



### Cancer Standing Committee – Measure Evaluation Post-Comment Web Meeting

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The National Quality Forum (NQF) convened the Cancer Standing Committee for a web meeting on July 13, 2020 to evaluate two fall 2019 measures, one that did not reach consensus and one for which the endorsement vote was postponed. Public comments were also reviewed.

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

NQF welcomed the Standing Committee and participants to the web meeting. NQF staff reviewed the meeting objectives. NQF thanked the Committee members for their continued dedication and time during this pandemic, given the COVID-19 impact on the healthcare enterprise. Committee members each introduced themselves and disclosed any conflicts of interests. Two committee members who had been inactive during the fall 2019 measure evaluation meeting that occurred on February 26, 2020 were asked not to participate in the post-comment discussion and voting.

Some Committee members were unable to attend the entire meeting. There were early departures and late arrivals. The vote totals reflect members present and eligible to vote. Although, initially, it appeared that quorum would not be met, two additional Committee members joined the call a few minutes late, allowing it to be met and maintained for the entirety of the discussion and voting.

#### Overview of Post-Comment Evaluation Process

NQF staff provided an overview of the process for voting on the measure requiring an endorsement vote, and discussion and revoting on the criterion that did not reach consensus. NQF clarified for the Committee that during the post-comment measure review, the criterion under consideration must exceed 60% Committee votes of “pass”; otherwise, it fails.

#### Measure Evaluation

During the meeting, the Cancer Standing Committee voted on one measure which had the endorsement vote postponed and one measure with one consensus not reached criterion from the fall 2019 evaluation cycle. A summary of the Committee deliberations is included below.

**Rating Scale:** H – High; M – Moderate; L – Low; I – Insufficient; NA – Not Applicable

#### 0384 Oncology: Medical and Radiation – Pain Intensity Quantified

##### *Measure Steward/Developer Representatives at the Meeting*

No measure steward or developer was present during the call.

##### *Standing Committee Votes*

- Overall Endorsement: Yes-15; No-0

### *Standing Committee Recommendation for Endorsement: Recommended*

The Standing Committee voted to recommend this measure for overall endorsement. This measure captures the percentage of patient visits, regardless of patient age, with a diagnosis of cancer currently receiving chemotherapy or radiation therapy in which pain intensity is quantified.

During the in-person evaluation meeting on February 26, 2020, there was a process error during the Committee's vote on evidence, therefore, the Committee did not vote on overall suitability for endorsement. A recap of the previous discussion and explanation of the process error was provided, and a Committee vote was captured during the July 13, 2020 post-comment meeting. The Committee recommended this measure for endorsement.

### **0223 Adjuvant chemotherapy is recommended, or administered within 4 months (120 days) of diagnosis for patients under the age of 80 with AJCC Stage III (lymph node positive) colon cancer**

#### *Measure Steward/Developer Representatives at the Meeting*

No measure steward or developer was present during the call.

#### *Standing Committee Votes*

- Validity: M-13; L-0; I-1
- Overall Endorsement: Yes-14; No-0

### *Standing Committee Recommendation for Endorsement: Recommended*

The measure passed during the Standing Committee's revote on validity, and the Committee then voted to recommend the measure for overall endorsement. This measure captures the percentage of patients, age = 18 and <80 at diagnosis, who have their first diagnosis of cancer (epithelial malignancy) that is lymph node positive and at American Joint Committee on Cancer (AJCC) stage III, whose primary tumor is of the colon and chemotherapy was recommended or administered within four months (120 days) of diagnosis.

During the in-person measure evaluation meeting on February 26, 2020, the Committee discussed the scientific acceptability of the measure properties and expressed concerns with validity resulting in consensus not reached. During the post-comment call on July 13, 2020, the Committee reviewed and discussed the validity testing along with the relevant comments received. It was noted that the developer did not complete data element validity testing which is generally required for NQF maintenance measures. In this case, the developer did provide results and process for the validity testing conducted and a clear rationale for why the measure continues to be valid. The Committee reviewed this information and agreed this measure has high face validity and measure specifications were consistently implemented within the registry program. The Committee voted and this measure passed on validity.

### **Review and Discussion of Public Comment and General Discussion**

The [draft report](#) for this measure cycle was posted on the project webpage for public and NQF member comment on March 30, 2020 for 60 days. The commenting period closed on May 29, 2020. Nicole Williams, NQF director, presented to the Committee a summary of the most salient comments received during the post-evaluation public and member comment period. NQF received four comments from one member organization and one member of the public.

## Measure-Specific Comments

Comments related to measures #0384 and #0223 are described below and were reviewed by the Committee during the discussion of the measures.

### **0384 Oncology: Medical and Radiation – Pain Intensity Quantified**

A comment received from the Alliance of Dedicated Cancer Centers (ADCC) expressed continued support for endorsement. Specifically, ADCC stated that they believe the use of Patient-Reported Outcome Measures (PROMs) are the preferred method for collecting meaningful patient data on pain and at this time neither fully developed PROMS nor the systems to capture and this type of measure are robust or prevalent enough for general use. Therefore, they expressed agreement with the Committee that it is vital to quantify pain and recommend continued endorsement. ADCC also mentioned that both NQF #0384 (Pain Intensity Quantified) and NQF #0383 (Plan of Care) offer utility in the cancer portfolio, noting that the measures are complementary in that it is not possible to determine which patients require a plan of care to address their pain if pain levels are not assessed.

### **0223 Adjuvant chemotherapy is recommended, or administered within 4 months (120 days) of diagnosis for patients under the age of 80 with AJCC Stage III (lymph node positive) colon cancer**

A comment received from the Alliance of Dedicated Cancer Centers (ADCC) expressed continued support for endorsement. The comment from ADCC stated that they were surprised the Committee did not reach consensus on scientific acceptability (validity)—a must-pass criterion, given that the American College of Surgeons Commission on Cancer (ACoS CoC) requires an annual review of a minimum of 10% of the annual caseload of the registry abstracts be performed to verify that abstracted data accuracy. This is also required for participating registries for measures NQF #0219 and NQF #0220, both of which passed validity with the Committee.

## Next Steps

Since both fall 2019 measures that were discussed were approved by the Committee for endorsement, they will progress to a Consensus Standards Approval Committee (CSAC) review in November 2020.