

NATIONAL QUALITY FORUM

Consensus Standards Maintenance and Endorsement Cycle Process

PURPOSE

Healthcare performance measures are useful for public reporting and quality improvement only as long as the standards reflect current knowledge and state-of-the-art, high quality care. To date, NQF has endorsed more than 600 performance measures, preferred practices, and serious reportable events.

Over the years, NQF has conducted maintenance on an ad hoc basis, through topic-specific Consensus Standards Maintenance Committees, and through existing projects. The purpose of the new proposed maintenance process is to regularize the schedule for maintaining the endorsement of NQF-endorsed consensus standards in order for NQF to ensure the currency of its portfolio. More specifically, the currency of the NQF portfolio refers to 1) the evidence focus of a given measure, 2) the measurement properties, including up-to-date specifications, 3) harmonization of measures, and 4) assessment of “best in class” determination.

PROPOSED PROCESS

The NQF Consensus Standards Maintenance Process encompasses both regular maintenance of NQF-endorsed performance measures and ad hoc reviews. It is anticipated that, over time, this process shall evolve to a general endorsement cycle in which endorsed measures are fully evaluated with newly submitted measures on a regular 3-year schedule. A separate document will articulate the details of the operationalization of this process.

I Regular Maintenance for Performance Measures

The regular maintenance process includes annual measure maintenance updates and maintenance endorsement every three years. It shall be NQF process that measure maintenance shall be comprised of two components:

1. The measure steward (owner/ developer) shall be responsible for updating and maintaining the currency and relevance of the measure and shall confirm existing or minor specification changes to NQF (e.g., changes to a drug list) on an annual basis. The measure steward is responsible for maintaining their measure and providing requested information to NQF.
2. NQF shall be responsible for maintenance of NQF endorsement and shall solicit information from measure stewards in order to review measures in a specific 3-year cycle, as further articulated in this process.

Failure to comply with maintenance requirements shall result in removal of NQF endorsement.

Annual Measure Maintenance Updates

On an annual basis, Measure Stewards shall be responsible for submitting information to NQF that affirms the detailed measure specifications of the endorsed measure have not changed or, if changes have been made, the details and underlying reason(s) for the change(s). NQF will provide a standardized template and/or an online submission template for annual measure maintenance. Annual maintenance will only focus on the currency of the measure specifications. The measure steward is only required to submit updated specifications with

brief justification for any material changes to the measure. Material changes may trigger an ad hoc review. A full review of the NQF evaluation criteria will occur only at the three-year review.

Annual maintenance for measures may be staggered throughout the year for workload purposes (e.g., 1/12 of the portfolio may be updated per month or 1/4 of the portfolio may be updated per quarter.) Initially, NQF staff shall assign each currently endorsed measure a scheduled period for its annual maintenance, after which that period shall thereafter be preserved in subsequent years. Newly endorsed measures shall similarly be assigned a scheduled update period, which may be less than or more than exactly 12 months from date of endorsement in order to balance resource considerations.

Timing, specific measure developer responsibilities (e.g., maintenance of URL with current specifications), and NQF responsibilities will be set forth in the operationalization document.

Measure Endorsement Maintenance – 3-year Cycle

Every three years, endorsed measures in a topical area, as well as newly submitted measures, will undergo the nine-step consensus development process, including review against updated NQF evaluation criteria. In addition to ensuring currency of specifications, endorsement maintenance provides the opportunity to harmonize specifications and to ensure that an endorsed measure represents the “best in class.” Endorsement maintenance shall occur in 3-year cycles, with approximately one-third of measures reviewed in a given cycle.

- Cycle A measures shall complete their maintenance review by the end of 2010, Cycle B measures shall complete their maintenance review by the end of 2011, and Cycle C measures shall complete their maintenance review by the end of 2012.
- The cycles shall be repeated in 3-year increments (i.e., Cycle A2=2013, Cycle B2=2014, Cycle C2=2015, etc.)

Maintenance and Endorsement Committees

Currently endorsed and newly submitted measures shall be reviewed by disease/topic-specific Committees. These committees will be convened using the established NQF process including a call for nominations and selection of a multi-stakeholder committee. Twenty-seven committees are initially anticipated over a three year period:

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| 1. Cancer | 15. Mental health |
| 2. Cardiovascular | 16. Mortality |
| 3. Care coordination | 17. Musculoskeletal |
| 4. Child health | 18. Neurology |
| 5. Diabetes | 19. Palliative care & end-of-life |
| 6. Disparities & cultural competency | 20. Patient experience & engagement |
| 7. Efficiency | 21. Perinatal |
| 8. Emergency care | 22. Population health |
| 9. Functional status | 23. Prevention |
| 10. Gastrointestinal | 24. Pulmonary |
| 11. Genitourinary | 25. Renal |
| 12. Health IT utilization | 26. Safety |
| 13. Head, eye, ear, nose, throat (HEENT) | 27. Surgery |
| 14. Infectious disease | |

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Additional Committees will be convened, as necessary.

In identifying this set of Committees, NQF strove to ensure that the current priority conditions map to the broader classifications encompassed by these groups. Additionally, NQF identified Committees (e.g., disparities and cultural competency and population health) based on the work of the National Priorities Partnership. The list of Committees reflects the goal of moving toward measure sets that can be integrated across care settings (versus care-setting specific sets as is largely the current portfolio). A set of decision rules regarding measure assignment to specific committees will be included in the operationalization document.

Because the existing number of measures is uneven across the areas, it is currently anticipated that the Cardiovascular and Surgery Measure Maintenance Committees will need to conduct their work in two stages that may involve subcommittees or separate Technical Advisory Panels, at management's discretion. Over time, NQF management also may need to adopt similar staging mechanisms for other areas.

Committee Cycle Assignments

Committees shall be assigned by NQF management to each of the three cycles to achieve an approximately equal number of measures per review cycle, to accommodate maintenance priorities and existing/upcoming projects known as of January 2010, and to meet priorities and available resources. Management also will consider cycle assignments that minimize the number measures that will not have had full endorsement maintenance at three years or will be subject to maintenance earlier as a result of conducting maintenance centered on topics and not dates of endorsement. Measures subject to early or late three-year maintenance assessment should represent a one-time only transition issue.

Process

Except in the instances where maintenance is being conducted under the Ad hoc Review described elsewhere in this document, the process that shall be deployed is the full 9-step CDP with the following amendments:

- For the NQF-endorsed measures considered in this process, NQF management may, in its discretion, require less *de novo* submission of information if the previous endorsement date and/or annual cycle indicates that the information is on file and current.
- In addition to the standard requirements of a Call for Measures, Calls conducted in the context of maintenance shall also include a request for implementation comments (through a standardized template) related to the existing NQF-endorsed measures that will be considered under the specific Maintenance Committee.
- In addition to the standard evaluation requirements under the CDP, evaluation for the purpose of harmonizing specifications shall be undertaken.
- Except for consideration of implementation comments, existing NQF-endorsed measures shall be held to an equal standard during the evaluation process¹ as that used for similar measures directly competing as "best in class."

¹ Pursuant to separate policy related to reporting, however, measures that have been endorsed previously but that are not in use and/or being publicly reported will not generally be viewed favorably.

Additionally, in their cycle year, NQF-endorsed measures shall not be required to undergo the annual maintenance process.

Exceptions to 3-year Endorsement Maintenance Cycle

The current healthcare quality climate is undergoing significant, rapid change that bears on this process. Although ensuring currency of NQF-endorsed measures is important, implementation of this process must be balanced against other priorities (e.g., EHR specifications) and externalities, so some degree of flexibility with respect to fixed 3-year cycling will be necessary. Four competing factors directly impact the immediate, seamless implementation of the 3-year cycles in the initial phase-in of this process.

- Date of endorsement and early/late maintenance. To achieve efficiencies associated with ongoing projects and to appropriately distribute the workload, some measures will undergo maintenance in less than three years and some in more than three years. To the extent possible, such instances have been minimized. Developers will be provided this process and the Cycle schedule so as to provide them notice of their measures' status. In an exception to the schedule, NQF will not subject a measure that has been endorsed less than 18 months to endorsement maintenance, even if the measure's Committee comes up in 2010 (Cycle A) or 2011 (Cycle B). Instead, that measure will be slotted into Cycle A-2 (2013) or Cycle B-2 (2014). Such measures still must comply with the annual maintenance requirements.
- Ongoing/near-term upcoming projects. Using ongoing/upcoming projects to conduct endorsement maintenance offers several advantages: resources are conserved, harmonization may be facilitated, potential burdens of information submission on measure developers are reduced, efficiencies in Member participation may be realized, and confusion on the part of developers and Members about distinct "maintenance" versus "regular" projects is eliminated. To the extent feasible, NQF will synchronize maintenance cycle assignments with upcoming work and may, at its discretion, adjust cycle assignments and the schedule, providing as much notice to developers as possible and doing so as sparingly as possible.
- Time-limited endorsement testing and alternative path requirements. The date time-limited endorsement was granted may result in measure(s) missing its assigned cycle. Per the time-limited process, the additional one-year "alternative path" accrues from the date the original testing results were due. If the due date under the alternative path puts the measure beyond its designated maintenance slot in 2010, 2011, or 2012, the testing results will be reviewed by the CSAC at the stated deadline and then the measure will come up for endorsement maintenance at its designated cycle. If testing results are due and reviewed prior to a maintenance cycle and then endorsement maintenance is due shortly thereafter, the measure also will be reviewed during maintenance to address the harmonization and head-to-head/best-in-class goals of maintenance.
- Measure re-tooling initiative. Under the HHS contract, more than 100 measures are slated to be part of the re-tooling initiative to convert existing measure specs to e-specs. Re-tooling is not intended to change the measure specifications from a content perspective. Measures undergoing re-tooling will not be slotted into their appropriate maintenance cycles until after re-tooling is complete, unless material changes are made

that require immediate review by the Performance Measures Department. If a “re-tooling measure,” that is in Cycle B or Cycle C is undergoing material changes in 2010 (but no Committee is yet available), then the Ad hoc Process shall be deployed for the measure(s), and if continued endorsement is recommended, will be fully reviewed for best-in-class and harmonization issues in its appropriate slot.

II Ad Hoc Reviews

An ad hoc review may be conducted on an endorsed measure, practice, or event at any time with adequate justification to substantiate the review. Requests for ad hoc reviews will be considered by NQF on a case-by-case basis and must be justified by specific criteria. NQF can initiate an ad hoc review without an external request when material changes are made to a measure or emerging evidence suggests the need for a review.

Ad hoc reviews can be requested at any time by any party, and requester(s) should indicate in a formal letter under which criterion they are requesting the ad hoc review and submit adequate evidence to justify the review.

Criteria for Justification of Ad Hoc Review

1. The evidence supporting the focus of the measure, practice, or event has changed and it no longer reflects updated evidence.
2. There is evidence that implementation of the measure or practice may result in unintended consequences:
 - a. Use of the measure or practice may result in inappropriate or harmful care
 - b. Measure performance scores may yield invalid conclusions about quality of care (e.g., misclassification or incorrect representation of quality)
3. Material changes have been made to a currently endorsed measure (e.g., expansion of the measure to a different population or setting).

Ad Hoc Review Process

- NQF will utilize an expedited Consensus Development Process for previously endorsed measures that require re-examination, such that each CDP step will be no less than 10 business days, including a call for nominations for technical advisors, review of the proposed slate, and commenting.
- NQF receives a request for an ad hoc review. NQF staff conducts an initial review of the request to determine if a review is justified, including communication with the measure steward.
- A notice of ad hoc review is posted to the NQF web site and a call for nominations for technical experts will be open for no less than 10 business days. The provisional slate of technical advisors will be posted for comment for no less than 10 business days.
- The selected technical advisors will review the evidence and provide input to the Consensus Standards Approval Committee (CSAC). The ad hoc review requestor and the measure steward are given the opportunity to provide information to the technical advisors and CSAC.
- Review and comment period for the draft recommendations from the technical advisors will be posted for no less than 10 business days.

- The information is forwarded to the CSAC (including the assessment of the technical advisors, public and member comments, and input from the measure steward and requester) and CSAC makes a decision on endorsement status and/or specification changes.
- The CSAC decision is forwarded to the NQF Board of Directors for ratification.
- There is a 30-day appeals period.
- The measure, practice, or event is still subject to review in its designated maintenance cycle.