MAINTENANCE OF NQF ENDORSEMENT

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. From its earliest days, NQF members and stakeholders have expected that measures endorsed by NQF would undergo periodic review to assess impact and potential unintended consequences. Generally reassessment every three years is considered reasonable unless there are special circumstances.

The goals of NQF’s Maintenance of Endorsement processes are:

- To ensure the currency and relevance of NQF-endorsed consensus standards through a regular schedule for review for continued endorsement.
  - NQF has a responsibility to ensure that endorsed measures reflect current science and are reliable and valid representations of quality.
- To ensure that endorsed measures continue to meet the NQF evaluation criteria.
  - Criteria have evolved over time in response to the changes in the development enterprise, stakeholder input, and a need for a refined portfolio of measures.

Maintenance of Endorsement

- Approximately every three years, endorsed measures in a topic area, as well as newly submitted measures, will undergo evaluation against the current NQF evaluation criteria. In addition to ensuring currency of specifications, maintenance of endorsement provides the opportunity to harmonize specifications and to ensure that an endorsed measure represents the “best in class.”
- Multi-stakeholder Standing Committees are established to oversee the portfolio of measures in each topic area. Standing Committee members serve 2 or 3 year terms. Standing Committees have been or will be established for the following topic areas:
  - Behavioral Health
  - Cancer
  - Cardiovascular
  - Care Coordination
  - Endocrine
  - Gastrointestinal
  - Genitourinary/GYN
  - Health and Well Being
  - Eye, Ear, Nose, Throat (EENT)
  - Infectious disease
  - Musculoskeletal
  - Neurology
  - Palliative and End of Life Care
  - Pediatric
  - Perinatal and Reproductive Health
  - Person and Family Centered Care
  - Pulmonary/Critical Care
  - Readmissions
  - Renal
  - Resource Use
  - Safety
  - Surgery
• The NQF Maintenance team notifies developers/stewards when their measure is scheduled for a maintenance evaluation.

• The measure steward (owner/developer) is responsible for updating and maintaining the currency and relevance of the measure and confirming 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.

• **Failure to comply with maintenance requirements will result in removal of NQF endorsement.**

• The following changes to the maintenance of endorsement process are effective as of **October 1, 2015**:
  o The new process takes advantage of the existing Standing Committees and emphasizes their role in overseeing the topic-area portfolio of NQF-endorsed measures.
  o The new process relies on the measure information submitted during previous evaluations. On the “Maintenance Checklist”, the developer will indicate which criteria have been updated; otherwise the Committee will review the information that exists in the NQF data system without need for re-submission of information for all criteria. The emphasis will be on updated current performance/opportunity for improvement data and usability and use data as described below.
  o The new process will emphasize pre-review public and member comments. Stakeholder groups that may be underrepresented on Committees would have an opportunity to provide their input. The pre-review comments would factor significantly into the measure evaluation.
  o Under the new process, the evaluation criteria will not change, however, the emphasis among the criteria will shift. Feedback from Standing Committee members indicate a desire to have fuller, more robust discussions on what has been learned about previously-endorsed measures, e.g., improvement or changes in gaps, how has the measure been used, and unintended consequences.
  o The following table lists the current evaluation criteria and highlights which criteria will receive more emphasis during the new maintenance process.
EVALUATION CRITERIA

<table>
<thead>
<tr>
<th>CURRENT MAINTENANCE PROCESS</th>
<th>NEW MAINTENANCE PROCESS</th>
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<tbody>
<tr>
<td><strong>IMPORTANCE TO MEASURE AND REPORT</strong></td>
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<tr>
<td>• Gap – opportunity for improvement, variation, quality of care across providers</td>
<td>INCREASED EMPHASIS: gap in care and variation</td>
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<tr>
<td>• Evidence – Quantity, quality, consistency (QQC)</td>
<td>DECREASED EMPHASIS: Require measure developer to attest to current evidence; Standing Committee to affirm no change in evidence</td>
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<tr>
<td>• Established link for process measures with outcomes</td>
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<tr>
<td><strong>SCIENTIFIC ACCEPTABILITY OF MEASURE PROPERTIES</strong></td>
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<tr>
<td>• Measure specifications</td>
<td>NO CHANGE: Require updated specifications</td>
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<tr>
<td>• Reliability</td>
<td>DECREASED EMPHASIS: If prior testing adequate, no need for additional testing at maintenance with certain exceptions (e.g., change in data source, level of analysis, or setting)</td>
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<td>• Validity (including risk adjustment)</td>
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<tr>
<td><strong>USABILITY AND USE</strong></td>
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<tr>
<td>• Use: used in accountability applications and public reporting</td>
<td>INCREASED EMPHASIS: Much greater focus on measure use and usefulness, including both impact and unintended consequences</td>
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<tr>
<td>• Usability: impact and unintended consequences</td>
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<tr>
<td><strong>FEASIBILITY</strong></td>
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<tr>
<td>• Measure feasible, including eMeasure feasibility</td>
<td>NO CHANGE: Implementation issues may be more prominent</td>
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Annual Updates
On an annual basis, Measure Stewards are expected to submit information to NQF that affirms the detailed measure specifications of the endorsed measure have not changed or, if changes have been made, with the details and underlying reason(s) for the change(s).

- NQF provides an online submission template for annual updates. Annual updates 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. Please read the Ad hoc review section below for a definition of “material change”.
- A full review of the NQF evaluation criteria will occur only at the three-year evaluation. NQF-endorsed measures will not undergo annual update during the year of the full maintenance evaluation.
- Annual updates for measures are staggered throughout the year and assigned quarterly, from the date of initial endorsement in order to balance resource considerations.
Ad Hoc Reviews
An ad hoc review is a formal measure evaluation and endorsement reconsideration outside of the scheduled maintenance of endorsement process. An ad hoc review is limited and focused on a specific issue regarding an evaluation criterion and is not the same as a maintenance of endorsement evaluation.

1. A material change to an endorsed measure is submitted by a measure developer during an annual update. Material change is defined as:
   a. change to the population being measured (e.g., changes in age inclusions, changes in diagnoses or other inclusion criteria, changes in excluded populations);
   b. changes to what is being measured (e.g., changes in target values like blood pressure or lipid values);
   c. inclusion of new data source(s); or
   d. expansion of the level of analysis or care settings.

   **NOTE:** Minor coding changes resulting from usual changes to the coding system or addition of new drugs to a measure with already specified family of drugs, are not considered material changes.

2. Directive by the Standing Committee/the Consensus Standards Approval Committee (CSAC)/NQF Board of Directors to review a specific criterion sooner than the scheduled maintenance of endorsement evaluation.

3. Request by a developer or third party. An ad hoc review can be requested by any party, as long as there is adequate evidence to justify the review.

For more information on the ad-hoc process, please refer to the *Ad Hoc Policy document*. 