



Disparities Standing Committee

NQF will convene a Disparities Standing Committee (DSC) to complement our extensive work in quality measurement to provide a cross-cutting emphasis on healthcare disparities across all of NQF's work. To improve the quality of care for the nation, it is imperative that reduction or elimination of disparities be further integrated into NQF's work. The DSC would not be asked to serve as a primary reviewer of performance measures. Instead, their primary role would be to serve as a resource for all of NQF's activities, including measure evaluation, selection, consideration of use, and improvement. The DSC will provide ongoing support regarding disparities measurement and reduction to NQF core work, including measure endorsement, selection, and implementation. The DSC will provide guidance to the CSAC, MAP and NQF Standing Committees. As appropriate, the DSC may make recommendations regarding evaluation criteria to the CSAC and MAP.

The DSC will also serve in an advisory capacity to the CSAC, MAP and the Board of Directors on emerging issues in healthcare disparities. All DSC members will serve as individuals, not representatives of a particular organization, association or other group. They would be subject to the same disclosure/conflict policy that is applied to other Standing Committees. There will be approximately 15-17 members. The DSC will meet at least twice per year and more frequently as needed.

The DSC is intended to accomplish the following:

- Enhance NQF's breadth and depth of disparities knowledge: The DSC will include individuals possessing broad breadth and depth of expertise and experience in disparities measurement and improvement.
- Provide stakeholder perspectives on disparities: The DSC will include a broad range of stakeholder perspectives, including experts, providers who serve vulnerable patients, consumers and purchasers.
- Develop a high-level roadmap for disparities measurement and reduction into the broader NQF evaluation and strategic framework. This will include consideration of how measurement can be used to proactively reduce disparities.
- Provide expertise on emerging issues in measurement science and disparities (e.g., risk adjustment, stratification, and cross-cultural effects on patient surveys).
 - In the near term, the DSC will be asked to review implementation of the revised NQF policy regarding sociodemographic adjustment and evaluate the two-year SDS trial period. It would also assess trends in disparities and review and provide guidance related to methodologies for adjustment and stratification and standard sociodemographic data collection. The DSC will also assess emerging evidence of the impact of adjusted measures on patients and providers and monitor for unintended consequences of the policy change.