

Measure Developers' Webinar

August 20, 2012



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Agenda

- Harmonization Event Updates
- Stage-1 “Measure Concept Form” Overview
- Measure Developer Workshop Discussion

Proposed Changes to Measure Harmonization Process



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Harmonization – Background

- The current quality landscape contains a proliferation of measures, including some that could be considered duplicative or overlapping.
 - Multiple measures may address the same conceptual measure focus and same target population.
- This can create confusion in interpreting performance results and increase the data collection burden for providers.
- Standardizing and aligning specifications (e.g., definitions) for related measures can help alleviate these problems.
 - In addition, when there is a sufficient amount of overlap between measures, selecting one as ‘best in class’ may be appropriate.
- **As a consensus standards-setting organization, NQF is uniquely positioned to help guide harmonization* efforts and move the field toward a leaner, more parsimonious set of national performance measures.**

*As part of NQF’s initiative to improve its process of measure harmonization, an effort to create standard definitions for “harmonization” and other related terms is underway; those definitions are forthcoming.

Harmonization – Background (cont.)

- Recognizing the need for harmonization within its portfolio of endorsed measures, NQF has conducted some prior work on the issue:
 - A taskforce on harmonization was convened, releasing a report providing [Guidance for Measure Harmonization](#) in May 2011
 - The NQF Consensus Standards Approval Committee (CSAC) provided [Guidance on Competing Measures](#) in June 2011
- **Nevertheless, it is clear that there remains a need to clarify and enhance the process of harmonization.**

What's the problem?

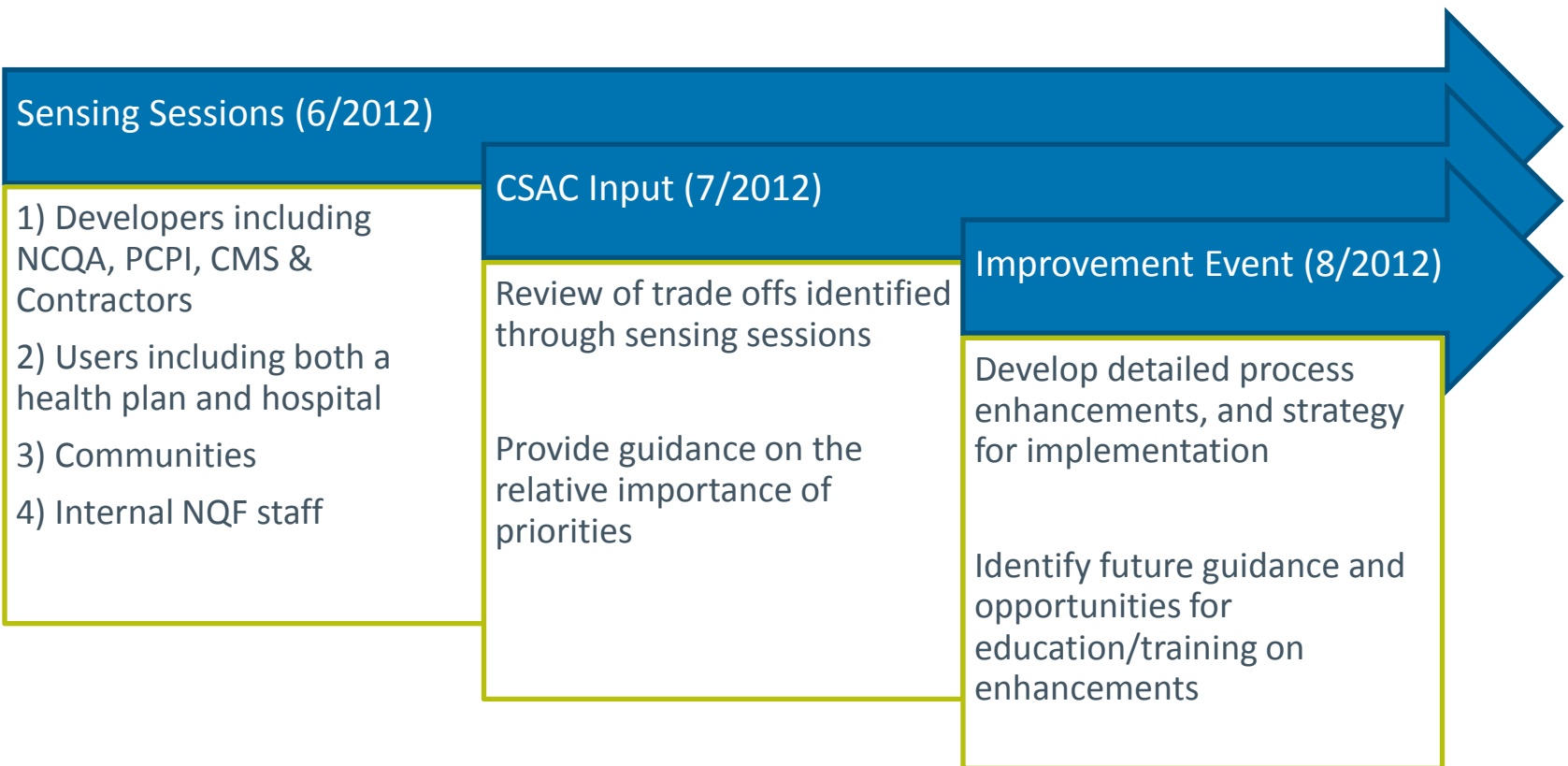
- Lack of clarity of the process, both internally and externally
- Significant timeline delays by trying to address harmonization within project timeline
- Developers unable to accomplish harmonization within project timelines
- No established process to monitor agreed upon harmonization changes

Goals of this Work

- To improve the process of harmonization for measures that are related or selecting best-in-class measures
- Desired outcomes as a result of NQF harmonization efforts:
 - Consistency in measure results
 - Improved interpretability across levels of analysis and data sources
 - Reduced data burden

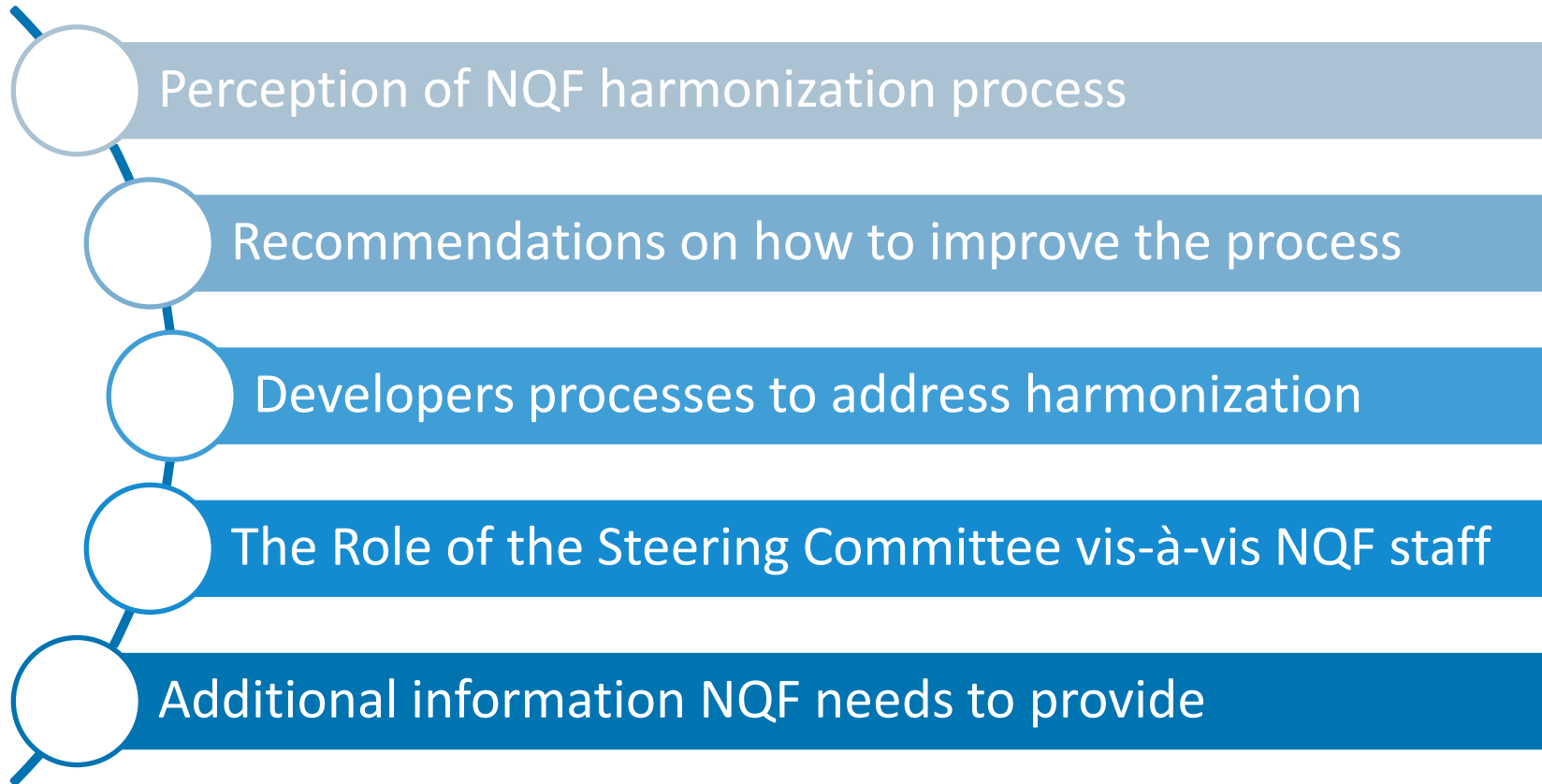
Improvement Methodology

A Lean/Six Sigma Workout session consisted of:



Sensing Session Overview

The Sensing Sessions focused on five critical areas including:

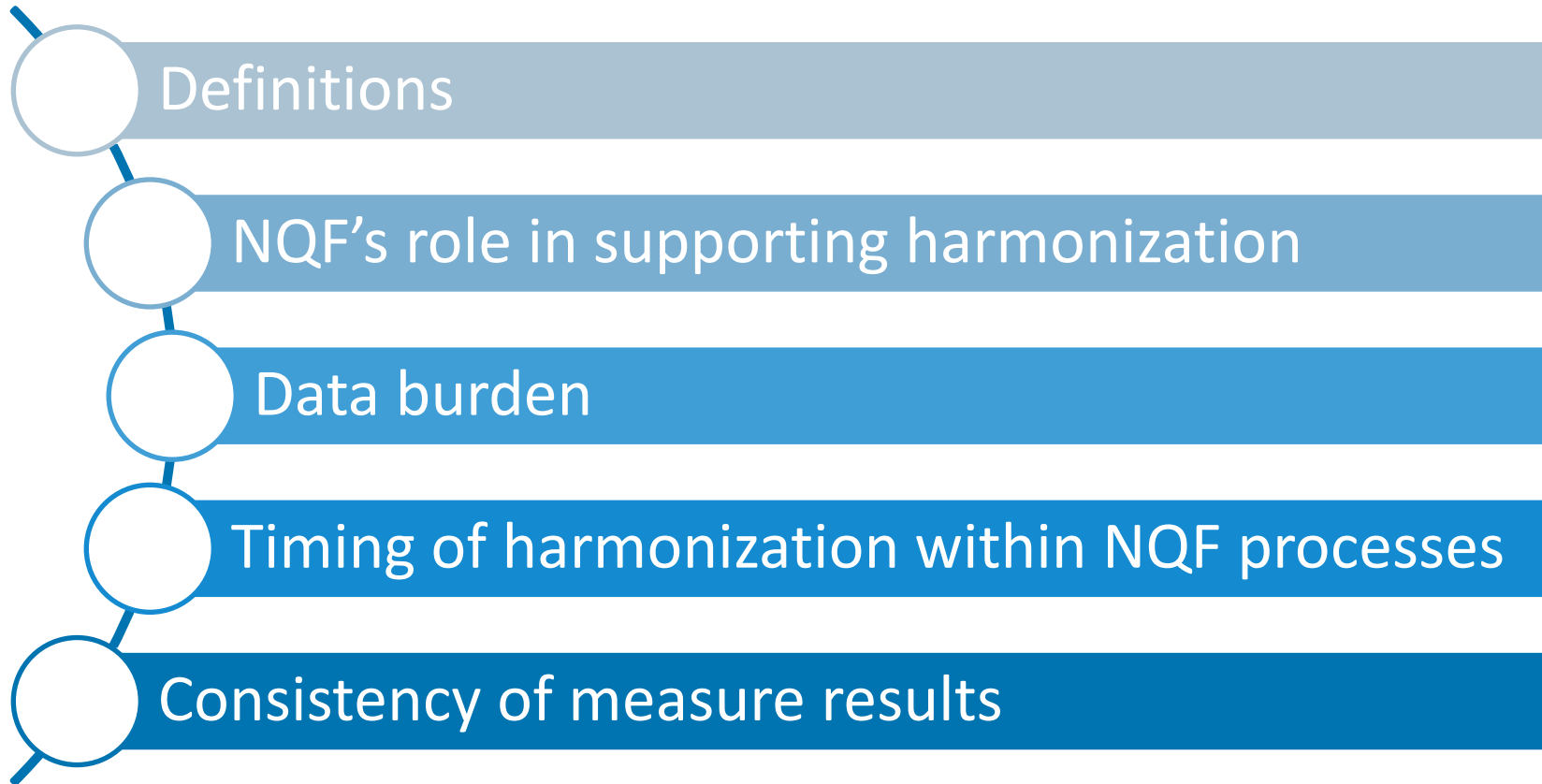


High-level themes and tradeoffs identified through Sensing Session

- Perception of NQF harmonization process
 - Lack of a clear process, and inconsistency of processes and decisions across steering committees
- Recommendations for improving the process
 - NQF needs clear criteria for defining related/competing measures
- Developer processes for addressing harmonization
 - Developers lack consistent process / source for identifying similar or competing measures
- Role of Steering Committee vis-à-vis NQF staff
 - NQF staff should identify related/competing measures at start of project, and actively facilitate the steering committee's discussion
- Information NQF staff need to provide
 - NQF needs to more clearly identify aspects of the measures needing harmonization before the measure goes to the steering committee for consideration

Harmonization/Related and Competing Event

Five critical areas for improvement emerged:



Proposed* Changes

1. **Decision logic** for processing related/competing measures, building on existing NQF guidance
2. **Early identification/triage** of related/competing measures by NQF staff
3. **Structured guide for NQF staff** to lead discussion on related/competing measures
4. **Re-convening of Steering Committee** to discuss harmonization
 - Harmonization discussion may be addressed outside of normal project timeline
5. **Annual update** to incorporate review of responsiveness to harmonization plan
 - Larger role for Measure Maintenance process/staff
6. **Harmonization Policy Committee**
 - For overarching harmonization/competing measure issues (rather than specific measure-by-measure issues)

**Recommendations will be reviewed by CSAC prior to implementation*

Decision logic for processing related / competing measures

Justification for Changes:

- Adding more clarity
- Provides a “shortcut mechanism” to more quickly identify competing measures
- Empower staff to make initial determination and inform developers
- Improving the consistency of application across committees

Early identification / triage of related / competing measures by NQF staff

Justification for Changes:

- Identification of harmonization issues early in project
- Developers have venue and time to respond to staff initiated list
- Notification about measures outside of current project will occur early on
- The project phasing will be determined by the volume of related and competing measures identified, in addition to the number of measures in the project

Structured Discussion Guide

Justification for Changes:

- Improve consistency across projects
- Allows developers to clearly understand the nature of the recommendations
- Enables Standing Committee to understand the NQF process

Re-Convening of Standing Committee to Discuss Harmonization

Justification for Changes:

- Allows for measures that were not part of the CDP review period to be sufficiently reviewed for harmonization
- Allows time for the Committee to review responses to the Harmonization plans by the developers
 - * The committee would be a sub-committee of the CSAC that includes supplemental developer members

Annual update

Justification for changes:

- Opportunity to leverage an already existing measure maintenance process
 - Review of progress on any harmonization plan would be made part of the annual update process
- Allows sufficient time for measure developers to address harmonization issues identified during the project

Harmonization Policy Committee

Justification for changes:

- Provides a venue to regularly review definitions and process for harmonization
- Advises CSAC

Next steps

- Present proposal to CSAC for input and approval
- Further develop decision logic to identify related and competing measures
- Develop scope, role, and roster for the Harmonization Policy Committee
- Communicate enhancements and solicit feedback from all affected parties
- Additional WorkOut events to work through more complex harmonization process issues, including
 - Incorporation into a 2-stage CDP
 - Identification of related/competing measures within NQF portfolio of measures

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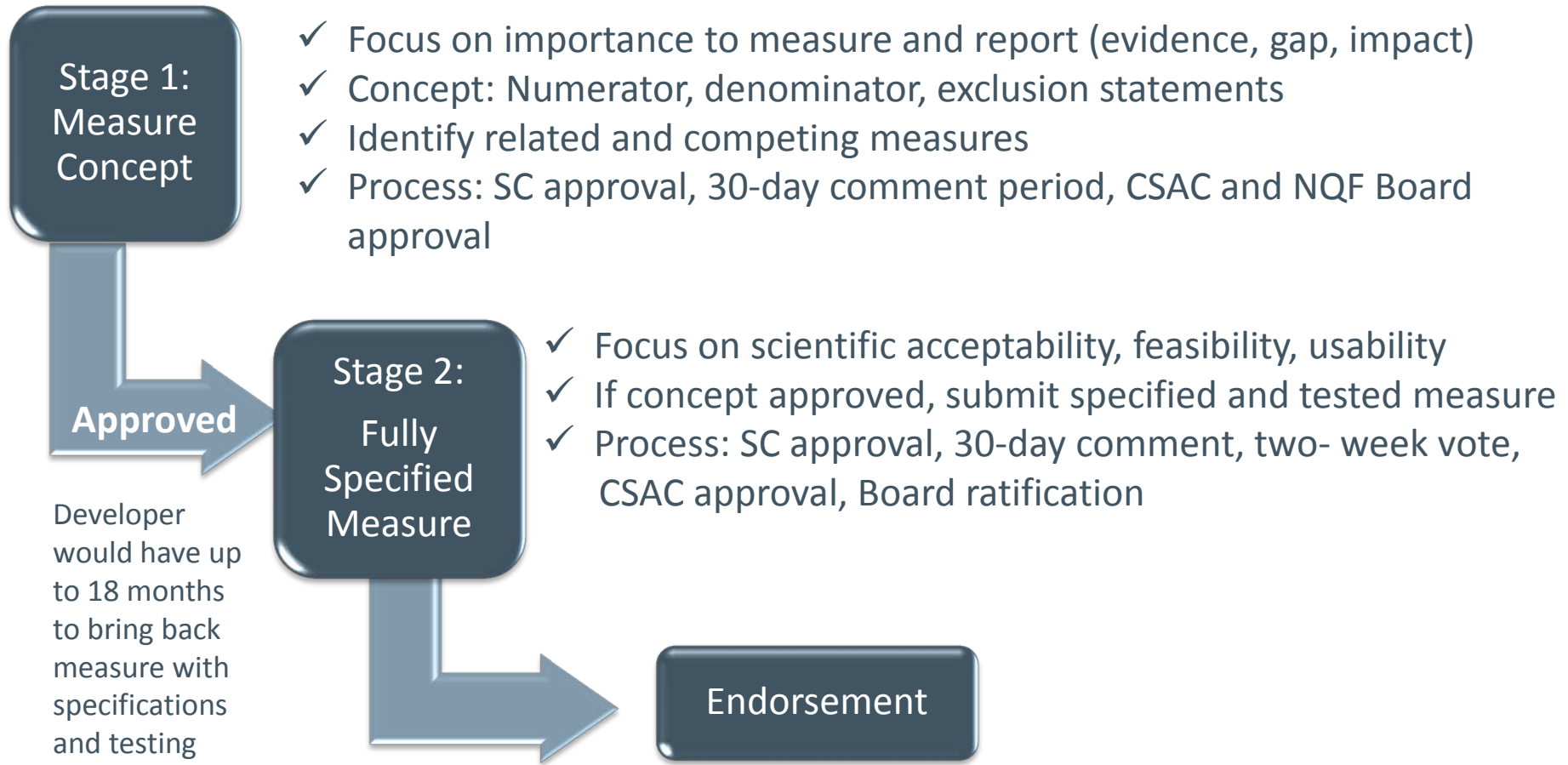
- Comments or questions?

Measure Concept Form: Stage-1 Submission



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Proposed Two-Stage Endorsement Process



Stage-1 Submission Form (cont)

Adapted Version of NQF Measure Submission Form

- 1. Still input information to show that measure meets NQF conditions for consideration.

Stage-1 Submission Form (cont)

Conditions Information

NQF CONDITIONS

Measure Type* Process

Conditions that must be met for consideration by NQF

Several conditions must be met before proposed measures may be considered and evaluated for suitability as voluntary consensus standards. If any of the conditions are not met, the measure will not be accepted for consideration.

Note: For new measure concepts that are not yet fully specified and tested, Conditions B and D do not apply.

- A. All submissions will require a signed agreement. Please contact NQF staff for more information.
- B. The measure owner/steward verifies there is an identified responsible entity and a process to maintain and update the measure on a schedule that is commensurate with the rate of clinical innovation, but at least every three years.
- C. The intended use of the measure includes both accountability applications (including public reporting) and performance improvement to achieve high-quality, efficient healthcare.

Stage-1 Submission Form (cont)

- 2. Must complete “Specifications” section to include:
 - Measure title
 - Measure description
 - Numerator statement
 - Numerator details
 - Denominator statement
 - Denominator details
 - Exclusions
 - Taxonomy information

Stage-1 Submission Form (cont)

Measure Specifications

SPECIFICATIONS

Descriptive Information

De.1. Measure Title*

Urinary Incontinence Management in Older Adults - a. Discussing urinary incontinence, b. Receiving urinary incontinence treatment - A patient reported measure

De.2. Brief description of measure *(including type of score, measure focus, target population, timeframe, e.g., Percentage of adult patients aged 18-75 years receiving one or more HbA1c tests per year)*

This is a patient-reported measure collected through the Health Outcomes Survey with two rates that address management of urinary incontinence in older adults.

Stage-1 Submission Form (cont)

Measure Specifications

Measure Specifications (Measure evaluation criterion 2a1)

2a1.1. Numerator Statement (Brief, narrative description of the measure focus or what is being measured about the target population, i.e., cases from the target population with the target process, condition, event, or outcome)

a) **Discussing Urinary Incontinence:** The number of patients who reported having a problem with urine leakage in the past 6 months and indicated they discussed their urine leakage problem with their current provider.

b) **Receiving Urinary Incontinence Treatment:** The number of patients who reported having a problem with urine leakage in the past 6 months and indicated they received treatment for their current urine leakage problem.

2a1.3. Numerator Details (All information required to identify and calculate the cases from the target population with the target process, condition, event, or outcome such as definitions, timeframe, specific data collection items/responses, code/value sets - Note: lists of individual codes with descriptors should be provided in an Excel file in required format with stage 2 measure submission)

For new concepts, describe how you plan to identify and calculate the numerator.

a) **Discussing Urinary Incontinence**

Question 3: Have you talked to your current doctor or other health provider about your urine leakage problem?

Stage-1 Submission Form (cont)

Measure Specifications

2a1.25. Data Source (Check only the sources for which the measure is specified and tested)

If other, please describe in 2a1.26.

For new concepts, check the planned data sources.

- Administrative claims
- Healthcare Provider Survey
- Electronic Clinical Data : Electronic Clinical Data
- Management Data
- Electronic Clinical Data : Electronic Health Record
- Paper Medical Records
- Patient Reported Data/Survey
- Electronic Clinical Data : Imaging/Diagnostic Study
- Other
- Electronic Clinical Data : Laboratory
- Electronic Clinical Data : Pharmacy
- Electronic Clinical Data : Registry

2a1.26. Data Source or Collection Instrument (Identify the specific data source or data collection instrument, e.g. name of database, clinical registry, collection instrument, etc.)

Medicare Health Outcomes Survey

2a1.33. Level of Analysis (Check only the levels of analysis for which the measure is specified and tested):

Stage-1 Submission Form (cont)

- 3. Must complete “Importance” section

** Importance is a “must pass” criterion. If the concept does not pass this criterion it will not continue on for full specification evaluation in Stage-2.*

Stage-1 Submission Form (cont)

Importance

IMPORTANCE

Importance to Measure and Report is a threshold criterion that must be met in order to recommend a measure for endorsement. All three subcriteria must be met to pass this criterion. See guidance on evidence.

High Impact (Measure evaluation criterion 1a)

1a.1. Demonstrated High Impact Aspect of Healthcare

- | | |
|--|---|
| <input checked="" type="checkbox"/> Affects large numbers | <input checked="" type="checkbox"/> Patient/societal consequences of poor quality |
| <input checked="" type="checkbox"/> A leading cause of morbidity/mortality | <input type="checkbox"/> Severity of illness |
| <input type="checkbox"/> Frequently performed procedure | <input type="checkbox"/> Other |
| <input checked="" type="checkbox"/> High resource use | |

Stage-1 Submission Form (cont)

Importance (cont)

- ***Please note that the evidence questions are now an attachment.**

1c.28. Attach evidence submission form ([Click here to download Evidence Submission Form Template](#))
[AUGS - NQF Final Measure 1 Evidence Form-634780540044291603.docx](#)

1c.29. Attach appendix for supplemental materials

Stage-1 Submission Form (cont)

- 4. Must demonstrate the intended use of measure.

USABILITY AND USE

Extent to which intended audiences (e.g., consumers, purchasers) could use performance results for both accountability and performance improvement to achieve high-quality, efficient healthcare for individuals or populations

4.1. Current and Planned Use

Use	Planned	Current
Public Reporting	<input type="checkbox"/>	<input checked="" type="checkbox"/> For current use, provide URL* http://reportcard.ncqa.org/plan/external/plansearch.aspx
Payment Program	<input type="checkbox"/>	<input type="checkbox"/>
Public Health/Disease Surveillance	<input type="checkbox"/>	<input type="checkbox"/>
Professional Certification or Recognition Program	<input type="checkbox"/>	<input type="checkbox"/>
Regulatory and Accreditation Programs	<input type="checkbox"/>	<input checked="" type="checkbox"/> For current use, provide URL* http://www.ncqa.org/tabid/123/Default.aspx

Stage-1 Submission Form (cont)

- 5. Identify any competing or related measures.

RELATED AND COMPETING MEASURES

If a measure meets the above criteria and there are endorsed or new related measures (either the same measure focus or the same target population) or competing measures (both the same measure focus and the same target population), the measures are compared to address harmonization and/or selection of the best measure.

Relation to Other NQF-endorsed® Measures (Measure evaluation criterion 5)

5.1. If there are related measures (either same measure focus or target population) or competing measures (both the same measure focus and same target population), list the NQF # and title of all related and/or competing measures. NOTE: Can search and select measures.

- 0098: Urinary Incontinence: Assessment, Characterization, and Plan of Care for Urinary Incontinence in Women Aged 65 Years and Older - an administrative measure

Harmonization (Measure evaluation criterion 5a)

Next Steps

- We will share revisions to the questions and format
- Ask that feedback on clarity of questions and ease of use of the form be provided

- Comments or questions?

Measure Developer Workshop



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Workshop Details

- All-day event, tentatively scheduled for Thursday November 1, 2012.

- NQF staff will engage Measure Developers to discuss:
 - Measurement gap areas
 - Composite & e-measures
 - Evidence Task Force's analysis of testing

- Please submit any ideas to measuremaintenance@qualityforum.org

Upcoming Deadlines

- Ad Hoc Review of Readmissions Measures
 - AMI
 - HF
 - Total Hip and Knee
 - Updated measure to address planned readmissions
 - More information on timelines to be released soon

Next Webinar

September 17, 2011, 1 p.m. ET

- Topics TBD

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