

## 2019 Mission Highlights



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## This was a momentous year for the National Quality Forum.



We celebrated our twentieth year and reflected on the seminal efforts of the Presidential Commission and the series of events, roundtables, and landmark publications that identified improving healthcare quality as a national priority. Collectively, these efforts launched the modern quality movement as well

SHANTANU AGRAWAL, MD, MPHIL President & Chief Executive Officer

as NQF. In reflecting, two key narratives emerge from the intervening decades.

The first is a narrative of amazing accomplishments. There is no doubt that quality can be measured to save patients from avoidable harm. Bringing together diverse stakeholders to align national health priorities and set standards for quality that improve care and outcomes for all is core to NQF's enduring mission. Our work this past year to close priority gaps in trauma outcomes, opioid use disorder, and the readiness of our health system highlights persistent and emerging needs for safer, high quality care. Endorsement, the Measures Application Partnership, and other NQF programs are vital national resources that bring us all together to overcome common challenges.

The second narrative reminds us of the challenges that remain. NQF has dedicated itself to fostering alignment across the ecosystem—for measurement and improvement—and will continue to lead through efforts such as the National Quality Task Force and high-impact member driven programs such as the National Quality Partners Leadership Consortium and Action Teams. We will continue to lead efforts to harmonize quality initiatives across public and private sectors through programs such as the Core Quality Measures Collaborative that are essential to addressing burden for providers and patients alike.

We will also continue to champion practices and standards that move us closer to high value care. Though the nation is making progress toward reflecting patient needs and goals as part of the transition to value, this progress is too slow and insufficiently tangible. Activating consumers who are empowered, equal partners is foundational to personcentered, high value care. NQF is dedicated to helping people make important care decisions through efforts such as the Hospital Star Ratings Summit, our work in shared decision making, and our Call to Action for serious mental illness.

Finally, health equity must be addressed. As one of the original aims for quality improvement, too little has been achieved to reduce health disparities. For over ten years, NQF has led contributions to this field, and this year has been no different. Integrating social determinants of health data and using our payment system as a lever for change are powerful opportunities around which we conducted important projects and published recommendations for the field. With your help, we will continue efforts to push these recommendations into action.

We value the tremendous leadership, expertise, and dedication of all who engage in our work. NQF's mission is important because it reflects the collective commitment of all stakeholders to work together to make care better and safer for every person, in every community. We look forward to collaborating with you in 2020 for another momentous year.

# Measuring Performance

Driving Evidence-Based Improvements



### The Consensus Development Process

The careful evaluation and endorsement of quality standards is central to NQF's ongoing mission to improve the quality of care across our country. Using our Consensus Development Process (CDP), NQF fosters alignment across the array of stakeholders around specific standards that can be used to measure and publicly report healthcare quality to drive improvement. The CDP uniquely gives all stakeholders—including consumers, patients, caregivers, and purchasers—an equal voice in evaluating and endorsing measures.

Over the past 15 years, NQF's CDP has evolved to ensure that evaluation of candidate measures continues to follow best practices and embrace innovation in performance measurement and standards-setting.

To increase the responsiveness of the CDP to stakeholder needs, NQF hosted a LEAN process improvement event in 2017 to explore opportunities for a more agile and efficient CDP for measure endorsement. The outcome has seen the endorsement time reduced to seven months.

NQF continues to explore new opportunities for enhancing transparency in the CDP's review of measurement and decision making process.

**110** Measures Endorsed in 2019

## 28 experts

with methodological expertise. The SMP provides NQF's standing committees with evaluations of submitted measures' scientific acceptability.

### **CDP Reports Released in 2019**

All-Cause Admissions and Readmissions Final Report Spring 2018 Cycle

All-Cause Admissions and Readmissions Final Technical Report Fall 2018 Cycle

Behavioral Health and Substance Use Final Report Spring 2018 Cycle

Behavioral Health and Substance Use Final Report Fall 2018 Cycle

Cancer Final Technical Report Fall 2018 Cycle

Cardiovascular Final Report Spring Cycle 2018

Cardiovascular Final Report Fall 2018 Cycle

Cost and Efficiency Final Report Spring 2018 Cycle

Cost and Efficiency Final Report Fall 2018 Cycle

Geriatrics and Palliative Care Final Technical Report Fall 2018 Cycle Patient Experience and Function Final Report Spring 2018 Cycle

Patient Experience and Function Final Technical Report Fall 2018 Cycle

Patient Safety Final Technical Report Fall 2018 Cycle

Prevention and Population Health Final Report Spring 2018 Cycle

Prevention and Population Health Final Report Fall 2018 Cycle

Primary Care and Chronic Illness Final Report Spring 2018 Cycle

Primary Care and Chronic Illness Final Technical Report Fall 2018 Cycle

Renal Technical Report Spring 2018 Cycle Fall 2018 Cycle

Surgery Final Report Spring 2018 Cycle

Surgery Final Technical Report Fall 2018 Cycle

### The Scientific Methods Panel

The Scientific Methods Panel (SMP) was established in response to stakeholder requests to help ensure higher-level and more consistent evaluation of the scientific acceptability of complex measures, as well as to encourage greater engagement and participation by consumers, patients, and purchasers on NQF standing committees.

The panel has two specific charges:

- 1. Evaluate complex measures for the criterion of scientific acceptability, with a focus on reliability and validity analyses and results.
- 2. Serve in an advisory capacity to NQF on methodologic issues related to measure testing, risk adjustment, and emerging measurement approaches.

As measures have become more complex, a myriad of issues have emerged related to measure testing, data sources and assessment of reliability and validity.

The panel's guidance is critical input for NQF standing committees' endorsement recommendations, especially for outcome measures and cost or resource use measures.

### **5** Medicare Advantage & Medicare Prescription Drug Measures

2019 marks the first time MAP considered and provided recommendations on these Medicare programs.

### **Measure Applications Partnership**

NQF's Measure Applications Partnership (MAP) convened for the ninth consecutive year in 2019 to provide multistakeholder recommendations to the U.S. Department of Health and Human Services (HHS) on the selection of performance measures for federal health programs.

MAP first convened in 2011 as a direct result of Congress recognizing the benefit of an approach that encourages consensus building among diverse private and public sector stakeholders. Importantly, it provides a coordinated look across federal programs at performance measures being considered, promoting alignment across the system.

One of MAP's key initiatives is to convene stakeholders for an intensive annual review of the quality measures being considered by HHS for almost 20 federal health programs. Today, MAP includes more than 150 healthcare leaders and experts from nearly 100 private and public sector organizations. MAP volunteers represent consumers, purchasers, employers, health plans, clinicians and providers, communities and states, suppliers, and federal agency liaisons. The MAP hospital, clinician, and post-acute and long-term care workgroups identify measurement gaps across settings, prioritize measures, and recommend areas for alignment.

MAP's processes are transparent. All MAP meetings are open to the public, with reports and other materials made available on NQF's website. Public comments are sought on MAP recommendations, and MAP reviews and considers every comment received.

Access the MAP deliberations and recommendations on the NQF website and look for the 2019-2020 report in early 2020.

"The NQF MAP coordinating committee and workgroups provide CMS with diverse input of perspectives from the array of healthcare stakeholders in high-opportunity measurement areas. This group is critical to identifying and exploring opportunities for key subpopulations and ways to address priority gaps for the Medicare-Medicaid enrollee subpopulations."

MICHELLE SCHREIBER, MD, Director, Quality Measurement & Value-Based Incentives Group, Centers for Medicare and Medicaid Services "The NQF Consensus Standards Approval Committee is a unique gathering of consumers and purchasers who come together to set guidance for evaluation and endorsement criterion of measures to advance healthcare safety, quality and affordability. It was my great honor to serve as chair of such a prestigious committee and to work with so many diverse colleagues from across the healthcare community all committed to setting standards that deliver the greatest value to all."

LINDA SCHWIMMER, JD, 2019 CSAC Chair, President & CEO, New Jersey Health Care Quality Institute

### **Consensus Standards Approval Committee**

The Consensus Standards Approval Committee (CSAC) is an advisory committee charged with bringing diverse perspectives that align and guide measurable health improvements across the healthcare eco-system. It provides strategic insight and guidance to enhance the field as well as playing a critical role reviewing measures in the endorsement process. CSAC members represent a consumer and purchaser majority and may serve a maximum of two, two-year terms with terms staggered to ensure continuity.

### CSAC serves as an independent body for reviewing and endorsing measures, ensuring that the CDP process was upheld and that all stakeholder voices had an opportunity to express their concerns.

The committee includes individuals with expertise in measure development, implementation, and reporting as well as individuals with the perspectives of consumers, patients, and purchasers. All CSAC members have a fiduciary responsibility to patients and the American public, and serve as individuals, not representatives of a particular organization, association, or other group.

### **Core Quality Measures Collaborative**

Originally founded in 2015, the Core Quality Measures Collaborative (CQMC) is a collaboration with America's Health Insurance Plans (AHIP) and Centers for Medicare and Medicaid Services (CMS). The CQMC is a broad-based coalition of healthcare leaders to ensure that the right quality measures are in place across all payers to deliver results that will lead to a stronger, better healthcare system and reduce clinician burden.

The CQMC is committed to:

- Promoting quality measure alignment across the public and private healthcare sectors.
- Reducing the reporting burden that measurement causes for providers.
- Improving care quality and health outcomes.
- Offering consumers actionable information about provider performance to help them make decisions about where to receive their care.

# Promoting Person-Centered Care

Making Healthcare Work for Every Person



### **Strengthening Quality Star Ratings System**

NQF self-funded a convening of diverse national health and healthcare experts to ensure the Star Ratings system is accurate and actionable as a meaningful vehicle to help patients confidently engage in important care decisions.

Three recommendations for improvement:

- 1. Be clear about the program intent and goals.
- 2. Be transparent about what the Star Ratings do and do not convey.
- 3. Design data presentation to meet consumer priorities and other user needs.
- The full Summit deliberations are available on the NQF website.

"We recognize that informed consumers are critical to advancing an equitable and patient-centered healthcare delivery system. NQF provides a unique forum for all voices to collaborate to strengthen this important resource to support patients in their healthcare decisions."

NANCY FOSTER, Co-Chair of the Hospital Quality Star Rating Summit TEP, Vice President for Quality & Patient Safety Policy, American Hospital Association

### Approximately **30 million individuals,**

or 15 percent of adults in the United States, suffer from chronic kidney disease.

**SOURCE:** United States Renal Data System. Annual Data Report Highlights. https://www.usrds.org/adrhighlights.aspx.

### **Catalyzing Person-Centered Planning**

Improving outcomes for every person is at the core of all quality improvement action, but requires proactive understanding and effective incorporation of individual goals, preferences, values, and resources. Person-centered planning and coordination play key roles in providing long-term services and supports.

In partnership with the Department of Health and Human Services (HHS), NQF is establishing definitions and core competencies to develop a robust quality measure set that interfaces with other healthcare quality measures across provider types, settings, payers, delivery systems, programs, conditions, and populations to establish a foundation for person-centered planning in performance measurement.

Look for the final report in summer 2020.

**Over 50%** of Americans 65 and older are projected to develop disabilities that require long-term services and supports.

**SOURCE:** U.S. Department of Health and Human Services. Office of The Assistant Secretary for Planning and Evaluation. Long-Term Services and Supports for Older Americans: Risks and Financing Research

### **Advancing Patient-Centered Renal Care**

Developed and published in 2019, *Supporting Shared Decision Making for Individuals with Chronic Kidney Disease and End-Stage Renal Disease* is a practical resource from NQF with guidance and tools to help healthcare systems, providers, and patient advocacy organizations use shared decision making effectively to improve the quality of care in chronic kidney disease and end-stage renal disease.

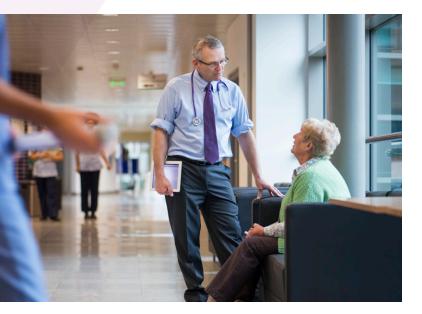
Sponsored by Otsuka Pharmaceutical Development & Commercialization, Inc. Learn more about how this valuable guide can help you make a difference for those struggling with chronic kidney disease.

"Chronic kidney disease and end-stage renal disease are complex in nature and present unique challenges for those faced with determining the best route of care, often under time-sensitive or other extenuating circumstances. Early inclusion of the patient voice is imperative in improving the quality and type of care that reshapes the lives of those affected."

KATHLEEN GIBLIN, RN, Senior Vice President, Quality Innovation, NQF

# Advancing the Transition to Value

Promoting Efficient, Appropriate, Person-Centered Care



## 92 individuals and organizations

participated in the National Quality Task Force including policy leaders, consumers, patients, employers, payers, providers, technology experts, innovators, healthcare researchers and more across both public and private sectors.

### NQF Taps Healthcare Industry Experts to Drive Value Through the Next Generation of Quality

NQF brought together key experts, innovators, and leaders representing a broad, highly diverse set of stakeholders to form the National Quality Task Force with the mission of identifying actionable opportunities to improve alignment across the healthcare delivery system to achieve better health outcomes and value for every person. The Task Force was organized into five subcommittees with an overarching Core Committee and panel of Expert Advisors to provide a comprehensive, system-wide perspective on progress in quality improvement since the 1999 IOM report *To Err is Human* and what work remains.

Through a yearlong effort, these experts put forth priority recommendations to change the trajectory of healthcare quality in this nation working toward a vision where every person in every community can expect to consistently and predictably receive high quality care by 2030.

Look for the final report in spring 2020.

"As healthcare leaders, we must maintain an unrelenting focus on identifying and driving cultural and system changes necessary to normalize the provision of high quality care for every person, every time, everywhere. We must make today's exemplars the norm."

KENNETH W. KIZER, MD, MPH, Chief Healthcare Transformation Officer and Senior Executive Vice President, Atlas Research Founding NQF President & CEO

## Despite having the most expensive healthcare system,

the United States ranks last overall among 11 industrialized countries on measures of health system quality, efficiency, access to care, equity, and healthy lives.

**SOURCE:** Commonwealth Fund, Mirror, Mirror on the Wall: How the Performance of the U.S. Health Care System Compares Internationally, 2014 Update

### Benchmarking Performance in Commercial Accountable Care Organizations (ACOs)

NQF collaborated with the Integrated Healthcare Association and facilitated the development and pilot of five benchmarking principles that enable valid performance comparisons across commercial ACOs, and produces actionable data to inform healthcare decision making and drive meaningful improvements in care.

Benchmarking principles to provide context to quality, utilization, and cost information for commercial ACOs:

- Meet multiple stakeholder needs.
- Enable meaningful comparisons and allow for program evolution.
- Provide critical context for accurate interpretation of results.
- Incorporate appropriate performance targets and improvement goals.
- Be simple to implement and stable over time.

### Moving Beyond Individual Measures: Measure Sets and Measurement Systems

As the nation's healthcare delivery system transitions to value-driven models of care, measurement must support a more comprehensively informed view of quality and more aggressively drive measure alignment across stakeholders. To support this transition, NQF convened a Technical Expert Panel to establish guidance and criteria for measure sets and measurement systems.

Measure sets and measurement systems should provide accurate assessments of quality and reliable results to drive performance improvement, appropriately influence payment, and empower patients and other users to make more informed healthcare decisions.

Learn more about NQF's work in this area by accessing the issue brief on our website.

### **GOALS FOR HIGH VALUE CARE**

	MEDICAID	COMMERCIAL	MEDICARE ADVANTAGE	TRADITIONAL MEDICARE
2020	15%	15%	30%	30%
2022	25%	25%	50%	50%
2025	50%	50%	100%	100%

For 20 years, NQF's efforts have been foundational to a national movement to improve the safety, quality, and value of healthcare. In 2019, the Health Care Payment Learning & Action Network (HCLAN) published new goals to accelerate adoption of Alternative Payment Models (APMs) that our efforts work in lockstep to advance.

HCLAN Goals for the percentage of healthcare tied to quality and value through population health-based APMs (source: https://hcp-lan.org/)

# Achieving Health Equity

Improving Health Outcomes Requires Equitable Care



Food insecurity is a social determinant of health that affects **1 in 9 American** households.

**SOURCE:** Coleman-Jensen A, Rabbitt MP, Gregory C, et al. Household Food Security in the United States in 2018. Washington, DC: USDA Economic Research Service; 2019

### Addressing Social Determinants of Health Through Quality and Payment Innovation

Resources directly linked to effective care are not equally accessible or integrated with healthcare delivery across communities, populations, socioeconomic, racial, and ethnic groups. The contributing factors, known as social determinants of health (SDOH), are community-level conditions in the environments in which people live, work, play, worship, and age. Over the last decade, there has been growing recognition that a patient's ZIP code is a better indicator of his or her health outcomes than genetic code.

Advancing quality and payment innovation in SDOH will require multistakeholder collaboration and partnerships across sectors, systems, and settings. NQF is calling on payers, clinicians, community-based organizations, hospitals and health systems, policymakers, health system leaders, employers/purchasers, and federal, state, and local agencies to:

- 1. Align policies, funding, and reimbursement.
- 2. Develop consistent measures for SDOH.
- 3. Execute the SDOH data integration recommendations.
- 4. Provide funding to test, collect data, assess, and measure community-based models and interventions.
- 5. Provide incentives and rewards.



Download the National Call to Action and learn more on our website.

"We have a significant opportunity to improve the physical and economic health of the country by changing our priorities and focusing on how we address social determinants of health. By working together to address the unique needs of the places that we live, we can build healthier communities throughout our nation."

GARTH GRAHAM, MD, MPH, Vice President of Community Health & Impact, CVS Health, President, Aetna Foundation

### Integrating Food Insecurity Within Clinical Care

Healthcare quality improvement efforts have largely excluded food insecurity. Food insecurity contributes to diabetes, stroke, cancer, hypertension, asthma, chronic kidney disease, and other chronic conditions.

Establishing performance measures that address food insecurity within the clinical setting is critical to improving health and health outcomes for individuals with food insecurity. NQF is facilitating the development of performance measures to integrate food insecurity within clinical care.

Look for a guide in early 2020 for best practices to support measure implementation.

### NQF'S COMMITMENT TO HEALTH EQUITY

### Accelerating the Integration of SDOH Data into Clinical Practice

NQF brought together more than 40 diverse members who shared successful approaches to SDOH data integration, which supported providers and communities in their efforts to eliminate health disparities.

Download the Action Brief.

# **20%** The estimate of an individual's health directly tied to clinical care.

**SOURCE:** The County Health Rankings & Roadmaps. https://www. countyhealthrankings.org/resources/county-health-rankings-model



## Responding to National Priorities

**Collaborating Toward Better Health Outcomes** 

### Leveraging Quality Measurement to Improve Rural Health

Healthcare providers in rural areas face many unique challenges in reporting quality measurement data and implementing care improvement efforts. NQF joined forces with the Department of Health and Human Services (HHS) and the Centers for Medicare and Medicaid Services (CMS) to explore challenges and opportunities to improve the quality of healthcare in rural communities. NQF's Technical Expert Panel addressed several key issues including recommendations to overcome low case volume, such as:

- 1. "Borrowing strength" by systematically incorporating additional data.
- 2. Recognizing the need for robust statistical expertise and computational power.
- 3. Reporting exceedance probabilities.
- 4. Actively anticipating the potential for unintended consequences of measurement.
- Learn more by downloading the MAP 2019 Recommendations from the Rural Health Technical Expert Panel Final Report

"NQF is leading efforts to close gaps essential to high value care by bringing diverse stakeholders together in a trusted, collaborative environment to address timely issues of national interest such as maternal morbidity and mortality, serious mental health, opioid use disorder, and more."

WUNMI ISIJOLA, MPH, Senior Managing Director, Quality Measurement, NQF

### Improving Access to High Quality Care for Individuals with Serious Mental Illness

Behavioral, mental, or emotional disorders that seriously impair everyday function and major life activities not only affect the quality of life for the individuals who experience it and those who surround them, they also have significant negative effect on the U.S. economy.

To address these challenges, NQF's Action Team called for removing barriers that currently prohibit individuals with serious mental illness from getting the high quality care they need. Specifically, NQF's Call to Action encourages organizations across the healthcare system to:

- Fight stigma and discrimination.
- Promote early intervention.
- Advance clinical education and knowledge to support effective behavioral health treatment and practices.
- Improve client and caregiver engagement.
- Reinforce parity.
- Address behavioral health workforce shortages.

Nearly **10 million** adults in the United States experience mental illness.

**SOURCE:** National Institute of Mental Health. Mental Illness. https://www. nimh.nih.gov/health/statistics/mental-illness.shtml#part\_154788.

### More than **60,000 women** each year experience severe unexpected adverse pregnancy outcomes, such as hemorrhage or hysterectomy.

**SOURCE:** Howell E.A. (2019) Reducing Disparities in Severe Maternal Morbidity and Mortality. Clinical Obstetrics and Gynecology. 61(2), 387-399.

### Addressing Maternal Morbidity and Mortality Outcomes

The U.S. is the only industrialized nation with rising maternal mortality rates. Funded by the Centers for Medicare & Medicaid Services (CMS), NQF developed actionable approaches to improve maternal health outcomes, including innovative quality measurement strategies to enhance care.

Look for the Environmental Scan Report in 2020.

### Increasing Access to Medication-Assisted Treatment

Despite its demonstrated success, medication-assisted treatment (MAT) remains greatly underused as a powerful treatment to fight the opioid epidemic. MAT is an effective, evidence-based approach that uses Food and Drug Administration-approved medications in combination with behavioral therapies. Individuals with Opioid Use Disorder who receive certain types of MAT are less likely to die from an overdose, have higher treatment retention rates, demonstrate improved social functioning, and result in better long-term outcomes.

With support from the Blue Cross and Blue Shield Association, NQF developed and released a practical guide to expanding Medication-Assisted Treatment for Opioid Use Disorder.

### Tackling the Nation's Opioid Epidemic

More than 2.1 million people have Opioid Use Disorder, a condition connected to the frequent misuse of substances like common pain medications and illegal drugs. Annual overdose deaths are more lethal than U.S. fatalities related to guns and automobiles, the Vietnam War, and the HIV/AIDS epidemic.

This national priority highlights the important role quality improvement and measurement play in community efforts to stem the epidemic. NQF's Technical Expert Panel published an **environmental scan** on Opioids and Opioid Use Disorder quality measures that identified four key domains for quality measurement:

- Pain Management
- Treatment of Opioid Use Disorders
- Harm Reduction
- Social Issues

Look for the final report in early 2020.

"With thousands of Americans struggling with an opioid addiction, it's critical that proven, evidence-based treatments are available for them when they need it.

JENNIFER ATKINS, MBA, Vice President of Network Solutions, Blue Cross Blue Shield Association

### GUIDING QUALITY IMPROVEMENT THROUGH ACTION

There are currently eight comprehensive NQF resources available to the public and NQF Members. Each guide focuses on a different national priority, serving as a practical step-by-step resource for improving healthcare quality and safety across the United States.



### OPIOID STEWARDSHIP

The opioid epidemic in America is a public health crisis with devastating consequences. Developed with input from more than 40 diverse experts and patients, the NQP Playbook<sup>™</sup> provides essential guidance for healthcare organizations and clinicians across care settings committed to appropriate pain management strategies and opioid stewardship.



### REDESIGNING CARE: A HOW-TO GUIDE FOR HOSPITALS AND HEALTH SYSTEMS SEEKING TO IMPLEMENT, STRENGTHEN AND SUSTAIN TELEBEHAVIORAL HEALTH

Telebehavioral health expands access, improves outcomes, and lowers costs. The strategies, interventions, tools, and resources in this guide will allow hospital and health systems to provide better care to a large number of people who need behavioral health services, but do not have access to it.



### SHARED DECISION MAKING IN HEALTHCARE

Shared decision making (SDM) is a process of communication in which clinicians and patients work together to make optimal healthcare decisions that align with what matters most to patients. Developed with input from a diverse panel of experts and patients, this NQP Playbook<sup>™</sup> provides practical guidance for healthcare organizations and clinicians across care settings to implement and strengthen shared decision making—making it a reality for all patients and a standard of care nationwide.



### SUPPORTING SHARED DECISION MAKING FOR INDIVIDUALS WITH CHRONIC KIDNEY DISEASE AND END-STAGE RENAL DISEASE

Nearly 30 million individuals in the United States are living with chronic kidney disease (CKD) or end-stage renal disease (ESRD). This NQP Playbook<sup>™</sup> was developed with input from more than 20 diverse experts and patients to offer evidence-driven resources, tangible solutions, and actionable recommendations to implement and expand patient-centered approaches to treating CKD and ESRD.



### ENHANCING ACCESS TO MEDICATION-ASSISTED TREATMENT

Healthcare delivery organizations, practitioners, payers, and community organizations can use this resource and make a difference in the lives of patients, families, and communities by embracing actions that expand and strengthen this proven treatment approach for Opioid Use Disorder (OUD). This guide includes innovative and promising practices, solutions to common barriers, and tools and resources to support the use of evidence-based treatment for the millions of Americans who are affected by OUD.



### IMPROVING ACCESS TO HIGH-QUALITY CARE FOR INDIVIDUALS WITH SERIOUS MENTAL ILLNESS

Behavioral health and mental illness are major public health issues affecting millions of Americans every day, and approximately 10 million adults each year experience a serious mental illness (SMI) in the United States. This NQP Playbook™ will help inform the actions of healthcare delivery organizations, such as health systems, hospitals, outpatient centers, and behavioral health clinics, to provide high-quality care for individuals with SMI.



### ANTIBIOTIC STEWARDSHIP IN POST-ACUTE AND LONG-TERM CARE

According to the U.S. Centers for Disease Control and Prevention, nearly 75 percent of the antibiotics in nursing homes are prescribed inappropriately. To address this issue, the Centers for Medicare and Medicaid Services updated its conditions of participation for long-term care facilities to include requirements related to antibiotic stewardship. Crafted with input from more than 50 diverse experts and patients, the NQP Playbook™ offers practical strategies and useful resources for implementing high-quality antibiotic stewardship programs in post-acute and long-term care facilities nationwide.



### ANTIBIOTIC STEWARDSHIP IN ACUTE CARE

Antibiotics are powerful drugs to treat serious infections. However, decades of overprescribing and misuse have resulted in bacteria that are increasingly resistant to these potent drugs, creating a growing threat of new superbugs that are difficult, and sometimes even impossible, to treat. This NQP Playbook™ is designed to help hospitals and health systems strengthen existing antibiotic stewardship initiatives or create antibiotic stewardship programs from the ground up. This complimentary NQP Playbook™ offers practical strategies for implementing high-quality antibiotic stewardship programs in hospitals nationwide.

# The Driving Force Behind NQF Action

### **BOARD OF DIRECTORS**



"It's been an absolute privilege to work with colleagues dedicated to improving healthcare outcomes for every person. There is truly no place like NQF, where healthy collaboration among the full array of perspectives inspires better, safer care across the nation."

JIM CHASE, MHA, Chair, NQF Board of Directors

### **MEMBERS (VOTING)**

**Jim Chase, Chair** Senior Advisor, Network for Regional Healthcare Improvement

Jonathan Perlin, Vice Chair President, Clinical Services and Chief Medical Officer, Hospital Corporation of America, Inc.

**Cristie Upshaw Travis,** *Treasurer* Chief Executive Officer, Memphis Business Group on Health

**Elizabeth Fowler**, *Secretary* Executive Vice President for Programs, The Commonwealth Fund

Carol Cronin Executive Director, Informed Patient Institute

#### Lee Fleisher

Professor and Chair Anesthesiology, University of Pennsylvania

Martha "Meg" Gaines, Director, Center for Patient Partnerships Distinguished Clinical Professor of Law, University of Wisconsin Law School

Lance Lang Chief Medical Officer, Covered California

#### **Carolyn Pare**

President & Chief Executive Officer, Minnesota Health Action Group

#### Jack Resneck

Professor and Vice Chair of Dermatology, UCSF School of Medicine, Core Faculty, Institute for Health Policy Studies UCSF Secretary Board of Trustees, American Medical Association Lewis G. Sandy Executive Vice President, Clinical Advancement, UnitedHealth Group

David Shahian Vice President, Center for Quality and Safety, Massachusetts General Hospital

Adam Thompson Regional Partner Director, Northeast-Caribbean AIDS Education and Training Centers, South Jersey Regional Partner Kennedy Health Alliance – Infectious Diseases

#### Knitasha Washington President and Chief Executive

Officer, ATW Health Solutions

### **EX OFFICIO (VOTING)**

Shantanu Agrawal President and Chief Executive Officer, National Quality Forum

### Linda Schwimmer

Chair, Consensus Standards Approval Committee President and Chief Executive Officer, New Jersey Health Care Quality Institute

### FEDERAL GOVERNMENT MEMBERS (VOTING)

### Thomas J. Engels

Administrator, Health Resources and Services Administration U.S. Department of Health and Human Services

#### DESIGNEE: John Snyder

Chief Medical Officer, Office of Planning, Analysis and Evaluation, Health Resources and Services Administration

#### Gopal Khanna

Director, Agency for Healthcare Research and Quality

### DESIGNEE: Nancy J. Wilson

Senior Advisor to the Director, Agency for Healthcare Research and Quality

#### Robert R. Redfield

Director, Centers for Disease Control and Prevention

#### **DESIGNEE:** Peter A. Briss

U.S. Public Health Service Medical Director, National Center for Chronic Disease Prevention and Health Promotion

### FEDERAL GOVERNMENT MEMBERS (NON-VOTING)

#### Seema Verma

Administrator, Centers for Medicare & Medicaid Services

#### **DESIGNEE:** Kate Goodrich

Director, Office of Clinical Standards and Quality, Centers for Medicare & Medicaid Services

"NQF has the unique ability to pull together the diverse voices necessary to provide the collective perspective to chart the path for improving the quality of care in our country. It is an honor to work with such a committed group of colleagues to advance a mission to improve healthcare outcomes for every person in every community. We are grateful for the time and support our members and others contribute to our shared mission. We look forward to hearing your voice as part of the NQF community."

JONATHAN B. PERLIN, MD, PHD, MSHA, Vice Chair, NQF Board of Director

### FRIENDS OF NQF Supporting an Enduring Quest for Quality

The Friends of the National Quality Forum is an invaluable voluntary coalition of organizations committed to enhancing the nation's quality of care through NQF's mission. The diverse membership represents consumers, purchasers, healthcare providers, clinicians, and health plans. The Friends of NQF champion continued support for NQF to improve healthcare quality.

NQF deeply appreciates the Friends of NQF's commitment to improving the quality of care for every person in every community across the nation. We applaud their work and welcome others to join this inspiring coalition.



"We are deeply committed to advancing quality healthcare and will continue advocating for Congress to support NQF in improving healthcare for all Americans."

CHIP KAHN, MPH, Co-Chair, Friends of NQF



"Friends of NQF provides a place for diverse healthcare stakeholders to come together to address a common vision of high quality and safe healthcare delivery." DEBRA NESS, MS, Co-Chair, Friends of NQF

### **CO-CHAIRS:**

Federation of American Hospitals Chip Kahn President & CEO

National Partnership for Women and Families Debra Ness President

### STEERING COMMITTEE MEMBERS

American Academy of Family Physicians Doug Henley *EVP, CEO* 

American Academy of Orthopaedic Surgeons William Shaffer Medical Director

American College of Physicians Shari Erickson VP, Gov't. Affairs & Medical Practice CMO

American Society of Nephrology Rachel Meyer Director of Policy, Government Affairs

America's Essential Hospitals Bruce Siegel President, CEO

America's Health Insurance Plans Elizabeth Goodman EVP, Government Affairs and Innovations Blue Cross Blue Shield Association Justine Handelman Sr. VP of Policy

**Compassus** Craig Jeffries *SVP, Public Policy* 

Health Leadership Council Mary Grealy President

Memphis Business Group on Health Cristie Travis CEO

Patient Family Centered Care Partners Libby Hoy Founder, CEO

**Premier** Blair Childs *SVP, Public Affairs* 

The Leapfrog Group Leah Binder President and CEO

The Health Collaborative Craig Brammer CEO

University of Pennsylvania Health System Lee Fleisher Professor and Chair Anesthesiology

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### **OUR MEMBERS** *Embracing a Shared Commitment to Quality*



MEMBER NATIONAL QUALITY FORUM Driving measurable health improvements together "If you are a healthcare leader in America today, quality has to be at the top of your agenda. And if quality is at the top of your agenda, then you need to be an NQF Member."

BRUCE SIEGEL, MD, MPH, President and CEO, America's Essential Hospitals

The over 350 NQF member organizations represent all voices in every sector of health and healthcare—patients and caregivers, consumers, payers, specialty societies, measure developers, federal partners, purchasers, life sciences companies, providers, healthcare researchers, and more. Members continually demonstrate their shared commitment to the NQF mission through engagement and service. Whether serving as subject matter experts on steering committees, advancing and participating in educational programs, networking at the Annual Conference, participating as Leadership Consortium members and on Action Teams, or leading through governance, Members are the driving force behind NQF's mission to advance measurable health improvements.

Together, we do the work that enhances healthcare value, makes patient care safer, and results in better outcomes.

Learn more about the NQF membership experience on our website.

Welcoming New Members

ATW Health Solutions, Inc. CareFirst BlueCross BlueShield

Covered California

Contra Costa Health Services

Emergency Nurses Association

HonorHealth

Kindred Healthcare

Louise Batz Patient Safety Foundation

National Association of EMS Physicians National Patient Advocate Foundation

Office for People With Developmental Disabilities

OnlyBoth, Inc.

Schizophrenia and Related Disorders Alliance of America

Tennessee Department of Health

Texas Health and Human Services Commission

Walmart

"The diverse composition of NQF's membership is the vibrant fabric behind leading innovative, multistakeholder efforts to improve the quality and experience of care for people across our nation. This is the only place where you can connect with peer leaders on the most important cross-cutting quality priorities and clinical topics to drive better outcomes for everyone."

JONATHAN SULLIVAN, Vice President, Product and Membership Design, NQF

### QUALITY POLICY FELLOWSHIP

### Member-Exclusive Program Launched

In 2019, NQF launched an exclusive opportunity for rising healthcare leaders from NQF member organizations that work directly with NQF leadership and programs to gain exposure to the quality improvement and policy arena at the highest level. This one-year program will allow participants to fully immerse themselves in healthcare quality improvement policy, as well as publish original work and academic thought leadership.

We are grateful to all the nominees and their sponsoring organizations for putting in the substantial effort to provide detailed, thoughtful applications. We look forward to opening the program to new participants in fall 2020.

### Meet the Inaugural NQF Quality Policy Fellows



### SARITA A. MOHANTY, MD, MPH, MBA

### *Vice President of Care Coordination for Medicaid and Vulnerable Populations, Kaiser Permanente*

Dr. Sarita A. Mohanty directs efforts at a national level to identify leading care coordination and care delivery models and facilitate the spread of those models across Kaiser Permanente's portfolio for Medicaid and vulnerable members in all regions and states. Prior to this role, Dr. Mohanty was the Regional Executive Director, Medi-Cal Strategy and Operations for Kaiser Foundation Health Plan, Northern California.

Dr. Mohanty has over 20 years of experience in healthcare delivery, utilization management, care management, quality improvement, disease management, and health services research, including service on several state and national committees and boards. Dr. Mohanty earned

her bachelor's degree from the University of California, Berkeley, her medical degree from Boston University School of Medicine, and her Master's in Public Health from Harvard University. In June 2012, Dr. Mohanty earned her MBA from the UCLA Anderson School of Management. Dr. Mohanty currently practices as an internal medicine physician at the Kaiser Permanente Oakland Adult Medicine clinic.



### AMANDA VAN VLEET, MPH

### Senior Program Analyst for Quality and Population Health, North Carolina Department of Health and Human Services

Amanda Van Vleet is a Senior Program Analyst at the Division of Health Benefits (NC Medicaid) in the North Carolina Department of Health and Human Services. She leads the design, implementation, and oversight of Healthy Opportunities (social drivers of health) and value-based payment initiatives for NC Medicaid. These initiatives include the Healthy Opportunities pilots in North Carolina's 1115 waiver, and the design and implementation of a Medicaid Accountable Care Organization (ACO) program.

Prior to this role, Amanda was the Program Design and Payment Lead for the Medicare

Diabetes Prevention Program model expansion at the Center for Medicare and Medicaid Innovation (CMMI). She has also held roles at the Kaiser Family Foundation, the Center for Healthcare Strategies, and the U.S. House of Representatives. She has over 10 years of health policy, programs, and research experience focused on healthcare payment and delivery system transformation for high-need populations. Amanda holds an MPH in Health Policy and Management from Columbia University's Mailman School of Public Health and a Bachelor of Business Administration (BBA) from Emory University's Goizueta Business School.

### NATIONAL QUALITY PARTNERS™ LEADERSHIP CONSORTIUM

The National Quality Partners<sup>™</sup> (NQP<sup>™</sup>) fosters an active forum for National Quality Forum members to connect, collaborate, and provide thought leadership on quality improvement strategies to achieve national health and healthcare quality goals. The NQP Leadership Consortium is a prestigious, active forum of annually selected NQF members committed to influencing meaningful and lasting change on the nation's highest priority healthcare issues. Members of the NQP Leadership Consortium convene to discuss and prioritize some of the nation's most complex, emerging healthcare issues from across the continuum of care.

## The 2019 NQP Leadership Consortium released three priorities for action to guide 2020 NQP initiatives:

- Improving Medication Safety
- Promoting High Quality Home-Based Healthcare
- Preventing Maternal Mortality

### 2019 NQP<sup>™</sup> Leadership Consortium Roster

Chair University of Texas - MD Anderson Cancer Center Ron Walters

*Vice Chair* Vizient, Inc. Robert Dean

Advanced Medical Technology Association (AdvaMed) Steven Brotman

American Association for Physician Leadership Peter Angood

American Case Management Association Debra McElroy

American Hospital Association Nancy Foster

America's Physician Groups Amy Howell Association of Rehabilitation Nurses Terrie Black

BlueCross BlueShield Association Kari Hedges

Bristol-Myers Squibb Company Christopher Dezii

Centers for Disease Control and Prevention Jennifer Fuld

Coalition to Transform Advanced Care (C-TAC) David Longnecker

Council of Medical Specialty Societies Helen Burstin

HCA Healthcare Kenneth Sands

Henry Ford Health System Betty Chu Homewatch CareGivers, LLC Jennifer Ramona

Horizon Blue Cross Blue Shield of New Jersey Paul Alexander

Humana Inc. Misty Roberts

**IBM Watson Health** Lisa Patton

Intermountain Healthcare Shannon Phillips

IPRO Jennifer Edwards

Nursing Alliance for Quality Care Eileen Esposito

Otsuka Pharmaceutical Development and Commercialization, Inc. Thaddeus Flood Partners Behavioral Health Management Selenna Moss

Patient & Family Centered Care Partners, Inc. Libby Hoy

**Telligen** Kate LaFollette

The Joint Commission Margaret VanAmringe

Trinity Health Tammy Lundstrom

URAC Shawn Griffin

Veterans Health Administration Joel Roos

### **2019 ANNUAL CONFERENCE**

Results That Matter in Quality and Value

As the single most comprehensive healthcare quality program in the industry, the 2019 conference featured thought-provoking panels, keynote presentations, and networking opportunities for attendees and partners alike to engage in discussions centered around the challenges and opportunities within the healthcare delivery system and the road ahead for improving patient outcomes through measurable quality successes.

### **Conference Themes Included:**

- Evolving Measurement
- Promoting Health Equity and Overcoming Disparities
- Adapting to the Changing Quality Landscape
  - The full NQF19 recap is available on the NQF website.

98% of 2019 attendees recommend the NQF Annual Conference to fellow professionals committed to driving measurable health improvements.

"For more than two decades, NQF has convened private and public expert healthcare leaders under one roof with engaging conference agendas that shape future quality priorities. We are excited to convene another special event in March 2020 and continue leading collaboration across the field." MARC CHARON, MBA, CPA, Chief Financial Operating Officer, NQF

### NATIONAL QUALITY FORUM ANNUAL CONFERENCE

20 20 Driving Value Through the Next Generation of Quality March 23–25, 2020

We hope you'll join us at NQF20!

### NATIONAL QUALITY FORUM

Driven by science, collaboration, measurement, and innovation to make care better for all people, National Quality Forum helps drive multiple perspectives into actions that create measurable impact. We are the place where everyone has an equal voice in creating healthcare improvements that provide the greatest value to all. National Quality Forum does what nobody can do alone—but what everyone can accomplish through healthy collaboration on improving outcomes.

### **OUR MISSION**

To be the trusted voice driving measurable health improvements

### **OUR VISION**

Every person experiences high value care and optimal health outcomes

### OUR VALUES

Collaboration • Leadership • Passion • Excellence • Integrity

