

2022 Mission Highlights



**NATIONAL
QUALITY FORUM**

Driving measurable health
improvements together

qualityforum.org

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Letter From the President and CEO

At a time when our health and healthcare challenges dominate headlines, I remain optimistic. Why? Because of our work together. Time and again, our members have come to the table to address the nation's most pressing healthcare needs with a shared commitment to do better by patients, providers, purchasers, and payers.

This is what we do together at NQF. We improve quality, affordability, and value in our nation's healthcare by bringing all stakeholders to the table, giving them an equal voice, building trust, facilitating collaboration, and building solutions that improve care, improve health, and advance equity.

As the proven place for convening all voices to address our nation's most pressing health and healthcare challenges, we continue our long-standing commitment to excellence. We continue working to steward the nation's portfolio of healthcare quality measures, to align public- and private-sector uses of measures, and to work upstream and downstream from the endorsement process on critical measurement issues, including the transition to interoperable digital quality measures, earlier and deeper engagement of patient and clinician voices in defining a next generation of measures, and advancing measurement methods required to achieve health equity and eliminate avoidable healthcare harms. Our impact is evident in the many accomplishments we achieved together in 2022 and that are highlighted in the pages that follow.

While we celebrate the achievements of the year gone by, our work is far from complete. We must move forward boldly. The challenges are urgent and numerous, including a mental health crisis among children, adolescents, and young adults and a system lacking the capacity to care for them; maternal mortality rates that are three-times higher than other wealthy nations; pervasive, persistent disparities in access, quality, and health outcomes based on race, ethnicity, and socioeconomic status; avoidable healthcare harms that have defied decades of improvement efforts; and a healthcare workforce that is burnt out and leaving the profession. While measurement is but one lever to address these and other pressing health and healthcare challenges, its appropriate use is one of our most potent tools for advancing quality, safety, affordability, and equity.

This is our work ahead. As with all that has come before, it can only be done with each of you at the table. We thank you for your continued trust and confidence and for the important work we will continue to do together.



Strategic Plan

NQF's Strategic Plan lays out a pathway for driving meaningful, measurable improvements in healthcare quality to achieve our vision of high value care and optimal health outcomes for all people. One of the plan's key areas of focus is on the Health of Our Mission, which is composed of six goals to create a better and more equitable healthcare quality ecosystem:

- 1 Define the national measurement architecture to drive improvement in quality and value.
- 2 Advance health equity and address disparities.
- 3 Become a national leader in defining measures for equitable patient and family engagement.
- 4 Develop measurement approaches utilized in value-based payment arrangements.
- 5 Promote the transformation to digital health.
- 6 Close quality gaps for national healthcare priorities.

These goals guide our work across all NQF projects and initiatives. Many of our efforts touch on multiple areas, and many projects help advance more than one of these goals. Following is a look at some of our recent work that is critical to our progress, and to the health of our shared Mission.



MEASURE ARCHITECTURE

Define the national measurement architecture to drive improvement in quality and value.

- Accelerating the adoption of high impact digital and health equity measures through the Core Quality Measures Collaborative (CQMC).
- Improving diagnostic excellence by addressing barriers to measuring diagnostic performance.



HEALTH EQUITY

Advance health equity and address disparities.

- The Measure Applications Partnership (MAP) and CQMC Health Equity Advisory Groups continue work addressing measurement methods to advance health equity.
- Improving rural health by addressing critical measurement gaps and helping providers in rural settings select relevant and feasible measures.
- The Leadership Consortium identified social drivers of health (SDoH) data utilization to improve health outcomes as its 2022-2023 priority.



PATIENT & FAMILY ENGAGEMENT

Become a national leader in defining measures for equitable patient and family engagement.

- Empowering patients and advancing patient-centered care through more patient-reported outcome performance measures (PRO-PMs).
- Investing in our Patient and Caregiver Engagement (PACE) Advisory Group.



VALUE-BASED CARE

Develop measurement approaches utilized in value-based payment arrangements.

- Providing guidance on risk adjustment models to facilitate unbiased healthcare quality measurement and to advance health equity.
- Developing strategies and guidance to strengthen transportation security through the Transportation Insecurity Guide.
- The Scientific Methods Panel (SMP) is working to update our complex measures algorithm for the growing number of complex measures.



DIGITAL HEALTH

Promote the transformation to digital health.

- Working with CMS & ONC to advance interoperable, digitally-source quality measures.
- Improving care coordination through strengthening Electronic Health Records (EHRs).
- Assessing the impact telehealth has on healthcare system readiness and outcomes during emergencies.



QUALITY GAPS


Close quality gaps for national healthcare priorities.

- Addressing disparities and expanding maternal morbidity and mortality measurement to improve maternal health outcomes.
- Contributing to the prevention and monitoring of opioid-related overdoses through improved measurement methods.

Driving Better, Safer, More Equitable Healthcare: Project Spotlight

Since its founding more than two decades ago, NQF has been a leader in advancing healthcare quality measurement as an indispensable tool for evaluating and improving care. **We partner with federal government agencies, healthcare institutions, medical societies, patient advocacy groups, and other public- and private-sector organizations.** Our work touches many different elements of the American healthcare landscape from bench to bedside to boardroom, all with the ultimate purpose of improving care for all people. As the trusted voice for measurable health improvements, we leverage quality measurement expertise to drive better, safer, and more equitable healthcare.

Organizations from across the healthcare ecosystem turn to NQF because of our unique position as both a steadfast quality measurement authority and forward-thinking catalyst for innovation. In 2022, we continued our important work endorsing best-in-class measures, providing multistakeholder input to federal programs, and identifying measure gaps and measurement strategies to improve the health and well-being of all Americans. We also worked on a number of focused projects addressing some of our nation's most pressing healthcare challenges. The highlighted initiatives showcase some of NQF's noteworthy endeavors over the past year.



The important work reflected in this section was made possible by funding from Centers for Medicare & Medicaid Services (CMS). Their leadership and dedication to improving the care of all Americans propels our direction and makes CMS an indispensable partner for us to realize our mission.

MEASURE ENDORSEMENT AND MAINTENANCE

Serving as a neutral convener, NQF brings together diverse groups of healthcare stakeholders to endorse and maintain healthcare quality measures through our Consensus Development Process (CDP). Public and private healthcare entities use these measures to assess performance in specific areas and identify opportunities for improvement. **Standardized measures also can be used to make comparisons across different clinicians, hospitals, health plans, or providers, as well as for reporting and accountability purposes.**

The CDP is carried out annually in two cycles, so endorsement decisions in any given calendar year include those submitted in the fall of the prior year. Measures that NQF endorsed in 2022 encompass those submitted for the fall 2021 and spring 2022 cycles. NQF reviewed a total of 54 measures across a wide variety of topics, endorsing 41 of them. Endorsement decisions on another four are not yet final.

“Healthcare quality measurement has never been more important, and the Measure Set Review process is a significant innovation that will help federal programs work more efficiently to improve health outcomes for millions of Americans.”

DANA GELB SAFRAN, SCD

President & CEO, NQF



ANNUAL REVIEW AND RECOMMENDATIONS ON MEASURES FOR FEDERAL PROGRAMS

Measure Applications Partnership

Every year since 2011, NQF has brought together diverse groups of stakeholders as part of MAP to provide recommendations to the U.S. Department of Health and Human Services (HHS) on which measures to use in public reporting and performance-based payment programs. MAP’s recommendations also inform national healthcare quality priorities. MAP is designed to help ensure the measures used in federal programs address national healthcare priorities, fill critical measurement gaps, and increase public-private payer alignment.

Measure Set Review


Following a successful pilot conducted in the previous annual review cycle, in 2022, MAP implemented a process for reviewing and providing recommendations on the removal of performance measures from Medicare public reporting and performance-based payment programs. Known as Measure Set Review (MSR), this process was created to increase efficiency and help ease the burden associated with an increased number of performance measures. It was added to MAP’s scope as part of the 2021 Consolidated Appropriations Act. Under MSR, stakeholders review measures and identify those that no longer align with program priorities or provide valuable information for public reporting and payment systems.

MAP Recommendations

For the 2021–2022 cycle, MAP conducted a thorough review of the 44 measures that were included on the list of Measures Under Consideration (MUC)—often referred to as “the MUC List”—released by the Centers for Medicare & Medicaid Services (CMS). The MUC List measures were considered for use in 13 federal programs. During the MAP process, stakeholders participating in Workgroups and Advisory Groups engaged in robust discussion, and comments were submitted by NQF Members and the public.

Topics that emerged from discussions and comments as particular themes included measure alignment, health equity, risk adjustment, and patient-reported outcomes (PROs). MAP also addressed the prominent role of cross-setting digital and safety measures in the prevention of critical clinical safety events in inpatient settings. Of the 44 overall measures reviewed, MAP expressed support for 10 and conditional support for 32. MAP declined to support two of the measures and provided potential mitigation for one of the two.

During the 2022 MSR cycle, MAP reviewed and made recommendations on 32 measures under review for six CMS quality reporting and value-based payment programs covering ambulatory, acute, and post-acute care/long-term care settings. Of the 32 measures, MAP recommended three for removal, four for removal under certain conditions, nine for retention, and 16 for conditional retention.



MAP is a public-private partnership of diverse stakeholders convened annually by NQF on behalf of CMS to achieve consensus on the recommended measures appropriate for public reporting and performance-based payment. We bring together representatives of Quality Measurement, Research, and Improvement; Purchasers; Providers; Public/Community Health Agencies; Health Professionals; Health Plans; and Consumers and Suppliers in convening MAP. The forum's careful balance of diverse stakeholder interests ensures that the federal government receives varied and thoughtful input on performance measure selection. MAP involves approximately 150 healthcare leaders and experts representing nearly 90 private-sector organizations, as well as liaisons from seven federal agencies.

MAP Health Equity Advisory Group

As part of the MAP review process that was added for the 2021-2022 MAP cycle, NQF convened a Health Equity Advisory Group to provide input on measurement issues affecting health disparities and the nation's critical access hospitals. The MAP Health Equity Advisory Group provided vital input on the measures, making recommendations to reduce the differences closely linked with SDoH.

IDENTIFYING THE RIGHT MEASURES TO IMPROVE RURAL HEALTH

Nearly 60 million Americans—almost one-fifth of the U.S. population—live in rural areas, and people in these communities experience significant health disparities compared to those in nonrural areas. These inequities often stem from issues specific to rural areas, such as geographic isolation, healthcare systems with limited resources, and fewer transportation options.

In 2022, NQF reconvened the Rural Health Advisory Group to update its list of key rural health measures first developed by the group in 2017-2018. The Advisory Group developed an updated list and accompanying report outlining 37 best-available measures to address the specific health-related needs of rural communities. The Advisory Group's review emphasized behavioral and mental health, substance use, infectious disease, access to care, and equity and SDOH.

The report also identifies critical gaps remaining in measurement topic areas. The areas yet to be addressed by the list included intentional and unintentional injury, COVID-19, HIV, telehealth-relevant measures, cancer screening measures, and cost. The report is designed to help healthcare providers in rural settings select measures that are most relevant and most feasible to implement.

LEVERAGING ELECTRONIC HEALTH RECORDS FOR BETTER CARE COORDINATION

Patients typically interact with numerous healthcare providers in multiple different healthcare systems and settings. Patient medical records end up spread across various disconnected databases that are not set up to share information, making efficient communication between patients, caregivers, clinicians, case managers, and other stakeholders a major challenge. Better communications allows care teams to better coordinate and align different aspects of care, and better care coordination results in better care.

EHRs are central to coordinating, measuring, and improving care. Unfortunately, many EHR systems fall far short. To address this, NQF convened a multistakeholder Committee to identify opportunities to more effectively leverage EHRs and the data they collect.

The resulting report offers recommendations for using EHRs and EHR-sourced data in measurements of quality. Recommended improvements include developing novel EHR data elements and using EHR data to fill measurement gaps. Data interoperability is an important factor in these efforts, and the report outlines recommended actions for organizations at different EHR maturity levels and with different technical capabilities.

Since gaps in care coordination are more likely to impact patients disproportionately affected by SDOH factors, such as food or housing insecurity, the recommendations also promote more equitable health outcomes.

PUTTING QUALITY MEASURES TO WORK AGAINST THE OPIOID CRISIS

Opioid-related deaths and overdoses have increased at an alarming rate in recent years. Despite falling between 2018 and 2019, U.S. drug overdose deaths have surged by almost 46 percent. Opioid-related deaths rose to more than 80,000 in 2021 and account for 75 percent of all overdose-related fatalities. Further complicating the problem, substance use disorders (SUDs) often go hand-in-hand with behavioral health disorders, and research shows that people with an SUD or opioid use disorder and co-occurring behavioral health conditions are especially at risk. Nearly 10 million adults fall into this category.

Recognizing the urgent need for measures that address the overlap between substance use and behavioral health conditions, NQF released the Opioids and Behavioral Health Measurement Framework and report in 2021. Building on that work, the expert Committee responsible for the original framework was reconvened to develop additional guidance for putting its recommendations into practice. The guidance was carefully designed to help health systems, providers, payers, and other stakeholders overcome the real-world challenges that can hinder efforts to implement the framework.

The updated report released in 2022 delineates actionable strategies, case exemplars, and solutions to overcome common barriers and outlines opportunities for coordination and partnerships across care settings. Because the opioid crisis and the multiple, interrelated factors affecting it are constantly in flux, and strategies must be nimble enough to adapt to the rapidly changing landscape, the updated report also sets out guiding principles to help stakeholders improve their readiness.



**OPIOID-RELATED DEATHS
ROSE TO MORE THAN
80,000 IN 2021**

AMPLIFYING THE PATIENT VOICE IN DIGITAL QUALITY MEASURES

Empowering patients is fundamental to quality healthcare, and patient-reported outcome performance measures (PRO-PMs) are a critical vehicle for amplifying the patient voice. PRO-PMs use feedback gathered directly from patients to evaluate health outcomes and the quality of care. Unfortunately, they make up less than 7 percent of NQF-endorsed quality measures, and their further development has been hindered by a lack resources specifically for developing PRO-PMs.

In response, NQF developed Technical Guidance to guide measure developers through the process of creating PRO-PMs, particularly digital ones that use electronically gathered data. The 2022 Technical Guidance updates the first iteration released in 2021 as part of NQF's Building a Roadmap From Patient-Reported Outcome Measures to Patient-Reported Outcome Performance Measures initiative. The updated "Roadmap" serves as both a resource for measure developers and a catalyst for building a more robust database of digital patient-centric quality measures. While its focus is on digital PRO-PMs, the guidance it offers is generally applicable to all PRO-PMs.

Providing thorough yet accessible guidance for novice and advanced measure developers alike, the Roadmap serves as a primer on the process, compiling existing resources and framing them through the lens of patient-reported performance measurement. Developers will be able to use it to design, develop, and test PRO-PMs that are meaningful to patients, aligned with best practices, appropriate for regulatory purposes, usable by public and private payers, and consistent with scientific standards.

SUPPORTING RISK ADJUSTMENT MODELS, ADVANCING HEALTH EQUITY

There is broad agreement that quality measurement must support efforts to improve health equity and that measures should not be biased. Yet, the root causes of inequities that affect health outcomes are multiple and often interrelated. Determining whether and how to use risk adjustment to account for social factors, like income or education, and functional risk factors, such as the ability to perform activities of daily living, poses complex challenges.

Risk adjustment is a statistical method that can be applied to certain types of healthcare quality measures to account for different characteristics that put some patients at greater risk of worse health outcomes. Using risk adjustment to account for clinical differences is widely accepted and widely implemented, but adjusting for social risk factor raises is more controversial. Both proponents and critics have raised concerns about possible unintended consequences.

In 2022, NQF released the Technical Guidance for developing risk adjustment models to facilitate unbiased healthcare quality measurement and to advance health equity. The Guidance outlines a step-by-step process that reflects best practices and addresses the methodological trade-offs of adjustment for social and functional risk factors. While the standard process facilitates greater consistency, the specific design of risk adjustment models is left up to developers.

The Technical Guidance addresses a long-standing need for standardization and transparency. The increasing shift to value-based payment (VBP) programs closely linking payment to healthcare quality has highlighted the importance of understanding and accounting for the impact social factors have on quality assessments.

MAKING HIGH QUALITY HEALTH INFORMATION ACCESSIBLE TO EVERYONE

In the fall of 2022, we launched a project in partnership with YouTube Health to help healthcare stakeholders provide high quality online health information to patients and consumers. The project seeks to advance quality standards for health information on social media. NQF will develop an issue brief that expands existing definitions of high quality health information, highlighting the importance of accessibility to consumers of all levels of health literacy as an essential component. The document to be released in early 2023 is intended to guide health information content creators.

“This project with NQF will help to guide content creators on our platform and others to develop content that not only educates but also resonates with people.”

DR. GARTH GRAHAM

Global Head of YouTube Health

Experts at the intersection of social media, health communication, and healthcare quality will explore the quality of health information content in terms of accessibility, considering how consumers find, understand, and use the information. The initiative will complement previous work done by the National Academy of Medicine (NAM), World Health Organization (WHO), and Council of Medical Specialty Societies (CMSS) to establish criteria for determining the credibility of various sources.

PROVIDING PROVEN STRATEGIES FOR SAFE ANTICOAGULANT USE

More than 8 million people in the U.S. currently take anticoagulants, which work by decreasing the blood's ability to clot. They are essential and lifesaving for people with cardiac and vascular disorders, but have been identified as the most common cause of adverse drug events (ADEs) across various healthcare settings. Anticoagulation Stewardship offers a proven approach for reducing their likelihood.

NQF partnered with the Anticoagulation Forum on a project funded by the U.S. Food and Drug Administration (FDA) to release *Advancing Anticoagulation Stewardship: A Playbook*. The playbook was designed to help healthcare organizations implement evidence-based strategies to promote patient safety in the use of anticoagulant medications.

Anticoagulation Stewardship is defined as a coordinated, efficient, and sustainable system-level initiative designed to achieve optimal anticoagulant-related health outcomes and minimize avoidable ADEs. It has been shown to be successful in improving health outcomes, increasing efficiency, and reducing costs. Effective stewardship is associated with reductions in drug-drug interactions, bleeding events, hospital readmissions, length of stay, and other healthcare expenditures. Mounting published evidence describes how organizations that have implemented Anticoagulation Stewardship programs have achieved cost savings of up to \$4 million and cost avoidance of up to \$3 million.



MORE THAN 8 MILLION PEOPLE IN THE U.S. TAKE ANTICOAGULANTS

Leadership Consortium: Setting Priorities, Strengthening Impact

The Leadership Consortium is NQF's prestigious multistakeholder forum where select healthcare experts collaborate to identify actionable strategies to improve healthcare quality and drive lasting change in key areas. The group's guidance informs the direction of NQF programs and priorities for driving improvement across the healthcare ecosystem. Taking part in the Consortium is an exclusive opportunity reserved for NQF Member Organizations.

To strengthen the Leadership Consortium's impact for broader system improvement, NQF modified the way its expert guidance is being put into action. With a commitment to achieving measurable improvements and results, the Consortium has moved from a one-year to a two-year cycle, with the second year dedicated to implementing actions defined during year one. This new approach launched in June 2022. In year one, members prioritized making effective use of Social Drivers of Health data in order to improve patient outcomes, specifically by connecting patients with community resources. In year two, participants will pilot test strategies for improvement over a 12-month period.



35 SENIOR LEADERS

**From 35 NQF Member Organizations make
up the 2022 Leadership Consortium**

2022 at a Glance

300+

Member Organizations
Headquartered Across
39 STATES



600+

Active Volunteers Representing
8 STAKEHOLDER GROUPS



100+

Virtual Convenings



25+

Reports Published



54

Measures Reviewed



1 MISSION:

Driving Measurable Health Improvements Together

Celebrating Innovation: John M. Eisenberg Patient Safety & Quality Awards

Presented by The Joint Commission and National Quality Forum

NQF partners with The Joint Commission in recognizing the best examples of individual, local, and national efforts to improve patient safety and healthcare quality through the prestigious Eisenberg Awards. This annual award program was launched in 2002 to honor the late John M. Eisenberg, MD, MBA, former administrator of AHRQ, who was an impassioned advocate for healthcare quality improvement and also a founding member of NQF's Board of Directors.

This special award annually unites the quality community in recognizing the lasting contributions and influence of John Eisenberg to improving patient safety and quality.

2022 awardees made advancements related to medical errors in health information technology (IT), significantly reduced rates of critical events related to anesthesia, and connected mothers with important postpartum care.

Congratulations 2022 Awardees



INDIVIDUAL ACHIEVEMENT

Jason S. Adelman, MD, MS



NATIONAL LEVEL INNOVATION IN PATIENT SAFETY AND QUALITY

North American Partners in Anesthesia (NAPA)



LOCAL LEVEL INNOVATION IN PATIENT SAFETY AND QUALITY

Parkland Health

Go Deeper: Awardee Accomplishment Summaries

Jason S. Adelman, MD, MS, is chief patient safety officer and associate chief quality officer; executive director, Center for Patient Safety Research; director, Patient Safety Research Fellowship, Columbia University Irving Medical Center and NewYork-Presbyterian; associate professor of medicine (in biomedical informatics) and vice chair for quality and patient safety, Department of Medicine, Columbia University Vagelos College of Physicians and Surgeons. Dr. Adelman is a leader and innovator in the medical errors field and has developed novel methods to measure and prevent errors in health IT systems. Among Dr. Adelman's key accomplishments is the development of the Wrong-Patient Retract-and-Reorder (RAR) Measure that detects wrong patient orders in electronic health record data. The RAR Measure has subsequently facilitated a large body of patient safety research, including medication errors and wrong-patient orders in neonatal intensive care units (NICUs). As executive director and founder of the Center for Patient Safety Research, a multi-disciplinary collaboration between Columbia University Irving Medical Center, Weill Cornell Medicine, and NewYork-Presbyterian, Dr. Adelman has led several National Institutes of Health (NIH) and AHRQ funded projects to test safety interventions across the interventions' lifespans. His far-reaching impact has contributed to national and international safety recommendations, including from The Joint Commission and NQF.

North American Partners in Anesthesia is honored for its Anesthesia Risk Alerts Program, which was implemented across 500 hospitals and ambulatory surgery centers (ASCs) in March 2019. The program implemented specific mitigation strategies targeting five high-risk clinical scenarios: known or suspected difficult airway, a body mass index (BMI) greater than or equal to 45, pulmonary hypertension, American Society of Anesthesiologists (ASA) status 4 or 5, and operating room (OR) fire risk. Each patient is assessed by the anesthesia clinician, and if a risk is identified, the specific mitigation strategy for that scenario is advised to prevent harm. After implementation of the program, which reached greater than 95% compliance, the incidence rate of relevant critical adverse events for patients with a BMI greater than or equal to 45 and under general anesthesia decreased significantly.

Parkland Health is recognized for its Extending Maternal Care After Pregnancy (eMCAP) program in Dallas County, initiated in October 2020. The eMCAP program provides postpartum access to care for 12 months after birth for women with the highest social needs and limited access to physician clinic locations, mostly minority women. The program utilizes advance practice providers, community health workers, nurse home visits, virtual visits, and a mobile van deployed to locations in Dallas County to address patient health concerns including hypertension, diabetes, and behavioral health.

Compared to matched controls:

- Attendance for eMCAP patients with chronic hypertension was significantly better up to 12 months after birth.
- Up to three months after birth, patients with diabetes management had significantly better follow up, resulting in significantly lower HbA1c values.
- Patients with abnormal mental health screening scores were successfully referred for behavioral therapy, completed sessions with licensed mental health counselors, and accepted therapeutic intervention.

Membership

Our Member Organizations represent all voices in every sector of health and healthcare—patients and caregivers, consumers, payers, specialty societies, measure developers, federal partners, purchasers, life sciences companies, providers, healthcare researchers, and more. **And our reach continues to grow, NQF Membership grew 11% in 2022!**

Individual experts from these organizations leverage their NQF Membership to continually demonstrate their shared commitment to our mission through engagement and service. Together, we lead the work that enhances healthcare value, makes patient care safer, and results in better health outcomes for all. If you're not already in the #NQFamily learn more about joining this stellar group of national healthcare leaders by visiting www.qualityforum.org/membership.

MEMBER FEEDBACK DRIVES IMPROVEMENT

In 2022, NQF President and CEO, Dana Gelb Safran held three executive listening sessions exclusive to NQF Members. These listening sessions provided a forum for Dr. Safran to hear directly from our Member base on challenges and opportunities they were facing in their corner of the quality measurement world. She also gave Members an advance look into her priorities for the year and details on exciting new initiatives that were coming up for NQF.

NQF brings together stakeholder voices from throughout the healthcare ecosystem.

- **SUPPLIERS**
- **PURCHASERS**
- **PROVIDERS**
- **PUBLIC/COMMUNITY HEALTH AGENCIES**
- **HEALTH PLANS**
- **HEALTH PROFESSIONALS**
- **QUALITY MEASUREMENT, RESEARCH, AND IMPROVEMENT**
- **CONSUMERS**



TOP 3 REASONS ORGANIZATIONS JOIN THE NQF MEMBERSHIP COMMUNITY



ONE

**Engagement and
Impact on the National
Healthcare Agenda**



TWO

**Mission
Support and Social
Responsibility**



THREE

**Resource Access
to Advance Quality
Improvement**



I work at the intersection between research on quality and quality measures, and the use of quality measures for focused quality improvement initiatives. The role of NQF in reviewing and endorsing quality measures is central to all of this. NQF endorsement is a signal of reliability and validity of endorsed measures, so they can be used with some confidence in their scientific merit. The NQF position about social risk adjustment—allowing and encouraging in appropriate circumstances—has been very helpful in projects seeking to improve health equity. NQF fills a crucial niche in the overall environment of quality measurement and quality improvement.

David R. Nerenz, PhD

*Director, Center for Health Policy & Health Services Research
Henry Ford Health System*



I like having the inside scoop on upcoming metrics and the rationale behind them. I enjoy looking at data and evidence regarding why change is needed. This helps me explain why change is needed at my organization. This forum allows me to gather other best practices and ideas from organizations and regulatory agencies which I communicate to other change agents in my organization. The information I gather has helped my organization provide better care and keep patients safe.

Helene Loeb

*Director of Quality Management for Clinical Quality, Safety & Performance Improvement
VirtuaHealth*

WE WELCOME OUR NEW MEMBER ORGANIZATIONS

- American Association of Nurse Anesthesiology
- Avalere Health
- Collaborative for Universal Health, Inc.
- Community Medical Services
- Delta Air Lines Inc.
- Dartmouth-Hitchcock Health
- Greater Philadelphia Business Coalition on Health
- Health Hats
- Kure Kompany, Inc.
- Mercy General Hospital
- Nueva Metrics
- OutCare
- Phreesia
- RTI Health Advance
- Society for Vascular Surgery
- SunCoast RHIO
- The Anesthesia Patient Safety Foundation
- The SCAN Foundation
- TQIntelligence
- Trauma Center Association of America
- UnityPoint Health
- Vascular Access Patient Safety Alliance, Inc.

NEARLY 50 ORGANIZATIONS HAVE BEEN NQF MEMBERS FOR OVER 20 YEARS!

- AARP
- ABIM Foundation
- Agency for Healthcare Research and Quality
- AHA/ACC Joint Committee on Performance Measures
- American Academy of Family Physicians
- American Association of Nurse Anesthesiology
- American College of Cardiology
- American College of Radiology
- American Heart Association
- American Hospital Association
- American Medical Association
- American Nurses Association
- American Society of Health-System Pharmacists
- America's Essential Hospitals
- America's Health Insurance Plans
- Association of American Medical Colleges
- Centers for Medicare & Medicaid Services
- Children's Hospital Association
- CIGNA HealthCare
- Cleveland Clinic
- Consumer Coalition for Quality Health Care
- Council of Medical Specialty Societies
- Federation of American Hospitals
- Florida Alliance for Healthcare Value
- HCA Healthcare
- Health Resources and Services Administration
- Henry Ford Health System
- IPRO
- Jefferson College of Population Health
- Kaiser Permanente
- National Alliance of Healthcare Purchaser Coalitions
- National Association for Healthcare Quality
- National Committee for Quality Assurance
- National Partnership for Women & Families
- Northwell Health
- Premier
- Purchaser Business Group on Health
- The Alliance
- The Joint Commission
- The Leapfrog Group
- The National Forum of ESRD Networks
- UnitedHealth Group
- URAC
- Veterans Health Administration
- Vizient, Inc.

About National Quality Forum (NQF)

The National Quality Forum (NQF) is a non-profit, non-partisan organization based in Washington, DC committed to achieving measurable improvement in healthcare quality and value across the U.S. We serve as a consensus-building entity and an advisory body to the U.S. Department of Health & Human Services (HHS) and the Centers for Medicare & Medicaid Services (CMS). We have more than 300 Member Organizations with hundreds of individual subject-matter experts who gather at our table to devote their time and expertise so every person will experience healthcare services that are safe, appropriate, equitable, and affordable.

Driven by science and collaboration, we exist to help drive multiple perspectives into actions that create measurable impact. Measures endorsed by NQF are considered the gold standard for healthcare performance measurement. The federal government and many private-sector entities use NQF-endorsed measures above all others because of the scientific rigor and consensus-building process behind them.

OUR MISSION

**To be the trusted voice driving
measurable health improvements**

OUR VISION

**Every person experiences high value
care and optimal health outcomes**

OUR VALUES

**Collaboration • Excellence
Integrity • Leadership • Passion**