Purpose of the Project

Inadequate preventive care has a significant negative impact on health outcomes. The healthcare delivery system, the public health community, and other key stakeholders play an important role in improving poor health outcomes through targeted preventive care interventions.

In recent years, the nation has increased its attention on improving population health through the promotion of preventive care screening for specific cancers, osteoporosis and other disease and/or conditions. The Department of Health and Human Services (HHS), in its National Quality Strategy, lists improved population health as one of three overarching national healthcare aims. In addition, HHS’s National Prevention Strategy, released in 2011, includes specific strategies to enhance clinical and community preventive services and promote healthy eating, active living, and improved reproductive and sexual health.

Even with this renewed effort, screening rates for many diseases, though improved, still lag behind desired targets. For example, 56 percent of adults aged 50 and over have ever had a colonoscopy, according to 2010 data cited by the American Cancer Society (ACS). Colonoscopy screening detects ulcers, polyps, tumors, and other abnormalities in the colon, and therefore it is an important diagnostic test for colon cancer. All people aged 50 and over are urged to have a colonoscopy and the ACS has set a target of increasing the percentage to 75 percent by 2015. To add momentum to achieving more widespread and effective preventive screening and a healthier population, in May 2011, NQF – at the request of HHS – began a two-phase project focused on identifying, endorsing, and updating population health measures. Phase I sought to maintain and expand previous efforts in measuring clinical prevention and immunization. Phase II focuses on broader population-level measures and is currently underway.

Phase I endorsed measures address influenza and pneumococcal immunizations across many healthcare settings, as well as screenings for specific cancers, sexually transmitted diseases, and osteoporosis.

What Was Endorsed

Summary of Population Health: Prevention Endorsement Maintenance Measures Project

| Measure submitted for consideration | 25 |
| Measures withdrawn by the developer | 5 |
| Measures deferred to another project | 1 |
| Measures recommended for endorsement | 19 (17 maintenance) |
| Measures not recommended for endorsement | 0 |

Under Phase I of the population health-prevention endorsement project, NQF endorsed 19 measures suitable for accountability and quality improvement. Of the 19 measures, 17 were previously endorsed and granted continued endorsement status, and two were newly submitted measures.

Measure stewards included a range of public- and private-sector healthcare stakeholders, including the Centers for Medicare & Medicaid Services; National Committee for Quality Assurance; the Centers for Disease Control and Prevention; the Kidney Care Quality Alliance; the Physician Consortium for Performance Improvement, convened by the
American Medical Association; Active Health Management; and Resolution Health, Inc. A full list of measures is available at the end of this report.

The Need these Measures Fill

The endorsed measures deal with a wide range of related care concerns, including screenings for colorectal and cervical cancer, osteoporosis screening and treatment for older women, routine childhood vaccinations, and influenza and pneumococcal immunizations in high-risk populations, such as hospital, home health, and end stage renal disease patients.

Potential Use

These measures are applicable for use in a range of healthcare settings, which will allow and foster community-level assessments of performance across the country.

Project Perspectives

Standardized measurement of preventive care services and screenings has contributed substantially to enhancing their use. Phase I of this project puts continued pressure on providers and the healthcare community to sustain progress made to date. In endorsing this set of measures, NQF supports the recognition by the National Quality Strategy and National Prevention Strategy that preventive care services and screenings must continue to be a priority if efforts to increase the population’s overall health and reduce the number of preventable, premature deaths are to be achieved.

Endorsed Measures

0431: Influenza vaccination among healthcare personnel (CDC)

*Description:* Percentage of healthcare personnel (HCP) who receive the influenza vaccination.

0522: Influenza immunization- home health (CMS)

*Description:* Percentage of home health episodes of care during which patients received influenza immunization for the current flu season.

0226: Influenza immunization in the ESRD population (Kidney Care Quality Alliance)

*Description:* Percentage of end stage renal disease (ESRD) patients aged 6 months and older receiving hemodialysis or peritoneal dialysis during the time from October 1 (or when the influenza vaccine became available) to March 31 who either received, were offered and declined, or were determined to have a medical contraindication to the influenza vaccine.

0039: Flu shots for ages 50 and over (NCQA)

*Description:* This measure represents the percentage of adults aged 50 and over who received an influenza vaccine within the measurement period within the respective age-stratified CAHPS surveys. This measure is only reported by age group stratification.

0041: Influenza immunization (AMA-PCPI)

*Description:* Percentage of patients aged 6 months and older seen for a visit between October 1 and the end of February who received an influenza immunization OR patient reported previous receipt of an influenza immunization.

1659: Influenza immunization (hospital) (CMS)

*Description:* Inpatients age 6 months and older discharged during October, November, December, January, February or March who are screened for influenza vaccine status and vaccinated prior to discharge if indicated.

0043: Pneumonia vaccination for older adults (NCQA)

*Description:* Percentage of patients 65 years of age and older who ever received a pneumococcal vaccination.

0617: Pneumococcal vaccination (Active Health Management)

*Description:* The percentage of patients age 5-64 with a high risk condition, or age 65 years and older who:

1. Received a pneumococcal vaccine (reported separately)

2. Had a contraindication to pneumococcal vaccine (reported separately)
ENDORSEMENT SUMMARY: 
Population Health: Prevention Measures

1653: Pneumococcal immunization (hospital) (CMS)

Description: Inpatients age 65 years and older and 6-64 years of age who have a high risk condition who are screened for 23-valent Pneumococcal Polysaccharide Vaccine (PPV23) status and vaccinated prior to discharge if indicated.

0525: Pneumococcal vaccine ever received (home health) (CMS)

Description: Percentage of home health episodes of care during which patients were determined to have ever received Pneumococcal Polysaccharide Vaccine (PPV).

0038: Childhood immunizations (NCQA)

Description: Percentage of children 2 years of age who had four diphtheria, tetanus and acellular pertussis (DtaP); three polio (IPV); one measles, mumps and rubella (MMR); three H influenza type B(HiB); three hepatitis B (HepB); one chicken pox (VZV); four pneumococcal conjugate (PCV); two hepatitis A (HepA); two or three rotavirus (RV); and two influenza (flu) vaccines by their second birthday. The measure calculates a rate for each vaccine and nine separate combination rates.

0034: Colorectal cancer screening (NCQA)

Description: The percentage of members 50–75 years of age who had appropriate screening for colorectal cancer.

0033: Chlamydia screening in women (NCQA)

Description: Assesses the percentage of women 16–24 years of age who were identified as sexually active and who had at least one test for chlamydia during the measurement year.

0032: Cervical cancer screening (NCQA)

Description: Percentage of women 21–64 years of age received one or more Pap tests to screen for cervical cancer.

0579: Annual cervical cancer screening for high-risk patients (Resolution Health, Inc.)

Description: This measure identifies women age 12 to 65 diagnosed with cervical dysplasia (CIN 2), cervical carcinoma-in-situ, or HIV/AIDS prior to the measurement year, and who still have a cervix, who had a cervical CA screen during the measurement year.

0037: Osteoporosis testing in older women (NCQA)

Description: Percentage of female patients aged 65 and older who reported receiving a bone density test (BMD) to check for osteoporosis.

0046: Osteoporosis screening or therapy for women aged 65 years and older (NCQA)

Description: Percentage of female patients aged 65 years and older who have a central DXA measurement ordered or performed at least once since age 60 or pharmacologic therapy prescribed within 12 months.

0614: Steroid use - osteoporosis screening (Active Health Management)

Description: The percentage of patients, 18 and older, who have been on chronic steroids for at least 180 days in the past 9 months and who had a bone density evaluation or osteoporosis treatment.

0629: Male smokers or family history of Abdominal Aortic Aneurysm (AAA) – screening for AAA (Active Health Management)

Description: The percentage of men age 65-75 years with history of tobacco use or men age 60 years and older with a family history of abdominal aortic aneurysm who were screened for AAA.