



### All-Cause Admissions and Readmissions Standing Committee – Post Comment Web Meeting

---

The National Quality Forum (NQF) convened the All-Cause Admissions and Readmissions Standing Committee for a web meeting on September 24, 2020 to review and discuss public comments received for five measures.

#### Welcome, Introductions, and Review of Meeting Objectives

Matthew Pickering, senior director, welcomed the Standing Committee and participants to the web meeting. NQF Vice President Sheri Winsper also introduced herself and provided additional welcoming remarks. Oroma Igwe, manager, conducted a roll call and Dr. Pickering reviewed the following meeting objectives:

- Reconsideration Request of NQF 2496 *Standardized Readmission Ratio (SRR) for Dialysis Facilities (UM Kidney Epidemiology and Cost Center/CMS)*
- Review and Discuss Public Comments
- Related and Competing Measures

Sixteen Committee members were present for the discussion, allowing the committee to be able to revote should the Committee elect to reopen the measures for discussion and evaluation based on comments received and the reconsideration request for NQF #2496 *Standardized Readmission Ratio (SRR) for Dialysis Facilities (UM Kidney Epidemiology and Cost Center/CMS)*. Representatives from the University of Michigan Kidney Epidemiology and Cost Center (UM-KECC) and Yale Center for Outcomes and Evaluation (CORE) measure developer teams were also present on the call.

#### Background

During the spring 2020 project cycle, the All-Cause Admissions and Readmissions Committee evaluated five measures during the June 2020 measure evaluation meeting. Four measures were recommended for endorsement, and one measure was not recommended for endorsement.

The Committee recommended these four measures for endorsement:

- **NQF 1463** Standardized Hospitalization Ratio for Dialysis Facilities (SHR) (UM-KECC/CMS)
- **NQF 3565** Standardized Emergency Department Encounter Ratio (SEDR) for Dialysis Facilities (UM Kidney Epidemiology and Cost Center/CMS)
- **NQF 3566** Standardized Ratio of Emergency Department Encounters Occurring Within 30 Days of Hospital Discharge (ED30) for Dialysis Facilities (UM Kidney Epidemiology and Cost Center/CMS)
- **NQF 2539** Facility 7-Day Risk-Standardized Hospital Visit Rate after Outpatient Colonoscopy (Yale CORE/CMS)

The Committee did not recommend this one measure for continued endorsement:

- **NQF 2496** Standardized Readmission Ratio (SRR) for Dialysis Facilities (UM Kidney Epidemiology and Cost Center/CMS)

## Reconsideration Request for NQF 2496

### Standardized Readmission Ratio (SRR) for Dialysis Facilities

Dr. Pickering provided an overview of NQF #2496 *Standardized Readmission Ratio (SRR) for Dialysis Facilities*, the comments that were received during the draft report commenting period, the developer responses to the comments, and a summary of the reconsideration request. The measure developer, UM-KECC, submitted a reconsideration request for NQF #2496 on the basis that the measure evaluation criteria were not applied appropriately. Co-Chair John Bulger invited the measure developer to state the rationale behind their reconsideration request to the Committee. The developer stated that the Committee's decision to uphold the Scientific Methods Panel's (SMP) rating and recommendation to fail the measure on validity was due to inadequate demonstration of measure score validity based on correlations with other outcome measures. The developer stated that the SMP's discussion about validity presented bias to the Committee's subsequent discussion about the validity results. The developer further stated that the Committee's vote on validity was erroneously influenced by the concerns of a specific SMP reviewer who focused significantly on the changes in the magnitude of correlation results and a decrease in the correlation coefficient value from the initial submission in 2014 rather than observing that the direction of the correlations and the statistical significance were valid. The developer emphasized that the current validity testing results support a moderate level of validity, and all the correlations that were presented are within the general range of previously submitted measures and other NQF endorsed measures.

Dr. Bulger expressed that NQF accurately explained the process, and it was followed correctly by the Committee. He provided a brief overview of the Committee's and SMP's vote on the validity criterion. A Committee member asked the developer about the influence of the change from the International Classification of Diseases, Ninth Revision (ICD-9) to ICD-10 on the specification of measures. The developer recognized the transition from ICD-9 to ICD-10 as one of several influential factors on some of the statistical results for the validity and reliability testing, particularly due to the greater specificity that ICD-10 coding provides. However, the developer also stated that they are not clear on whether clinicians are using the entire range of options when they enter codes or if they are applying ICD-10 codes in ways that can infer underlying diagnosing the same way as ICD-9. The developer explained that they have preliminary evidence to show that the ICD-9 to ICD-10 transition affects measures, but they emphasized that the degree to which it affects the measures is not yet known. Following a brief overview of the voting procedure, the Committee voted on whether to reconsider NQF #2496; 12 members voted "no" and four members voted "yes." With more than 60 percent of the Committee voting "no," the Committee did not reconsider NQF #2496.

## Review and Discussion of Public Comment

The commenting period for the Readmissions spring 2020 measure evaluation cycle began on August 5, 2020 and ended on September 3, 2020. NQF received both measure-specific and general draft report comments from NQF members and members of the public. Dr. Pickering summarized the comments and the proposed Committee responses. The co-chairs, John Bulger and Cristie Travis, facilitated the discussion of the comments and solicited feedback on the proposed responses. The Committee expressed support for the proposed responses that were drafted by NQF staff within the [comment memo](#).

Some comments expressed similar concerns raised during the June 22, 2020 measure evaluation Committee meeting. A summary of the public comments and developer responses are in the [comment memo](#) and [comment table](#).

Two comments were received for measure #1463, which raised concern with reliability scores for certain facilities and use of the profile inter-until reliability (PIUR), Medicare Advantage patient variation and use of in-patient comorbidities, validity testing, risk adjustment model, and harmonization of NQF #2496 and NQF #1463. The Committee acknowledged the comments and developer responses, and it did not raise any dissenting points of consideration, nor did it provide any additional feedback.

Three comments were received for NQF #2539, which focused on the risk adjustment modeling approach and the change in national performance across categories with inclusion of social risk adjustment. The Committee acknowledged the comments and developer responses. The Committee further recognized that during the June 22, 2020 measure evaluation meeting, it considered and discussed several topics related to the validity of the measure, including risk adjustment and meaningful differences in performance. The Committee ultimately agreed to uphold the Scientific Method Panel's rating of validity and passed the measure on this criterion. No additional feedback was provided by the Committee during the post-comment call.

Both NQF #3565 and NQF #3566 received one comment, which raised concerns with the appropriateness of PIUR, the exclusion of Medicare Advantage patients, the risk adjustment model, and the ability of the measure to identify meaningful differences in performance. The Committee recognized that during the spring 2020 measure evaluation call on June 22, 2020, the Committee discussed these concerns raised in the comment, including several topics related to the scientific acceptability of the measure, specifically, the PIUR methodology. The Committee ultimately determined that the PIUR method was appropriate and passed the measure on reliability.

Overall, the Committee was satisfied with the developers' responses to the comments and agreed that the concerns in these public comments were adequately addressed. The Committee did not elect to reconsider any of their previous recommendations for endorsement of the measures.

## Related and Competing Measures

There are no related and competing measures under review in the spring 2020 cycle; therefore, the Standing Committee did not hold a discussion on related and competing measures, nor did they make a motion to vote for a best-in-class measure.

## Public Comment

No public or NQF member comments were provided during the post-comment web meeting.

## Next Steps

Funmilayo Idami, analyst, notified the Committee that NQF will host the Consensus Standards Approval Committee (CSAC) web meeting on November 17-18, 2020 for a final review and approval of the spring 2020 measures. Following the CSAC review, there will be an appeals period scheduled from November 23 through December 22, 2020.