

Measure Developer Webinar



NATIONAL
QUALITY FORUM

November 17, 2014

Agenda

- Maintenance Updates
 - Follow-up on Suggested IT Improvements
- Overview of Renal Project
- Overview of EENT Project
- Follow-up on Risk Adjustment for SDS Factors

Follow-Up on Suggested IT Improvements

Topic	Suggestion	Status/Notes
Measure submission form (MSF)	Word version of MSF to work offline	Complete and now available on NQF website
	Release notes that highlight changes	In process – tentatively available in early-mid 2015
	Timeline for updates, with version #s	
	Technical assistance info at top of data entry page or other location that is easy to find	NQF program staff in discussions with NQF IT
	Greater transparency for trouble-shooting (i.e. provide info for compatibility issues and how to work around them)	
	“smart form”/skip logic – turn on/off questions depending on measure type	
	Spell check	
Dashboard	Archive for comments already addressed	In process – tentatively available in early-mid 2015
	Ability to delete incomplete measure submission forms	

Quality Measurement for Renal Conditions



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Poonam Bal, MHSA

November 17, 2014

Renal Measures Consensus Development Process (CDP) – Call for New Measures

- NQF is seeking new measures and concepts relating to renal disease, including end stage renal disease (ESRD) and chronic kidney disease (CKD).
 - NQF is particularly interested in the following:
 - » measures of intermediate clinical outcomes or longer term health outcomes, including complications;
 - » composite performance measures;
 - » measures applicable to more than one setting;
 - » measures that capture broad populations, including children and adolescents where applicable;
 - » measures that are harmonized with similar measures; and,
 - » measures that are sensitive to vulnerable populations, including racial/ethnic minorities; and Medicaid populations.

Renal Measures CDP- Maintenance Measures and Standing Committee

- In addition to any new measures submitted, twenty-one (21) NQF-endorsed measures are due for maintenance re-evaluation against the most recent NQF measure evaluation criteria.
- NQF will convene a new multi-stakeholder Standing Committee composed of twenty to twenty-five (20-25) individuals
 - Members will possess relevant knowledge and/or proficiency in process and outcome quality measurement and/or clinical expertise associated with renal conditions (e.g., CKD, ESRD, etc.) across various care settings for children and adults.

Renal Measures CDP Important Dates

Meeting	Date/Time
Call for Nominations Closes	January 6, 2015
Call for Measures Closes	February 27, 2015
Orientation Call	March 18, 2015, 1:00-3:00 PM ET
Measure Evaluation Q &A	March 31, 2015, 1:00-3:00 PM ET or April 2, 2015, 1:00-3:00 PM ET
Workgroup Call	Workgroup 1: April 16, 2015, 1:00-3:00 PM ET Workgroup 2: April 21, 2015, 1:00-3:00 PM ET Workgroup 3: April 23, 2015, 1:00-3:00 PM ET Workgroup 4: April 28, 2015, 1:00-3:00 PM ET
In-person meeting (2 days in Washington, DC)	May 6-7, 2015
Post meeting conference call	May 12, 2015, 1:00-3:00 PM ET
Post Draft Report Comment Call	July 30, 2015, 1:00-3:00 PM ET

Renal Measures Consensus Development Project

Contact Information

Contact Information:

- Staff:
 - Sarah Sampsel, Senior Director
 - Kathryn Streeter, Senior Project Manager
 - Poonam Bal, Project Manager
 - Alexandra Ogungbemi, Project Analyst
- Please direct all questions and concerns to the project email inbox at **renal@qualityforum.org**
- Phone: **(202) 783-1300**

Eye Care and Ear, Nose and Throat Conditions (EENT)

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Project Scope

- Identify and endorse performance measures for accountability and quality improvement that specifically address conditions, treatments, interventions, or procedures relating to the ears, eyes, nose and throat.
- Eye care, including vision and conditions affecting the eye and eyesight;
- Care of diseases and disorders of the ear, nose and throat; and hearing and speech conditions

Current EENT Measure Portfolio

- Twenty-one (21) NQF-endorsed measures that are due for maintenance will be re-evaluated against the most recent NQF measure evaluation criteria.
- Current EENT maintenance measure portfolio:
 - Three (3) Glaucoma measures;
 - Two (2) Macular Degeneration measures;
 - Five (5) Hearing Screening and Evaluation measures;
 - Five (5) Ear Infection measures;
 - Five (5) Eye Infection measures;
 - One (1) Pharyngitis measure.

Measure and Nomination Submission Deadline

Submissions must be received by
6:00 pm. ET on **March 27, 2015**

Nominations must be received by
6:00pm. ET on **March 9, 2015**

EENT Project Staff

- Quintin Dukes, Project Manager
- Erin O'Rourke, Senior Project Manager
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Risk Adjustment for Sociodemographic (SDS) Factors Trial Period

Guidance for Measure Developers

Taroon Amin
Karen Johnson
Erin O'Rourke

November 17, 2014



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Agenda

- Background on the trial period
- Key points from the Risk Adjustment Expert Panel and necessary information for measure review
- Update on how to provide the information needed for review of SDS-adjusted measures
- Next steps
- Questions

Background on the Trial Period

- The NQF Board of Directors approved a trial period for risk adjustment for sociodemographic factors prior to a permanent change in NQF policy.
- During the trial period, the NQF policy which restricts use of SDS factors in statistical risk models will be suspended and NQF will implement the Risk Adjustment Expert Panel's recommendations.

Background on the Trial Period

- The Standing Committee will determine whether a performance measure should be adjusted for SDS factors for each individual measure.
- Where there is a potential conceptual and empirical basis for SDS adjustment, the Committee will evaluate whether the developer assessed SDS factors according to guidelines for selecting risk factors to determine whether to include in adjustment or not.
- If a performance measure is SDS-adjusted, the measure developer must include specifications for stratification of a non-SDS adjusted version of the measure and a non-SDS adjusted score.

Projects Effected by the Trial Period

- The trial period will begin January 1, 2015.
- For projects with calls for measures beginning after this date, measures may be submitted with sociodemographic factors included in their risk adjustment models.

NQF Risk Adjustment and SES Expert Panel:

Key Points

- Each measure must be assessed individually to determine if SDS adjustment appropriate.
- Not all outcomes should be adjusted for SDS factors (e.g., central line infection would not be adjusted)
 - Need conceptual basis (logical rationale, theory) and empirical evidence
- The recommendations apply to any level of analysis including health plans, facilities, and individual clinicians.

Necessary Information for Evaluation

The Expert Panel identified the following as important information for reviewers to evaluate whether SDS adjustment is appropriate:

- Conceptual description (logical rationale or theory informed by literature and content experts) of the casual pathway between the sociodemographic factors, clinical factors, quality of care, and outcome
- Patient-level sociodemographic variables that were available and analyzed, for example:
 - Patient-reported data (e.g., income, education, language)
 - Proxy variables when sociodemographic data are not collected from each patient (e.g., based on patient address and use of census tract data to assign individual patients to a category of income, education, etc.) and conceptual rationale for use
 - Patient community characteristics (e.g., crime rate, percent vacant housing, smoking rate, level of uninsurance) assigned to individual patients for the specific community where they live

Necessary Information for Evaluation

- Analyses and interpretation resulting in decision to include or not include SDS factors. For example:
 - Prevalence of the factor across measured entities
 - Empirical association with the outcome
 - Contribution of unique variation in the outcome
 - Assessment of between-unit effects
- Current and planned use of the measure and a discussion of risks for misuse of the specified performance measure

Summary of Changes

- Updates have been made to the measure testing attachment form
- A guidance document has been developed
- No changes have been made to the measure submission form

How to provide the necessary information

- Patient-level sociodemographic variables:
 - A new question (1.8) has been added to the measure testing attachment:
 - » “What were the patient-level sociodemographic (SDS) variables that were available and analyzed in the data or sample used? For example, patient-reported data (e.g., income, education, language), proxy variables when SDS data are not collected from each patient (e.g. census tract), or patient community characteristics (e.g. percent vacant housing, crime rate).”

How to provide the necessary information

- Conceptual description of the casual pathway:
 - Enter in section 2b4.3 of the measure testing attachment:
 - » **“Describe the conceptual/clinical and statistical methods and criteria used to select patient factors (clinical factors or sociodemographic factors) used in the statistical risk model or for stratification by risk (e.g., potential factors identified in the literature and/or expert panel; regression analysis; statistical significance of $p < 0.10$; correlation of x or higher; patient factors should be present at the start of care)”**

How to provide the necessary information

- Analyses and interpretation resulting in decision to include or not include SDS factors:
 - A new question (2b4.4b) has been added to the measure testing attachment:
 - » **“Describe the analyses and interpretation resulting in the decision to select SDS factors (e.g. prevalence of the factor across measured entities, empirical association with the outcome, contribution of unique variation in the outcome, assessment of between-unit effects and within-unit effects)”**

How to provide the necessary information

- Discussion of the risk of misuse:
 - Enter in section 4c.1 of the Measure Submission Form
 - » **“Identify susceptibility to inaccuracies, errors, or unintended consequences of the measurement identified during testing and/or operational use and strategies to prevent, minimize, or detect. If audited, provide results:”**

How to provide the necessary information

- If a performance measure includes SDS variables in its risk adjustment model, the measure developer should provide the information required to stratify a clinically-adjusted only version of the measure results for those SDS variables in section S.12 in the Measure Submission Form.
 - This information may include *the stratification variables, definitions, specific data collection items/responses, code/value sets, and the risk-model covariates and coefficients for the clinically-adjusted version of the measure when appropriate.*
- The details of the final statistical risk model and variables should be entered in sections S.14 and S.15 in the Measure Submission Form.

Next Steps:

- NQF will seek feedback on the process to submit SDS adjusted measures during the 12/3 Measure Developer Advisory Panel Workshop
- The revised measure testing attachment and guidance will be posted in early December
- NQF will be launching a call for nominations for the Disparities Standing Committee that will evaluate the trial period and monitor for any unintended consequences.
- The trial period will begin in January 2015
 - Measures with calls opening after January 1, 2015 can submit SDS-adjusted measures

Questions?

