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NQF closed the 14-day public comment period for the Scientific Methods Panel proposed roster on September 20, 2017. NQF received nine comments from nine organizations. Commenters largely expressed support for the panel composition and some offered recommendations such as increased patient representation and qualitative methodological expertise. Other comments called for broader geographical representation and greater diversity among panel members' care settings and health fields. NQF thanks all organizations for their comments. NQF has focused on choosing individuals with methodological expertise as opposed to capturing a wide stakeholder representation because the panel's charge is to assess measures for reliability and validity, and provide advice on methodological issues. Broader stakeholder representation, especially consumers, patients, and purchasers, is highly encouraged on NQF standing committees to ensure robust and well-rounded discussions on measures recommended for endorsement. Recognizing the evolving nature of the measurement enterprise, NQF will consider adding a member with qualitative expertise in future nomination cycles.

Public Comments Received

Organization	Name	Comment
American College of Rheumatology	Jinoos Yazdany, MD, MPH	Two quick comments: there does not appear to be adequate representation of safety net health system leaders and there is inadequate representation from the west coast.
Arkansas Children's Hospital	Pam Trevino, PhD, RN	This roster looks very robust and the participants very qualified. My only thought is a lingering hope that qualitative research will be included in addition to quantitative.
Georgia Regents Medical Center	David Andrews	I am interested to see this process moving forward and commend it. As a patient member of the NQF Neurology Standing Committee, and having been involved in ongoing discussions of Consensus Development Process Redesign I bring a somewhat different perspective to this issue.

		<p>As I looked through the roster of the Panel I was struck by the variety of expertise and the absence of any patients. The FAQs refer to the inclusion of “consumers” on the panel. From the roster I have to assume the consumers are those who utilize the quality data and not consumers of healthcare. As a patient participant in many different local, regional and national organizations I have often noticed how easily the experts move into the deep weeds of their own expertise and lose sight of the actual operation of their work in the real world of patients. As an example, as a member of a PCORI Merit Review Panel I experienced the tendency of the researchers, methodologists and physicians to move into the details of their expertise and the powerful tendency of patient participation to bring the discussion back to what really matters in healthcare. In that case it was research funding, not quality assessment/management, but I’m quite confident (including from my work with NQF) that the same general principle applies.</p> <p>Furthermore, it should not be assumed that patients know nothing about medicine or research/statistical methodology. To use me as an example I have a PhD in Psychology (actually it’s what’s now called Cognitive Neuroscience) with an extensive background in research design, statistics, methodology and evaluation. I don’t claim to be entirely up to date in all those areas, but am very conversant with all the concepts. But in my over 12 years as a patient advisor, I have approached everything I do not at a scientist or researcher, but as a well informed patient trying as best I can to represent patient interests and improve healthcare from the patient perspective. To be clear, I definitely am NOT seeking a position on this panel, only raising the issue of the value of patient representation and pointing out that there are many well informed patients not unlike me who can understand the discussion and contribute to making it connect with the real world of quality.</p> <p>I hope you’ll continue to work to increase the role of patients and family members in all the conversations about healthcare quality.</p>
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TeamHealth Anesthesia	Sonya Pease, MD, MBA	I am writing to express my highest recommendation in support of Dr. Laurent Glance appointed to serve as a member of the NQF Scientific Methods Panel. I can think of no one more qualified to conduct methodological reviews of measures and provide guidance on methods-related issues.
Options for Knowledge	Nancy Fisher	Shantanu, This is a very distinguished panel, with a variety of expertise. I would suggest someone with a pediatric background. This would help to ensure that children are not overlooked for their uniqueness, and treated like little adults. Additionally with the advancement in medical care many individuals with living into adulthood with traditional childhood diseases, there is a paucity of clinicians treating adults that are comfortable treating these patients.
Coalition to Transform Advanced Care	David E. Longnecker, MD	I applaud both the concept and the proposed list of panelists. (Before opening the list, I had one name in mind that, if present, would confirm the wisdom of the appointment process; my benchmark is on the list, as are several others.) Kudos for this forward-thinking effort
University of Rochester School of Medicine /American Academy of Pediatrics	Thomas McInerney, MD	Shantanu Thank you for sending us this info and roster about the NQF Scientific Methods Panel. I agree with the formation and composition of this panel as evaluating the scientific methods of proposed measures has become increasingly complex and difficult over the past few years. This panel will bring new rigor and insights into the measure development process.

The American Association for Clinical Chemistry (AACC)	Michael J. Bennett, PhD, FRCPath, FACB, DABCC	<p>The American Association for Clinical Chemistry (AACC) welcomes the opportunity to provide input on the proposed roster of individuals to serve on the National Quality Forum’s Scientific Methods Panel. We are very impressed with the knowledge and experience of these experts and wholeheartedly support their appointment. Although AACC does believe the panel would have benefited from the appointment of an individual with a laboratory background, we believe that NQF has put together an excellent group that will achieve its goals of making the measurement endorsement process more efficient and transparent. AACC looks forward to working with the new panel. Please do not hesitate to let us know if there is anything we can do to assist the committee in its efforts. AACC is a global scientific and medical professional organization dedicated to clinical laboratory science and its application to healthcare. AACC brings together more than 50,000 clinical laboratory professionals, physicians, research scientists, and business leaders from around the world focused on clinical chemistry, molecular diagnostics, mass spectrometry, translational medicine, lab management, and other areas of progressing laboratory science. Since 1948, AACC has worked to advance the common interests of the field, providing programs that advance scientific collaboration, knowledge, expertise, and innovation.</p>
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American Institutes for Research	Ellen Schultz, MS	<p>While the proposed roster of panelist are certainly highly qualified, as a group, we feel that they represent only a narrow slice of the health care measurement ecosystem, with much greater representation of academic medical centers and inpatient care settings than are actually present within the U.S. healthcare system. In particular, several perspectives that we feel are missing include:</p> <ul style="list-style-type: none"> • Representatives of allied health fields, such as nursing, mental health, radiology, physical therapy, occupational therapy, etc. • Representatives of care settings beyond acute care hospitals, in particular primary care, nursing homes, inpatient rehabilitation, substance abuse treatment, etc. • Clinical professional associations, in particular those that produce clinical practice guidelines. This is likely to be particularly important as CMS recently has put more emphasis on engaging clinical professional associations in measure development efforts. • Contract research organizations, which as an industry develop many measures, including many high-stakes measures used for value-based purchasing and other accountability programs. <p>While the focus of the Scientific Methods Panel is specifically on technical expertise in measure development and testing, we do feel that expertise in how measures are developed for, tested, and ultimately implemented in a diversity of care settings, patient populations, and clinical specialties is important.</p> <p>Furthermore, we feel that two areas of technical expertise are also not well represented, specifically practicing psychometricians and experts in qualitative methods. The latter is important when evaluating measure validity supported through face validity such as expert opinion, Delphi methods, or Nominal Group Technique. In regards to practice psychometricians, several individuals to consider include: Li Cai (UCLA), Wen-Hung Chen (FDA), Bryce Reeve (Duke), Maria Orlando Edelen (RAND).</p>
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