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QUALITY FORUM**

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Cancer, Fall 2019 Measure Review Cycle

Post-Comment Standing Committee Meeting

Nicole Williams, MPH, Director

Tamara Funk, MPH, Project Manager

Teja Vemuganti, MPH, Project Analyst

Robyn Y. Nishimi, PhD, Consultant

July 13 & 15, 2020

Welcome



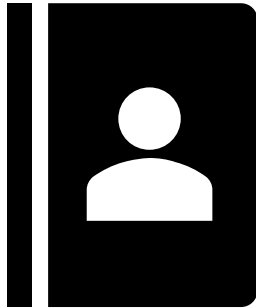
Welcome

- The CenturyLink web platform will allow you to visually follow the presentation
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- Please do not put the call on hold.
- You may submit questions to project staff via the CenturyLink web platform chat function.
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Project Team — Cancer Committee



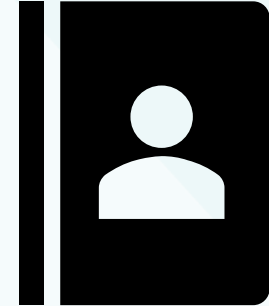
Nicole Williams,
MPH
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Manager



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PhD
Consultant



Agenda

- Attendance
- Consideration of Consensus Not Reached Measures
- Review and Discuss Public Comments
- NQF Member and Public Comment
- Next Steps
- Adjourn

Attendance



Cancer Fall 2019 Cycle Standing Committee

- Karen Fields, MD, (Co-Chair)
- Shelley Fuld Nassa, MPP (Co-Chair)
- Afsaneh Barzi, MD, PhD
- Gregory Bocsi, DO, FCAP
- Brent Braveman, OTR, PhD, FAOTA
- Steven Chen, MD, MBA, FACS
- Heidi Floyd
- Bradford Hirsch, MD
- Jette Hogenmiller, PhD, MN,
APRN/ARNP, CDE, NTP, TNCC, CEE
- Wenora Johnson
- J. Leonard Lichtenfeld, MD, MACP
- Stephen Lovell
- Jennifer Malin, MD, MACP
- Jodi Maranchie, MD, FACS
- Denise Morse, MBA
- Benjamin Movsas, MD
- Robert Rosenberg, MD, FACR
- David J. Sher, MD, MPH
- Danielle Ziernicki, PharmD

Consideration of Measures for which Endorsement Vote was Postponed



0384 Oncology: Medical and Radiation - Pain Intensity Quantified (PCPI)

- **Measure Steward:** PCPI
 - ▣ Maintenance measure
- **Brief Description of Measure:**
 - ▣ Percentage of patient visits, regardless of patient age, with a diagnosis of cancer currently receiving chemotherapy or radiation therapy in which pain intensity is quantified
- **Summary of Discussion and Next Steps**
 - ▣ The Standing Committee vote for overall suitability for endorsement was postponed due to a process error during the discussion of the evidence criterion. Since the evidence is the same for 0384 and 0384e, the discussion on evidence and vote from 0384e can be applied to 0384.
 - ▣ Ultimately, the Committee agreed it was vital to quantify pain. Measure 0384e also passed on evidence.
- **Revote on Overall Recommendation for Endorsement**

Consideration of Consensus Not Reached Measures



0384e Oncology: Medical and Radiation - Pain Intensity Quantified (PCPI)

- **Measure Steward:** PCPI
 - ▣ Maintenance measure
- **Brief Description of Measure:**
 - ▣ Percentage of patient visits, regardless of patient age, with a diagnosis of cancer currently receiving chemotherapy or radiation therapy in which pain intensity is quantified



0384e Oncology: Medical and Radiation - Pain Intensity Quantified (PCPI)

- **Criteria where consensus was not reached: **Validity****
- **Concerns:**
 - The Committee discussed the correlation analysis and questioned whether a hormonal therapy measure was the best choice for testing validity of a pain quantification measure. They also raised concerns about the populations that are captured in this measure, citing a specific example of a patient who is experiencing pain and does not have chemotherapy; would this patient be included? In addition, the Committee questioned whether patients who opt out of chemo but still experience pain and those who receive chemo through other modes (e.g., oral, injection, or at their house) would still be captured by this measure.
- **Summary of Comments Received: 0**
- **Revote on Validity**
 - If validity passes, revote on overall recommendation for endorsement



0223 Adjuvant chemotherapy is recommended, or administered within 4 months (120 days) of diagnosis for patients under the age of 80 with AJCC Stage III (lymph node positive) colon cancer

- **Measure Steward:** Commission on Cancer, American College of Surgeons
 - Maintenance measure
- **Brief Description of Measure:**
 - Percentage of patients, age = 18 and <80 at diagnosis, who have their first diagnosis of cancer (epithelial malignancy) that is lymph node positive and at AJCC stage III, whose primary tumor is of the colon and chemotherapy was recommended or administered within 4 months (120 days) of diagnosis



0223 Adjuvant chemotherapy is recommended, or administered within 4 months (120 days) of diagnosis for patients under the age of 80 with AJCC Stage III (lymph node positive) colon cancer

- **Criteria where consensus was not reached:** Validity
- **Concerns:**
 - The developer did not provide any statistical testing to assess the data quality. Instead, CoC performs annual caseload reviews, and cases are reviewed for coding accuracy. This data is submitted annually to maintain hospital accreditation. The Committee had reservations passing this measure on validity when limited testing information was supplied.



0223 Adjuvant chemotherapy is recommended, or administered within 4 months (120 days) of diagnosis for patients under the age of 80 with AJCC Stage III (lymph node positive) colon cancer

■ Summary of Comments Received: 1 of 2

- The American College of Surgeons Commission on Cancer (ACoS CoC) requires an annual review of a minimum of 10% of the annual caseload of the registry abstracts be performed to verify that abstracted data accuracy, also required of NQF #0219 and NQF #0220, both of which passed validity with the Committee. As this standard of care is included in national guidelines and the accuracy of reporting from registries is validated annually by the ACoS CoC, the Alliance of Dedicated Cancer Centers (ADCC) supports this measure for continued endorsement

■ Summary of Comments Received: 2 of 2

- Remove or note as retired NQF #0223: This measure was in the PCHQR program and reported on Hospital Compare, but has been retired as performance was “topped out.”

■ Revote on Validity

- If validity passes, revote on overall recommendation for endorsement

Review and Discuss Public Comments



0384 Oncology: Medical and Radiation - Pain Intensity Quantified

- **Measure Steward: PCPI**
 - ▣ Maintenance measure
- **Brief Description of Measure:**
 - ▣ Percentage of patient visits, regardless of patient age, with a diagnosis of cancer currently receiving chemotherapy or radiation therapy in which pain intensity is quantified
- **Summary of Comments Received: 1 of 2**
 - ▣ We support the committee's recommendation for continued NQF endorsement, however we have a question that we hope the committee and measure developer will consider. Specifically, we are interested in understanding if the measure considers any role for cancer immunotherapy agents in the measure denominator. While patients may be treated with chemotherapy and immunotherapy in combination, some may be treated with immunotherapy only. In such cases, pain management for patients undergoing only cancer immunotherapy may be missed within this measure.



0384 Oncology: Medical and Radiation - Pain Intensity Quantified

■ Summary of Comments Received: 2 of 2

- The Alliance of Dedicated Cancer Centers (ADCC) supports continued endorsement for NQF #0384. While we believe that the use of Patient-Reported Outcome Measures (PROMs) are the preferred method for collecting meaningful patient data on pain, at this time neither fully developed PROMS nor the systems to capture and this type of measure are robust or prevalent enough for general use. Therefore, agreeing with the Committee that it is vital to quantify pain, we recommend continued endorsement. We also believe both NQF #0384 (Pain Intensity Quantified) and NQF #0383 (Plan of Care) offer utility in the cancer portfolio. These measures are complementary in that it is not possible to determine which patients require a plan of care to address their pain if pain levels are not assessed.

NQF Member and Public Comment

Next Steps



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Activities and Timeline – Fall 2019 Cycle

*All times ET

Meeting	Date, Time
CSAC Review	November 17-18, 2020
Appeals Period (30 days)	November 23-December 22, 2020



Project Contact Info

- Email: cancerem@qualityforum.org
- NQF phone: 202-783-1300
- Project page: <http://www.qualityforum.org/cancer>
- SharePoint site:
<http://share.qualityforum.org/Projects/cancer/SitePages/Home.aspx>

THANK YOU.

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