

Behavioral Health and Substance Use, Spring 2021 Measure Review Cycle

Measure Evaluation Standing Committee Meeting

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June 17, 2021

Funded by the Centers for Medicare and Medicaid Services under contract HHSM-500-2017-000601 Task Order HHSM-500-T0001.

Welcome



Housekeeping Reminders

- This is a WebEx meeting with audio and video capabilities
- Optional: Dial (844)-621-3956 and enter Meeting ID: 173 923 2042
- Please place yourself on mute when you are not speaking
- We encourage you to use the following features
 - Chat box: to message NQF staff or the group
 - Raise hand: to be called upon to speak
- We will conduct a Committee roll call once the meeting begins

If you are experiencing technical issues, please contact the NQF project team at behavioralhealth@qualityforum.org



Project Team — Behavioral Health and Substance Use Standing Committee







Tamara Funk, MPH Manager Quality Measurement





Monika Harvey, MBA, PMP Project Manager Quality Measurement

Gus Zimmerman, MPP Coordinator Quality Measurement



Agenda

- Introductions and Disclosures of Interest
- Overview of Evaluation Process and Voting Process
- Voting Test
- Measures Under Review
- Consideration of Candidate Measures
- NQF Member and Public Comment
- Next Steps
- Adjourn

Introductions and Disclosures of Interest



Behavioral Health and Substance Use Spring 2021 Cycle Standing Committee

- Harold Pincus, MD (Co-chair)
- Michael Trangle, MD (Co-chair)
- Loretta (Ann) Bostic, DNP, MBA, APRN, CRNA, PMHNP-BC
- Caroline Carney, MD, MSc, FAMP, CPHQ
- Vitka Eisen, MSW, EdD
- Julie Goldstein Grumet, PhD
- Benjamin Han, MD, MPH
- Morissa Henn, MPH, DrPH
- Lisa Jensen, DNP, APRN
- Caitlyn Kjolhede, BSN, MBA (inactive)
- Kraig Knudsen, PhD

- Barbara Lang, LPC, LISAC
- Michael R. Lardieri, LCSW
- Raquel Mazon Jeffers, MPH, MIA
- Brooke Parish, MD
- David Pating, MD
- Vanita Pindolia, PharmD
- Chantelle Rice Collins, OTD, OTR/L, CDCES
- Andrew Sperling, JD
- Jeffery Susman, MD
- Allen Tien, MD
- Patrick Triplett, MD
- Heidi Waters, MBA, PhD
- Bonnie Zima, MD, MPH

Overview of Evaluation Process and Voting Process



Roles of the Standing Committee During the Evaluation Meeting

- Act as a proxy for the NQF multistakeholder membership
- Evaluate each measure against each criterion
 - Indicate the extent to which each criterion is met and rationale for the rating
- Respond to comments submitted during the public commenting period
- Make recommendations regarding endorsement to the NQF membership
- Oversee the portfolio of Behavioral Health and Substance Use measures



Meeting Ground Rules

During the discussions, Committee members should:

- Be prepared, having reviewed the measures beforehand
- Base evaluation and recommendations on the measure evaluation criteria and guidance
- Remain engaged in the discussion without distractions
- Attend the meeting at all times
- Keep comments concise and focused
- Allow others to contribute



Process for Measure Discussion and Voting

- Brief introduction by measure developer (3-5 minutes)
- Lead discussants will begin Committee discussion for each criterion by:
 - Briefly explaining information on the criterion provided by the developer
 - Providing a brief summary of the pre-meeting evaluation comments
 - Emphasizing areas of concern or differences of opinion
 - Noting, if needed, the preliminary rating by NQF staff
 - » This rating is intended to be used as a guide to facilitate the Committee's discussion and evaluation.
- Developers will be available to respond to questions at the discretion of the Committee
- Full Committee will discuss, then vote on the criterion, if needed, before moving on to the next criterion



Endorsement Criteria

- Importance to Measure and Report (Evidence and Performance Gap): Extent to which the measure focus is evidence-based and important to making significant gains in healthcare quality where there is variation in or overall less-than-optimal performance (must-pass).
- Scientific Acceptability (Reliability and Validity): Extent to which the measure produces consistent (reliable) and credible (valid) results about the quality of care when implemented (must-pass).
- Feasibility: Extent to which the specifications require data that are readily available or could be captured and implemented without undue burden
- Usability and Use: Extent to which the measure is being used for both accountability and performance improvement to achieve the goal of highquality, efficient healthcare (must-pass for maintenance measures).
- Comparison to related or competing measures: If a measure meets the above criteria and there are endorsed or new related measures or competing measures, the measures are compared to address harmonization and/or selection of the best measure.



Voting on Endorsement Criteria

- Votes will be taken after the discussion of each criterion
- Importance to Measure and Report
 - Vote on Evidence (must pass)
 - Vote on Performance Gap (must pass)
 - Vote on Rationale Composite measures only
- Scientific Acceptability Of Measure Properties
 - Vote on Reliability (must pass)
 - Vote on Validity (must pass)
 - Vote on Quality Construct Composite measures only
- Feasibility
- Usability and Use
 - Use (must pass for maintenance measures)
 - Usability



Voting on Endorsement Criteria (continued)

- Overall Suitability for Endorsement
- Related and Competing Discussion
- Procedural Notes
 - If a measure fails on one of the must-pass criteria, there is no further discussion or voting on the subsequent criteria for that measure; Committee discussion moves to the next measure.
 - If consensus is not reached, discussion continues with the next measure criterion.



Achieving Consensus

Quorum: 66% of active committee members (15 of 22 members).

| Vote | Outcome |
|----------------------|-------------------------------|
| Greater than 60% yes | Pass/Recommended |
| 40% - 60% yes | Consensus Not Reached (CNR) |
| <40% yes | Does Not Pass/Not Recommended |

- "Yes" votes are the total of high and moderate votes.
- CNR measures move forward to public and NQF-member comment and the Committee will revote during the post-comment web meeting.
- Measures which are not recommended will also move on to public and NQF-member comment, but the Committee will not revote on the measures during the post comment meeting unless the Committee decides to reconsider them based on submitted comments or a formal reconsideration request from the developer.



Committee Quorum and Voting

- Please let staff know if you need to miss part of the meeting.
- We must have quorum to vote. Discussion may occur without quorum.
- If we do not have quorum at any point during the meeting, live voting will stop, and staff will send a survey link to complete voting.
 - Committee member votes must be submitted within 48 hours of receiving the survey link from NQF staff.
- If a Committee member leaves the meeting and quorum is still present, the Committee will continue to vote on the measures. The Committee member who left the meeting will not have the opportunity to vote on measures that were evaluated by the Committee during their absence.



Evaluation Process Questions?

Voting Test

Measures Under Review



Spring 2021 Cycle Measures

- I Maintenance Measure for Committee Review
 - 3175 Continuation of Pharmacotherapy for Opioid Use Disorder (University of Southern California)

Consideration of Candidate Measures



3175 Continuation of Pharmacotherapy for Opioid Use Disorder

- Measure Steward/Developer: University of Southern California
 - Maintenance measure

Brief Description of Measure:

 Percentage of adults of at least 18 years of age with pharmacotherapy for opioid use disorder (OUD) who have at least 180 days of continuous treatment.

NQF Member and Public Comment

Next Steps



Next Steps

- Post-Comment Web Meeting
 - Draft Report Commenting Period: August 11 September 9, 2021
 - October 11, 2021, 12:00 2:00 PM ET
- CSAC Meeting/Endorsement
 - November 30 December 1, 2021

Questions?

THANK YOU.

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