



NATIONAL QUALITY FORUM

Driving measurable health
improvements together

Memo

March 26, 2020

To: NQF members

From: NQF staff

Re: Cardiovascular, fall 2019 cycle draft report for review

Background

This report reflects the review of measures in the Cardiovascular project. In the fall 2019 cycle of this project, the 22-person Cardiovascular Standing Committee met in person to review seven measures—one new measure and six maintenance measures—against NQF's standard evaluation criteria. Four measures were recommended for endorsement; the Committee did not recommend three measures for endorsement.

Recommended Measures:

- **NQF 0018** Controlling High Blood Pressure (National Committee for Quality Assurance (NCQA))
- **NQF 0071** Persistence of Beta-Blocker Treatment After a Heart Attack (National Committee for Quality Assurance (NCQA))
- **NQF 0965** Discharge Medications (ACE/ARB, and beta blockers) in Eligible ICD/CRT-D Implant Patients (National Committee for Quality Assurance (NCQA))
- **NQF 3534** 30-Day All-Cause Risk Standardized Mortality Odds Ratio following Transcatheter Aortic Valve Replacement (TAVR) (American College of Cardiology (ACC))

Measures Not Recommended:

- **NQF 0670** Cardiac Stress Imaging Not Meeting Appropriate Use Criteria: Preoperative Evaluation in Low Risk Surgery Patients (American College of Cardiology (ACC))
- **NQF 0671** Cardiac Stress Imaging Not Meeting Appropriate Use Criteria: Routine Testing after Percutaneous Coronary Intervention (PCI) (American College of Cardiology (ACC))
- **NQF 0672** Cardiac Stress Imaging Not Meeting Appropriate Use Criteria: Testing in Asymptomatic, Low Risk Patients (American College of Cardiology (ACC))

NQF Member and Public Commenting

NQF members and the public are encouraged to provide comments via the online commenting tool on the draft report as a whole, or on the specific measures evaluated by the Cardiovascular Standing Committee.

Please note that commenting concludes on May 24, 2020 at 6:00 pm ET—no exceptions.