



NATIONAL
QUALITY FORUM

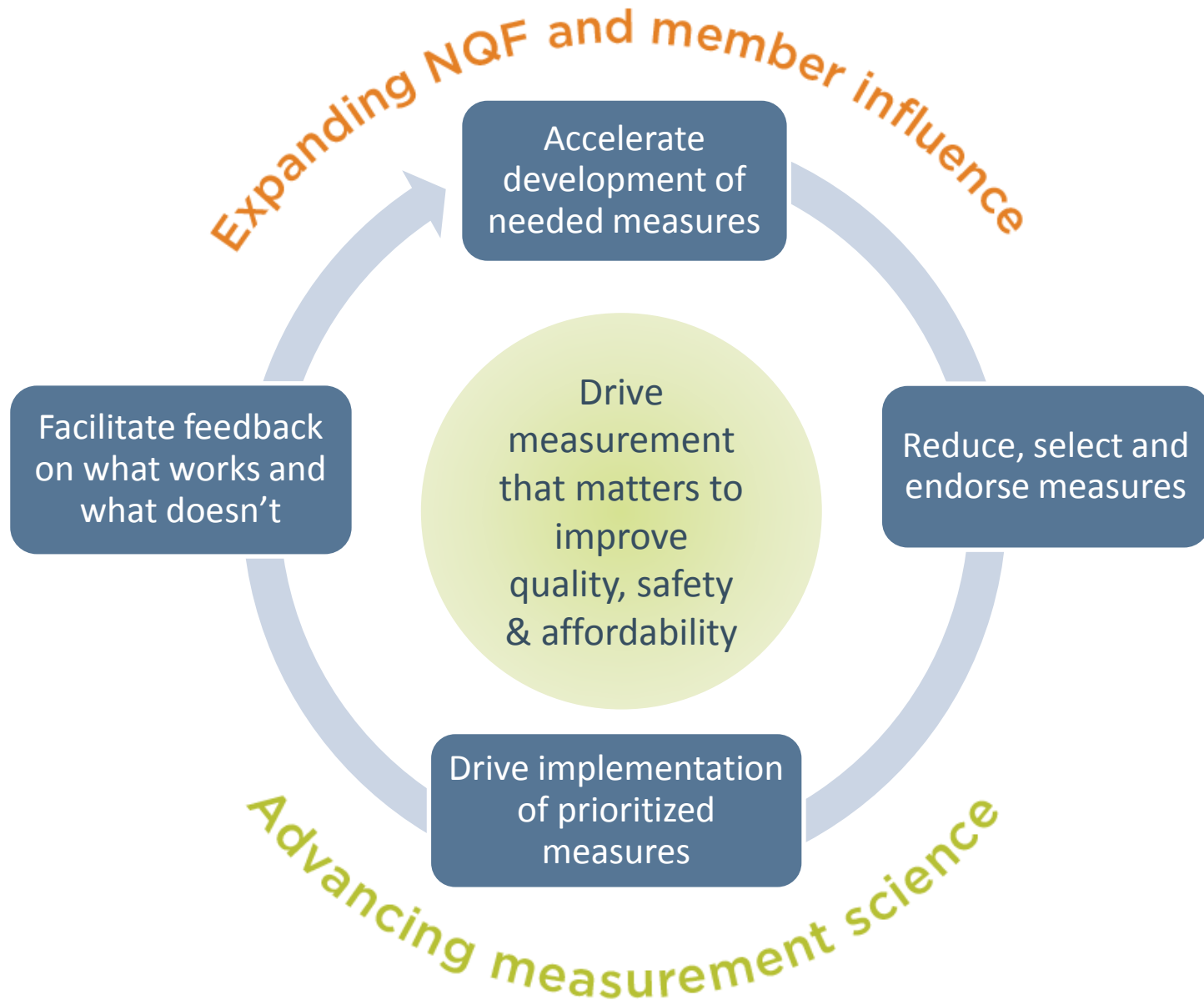
Strategic Planning and Prioritization Update

CSAC Meeting

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November 10, 2016

NQF: Lead. Prioritize. Collaborate.



NQF 3-year strategic plan and metrics

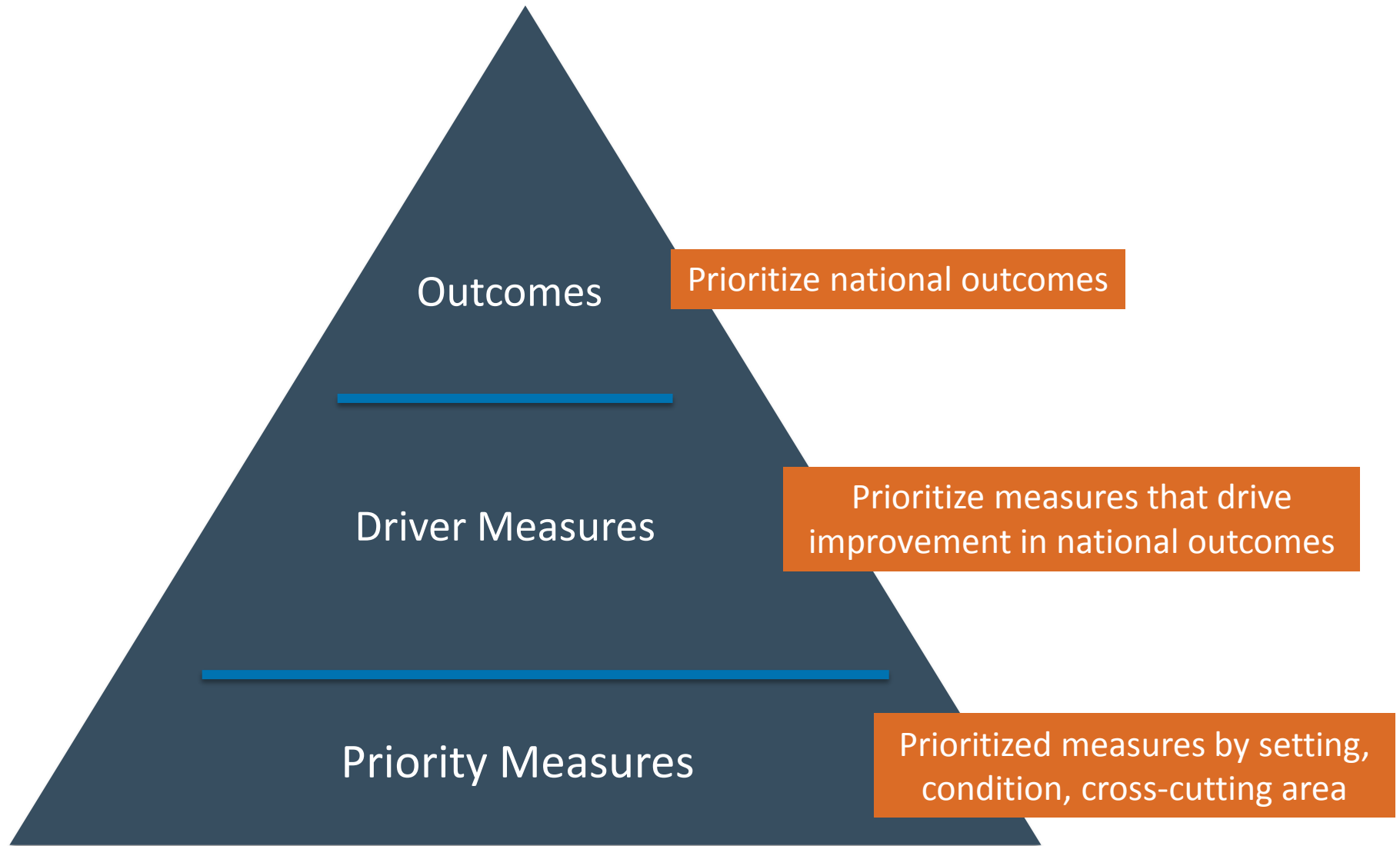
NQF THREE-YEAR STRATEGIC PLAN AND METRICS

Accelerate Development of Needed Measures	Objective #1: Identify and prioritize gaps	Objective #2: Fill prioritized measure gaps through the NQF Measure Incubator	Objective #3: Develop NQF Measure Incubator Learning Collaborative.	Outcomes: <ul style="list-style-type: none"> • Prioritized list of gaps developed and disseminated nationally • Prioritized measure gaps filled • Improved measure development process through sharing what works and what does not • Collaborative space for networking and problem solving in measure development established 	Metrics: <ul style="list-style-type: none"> • Prioritized measure gaps targeted for measure development • Prioritized measure gaps filled, including through measure incubation • Prioritized measurement issues addressed through Learning Collaborative
Prioritize Measures that Matter: reduce, select, and endorse	Objective #1: Establish criteria to prioritize measures and gaps	Objective #2: Identify priority outcomes that will improve the health of the nation Identify priority accountability measures that can drive high quality and value	Objective #3: Use measure endorsement and selection processes to reduce number of measures where burden outweighs benefit	Outcomes: <ul style="list-style-type: none"> • NQF criteria for measure and gap prioritization disseminated nationally • NQF prioritization criteria inform efforts by others to select and prioritize measures for implementation • Identified prioritized sets of outcomes and accountability measures that will drive improvement for the nation • Reduction of unnecessary measures through endorsement and selection 	Metrics: <ul style="list-style-type: none"> • Use of NQF prioritization criteria for public and private sector measure selection • Prioritized measures identified to address needs of healthcare system • Reduction in unnecessary measure burden
Drive Implementation of Prioritized Measures	Objective #1 Identify levers to drive implementation of prioritized measures	Objective #2 Identify strategies to take advantage of identified levers	Objective #3 National Quality Partners will focus efforts that will drive improvement in national outcomes	Outcomes <ul style="list-style-type: none"> • Prioritized measures used by public and private sector to drive improvement in national outcomes • Prioritized measures used in NQF efforts to drive improvement activities with NQF members 	Metrics: <ul style="list-style-type: none"> • Prioritized measures selected for use in private and public sector programs
Facilitate Feedback on What Works and What Doesn't	Objective #1: Assess measure impact through multiple feedback loops	Objective #2: Inform measure endorsement, selection and prioritization with information gathered through feedback	Objective #3: Fully integrate information flow between measure endorsement and measure selection processes	Outcomes <ul style="list-style-type: none"> • Improved information available for endorsement and selection of measures • Prioritization informed by measure feedback 	Metrics: <ul style="list-style-type: none"> • Private and public sector partners working with NQF on measure feedback • Measures for which feedback information is available • Bidirectional flow of information between endorsement and selection processes
Foster Quality Leadership and Awareness	Objective #1 Educate and engage NQF members about Federal quality legislation via a Quality Policy Member Network	Objective #2 Influence NQF's legislative and funding strategies through a Quality Policy Advisory Group	Objective #3 Foster key stakeholder leadership support for continued NQF funding	Outcomes <ul style="list-style-type: none"> • NQF members more knowledgeable about federal quality legislation • NQF members inform NQF technical assistance on the Hill • Quality-related legislation reflects NQF input where appropriate • Key stakeholders demonstrate support for NQF's reauthorization • NQF funding reauthorized 	Metrics: <ul style="list-style-type: none"> • NQF members actively participating in Quality Policy Member Network • Requests for NQF technical input into quality-related bills • Quality Policy Advisors outreach to solicit Congressional support for NQF

7/2016

Prioritization of Measures and Gaps

Prioritize Measures that Matter



Strategy #1: Accelerate Development of Needed Measures

- **Prioritized list of gaps developed and disseminated**
 - *Standardize measurement gap construct (completed)*
 - *Establish and apply criteria to prioritize measure gaps*
 - » By 12/31/16
 - *Prioritized list of measure gaps disseminated*
 - » By 3/31/16
- **Prioritized measure gaps filled (incubator)**
- **Collaborative space for sharing and problem-solving in measure development**

Draft Gap Construct

- A gap is defined as a lack of a measure in a topic area with a demonstrated quality problem that is likely to benefit from an accountability measure to drive improvements.
- An accountability measure gap should provide the following:
 - *Description of how the measure fills a gap in NQF's accountability measures portfolio.*
 - *What is the quality problem that needs to be addressed?*
 - *What is the accountable healthcare entity to be measured?*
 - *What is the population(s) to be measured-(denominator)?*
 - *What aspect of care should be measured based on the quality problem (numerator)?*
 - *What type of measure – process, outcome, PRO?*

Strategy#2: Prioritize Measures that Matter: Reduce, Select & Endorse

1. Establish criteria to prioritize measures and gaps

- *Solicit broad input on prioritization criteria*
 - » By 12/31/16

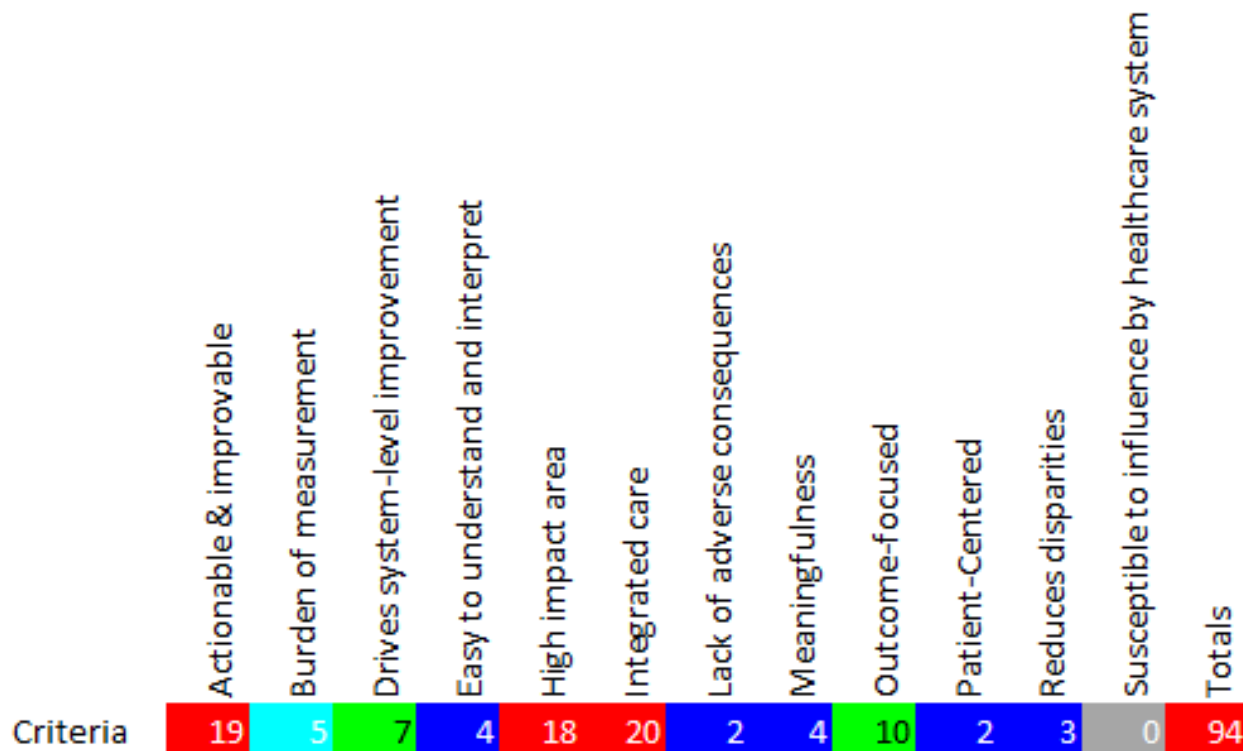
2. Identify prioritized outcomes and accountability measures that can drive high quality and value

- *Prioritized national outcomes and driver measures identified*
 - » By 3/31/16
- *Develop committee process to prioritize accountability measures by condition, cross-cutting area or setting*
 - » By 6/30/17

Environmental Scan: Prioritization Criteria

- National Quality Strategy
- IOM Vital Signs
- NQF Prioritization Advisory Committees
- Healthy People 2020 Indicators
- Kaiser Family Foundation Health Tracker
- Consumer priorities for Hospital QI and Implications for Public Reporting, 2011
- IOM: Future Directions for National Healthcare Quality and Disparities Report, 2010
- IHI Whole System Measures
- Commonwealth Fund International Profiles of Healthcare Systems, 2015
- OECD Healthcare Quality Project
- OECD Improving Value in Healthcare: Measuring Quality
- Conceptual Model for National Healthcare Quality Indicator System in Norway
- Denmark Quality Indicators
- UK NICE standards – Selecting and Prioritizing Quality Standard Topics
- Australia's – Indicators used Nationally to Report on Healthcare, 2013
- European Commission Healthcare Quality Indicators
- Consumer-Purchaser Disclosure Project – Ten criteria for usable meaningful and usable measures of performance

Frequency of Prioritization Criteria



Word Cloud: Prioritization Criteria



Reduce Measures

Strategy#2: Prioritize Measures that Matter: Reduce, Select & Endorse

3. Reduce measures where benefits outweighs burden

- *Consider MAP and CDP opportunities to drive measure reduction*

MAP: Recommendations for Measure Removal

- MAP has expressed a need to better understand the program measure sets, including how new measures under consideration interact with current measures.
- For the 2016-2017 pre-rulemaking cycle, MAP will offer guidance on measures finalized for use:
 - **MAP will offer input on ways to strengthen the current measure set including recommendations for future removal of measures.**
 - This guidance will be built into the final MAP report but will not be reflected in the “Spreadsheet of MAP Final Recommendations.”

Potential Strategies: Measure Reduction through Endorsement Criteria

Potential changes related to evaluation criteria:

- ▣ Enforce current criteria (e.g., how to handle measures with flat line improvement?)
- ▣ Increase rigor of current criteria/guidance
 - » Narrow use of evidence exception
 - » Consider threshold for “topped out” measures
 - » Consider requiring both data element and score-level testing
 - » Eliminate measures based on face validity
 - » Make use and usability into must—pass criterion
 - *Must-pass improvement subcriterion*
 - *Strengthen unintended consequences subcriterion*



Potential Strategies: Measure Reduction through Endorsement Policy

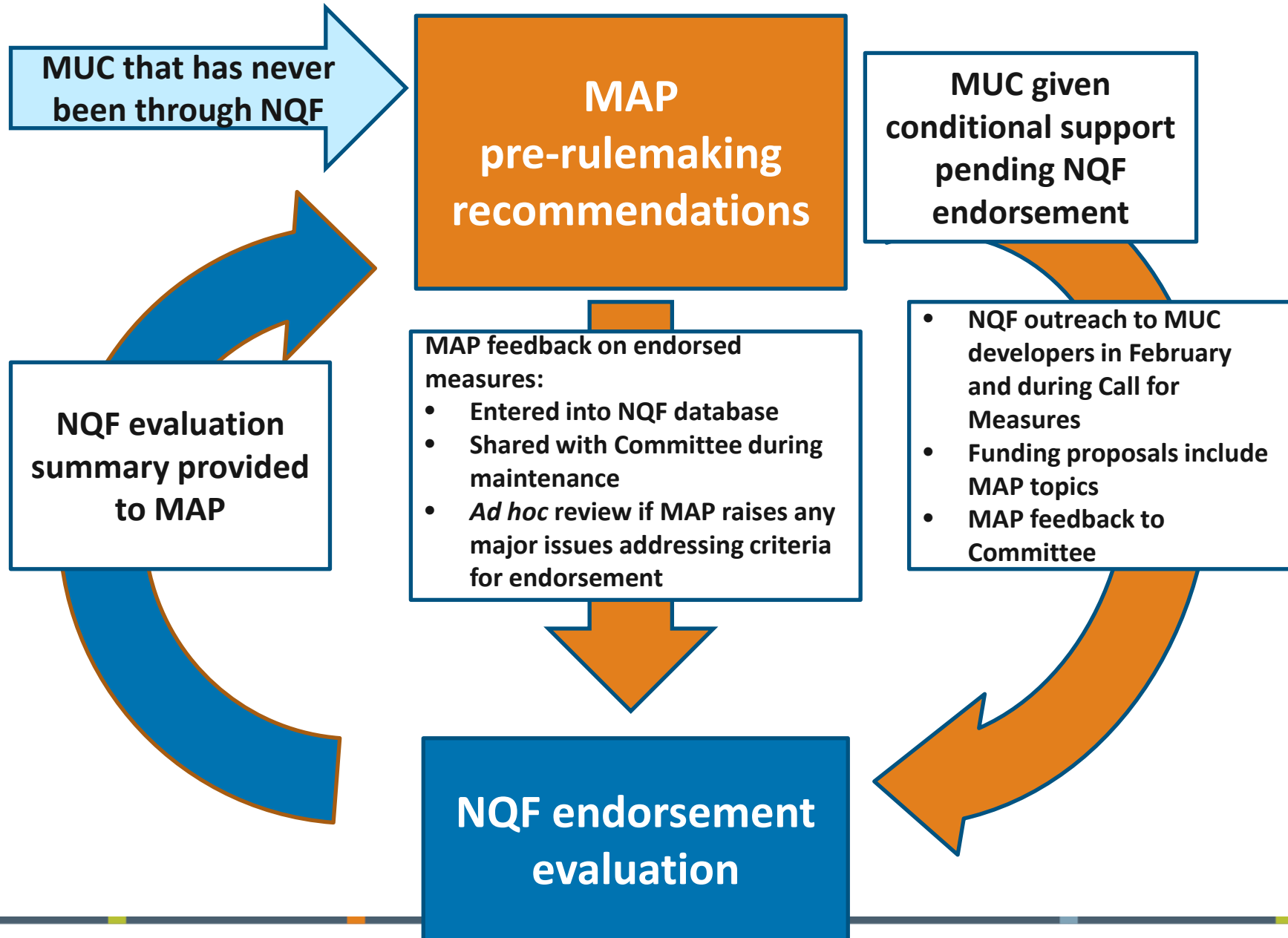
- Potential changes related to endorsement policy
 - *Consider dropping the option for reserve status*
 - *Change Reserve Status to formal “inactive” status, rather than “endorsed but inactive” status*
 - *Clear guidance to developers regarding expectation for continued endorsement*
 - *Limit submission to measures proximal to outcomes, intermediate clinical outcome measures, or outcome measures*
 - *Consider measure sets for related measures*

CMS National Impact Assessment: Recommendations

- **Develop standardized criteria in collaboration with NQF to retire quality measures.**
- Standardize race and ethnicity data collection across CMS quality reporting programs
- Promote transparency and decrease the disparities by monitoring and publicly reporting by race and ethnicity
- Develop more outcome measures, including PROs
- Quantify and monitor process-outcome linkages during measure implementation.
- Conduct a qualitative and quantitative study to understand the characteristics of an organization or provider that are associated with high performance on outcome and cost measures.

Feedback Loops

CDP-MAP INTEGRATION – INFORMATION FLOW



CMS Feedback Loop Pilot

- During the 2015-2016 MAP proceedings, the Workgroups expressed interest in learning more about a measure after it has been reviewed by the MAP:
 - *Whether a measure has been submitted for NQF endorsement and results of the Endorsement and Maintenance Standing Committee's review;*
 - *Whether a measure is performing as expected; and*
 - *Whether updates have been made to a measure to address MAP conditions of support.*

Feedback Loop Pilot

- For 2016-2017 Pre-Rulemaking, NQF and CMS will pilot a “feedback loop” process with the PAC/LTC Workgroup.
- During the October web meeting, NQF and CMS will provide updates on the development and endorsement of selected measures.
- The goal of the feedback loop is to provide updates based on stakeholder concerns.
- This review is not intended to allow for a change in MAP’s recommendation about a measure.

Purpose of Feedback?

- Feedback on what works and doesn't work with measures in use
 - *Enhance measure maintenance – Increased emphasis on gaps in care (e.g., improvement), usability and use, and feasibility*
 - *Inform efforts to reduce measurement burden and to prioritize measures*
- Feedback from individuals and organizations using measures and being held accountable for measure performance
- Have multiple opportunities to collect feedback

Facilitate Feedback on What Works and What Doesn't

- Improved information available for endorsement and selection
 - *Identify current gaps in measure feedback*
 - *Initiate discussions with four potential pilot partners – AHA, AAMC, ACP and AMA*
 - *Finalize the MAP PAC/LTC feedback pilot with CMS*
 - *Determine utility of additional existing measure feedback from CMS for select measures*
- Implement Feedback Pilot
 - *Prioritization informed by measure feedback*
- Assess current availability of measure feedback to build into prioritization criteria
 - *Integrated measure endorsement and measure selection processes*
 - *Measure information available across MAP and endorsement*
 - *Identify opportunities to automate data sharing*
 - *Assess whether various NQF Committees value integration of endorsement and MAP information*

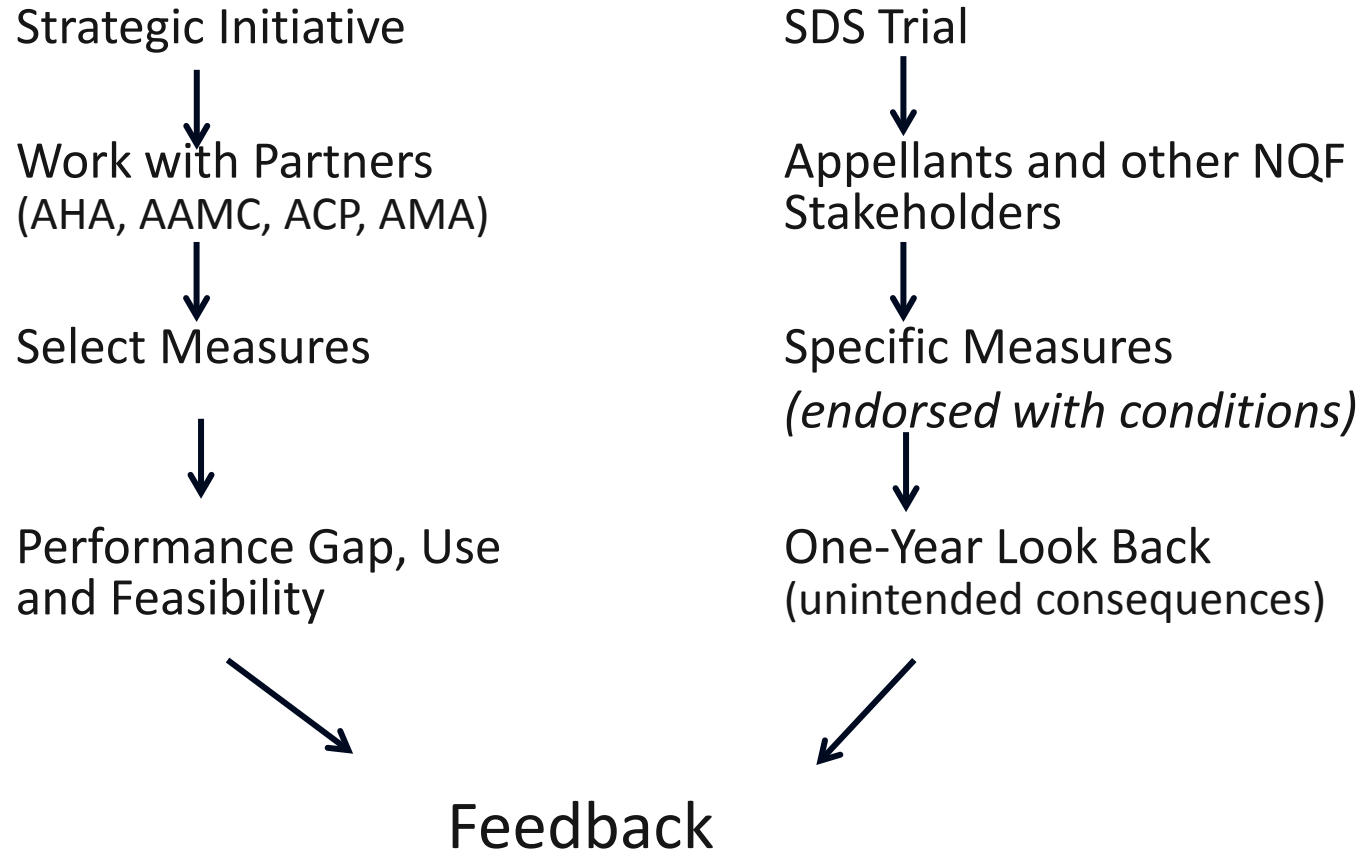
Sociodemographic Status (SDS) Trial: Twenty Measures Endorsed with Conditions

- Three conditions:
 - *Consideration for inclusion in the trial period for risk adjustment for sociodemographic (SDS) factors;*
 - *NQF to pursue future work on developing guidance for attribution; and*
 - ***One-year look-back assessment of unintended consequences.***
- Opportunity to collect feedback on any unintended consequences for specific measures

Feedback on Unintended Consequences

- Use an existing commenting tool on the NQF website
- Work with measure appellants to encourage feedback from member organizations
- Do outreach to other interested NQF members to solicit feedback
- NQF staff to assess feedback received
- Feedback shared with relevant committees
- Any action based on feedback received?

Multiple Opportunities to Collect Feedback



Input from the CSAC

- What questions should we be asking?
- What terms or language should we use that will be clear to those providing feedback?