

NATIONAL QUALITY FORUM

Moderator: Lorelei Gorean
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3:00 p.m. ET

Operator: Welcome to the conference. Please note today's call is being recorded.
Please stand by.

Lorelei Gorean: Hi, everyone. This is Lorelei Gorean, project manager for Behavioral Health with NQF. I had Angela here with me as well, who is the senior director for the project. And I know, Peter, we have you on the phone as well. Peter Briss is the co-chair.

And I think I'll just open up the line to see who also is on the phone. I don't think we have many people, so I think there's (someone) on the phone.

(Shee): Yes. This is (Shee) from America's Health Insurance Plans.

Lorelei Gorean: OK. Hi, (Loren).

(Loren): Hi.

Lorelei Gorean: And is (Carol) on the call yet?

OK. Is there anybody else on the call?

OK. This has happened at the (west). A few times, I think we've had these calls and they haven't been that well attended. So what we can do is just give a very high overview for you on. We might have other people who are on the Webinar who call in and we might have members of the public on the line as

well. So we will go through everything and then open up the call for questions.

(Loren): OK. That will be perfect. Thank you.

Lorelei Gorean: Great. Sure, sure. And just feel free to jump in to the line if you want to add anything or clarify in the meantime before we get (sat on the park).

Female: Great. Thanks.

Lorelei Gorean: But just to review what the goals for this Webinar, for this pre-voting Webinar are, there are two bills at the project scope and the measure that have been recommended for endorsement and any overarching issues from the project and then to give the membership chance to ask questions before you cast your vote. So I'll just have Angela go over the – briefly go over the project scope for both phases of this project.

Angela Franklin: Great. Thank you, Lorelei.

So, as you know, this is a two-phase project. And in phase I, we looked at measures that covered alcohol use, tobacco use, medication adherence, diabetes, and cardiovascular health screening and assessment as well as the follow-up care after hospitalization measures.

In phase II, we expect to look at topics that will cover some of these same areas, but look also additional areas, which is depression, serious mental illness, hospital-based inpatient psychiatric services, patient experience of care measures, measures around developmental disorders, behavioral health functioning, and lithium level testing.

So for this phase, we have several measures that were reviewed by the committee – (inaudible) – and sure you can see a high-level summary of the measures that were measured disposition of the 21 measures that ended up being considered by the steering committee.

At this point, we had two – I'm sorry, I'll just walk through very quickly. We had 21 total measures reviewed in phase I again, across those topic areas that I

mentioned earlier; alcohol, tobacco, medication adherence, diabetes, and cardiovascular health screening and assessment as well as the post care follow-up.

We did have three measures withdrawn and seven measures around tobacco and alcohol use were deferred for further reliability testing. And those measures are going to be reviewed in phase II of the project. One measure related to medication adherence that's measure number 1936 has been combined into a single harmonized measure, which is 1879, which will be stewarded by CMS going forward. One measure was not recommended for endorsement, number 1938, around emergency department usage.

So with that, I'll go ahead and turn it over to Dr. Briss. He is our co-chair, one of our co-chairs for Behavioral Health Steering Committee. And he can walk you through measures that were recommended.

Peter Briss: Thank you, Angela.

And for the purposes of this call, I won't – I won't read this to you but we recommend that – oh, I'm sorry – back, oh yes. So we recommended one measure related to alcohol and alcohol dependent treatment. We recommended three measures related to tobacco use screening and intervention and one on medication adherence.

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Thank you. We recommended four measures related to diabetes or cardiovascular health screening or monitoring. We recommended two measures on post care follow-up after hospitalization for schizophrenia, more broadly for mental illness.

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There were a number of issues in the measure set that's related to evidence and reliability. So the committee in general thought that measures could more clearly describe how structures in process these are likely to relate the outcomes.

There were several measures related to tobacco and alcohol that for which – for which the committee found the available reliability testing to be – to be insufficient and for which the developer is developing – is conducting additional reliability testing that will be incorporated in the evaluation in stage II.

And there were a number of related measures for which harmonization will be conducted, so this relates to adherence and psychotic medicine for individuals with schizophrenia, screening for diabetes in people with bipolar disease or schizophrenia or bipolar disorder, monitoring for people with schizophrenia and bipolar disease for diabetes, and follow up after hospitalization.

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We received – we received a few comments from member organization in general. There was general support for the process. There were questions about the methodology involved in deferring measures, which was relatively (temporary) to answer in the sense that it's that of a case by case decision making. And there were questions about eMeasure development.

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And I've talked about some of this already, so staff clarified the deferral process. The developer and the steering committee discussed eMeasure and the developer has responded and that was a bit of additional discussion on application of reliability criteria.

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Lorelei Gorean: Great. Thank you very much, Peter.

Peter Briss: Thank you.

Lorelei Gorean: That was a great overview. I'll just check the calls now to see if anybody has any question. (Loren), if you have any questions, I think I see (Kristen) on the Webinar as well.

(Loren): I do not have any. Thank you. This is (Loren).

Lorelei Gorean: Great, thanks. And operator, are you able to please open up the line to see if anybody else...

Operator: Yes, ma'am. They're opened now.

Lorelei Gorean: OK, great. So anybody from the public as well is going to ask a question or make a comment out as well?

OK. Well with that, I will just let you know what our next steps are. So the voting period will open tomorrow morning. It will be available on our Web site and it will last for two weeks, from August 8th to the 22nd. We will then present this project at CSAC or Consensus Standards Approval Committee in early September.

The project will then go through board endorsement in late September and an appeal in October. And then of course, we will be following the first phase up with the second phase as well, as you heard Peter and Angela mentioned.

So Peter, was there anything else that you wanted to add before we close the call today?

Peter Briss: No. I'd like to – I like to thank NQF for very efficient phone call. I like to thank the committee for all their hard work and getting up to this point.

Lorelei Gorean: Thank you. And thank you very much for your leadership, too. We appreciate it.

All right. Well, have a good afternoon everyone. Thanks for calling in.

(Loren): Thank you. Goodbye.

Lorelei Gorean: Bye.

Peter Briss: Bye.

Operator: Ladies and gentlemen, this does conclude today's conference call. You may now disconnect.

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