving Measure Specifications With Use

- ▣ The Standing Committee anticipates measures to evolve with each evaluation based on program use, implementation strategies, practice advances, and advances in coding and clinical documentation, and national priorities (e.g., health equity, care access, emerging medicine, and measurement science advances). Maintenance evaluations should consider these advances, as well as potential unintended consequences that may render measures unreliable or unreliable.

Perinatal and Women's Health Public and Member Comment and Member Expressions of Support

- 18 public comments were received supporting the measures:
 - ▣ One for #0033
 - ▣ Five for #2902
 - ▣ Six for #2903
 - ▣ Six for #2904
- Two NQF member expressions of support were received:
 - ▣ One for #2903
 - ▣ One for #2904

Perinatal and Women's Health Contact Information

- NQF Project Team:
 - ▣ Tamara Funk, MPH, Director
 - ▣ Erin Buchanan, MPH, Manager
 - ▣ Yemsrach Kidane, PMP, Project Manager
 - ▣ Hannah Ingber, MPH, Senior Analyst
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 - ▣ Jesse Pines, MD, MS, MBA, Consultant
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Neurology Spring 2021 Review Cycle

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Neurology Standing Committee Recommendations

- **Two measures reviewed for Spring 2021**
 - ▣ One measure reviewed by the Scientific Methods Panel
 - » #3614 passed SMP on reliability and validity.
- **One measure recommended for endorsement**
 - ▣ **#0507** Diagnostic Imaging: Stenosis Measurement in Carotid Imaging Reports – (American College of Radiology) maintenance
- **One measure withdrawn (following post-comment meeting)**
 - ▣ **#3614** Hospitalization After Release With Missed Dizzy Stroke (Johns Hopkins Armstrong Institute of Patient Safety and Quality) new

Overarching Issues for Neurology Measures

■ **Concerns Over the Quality of the Evidence**

- ❑ The Standing Committee questions whether better measurement of carotid stenosis itself was linked to improved outcomes. The developer was unable to describe a clear linkage between the process measure and the outcome. Instead, a two-step evidence pathway was proposed, in which improved measurement would lead to a better selection of patients for interventions, which have been shown to improve outcomes. This led the Standing Committee to vote for insufficient evidence with exception due to the lack of this linkage between process and outcome.

■ **Issues With Scientific Acceptability**

- ❑ The Standing Committee emphasized the importance of having sufficient observations to ensure the measure was reliable. Smaller hospitals may not achieve sufficient cases to generate a reliable measure.
- ❑ For NQF #0507, concerns were raised that empirical validity testing was not conducted (i.e., measure results are compared against another valid measure of a similar concept). While the developer did attempt to conduct empirical validity testing, they were ultimately unable to because they could not find a suitable comparator measure at the same level of analysis.

Neurology: Public and Member Comment and Member Expressions of Support

- One public and member comment received
 - ▣ One from the developer providing comments related to validity testing for measure #0507
- No member expressed support or non-support

Neurology Contact Information

- NQF Project Team:
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Behavioral Health and Substance Use Spring 2021 Review Cycle

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Behavioral Health and Substance Use Standing Committee Recommendations

- **One measure reviewed for Spring 2021**
 - Not reviewed by the Scientific Methods Panel
- **One measure recommended for endorsement**
 - **3175** Continuation of Pharmacotherapy for Opioid Use Disorder (University of Southern California) (Maintenance)

Behavioral Health and Substance Use: Public and Member Comment and Member Expressions of Support

- No comments received
- No NQF members provided expressions of support or non-support for the measure under review

Behavioral Health and Substance Use Contact Information

- NQF Project Team:
 - ▣ Tamara Funk, MPH, Director
 - ▣ Erin Buchanan, MPH, Manger
 - ▣ Yemsrach Kidane, PMP, Project Manager
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Public and Member Comment

Break (11:50-12:30)



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Prevention and Population Health Spring 2021 Review Cycle

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Prevention and Population Health Standing Committee Recommendations

- **One measure reviewed for Spring 2021**
 - The measure was not reviewed by the Scientific Methods Panel
- **One measure was recommended for endorsement**
 - **#3620** Adult Immunization Status (National Committee for Quality Assurance [NCQA]) (new)

Prevention and Population Health Public and Member Comment and Member Expressions of Support

- No comments were received
- No NQF members provided expressions of non-support for the measure under review

Prevention and Population Health Contact Information

- NQF Project Team:
 - ▣ Poonam Bal, MHA, Senior Director
 - ▣ Matt Pickering, PharmD, Senior Director
 - ▣ Oroma Igwe, MPH, Manager
 - ▣ Kim Murray, Coordinator
 - ▣ Adam Vidal, PMP, Project Manager
 - ▣ Sharon Hibay, DNP, RN, Senior Consultant

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Cost and Efficiency Spring 2021 Review Cycle

CSAC Review

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Cost and Efficiency Standing Committee Recommendations

- **Five measures reviewed for Spring 2021**
 - ▣ **All Five measures were reviewed by the Scientific Methods Panel**
 - ▣ All five measures reviewed passed SMP on reliability and validity
- **Five measures recommended for endorsement:**
 - ▣ **#1598** Total Resource Use Population-based PMPM Index (HealthPartners) (Maintenance)
 - ▣ **#1604** Total Cost of Care Population-based PMPM Index (HealthPartners) (Maintenance)
 - ▣ **#2431** Hospital-Level, Risk-Standardized Payment Associated with a 30-Day Episode-of-Care for Acute Myocardial Infarction (AMI) (Centers for Medicare & Medicaid Services/Yale CORE) (Maintenance)
 - ▣ **#2436** Hospital-Level, Risk-Standardized Payment Associated with a 30-Day Episode-of-Care for Heart Failure (HF) (Centers for Medicare & Medicaid Services/Yale CORE) (Maintenance)
 - ▣ **#2579** Hospital-Level, Risk-Standardized Payment Associated with a 30-Day Episode of Care for Pneumonia (PN) (Centers for Medicare & Medicaid Services/Yale CORE) (Maintenance)

Overarching Issues for Cost and Efficiency Measures

- **Cost and Quality Correlations (measures #2431, #2436, #2579)**
 - The Standing Committee questioned whether the developer was able to demonstrate that the hospitals being measured could demonstrate improvements in costs while ensuring similar or higher levels of quality. Specifically, the Standing Committee was interested in the relationship between performance on the cost and quality measures.
 - Some Standing Committee members expressed concern about possible trade-offs between performing well on the cost measures at the expense of lower-quality performance.
- **Reliability Thresholds (measures #2431, #2436)**
 - The Standing Committee expressed concern that the signal-to-noise reliability statistics and the low reliability thresholds.
 - For several review cycles, the Standing Committee has recognized the challenge of achieving acceptable thresholds for measure score reliability statistics.
- **Social Risk Adjustment (measures #2431, #2436, #2579)**
 - Concern with the way testing was conducted for social risk factors after adjusting for clinical risk factors and the adequacy of the risk model due to the R-squared results.

Cost and Efficiency: Public and Member Comment and Member Expressions of Support

- 3 comments received
 - ▣ All three comments do not support the measures under review (#2431, #2436, #2579)
 - ▣ Two are not supportive due to concerns regarding the signal-to-noise reliability statistics and minimum reliability thresholds (measure #2431 and #2436).
 - ▣ All three comments were not in support of the risk adjustment model and cost and quality correlations (measure #2431, #2436, #2579).
- One NQF member provided expressions of support and non-support for three measures under review.
 - » No members expressed support of the recommend measures for endorsement.
 - » One member expressed non-support of measures #2431, #2436, and #2579.

Cost and Efficiency Contact Information

- NQF Project Team:
 - ▣ Matt Pickering, PharmD, Sr. Director
 - ▣ LeeAnn White, MS, BSN, Director
 - ▣ Monika Harvey, MBA, PMP, Project Manager
 - ▣ Isaac Sakyi, MSGH, Manager
 - ▣ Karri Albanese, BA, Analyst
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All-Cause Admissions and Readmissions Spring 2021 Review Cycle

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All-Cause Admissions and Readmissions Standing Committee Recommendations

- **Four measures reviewed for Spring 2021**
 - All four measures reviewed by the Scientific Methods Panel and passed.
- **All four measures recommended for endorsement:**
 - **#2860** Thirty-day all-cause unplanned readmission following psychiatric hospitalization in an inpatient psychiatric facility (IPF) (CMS/Mathematica Policy Research (MPR)) (Maintenance)
 - **#2880** Excess days in acute care (EDAC) after hospitalization for heart failure (HF) (CMS/Yale CORE) (Maintenance)
 - **#2882** Excess days in acute care (EDAC) after hospitalization for pneumonia (Yale New Haven Health Services Corporation – Center for Outcomes Research and Evaluation (CMS/Yale CORE) (Maintenance)
 - **#3612** Risk-Standardized Acute Cardiovascular-Related Hospital Admission Rates for Patients with Heart Failure under the Merit-based Incentive Payment System (CMS/Yale CORE) (New)

Overarching Issues for All-Cause Admissions and Readmissions Measures

■ Low R-squared

- The Standing Committee raised concern with the low r-squared values and the adequacy of the risk adjustment model due to the low r-squared results.

■ Social Risk Adjustment

- The developer tested certain social risk factors (SRFs) for the risk adjustment model, namely the Agency for Healthcare Research & Quality (AHRQ) Socioeconomic Status (SES) Index and dual eligibility; however, some of the measures under review did not include these SRFs in the final model. (#2880 and #2882)
- The Standing Committee recognized the need to ensure that providers serving people with SRFs are not penalized unfairly by a lack of social risk adjustment.
- CMS commented there is no adjustment for SRFs, such as dual eligibility, at the measure-level, and most of the measures currently used in the Hospital Readmissions Reduction Program (HRRP) stratify payment calculations in accordance with statutory guidance based on dual eligibility.

All-Cause Admissions and Readmissions: Public and Member Comment and Member Expressions of Support

- Four comments were received from two commenters expressing concerns related to measures #2880 and #3612:
 - ▣ Reliability and minimum sample size
 - ▣ Lack of social risk factors within risk adjustment model
 - ▣ Attribution
 - ▣ Unintended Consequences (#3612 only)
 - » Early hospital discharge of heart failure patients (i.e., reducing length of stay and concerns with admission and readmission caps that potentially restrict life-saving care) may contribute to poor health outcomes and accountability burdens.
 - » The focus on utilization and claims data may deemphasize quality and create incentives to up code, avoiding high-risk patients, and increase out of hospital deaths for patients with heart failure.
- No NQF member(s) provided expressions of support or non-support for the measure(s) under review.

All-Cause Admissions and Readmissions Contact Information

- NQF Project Team:
 - ▣ Matthew Pickering, PharmD, Sr. Director
 - ▣ LeeAnn White, MS, BSN, Director
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Cardiovascular Spring 2021 Review Cycle

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Cardiovascular Standing Committee Recommendations

- **Two new measures reviewed for Spring 2021**
 - ▣ **Both measures were reviewed by the Scientific Methods Panel**
 - ▣ Both measures reviewed passed SMP on reliability and validity
- **Both measures recommended for endorsement**
 - ▣ **3610** 30-day Risk Standardized Morbidity and Mortality Composite Following Transcatheter Aortic Valve Replacement (TAVR) (American College of Cardiology) (New)
 - ▣ **3613e** Appropriate Treatment for ST-Segment Elevation Myocardial Infarction (STEMI) Patients in the Emergency Department (ED) (Centers for Medicare & Medicaid Services/Yale CORE) (New)

Cardiovascular: Public and Member Comment and Member Expressions of Support

- No comments were received during the commenting period.
- No NQF member(s) provided expressions of support and non-support for the two measures under review.

Cardiovascular Contact Information

- NQF Project Team:
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Public and Member Comment

CSAC Next Steps

- CSAC Measure Evaluation Meeting: November 30-December 1, 2021
- Appeals period: December 7 – January 5, 2022

Consensus Standards Approval Committee (CSAC) Contact Information

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