



SDS Trial Period: CSAC Update

May 1, 2017

Background

- In April 2015, NQF began a two-year trial of a policy change that allows risk-adjustment of performance measures for SES and other demographic factors.
- Prior to this, NQF criteria and policy prohibited the inclusion of such factors in its risk adjustment approach and only allowed for inclusion of a patient's clinical factors present at the start of care.
- During the trial period, NQF policy restricting the use of SDS factors in statistical risk models was suspended and NQF implemented the Risk Adjustment Expert Panel's recommendations related to the appropriate use of SDS risk factors.

Background

- During the trial period, NQF's topical Standing Committees evaluated each individual measure to determine whether adjustment for SDS factors was appropriate.
- The Standing Committees considered both the conceptual and empirical basis for SDS adjustment utilizing standard guidelines for selecting risk factors.
- If SDS adjustment is determined to be appropriate for a given measure, NQF endorses one measure with specifications to compute the SDS-adjusted measure and stratification of the non-SDS adjusted measure. As recommended, specifications for stratification should always accompany an SDS-adjusted measure to provide transparency for disparities.

Background

- Role of the Disparities Standing Committee:
 - Develop a roadmap for how measurement and associated policy levers can be used to proactively eliminate disparities;
 - Review implementation of the revised NQF policy regarding risk adjustment for SDS factors and evaluate the SDS trial period;
 - Provide a cross-cutting emphasis on healthcare disparities across all of NQF's work.

Disparities Standing Committee

Disparities Committee Members

(co-chair) Marshall Chin , MD, MPH, FACP, University of Chicago	Nancy Garrett , PhD, Hennepin County Medical Center
(co-chair) Ninez Ponce , MPP, PhD, UCLA Center for Health Policy Research	Romana Hasnain-Wynia , PhD, Patient Centered Outcomes Research Institute
Philip Alberti , PhD, Association of American Medical Colleges	Lisa Iezzoni , MD, MSc, Harvard Medical School
Susannah Bernheim , MD, MHS, Yale New Haven Health System Center for Outcomes Research and Evaluation	David Nerenz , PhD, Henry Ford Health System
Michelle Cabrera , SEIU California	Yolanda Ogbolu , PhD, CRNP-Neonatal, University of Maryland Baltimore, School of Nursing
Juan Emilio Carrillo , MD, MPH, Weill Cornell Medical College	Bob Rauner , MD, MPH, FAAFP, Partnership for a Healthy Lincoln
Lisa Cooper , MD, MPH, FACP, Johns Hopkins University School of Medicine	Eduardo Sanchez , MD, MPH, FAAFP, American Heart Association
Ronald Copeland , MD, FACS, Kaiser Permanente	Sarah Hudson Scholle , MPH, DrPH, National Committee for Quality Assurance
José Escarce , MD, PhD, UCLA David Geffen School of Medicine	Thomas Sequist , MD, MPH, Partners Healthcare System
Traci Ferguson , MD, MBA, CPE, WellCare Health Plans, Inc.	Christie Teigland , PhD, Inovalon, Inc.
Kevin Fiscella , MD, University of Rochester	Mara Youdelman , JD, LLM, National Health Law Program

Trial Period Update

- Since April 2015, NQF's Standing Committees were asked to consider the potential role of SDS risk factors in their evaluation of all submitted outcome measures.
- Readmission and cost/resource use measures that were endorsed with the condition that additional analyses be performed to determine the need for inclusion of SDS factors in risk adjustment models were also considered.

Trial Period Update

- The trial has highlighted a number of challenges for risk adjustment for SDS factors.
- Although a significant number of outcome measures have been submitted with a conceptual basis for SDS adjustment, empirical analyses with available adjustors have not generally led to inclusion of those factors.
- To support the trial period, NQF has monitored progress in the field on risk adjustment for sociodemographic status.

NAM Report Findings: Data Availability

Social Risk Indicators	Data Available for Use Now
Income	
Education level	
Dual eligibility for Medicare and Medicaid	YES
Wealth	
Race or ethnic group	
Language spoken	
Country of origin	YES
Extent of acculturation	
Gender identity	
Sexual orientation	
Marital or partnership status	
Living with others vs. alone	
Amount of social support	
Extent of neighborhood deprivation	
Urban vs. rural residence	YES
Adequacy of housing	
Other environmental factors	

Unresolved Issues: Potential Use of Hospital and Community Level Factors

Recommendations: Readmission Measures

- Given potential unintended effects of the readmission penalty program on patients, especially in safety net hospitals, NQF's MAP and the NQF Board are encouraged to consider other approaches to address these potential unintended consequences.
- NQF should focus efforts on the next generation of risk adjustment, including social risk as well as consideration of unmeasured clinical complexity.
- The Disparities Standing Committee will address unresolved issues and concerns regarding risk adjustment approaches, including potential for adjustment at the hospital and community levels.
- SES adjustor availability should be considered as part of the annual update process.

Unresolved Issues

- Hospital and community level factors
- Requirements for conceptual basis
- Consideration beyond outcome measures
- Stratification v adjustment
- Guidance on empirical approach to risk adjustment
- Others?

Hospital and Community Level Factors

- NQF's measure submission form currently asked what **patient-level SDS variables** were available and analyzed
- Some stakeholders have raised concerns that this should be broadened to include hospital and community level factors
- From SES Expert Panel Report:
 - *Use of Community Variables:*
 - » To characterize the patient's living environment
 - » As a proxy for patient-reported data
 - » To understand community factors affecting the healthcare unit

Guidance from the Disparities Standing Committee

- Social and clinical variables should be treated equally; may be getting limited signal from social variables if they are added to the model after clinical variables
- Need to further explore community-level variables; facility variables should be pursued with caution as there is a risk of masking quality signals
 - *Need to explore the impact of the community where the patient resides*
- Consider how a measure is being used; SDS adjustment may be more appropriate for some uses than others

Discussion Questions

- Does the CSAC have any guidance to measure developers on how to consider community factors?
- Does the Committee have any guidance to the Standing Committees on how to consider community level factors?
- What community level factors should be explored?
- How should NQF address other unresolved issues?

SDS Trial Period Evaluation Plan

Evaluation Plan

- The trial period ended in April 2017. The CSAC approved an initial evaluation plan for the trial period in September 2014.
- NQF staff are currently gathering information from the trial period to assess:
 - Measures submitted with SDS adjustment;
 - Measures with a conceptual basis for potential SDS adjustment but an empirical analysis did not support inclusion;
 - Measures submitted without any discussion of SDS factors but raised as a concern during evaluation;
 - SDS data variables used across all submissions

Evaluation Plan: Key Question to Explore

- Do SDS factors have a significant effect on the outcome being measured?
- If a strong conceptual relationship exists, does the analysis with specific SDS variables demonstrate an empirical relationship between those variables and performance?
- What SDS factors and variables are used in the analyses?
- What critical data gaps were identified in availability of SDS factors?

Evaluation Plan: Qualitative Review

- NQF will survey measure developers and standing committee members who considered trial use measures to collect qualitative information such as:
 - What are the costs and burdens on developers to comply with the new requirements?
 - What is the effectiveness of resource materials and technical assistance for developers?
 - What is the effectiveness of resource materials and technical assistance for committee members?
 - Did committee members have the information needed in evaluating the appropriateness of SDS adjustment? What additional information would have been valuable?
- NQF will also use public comments on measures as a source of qualitative data for the trial period evaluation.

Disparities Standing Committee Feedback

- Need to understand the sources used for conceptual analyses
- Need to better define what we mean by a significant effect
 - *May see statistical effect on the outcome but does not explain total variance or impact rankings*
 - *Need to understand clinical and payment implications*
- Conceptual models could better explain the role of quality; explore if quality could be potential mediator to impact of SES
- Case examples may help to illustrate challenges between conceptual and empirical analyses, potential impact of adjusting

Preliminary Results

- NQF reviewed 300 measures during the trial period
 - *126 were outcome or intermediate outcomes*
 - *98 of those had some form of risk adjustment*
- 43 included any social risk variable, including age or sex
- 20 included a social risk variable other than age or sex
- Commonly tested variables:
 - *Payer (includes insurance status, Medicaid status, Dually-eligible)*
 - *Race*
 - *Ethnicity*
 - *AHRQ SES Index*

Next Steps

- **June 14-15: Disparities Standing Committee Meeting**
 - *NQF staff will present the results of the trial period evaluation. The Disparities Standing Committee will review the trial period evaluation and offer further input to NQF.*
- **July 11-12: Consensus Standards Approval Committee**
 - *The CSAC will consider the input from Disparities Standing Committee and offer further input to the NQF Board of Directors.*
- **July 20, 2017: NQF Board of Directors**
 - *The NQF Board will receive input from the Disparities Standing Committee, and the CSAC, and NQF leadership regarding the future policy directions.*

Discussion Questions

- Does the trial period evaluation as specified meet the needs for the evaluation?
- Suggestions for further data gathering for evaluation of the trial period?