



NATIONAL QUALITY FORUM

Driving measurable health
improvements together

Memo

June 19, 2020

To: All-Cause Admissions and Readmissions Standing Committee

From: NQF staff

Re: Post-comment web meeting to discuss public comments received and NQF member expression of support

COVID-19 Updates

Considering the recent COVID-19 global pandemic, many organizations needed to focus their attention on the public health crisis. In order to provide greater flexibility for stakeholders and continue the important work in quality measurement, the National Quality Forum (NQF) extended commenting periods and adjusted measure endorsement timelines for the Fall 2019 cycle.

Commenting periods for all measures evaluated in the Fall 2019 cycle were extended from 30 days to 60 days. Based on the comments received during this 60-day extended commenting period, measures entered one of two tracks:

Track 1: Measures Continuing in Fall 2019 Cycle

Measures that did not receive public comments or only received comments in support of the Standing Committees' recommendations will be reviewed by the CSAC on July 28 – 29.

- **Exceptions**

Exceptions were granted to measures if non-supportive comments received during the extended post-comment period were similar to those received during the pre-evaluation meeting period and have already been adjudicated by the respective Standing Committees during the measure evaluation Fall 2019 meetings.

Track 2: Measures Deferred to Spring 2020 Cycle

Fall 2019 measures requiring further action or discussion from a Standing Committee were deferred to the Spring 2020 cycle. This includes measures where consensus was not reached or those that require a response to public comments received. Measures undergoing maintenance review will retain endorsement during that time. Track 2 measures will be reviewed during the CSAC's meeting in November.

During the All-Cause Admissions and Readmissions post-comment web meeting on June 22, 2020, the Standing Committee will be reviewing Fall 2019 measures assigned to Track 2. There were no measures that followed Track 1.

Purpose of the Call

The All-Cause Admissions and Readmissions Standing Committee will meet via web meeting on June 22, 2020 from 9:00 am to 5:00 pm ET. Member and public comments and NQF member expression of support will be discussed from 3:30 pm to 4:30 pm ET. The purpose of this portion of the call is to:

<http://www.qualityforum.org>

- Review and discuss comments received during the post-evaluation public and member comment period;
- Provide input on proposed responses to the post-evaluation comments;
- Review and discuss NQF members' expression of support of the measures under consideration; and
- Determine whether reconsideration of any measures or other courses of action are warranted.

Standing Committee Actions

1. Review this briefing memo and [draft report](#).
2. Review and consider the full text of all comments received and the proposed responses to the post-evaluation comments (see comment table).
3. Review the NQF members' expressions of support of the submitted measures.
4. Be prepared to provide feedback and input on proposed post-evaluation comment responses.

Conference Call Information

Please use the following information to access the conference call line and webinar:

Conference Call #: (800-768-2983)
Access Code: 3772061
Web link: <https://cc.callinfo.com/r/1dzm7abq62qx5&eom>

Background

Avoidable admissions and readmissions to acute care facilities are an important area for healthcare quality improvement. These avoidable admissions and readmissions often represent an opportunity to improve care transitions and prevent the unnecessary exposure of patients to adverse events in an acute care setting. To drive improvement in admissions and readmissions, performance measures have continued to be a key element of value-based purchasing programs to incentivize collaboration in the healthcare delivery system.

The All-Cause Admissions and Readmissions Standing Committee has been charged with overseeing the NQF All-Cause Admissions and Readmission portfolio, evaluating both newly submitted and previously endorsed measures against NQF's measure evaluation criteria, identifying gaps in the measurement portfolio, providing feedback on how the portfolio should evolve, and serving on any ad hoc or expedited projects in its designated topic areas. The All-Cause Admissions and Readmissions portfolio includes measures for various care settings or points of care.

During the February 4, 2020 web meeting, the All-Cause Admissions and Readmissions Standing Committee evaluated one newly submitted measure. The Committee recommended for endorsement *3495 Hospital-Wide 30-Day, All-Cause, Unplanned Readmission (HWR) Rate at the clinician group/practice level of analysis*.

Comments Received

NQF solicits comments on measures undergoing review in various ways and at various times throughout the evaluation process. First, NQF solicits comments on endorsed measures on an ongoing basis through the Quality Positioning System (QPS). Second, NQF solicits member and public comments during a 16-week comment period via an online tool on the project webpage.

Pre-evaluation Comments

NQF solicits comments prior to the evaluation of the measures via an online tool on the project webpage. For this evaluation cycle, the pre-evaluation comment period was open from December 5, 2019 to January 28, 2020 for the measures under review. The one comment received focused on reliability testing and evidence for attribution. These pre-evaluation comments were provided to the Committee prior to the measure evaluation meeting.

Post-evaluation Comments

The draft report was posted on the project webpage for public and NQF member comment on March 26, 2020 for 60 calendar days. The Standing Committee's recommendations will be reviewed by the Consensus Standards Approval Committee (CSAC) on November 17-18, 2020. The CSAC will determine whether or not to uphold the Standing Committee's recommendation for each measure submitted for endorsement consideration. All Committee members are encouraged to attend the CSAC meeting to listen to the discussion. During this commenting period, NQF received 10 comments from eight member organizations:

Member Council	# of Member Organizations Who Commented
Health Professional	7
Provider Organization	1

We have included all comments that we received (both pre- and post-evaluation) in the comment table (excel spreadsheet) posted to the Committee SharePoint site. This comment table contains the commenter's name, comment, associated measure, topic (if applicable), and—for the post-evaluation comments—draft responses (including measure steward/developer responses) for the Committee's consideration. Please review this table in advance of the meeting and consider the individual comments received and the proposed responses to each.

In order to facilitate discussion, the majority of the post-evaluation comments have been categorized into major topic areas or themes. Although all comments are subject to discussion, the intent is not to discuss each individual comment on the June 22, 2020 call. Instead, we will spend the majority of the time considering the four themes discussed below, and the set of comments as a whole. Please note that the organization of the comments into major topic areas is not an attempt to limit Committee discussion.

Additionally, please note measure stewards/developers were asked to respond where appropriate. Where possible, NQF staff has proposed draft responses for the Committee to consider.

Comments and Their Disposition

Themed Comments

Three major themes were identified in the post-evaluation comments, as follows:

1. Reliability at minimum case volumes
2. Evidence to support attribution
3. Risk adjustment testing and social risk factors

Theme 1 – Reliability at minimum case volumes

Commenters raised concerns regarding the reliability testing and results across the five specialty cohorts. Several commenters noted that the reliability results were insufficient at case volumes of 25 and that results were still lower than optimal at minimum case volumes of 200. Additionally, one commenter expressed concerns about the generalizability of the measure across MIPS-eligible clinician groups at case volumes of 200 or more.

Measure Steward/Developer Response:

The Measure Steward/Developer Response will be added closer to the June 22 meeting.

Proposed Committee Response:

Thank you for your comments. The Standing Committee discussed this issue during its evaluation meeting on February 4, 2020 and agreed to accept the Scientific Methods Panel rating of “moderate” for reliability.

Action Item:

The Committee should review the comments and the developer’s response and be prepared to discuss whether it wishes to reconsider the recommendation for the measure.

Theme 2 – Evidence to support attribution

Commenters expressed concerns regarding the supporting evidence related to the measure’s attribution to three types of clinician groups. Several commenters stated that the evidence relies on general statements and that the studies provided are inadequate to support the attribution logic to a discharging clinician. One commenter raised concern that certain specialties will be inappropriately impacted due to the attribution logic and recommended that the measure should include a broader range of specialties.

Measure Steward/Developer Response:

The Measure Steward/Developer Response will be added closer to the June 22 meeting.

Proposed Committee Response:

Thank you for your comments. The Standing Committee discussed this issue during its evaluation meeting on February 4, 2020 and agreed that the evidence supports interventions physician groups can take to influence this outcome and the measure passed Evidence.

Action Item:

The Committee should review the comments and the developer’s response and be prepared to discuss whether it wishes to reconsider the recommendation for the measure.

Theme 3 – Risk adjustment testing and social risk factors

One commenter expressed concern regarding the risk-adjustment model. Specifically, the commenter stated that the risk adjustment testing and the overall model was not robust, especially when considering social risk factors.

Measure Steward/Developer Response:

The Measure Steward/Developer Response will be added closer to the June 22 meeting.

Proposed Committee Response:

Thank you for your comments. The Committee will review these comments during its deliberations on the Post-Comment Call scheduled on June 22, 2020.

Action Item:

The Committee should review the comments and the developer's response and be prepared to discuss whether it wishes to reconsider the recommendation for the measure.

NQF Member Expression of Support

Throughout the 16-week continuous public commenting period, NQF members had the opportunity to express their support ("support" or "do not support") for each measure submitted for endorsement consideration to inform the Committee's recommendations. No NQF members provided their expression of support: See [Appendix A](#).

Appendix A: NQF Member Expression of Support Results

Eight NQF members provided their expressions of support/nonsupport. NQF 3495 did not receive any support from NQF members. Results are provided below.

3495 Hospital-Wide 30-Day, All-Cause, Unplanned Readmission (HWR) Rate at the Clinician Group/Practice Level of Analysis

Member Council	Support	Do Not Support	Total
Health Professional	0	7	7
Provider Organization	0	1	1