2024 Mission Highlights



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Letter From the President and CEO

Dear Members and Friends of NQF,

As I reflect on the past year, I am filled with immense pride and gratitude for the remarkable achievements and unwavering commitment of our community of healthcare quality leaders, experts, and advocates. Together, we made significant strides in addressing some of the highest priority pain points related to the field of quality measurement and its uses.

Our broad and inclusive community encompasses patients, caregivers, clinicians, healthcare systems, payers, purchasers, state and federal government agencies, and many more. This year, we have continued to bring these important voices together to drive consensus, reduce measurement burden, and advance meaningful next generation healthcare quality measures that address high-priority gaps.

We have developed and continue to create new opportunities for engagement based on the priorities our community and key stakeholders have identified. We refined our membership model and dues structure to ensure that Membership remains affordable and our Member community remains vibrant and inclusive.

The initiatives we advanced this year through our Members and stakeholders include the following, each of which is further summarized in this *Mission Highlights* report:

Aligned Innovation: Advanced next generation consensus-based measures of behavioral health outcomes and maternal health outcomes to fill high-priority gaps in our nation's portfolio of measures.

Certification 2.0: Partnered with The Joint Commission on new certification products that address clinical topics of highest priority to patients, clinicians, health systems, payers, and purchasers, and began to deliver on our promise to streamline the measurement ecosystem.

Focus on HARM: Through a public-private partnership, we completed initial updates to NQF's Serious Reportable Events (SRE) list and criteria, and importantly, began efforts with The Joint Commission to align the SRE and Sentinel Event taxonomies. Aligning two of the most widely used patient safety measurement taxonomies is a first demonstration of our stated commitment to streamline the measurement ecosystem—reducing the burden and enhancing the value of measurement.

Advancing Diagnostic Excellence With Standardized Symptoms Data: Working in partnership with the American Medical Association (AMA), we are leading efforts to standardize patient symptom data, pioneering a new approach that engages clinicians earlier in the interoperability process.

Hospital-Onset Bacteremia (HOB) Playbook: Building on the Centers for Disease Control and Prevention's (CDC) updated measurement standards for hospital-onset bacteremia (HOB), we convened experts to develop and deploy comprehensive guidance that supports clinical teams in preventing, identifying, and treating HOB. The *HOB Playbook* has already seen widespread adoption and use in the U.S. and internationally.

Leadership Consortium: Comprising senior healthcare experts from Member organizations, the 2022–2024 cohort completed its work testing actionable approaches to improve patient outcomes by leveraging social risk data. The newly launched 2024–2026 cohort began to shape actionable strategies to improve youth mental health and prevent suicide.

As we look ahead, we are excited about the important ways that we can build together on the work accomplished in 2024. We remain committed to the power of our trusted platform and inclusive community of stakeholders from across the healthcare ecosystem to advance quality, safety, outcomes, affordability, and equity.

Thank you for your ongoing dedication and partnership, and for all that you contributed to the successes of 2024.

Best wishes always,

Dans Hell Sofran

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NQF's Unique Value and Strategic Affiliation With The Joint Commission

NQF empowers individuals and organizations to drive measurable improvement in healthcare quality. We bring together stakeholders from across the healthcare ecosystem to build consensus on measurement standards and practices that improve safety, outcomes, affordability, and equity.

NQF's strategic affiliation with The Joint Commission brings our work directly to the front lines of care. We are forging long-desired alignment across payers and purchasers regarding the measures required for public and private payment and accountability programs and for the patients, clinicians, and health systems who want them to be clinically meaningful and operationally feasible for all.

Convening:
Patients
Providers
Payers
Purchasers
Policymakers

Achieve Consensus on Next Generation:

Measures Measure Sets Methods

Practices

Our partnership quickly moves nextgeneration, validated, consensus-based measures, measure sets, and methods into practice through accreditation, certification, and other scaled initiatives to directly improve patient care.

An early and primary focus of our partnership will soon deliver a new set of Joint Commission certification products that bring outcome-focused, consensus-based measure sets to the core of The Joint Commission's certification of performance excellence. These Certification 2.0 products will focus on the outcomes that patients and clinicians say matter most and will address clinical topics that have important implications for population health and affordability.

Importantly, building on NQF's Aligned Innovation platform, Certification 2.0 engages a large, national set of payers and purchasers who are committed to reducing measurement burden and cacophony through the aligned implementation of parsimonious, validated measure sets that carry the trusted brand of NQF and The Joint Commission.

This is an important first step toward delivering on the NQF-Joint Commission promise to streamline the measurement ecosystem and focus on the measures that matter.



✓ FEEDBACK



Speeding Development of Next Generation Measures of Behavioral and Maternal Health

The Aligned Innovation initiative accelerates development of healthcare quality measures that are:



The initiative proactively addresses potential barriers to measure implementation by achieving alignment among a national coalition of public and private sector providers representing all care settings. In addition, coalition participants agree to retire at least two existing measures for each new one.

In 2024, work continued on the development, testing, and validation of the initiative's first three measures, which address behavioral health and maternal health. Measure developers worked with the coalition and a nationally representative group of provider partners.

One measure is a patient-reported outcome-based performance measure (PRO-PM) for depression and anxiety using an omnibus tool built from existing validated patient-reported outcome measures (PROMs). The other measures are focused on severe maternal morbidity and mortality (SMM), with the development of two electronic clinical quality measures (eCQMs) for perinatal hypertension control: one for blood pressure control during pregnancy and the other during postpartum.

Additionally, a risk-appropriate care indicator is being developed to examine whether pregnant patients with known risk factors for severe maternal morbidity deliver at facilities equipped to treat and manage those risk factors. The measures are expected to be ready for broad adoption and use in 2025.

Overcoming Barriers to Diagnostic Excellence

DIAGNOSTIC ERRORS IMPACT APPROXIMATELY 12 MILLION U.S. ADULTS EVERY YEAR.

For the Advancing Measurement of Diagnostic Excellence for Better Healthcare initiative, NQF is working in partnership with the Gordon and Betty Moore Foundation. The project convened multistakeholder groups to identify and specify critical technical data standards needed for interoperability and advance consensus on measurement methods central to diagnostic measures. In 2024, the diagnostic excellence team released its environmental scan report and a summary of key takeaways from its meetings. In addition, a framework for using artificial intelligence in quality measures is in development, and the initiative's report outlining diagnostic excellence measurement challenges and recommended solutions is slated for release in 2025.

Helping Hospitals Tackle Hospital-Onset Bloodstream Infections

Hospital-Onset Bacteremia and Fungemia (HOB) is a type of healthcare-associated infection (HAI), and a critical issue impacting patient safety and healthcare quality.

HAIS RESULT IN MORE THAN 70,000 DEATHS AND \$28 BILLION IN DIRECT MEDICAL COSTS EVERY YEAR.^{2,3}

HAIs are those infections acquired while being treated in an acute care setting. HOB is a bloodstream infection where bacterial or fungal pathogens are detected on day four or later of hospital admission.

To help clinical care teams in acute care settings address the problem, NQF released its *Hospital-Onset Bacteremia and Fungemia Playbook*, a comprehensive resource to support prevention, identification, and treatment of HOB.



The HOB Playbook helps organizations build on their existing HAI programs and quality and patient safety initiatives. It provides practical guidance and best practices, drawing from decades of infection prevention and control research. The playbook equips healthcare organizations with the tools needed to develop effective HOB prevention programs, supporting sustainable results and improved patient outcomes.

NQF also hosted a webinar based on the HOB Playbook that was one of the most popular events of the year, with more than 500 participants.

Standardizing Patient Symptom Data to Improve Diagnostic Quality and Reduce Errors

APPROXIMATELY 795,000 PEOPLE ARE SERIOUSLY HARMED OR DIE EACH YEAR AS A RESULT OF INCORRECT OR DELAYED DIAGNOSIS.⁴

Information on patients' symptoms is critical to the diagnostic process, yet symptom data are not consistently recorded or defined in Electronic Health Record (EHR) systems. NQF launched its Advancing Collection of Standardized Symptoms Data initiative to promote the creation of interoperable symptom data standards for use in clinical care. Recognizing that early input from clinicians is needed to ensure the data are useful and actionable in real-world care settings, NQF partnered with the American Medical Association (AMA) to test a new approach for engaging clinicians. Work on this initiative is ongoing.

Updating and Harmonizing Serious Adverse Event Reporting Criteria

A RECENT STUDY FOUND THAT A QUARTER OF MEDICARE PATIENTS WERE HARMED DURING HOSPITAL STAYS, AND 43 PERCENT OF THOSE WERE PREVENTABLE.⁵

Unfortunately, the lack of standardized reporting of patient safety events limits the healthcare industry's ability to consistently interpret, reliably quantify, and systematically address such events, and reduce preventable harm. The Focus on HARM (Harmonizing Accountability in Reporting and Monitoring) initiative was launched to help protect patients from preventable harm by updating and harmonizing the criteria and reporting taxonomies for Serious Reportable Events (SREs).

The initiative began by re-examining NQF's SRE list and aligning standards for reporting. Importantly, NQF and The Joint Commission are working to align the SRE and Sentinel Event (SE) taxonomies. By aligning these two leading patient safety measurement taxonomies, we aim to deliver on our promise to streamline the measurement ecosystem—reducing measurement burden and increasing measurement value.

³ Scott RD. *The Direct Medical Costs of Healthcare-Associated Infections in U.S. Hospitals and the Benefits of Prevention*; 2009. Accessed May 6, 2024. <u>https://stacks.cdc.gov/view/cdc/11550</u>.

⁴ Newman-Toker DE, Nassery N, Schaffer AC, et al. Burden of serious harms from diagnostic error in the USA. *BMJ Quality & Safety* 2024;33:109-120.

⁵U.S. Department of Health and Human Services (HHS), Office of Inspector General (OIG). *Adverse Events in Hospitals: A Quarter of Medicare Patients Experienced Harm in October 2018*, OEI-06-18-00400. May 2022. <u>https://oig.hhs.gov/reports/all/2022/adverseevents-in-hospitals-a-quarter-of-medicare-patients-experiencedharm-in-october-2018/</u>. Last accessed February 2025.

¹Singh H, Meyer AND, Thomas EJ, et al. The frequency of diagnostic errors in outpatient care: estimations from three large observational studies involving US adult populations. BMJ Quality & Safety 2014;23:727-731.

²Peleg AY, Hooper DC. Hospital-acquired infections due to gramnegative bacteria. *N Engl J Med*. 2010;362(19):1804-1813. doi:10.1056/ NEJMra0904124

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Leadership Consortium

The Leadership Consortium is a prestigious group of senior healthcare experts and stakeholders from NQF Member Organizations from the public and private sectors and across all aspects of healthcare. Every two years, a new cohort is selected to serve on the Consortium and charged with identifying actionable strategies to improve healthcare quality and drive lasting change in key areas.

In a two-phase approach, Consortium members prioritize a key area of need in the first year of the project and collaborate on a set of actionable recommendations to drive improvement. During the second year, a subset of the group implements the recommendations in real-world healthcare settings within their organizations. All Consortium members then collaborate to refine the recommendations informed by observations and lessons learned during the real-world tests.

LEVERAGING DATA ON SOCIAL DRIVERS OF HEALTH TO CONNECT PATIENTS WITH COMMUNITY RESOURCES



Up to 90 percent of health outcomes may be attributable to socioeconomic and behavioral factors.⁶ Healthcare organizations collect data on social drivers of health (SDOH), only to encounter barriers to using these data to address patients' health-related social needs (HRSN).

In response to these barriers, the 2022–2024 Leadership Consortium identified 10 actionable recommendations to help healthcare organizations address HRSNs by partnering with community services to connect patients with needed resources.

The recommendations are summarized in the report, *Social Drivers of Health Data Utilization: Integrating Healthcare and Community Services to Address Health-Related Social Needs.*

Key recommendations include:



Building strong, sustainable relationships with community organizations



Using technology to make connections more efficiently



Partnering with experts to leverage available technology

FOCUS ON SCREENING FOR YOUTH MENTAL HEALTH AND SUICIDALITY

Suicide is the second leading cause of death for young people ages 10–14, and it ranks third for ages 15–19.⁷ The 2024–2026 Leadership Consortium identified youth mental health and suicidality as its priority topic and will focus on improving mental health screening. The Consortium has begun to explore opportunities and identify strategies to close these gaps to improve identification and intervention for youth mental health issues. In the Implementation Collaborative phase, strategies will be tested in real-world settings in 2025. The final recommendations will be published in 2026.

⁶ Magnan S. Social Determinants of Health 101 for Health Care: Five Plus Five. *NAM Perspectives*. 2017;7(10). doi:10.31478/201710c ⁷ Garnett MF, Curtin SC. Suicide mortality in the United States, 2002-2022. NCHS Data Brief, no 509. Hyattsville, MD: National Center for Health Statistics. 2024. DOI: <u>https://dx.doi.org/10.15620/cdc/160504</u>.

Improving on Two Key Healthcare Quality Measures Can Save 144,000 Lives

COLORECTAL CANCER AND HYPERTENSION CAUSE APPROXIMATELY 52,000 AND 691,000 DEATHS ANNUALLY IN THE U.S.^{8,9}

An NQF study published this year in *Health Affairs Scholar* demonstrated how approximately 144,000 lives could be saved over 10 years by improving just two key areas of quality: colorectal cancer screening and blood pressure control.¹⁰ The findings highlight the potential of value-based payment initiatives to save lives and improve health outcomes.

In value-based payment, healthcare providers are incentivized to improve care with quality measures used to track performance and reward improvement. While there have been numerous estimates of the costs of measuring the quality of care, NQF's research provides fresh evidence supporting the offsetting human benefit of such value-based payment models to save lives and avoid patient harms.

⁸ Division of Cancer Prevention and Control, Centers for Disease Control and Prevention. U.S. cancer statistics: colorectal cancer stat bite. Published September 15, 2023. <u>https://www.cdc.gov/cancer/uscs/about/</u><u>stat-bites/stat-bite- colorectal.htm</u> ⁹ Centers for Disease Control and Prevention; National Center for

Chronic Disease Prevention and Health Promotion, Division for Heart Disease and Stroke Prevention. Facts about hypertension. Published September 15, 2023. Accessed September 15, 2023. https://www.cdc.gov/bloodpressure/facts.htm ¹⁰ Amico P, Drye EE, Lee P, et al., The business case for quality: estimating lives saved and harms avoided in a value-based purchasing model, *Health Affairs Scholar*, Volume 2, Issue 5, May 2024, qxae052, https://doi.org/10.1093/haschl/qxae052

Our Member Community

NQF Member Organizations represent all voices from every sector of the healthcare ecosystem. Our Member community comprises patients, caregivers, consumers, purchasers, payers, clinicians, medical specialty societies, healthcare systems, providers, measure developers, government agencies, life sciences companies, researchers, and more.

We bring these critically important stakeholders together to collaborate on streamlining existing healthcare quality measures and to create and implement new ones that fill high-priority gaps to create better outcomes and reduce burden. Through their Membership and engagement in our work, organizations and individuals leverage their expertise to achieve our shared vision that every person experiences high value care and optimal health outcomes.

OUR NEW MEMBERSHIP STRUCTURE

After collecting extensive Member feedback through personal conversations, surveys, focus groups and panel discussions, NQF launched a new streamlined Member dues structure in 2024. We re-designed dues to make Membership affordable and valuable at every level and created new committee engagement opportunities informed by the priorities that Members and key stakeholders told us are most important.

To learn more about how to join NQF's influential group of national healthcare leaders, visit **qualityforum.org/membership.**

A CONTINUED COMMITMENT

Our community of influential stakeholders has been at the forefront of advancing healthcare quality improvement and tackling the healthcare system's most urgent needs since NQF's founding more than 20 years ago. From the beginning, the commitment and diverse perspectives of NQF Members have driven, and continue to drive, our efforts to make care better, safer, more affordable, and more equitable.

NQF FOUNDING MEMBERS*

- AARP
- ABIM Foundation
- Agency for Healthcare Research and Quality
- American Academy of Family Physicians
- American Association of Nurse Anesthesiology
- American Board of Medical Specialties
- American Hospital Association
- American Medical Association
- American Nurses Association
- America's Health Insurance Plans
- Anesthesia Patient Safety Foundation
- Association of American Medical Colleges
- California HealthCare Foundation
- Centers for Disease Control and Prevention
- Centers for Medicare & Medicaid Services

- CIGNA HealthCare
- Council of Medical Specialty Societies
- Federation of American Hospitals
- Henry Ford Health System
- Kaiser Permanente
- National Partnership for Women & Families
- New Jersey Health Care Quality Institute
- Northwell Health
- Premier
- The Commonwealth Fund
- The Joint Commission
- The Leapfrog Group
- UnitedHealthcare
- URAC
- Veterans Health Administration

MEMBERS ENGAGE TO LEARN, CONNECT, AND LEAD

Our national community of stakeholders shapes the future of healthcare and supports a nationwide movement to promote better quality care, improved health outcomes, and greater accountability. Individuals from Member Organizations have the opportunity to collaborate with one another and learn from peers, subject matter experts, and esteemed leaders in the field.

The 2024 webinar series covered a range of important topics, issues, and trends impacting healthcare quality. These webinars allow organizations and individuals to learn from colleagues, share knowledge, and to grow as professionals and leaders.

WEBINARS INCLUDED:

- PROJECT PIVOT: PURSUING SAFER CARE, BETTER DIAGNOSIS, AND EQUITY
- DIAGNOSTIC EXCELLENCE OVERVIEW AND INTERACTIVE DISCUSSION
- A CONVERSATION WITH THE LEADERSHIP CONSORTIUM: INTEGRATING HEALTHCARE AND COMMUNITY SERVICES TO ADDRESS HRSNS
- REDUCING POSTPARTUM MATERNAL MORTALITY AND MORBIDITY
- UNDERSTANDING ECONOMIC IMPACTS ON PATIENTS AND CAREGIVERS
- MEMBER ROUNDTABLE WITH CEOS OF NQF AND THE JOINT COMMISSION
- WILL VALUE-BASED MODELS SAVE PRIMARY CARE?
- CLINICIAN WELL-BEING AND THE MEASUREMENT BURDEN
- UTILIZING TECHNOLOGY FOR CARE COORDINATION AND TRANSITION MANAGEMENT FOR PATIENTS WITH COMPLEX NEEDS
- TRANSITION FROM PEDIATRIC TO ADULT HEALTHCARE
- PREVENTING, IDENTIFYING, AND TREATING HOSPITAL-ONSET BLOODSTREAM INFECTIONS
- HOW THE PACE MODEL OF CARE ENABLES OLDER PEOPLE WITH CHRONIC NEEDS TO CONTINUE LIVING AT HOME



Welcome to an Exclusive NQF Webinar The PACE Model of Care and Improving Healthcare Quality and Reducing Health Inequities







The John M. Eisenberg Patient Safety and Quality Awards

The John M. Eisenberg Patient Safety and Quality Awards are presented annually by NQF and The Joint Commission to recognize the best examples of individual, local, and national efforts to improve patient safety and healthcare quality. Launched in 2002, the awards were named in honor of the late John M. Eisenberg, former administrator of the Agency for Healthcare Research and Quality (AHRQ), who was an impassioned advocate for healthcare quality improvement, as well as a founding member of NQF's board of directors.

CELEBRATING THE 2023 EISENBERG AWARD WINNERS

In 2024, in partnership with The Joint Commission, we announced the winners of the 2023 awards and honored the awardees in a ceremony held in Washington, DC. In addition, the achievements of each awardee were featured in a special issue of *The Joint Commission Journal on Quality and Patient Safety*. The 2024 winners will be announced in 2025.



The Veterans Health Administration (VHA) received the award for National Level Innovation in Patient Safety and Quality for its Surgical Pause initiative. The initiative has made surgery safer for at-risk patients through routine frailty screening to mitigate potential complications before they happen.

Pictured from left to right: *Dr. Jonathan Perlin, The Joint Commission and Joint Commission International; Dr. Daniel Hall, VHA; Dr. Jason Johanning, VHA; Dr. Dana Gelb Safran, National Quality Forum and The Joint Commission*



BMC2 (Blue Cross Blue Shield of Michigan Cardiovascular Consortium) was honored for Local Level Innovation in Patient Safety and Quality for creating a culture of quality for cardiovascular care. The effort resulted in improvements including reduced radiation exposure and opioid risks for cardiovascular patients.

Pictured from left to right: *Dr. Jonathan Perlin, The Joint Commission and Joint Commission International; Thomas Leyden, BMC2; Dr. Hitinder Gurm, BMC2; Dr. Dana Gelb Safran, National Quality Forum and The Joint Commission*



Eduardo Salas, PhD, Rice University, received the award for Individual Achievement for his 40-year career that included making foundational improvements to coordination and teamwork among healthcare providers.

Pictured from left to right: *Dr. Jonathan Perlin, The Joint Commission and Joint Commission International; Dr. Robert Otto Valdez, AHRQ; Dr. Eduardo Salas, Rice University; Dr. Dana Gelb Safran, National Quality Forum and The Joint Commission*

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Thank You, NQF Board of Directors

The NQF board of directors come from a broad range of public and private healthcare stakeholders, with majority representation from consumer and purchaser organizations. This structure was intentionally designed by our founders to ensure that voices historically underrepresented in quality measurement and improvement are actively included and heard.

Board members also represent health plans, health professionals, provider organizations, public and community health agencies, quality improvement organizations, and healthcare industry suppliers. This inclusive multistakeholder representation is essential to NQF's role as a trusted convener, driving consensus on contentious healthcare issues.

Our work would not be possible without the critical strategic direction and steadfast support of these distinguished healthcare leaders.

CURRENT BOARD OF DIRECTORS

- Susan B. Frampton, PhD, FPCC, President Emeritus, Planetree International (*Board Chair*)
- Andrew Bindman, MD, Executive Vice President and Chief Medical Officer, Kaiser Foundation Health Plan and Hospitals (*Board Vice Chair*)
- Emily Aaronson, MD, MPH, Chief Quality Officer, Walmart Health and Wellness U.S.; Associate Professor, Harvard Medical School
- Leah Binder, MA, MGA, President and CEO, The Leapfrog Group
- Natalie Davis, MA, Co-Founder and CEO, United States of Care
- Andrew Dreyfus, Managing Director, Health Optimist, LLC
- Reena Duseja, MD, MS, Senior Advisor, Office of the Assistant Under Secretary for Quality and Patient Safety, Veterans Health Administration (VHA), U.S. Department of Veterans Affairs
- Kate Goodrich, MD, MHS, Senior Vice President and Chief Medical Officer, Humana
- Shawn Gremminger, MPP, President and CEO, National Alliance of Healthcare Purchaser Coalitions
- Dora Hughes, MD, MPH, Chief Medical Officer and Director of the Center for Clinical Standards and Quality (CCSQ) for the Centers for Medicare & Medicaid Services (CMS)

OUTGOING BOARD MEMBERS

- Garth Graham, MD, MPH, FACC, Director and Global Head of Healthcare and Public Health, Google
- Shannon Connor Phillips, MD, MPH, SFHM, FAAP, Chief Health Officer, Joyous

- Tochi Iroku-Malize, MD, MPH, MBA, FAAFP, SFHM, Senior Vice President, Family Medicine, Northwell Health; past President, American Academy of Family Physicians
- Suzanne Miyamoto, PhD, RN, FAAN, CEO, American Academy of Nursing
- **Donald Moulds, PhD**, Chief Health Director, CalPERS: California Public Employees' Retirement System
- Jonathan B. Perlin, MD, PhD, MSHA, MACP, FACMI, President and CEO, The Joint Commission, Joint Commission Resources, Joint Commission International
- Jamila K. Taylor, PhD, MPA, President and CEO, Institute for Women's Policy Research
- Robert Valdez, PhD, MSHA, Director, Agency for Healthcare Research and Quality (AHRQ), U.S. Department of Health and Human Services
- Barbara E. Wachsman, MPH, MArch/MCP, Founder and Senior Advisor, Employer Healthcare Innovation Roundtable
- Dana Gelb Safran, ScD, President & CEO, NQF (*Ex-Officio*)

- Frederick Isasi, JD, MPH, former Executive Director, Families USA
- Henry H. Ting, MD, MBA, Senior Vice President and Chief Health and Wellness Officer, Delta Airlines



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About National Quality Forum (NQF)

The National Quality Forum (NQF) is a not-for-profit, nonpartisan, membership-based organization that works to improve healthcare outcomes, safety, equity, and affordability. Our unique role is to bring all voices to our table to forge multistakeholder consensus on quality measurement and improvement standards and practices that achieve measurable health improvements for all. NQF is a proud affiliate of The Joint Commission. Learn more at www.qualityforum.org.

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

Courage Innovation Trust Integrity