Measure Developer Guidebook for Submitting Measures to NQF

VERSION 5.0

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NQF's Portfolio of Endorsed Measures

NQF organizes measures by topic area, and each topic area has a multistakeholder standing committee that oversees the portfolio of measures for the topic. Currently, these topic areas include: All-Cause Admission and Readmissions, Behavioral Health and Substance Use, Cancer, Cardiovascular, Cost and Efficiency, Geriatrics and Palliative Care, Neurology, Patient Experience and Function, Patient Safety, Pediatrics, Perinatal and Women's Health, Prevention and Population Health, Primary Care and Chronic Illness, Renal, and Surgery.

NQF-endorsed measures undergo maintenance of endorsement evaluations approximately every three years. A priority is placed on evaluating related and competing measures at the same time to foster harmonization of endorsed measures.

NQF is looking to work more closely with developers as measures become fully developed and ready for submission to NQF. NQF asks developers to share any information on measures that will be ready for submission within 12 months and inform NQF of any endorsed measures that will be retired. An ongoing dialogue between developers and NQF facilitates planning the various CDP projects and bringing measures into the process as quickly as possible. **NOTE: As part of the changes to the endorsement process implemented in Fall 2017, NQF now requires developers to notify NQF of their "intent to submit" any new or maintenance measure at least three months prior the measure submission deadline.**

NQF's CDP considers both newly submitted measures for initial endorsement as well as previously endorsed measures for maintenance of endorsement.

Quality Positioning System

The Quality Positioning System (QPS) is a web-based tool that helps you find NQF-endorsed measures. This system allows users to search by measure title or number, as well as by condition, care setting, or measure steward, as well as by several other characteristics. QPS also allows users to provide feedback at any time about the use and usefulness of. QPS also can be used to learn from other measure users about how they select and use measures in their quality improvement programs.

Consensus Development Process

NQF uses its formal Consensus Development Process (CDP) to evaluate and endorse consensus standards, including performance measures, best practices, frameworks, and reporting guidelines. The CDP is designed to call for input and carefully consider the interests of stakeholder groups from across the healthcare industry. Because NQF uses this formal Consensus Development Process, it is recognized as a voluntary consensus standards-setting organization as defined by the National Technology Transfer and Advancement Act of 1995 and Office of Management and Budget Circular A-119.

NQF endorsement projects have increased in number and complexity while stakeholder expectations for the timeliness and effectiveness of the entire measure development, testing, and endorsement enterprise have intensified. To be endorsed, a measure submitted to NQF must satisfy four major criteria—Importance

to Measure and Report (must-pass), Scientific Acceptability of the Measure Properties (must-pass), Feasibility to Implement, and Usability and Use of the Measure Results ("Use" is must-pass for maintenance measures), as well as be considered in relation to other related or competing measures. Over the past decade, the procedures that form NQF's CDP and its implementation have evolved to ensure that evaluation of candidate consensus standards continues to follow best practices in performance measurement and standards-setting.

Ongoing Enhancements to the Endorsement Process

Since 2000, when NQF first laid out the requirements of measure endorsement into the multistep CDP, NQF has refined the process to address the needs of NQF members and, more broadly, the needs of the healthcare industry. These refinements have targeted the need for new measures; for maintenance of the measures portfolio (e.g., competing and related measure assessments); and for increased efficiency of the CDP (e.g., shorter cycle time from submission to endorsement and increased opportunities for evaluation).

These changes are themselves part of a broader process of continuous improvement in the structure and governance of NQF. They reflect what NQF has learned as the organization has grown, and also respond to the needs of NQF members and more broadly to NQF's multistakeholder constituencies—hospitals, physicians and other clinicians, consumers, purchasers, health plans, government organizations and agencies, suppliers and health industry companies, and quality improvement organizations.

Prior to 2010, NQF conducted maintenance on an ad hoc basis, through topic-specific consensus standards maintenance committees, and through existing projects. As the number of NQF-endorsed measures grew, it became apparent that there was a need to create a more predictable schedule for maintaining the endorsement of NQF-endorsed measures in order for NQF to ensure its portfolio remained current. More specifically, keeping the NQF portfolio current refers to whether measures (1) are appropriately based on current evidence, (2) have scientifically and clinically appropriate specifications, (3) have harmonized specifications, and (4) represent the "best in class" measure for the issue addressed.

To accomplish this goal, in May 2010, the NQF Board of Directors approved a process redesign for measure maintenance and endorsement cycles, according to measure topic. At the three-year cycle review for a topic area, topic/condition-specific committees consider measure endorsement for existing measures, along with newly submitted measures in the same topic area. In addition, NQF put into place processes to ensure that each measure is based on current science, and its accompanying specifications are updated through the annual updates and ad hoc reviews. NQF also implemented a revised process to address harmonization of measures. The evaluation of the timeliness, efficiency, and effectiveness of the CDP has been an ongoing effort since then. As part of the CDP redesign work, NQF has hosted two Kaizen improvement events. The first was a four-day Kaizen event focused on measure development and measure endorsement held in September 2013. The second was a two-day Kaizen event focused on measure endorsement held in May 2017. The purpose of these events was to explore ways to provide better, more timely multistakeholder input into the measure development lifecycle that will help develop high-quality measures. A key goal was to reduce the waste and delays across the spectrum—from the measure concept through testing to endorsement—to ensure that the measures that matter are available as soon as

possible. Various recommendations from the Kaizen events have been incorporated into the workflows of the various steps of the CDP. Major efforts to improve the CDP process are described more fully below.

Re-examining the Consensus Process

The 2012 hospital-wide readmissions endorsement project raised questions about NQF's process for making endorsement decisions, and specifically how NQF determines that consensus has been achieved. To address these concerns, NQF's Board of Directors created a Consensus Task Force. The charge of this Task Force was to review and recommend enhancements for NQF's CDP. After considering alternatives to reaching consensus and improving the CDP, the Consensus Task Force elected in 2013 to proceed with process changes related to efficiency and incremental efforts to achieve consensus.

Some of the Task Force recommendations were straightforward improvements to the endorsement process that provide greater transparency and consistency in the process. For example, the Task Force suggested that NQF provide committee members and the public with plain language measure summary documents, develop more detailed educational materials for standing committee members, and limit the exceptions that are made to the submission and evaluation processes.

Revising the Maintenance Process

To streamline and improve the periodic evaluation of currently endorsed measures, in 2015, NQF updated the evaluation of measures for maintenance of endorsement. Under the new approach, there is a shift in emphasis for selected criteria for evaluation of currently endorsed measures. Refer to Appendix A for details regarding this change in process.

Revising the Ratification and Appeals Processes

Based on comments received from various stakeholders, NQF recognized the need to revise the ratification and appeals procedures of the CDP to eliminate redundant decisionmaking, prevent re-litigation of issues already considered, and reinforce the finality of decisions once appeals are adjudicated. On November 4, 2015, the NQF Board of Directors approved the final changes to the ratification and appeals process. The most significant changes to the process include the following:

- The Consensus Standards Approval Committee (CSAC) will make final measure endorsement decisions, without ratification by another body (i.e., NQF's Board of Directors).
- An Appeals Board will decide measure appeals rather than the NQF Board of Directors.
- Appeals of a measure endorsement decision will go directly to the Appeals Board without a review by the CSAC.

Most Recent Changes to the CDP

Beginning in Fall 2017, NQF operationalized key changes to the CDP based on recommendations made during the May 2017 Kaizen event. These changes are described briefly below. A full report of the event, including the objectives and all recommendations, is available on NQF's website.

Increased Opportunities for Measure Submission: Scheduling/Frequency

In order to reduce the wait time between review cycles and provide developers more opportunities to submit measures, NQF now offers two measure submission opportunities (cycles) for each topic area, each year, instead of one opportunity for a select few topic areas each year per the prior CDP schedule. Due to the increased opportunities for measure submission, NQF has consolidated the measure evaluation topical areas from 22 to 15 topical areas.

NQF will limit the number of measures evaluated by the standing committees in each cycle to a maximum of 12 (up to eight measures undergoing maintenance evaluation and up to four new measures). NQF will use its discretion to determine whether to assign 2-3 additional measures to a topic for a given cycle. NQF will consider this option if there is a legislative mandate (e.g. measures in federal programs or proposed for federal programs); related and competing measure concerns; and/or additional measures that address prioritized gap areas.

Intent to Submit

To submit a measure for an initial endorsement evaluation or a maintenance of endorsement evaluation, a measure steward must complete or update the online measure submission form and notify NQF of its intent to submit. To plan appropriately for new measure submissions, NQF will now require stewards/developers to submit an *Intent to Submit* form (Appendix B). Measure stewards/developers will need to notify NQF at least three months prior to the measure submission deadline to prepare for the committee's review in the upcoming cycle. The Intent to Submit form is accessed from the NQF homepage. Click "Submit a Measure". As part of the Intent to Submit process, stewards/developers must submit **full measure specifications** to NQF and a completed Measure Testing Attachment to NQF, along with other information as needed (e.g., a feasibility scorecard for eCQMs).

Creation of the Scientific Methods Panel

To reduce the review burden on committee members and promote consistency across review committees, a Scientific Methods Panel conducts evaluation of new complex measures for the criterion of *Scientific Acceptability* as well as for previously endorsed complex measures if testing has been updated. The following types of measures are considered complex and therefore may require an evaluation by the Scientific Methods Panel:

- Outcome measures, including intermediate clinical outcomes
- Instrument-based measures (e.g., PRO-PMs)
- Cost/resource use measures
- Efficiency measures (those combining concepts of resource use and quality)
- Composite measures

Continuous Public Commenting Period with Member Expression of Support

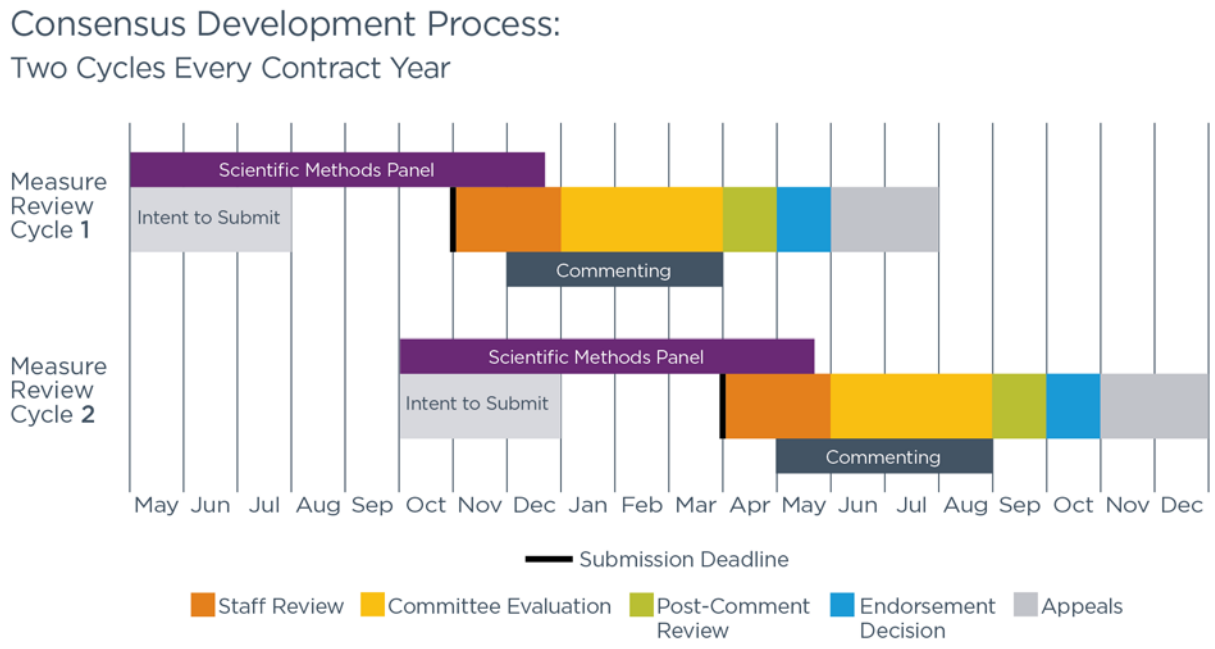
Rather than opening two separate public commenting periods (14-day pre-meeting commenting and 30-day post-meeting commenting), NQF operates one continuous public commenting period. This commenting period will span approximately 16 weeks to allow adequate time for the public and NQF member commenting. It will open approximately seven weeks prior to the committee evaluation meeting and close 30 days after NQF posts the draft technical report on the NQF website.

NQF membership voting will no longer be accomplished through a 15-day voting period following public comment. Instead, NQF members will have the opportunity to express their support ('*Support*' or '*Do Not Support*') for each measure during the aforementioned continuous commenting period.

The following section describes the steps of the CDP.

Consensus Development Process

NQF's CDP involves the following steps to endorse consensus standards (see diagram below): call for nominations, solicitation of measures and measure concepts (including intent to submit), candidate consensus standard review, public and member commenting, CSAC endorsement, and appeals.



Call for Nominations—Standing Committees

NQF strives to continually improve its measure endorsement process to remain responsive to its stakeholders' needs. Volunteer, multistakeholder committees are the central component to this process, and the success of NQF's projects is due in large part to the participation of its standing committee members.

Prior to the HHS contract that started in 2009, NQF operated with much uncertainty regarding resources for proposed projects. Consequently, work was organized on a project-by-project basis with no comprehensive schedule. NQF appointed project-specific steering committees, with the nominations process commencing when project funding had been secured.

Since 2014, NQF has seated standing committees for various project topic areas. Committee members will initially serve two-year or three-year terms, and the committees will be responsible for handling endorsement and measure maintenance, as well as ad hoc and other project work in their designated areas.

In addition, *expert reviewers* serve as an important adjunct to NQF's standing committees by helping to ensure broad representation on the standing committee and providing specific technical expertise when needed. Additional detail about the expert reviewer role is included at the end of this section.

Standing Committee Composition

Topical standing committees include 20 to 25 individuals representing a variety of stakeholders, including consumers, purchasers, providers, health professionals, health plans, suppliers and industry, community and public health, and healthcare quality experts. Because NQF attempts to represent a diversity of stakeholder perspectives on committees, a limited number of individuals from each of these stakeholder groups can be seated onto a committee. For larger topic areas that include multiple conditions or cross-cutting areas, NQF will utilize technical expertise and/or expert reviewers for specific areas as needed.

Standing Committee Terms

Standing committee members will be appointed to a two- or three-year term initially, with approximately half of the committee appointed to a two-year term and the other half to a three-year term. Each term thereafter will be a three-year term. Committee members may serve two consecutive terms. They must step down for a full term (three years) before becoming eligible for reappointment. The committee member's term on the standing committee begins upon selection to the committee, immediately following the close of the roster commenting period. The exact term end dates may vary depending on the measure review cycle.

Standing Committee Expectations and Time Commitment

Participation on the committee requires a significant time commitment. To qualify, prospective committee members should be available to participate in all currently scheduled calls/meetings. Over the course of the committee member's term, additional calls will be scheduled or calls may be rescheduled; new dates are set based on the availability of the majority of the committee.

Nominations are to an individual, not an organization, so "substitutions" of other individuals from an organization at conference calls or meetings are not permitted. Committee members are encouraged to engage colleagues and solicit input from colleagues throughout the process.

The times estimated below may vary depending on the number and complexity of the measures under review as well as the complexity of the topic and multistakeholder consensus process. Committee participation includes:

- Review all measure submission forms (approximately 2 hours per measure)
- Participate in the scheduled orientation call (2 hours)
- Attend scheduled evaluation meetings. These may be in-person meetings (1-2 full days in Washington, DC) or a series of web meetings (typically 2 hours each)
- Complete measure evaluation by reviewing the comments received on the draft report and then participate on the post-comment web meeting (2 hours)
- Complete additional measure evaluations by web meetings
- Participate in additional calls as necessary
- Complete all surveys and evaluations
- Present measures and lead discussions for the committee on conference calls and in meetings

If a member has poor attendance or participation:

- NQF staff will contact the member and ask if he/she would like to resign from the committee

If a member is unable to fulfill his/her term (for any reason):

- NQF will identify a replacement through the pool of expert reviewers. If a replacement cannot be identified from the expert reviewer pool, NQF staff will review the nominations received during the most recent call for nominations.
- NQF staff will contact the potential replacement.
- Upon acceptance of committee appointment, the new committee member would complete the term of the individual who was replaced.
- The out-going member may not select a substitute to carry out the remainder of the term.

Disclosure of Interest

Per the NQF Conflict of Interest Policy for CDP Standing Committees, all nominees will be asked to complete a general disclosure of interest (DOI) form for each committee to which they have applied prior to being seated on the committee. The DOI form for each nominee is reviewed in the context of the topic area in which the committee will be reviewing measures. This form must be completed annually.

Once nominees have been selected to serve on the committee a measure-specific DOI form will be distributed during the beginning of each review cycle to determine whether any members will be required to recuse themselves from discussion of one or more measures under review based on prior involvement or relationships to entities relevant to the topic area. Because standing committee members are asked to review various types of measures throughout the term of service, NQF asks committee members to

complete the measure-specific DOI for all measures under review by a committee to ensure any potential conflicts or biases have been identified.

Standing Committee Application Process

NQF invites nominations for standing committees on an annual basis. Staff will publicize details regarding the desired perspectives or expertise for new committee members at that time. Self-nominations are welcome. Third-party nominations must indicate that the individual has been contacted and is willing to serve. All nominations remain active for one year. To be considered for appointment to the standing committee, please send the following information:

- a completed online nomination form, including:
    - a brief statement of interest
    - a brief description of nominee expertise highlighting relevant experience to the committee
    - a short biography (maximum 750 characters), highlighting experience/knowledge relevant to the expertise described above and involvement in candidate measure development
    - curriculum vitae or list of relevant experience (e.g., publications) *up to 20 pages*
- a completed disclosure of interest form. This will be requested upon submission of a nomination form for committees actively seeking nominees.
- confirmation of availability to participate in currently scheduled calls and meeting dates.

Expert Reviewers

As noted earlier, expert reviewers serve as an important adjunct to NQF's standing committees. The expert reviewers are explicitly for CDP standing committees. An expert reviewer cannot serve on any other type of committee without entering the nomination process. All expert reviewers will adhere to the Standing Committee Policy (e.g., terms, conflict of interest, etc.) and are required to disclose any conflicts of interests, similar to the requirements of the members of the standing committee. Expert reviewers can remain in the pool until their term expires. Expert reviewers will only be required to fill out a measure-specific DOI if they are seated on the standing committee for a particular cycle.

NQF anticipates the role of the expert reviewer to evolve over time, but currently expert reviewers may provide expertise (as needed) to review the measures submitted for endorsement consideration; provide comments and feedback on the measures throughout the measure review process; and provide input on strategic discussions in their topic areas.

Solicitation of Measures and Measure Concepts

Intent to Submit

Measure stewards will need to notify NQF of their "intent to submit" measures for endorsement consideration at *least three months prior to the measure submission deadline*. This notification signals the measure steward's or developer's readiness for endorsement consideration and also allows adequate opportunity for technical assistance prior to submitting measures for evaluation. NQF encourages measure stewards/developers to take advantage of technical assistance during this time.

As part of the Intent to Submit process, stewards or developers will submit to NQF an **Intent to Submit form**, **full measure specifications** (i.e., items De.1-De.4 and S.1-S.22), and **a completed Measure Testing Attachment**, along with other information as needed (e.g., a feasibility scorecard for eCQMs).

NOTE: This information must include the final measure specifications and testing data to be considered during the evaluation of the measure; developers cannot submit different specifications or testing information at the time of the full submission deadline. If specifications or testing is not complete and finalized as of the Intent to Submit deadline, then the developer should wait to signal their intent to submit (e.g., the next cycle when specifications and testing are final).

The *Intent to Submit* form will be available through the measure dashboard (see Appendix B). The form will require the following information:

- **Measure title** – concise description to convey who and what is being measured
- **Measure description** – brief narrative of the measure that includes the type of score, measure focus, target population, or time frame
- **Measure type** – measure categorization (e.g., structure, process, etc.) and level of complexity (e.g., outcomes, cost or resource use, instrument-based, etc.)
- **All sections under ' Measure Specification': Sections 1-S22**
- **Testing information (NQF Measure testing attachment)**

Measure Submission Deadlines

There will be two opportunities to submit measures each year, regardless of topic area. NQF will announce staggered measure submission deadlines twice per year (i.e., for each evaluation cycle, typically in November and April). ***An intent to submit form and associated submission materials must be submitted at least three months prior to the submission deadline to be considered for that cycle.*** Thus, for each submission cycle, there are two submission deadlines: the Intent to Submit deadline and the measure submission deadline. Full and complete measure specifications and testing information are required at the Intent to Submit deadline, while the remainder of the submission materials (e.g., Evidence attachment, information regarding opportunity for improvement, feasibility, usability and use, and related and competing measures) are due at the measure submission deadline.

To submit the measure for an initial endorsement evaluation or a maintenance-of-endorsement evaluation, a measure steward must complete and submit required information about the measure through the NQF website by the measure submission deadline. This step can require significant support from NQF staff who will provide technical assistance and follow-up with stewards and developers.

In addition to new measures, previously endorsed measures are evaluated approximately every three years for maintenance of endorsement. The NQF maintenance team works closely with developers to advise on the timing of submission for measures undergoing maintenance evaluation. NQF will schedule maintenance evaluations of related and competing measures together whenever possible. This may require changes to the three-year maintenance review schedule, but developers will not be expected to submit for maintenance any sooner than 24 months after the prior submission. If you have any questions about the

timing of maintenance review for your measures, please contact the measure maintenance team at measuremaintenance@qualityforum.org.

The standing committee will evaluate the measure(s) based primarily on the information submitted by the deadline. NQF staff will prepare a preliminary analysis for each measure based on submitted information. NQF staff will provide this preliminary analysis to the developer for review. Developers will have up to two weeks to review the preliminary analysis and provide additional clarifications, if needed. Additional information after this point will not be accepted unless requested by the committee for measure(s) that are controversial (as determined by discussion and/or close vote of the committee) where additional information could facilitate reaching greater agreement. To ensure transparency, any additional information requested by the committee will be submitted during the public comment period.

Go to this section in this guidebook for information on creating a good submission and other developer resources.

Measure Steward Agreement

Each candidate measure or set of measures has a *measure steward* who assumes responsibility for the submission of the measure to NQF for potential endorsement. The measure steward is responsible for making necessary updates to the measure, and for informing NQF about any changes made to the measure on an annual basis. In addition, the measure steward is responsible for providing the required measure information during the measure maintenance process.

- The measure steward organization is required to identify a single point of contact who will be notified of any upcoming maintenance deadlines or requirements related to the endorsed measure(s).
- Stewards may be contacted by the public and NQF members with inquiries about specifications, updates, and implementation of the endorsed measure(s).
- Stewards are also responsible for maintaining measure details and specifications on any publicly available website.

Each steward who submits a fully specified and tested measure to NQF must submit a completed and signed Measure Steward Agreement (MSA) on or before the project's measure submission deadline in order for the measure to be considered by the committee. The agreement is between NQF and the measure steward and only shared between these parties.

- For new measure stewards, the MSA should be accompanied by the completed addendum, in which the steward must list all the measures (NQF measure number and measure title) being submitted for review.
- For existing measure stewards, only a signed addendum is needed and will be appended to the existing MSA; a new MSA is not required. Contact NQF project staff to receive the addendum.

Only one MSA is necessary per measure steward. If the steward is a governmental organization, an MSA is not required.

See Appendix C for an example of the MSA and Appendix D for an example of the addendum.

published value set, then the measure developer must look to see if there is a published value set that aligns with the proposed value set within its measure. If such a published value set does not exist, then the measure developer must demonstrate that the value set is in draft form and is awaiting publication to VSAC.

- Documentation of testing on more than one Electronic Health Record (EHR) system from more than one EHR vendor is required to establish Scientific Acceptability, indicating that the measure data elements are valid and that the measure score can be accurately calculated.
- Submissions will require an *eCQM* Feasibility assessment to ensure that data elements and measure logic can be used to interpret the eMeasure specifications unambiguously.

eCQM *Approval for Trial Use*

Developers have indicated that it can be challenging to test *eCQM*s to the extent necessary to meet NQF endorsement criteria until they have been more widely implemented. At the same time, there is interest in developing *eCQMs* for use in federal programs and obtaining NQF endorsement for those *eCQMs*. NQF endorsement may provide the impetus to implement measures; however, if a submitted measure with very limited testing does not meet NQF endorsement criteria, it could be prematurely abandoned.

In 2014, NQF piloted *Approval for Trial Use* for *eCQMs* that were ready for implementation but could not be adequately tested to meet NQF endorsement criteria. NQF used the multistakeholder consensus development process to evaluate and approve for trial use several *eCQMs* that addressed important areas for performance measurement and quality improvement, although they did not have the requisite testing needed for NQF endorsement. Those *eCQMs* were assessed to be technically acceptable for implementation. The goal for approving *eCQMs* for trial use was to promote implementation and the ability to conduct more robust reliability and validity testing that can take advantage of clinical data in EHRs.

In April 2015, the CSAC agreed to the make the Trial Use program available for all *eCQM* submitted to NQF for which testing has not been completed. Approved for Trial Use carries no endorsement label, but may be considered a pathway for measures to prepare for endorsement. *eCQMs* that are Approved for Trial Use are indexed in QPS and are indicated as part of the ATU program.

Adjustment for Social Risk Factors

In 2014, the NQF Board of Directors approved a two-year trial period to allow for inclusion of social risk factors in risk-adjustment approaches, prior to making it a permanent change in NQF policy. Beginning in April 2015, and throughout the duration of the trial period, the NQF policy that prohibited use of social risk factors in risk-adjustment approaches was suspended, and NQF implemented several of the Risk Adjustment Expert Panel's recommendations. That trial concluded in Spring 2017. However, NQF began a second trial period, in the fall of 2017 and will run until 2021. During this Social Risk Trial, ***use of social risk factors in risk-adjustment approaches is allowed***.

Factors/Concepts (specific variables)	**PROs**	**CONs**	**Caveats**
Literacy	• This concept may also be able to partially capture health literacy	• No standardized definitions • May be easy to game	If the correlation with education is high, then education could be used.
Health literacy	• Potentially more relevant to healthcare • Three-item and single-item validated questions exist	• Not consistently collected/ available	
Local/state funding for safety net providers (e.g., tax base)	• Affect resources available to safety net providers beyond insurance	• Data not easily collected/ available	• Not a patient characteristic • Risk for unintended consequences (setting a lower standard for poorly supported institutions might send the wrong messages to tax payers)
Race/ethnicity	• Correlated with SES and may be more available than other variables	• May be more correlated with bias	• Should not generally be used as proxy for SES

Harmonization

The current quality landscape contains a proliferation of measures, including some that could be considered duplicative or overlapping, and others that measure similar but not the same concepts and/or that define patient populations somewhat differently. Such duplicative measures and/or those with similar but not identical specifications may increase data collection burden and create confusion or inaccuracy in interpreting performance results for those who implement and use performance measures.

Resolving issues around harmonizing measures and handling competing measures remains one of the key challenges in NQF measure endorsement projects. Our process for implementing NQF's Harmonization and Competing Measures process is described in the Information for Developers report of January 2013. Developers must respond to the questions about harmonization in their measure submission.

ICD-10

HHS implemented conversion to ICD-10 coding on **October 1, 2015**. Further details explaining the changes can be accessed at http://www.cms.gov/Medicare/Coding/ICD10/index.html?redirect=/icd10.

NQF requires ICD-10 codes to replace any ICD-9-CM codes for all new submissions, measures undergoing endorsement maintenance, and measures due for annual update.

ICD-10 Requirements

If a new measure is developed and tested using ICD-10 codes the following **does not apply**.

For measures that have converted ICD-9 to ICD-10 codes, please include in your submission:

- A statement of intent for the selection of ICD-10 codes, chosen from the following:
  - Goal was to convert this measure to a new code set, fully consistent with the intent of the original measure.
  - Goal was to take advantage of the more specific code set to form a new version of the measure, but fully consistent with the original intent of the measure.
  - The intent of the measure has changed.
- Excel spreadsheet, including:
  - Full listing of ICD-9 and ICD-10 codes, with code definitions
  - The conversion table (if there is one)
- Description of the process used to identify ICD-10 codes, including:
  - Names and credentials of any experts who assisted in the process
  - Name of the tool used to identify/map to ICD-10 codes
- Summary of stakeholder comments received

New Measures or Measures Undergoing Maintenance Previously Using ICD-9 Codes

Include ICD-10 codes in Numerator Details, Denominator Details, and/or Exclusion Details as appropriate.

- **Requirement 1** is satisfied by including one of the sentences in the documentation of requirement 3 for new measures and measures undergoing maintenance.
- **Requirement 2** is satisfied by attaching Excel files at data field **S.2b. Data Dictionary or Code Table**.
- **Requirement 3** can be documented in the Validity section, data field **2b2.2** in the **Measure Testing Submission Form**. If ICD-10 testing results are available, enter those into the Validity section at data field **2b2.3** in the **Measure Testing Submission Form**. If necessary, document a webpage URL or attach a Word or PDF file in the data field **A.1. Supplemental Materials**.

For Fall 2017 and CY2018 submissions:

- Gap can be based on literature and/or data based on ICD-9 or ICD-10 coding
- Submit updated ICD-10 reliability testing if available; if not, testing based on ICD-9 coding will suffice
- Submit updated validity testing
  - Submit updated empirical validity testing on the ICD-10 specified measure, if available
  - **OR** face validity of the ICD-10 coding scheme plus face validity of the measure score as an indicator of quality
  - **OR** face validity of the ICD-10 coding scheme plus score-level empirical validity testing based on ICD-9 coding

- **OR** face validity of the ICD-10 coding scheme plus data element level validity testing based on ICD-9 coding, with face validity of the measure score as an indicator of quality due at annual update

For 2019 and beyond: All measure information must be based on the ICD-10 specified measure. If this is not possible, please contact NQF for a *potential*, short-term waiver of this requirement.

Annual Update

Include ICD-10 codes (with definitions) in Numerator Details, Denominator Details, and/or Exclusion Details as appropriate.

- **Requirement 1** is satisfied by an entry in the **Release Notes** section of the Annual Update Form.
- **Requirement 2** is satisfied by attaching Excel files at data field **S.2b. Data Dictionary or Code Table**.
- **Requirement 3** requires that a Word or PDF document be e-mailed to **measuremaintenance@qualityforum.org** when submitting the Annual Update.

Guidance

Best practices for ICD-10 coding (see full recommendations report)

- Use team of clinical and coding experts to "identify specific areas where questions of clinical comparability exist, evaluate consistency of clinical concepts, and ensure appropriate conversion"
- Determine intent
- Use appropriate conversion tool (not required, but also not sufficient by itself; if using conversion tool, consider both forward and backward mapping)
- Assess for material change (For existing measures undergoing coding updates and maintenance, the extent to which the population identified with the new code set overlaps with that identified in the old code set should be assessed, if possible. Measure sponsors also should assess, if possible, whether the conversion results in rates that are similar within defined tolerances.). Options include:
  - Test using dual-coded data if possible OR
  - Face validity (using the above code-conversion process, including use of clinical/coding experts) OR
  - Criterion validity (if dual-coded data not available) OR
  - Consistency across time (pre/post conversion)
- Solicit stakeholder comments

Measure Submission Completeness Checklist

Developers are also encouraged to follow the checklist below to ensure the measure submission is complete and responsive prior to Standing Committee consideration.

- ☐ Measure steward agreement or concept agreement is completed and signed, and attached to the submission.
- ☐ Conditions for submission are addressed.

- ☐ There are responses in all fields on measure submission form (MSF) (including the Evidence and Measure Testing Attachments).
- ☐ Testing should be conducted for the data source(s) and level(s) of analysis for which the measure is specified; information for data source and level of analysis should be consistent across the specifications items (S.17, S.20) and the testing attachment items (section 1.1 and 1.4).
- ☐ Attachments include eMeasure specifications (S.2a); data dictionary/code list (S.2b); Evidence and Measure Testing attachments.
- ☐ All URLs are active and accurate.
- ☐ Harmonization/competing measures: Did you present a plan for harmonization of the related/competing measures identified by staff during early identification/triage? (see Harmonization process)
- ☐ Paired measures should be submitted on separate forms.
- ☐ An eCQM must be submitted in HQMF format.
- ☐ Composite measures (which contain individual measures with a single score or are all-or-none measures) are submitted on a composite form and responses to the composite measure questions are included.
- ☐ Both ICD-9 and ICD-10 codes included, if applicable.

Technical Assistance

NQF project staff will provide technical assistance to measure developers at any time before or during the measure submission process. Contact the project team with any questions about the criteria, how to answer the questions in the form, any technical issues with the online submission process, or anything else!

How to Create a Good Submission

NQF has many resources for developers that provide helpful tips on creating a good submission:

- ***What Good Looks Like! - Measure Submission Examples (2013)***. For examples of the type of information NQF is seeking in the measure submission forms, review the *What Good Looks Like!* document on the submitting standards webpage. NOTE: If possible, we will update this document to reflect our most current submission forms.

Additional Developer Resources

The NQF website (**www.qualityforum.org**) has a number of resources for measure developers. To start, below are useful links:

Submitting Standards Webpage

This page contains information and resources for submitting your measure(s) to NQF.
http://www.qualityforum.org/Measuring_Performance/Submitting_Standards.aspx

Maintenance of Endorsement Webpage

This page contains information on what happens after a measure is endorsed by NQF.

Measure Developer Webinars

A monthly measure developer webinar is held on the third Monday of each month. Topic areas for these webinars include NQF's evaluation criteria, updates on policies and processes, and other subjects, as determined with input from measure developers. Each month, details of webinars are posted to NQF's web calendar. Developers may email measuremaintenance@qualityforum.org to be added to the distribution list for the measure developer webinar.

Topical Area Webpages

As each project begins, a webpage is created on the NQF website: http://www.qualityforum.org/Projects.aspx. From your NQF dashboard, you can register to follow any project.

Alert Lists for CDP Projects

NQF has also created alert lists for our CDP projects. Sign up on the project page to receive an email notification of upcoming calls/meetings, deadlines, and the open and close date of each step. (These lists are intended for interested stakeholders (not developers) submitting measures to a particular project; each project has a developer-specific e-mail list to receive project notifications.)

Measure Developer Advisory Panel

NQF has formed a Measure Developer Advisory Panel to solicit feedback and suggestions to improve our maintenance and endorsement activities. Members convene via conference call or webinar on a monthly basis. For more information about this group, contact measuremaintenance@qualityforum.org.

Maintenance of Endorsement

As an endorsing body, NQF is committed to ensuring that the NQF-endorsed performance measures continue to meet the rigorous NQF measure evaluation criteria. Maintenance of endorsement encompasses several processes: (1) annual updates to measure specifications of endorsed measures, (2) CDP evaluations for endorsement maintenance (3) ad hoc reviews, (4) analysis and guidance for methodological and technical challenges, and (5) education and technical assistance to measure developers on endorsement maintenance activities. As the science of measurement and the uses of measures have evolved, NQF has worked continually to improve its evaluation and endorsement processes to meet the needs of stakeholders involved in performance measurement and improvement.

Annual Updates

Every year when an endorsed measure is not being re-evaluated for continued endorsement, measure stewards will submit a status report of the measure specifications to NQF. This report will either reaffirm that the measure specifications remain the same as those at the time of endorsement or last update, or outline any changes or updates made to the endorsed measure.

If changes occur to a measure at any time in the three-year endorsement period, the measure steward is responsible for informing NQF immediately of the timing and purpose of the changes. An ad hoc review will be conducted if the changes materially affect the measure's original concept or logic (see below).

Ad Hoc Review

The ad hoc review process was last updated as of August 1, 2016.

Definition: An ad hoc review is a formal measure evaluation and endorsement reconsideration outside of the scheduled maintenance of endorsement process. An ad hoc review is limited and focused on a specific issue regarding an evaluation criterion and is not the same as a maintenance of endorsement evaluation.

Ad Hoc Triggers

An ad hoc review may be triggered in a variety of ways:

1. A material change to an endorsed measure is submitted by a measure developer during an annual update. A material change is defined as any modification to the measure specifications that significantly affects the measure result such as:

    a. a change to the population being measured (e.g., changes in age inclusions, changes in diagnoses or other inclusion criteria, changes in excluded populations)

    b. changes to what is being measured (e.g., changes in target values like blood pressure or lipid values)

    c. inclusion of new data source(s); or

    d. expanding the level of analysis or care settings

    Examples of material changes include:

    - Adding a new variable or deleting an element/component of the numerator/denominator or inclusion/exclusion specifications
    - Change in the timeframe of the measure (e.g., all patients last year versus all patients this year and last year)
    - Change to the age groups in the measured population
    - The addition or deletion of an diagnostic code that is not merely an update, but that represents a different or new classification/category
    - A change in the risk-adjustment approach (e.g., from risk-stratification to a model-based approach) or the addition or deletion of a variable in the risk-adjustment approach (e.g., inclusion of an new social risk factor)

    The following are not considered to be material changes:

    - Updating codes, to reflect current coding nomenclature for a specific condition, disease, procedure, test, or drug
    - Adding a new drug to a family of drugs already specified in the measure
    - A change in the risk adjustment involving a modification to the value of a coefficient. (e.g., the

statistical model remains the same, but new data updates the relationships among the variables, so that the estimates of the coefficients change)
- Clarifying or adding a clarifying detail to a numerator or denominator, inclusions or exclusions, or other specification elements that does not change the measure result
- Documenting an exclusion that already existed in the measure's algorithm would not be a material change to a measure that already excluded it, but did not document it as an exclusion.)

When submitting revisions to measure specifications during annual updates developers must provide a response to the following questions in the release notes:

- Why was the change in specifications made?
- How does the change in specifications affect the measure results?

If a material change in the specifications is identified, data from re-testing of the measure with the new specifications is required for the ad hoc review.

2. Directive by the standing committee or the CSAC to review a specific criterion sooner than the scheduled maintenance of endorsement evaluation.

3. Request by a developer or third party. An ad hoc review can be requested at by any party, as long as there is adequate evidence to justify the review.

Ad Hoc Review Process

1. The NQF measure maintenance team will review all annual updates for material changes. If none are identified, the annual update will be accepted. If material changes are identified, the measure maintenance team will notify the developer and schedule an ad hoc review.

2. An ad hoc review directed by the standing committee or the CSAC will be carried out by the NQF project team with assistance from the measure maintenance team as needed.

3. Each request for an ad hoc review is reviewed by NQF's measure maintenance team, which includes clinical experts and methodologists. Any request for an ad hoc review must be submitted online via the Quality Positioning System (QPS) or via email at measuremaintenance@qualityforum.org. Requests must indicate which criterion the ad hoc review should address and include adequate written evidence to justify the review. Multiple criteria can be used in the justification. The criteria are:

    - the evidence supporting the measure has changed (e.g., for risk-adjusted measures, evidence of conceptual relationship between socioeconomic and other social demographic factors (SDS) and the measure's performance)

    - implementation of the measure results in unintended consequences

    - material changes have been made to the measure (including changes to the measure's setting and data source).

Typically the ad hoc review process follows an abbreviated version of the CDP and includes:

- Evaluation by a relevant topic-specific standing committee
- Public and member comment period for no less than 10 days
- Review and final endorsement decision by the CSAC; and
- An appeals period

Ad hoc reviews will be conducted during regularly-scheduled evaluation cycles. The measure under ad hoc review will follow the timeline of the active measure evaluation cycle.

If a measure remains endorsed after an ad hoc review, it is still subject to its original maintenance cycle.

Appendix A: NQF's Measure Evaluation Criteria

NQF endorses performance measures that are suitable for both accountability applications (e.g., public reporting, accreditation, performance-based payment, network inclusion/exclusion, etc.) as well as internal quality improvement efforts. NQF's *measure evaluation criteria and subcriteria* are used to determine the suitability of measures for use in these activities. Because endorsement initiates processes and infrastructure to collect data, compute performance results, report performance results, and improve and sustain performance, NQF endorsement is intended to identify those performance measures that are most likely to facilitate achievement of high-quality, efficient healthcare for patients. The criteria and subcriteria also relate to the concept of "fitness for purpose." For example, the clinical evidence should support use of a measure with a specific target patient population (e.g., foot care for patients with diabetes), and testing of the measure as specified indicates under what circumstances reliable and valid results may be obtained (i.e., using the measure with a specified data source and level of analysis or for the accountable entity for which performance is being measured).

Throughout the various iterations of the NQF measure evaluation criteria, many of the basic concepts and criteria have remained largely unchanged, although there have been additions (and a few deletions) from the criteria. However, the measure evaluation guidance—which focuses on the specificity and rigor with which the criteria are applied—has become more comprehensive and more specific over time. The guidance on measure evaluation is intended first for standing committees that evaluate performance measures and make recommendations for NQF endorsement, as well as the NQF project staff who assist them. Second, the guidance informs measure developers about how to demonstrate that a measure meets the criteria. Third, the guidance informs NQF members and the public about how measures are evaluated and informs those who use NQF-endorsed performance measures about what endorsement means.

The most current version of the criteria and guidance (dated August 2017) incorporates several updates to the evaluation criteria. These include:

- Subcriterion 1a.
    - For outcome measures, empirical data that demonstrates a relationship between the outcome and at least one healthcare structure, process, intervention, or service is now required (a rationale is no longer sufficient).
    - All structure and process measures (*even those that are patient-reported/instrument-based*) require a systematic assessment and grading of the quantity, quality, and consistency of the body of evidence that the measured structure/process leads to a desired health outcome.
    - All measures derived from patient report (not just PRO-PMs) should demonstrate that the target population values the measured outcome, process, or structure and finds it meaningful.
- Subcriterion 2b1 (addressing whether specifications align with the evidence). This subcriterion has been removed.
- Subcriterion 2b (face validity). For maintenance measures, empirical validity testing is expected at time of maintenance review; if not possible, justification for use of face validity only is required.

- Subcriterion 2b (missing data). Now applies to all measures, not just eMeasures, composites, and PRO-PMs.
- Criterion 4: Usability and Use. Now split into 4a (Use), which is must-pass for maintenance measures, and 4b (Usability), which is not must-pass for maintenance measures.

Revised Maintenance Process

Under the revised approach to the evaluation of currently endorsed measures, there is a shift in emphasis for several of the evaluation criteria/subcriteria, as follows:

- **Evidence:** If the developer attests that the evidence for a measure has not changed since its previous endorsement evaluation, there is a decreased emphasis on evidence, meaning that the Committee may accept the prior evaluation of this criterion without further discussion or need for a vote. This applies only to measures that previously passed the evidence criterion without an exception. If a measure was granted an evidence exception, the evidence for that measure must be revisited.
- **Opportunity for Improvement (Gap):** For re-evaluation of endorsed measures, there is increased emphasis on current performance and opportunity for improvement. Endorsed measures that are "topped out" with little opportunity for further improvement are eligible for *Inactive Endorsement with Reserve Status*.
- **Reliability**
    - Specifications: There is no change in the evaluation of the current specifications.
    - Testing: If the developer has not presented additional testing information, the Committee may accept the prior evaluation of the testing results without further discussion or need for a vote.
- **Validity:** There is less emphasis on this criterion if the developer has not presented additional testing information, and the Committee may accept the prior evaluation of this subcriterion without further discussion and vote. For outcome measures, the committee discusses questions related to adjustment for social risk factors, even if no change in testing is presented.
- **Feasibility:** The emphasis on this criterion is the same for both new and previously endorsed measures, as feasibility issues might have arisen for endorsed measures that have been implemented.
- **Usability and Use:** For re-evaluation of endorsed measures, there is increased emphasis on the use of the measure, especially use for accountability purposes. There also is an increased emphasis on improvement in results over time and on unexpected findings, both positive and negative. For maintenance measures, subcriterion 4a (Use) is now must-pass.

Other Guidance Resources

Other guidance documents include:

eMeasure Feasibility Assessment report (2013)

Composite Measure Evaluation Guidance Report (2013)

Patient Reported Outcomes Report (2012)

Usability Report (2012)

Harmonization Guidance and Definitions (2013)

For a historical view of NQF's measure evaluation criteria and guidance, please see the following reports:

Review and Update of Guidance for Evaluating Evidence and Measure Testing: A Technical Report (2013)

Evidence Task Force Report (2011)

Measure Testing Task Force Report (2011)

Competing Measures Report (2011)

Measure Harmonization Report (2011)

Reserve Status Report (2011)

Draft eMeasure Testing Guidance (2012)

Guidance on Quality Performance Measure Construction (2011)

Appendix B: Intent to Submit Form

Intent to submit

Purpose

For previously-endorsed measures that are undergoing endorsement maintenance, please access the Intent to Submit form from your NQF Dashboard.

An Intent to Submit form will notify NQF of the measure steward/developer's readiness to submit measures for endorsement consideration. This form will allow NQF to adequately plan for new measures that are being submitted.

Complete and finalized measure specifications and testing information (i.e., the Measure Testing Attachment) are due on the intent to submit deadline: August 1 for Fall cycles, and January 2 for Spring cycles (effectively 3 months prior to full measure submission deadline that signals the start of the selected cycle).

Instructions

Please complete all sections of the form. A completed form includes all measure specifications below and complete updated or new testing information. An incomplete form disqualifies the measure from being considered during the selected cycle.

Measure specifications and testing information (if applicable) are due on the intent to submit deadline, defined as 3 months prior to the start of the selected cycle.

NQF welcomes measure stewards/developers to request technical assistance during this time.

If you have questions or need assistance, contact measuremaintenance@qualityforum.org.

Measure details

Measure type
Measure Title
Measure Description
Type a brief narrative of the measure that includes the type of score, measure focus, target population, or time frame
Measure-specific Web Page
HQMF Specifications and BONNIE Testing
Data Dictionary, Code Table, or Value Sets
Changes to measure specifications since last endorsement
Numerator Statement & Details
(Provide a brief description of the measure focus or what is being measured)

Appendix C: Measure Steward Agreement

MEASURE STEWARD AGREEMENT

BETWEEN
NATIONAL QUALITY FORUM
AND

_____

This **MEASURE STEWARD AGREEMENT** (the "Agreement") is entered into by and between National Quality Forum ("NQF") and _____ ("Steward"), effective upon NQF's acceptance of the Agreement.

WHEREAS, NQF is a nonprofit organization whose mission is the improvement of the quality of American healthcare; and

WHEREAS, the evaluation of healthcare performance measures through an endorsement process is part of that mission; and

WHEREAS, Steward wishes certain healthcare performance measures to be considered for endorsement; and

WHEREAS, NQF and Steward (collectively, the "Parties") wish to acknowledge and agree upon the terms for bringing forward such healthcare performance measures for endorsement consideration;

NOW, THEREFORE, in consideration of the foregoing, NQF and Steward agree as follows:

I. Definitions

A. **"Measure"** means a healthcare performance measure submitted by Steward for endorsement. Any reference in this Agreement to "Measure" means each healthcare performance measure submitted by the Steward for consideration for endorsement by NQF.

B. **"Fee-Based Measure"** means a Measure that requires the use of a grouper, risk adjustment, other methodology or any component that is not publicly available or free of charge and is essential to calculating the Measure.

C. **"Permitted Use"** means the use of a Measure for any of the following purposes:

1. calculating, reporting, or displaying of Measure results to:
    a. the public, free of charge; or
    b. public and private purchasers of, and payers for, healthcare related service and products; or
    c. federal, state, or local regulatory programs and regulators.

2. improving or auditing the internal performance of an organization or individual where the improvement or audit is performed by such organization or individual.

II. Submission of Measure

A. Steward submits Measure for endorsement on a voluntary basis and agrees to comply with NQF's processes for Measure submission and endorsement, as may be amended from time to time.

B. Steward will submit the Measure(s) that are subject to this Agreement according to a process prescribed by NQF, including but not limited to an electronic method. Any such measures are incorporated by reference into this Agreement.

III. NQF Review of Measure

A. NQF will review Measure in accordance with its Measure endorsement process and criteria. Steward acknowledges that NQF's process and criteria for Measure endorsement may change over time. Steward acknowledges that NQF's endorsement decision depends upon Steward's full disclosure of information about the Measure.

B. If NQF proposes changes to a Measure prior to initial endorsement, NQF shall notify the Steward of the proposed changes, and the Steward shall have the right to accept such changes or reject the changes and withdraw the Measure from consideration for initial endorsement. If NQF proposes changes to a Measure during maintenance review, NQF shall notify the Steward of the proposed changes, and the Steward shall have the right to accept such changes or reject the changes and NQF may remove endorsement of the Measure undergoing maintenance review. If Steward withdraws the Measure from consideration for initial endorsement or maintenance review for any reason, NQF shall have no right to endorse the original or modified Measure unless Steward elects to re-submit the original or modified Measure.

C. NQF, in its sole discretion, determines whether to endorse a Measure. Steward or a third party may appeal a decision to endorse a Measure through NQF's appeals process. The result of an appeal of a Measure endorsement decision is final.

D. In order to maintain endorsement, Steward must cooperate with the measure maintenance process, which occurs approximately every three (3) years.

IV. Disclosure of Measure Details

A. Measure Disclosure Prior to Endorsement. Measure disclosure to NQF prior to endorsement means disclosure of complete information regarding the Measure to NQF's staff, directors, committee members, its agents, and the public for the purpose of evaluation, analysis, or display of the Measure in connection with NQF endorsement, including but not limited to:

1. detailed measure specifications, including codes with descriptors, algorithms/measure logic, and risk adjustment model;
2. information supporting the usability and use of the measure;
3. information supporting the feasibility of the measure;
4. evidence supporting the measure focus;
5. data and results generated from testing the measure; and
6. for a Fee-Based Measure, the proposed price structure for the grouper, risk adjustment, other methodology or component that is essential to calculating the Fee-Based Measure.

B. Measure Disclosure Following Endorsement Decision.

1. Endorsed Measure. If the Measure is endorsed, NQF may disclose, display publicly and make available in any format it chooses:
   a. complete information regarding the Measure, including all information disclosed by the Steward under Section IV.A;
   b. the Measure Submission Form;
   c. all updates to the Measure; and
   d. a link from NQF's website to the Steward's website.
2. Rejected or Withdrawn Measure. If the Measure is not endorsed, or the Steward withdraws an unendorsed Measure from the evaluation process, NQF may disclose, display publicly and make available in any format it chooses:
   a. complete information regarding the Measure, including all information disclosed by the Steward under Section IV.A;
   b. the Measure Submission Form; and
   c. the reason why the Measure was not endorsed.
3. Measure Endorsement Removed. If NQF removes Measure endorsement or the Steward withdraws an already-endorsed Measure, NQF may disclose, display publicly and make available in any format it chooses:
   a. complete information regarding the Measure, including all information disclosed by the Steward under Section IV.A;
   b. the Measure Submission Form; and
   c. the reason why Measure endorsement was removed or the Measure withdrawn.
4. Survival. This Section IV.B. shall survive the expiration or termination of this Agreement.

V. Conditions of Endorsement

A. Steward must make the Measure specifications generally available for Permitted Uses, free of charge and on a non-discriminatory basis. Steward must make a Fee-Based Measure available for Permitted Uses according to the pricing structure submitted as part of the endorsement process and shall notify NQF if the Steward imposes a fee or charge that is inconsistent with the pricing structure submitted at the time of endorsement. In connection with a Fee-Based Measure only, Steward may require a user to enter into a no-cost non-disclosure or licensing agreement in order to use the Fee-Based Measure for a Permitted Use.

B. Steward must maintain the Measure throughout the period of endorsement. Steward's failure to maintain the Measure may result in the removal of endorsement.

C. If Steward changes a Measure following endorsement, Steward must notify NQF of the changes as soon as practicable and make them available to the public free of charge. A change to a grouper, risk adjustment, other methodology or similar component in a Fee-Based Measure must be made available to the public and any charge for such component must be reasonable.

D. Steward agrees to cooperate with ad hoc reviews. Triggers for ad hoc reviews include, but are not limited to, a material change in a Measure or a change in evidence supporting the Measure.

E. Steward may refer to a currently endorsed Measure as "NQF-endorsed." Steward agrees to comply with guidelines that NQF may issue in connection with publicizing the status of the endorsed measure.

VI. Term and Termination.

A. This Agreement is effective as of the date above written and shall have a term, with respect to each Measure brought forward for endorsement under this Agreement, from the date of submission for endorsement until a given Measure is up for maintenance, unless this Agreement is otherwise terminated.

B. NQF may terminate this Agreement with respect to a given Measure upon ten (10) days written notice of its decision to remove endorsement of such Measure. NQF shall notify Steward of the reasons for removing endorsement and provide Steward with a reasonable opportunity to address the reasons for removing endorsement. The determination of whether Steward has sufficiently addressed such reasons, as well as the determination to remove endorsement, shall be made in NQF's sole discretion.

C. If Steward requests that NQF remove endorsement of a Measure or the Steward withdraws an unendorsed Measure from the evaluation process, this Agreement will terminate with respect to that Measure upon the effective date of endorsement removal or the date the unendorsed Measure is removed from the evaluation process.

D. If Steward does not wish to continue as Steward of a Measure, Steward must provide written notice to NQF as soon as practicable following such decision and such Measure will be handled in one of the following ways:

a. Steward may request removal of endorsement from the Measure as described in Subsection C of this Section VI;

b. Steward may transfer stewardship of the Measure to an identified organization according to NQF process and the Steward will have no responsibility for such Measure;

c. Steward may authorize NQF to search for a replacement steward; or

d. NQF may remove Measure endorsement.

E. If Steward does not maintain the Measure and does not respond to NQF's inquiries regarding the Measure, NQF may, in its discretion, search for a replacement steward or remove endorsement from the Measure.

VII. Indemnification and Liability.

A. Steward shall hold NQF harmless and indemnify NQF for any and all costs, damages, and expenses, including reasonable attorneys' fees, incurred by NQF and arising out of: (i) any claim, action, suit or allegation that the Measure or use thereof infringes or constitutes a misappropriation of any trademark, patent, copyright, trade secret, proprietary right or similar property right, or (ii) any claim, action, suit or allegation that is based on Steward's negligence or willful misconduct related to the Measure.

B. Steward waives any claim against NQF and releases NQF from any liability arising from a decision to endorse, decline to endorse, or remove endorsement of a Measure.

C. Steward acknowledges that information regarding Steward's Measure(s) and displayed by NQF is only as accurate as the information provided by Steward. Steward waives any claim against NQF and releases NQF from any liability resulting from inaccurate display of information regarding Steward's Measure(s) unless such inaccuracy is a result of NQF's gross negligence or willful misconduct. Any such damages shall be limited to actual damages.

D. This Section VII shall survive the expiration or termination of this Agreement.

VIII. Miscellaneous.

A. Any notice or other communications under this Agreement must be in writing and will be considered given on the date delivered to the other party through a method capable of tracking. Notices shall be sent to:

National Quality Forum
1030 15th Street, NW
Suite 800
Washington, DC 20005
ATTN: Office of General Counsel

B. This Agreement may only be amended in writing through a document signed by both Parties.

C. The Parties will attempt to resolve any disputes between them through negotiation or other informal means. In the event that a dispute cannot be resolved in this manner, the Parties will submit to binding arbitration in accordance with the rules of the American Arbitration Association. This subsection shall survive the expiration or termination of this Agreement.

Appendix D: Addendum of the Measure Steward Agreement-New Measures

ADDITION OF MEASURES FOR
CONSIDERATION FOR ENDORSEMENT
ADDENDUM TO MEASURE STEWARD AGREEMENT
BETWEEN
NATIONAL QUALITY FORUM
AND
_____

This Addendum to the **MEASURE STEWARD AGREEMENT** (the "Agreement"), which was entered into on ____/_____/_____ by and between National Quality Forum ("NQF") and _____ ("Steward"), is effective upon acceptance by NQF.

WHEREAS, Steward has entered into the Agreement and wishes to submit additional Measures for consideration for endorsement;

NOW, THEREFORE, in consideration if the foregoing, NQF and Steward agree as follows:

I. **List of Measures**. Steward lists below additional Measures for consideration for endorsement by NQF:

Measure #	Measure Title	Steward

II. **Miscellaneous.**

A. All capitalized terms in this addendum have the same meaning as those in the Agreement.

B. This Addendum is incorporated by reference into the Agreement. All other provisions of the Agreement remain unchanged.

IN WITNESS WHEREOF, the Parties sign below to indicate their acceptance of this Addendum.

NATIONAL QUALITY FORUM

_____	_____
Signature of Authorized Representative	Signature of Authorized Representative
_____	_____
Name of Authorized Representative	Name of Authorized Representative
_____	_____
Title of Authorized Representative	Title of Authorized Representative
_____/_____/_____	_____/_____/_____
Date	Date