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# Consensus Standards Approval Committee (CSAC)

## Measure Evaluation Meeting

*November 17, 2020*

*Funded by the Centers for Medicare and Medicaid Services under contract HHSM-500-2017-00060I Task Order HHSM-500-T0001.*



## Housekeeping Reminders

- This is a Zoom meeting with audio and video capabilities
- Please place yourself on mute when you are not speaking
- We encourage you to use the following features
  - ▣ Chat box: to message NQF staff or the group
  - ▣ Raise hand: to be called upon to speak
- Meeting breaks
- Member and public comment opportunities

If you experience technical issues, please send a message to NQF staff through the chat box or email [CSAC@qualityforum.org](mailto:CSAC@qualityforum.org)



## Day 1 Agenda: November 17, 2020

Begin at 10:00 am ET

- Discussion and Vote
  - ▣ Surgery
  - ▣ Patient Experience and Function
  - ▣ Cost and Efficiency
  - ▣ Geriatrics and Palliative Care
- Member and Public Comment
- Break (12:30-1:00 pm ET)
- Discussion and Vote
  - ▣ Renal
  - ▣ Cardiovascular

- ▣ Cancer
- ▣ Patient Safety

- Break (2:45-2:55 pm ET)
- Discussion and Vote
  - ▣ Primary Care and Chronic Illness
  - ▣ Perinatal and Women's Health
- Member and Public Comment

Adjourn at 4:30 pm ET

## CSAC Members

Thomas Kottke, MD, MSPH (Chair)	Kevin Kavanagh, MD, MS, FACS
Melissa Danforth (Vice-Chair)	Leslie Schultz, RN, BSN, PhD
John Bulger, DO, MBA	Linda Schwimmer, JD
Dan Culica, MD, MA, PhD	Edward Septimus, MD
Lisa Freeman	Jeffrey Susman, MD
Paul Kallaur	

## Voting Procedure

- For each topic area, the first vote will ask the CSAC committee if they would like to vote on all the measures at once or on each measure individually
  - ▣ If any committee member elects to not vote on all measures at once, or a member must recuse themselves from voting on a measure, the committee will vote on each measure separately for that topic area
- CSAC then vote on acceptance of the Standing Committee's recommendation
  - ▣ Yes → Accept the Standing Committee's recommendation (i.e. to endorse or not endorse)
  - ▣ No → Do not accept the Standing Committee's recommendation and return the measure back to the committee for reconsideration



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# Surgery Spring 2020 Review Cycle

## CSAC Review and Endorsement

*November 17, 2020*

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## Standing Committee Recommendations

- One measure reviewed for Spring 2020
  - ▣ One measure reviewed by the Scientific Methods Panel
- One measure recommended for endorsement
  - ▣ **NQF 2687** Hospital Visits after Hospital Outpatient Surgery (Maintenance Measure)



## Public and Member Comment and Member Expressions of Support

- One comment received
  - ▣ The comment raised concerns regarding whether the measure's restriction to Medicare fee-for-service patients impacts the measure's validity. The developer responded that the risk model shows good discrimination across the spectrum of risk, making it unlikely that differences between Medicare Advantage and fee-for-service patients would affect scores on a regional level. The Committee concurred.
- No NQF member of expressions of support or non-support received





## Questions?

- Project team:
  - ▣ Amy Moyer, MS, PMP, Director
  - ▣ Janaki Panchal, MSPH, Manager
  - ▣ Karri Albanese, BA, Analyst
  - ▣ Mike DiVecchia, MBA, PMP, Project Manager
  
- Project webpage: [http://www.qualityforum.org/Surgery\\_2017-2018.aspx](http://www.qualityforum.org/Surgery_2017-2018.aspx)
  
- Project email address: [surgery@qualityforum.org](mailto:surgery@qualityforum.org)



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# Patient Experience and Function Fall 2019 Review Cycle

## CSAC Review and Endorsement

*November 17, 2020*

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## Standing Committee Recommendations

- One measure reviewed for Fall 2019 Track 2
  - ▣ Not reviewed by the Scientific Methods Panel (SMP)
- One measure not recommended for endorsement
  - ▣ **NQF 0291** Emergency Transfer Communication Measure (Maintenance Measure)



## Overarching Issues

- Score Level and Data Element Level Reliability
  - ▣ Committee noted an important dependence of score-level reliability upon strong data element-level reliability.
    - » The Committee noted that for most measure types, NQF's current measure evaluation criteria do not require testing at both data element and score levels
    - » Most measure types may submit either data element-level or score-level testing according to the developer's discretion and access to data.
  - ▣ Score-level reliability may be dependent upon data element-level reliability, meaning that it is possible to achieve a score-level result that appears good inaccurately because it is significantly confounded by issues at the data element level.



## Public and Member Comment and Member Expressions of Support

- Four comments received
  - ▣ Two NQF member expressions of non-support received



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# Patient Experience and Function Spring 2020 Review Cycle

## CSAC Review and Endorsement

*November 17, 2020*

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## Standing Committee Recommendations

- Four measures reviewed for Spring 2020
  - ▣ One measure reviewed by the SMP
- Four measures recommended for endorsement
  - ▣ **NQF 2614** CoreQ: Short-stay Discharge Measure (Maintenance Measure)
  - ▣ **NQF 2615** CoreQ: Long-Stay Resident Measure (Maintenance Measure)
  - ▣ **NQF 2616** CoreQ: Long-Stay Family Measure (Maintenance Measure)
  - ▣ **NQF 3559** Hospital-Level, Risk-Standardized Patient-Reported Outcomes Following Elective Primary Total Hip and/or Total Knee Arthroplasty (New Measure)

## Overarching Issues

- Inequities Within Satisfaction Measures
  - ▣ The Committee discussed that there are known differences in the quality of care provided to minorities within these facilities.
    - » Poorer care in facilities with high minority populations.
    - » Nursing homes remain segregated, with black patients concentrated in poorer quality homes (as measured by staffing ratios, performance, and financial vulnerability).
  - ▣ Concerning given that NQF 2614-2616 did not exhibit statistically significant differences by race.
    - » The Committee noted that patient satisfaction equates to meet expectations, and questioned the implications associated with equal satisfaction in the face of known quality inequities.
    - » The Committee also noted that many satisfaction measures do not always track well with external measures of quality.





## Public and Member Comment and Member Expressions of Support

- Eight comments received
  - ▣ One NQF member expression of non-support received



## Questions?

- Project team:
  - ▣ Samuel Stolpe, PharmD, MPH, Senior Director
  - ▣ Oroma Igwe, MPH, Manager
  - ▣ Udobi Onyeuku, MSHA, Analyst
  - ▣ Yemsrach Kidane, PMP, Project Manager
- Project webpage:  
[http://www.qualityforum.org/Project Pages/Patient Experience and Function.aspx](http://www.qualityforum.org/Project_Pages/Patient_Experience_and_Function.aspx)
- Project email address: [patientexperience@qualityforum.org](mailto:patientexperience@qualityforum.org)



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# Cost and Efficiency Spring 2020 Review Cycle

## CSAC Review and Endorsement

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## Standing Committee Recommendations

- Six measures reviewed for Spring 2020
  - ▣ Six measures reviewed by the Scientific Methods Panel
- Three measures recommended for endorsement
  - ▣ **NQF 3561** Medicare Spending Per Beneficiary – Post Acute Care Measure for Inpatient Rehabilitation Facilities (New Measure)
  - ▣ **NQF 3562** Medicare Spending Per Beneficiary – Post Acute Care Measure for Long-Term Care Hospitals (New Measure)
  - ▣ **NQF 3575** Total Per Capita Cost (TPCC) (New Measure)
- Three measures not recommended for endorsement
  - ▣ **NQF 3563** Medicare Spending Per Beneficiary – Post Acute Care Measure for Skilled-Nursing Facilities (New Measure)
  - ▣ **NQF 3564** Medicare Spending Per Beneficiary – Post Acute Care Measure for Home Health Agencies (New Measure)
  - ▣ **NQF 3574** Medicare Spending Per Beneficiary (MSBP) Clinician (New Measure)



## Overarching Issues

- Reliability Thresholds and Variations by Case Volume
  - ▣ For several of the measures reviewed this cycle, the Committee raised concerns that the signal-to-noise or split-sample reliability statistics for practices with small case volumes may not be sufficient for the measure to be considered reliable.
- Threats to Validity
  - ▣ For some of the measures reviewed this cycle, the Committee raised concerns regarding various overarching threats to measure validity.
- Social Risk Adjustment
  - ▣ The Committee noted the need to ensure that providers serving people with social risk factors are not penalized unfairly by a lack of social risk adjustment. While the Committee noted that it is important to maximize the predictive value of a risk-adjustment model, understanding the role that social risk factors play in clinical cost episodes is critical. The impact of social risk factors in cost and efficiency measures is unique in that these factors may ultimately increase overall costs through poor transitions and hand-offs, or potentially lower resource use because of access-to-care challenges.



## **Public and Member Comment and Member Expressions of Support**

- Eight comments received
- Two NQF members provided their expressions of non-support for NQF 3575



## Vote on NQF 3561, 3562, 3575

- CSAC vote on acceptance of the Standing Committee's recommendation
  - ▣ Yes → Accept the Standing Committee's recommendation to endorse
  - ▣ No → Do not accept the Standing Committee's recommendation and return the measure back to the committee for reconsideration

## Standing Committee Recommendations

- Six measures reviewed for Spring 2020
  - ▣ Six measures reviewed by the Scientific Methods Panel
- Three measures recommended for endorsement
  - ▣ **NQF 3561** Medicare Spending Per Beneficiary – Post Acute Care Measure for Inpatient Rehabilitation Facilities (New Measure)
  - ▣ **NQF 3562** Medicare Spending Per Beneficiary – Post Acute Care Measure for Long-Term Care Hospitals (New Measure)
  - ▣ **NQF 3575** Total Per Capita Cost (TPCC) (New Measure)
- Three measures not recommended for endorsement
  - ▣ **NQF 3563** Medicare Spending Per Beneficiary – Post Acute Care Measure for Skilled-Nursing Facilities (New Measure)
  - ▣ **NQF 3564** Medicare Spending Per Beneficiary – Post Acute Care Measure for Home Health Agencies (New Measure)
  - ▣ **NQF 3574** Medicare Spending Per Beneficiary (MSBP) Clinician (New Measure)



## Key Issues

- NQF 3563:
  - ▣ The Committee had concerns that the calculation of expected cost was not aligned with Skilled Nursing Facility (SNF) payment programs.
  - ▣ The Committee also questioned how well the model predicts downstream costs (R-squared of 0.11) and raised concerns about bias regarding the lack of social factors inclusion in the risk adjustment models.
- NQF 3564:
  - ▣ The Committee questioned the attribution of this measure to Home Health Agencies (HHAs) and the developer's decision to utilize a 60-day episode period.
  - ▣ The Committee also had concerns that the calculation of expected cost was not aligned with HHA payment programs.
  - ▣ The Committee questioned how well the model predicts downstream costs (R-squared of 0.092) and raised concerns regarding the lack of including social factors.



## Key Issues

- NQF 3574:
  - ▣ Committee members raised concerns with some of the lower quartile reliability scores at the individual clinician reporting level, stating that they are low.
  - ▣ The Committee also raised several concerns regarding the attribution to multiple clinicians and the time window of three and 30 days pre- and post-discharge for each episode, respectively, and that this might need to be more specific for certain medical conditions.
  - ▣ It also questioned the strength of the correlations, noting that they were low.



## Public and Member Comment and Member Expressions of Support

- Nine comments received
- Two NQF members provided their expressions of non-support for NQF 3574



## Acumen and Abt Associates Request for Reconsideration

- CMS, with Acumen and Abt Associates, have submitted a letter to CSAC to request reconsideration of NQF 3563, 3564, and 3574, citing three areas of concerns related to the review of the measures:
- Inconsistency in committee deliberations and process, specifically in voting
  - ▣ The developers and steward expressed concerns that the Committee departed from the CDP through the inconsistent treatment of Consensus Not Reached decisions, inconsistent voting questions for whether to accept the Scientific Methods Panel decision and the developer's request for reconsideration, and the inability to establish quorum.



## Acumen and Abt Associates Request for Reconsideration

- Misapplication of measure evaluation criteria and guidance
  - ▣ The developers and steward suggest that the Committee's votes are inconsistent in their application of overarching issues on the set of cost measures in the Spring 2020 cycle and lack a clear rationale for these decisions.
  - ▣ The developers and steward assert that the assessment of Face Validity was not appropriately applied to NQF 3574.
  - ▣ The developers and steward suggest that Empirical Validity assessments were not consistently applied across the measures.
- Transparency of Committee deliberation materials
  - ▣ The developers and steward suggest that NQF did not follow the CDP's process for ensuring transparency, which they state created challenges for understanding reasons for decisions, and therefore, they could not then respond to the Committee appropriately.



## Vote on NQF 3563, 3564, 3574

- CSAC vote on request for reconsideration
  - ▣ Yes → Request granted; measure will be sent back to the Standing Committee for reconsideration
  - ▣ No → Measure will move to vote on endorsement
- CSAC vote on acceptance of the Standing Committee's recommendation
  - ▣ Yes → Accept the Standing Committee's recommendation to not endorse
  - ▣ No → Do not accept the Standing Committee's recommendation and return the measure to the committee for reconsideration



## Questions?

- Project team:
  - ▣ Matthew Pickering, PharmD, Senior Director
  - ▣ Janaki Panchal, MSPH, Manager
  - ▣ Funmilayo Idaomi, Analyst
  - ▣ Yemsrach Kidane, PMP, Project Manager
  - ▣ Taroon Amin, PhD, MPH, Consultant
- Project webpage:  
[http://www.qualityforum.org/Cost and Efficiency.aspx](http://www.qualityforum.org/Cost_and_Efficiency.aspx)
- Project email address: [efficiency@qualityforum.org](mailto:efficiency@qualityforum.org)



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# Geriatrics and Palliative Care Fall 2019 Review Cycle

## CSAC Review and Endorsement

*November 17, 2020*

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## Standing Committee Recommendations

- One measure reviewed for Fall 2019 Track 2
  - ▣ One measure reviewed by the Scientific Methods Panel
- One measure recommended for endorsement
  - ▣ **NQF 2651** CAHPS® Hospice Survey (experience with care) (Maintenance Measure)



## Public and Member Comment and Member Expressions of Support

- One comment received on NQF 2651
  - ▣ Comment included recommendations relating to measure specifications
- No NQF member of expressions of support or non-support received



## Questions?

- Project team:
  - ▣ Katie Goodwin, MS, Director
  - ▣ Erin Buchanan, MPH, Manager
  - ▣ Ngozi Ihenacho, MPH, Analyst
  - ▣ Mike DiVecchia, MBA, PMP, Project Manager
  
- Project webpage:  
[https://www.qualityforum.org/Geriatrics and Palliative Care.aspx](https://www.qualityforum.org/Geriatrics_and_Palliative_Care.aspx)
  
- Project email address: [Palliative@qualityforum.org](mailto:Palliative@qualityforum.org)

# **Opportunity for Member and Public Comment**

**Lunch Break (30 Minutes)**  
**Resume at 1pm**



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# Renal Fall 2019 Review Cycle

## CSAC Review and Endorsement

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## Standing Committee Recommendations

- One measure reviewed for Fall 2019 Track 2
  - ▣ One measure reviewed by the Scientific Methods Panel
- One measure recommended for endorsement
  - ▣ **NQF 2979** Standardized Transfusion Ratio for Dialysis Facilities (Maintenance Measure)



## Public and Member Comment and Member Expressions of Support

- One comment received
  - ▣ Concern that measure reflects transfusion practices at the hospital level rather than dialysis facilities.
  - ▣ Concern that it is difficult for facilities to influence whether a patient receives a transfusion because they occur in hospitals.
  - ▣ Concern that dialysis facilities still do not have access to the hospital transfusion data that would both allow them to know when a transfusion occurred and enable them to enact quality improvement efforts to significantly improve clinical care and outcomes.
  - ▣ Suggests there are more meaningful measures that would provide a more accurate picture of anemia management of patients on dialysis.
- These concerns and the developer's responses were reviewed and discussed by the Committee during the post comment call.
- No NQF member of expressions of support or non-support received





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# Renal Spring 2020 Review Cycle

## CSAC Review and Endorsement

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## Standing Committee Recommendations

- Three measures reviewed for Spring 2020
  - ▣ Three measures reviewed by the Scientific Methods Panel
- Two measures recommended for endorsement
  - ▣ **NQF 0369** Standardized Mortality Ratio for Dialysis Facilities (Maintenance Measure)
  - ▣ **NQF 2978** Hemodialysis Vascular Access: Long-Term Catheter Rate (Maintenance Measure)
- One measure not recommended for endorsement
  - ▣ **NQF 2977** Hemodialysis Vascular Access: Standardized Fistula Rate (Maintenance Measure)

## Overarching Issues

- **Score Level Reliability Methods: IUR and PIUR**
  - ▣ The Committee considered whether PIUR is appropriate as a measure of score level reliability analysis since it does not determine if providers are distinguishable from one another. Its best use is in determining the appropriateness of the measure in cases when the majority of providers in a sample do not have a high IUR rating.
- **Downgrading of Evidence**
  - ▣ During the most recent update, KDOQI conducted an in-depth review of the evidence base for the recommendations within the guideline, including a systematic review of the literature. This resulted in downgraded evidence that had previously been ranked as high to expert opinion for the measure focus of two measures reviewed for maintenance of endorsement by the Committee this cycle. The Committee felt it especially important to carefully consider the implications of the downgrading of evidence.
- **Preferred Routes of Vascular Access for Hemodialysis**
  - ▣ The Committee noted that measurement in this domain could create unintended consequences for patients for whom an AVF may not be the most desirable approach due to downward pressure on clinicians to order them—even where there is a more patient-centered option.



## Public and Member Comment and Member Expressions of Support

- Nine comments received
  - ▣ Commenters expressed several concerns related to the denominator used, stating that certain populations such as patients not eligible for arteriovenous fistula (AVF), persons on hospice, and pediatric populations be excluded.
  - ▣ Commenters called for more measures applicable to pediatric patients.
  - ▣ Commenters recommended refining measures to address non-infectious complications.
- Three NQF member of expressions of support received
  - ▣ Two in support and one did not support



## Questions?

- Project team:
  - ▣ Samuel Stolpe, PharmD, MPH, Senior Director
  - ▣ Janaki Panchal, MSPH, Manager
  - ▣ Teja Vemuganti, MPH, Analyst
  - ▣ Yemsrach Kidane, PMP, Project Manager
- Project webpage: <http://www.qualityforum.org/Renal.aspx>
- Project email address: [renal@qualityforum.org](mailto:renal@qualityforum.org)



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# Cardiovascular Fall 2019 Review Cycle

## CSAC Review and Endorsement

*November 17, 2020*

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## Standing Committee Recommendations

- One measure reviewed for Fall 2019 Track 2
  - ▣ One measure reviewed by the Scientific Methods Panel
- One measure recommended for endorsement
  - ▣ **NQF 0018** Controlling High Blood Pressure (Maintenance Measure)



## Public and Member Comment and Member Expressions of Support

- Two comments received
  - ▣ One comment was supportive of the measures under review; the other comment was highlighting the issue of misalignment of blood pressure targets.
- No NQF member of expressions of support or non-support received





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# Cardiovascular Spring 2020 Review Cycle

## CSAC Review and Endorsement

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## Standing Committee Recommendations

- Four measures reviewed for Spring 2020
  - ▣ One measure reviewed by the Scientific Methods Panel
- Four measures recommended for endorsement
  - ▣ **NQF 0066** Coronary Artery Disease (CAD): Angiotensin-Converting Enzyme (ACE) Inhibitor or Angiotensin Receptor Blocker (ARB) Therapy - Diabetes or Left Ventricular Systolic Dysfunction (LVEF < 40%) (Maintenance Measure)
  - ▣ **NQF 0067** Coronary Artery Disease (CAD): Antiplatelet Therapy (Maintenance Measure)
  - ▣ **NQF 0076** Optimal Vascular Care (Maintenance Measure)
  - ▣ **NQF 0290** Median Time to Transfer to Another Facility for Acute Coronary Intervention (Maintenance Measure)



## Public and Member Comment and Member Expressions of Support

- One comment received
  - ▣ Commenter had a question about one of the guidelines submitted as part of the evidence for one of the measures. The developer responded to the question.
- No NQF member of expressions of support or non-support received



## Questions?

- Project team:
  - ▣ Amy Moyer, MS, PMP, Director
  - ▣ Janaki Panchal, MSPH, Manager
  - ▣ Karri Albanese, BA, Analyst
  - ▣ Mike DiVecchia, MBA, PMP, Project Manager
- Project webpage: <http://www.qualityforum.org/Cardiovascular.aspx>
- Project email address: [cardiovascular@qualityforum.org](mailto:cardiovascular@qualityforum.org)



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# Cancer Fall 2019 Review Cycle

## CSAC Review and Endorsement

*November 17, 2020*

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## Standing Committee Recommendations

- Two measures reviewed for Fall 2019 Track 2
  - ▣ No measures reviewed by the Scientific Methods Panel
- Two measures recommended for endorsement
  - ▣ NQF 0223 Adjuvant chemotherapy is recommended, or administered within 4 months (120 days) of diagnosis for patients under the age of 80 with AJCC Stage III (lymph node positive) colon cancer (Maintenance Measure)
  - ▣ NQF 0384 Oncology: Medical and Radiation - Pain Intensity Quantified (Maintenance Measure)



## Public and Member Comment and Member Expressions of Support

- Three comments received
  - ▣ All supportive of the measures under review
- Two NQF member expressions of support received



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# Cancer Spring 2020 Review Cycle

## CSAC Review and Endorsement

*November 17, 2020*

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## Standing Committee Recommendations

- One measure reviewed for Spring 2020
  - ▣ Measure was not reviewed by the Scientific Methods Panel
- One measure not recommended for endorsement
  - ▣ **NQF 0508** Diagnostic Imaging: Inappropriate Use of 'Probably Benign' Assessment Category in Screening Mammograms Measure Name (Maintenance Measure)



## Public and Member Comment and Member Expressions of Support

- Two comments received
- No NQF member expressions of support or non-support received



## Questions?

- Project team:
  - ▣ Nicole Williams, MPH, Director
  - ▣ Matthew Pickering, PharmD, Senior Director
  - ▣ Tamara Funk, MPH, Manager
  - ▣ Oroma Igwe, MPH, Manager
  - ▣ Teja Vemuganti, MPH, Analyst
  - ▣ Mike DiVecchia, MBA, PMP, Project Manager
- Project webpage: <http://www.qualityforum.org/Cancer.aspx>
- Project email address: [cancerem@qualityforum.org](mailto:cancerem@qualityforum.org)



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# Patient Safety Spring 2020 Review Cycle

## CSAC Review and Endorsement

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## Standing Committee Recommendations

- Two measures reviewed for Spring 2020
- Both measures recommended for endorsement
  - ▣ **NQF 2723** Wrong-Patient Retract-and-Reorder (Wrong-Patient-RAR) Measure (Maintenance Measure)
  - ▣ **NQF 3558** Initial Opioid Prescribing for Long Duration (IOP-LD) (New Measure)

## Overarching Issues

- Developing Measures that Can Be Designed to Work within Electronic Health Records (EHRs)
  - ▣ With increased use of EHRs across healthcare facilities, it will be increasingly important to embed quality measures into EHRs systems.
  - ▣ The Wrong-Patient-RAR measure was viewed by the Committee as the type of measure that could be built into the EHRs, and inferences from its study could be used for the general design of EHRs (i.e., not allowing for multiple patient records to be open at the same time to reduce the incidence of wrong-patient orders).
- Reduce Barriers to Measure Use
  - ▣ The Committee discussed the importance of ensuring that measures are available to a wide variety of stakeholders and there are no barriers to feasibility, such as high licensing fees that would limit the use of measures.



## Public and Member Comment and Member Expressions of Support

- Nine total comments received
- One NQF member provided expression of support and another NQF member provided expression of non-support for the same measure



## Questions?

- Project team:
  - ▣ Matthew Pickering, PharmD, Senior Director
  - ▣ Chris Dawson, MHA, Manager
  - ▣ Yemsrach Kidane, PMP, Project Manager
  - ▣ Isaac Sakyi, MSGH, Analyst
  - ▣ Jesse Pines, MD, MBA, MSCE, Consultant
- Project webpage: [http://www.qualityforum.org/Patient\\_Safety.aspx](http://www.qualityforum.org/Patient_Safety.aspx)
- Project email address: [patientsafety@qualityforum.org](mailto:patientsafety@qualityforum.org)



**Afternoon Break  
(10 Minutes)**



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# Primary Care and Chronic Illness Fall 2019 Review Cycle

## CSAC Review and Endorsement

*November 17, 2020*

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## Standing Committee Recommendations

- Three measures reviewed for Fall 2019 Track 2
  - ▣ No measures reviewed by the Scientific Methods Panel
- Three measures recommended for endorsement
  - ▣ **NQF 0059** Comprehensive Diabetes Care: Hemoglobin A1c (HbA1c) Poor Control (>9.0%) (Maintenance Measure)
  - ▣ **NQF 0061** Comprehensive Diabetes Care: Blood Pressure Control (Maintenance Measure)
  - ▣ **NQF 0575** Comprehensive Diabetes Care: Hemoglobin A1c (HbA1c) Control (Maintenance Measure)



## Overarching Issues

- NQF 0059 - Concerns about exclusions
  - ▣ The Committee noted that frailty is a difficult condition to define.
  - ▣ Commenters noted that patients may not fall into both the advanced illness and frail category in order to be excluded from this measure.



## Public and Member Comment and Member Expressions of Support

- Five comments received
  - ▣ Commenters were concerned about the lack of risk adjustment results included in the testing forms for this measure.
  - ▣ Commenters were also concerned the use of the word “and” in the exclusions.
    - » The commenters noted that a person may not be coded as both frail as well as advanced illness.
- No NQF member of expressions of support received



## Vote on NQF 0059, 0061, 0575

- CSAC vote on acceptance of the Standing Committee's recommendation
  - ▣ Yes → Accept the Standing Committee's recommendation to endorse
  - ▣ No → Do not accept the Standing Committee's recommendation and return the measure back to the committee for reconsideration



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# Primary Care and Chronic Illness Spring 2020 Review Cycle

## CSAC Review and Endorsement

*November 17, 2020*

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## Standing Committee Recommendations

- Three measures reviewed for Spring 2020
  - ▣ No measures reviewed by the Scientific Methods Panel
- Three measures not recommended for endorsement
  - ▣ **NQF 3570e** Intervention for Prediabetes (New Measure)
  - ▣ **NQF 3569e** Prediabetes: Screening for Abnormal Blood Glucose (AMA) (New Measure)
  - ▣ **NQF 3571e** Retesting of Abnormal Blood Glucose in Patients with Prediabetes (AMA) (New Measure)





## Key Issues

- Upper age limits
  - ▣ NQF 3569e did not have an upper age limit, although this was included in some of the evidence cited by the developer.
- Appropriateness of numerator interventions
  - ▣ The interventions for 3570e were noted by the Committee to require prescribing metformin or referring the patient out.
- Strength of evidence
  - ▣ Measure 3571e was noted to be based on expert opinion.
- Data element accuracy and data capture
  - ▣ Developer noted in submission that several data elements, especially for measure numerators, may have accuracy challenges as expressed in the eCQM Feasibility Scorecard. This was counterbalanced by the developer's parallel forms validity results.



## Public and Member Comment and Member Expressions of Support

- 34 total comments received
- No NQF member of expressions of support or not support received

## AMA Request for Reconsideration

- AMA cites two areas of concerns related to the review of the measures:
- General inconsistency in committee deliberations and process
  - ▣ Related to general inconsistency, AMA asserts that concise statements outlining why a measure did not pass were not provided in the deliberations nor the report generated by the NQF staff.
  - ▣ AMA further asserts that the Committee was inconsistent in their recommendations.
  - ▣ AMA also expressed concerns that the Committee did not allocate sufficient time to the discussion of their request for reconsideration.
- Misrepresentation of public comments in presentation slides
  - ▣ AMA also suggested that presentation slides did not appropriately represent the 34 comments that were received by NQF from the public on the measures, focusing only on concerns that were expressed by the comments.
  - ▣ AMA asserts that this may have biased the Committee.



## Vote on NQF 3569e, 3570e, 3571e

- CSAC vote on request for reconsideration
  - ▣ Yes → Request granted; measure will be sent back to the Standing Committee for reconsideration
  - ▣ No → Measure will move forward to vote on endorsement
- CSAC vote on acceptance of the Standing Committee's recommendation
  - ▣ Yes → Accept the Standing Committee's recommendation to not endorse
  - ▣ No → Do not accept the Standing Committee's recommendation and return the measure back to the committee for reconsideration



## Questions?

- Project team:
  - ▣ Sam Stolpe, PharmD, MPH, Senior Director
  - ▣ Yemi Kidane, PMP, Project Manager
  - ▣ Erin Buchanan, MPH, Manager
  - ▣ Isaac Sakyi, MSGH, Analyst
  
- Project webpage:  
[https://www.qualityforum.org/Primary Care and Chronic Illness.aspx](https://www.qualityforum.org/Primary_Care_and_Chronic_Illness.aspx)
  
- Project email address: [primarycare@qualityforum.org](mailto:primarycare@qualityforum.org)



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# Perinatal and Women's Health Fall 2019 Review Cycle

## CSAC Review and Endorsement

*November 17, 2020*

*Funded by the Centers for Medicare and Medicaid Services under contract HHSM-500-2017-00060I Task Order HHSM-500-T0001.*

## Standing Committee Recommendations

- One measure reviewed for Fall 2019 Track 2
  - ▣ One measures reviewed by the Scientific Methods Panel
- One measure recommended for endorsement
  - ▣ **NQF 3543** Patient-Centered Contraceptive Counseling (PCCC) (New Measure)



## **Public and Member Comment and Member Expressions of Support**

- 25 comments received
- No NQF member of expressions of support or non-support received





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# Perinatal and Women's Health Spring 2020 Review Cycle

## CSAC Review and Endorsement

*November 17, 2020*

*Funded by the Centers for Medicare and Medicaid Services under contract HHSM-500-2017-00060I Task Order HHSM-500-T0001.*

## Standing Committee Recommendations

- Six measures reviewed for Spring 2020
  - ▣ One measures reviewed by the Scientific Methods Panel
- Six measures recommended for endorsement
  - ▣ **NQF 0469** PC-01 Elective Delivery (Maintenance Measure)
  - ▣ **NQF 0469e** PC-01 Elective Delivery e (Maintenance Measure)
  - ▣ **NQF 0480** PC-05 Exclusive Breast Milk Feeding (Maintenance Measure)
  - ▣ **NQF 0480e** PC-05 Exclusive Breast Milk Feeding e (Maintenance Measure)
  - ▣ **NQF 0471** PC-02 Cesarean birth (Maintenance Measure)
  - ▣ **NQF 0716** Unexpected Complications in Term Newborns (Maintenance Measure)



## **Public and Member Comment and Member Expressions of Support**

- Two comments received
- No NQF member of expressions of support or non-support received



## Questions?

- Project team:
  - ▣ Matthew Pickering, PharmD
  - ▣ Chelsea Lynch, MPH, MSN, RN, CIC
  - ▣ Yemsrach Kidane, PMP
  - ▣ Erin Buchanan, MPH
  - ▣ Hannah Ingber, MPH
  - ▣ Robyn Y. Nishimi, PhD
- Project webpage:  
[https://www.qualityforum.org/Perinatal and Womens Health.aspx](https://www.qualityforum.org/Perinatal_and_Womens_Health.aspx)
- Project email address: [perinatal@qualityforum.org](mailto:perinatal@qualityforum.org)

# **Opportunity for Member and Public Comment**



## Timeline and Next Steps

Process Step	Timeline
CSAC Endorsement Meeting	November 17 - 18, 2020
Appeals Period	November 23 – December 22, 2020



## Project Information

- Project Team
  - ▣ Apryl Clark, MSHA, Chief of Staff
  - ▣ Sai Ma, PhD, Managing Director/Senior Technical Expert
  - ▣ Kim Patterson, Executive Assistant
  - ▣ Bejier Edwards, MBA, PMP, Project Manager
  - ▣ Caitlin Flouton, MS, Analyst
- Project Webpage:  
[http://www.qualityforum.org/About NQF/CSAC/Consensus Standards Approval Committee.aspx](http://www.qualityforum.org/About_NQF/CSAC/Consensus_Standards_Approval_Committee.aspx)
- Project Email Address: [CSAC@qualityforum.org](mailto:CSAC@qualityforum.org)

**THANK YOU.**

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# Consensus Standards Approval Committee (CSAC)

## Measure Evaluation Meeting

*November 18, 2020*

*Funded by the Centers for Medicare and Medicaid Services under contract HHSM-500-2017-00060I Task Order HHSM-500-T0001.*



## Housekeeping Reminders

- This is a Zoom meeting with audio and video capabilities
- Please place yourself on mute when you are not speaking
- We encourage you to use the following features
  - ▣ Chat box: to message NQF staff or the group
  - ▣ Raise hand: to be called upon to speak
- Meeting breaks
- Member and public comment opportunities

If you experience technical issues, please send a message to NQF staff through the chat box or email [CSAC@qualityforum.org](mailto:CSAC@qualityforum.org)



## Day 2 Agenda: November 18, 2020

Begin at 10:00 am ET

- Discussion and Vote
  - ▣ All-Cause Admissions and Readmissions
  - ▣ Behavioral Health and Substance Use
  - ▣ Prevention and Population Health
- Member and Public Comment
- Recognition of Committee Members and Next Steps

Adjourn at 12:30 pm ET



## CSAC Members

Thomas Kottke, MD, MSPH (Chair)	Kevin Kavanagh, MD, MS, FACS
Melissa Danforth (Vice-Chair)	Leslie Schultz, RN, BSN, PhD
John Bulger, DO, MBA	Linda Schwimmer, JD
Dan Culica, MD, MA, PhD	Edward Septimus, MD
Lisa Freeman	Jeffrey Susman, MD
Paul Kallaur	



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# All-Cause Admissions and Readmissions Fall 2019 Review Cycle

## CSAC Review and Endorsement

*November 18, 2020*

*Funded by the Centers for Medicare and Medicaid Services under contract HHSM-500-2017-00060I Task Order HHSM-500-T0001.*

## Standing Committee Recommendations

- One measure reviewed for Fall 2019 Track 2
  - ▣ One measure reviewed by the Scientific Methods Panel
- One measure recommended for endorsement
  - ▣ **NQF 3495** Hospital-Wide 30-Day, All-Cause, Unplanned Readmission (HWR) Rate – Clinician (New Measure)



## Public and Member Comment and Member Expressions of Support

- Ten comments received
- Four NQF members provided expressions of non-support.



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# All-Cause Admissions and Readmissions Spring 2020 Review Cycle

## CSAC Review and Endorsement

*November 18, 2020*

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## Standing Committee Recommendations

- Five measures reviewed for Spring 2020
  - ▣ Five measures reviewed by the Scientific Methods Panel
- Four measures recommended for endorsement
  - ▣ **NQF 1463:** Standardized Hospitalization Ratio for Dialysis Facilities (SHR) (UM Kidney Epidemiology and Cost Center/CMS) (Maintenance Measure)
  - ▣ **NQF 3565:** Standardized Emergency Department Encounter Ratio (SEDR) for Dialysis Facilities (UM Kidney Epidemiology and Cost Center/CMS) (New Measure)
  - ▣ **NQF 3566:** Standardized Ratio of Emergency Department Encounters Occurring Within 30 Days of Hospital Discharge (ED30) for Dialysis Facilities (UM Kidney Epidemiology and Cost Center/CMS) (New Measure)
  - ▣ **NQF 2539:** Facility 7-Day Risk-Standardized Hospital Visit Rate after Outpatient Colonoscopy (Yale CORE/CMS) (Maintenance Measure)
- One measure not recommended for endorsement
  - ▣ **NQF 2496:** Standardized Readmission Ratio (SRR) for Dialysis Facilities (UM Kidney Epidemiology and Cost Center/CMS) (Maintenance Measure)

## Overarching Issues

- Reliability and Intended Use
  - ▣ Several measures applied two different reliability methods and statistics concurrently: the inter-unit reliability (IUR) and the profile inter-unit reliability (PIUR).
  - ▣ The PIUR assesses the measure's ability to identify outliers, rather than between provider differences, which is performed using the IUR.
  - ▣ NQF considers use and usability in the recommendation for endorsement, assessments of reliability testing do not evaluate the methods used by the program implementers to define categories of performance or performance cut-offs.
- Attribution
  - ▣ Four measures under review this cycle focused on dialysis facilities.
  - ▣ NQF convened Renal Technical Expert Panel (TEP) to provide supplemental clinical input of these measures.
  - ▣ Some TEP members suggested that not all returns to the hospital, including ED encounters, are due to dialysis care but rather can be influenced by other factors, including poor discharge planning from the inpatient facility.



## Public and Member Comment and Member Expressions of Support

- Eight comments received
- Three NQF members provided expressions of non-support for four of the measures under consideration.



## Questions?

- Project team:
  - ▣ Matthew Pickering, PharmD, Senior Director
  - ▣ Poonam Bal, MSHA, Director
  - ▣ Oroma Igwe, MPH, Manager
  - ▣ Funmilayo Idaomi, Analyst
  - ▣ Taroon Amin, PhD, MPH, Consultant
  - ▣ Yemsrach Kidane, PMP, Project Manager
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# Behavioral Health and Substance Use Fall 2019 Review Cycle

## CSAC Review and Endorsement

*November 18, 2020*

*Funded by the Centers for Medicare and Medicaid Services under contract HHSM-500-2017-00060I Task Order HHSM-500-T0001.*

## Standing Committee Recommendations

- Three measures reviewed for Fall 2019 Track 2
  - ▣ No measures reviewed by the Scientific Methods Panel
- Two measures recommended for endorsement
  - ▣ **NQF 3175** Continuity of Pharmacotherapy for Opioid Use Disorder (Ad-Hoc)
  - ▣ **NQF 3539e** Use of Antipsychotics in Older Adults in the Inpatient Hospital Setting (New Measure)
- One measure not recommended for endorsement
  - ▣ **NQF 3538** All-Cause Emergency Department Utilization Rate for Medicaid Beneficiaries Who May Benefit from Integrated Physical and Behavioral Health Care (New Measure)

## Overarching Issues

- Interpretation of Year-Over-Year Improvement Data
  - ▣ The Committee noted that several measures did not exhibit significant improvements in year-over-year improvement data. The expectation for a good quality measure is to exhibit responsiveness to improvement efforts. Many measures demonstrate responsiveness, especially during the early stages post-implementation. However, during a measure's life cycle, it is not uncommon for a measure to become topped out as best practices become better disseminated and adopted across healthcare settings.
- Measure Validity Beyond the Tested Population
  - ▣ The Committee reviewed several measures that were intended for broader population health applications, such as within state-level dashboards. The measures were tested within a particular state, but the populations of the states where they were tested differ substantially from other U.S. states. This calls into question the applicability of testing results from one state program when considered for a different state, and the need to risk-adjust or stratify measure results at a population level.



## Public and Member Comment and Member Expressions of Support

- Six comments received
  - ▣ Two supportive of the measures under review
  - ▣ Four unsupportive of the measures under review
- No NQF member expressions of support or non-support received





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# Behavioral Health and Substance Use Spring 2020 Review Cycle

## CSAC Review and Endorsement

*November 18, 2020*

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## Standing Committee Recommendations

- Three measures reviewed for Spring 2020
- One measure recommended for endorsement
  - ▣ **NQF 0108** Follow-Up Care for Children Prescribed ADHD Medication (ADD) (Maintenance Measure)
- Two measures not recommended for endorsement
  - ▣ **NQF 2803** Tobacco Use and Help with Quitting Among Adolescents (Maintenance Measure)
  - ▣ **NQF 3572** Follow-Up After Psychiatric Hospitalization (New Measure)



## Overarching Issues

- Use of Telemedicine in Follow-Up Care
  - ▣ Two of the measures under review had follow-up care as a significant portion of the measure focus, and stipulated that it was permissible to be conducted via telemedicine. However, some were required to be performed in person. This posed a concern for the Committee, especially in light of the COVID-19 pandemic and the challenges and risks associated with in-person follow-up care.



## Public and Member Comment and Member Expressions of Support

- Three comments received
  - ▣ Two supportive of the measures under review
  - ▣ One unsupportive of the measures under review
- No NQF member expressions of support or non-support received



## Questions?

- Project team:
  - ▣ Samuel Stolpe, PharmD, MPH, Senior Director
  - ▣ Tamara Funk, MPH, Manager
  - ▣ Hannah Bui, MPH, Manager
  - ▣ Mike DiVecchia, MBA, PMP, Project Manager
  - ▣ Udobi Onyeuku, MSHA, Analyst
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- Project email address: [behavioralhealth@qualityforum.org](mailto:behavioralhealth@qualityforum.org)



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# Prevention and Population Health Spring 2020 Review Cycle

## CSAC Review and Endorsement

*November 18, 2020*

*Funded by the Centers for Medicare and Medicaid Services under contract HHSM-500-2017-00060I Task Order HHSM-500-T0001.*

## Standing Committee Recommendations

- Two measures reviewed for Spring 2020
- One measure recommended for endorsement
  - ▣ **NQF 0032** Cervical Cancer Screening (Maintenance Measure)
- One measure not recommended for endorsement
  - ▣ **NQF 0509** Diagnostic Imaging: Reminder System for Screening Mammograms (Maintenance Measure)



## Overarching Issues

- Disparities Data
  - ▣ The Committee noted that collecting data for measures in a manner that permits analysis for disparities should be considered as a requirement and, furthermore reporting on inequities, if identified, should also be required.





## Public and Member Comment and Member Expressions of Support

- Three comments received from two member organizations
  - ▣ Supportive of recommendation to not endorse NQF 0509
  - ▣ Supportive with concerns about exclusion of women age 65 plus who have new sexual partners; gap in testing disproportionately impacts Black and Brown communities
  - ▣ Comment from developer expressing interest in resubmitting for endorsement
- No NQF member expressions of support or non-support received



## Questions?

- Project team:
  - ▣ Nicole Williams, MPH, Director
  - ▣ Chris Dawson, MHA, Manager
  - ▣ Isaac Sakyi, MSGH, Analyst
  - ▣ Mike DiVecchia, MBA, PMP, Project Manager
  - ▣ Robyn Nishimi, PhD, NQF Consultant
  
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- Email: [populationhealth@qualityforum.org](mailto:populationhealth@qualityforum.org)

# **Opportunity for Member and Public Comment**

# Recognition of Committee Members



## Thank you, Tom Kottke!

- Active CSAC member since 2016
  - ▣ Vice-Chair of the Committee in 2019
  - ▣ Chair of the Committee this year
- We are grateful for Tom's leadership, expertise and contributions to this important work
- On behalf of the entire team at NQF, thank you!



## Thank you, Linda Schwimmer!

- Active CSAC member since 2016
  - ▣ Chair of the Committee in 2019
  - ▣ Vice-Chair of the Committee in 2018
- We are grateful for Linda's leadership, expertise and contributions to this important work
- On behalf of the entire team at NQF, thank you!

## Thank you, Paul Kallaur!

- Active CSAC member since 2016
  - ▣ Consumer council
- We are grateful for Paul's expertise and contributions to this important work
- On behalf of the entire team at NQF, thank you!

# Next Steps



## Next Steps

- NQF staff will describe the discussion and endorsement results in a meeting summary
- Appointing new committee members from recent call for nominations period
- Setting dates for CSAC meetings in 2021
- Next CSAC meeting: December 8, 2020 (*closed session*)



## Next Steps

Process Step	Timeline
CSAC Endorsement Meeting	November 17 - 18, 2020
Appeals Period	November 23 – December 22, 2020



## Project Information

- Project Team
  - ▣ Apryl Clark, MSHA, Chief of Staff
  - ▣ Sai Ma, PhD, Managing Director/Senior Technical Expert
  - ▣ Kim Patterson, Executive Assistant
  - ▣ Bejier Edwards, MBA, PMP, Project Manager
  - ▣ Caitlin Flouton, MS, Analyst
- Project Webpage:  
[http://www.qualityforum.org/About NQF/CSAC/Consensus Standards Approval Committee.aspx](http://www.qualityforum.org/About_NQF/CSAC/Consensus_Standards_Approval_Committee.aspx)
- Project Email Address: [CSAC@qualityforum.org](mailto:CSAC@qualityforum.org)

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