

**CALL FOR MEASURES AND MEASURE CONCEPTS:
All-Cause Admissions and Readmissions**

NQF is seeking new performance measures and concepts related to all-cause admissions and hospital readmissions that can be used for accountability and public reporting for all populations and in all settings of care. This project will address topic areas including, but not limited to:

- All-Cause and condition specific admission measures
- Condition-specific readmissions measures
- Unplanned admission-related measures from other settings (i.e., hospitalization for patients on dialysis)
- Measures following hospitalization from heart failure, pneumonia, total hip arthroplasty (THA) and/or total knee arthroplasty (TKA)

NQF is particularly interested in measures:

- composite performance measures;
- measures applicable to more than one setting;
- measures that capture broad populations, including children and adolescents where applicable;
- measures that are harmonized with similar measures; and,
- measures that are sensitive to vulnerable populations, including racial/ethnic minorities; and Medicaid populations.

This project's call for measures opens on **September 28, 2016**. The final submission deadline is **December 2, 2016**.

BACKGROUND

The unpredictable nature of a patient's path once they are discharged from the hospital is a byproduct of a fragmented healthcare delivery system. This is especially true for patients who suffer from chronic and comorbid conditions. Previous studies have shown that nearly one in five Medicare patients are readmitted to the hospital within 30 days of discharge, including many patients returning via the emergency room, costing upwards of \$26 billion annually.^{1,2}

¹ Dartmouth Atlas Project, PerryUndem Research & Communications. The Revolving Door: A Report on U.S. Hospital Readmissions. Princeton, NJ: Robert Wood Johnson Foundation; 2013. Available at <http://www.rwjf.org/en/research-publications/find-rwjf-research/2013/02/the-revolving-door--a-report-on-u-s--hospital-readmissions.html>

² Medicare Payment Advisory Committee (MEDPAC). Report to the Congress: Medicare and the Health Care Delivery System, DC: MedPAC; 2013. Available at http://medpac.gov/documents/Jun13_EntireReport.pdf.



The causes of readmissions are complex and not well understood. One report by the Robert Wood Johnson Foundation suggests that communities and health systems with higher underlying admission rates also have higher readmission rates, since patients in these communities are more likely to rely on the hospital as a site of care in general.³ Other risk factors include environmental and patient characteristics, including socioeconomic status.^{4,5} A 2013 MedPAC report suggests that to succeed in reducing readmissions, policies must encourage hospitals to look beyond their walls and improve care coordination (i.e. medication reconciliation, use of case managers, discharge planning) across providers. The report suggests that reducing avoidable readmissions by 10 percent could achieve a savings of \$1 billion or more.⁶

MEASURE CONCEPTS

In addition to soliciting fully-developed measures for consensus-based endorsement review, NQF is also soliciting measure concepts through NQF's new Measure Inventory Pipeline. This pipeline will serve as an important source of information for HHS and other stakeholders on new measure development in the broader healthcare community. It will also enable NQF to track current and planned measure development to ensure early collaboration among developers to drive harmonization and alignment of measures.

In an effort to capture comprehensive information on measures in development, NQF seeks input on several variables including:

- measure description;
- numerator statement;
- denominator statement (target population);
- planned use,
- stage of development; and
- other relevant information.

³ Dartmouth Atlas Project, PerryUndem Research & Communications. The Revolving Door: A Report on U.S. Hospital Readmissions. Princeton, NJ:Robert Wood Johnson Foundation; 2013. Available at <http://www.rwjf.org/en/research-publications/find-rwjf-research/2013/02/the-revolving-door--a-report-on-u-s--hospital-readmissions.html>RWJF

⁴ Joynt KE, Orav EJ, Jha AK. Thirty-day readmission rates for Medicare beneficiaries by race and site of care. JAMA 2011 Feb 16;305(7):675-81.

⁵ Arbaje AI, Wolff JL, Yu Q, Powe NR, Anderson GF, Boulton C. Postdischarge environmental and socioeconomic factors and the likelihood of early hospital readmission among community-dwelling Medicare beneficiaries. Gerontologist 2008 Aug;48(4):495-504.

⁶ Medicare Payment Advisory Committee (MEDPAC). Report to the Congress: Medicare and the Health Care Delivery System, DC: MedPAC; 2013. Available at http://medpac.gov/documents/Jun13_EntireReport.pdf.

Please note that the information entered through NQF's Measure Inventory Pipeline will not be evaluated by the Standing Committee against the NQF Criteria. Submitted information will be catalogued by NQF and used to help inform the Standing Committee's measure gaps discussion. NQF will also share the information with HHS to inform CMS' Measure Inventory Pipeline, which is a reference for several stakeholders.

NQF's Measure Inventory Pipeline will be available for concept submissions in November, 2013.

MEASURE SUBMISSION REQUIREMENTS

To submit a measure, please complete the following:

- [Measure Submission Form](#) Clicking on this link will redirect you to the webpage for this project, from which you can access the online measure submission form.
- [Measure Steward Agreement](#) Please note that no materials will be accepted without submission of a fully executed *Measure Steward Agreement Form*. All materials not meeting this requirement will be returned to the sender.

PROCESS PARTICIPATION

Measure developers are strongly encouraged to attend (either in person or via web/conference call) the committee meetings to represent their measure(s) and respond to questions from the Committee and members of the public. The in-person meeting date is scheduled and listed below. The remaining meeting dates will be finalized based on Committee availability.

Scheduled meeting dates

Meeting	Date/Time
Orientation Call (1 hour)	December 13, 2017 1:00-2:00pm ET
Measure Evaluation Q & A	February 7, 2017 1:00-3:00pm ET
In-person Meeting (2 days in Washington, D.C.)	February 23-24, 2017
Post-meeting Follow-up Call (2 hours)	February 28, 2017 1:00-3:00pm ET
Post Draft Report Comment Call (2 hours)	May 16, 2017 1:00-3:00pm ET

Materials must be submitted using the online submission form by 6:00 pm, ET Friday, December 2, 2016. If you have any questions, please contact Erin O'Rourke or Donna Herring at 202-783-1300 or via e-mail at readmissions@qualityforum.org.

Conditions for Consideration:

- The measure owner/steward verifies there is an identified responsible entity and process to maintain and update the measure on a schedule that is commensurate with the rate of clinical innovation, but at least every three years.ⁱ



- The intended use of the measure includes both public accountability and quality improvement.
- The measure is fully specified and [tested for reliability and validity](#). Measures that are not tested will not be accepted in this project.
- The measure developer/steward attests that [harmonization](#) with related measures and issues with competing measures have been considered and addressed, as appropriate.
- The requested measure submission information is complete and responsive to the questions so that all the information needed to evaluate all [criteria](#) is provided.

Submission Guidance:

- [Developer Guidebook](#):
 - A Developer Guidebook as has been created to assist developers in the measure submission and evaluation process. The Guidebook contains all the information developers need to know when submitting a measure to NQF.
- ICD-10-CM/PCS:
 - Beginning April 1, 2013 measures specified with administrative claims data must submit a set of ICD-9-CM and ICD-10-CM/PCS codes. Click [here](#) for further information on this requirement.
- eMeasures:
 - Must be specified in the Heath Quality Measures Format (HQMF) and use the Quality Data Model (QDM) and value sets vetted through the National Library of Medicine's Value Set Authority Center (VSAC);
 - Review the [current measure evaluation criteria and guidance](#)
- Composite measures:
 - Please notify project staff if you plan to submit a composite measure

Technical Assistance

NQF project staff will provide technical assistance to measure developers at any time during the measure submission process up to the submission deadline. Contact the project team with any questions about the criteria, how to answer the questions in the form, any technical issues with the online submission process... or anything else!

MEASURE SUBMISSION COMPLETENESS CHECKLIST

- ☐ Measure steward agreement or concept agreement is completed and signed
- ☐ All conditions for submission are met.
- ☐ There are responses in all fields on measure submission form (MSF) unless a particular item is not applicable as indicated in the item instructions.
- ☐ Attachments include: eMeasure specifications (S.2a) if applicable; data dictionary/code list (S.2b); Evidence and Measure Testing attachments.
- ☐ All URLs are active and accurate.
- ☐ Harmonization/competing measures: Did you present a plan for harmonization of the



related/competing measures identified by staff during early identification/triage or justify submitting competing or non-harmonized measures? (see Harmonization process in the [Developer Guidebook](#)).

- ☐ Paired measures should be submitted on separate forms.
- ☐ An eMeasure must be specified in HQMF format, using QDM and value sets vetted through the VSAC.
- ☐ Composite performance measures: responses to the composite measure items are included.
- ☐ Both ICD-9 and ICD-10 codes are included

RESOURCES FOR MEASURE DEVELOPERS AND STEWARDS

For more details on measure submission and evaluation, please see:

- [Submitting Standards Web Page](#)
- [Measure Evaluation Criteria Web Page](#)

One these pages you will find the most current criteria and guidance for evaluating the criteria as well as examples of responses for the measure submission form, and special reports.

- [Evidence Task Force Report](#)
- [Measure Testing Task Force Report](#)
- [Harmonization Report](#)
- [Competing Measures Report](#)

Evaluation and Measure Submission Guidance:

- [eMeasure Testing Guidance Report](#)
- [Guidance on Quality Performance Measure Construction](#)
- [Evidence and Importance to Measure and Report](#)
- [Measure Testing and Scientific Acceptability of Measure Properties](#)
- [Composite Evaluation Criteria](#)
- [Resource Use Measure Evaluation Criteria](#)
- [Endorsement Maintenance Policy](#)

ⁱ Measure stewards must execute a Measure Steward Agreement with NQF.