



NATIONAL
QUALITY FORUM

Cancer Standing Committee Off-Cycle Webinar #1

Melissa Mariñelarena, Senior Director
Jean-Luc Tilly, Project Manager

June 19, 2017

Agenda

Welcome and Introductions

Overview of Off-Cycle Activities

Introduction to NQF Prioritization Criteria

NQF Cancer Measures and Gaps Prioritization Exercise

Public and Member Comment

Next Steps

Cancer Standing Committee

Karen Fields, Co-Chair

- Gregory Bosci
- Brent Braveman
- Joanne Buzaglo
- Jennifer Carney
- Steven Chen
- Crawford Clay
- Matthew Facktor
- Martin Fleisher
- Shelley Fuld Nasso
- Jennifer Harvey
- Bradford Hirsch

David Cella, Co-Chair

- Jette Hogenmiller
- Joseph Laver
- J. Leonard Lichtenfeld
- Jennifer Malin
- Jodi Maranchie
- Ali McBride
- Benjamin Movsas
- Diane Otte
- Beverly Reigle
- David Sher
- Danielle Ziernicki

Overview of Off-Cycle Activities

Potential Off-Cycle Activities

Ongoing updates on NQF
policy/process

Addressing and setting
measurement priorities
for topic area

Reviewing current
measurement landscape

Follow-up from the
Consensus Development
Process

Deferred decisions

Directives from CSAC or
Board of Directors

Related and competing
measures/harmonization

Ad hoc reviews

Topic area consultation to
other Committees

Collaborative
opportunities with
developers, specialty
societies, and
implementers

Introduction to NQF Prioritization Criteria

National Quality Strategy

Better Care

**Healthier People,
Healthier Communities**

Smarter Spending

PRIORITIES

Make care safer by reducing harm caused in the delivery of care.

Strengthen person and family engagement as partners in care.

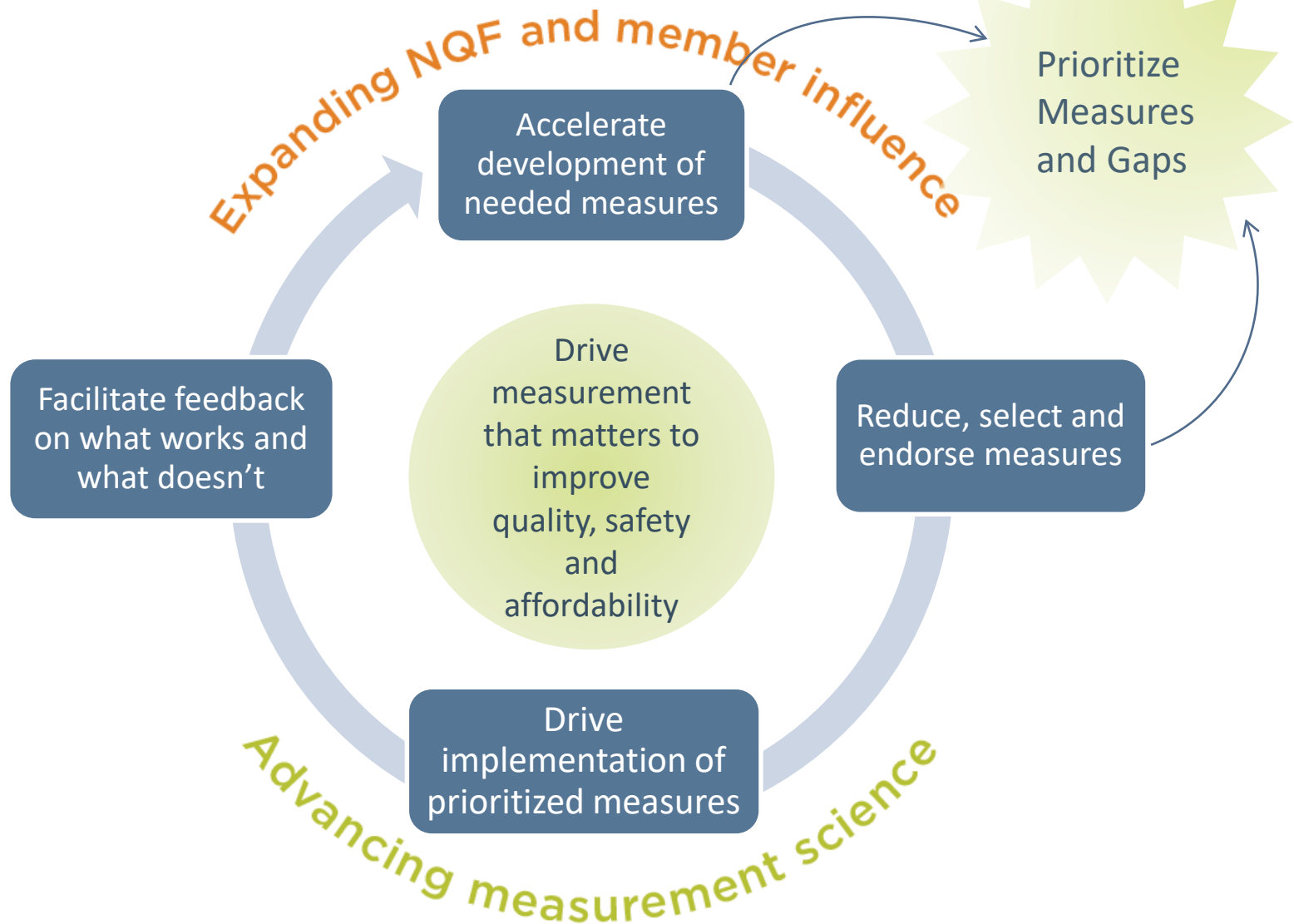
Promote effective communication and coordination of care.

Promote effective prevention and treatment of chronic disease.

Work with communities to promote best practices of healthy living.

Make care affordable.

NQF: Lead. Prioritize. Collaborate.



Prioritization Criteria: Environmental Scan

- National Quality Strategy
- IOM Vital Signs
- NQF Prioritization Advisory Committees
- Healthy People 2020 Indicators
- Kaiser Family Foundation Health Tracker
- Consumer priorities for Hospital QI and Implications for Public Reporting, 2011
- IOM: Future Directions for National Healthcare Quality and Disparities Report, 2010
- IHI Whole System Measures
- Commonwealth Fund International Profiles of Healthcare Systems, 2015
- OECD Healthcare Quality Project
- OECD Improving Value in Healthcare: Measuring Quality
- Conceptual Model for National Healthcare Quality Indicator System in Norway
- Denmark Quality Indicators
- UK NICE standards – Selecting and Prioritizing Quality Standard Topics
- Australia's – Indicators used Nationally to Report on Healthcare, 2013
- European Commission Healthcare Quality Indicators
- Consumer-Purchaser Disclosure Project – Ten criteria for meaningful and usable measures of performance

NQF Prioritization Criteria

Criterion	Description
Outcome-focused	Preference for outcome measures and measures with strong link to improved outcomes and costs
Improvable and actionable	Preference for actionable measures with demonstrated need for improvement and evidence-based strategies for doing so
Meaningful to patients and caregivers	Preference for person-centered measures with meaningful and understandable results for patients and caregivers
Support systemic and integrated view of care	Preference for measures that reflect care that spans settings, providers, and time to ensure that care is improving within and across systems of care

High-Impact Outcomes

High Impact Outcomes

Functional status/well-being

Patient experience (including care coordination, shared decision-making)

Preventable harm/complications

Prevention/healthy behaviors

Total cost/high-value care

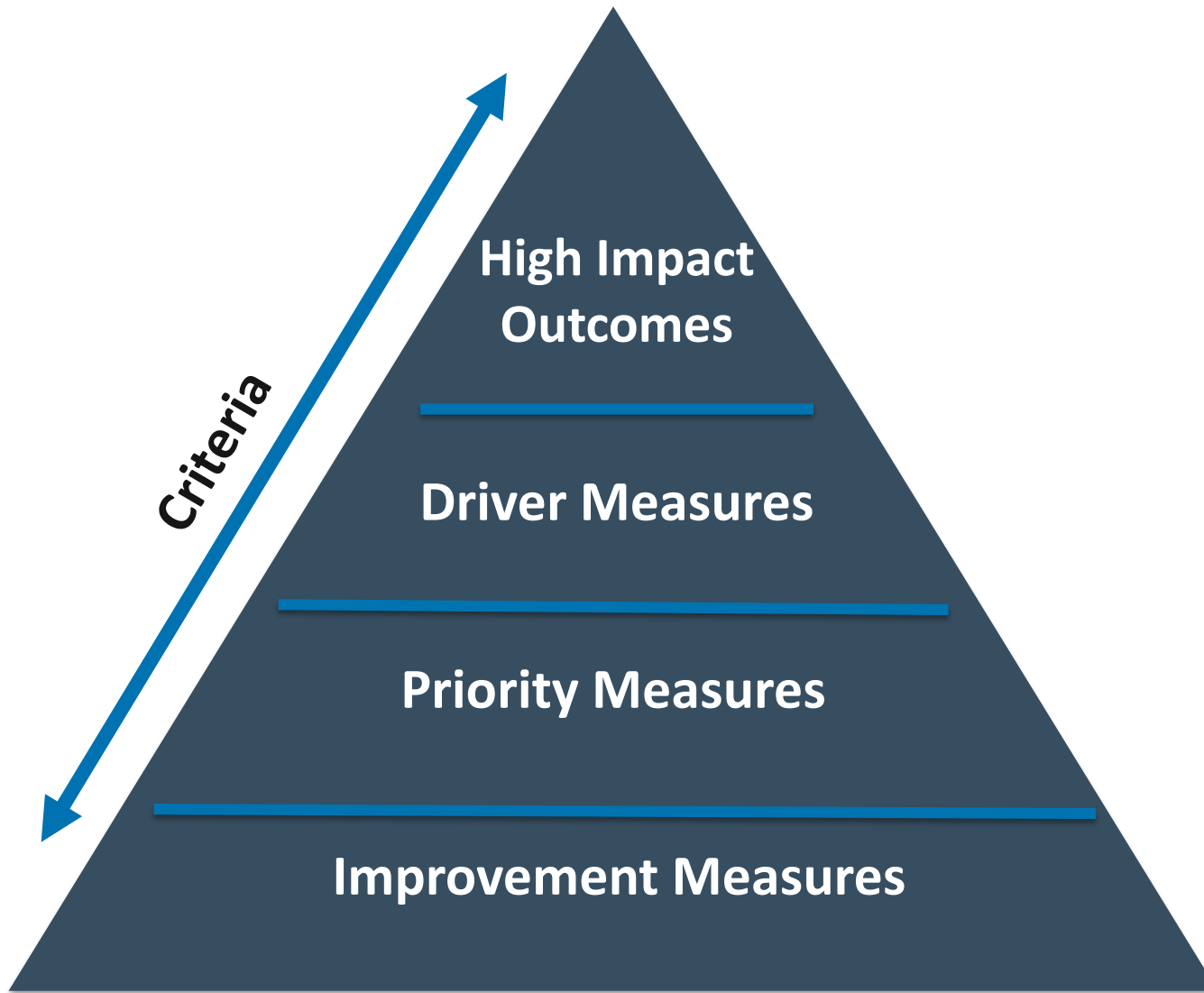
Access to needed care

Equity of care

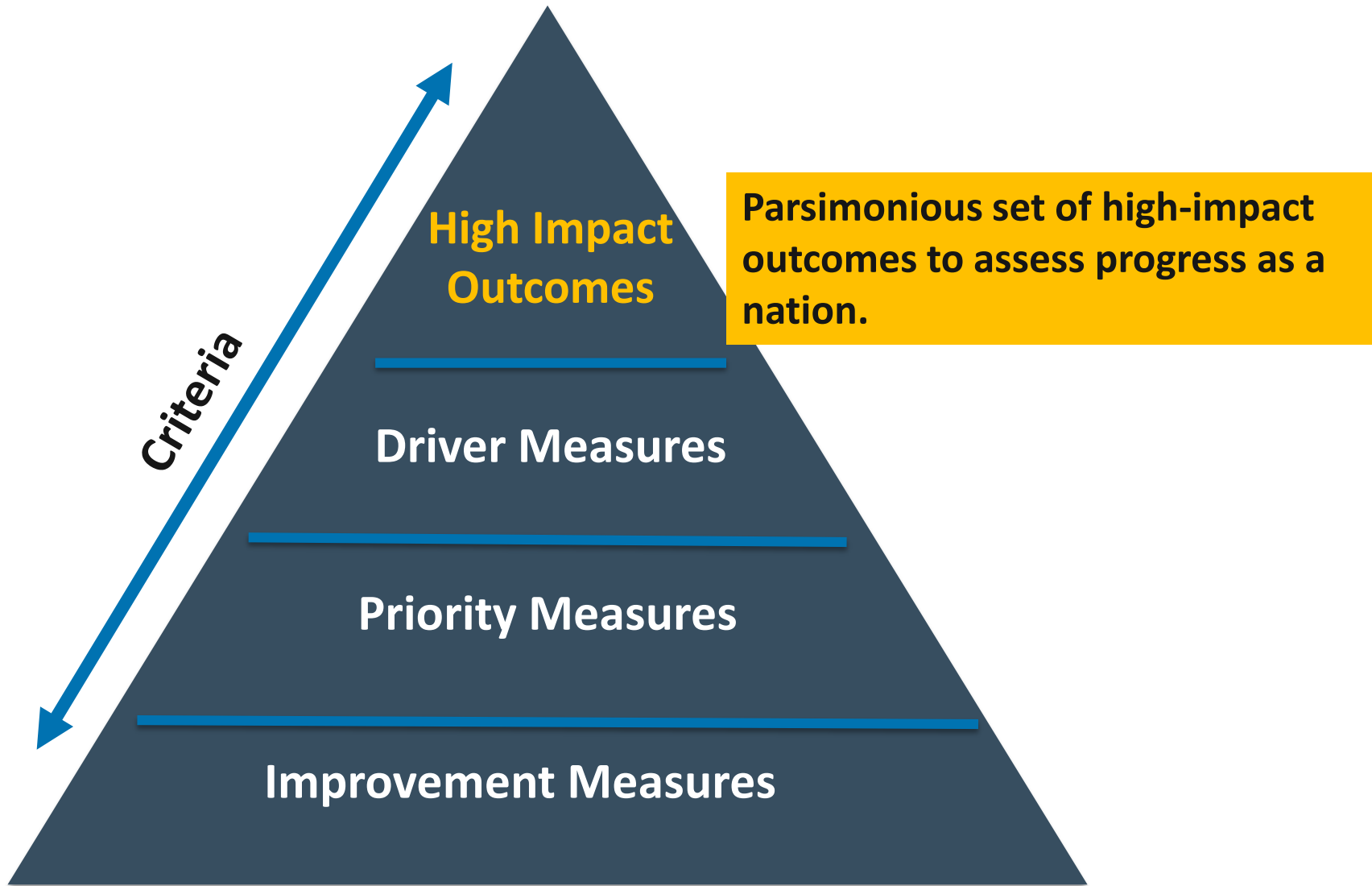
High-Impact Outcomes

High Impact Outcomes	High Impact Outcomes: Person-Centered Translation
Functional status/well-being	<i>Are you getting better?</i>
Patient experience (including care coordination, shared decision-making)	<i>How was your care?</i>
Preventable harm/complications	<i>Did you suffer adverse events from your care?</i>
Prevention/healthy behaviors	<i>Do you need more help staying healthy?</i>
Total cost/high-value care	<i>Did you receive the care you needed and no more?</i>
Access to needed care	<i>Can you get the care you need when and where you need it?</i>
Equity of care	<i>Are you getting high quality care regardless of who you are or where you live?</i>

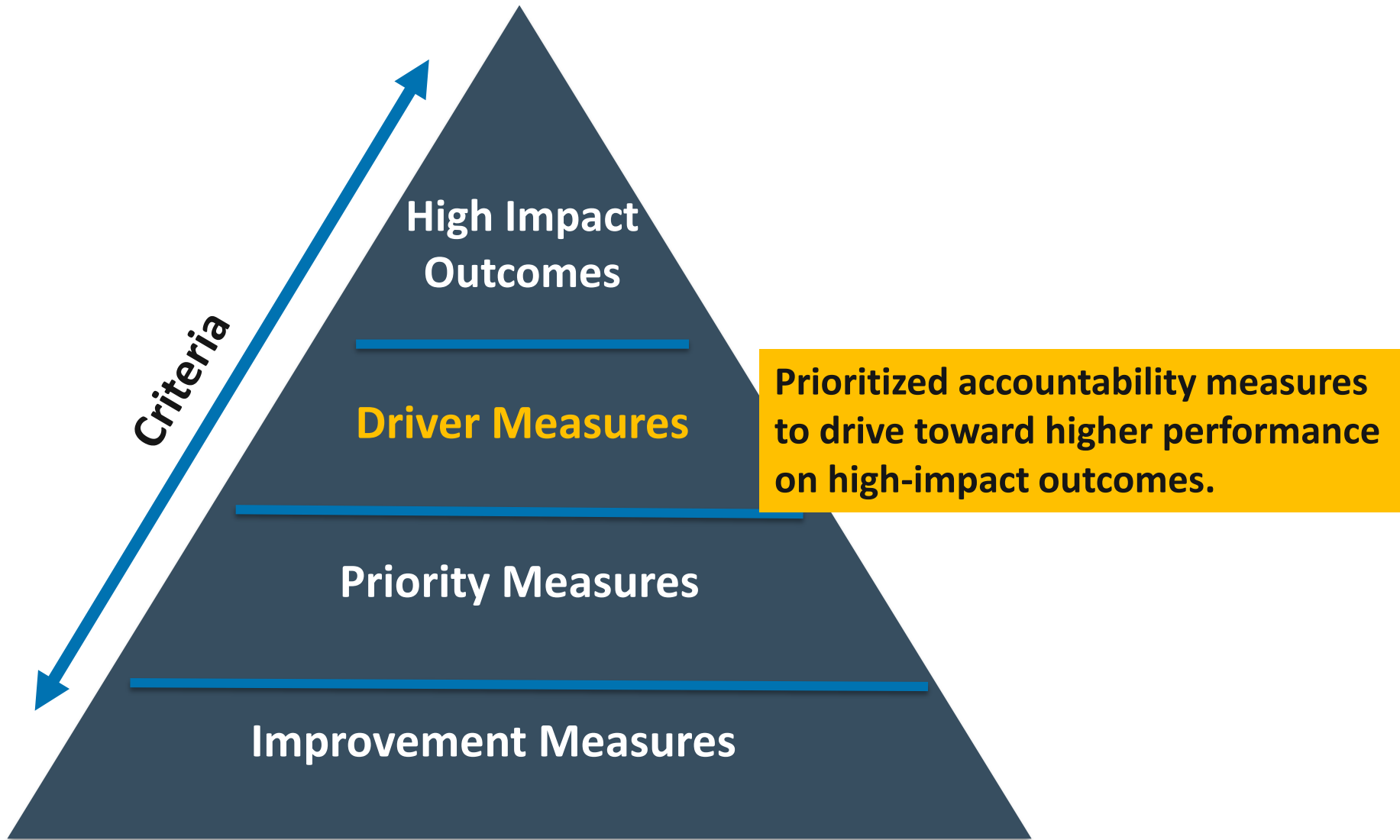
Hierarchical Framework



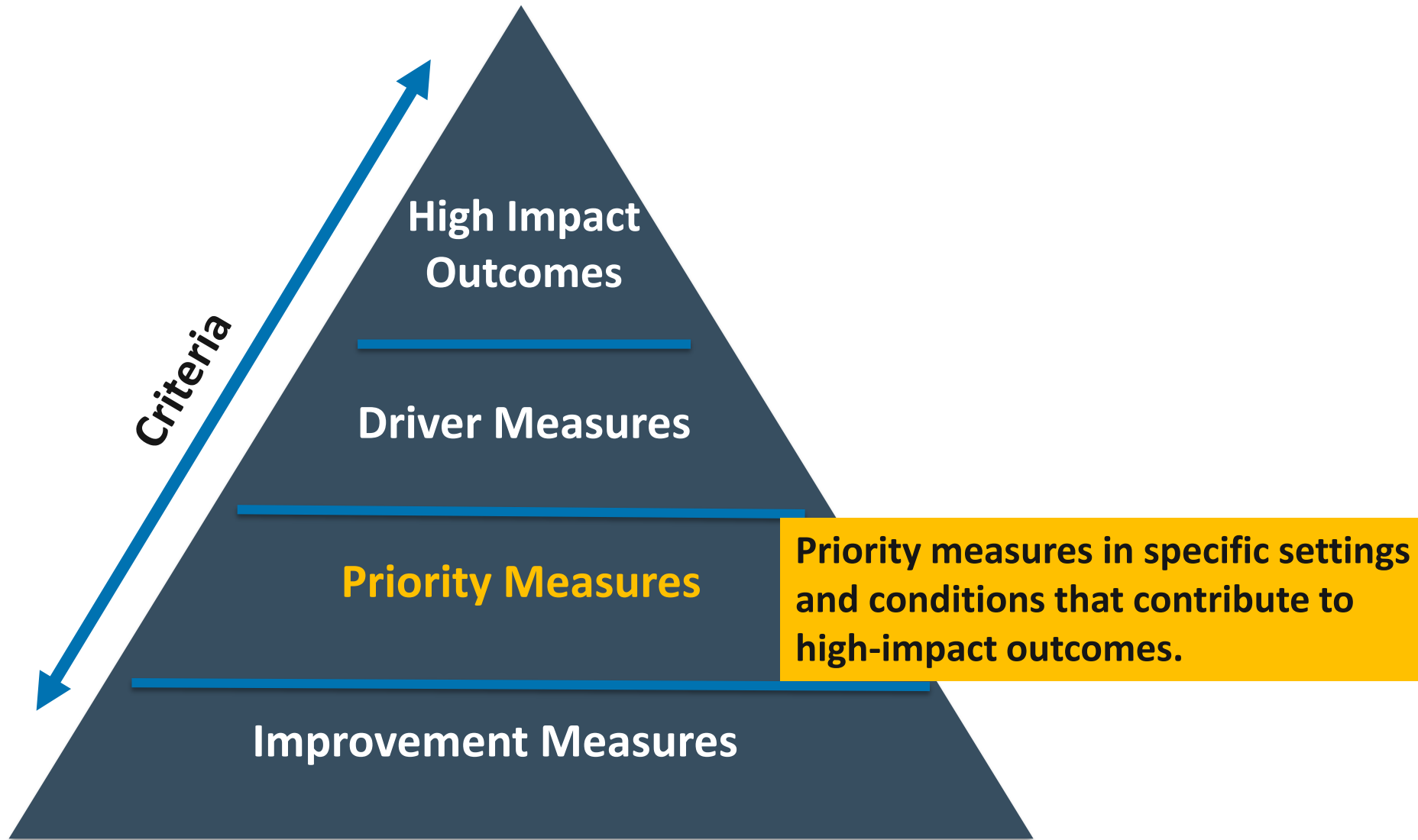
Hierarchical Framework



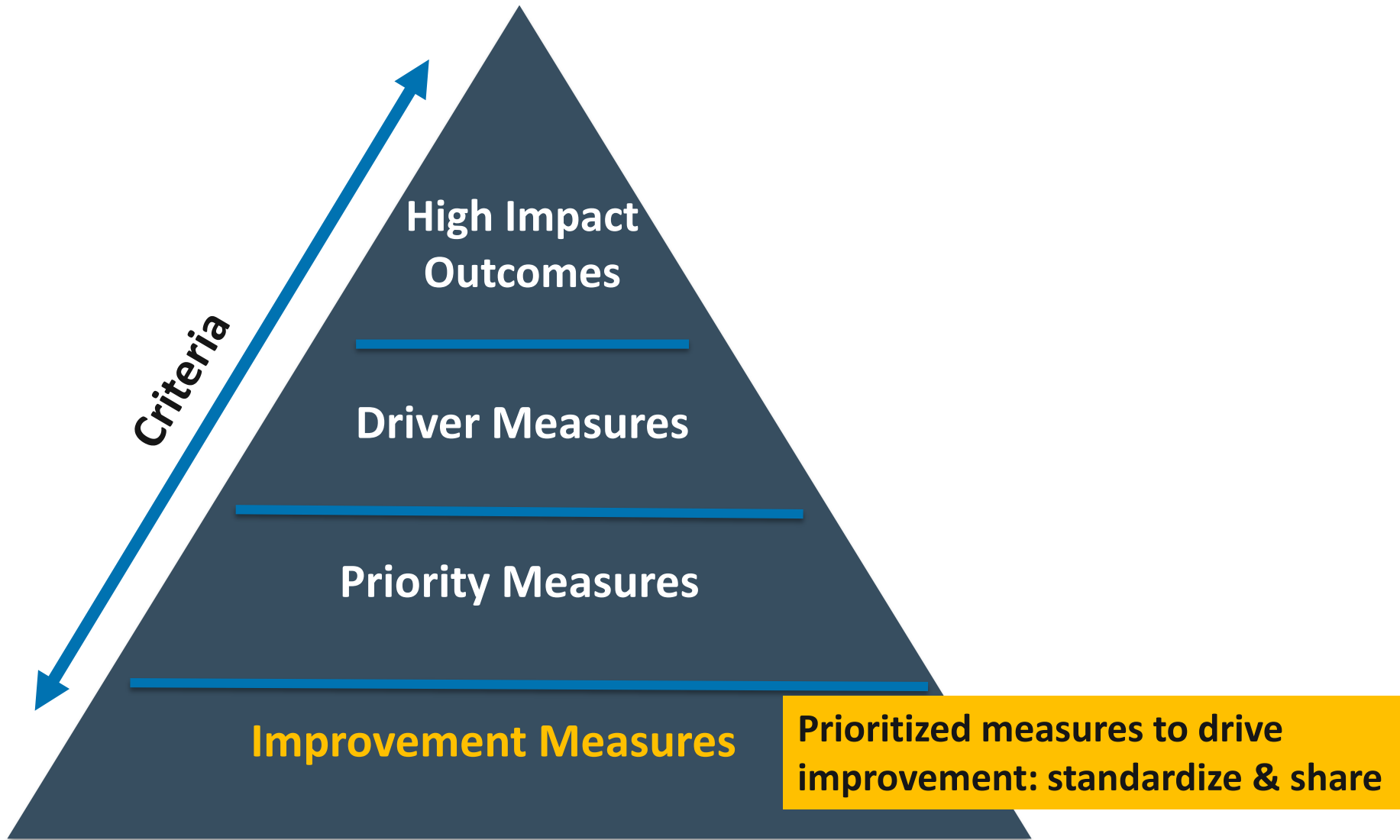
Hierarchical Framework



Hierarchical Framework



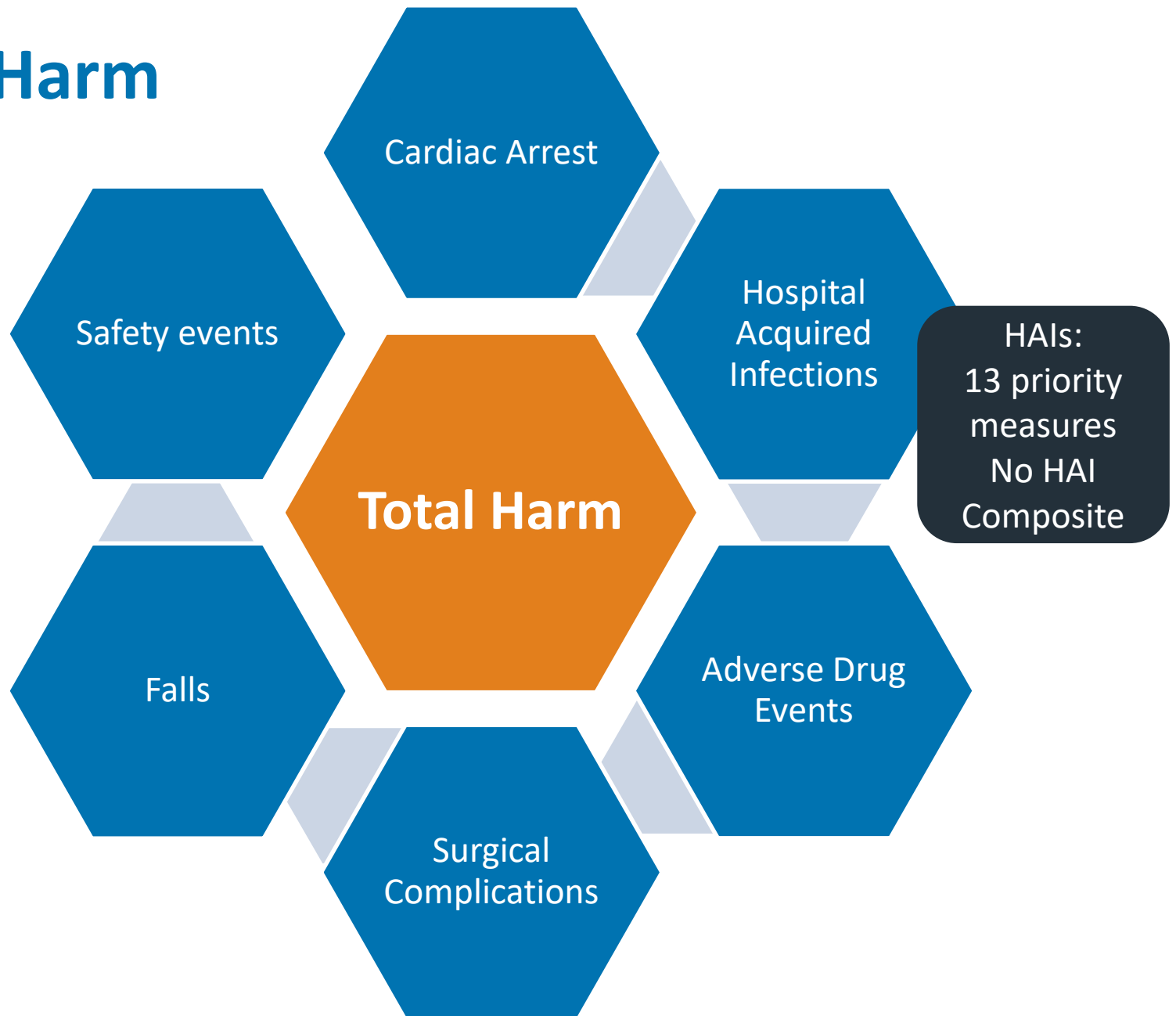
Hierarchical Framework



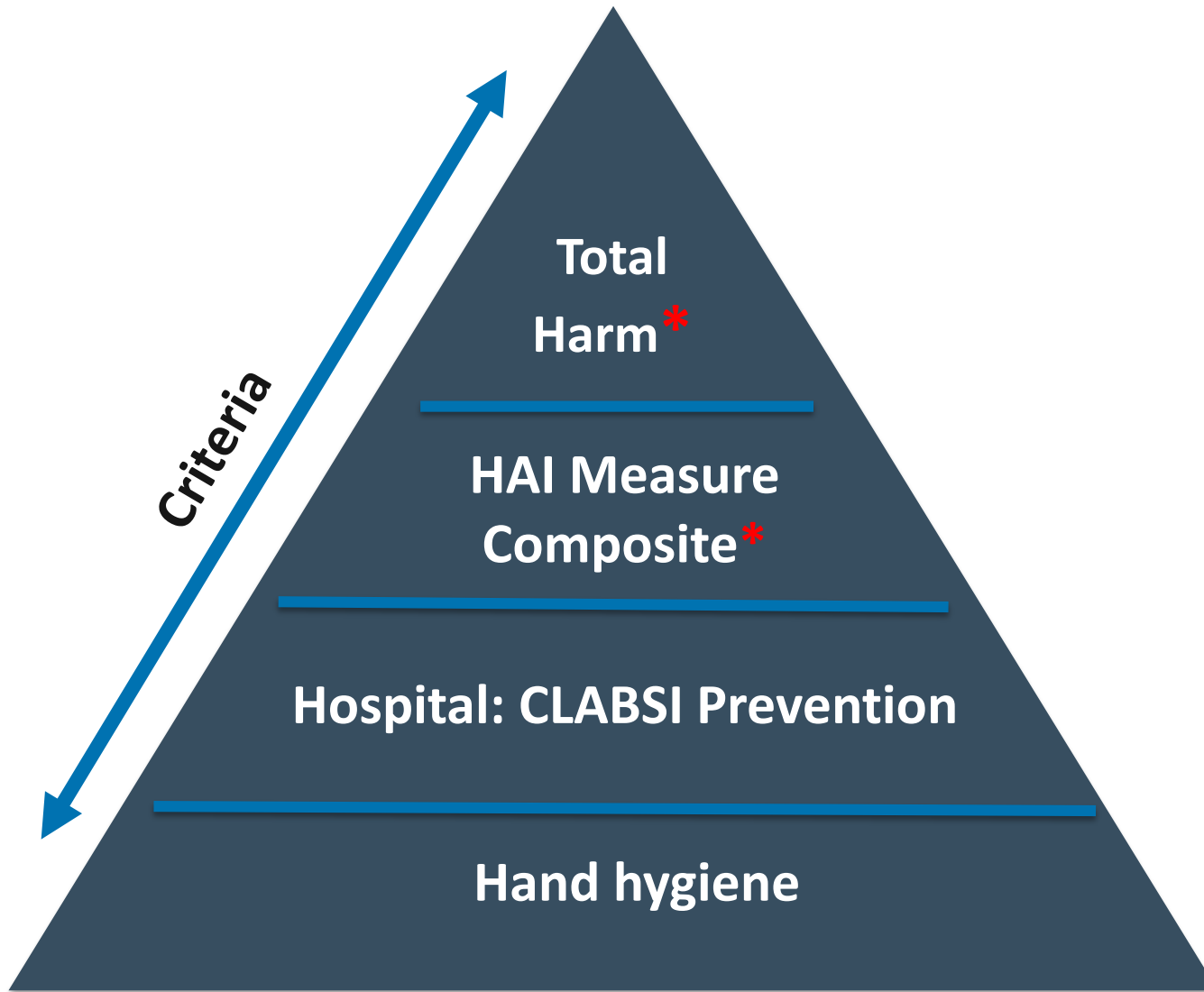
NQF Measure Prioritization Process



Total Harm



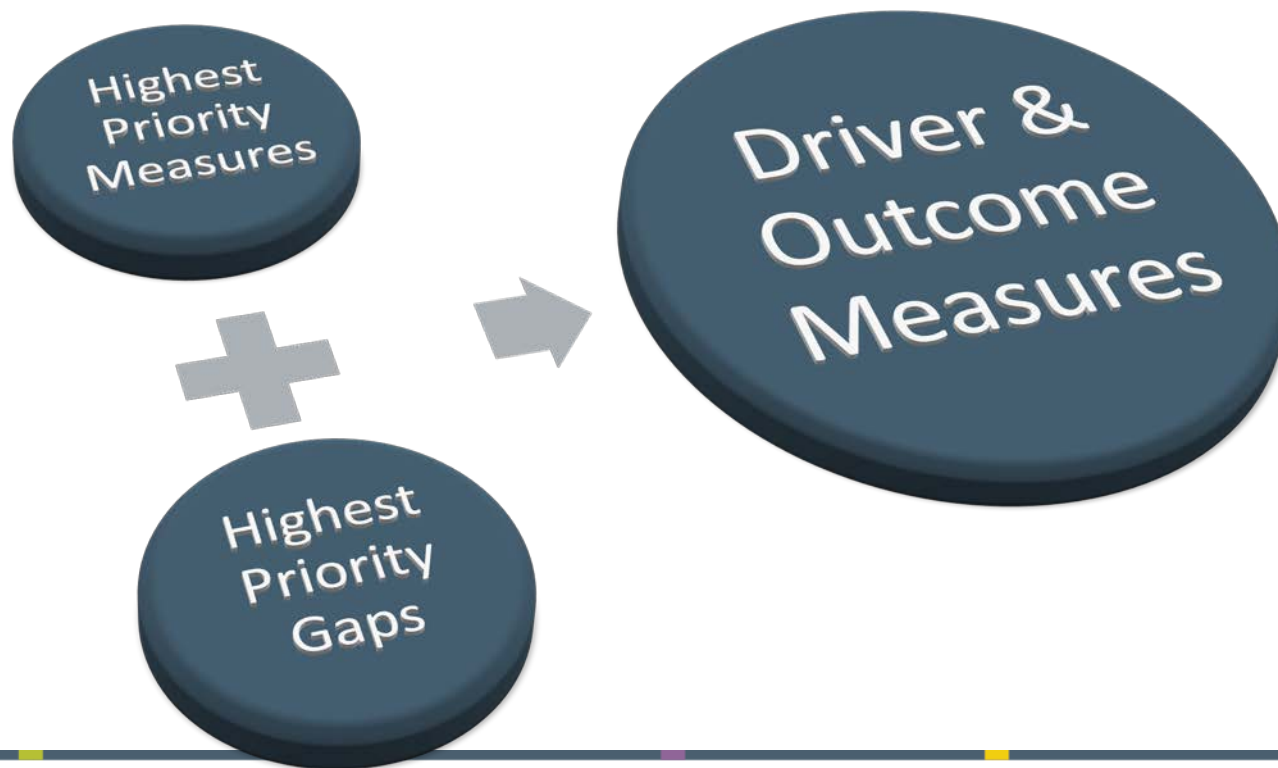
Example: Total Harm



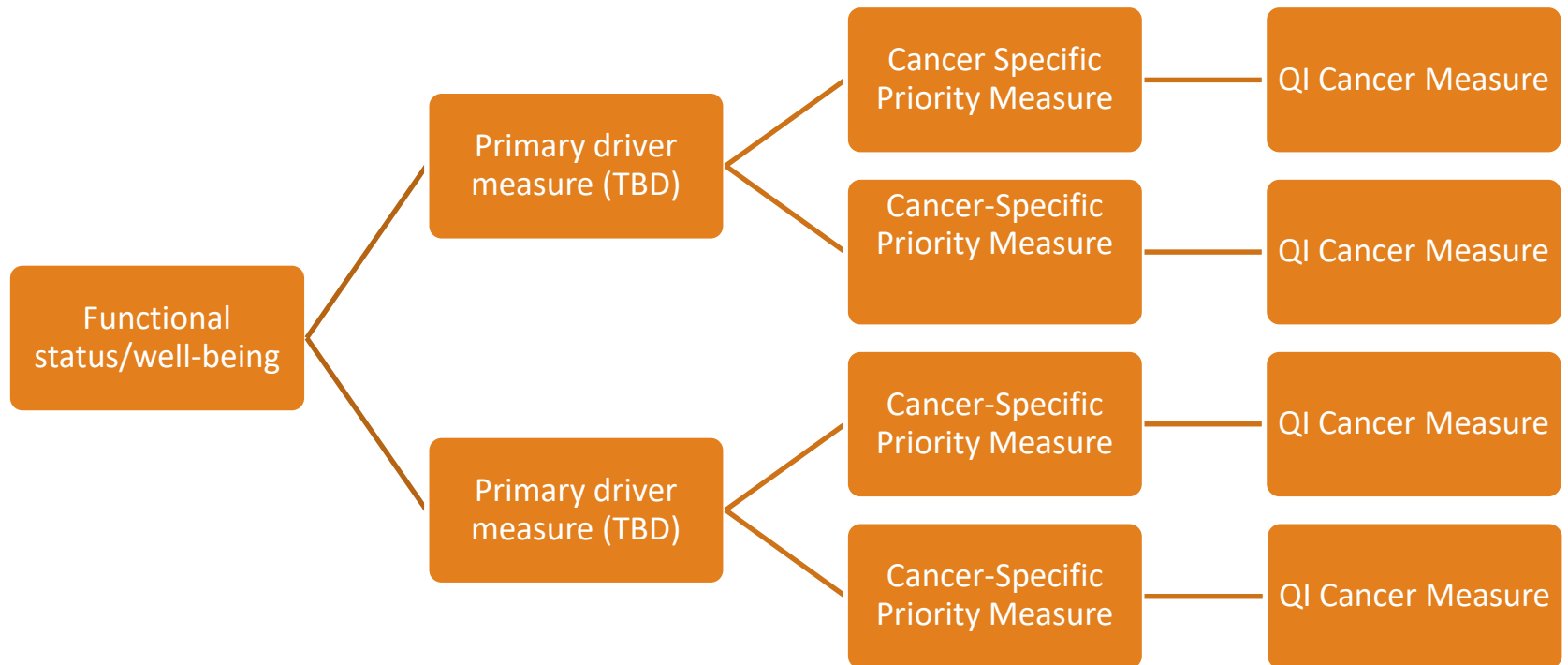
*** Gap**

NQF Cancer Measures and Gaps Prioritization Exercise

NQF Cancer Measures and Gaps Prioritization Exercise Objective



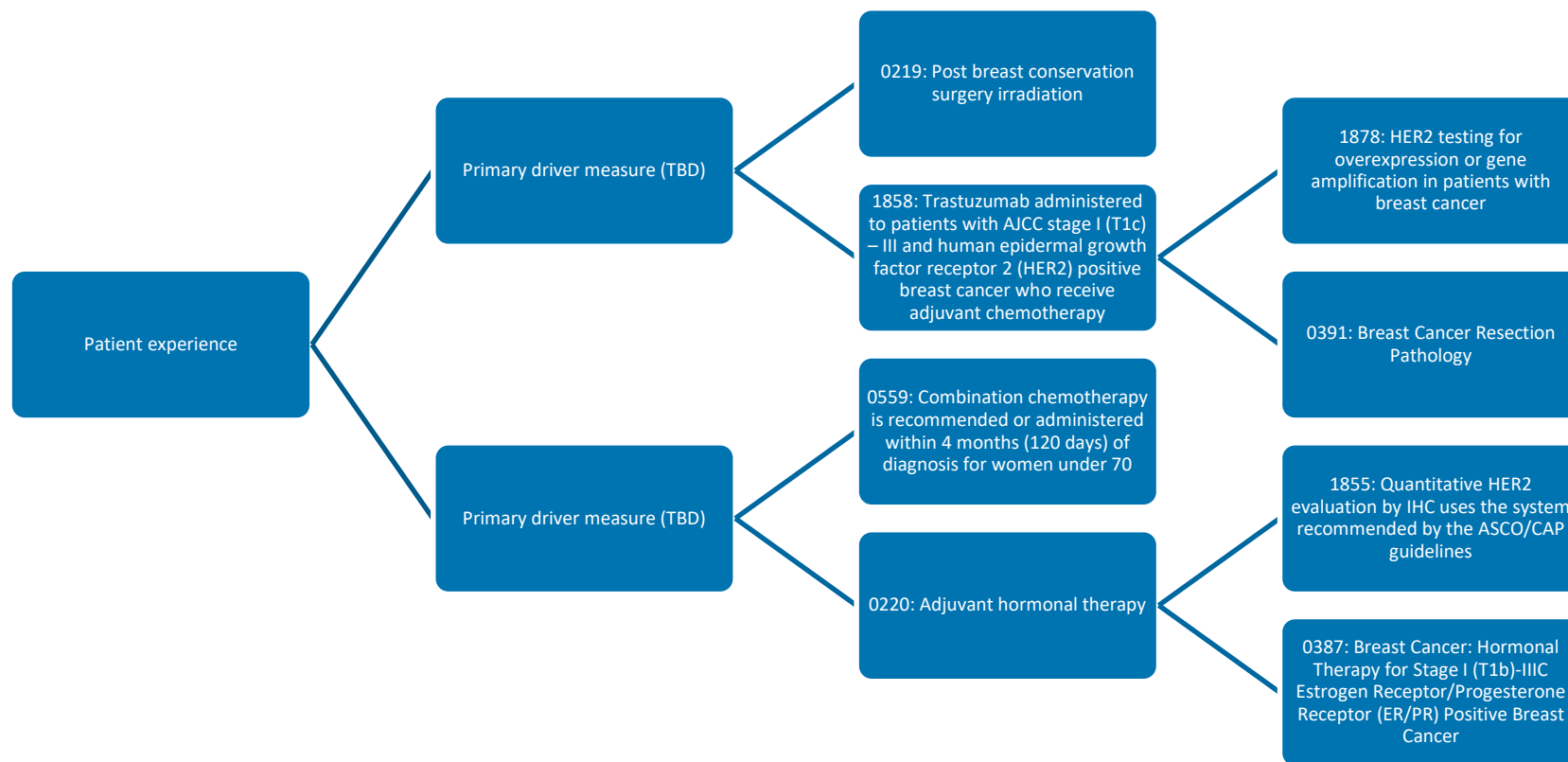
High-Impact Outcome: Functional Status/Well-Being



NQF Cancer Measures and Prioritization Criteria – Pilot Exercise

High-Impact Measure	Driver Measure	Priority Measure	Internal QI Measure
Functional status/well-being Patient experience (including care coordination, shared decision-making)	Primary driver measures used to improve high-impact outcomes TBD	0219: Post breast conservation surgery irradiation 1858: Trastuzumab administered to patients with AJCC stage I (T1c) – III and human epidermal growth factor receptor 2 (HER2) positive breast cancer who receive adjuvant chemotherapy 0559: Combination chemotherapy is recommended or administered within 4 months (120 days) of diagnosis for women under 70 with AJCC T1cN0M0, or Stage IB - III hormone receptor negative breast cancer. 0220: Adjuvant hormonal therapy	1878: HER2 testing for overexpression or gene amplification in patients with breast cancer 0391: Breast Cancer Resection Pathology Reporting- pT category (primary tumor) and pN category (regional lymph nodes) with histologic grade 1855: Quantitative HER2 evaluation by IHC uses the system recommended by the ASCO/CAP guidelines 0387: Breast Cancer: Hormonal Therapy for Stage I (T1b)–III, Estrogen Receptor/Progesterone Receptor (ER/PR) Positive Breast Cancer

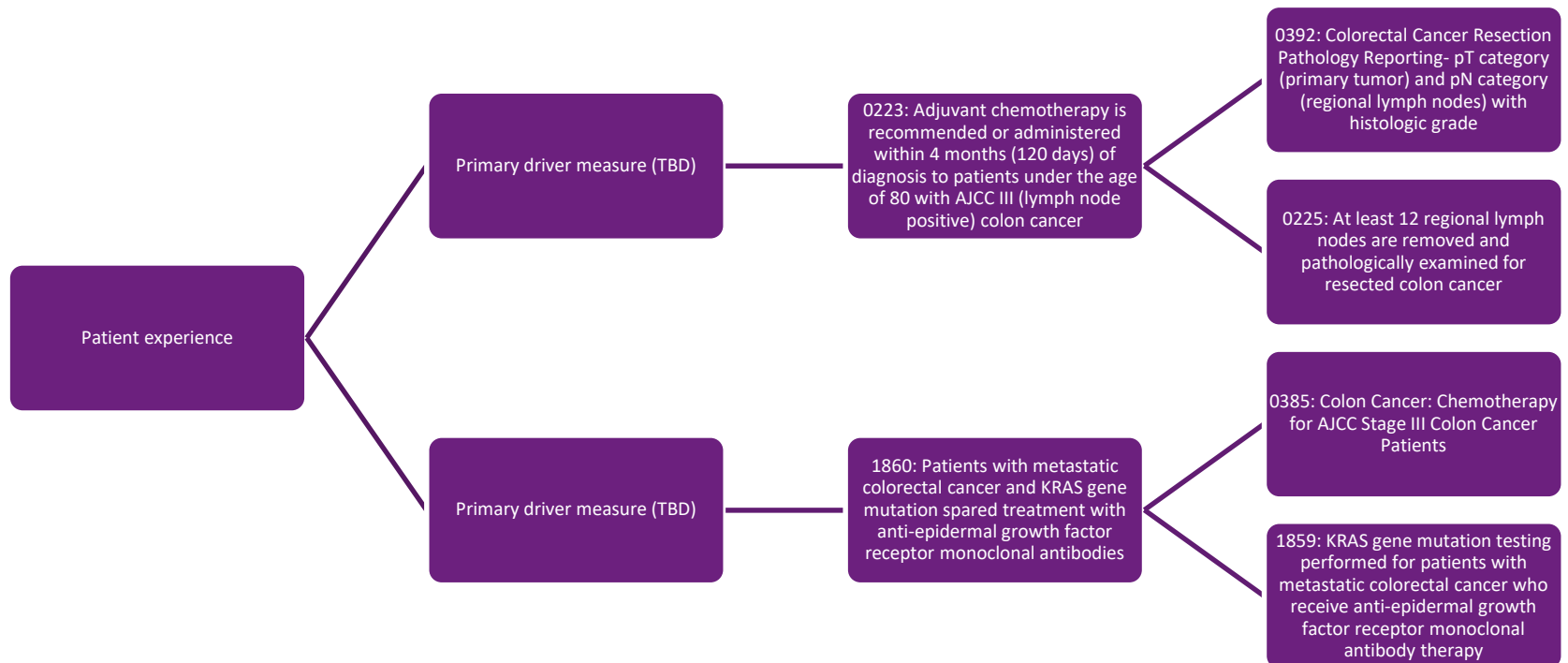
High-Impact Outcome: Patient Experience (including care coordination, shared decision-making) – *Breast Cancer*



NQF Cancer Measures and Prioritization Criteria – Pilot Exercise

High-Impact Measure	Driver Measure	Priority Measure	Internal QI Measure
Functional status/well-being	Primary driver measures used to improve high-impact outcomes TBD		
Patient experience (including care coordination, shared decision-making)		<p>0219: Post breast conservation surgery irradiation</p> <p>1858: Trastuzumab administered to patients with AJCC stage I (T1c) – III and human epidermal growth factor receptor 2 (HER2) positive breast cancer who receive adjuvant chemotherapy</p> <p>0559: Combination chemotherapy is recommended or administered within 4 months (120 days) of diagnosis for women under 70 with AJCC T1cN0M0, or Stage IB - III hormone receptor negative breast cancer.</p> <p>0220: Adjuvant hormonal therapy</p>	<p>1878: HER2 testing for overexpression or gene amplification in patients with breast cancer</p> <p>0391: Breast Cancer Resection Pathology Reporting- pT category (primary tumor) and pN category (regional lymph nodes) with histologic grade</p> <p>1855: Quantitative HER2 evaluation by IHC uses the system recommended by the ASCO/CAP guidelines</p> <p>0387: Breast Cancer: Hormonal Therapy for Stage I (T1b)-IIIC Estrogen Receptor/Progesterone Receptor (ER/PR) Positive Breast Cancer</p>

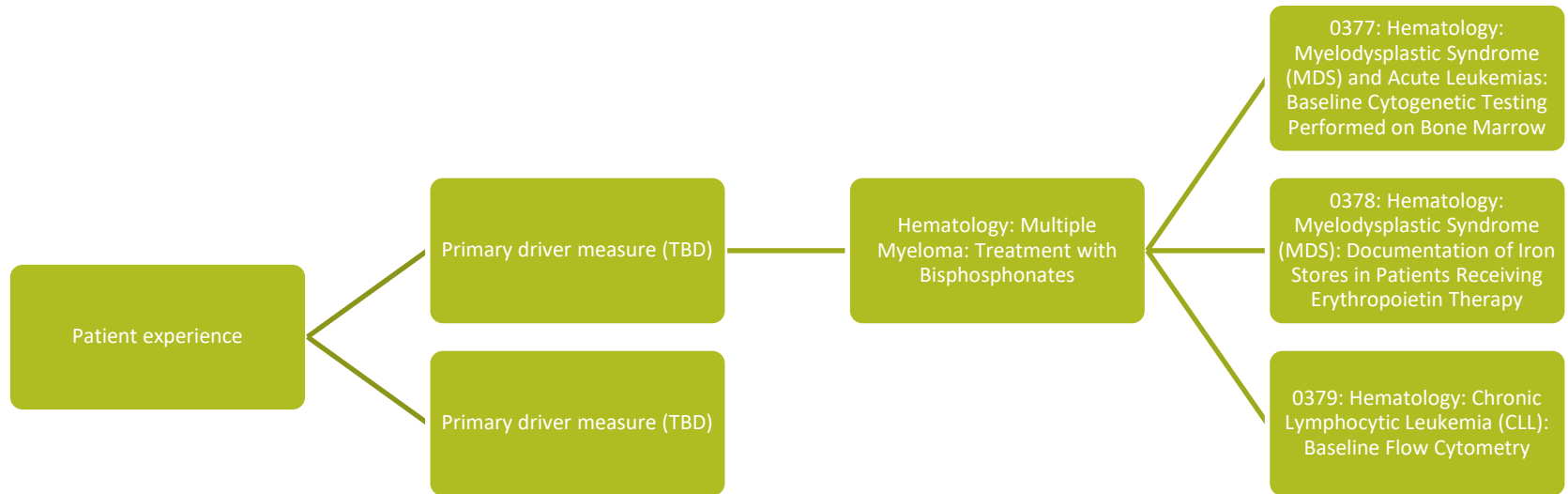
High-Impact Outcome: Patient Experience (including care coordination, shared decision-making) – *Colon Cancer*



NQF Cancer Measures and Prioritization Criteria – Pilot Exercise

High-Impact Measure	Driver Measure	Priority Measure	Internal QI Measure
Patient experience (including care coordination, shared decision-making)	Primary driver measures used to improve high-impact outcomes TBD	<p>0223: Adjuvant chemotherapy is recommended or administered within 4 months (120 days) of diagnosis to patients under the age of 80 with AJCC III (lymph node positive) colon cancer</p> <p>1860: Patients with metastatic colorectal cancer and KRAS gene mutation spared treatment with anti-epidermal growth factor receptor monoclonal antibodies</p>	<p>0392: Colorectal Cancer Resection Pathology Reporting- pT category (primary tumor) and pN category (regional lymph nodes) with histologic grade</p> <p>0225: At least 12 regional lymph nodes are removed and pathologically examined for resected colon cancer</p> <p>0385: Colon Cancer: Chemotherapy for AJCC Stage III Colon Cancer Patients</p> <p>1859: KRAS gene mutation testing performed for patients with metastatic colorectal cancer who receive anti-epidermal growth factor receptor monoclonal antibody therapy</p>

High-Impact Outcome: Patient Experience (including care coordination, shared decision-making) – *Hematology*



NQF Cancer Measures and Prioritization Criteria – Pilot Exercise

High-Impact Measure	Driver Measure	Priority Measure	Internal QI Measure
Patient experience (including care coordination, shared decision-making)	Primary driver measures used to improve high-impact outcomes TBD	0380: Hematology: Multiple Myeloma: Treatment with Bisphosphonates	0377: Hematology: Myelodysplastic Syndrome (MDS) and Acute Leukemias: Baseline Cytogenetic Testing Performed on Bone Marrow 0378: Hematology: Myelodysplastic Syndrome (MDS): Documentation of Iron Stores in Patients Receiving Erythropoietin Therapy 0379: Hematology: Chronic Lymphocytic Leukemia (CLL): Baseline Flow Cytometry

NQF Cancer Measures and Prioritization Criteria – Pilot Exercise

High-Impact Measure	Driver Measure	Priority Measure	Internal QI Measure
Patient experience (including care coordination, shared decision-making)	Primary driver measures used to improve high-impact outcomes TBD		1854: Barrett’s Esophagus 1853: Radical Prostatectomy Pathology Reporting 0390: Prostate Cancer: Adjuvant Hormonal Therapy for High or Very High Risk Prostate Cancer Patients 0381: Oncology: Treatment Summary Communication – Radiation Oncology 0383: Oncology: Plan of Care for Pain – Medical Oncology and Radiation Oncology (paired with 0384) 0384: Oncology: Pain Intensity Quantified – Medical Oncology and Radiation Oncology (paired with 0383) 0386: Oncology: Cancer Stage Documented

NQF Cancer Measures and Prioritization Criteria – Pilot Exercise

High-Impact Measure	Driver Measure	Priority Measure	Internal QI Measure
Total cost/high-value care	Primary driver measures used to improve high-impact outcomes TBD	1857: HER2 negative or undocumented breast cancer patients spared treatment with HER2-targeted therapies 0389/2963: Prostate Cancer: Avoidance of Overuse of Bone Scan for Staging Low Risk Prostate Cancer Patients	
Preventable harm/complications		1857: HER2 negative or undocumented breast cancer patients spared treatment with HER2-targeted therapies 1790: Risk-Adjusted Morbidity and Mortality for Lung Resection for Lung Cancer 1822: External Beam Radiotherapy for Bone Metastases 0389/2963: Prostate Cancer: Avoidance of Overuse of Bone Scan for Staging Low Risk Prostate Cancer Patients	0508: Diagnostic Imaging: Inappropriate Use of “Probably Benign” Assessment Category in Screening Mammograms 0509: Diagnostic Imaging: Reminder System for Screening Mammograms 1855: Quantitative HER2 evaluation by IHC uses the system recommended by the ASCO/CAP guidelines 2930: Febrile Neutropenia Risk Assessment Prior to Chemotherapy 0382: Oncology: Radiation Dose Limits to Normal Tissues

NQF Cancer Measures and Prioritization Criteria – Pilot Exercise

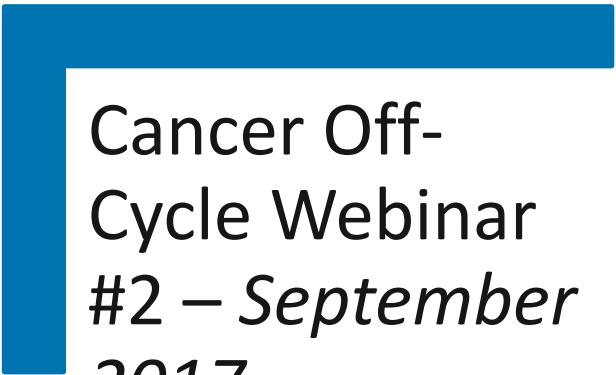
High-Impact Measure	Driver Measure	Priority Measure	Internal QI Measure
Prevention/healthy behaviors	Primary driver measures used to improve high-impact outcomes TBD		
Access to needed care			
Equity of care		<p>0219: Post breast conservation surgery irradiation</p> <p>0559: Combination chemotherapy is recommended or administered within 4 months (120 days) of diagnosis for women under 70 with AJCC T1cN0M0, or Stage IB - III hormone receptor negative breast cancer.</p> <p>0220: Adjuvant hormonal therapy</p>	<p>0225: At least 12 regional lymph nodes are removed and pathologically examined for resected colon cancer</p>

Public and Member Comment

Next Steps



Revise Priority
Measures/Gaps



Cancer Off-
Cycle Webinar
#2 – *September*
2017

Questions and Contact Information

- Cancer Project:
 - *Melissa Mariñelarena, Senior Director:*
mmarinelarena@qualityforum.org

- Prioritization Criteria:
 - *Jean-Luc Tilly, Project Manager:* jtilly@qualityforum.org
 - *John Bernot, Senior Director:* jbernot@qualityforum.org