



Behavioral Health and Substance Use Standing Committee – Post Comment Web Meeting

The National Quality Forum (NQF) convened the Behavioral Health and Substance Use Standing Committee for a web meeting on April 25, 2018, to review and discuss the comments received on the draft report during the 30-day post-evaluation commenting period.

Welcome, Introductions, and Review of Meeting Objectives

Kirsten Reed, project manager, welcomed the Standing Committee and participants to the web meeting and provided an overview of the meeting objectives.

Review and Discuss Comments

Ms. Reed provided a summary of the 23 post-evaluation comments received on the draft report, as well as an overview of the NQF process for responding to and adjudicating all comments.

3312 Continuity of Care for Medicaid Beneficiaries after Detoxification (Detox) from Alcohol and/or Drugs; 3313 Follow-Up Care for Adult Medicaid Beneficiaries Who Are Newly Prescribed an Antipsychotic Medication; 3315e Use of Antipsychotics in Older Adults in the Inpatient Hospital Setting

Peter Briss, MD, co-chair, summarized general comments received on measures #3312, #3313, and #3315e and offered a consent calendar to the Committee since all of the comments received on these measures were in support of the Committee's recommendations. The Committee agreed to the consent calendar for these measures.

3317 Medication Reconciliation on Admission

Dr. Briss provided an overview of the comments received on measure #3317. The Committee's discussion focused on the two comments that suggested the measure be specified as an electronic clinical quality measure (eCQM). Harold Pincus, MD, co-chair, asked the developer to elaborate on what steps are needed to respecify #3317 as an eCQM. The developer explained that at the time they were developing this measure, inpatient psychiatric facilities had limited electronic health record (EHR) capture (about one-third of the inpatient psychiatric facilities have implemented EHRs), but they would work with the measure steward (CMS) to add the specification. The Committee agreed that they would like to see more eCQMs in addition to #3317 in future cycles.

3332 Psychosocial Screening Using the Pediatric Symptom Checklist-Tool (PSC-Tool)

Dr. Pincus provided an overview of the comments received on measure #3332. The Committee's conversation focused on the concerns raised by commenters questioning the validity of the Current Procedural Terminology (CPT) code 96110 in the numerator of the claims-based version of the measure. Ultimately, the Committee voted 17-2 to rescind the recommendation of endorsement for the claims-based measure and to continue with a recommendation of

endorsement for the chart-abstracted version. The developer agreed to this change and will resubmit the measure specifications to reflect the removal of administrative claims.

Related and Competing Discussion

Kyle Cobb, senior director, reviewed NQF's criteria around related and competing measures. Ms. Cobb then presented the side-by-side comparisons of the measures that were recommended by the Committee and any measures deemed as related by the developer(s). The Committee agreed that the developers of each of the four recommended measures have harmonized their measures to the extent possible and no further action is needed. The Committee requested a broader conversation in the future on medication reconciliation measures in general and the goal of having multiple related and harmonized measures.

Public Comment

No public comments were received during the web meeting.

Next Steps

The NQF Consensus Standards Approval Committee (CSAC) will review the Committee's measure endorsement recommendations and render a final endorsement decision during their May 8, 2018, conference call. Following the CSAC decision, a 30-day appeals period will open.