



November 20, 2013

TO: Consensus Task Force

FROM: Lindsey Tighe, Taroon Amin, Adeela Khan, Helen Burstin

RE: Building Consensus Proposal and CDP Improvements Update

Meeting Objectives

- Consensus Task Force to approve Building Consensus proposal
- Review of Kaizen Event
- Review of Consensus Task Force and CDP Improvement Accomplishments

Background

The Board approved a task force in August 2012 that would review and recommend options for defining and achieving consensus within NQF's consensus development process. The charge to the Consensus Task Force (CTF):

- 1) Review different approaches to establishing consensus;
- 2) Identify the strengths and weaknesses of the current process; and
- 3) Recommend enhancements to the current process.

To date, the Consensus Task Force has focused improvement efforts to achieve a more efficient consensus development process. Identifying several high priority topic areas, the task force, CSAC, and NQF staff used LEAN principles and worked rapidly to define specific problems and developed solutions to implement.

The Task Force also recommended modifications to the process to better achieve consensus. The recommended modifications included:

- Establish when consensus has been reached, establishing thresholds for approval of measures within the current CDP process
- Develop a process for additional deliberation when it is unclear whether consensus has been reached
- Allow stakeholders to indicate support for measures via commenting.
- Explore customizations of NQF website for stakeholders to easily find information that is relevant to their interests.
- Engage stakeholders through social media outreach.

A proposal addressing the first two recommendations is below; the latter recommendations have been addressed through the CDP Improvement efforts and the Kaizen event.

Proposal for Building Consensus

The Consensus Task Force met on August 12th to review recommended modifications to the consensus process. The Task Force indicated general agreement with the direction of the proposed solutions and processes and recommended modifications. The proposal with modifications is detailed below:

Draft Proposal for Building Consensus

- When consensus is not reached via the **Steering Committee**
 - The Steering Committee has not reached consensus if the vote margin on any major criterion or overall is between 40%-60%
 - Resolved by putting all measures out for comment and having the Steering Committee re-vote on measures where consensus was not reached after consideration of the comments.
- When consensus is not reached via the **membership**
 - The membership has not reached consensus if the average council vote margin is between 40%-60%.
 - Resolved by having council chairs represent stakeholder perspectives to the CSAC with the CSAC as the arbiter of endorsement.
- When consensus is not reached via the **CSAC**
 - The CSAC has not reached consensus if the vote margin to endorse a measure is between 40%-60%.
 - CSAC asks council chairs to represent stakeholder perspectives to the CSAC and re-votes.
 - If after this the CSAC still has not reached consensus, the measure will not be endorsed.

In response to concerns raised by the Consensus Task Force about the burden associated with this process, NQF staff reviewed all endorsement maintenance projects from 2012 to understand the frequency with which this additional consensus building process would occur.

Sixteen projects were conducted in 2012, with 430 total measures reviewed. Of those 430 measures reviewed, 301 were endorsed. For the measures initially not recommended by the Steering Committee, 5 measures (1.2% of measures reviewed) had a vote margin between 40-60% on any one criterion or the overall criteria and thus, under the new process, would have been put out for NQF membership vote.

Of the measures that were put out for vote, 4 measures (1% of measures reviewed) had an average council vote margin between 40-60% and thus, under the new process, would have been resolved by having the council chairs represent stakeholder perspectives to the CSAC as the arbiter of endorsement.

Cost and Resource Use Pilot

While this proposal has been under Consensus Task Force review, the 2013 Cost and Resource Use project encountered the situation described by the consensus building proposal. Information on the Resource Use project and process for consensus building is described below.

The NQF convened Cost and Resource Use Steering Committee reviewed two non-condition-specific cost/resource use measures. Of the two measures, the Committee recommended (17-8) one of the measures for endorsement, #2158-Medicare Spending per Beneficiary Measure (MSBP). Following a public comment period on the measures, the recommended measure was put out for membership vote. Member voting did not reveal clear consensus with 43% of councils approving the measure. Representatives of 42 member organizations voted with no votes received from the Public/Community Health Agency Council.

At its October 8th conference call, the CSAC reviewed the recommendations from the Cost and Resource Use project, including the Steering Committee deliberations, public and member comments, and member voting results. Due to the lack of consensus noted among the councils represented in the voting results, the CSAC requested input from the NQF member councils to gain a better understanding of the perspective of the NQF membership and determine whether consensus among the councils can be reached before making an endorsement recommendation.

The NQF member council chairs were provided with [this memo from the CSAC chairs](#) regarding the project. Each council gathered input from their constituents throughout the month of October and presented their perspective to the CSAC to further inform their decision.

CSAC Meeting

At their in-person meeting on November 6, CMS, Acumen, and the council chairs provided input to the CSAC on the measure.

Representatives from both CMS and the measure developer, Acumen, were present at the meeting to clarify several committee and CSAC concerns as well as address questions from the CSAC and Council representatives. Using [this presentation](#), Acumen was able to clarify the use of MSPB in conjunction with quality measures, and provide a response to concerns that costs captured are largely driven by post-acute services. Acumen was also able to clarify the risk-adjustment model, and the exclusions of deaths and transfers.

CSAC Decision

After considering the input from the NQF member councils, in addition to the Steering Committee recommendation, public and member comment, and NQF member voting, the CSAC decided to proceed with a vote on the measure. The CSAC voted to endorse measure #2158 Medicare Spending per Beneficiary by a vote of 10-yes; 3-no.

The CSAC was very appreciative of the council input through the process, stating that having the opportunity to discuss the issues was extremely valuable for their decision-making process.

Action Item: The Task Force is asked to consider this proposal and approve, or approve with modifications if any are identified.

Review of Kaizen Event

What is Kaizen?

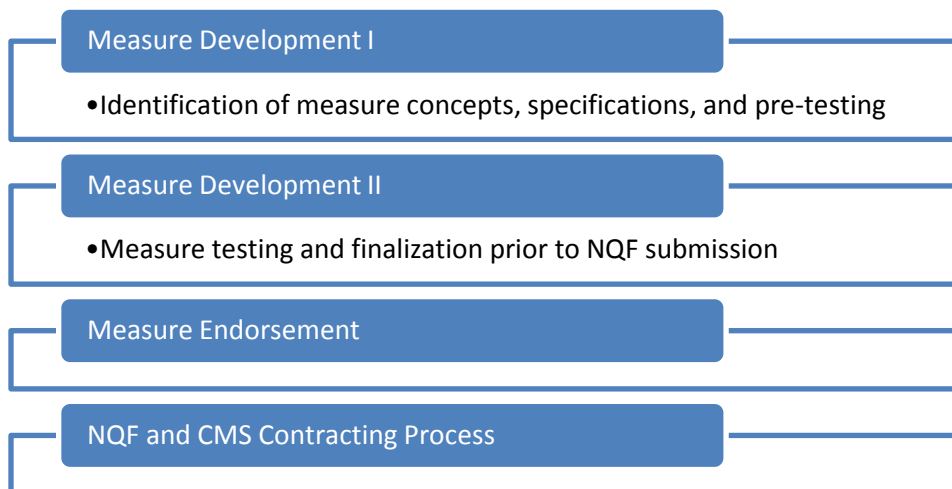
The word Kaizen in LEAN methodology means continuous improvement or “change for the better” through a combination of two Japanese words: Kai, meaning “change,” and Zen, meaning “good.” The purpose of a kaizen event is simple: to remove waste and manage change. In a Kaizen event, the current state is mapped to see the process as it runs at present, waste is identified, and then a future state map is developed to show how the process could run.

The Purpose of the NQF Kaizen

As part of our Consensus Development Process redesign work, NQF hosted a four-day Kaizen event focused on Measure Development and Measure Endorsement from September 9-12. The purpose of the event was to explore ways to better provide timely, multi-stakeholder input into the measure development lifecycle that will help develop high-quality measures. A key goal was to reduce the waste and delays across the spectrum – from the measure concept through testing to endorsement – to ensure that the measures that matter are available as soon as possible.

To that end, NQF hosted a multi-stakeholder meeting with over 100 participants focused on establishing a future state for providing such input, which will ultimately increase the efficiency and efficacy of both measure development and the endorsement process. The Kaizen event was done in collaboration with ONC and CMS, who provided additional LEAN facilitation support. The participant organization list is attached.

The Kaizen event focused on the following topics:



A multi-stakeholder group was assigned to consider each topical area. The groups worked to develop current and future state maps. The future state map was guided by the expectation of work that could be completed in a 3-6 month timeline.

Key Breakthroughs

The identification of the ultimate customer of the measure development and endorsement process as the patient with their family or caregivers drove many of the subsequent innovations in the process. The group considered opportunities to create a more iterative development and endorsement process with the elimination of steps identified with waste or variation. There was also consideration for how steps could be moved or added if waste and pain points were eliminated further down the road.

Teams were asked to describe their “*aha’s*” as they reviewed the current state. For example:

- Although patients were identified as the ultimate customer, they often were not engaged upfront in the process in determining importance;
- Measure developers require a minimum of 40 hours to complete the NQF measure submission form;
- NQF members require approximately 10 hours to complete nomination materials;
- Limited awareness that NQF has timelines for completion of project work in the CMS contract;
- Project work that focuses on sites of care or clinical domains may not fit a more patient centered approach;
- Negative culture and tone of NQF steering committee deliberations for measure developers.

Key features of the future state included:

Measure Development:

- Clear need for early multi-stakeholder input when determining what measure concepts are most valuable for development, particularly from patients.
- Create training program and pool of stakeholders, including patients, providers and purchasers who can serve on measure developer technical expert panels.
- Potential to create national templates for evidence and testing that foster alignment between measure specification documents for CMS, measure developers, and NQF.
- Potential for levels of endorsement may determine measurement development and testing path.
- Consideration of different purposes for measures including advancing the NQS, local quality improvement efforts, and meeting business model needs such as accreditation.
- Potential role for NQF to provide informal technical input to inform the measure testing process.

Measure Endorsement:

- Enhanced meeting management can drive a more collaborative culture between measure developers, NQF, Steering Committees, and other stakeholders.

- Standing Committees that can allow testing of improved measure flow, improved consistency for measure review, and decreased time for committee member nominations by stakeholders.
- Continuous open flow of measure submission would be an important enhancement.
- Assessing stakeholder support for measures through commenting may reduce the reliance on member voting in the endorsement process.

CMS and NQF contracting process:

- CMS and NQF can participate in a more open and collaborative process prior to the beginning of contract development.
- Sharing of CMS contract templates should reduce churning process after task order submission.
- CMS will work to align their measure development contracts with their NQF project contracts.

Next Steps for Kaizen Activities

Project teams were chartered to complete the ongoing work to implement the future state map. The teams will be co-led by an NQF staff person and an external stakeholder in the process. Each team developed a charter for continuing work with proposed milestone, pilots and metrics to assess the success of the proposed changes. The evaluation of the Kaizen revealed that three-quarters of participants were highly motivated to participate in future activities. Some organizations committed to help NQF secure funding for some of the more innovative features of the future state model (e.g., early patient and stakeholder engagement into measure concepts).

Pending final approval by CMS, NQF will pilot some of the recommended changes (e.g., standing committees, open submission, and open commenting) during new endorsement projects in 2013-2014.

Other areas for possible future Kaizen events that were considered outside the scope of the current Kaizen may include measure maintenance, selection and implementation.

CDP Improvements Update

NQF is proceeding with enhancements to increase the efficiency of the CDP recommended by the taskforce, including piloting of the following:

- More frequent opportunities to submit measures: Pilot use of standing committees and improved measure flow in the Endocrine Endorsement Maintenance project.
- More frequent opportunities to submit comments: Pilot open commenting in the All Cause Admissions and Readmissions project.

In all projects currently rolling out, NQF is implementing the following:

- Tailor communication to stakeholders
- Limit exceptions to the submission and evaluation process
- Staff facilitation and meeting management training
- Standardized communication with measure developers
- Standardize process to respond to comments
- Allow commenters to indicate support for the measure while providing comments

- Provide plain language measure summary documents
- Provide greater transparency for expectations and time commitment for steering committee members
- Increased CDP publicity (e.g., NQF GO)
- Develop workshops and including additional educational materials for Steering Committee members
- Develop Steering Committee applicant pool across projects

Next Steps

The Consensus Task Force has reviewed and recommended options for defining and achieving consensus within NQF's consensus development process. These efforts have led to a review of different approaches to establishing consensus; an identification of the strengths and weaknesses of the current process; and recommendations of enhancements to the current process.

The Task Force recommendations for achieving a more efficient process have been accelerated through the Kaizen, and pilots of recommended changes will be monitored. Further, the Taskforce recommendations for building consensus will be tested in upcoming CDP projects to ensure results address the Task Force's intended goal of establishing when consensus has been reached and developing a process for additional deliberation.

Monitoring of the implementation of these improvements will be transitioned to the Consensus Standards Approval Committee (CSAC), the standing committee of the NQF Board of Directors. The CSAC, in its role of overseeing the NQF Consensus Development Process, will review progress toward achieving the goals of the Consensus Task Force.

NQF appreciates the thoughtful contribution of the Consensus Task Force and thanks its members for their commitment to continued refinement of the CDP.