

NATIONAL QUALITY FORUM

TO: NQF Members
FR: NQF Staff
RE: Voting draft for *National Voluntary Consensus Standards for Imaging Efficiency: A Consensus Report*
DA: August 10, 2010

Background

This draft report from NQF's Imaging Efficiency project is to support member voting on six imaging efficiency measures recommended for endorsement. NQF continues to engage the healthcare efficiency arena as variability in healthcare quality remains and the cost of care continues to rise. To address these issues, NQF initiated the Imaging Efficiency project which sought to identify and endorse measures concerned with imaging efficiency in the outpatient setting. A Steering Committee of 21 individuals representing a diverse range of stakeholder perspectives reviewed and considered for endorsement a total of 17 candidate imaging efficiency standards.

Comments and Revised Draft Report

The comment period for the draft report, *National Voluntary Consensus Standards for Imaging Efficiency: A Consensus Report*, concluded on June 28, 2010. NQF received 71 comments from 18 organizations on the draft report. The breakdown of the comments by Member Council is as follows:

Consumers – 1	Health Professionals – 20
Purchasers – 18	Public Health/Community – 0
Health Plans – 7	QMRI – 3
Providers – 6	Supplier and Industry – 0
Non-members – 16	

All obtained comments were discussed by the Steering Committee. All measure-specific comments were forwarded to the measure developers, who were invited to respond. The comments, including responses from the measure developers, were discussed by the Steering Committee during a conference call that took place on July 16, 2010.

A table of detailed comments submitted during the review period, with responses and actions taken by the Steering Committee, is posted on the NQF voting webpage ([here](#)).

Comments and Their Disposition

General comments

There were numerous comments stating general support for the Imaging Efficiency project. Several comments requested that efforts be undertaken to broaden population parameters; address concerns regarding level of analysis listed for the measure; and for NQF to continue work in the efficiency arena in an effort to close measurement gaps.

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Broaden Measure Population Criteria

Several comments highlighted a concern for measures which are only applicable to a specific insurance population and requested that efforts be undertaken to broaden those measures with narrow patient population parameters (age to include persons under the age of 65).

Action taken: The Committee reiterated their request for the expansion of measures with narrow population parameters, but acknowledged the developer is unable to expand the measure's population at this time due to time constraints and the testing requirement. After discussion of the comments, the Committee maintained its position to recommend the measures for endorsement as currently specified.

Level of Analysis

The Steering Committee considered requests to clarify the level of analysis for those measures recommended for endorsement. Comments also questioned whether several performance measures that address a level of analysis beyond the clinician level were appropriate.

Action taken: The Committee reviewed the level of analysis for each measure and acknowledged NQF's efforts in collaborating with the measure developers to verify the level of analysis for each measure and update the draft report. The Committee recommends NQF explore options to refine the measure submission and review process as appropriate. After discussion of the comments, the Committee determined that the level of analysis for those measures recommended for endorsement were applicable and valid.

Measurement Gaps

Several comments identified the need for more measures of efficiency within the imaging field and larger healthcare system.

Action taken: The Steering Committee acknowledged the need for more measures efficiency and worked diligently with measures developers on this project to refine their measures. The Steering Committee supports NQF's efforts in the imaging efficiency measurement arena and encourages measure developers to continue their work in this field.

Measure-specific comments

Measure IEP-005-10 Pulmonary CT imaging for patients at low risk for pulmonary embolism Measure IEP-007-10 Appropriate head CT imaging in adults with mild traumatic brain injury

The public and member comments for measure IEP-005-10 and IEP-007-10 were generally supportive with some requests for modifications to the measures. Concerns with the measures focused on the feasibility and reliability in facilities which lack sufficient functional order entry or electronic systems. The measure developer based on previous Steering Committee request, had provided a paper based data collection instrument to collect the data elements necessary for the measure for use at facilities without an electronic system. While the measure was tested using a specific electronic data collection tool, the paper based data collection instrument was not tested. The Committee recommended the measure for time-limited endorsement, requiring the developer to test the paper based data collection instrument and provide testing results to NQF within twelve months of the measure's time-limited endorsement date.

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Action taken: The Steering Committee believes the measure as specified represents a strong indicator of imaging efficiency and quality in the healthcare arena. Testing has already been conducted through electronic data sources, and the testing results for the paper based data collection instrument will be provided to NQF within twelve months of endorsement; the Committee sees no further need to delay the progress of this measure.

Measure IEP-010-10 Cardiac Imaging for Preoperative Risk Assessment for Non-Cardiac Low-Risk Surgery

The public and member comments for measure IEP-010-10 varied, with some in support and others opposed to the measure. Comments not in support of the measure highlighted a concern regarding the potential for misclassification and small sample sizes. Misclassification was of concern because the measure cannot account for all reasons why the test may have been ordered.

Action taken: The Committee acknowledged the potential for misclassification, but reiterated the focus of the measure is on the outliers, and thus determined that the misclassification was acceptable for this measure. Furthermore, based on empirical data submitted by the measure developer, the Committee determined that while the measure has small sample sizes the outliers are captured and meaningful to assess. The Committee believes the measure as currently written represents a strong indicator of imaging efficiency and quality in the healthcare arena. After discussion of the comments the Committee maintained its recommendation for endorsement for this measure.

Measure IEP-013-10 Use of brain computed tomography (CT) in the emergency department (ED) for atraumatic headache

Overall, public and member comments reflected lack of support for the measure. Comments focused on the potential for unintended consequences with the use of the measure. In particular, there were concerns that older patients with headache could have other clinical reasons for imaging, such as use of oral anticoagulants that would not be captured in this claims-based measure. Prior to member and public comment, the Steering Committee voted to recommend measure IEP-013-10. However, in response to public and member comments regarding this measure the Steering Committee elected to reconsider the measure. The Committee reassessed the measure submission form, reviewed past deliberations and documentation provided by the developer.

Action taken: The Committee was concerned with the overall number of comments not in support of the measure. The Committee elected to conduct a revote on measure IEP-013-10 in response to obtained public and member comments. The measure revote concluded on Thursday, August 5, 2010. The results of the revote were as follows: 8 votes recommending the measure for endorsement vs. 12 votes not recommending the measure for endorsement. Based on the Committee's revote, measure IEP-013-10 is not recommended for endorsement.

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Measure IEP-014-10 Cardiac stress imaging not meeting appropriate use criteria: preoperative evaluation in low risk surgery patients

Measure IEP-015-10 Cardiac stress imaging not meeting appropriate use criteria: routine testing after percutaneous coronary interventions (PCI)

Overall, the public and member comments for measures IEP-014-10 and IEP-015-10 were favorable. Some comments supported the measures with modifications, specifically to add stress magnetic resonance imaging (MRI) and coronary computed tomography angiography (CTA) to the measures.

Action taken: The Committee agrees with the comment and had previously requested the addition of stress MRI and CTA to IEP-014-10 and IEP-015-10. The Committee and the measure developer affirmed the addition of stress MRI and CTA to the measure; however, the addition is not expected to substantially change the measure due to the low volume of the added procedures. The Committee maintained its recommendation for endorsement.

Measure IEP-016-10 Cardiac stress imaging not meeting appropriate use criteria: testing in asymptomatic, low risk patients

Public and member comments for measure IEP-016-10 were mixed. Comments in support of the measure with modifications specifically requested the addition of stress MRI and CTA as well as incorporating time frames into the measures specifications.

Action taken: The Committee and the measure developer confirmed that stress MRI and CTA to the measure have been added; however, the addition is not expected to substantially change the measure due to the low volume of the added procedures. The Committee maintained its recommendation for endorsement.

NQF Member Voting

Information for electronic voting has been sent to primary contacts at NQF Member organizations. Comments accompanying votes must be submitted by e-mail and must identify submitter, organization, and the specific ballot item that the comments accompany.

Please note that voting concludes on Friday, September 10, 2010, at 6:00 PM (ET) – no exceptions.

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NATIONAL VOLUNTARY CONSENSUS STANDARDS FOR IMAGING EFFICIENCY: A CONSENSUS REPORT

DRAFT REPORT FOR VOTING

**NQF REVIEW DRAFT: DO NOT CITE OR QUOTE
NQF MEMBER VOTES DUE TO NQF BY SEPTEMBER 10, 2010 6:00PM ET**

