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## Cardiovascular, Spring 2020 Measure Review Cycle

**Measure Evaluation Standing Committee Meeting** 

Amy Moyer, Director Janaki Panchal, Manager Karri Albanese, Analyst Mike DiVecchia, Project Manager

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## Welcome



## Welcome

- The CenturyLink web platform will allow you to visually follow the presentation
- Please mute your lines when you are not speaking to minimize background noise.
- Please do not put the call on hold.
- You may submit questions to project staff via the CenturyLink web platform chat function.
- You may raise your hand using the CenturyLink web platform.

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## **Project Team — Cardiovascular Committee**





Amy Moyer, MS, PMP Director

Janaki Panchal, MSPH Manager



Karri Albanese, Analyst

Mike DiVecchia, MBA, PMP Project Manager



## Agenda

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

## Introductions and Disclosures of Interest



## Cardiovascular Spring 2020 Cycle Standing Committee

- Mary George, MD, MSPH, FACS, FAHA (Co-Chair)
- Thomas Kottke, MD, MSPH (Co-Chair)
- Linda Briggs, DNP
- Leslie Cho, MD
- Helene Clayton-Jeter, OD
- Joseph Cleveland, MD
- Michael Crouch, MD, MSPH, FAAFP
- Tim Dewhurst, MD, FACC
- Kumar Dharmarajan, MD, MBA
- William Downey, MD
- Howard Eisen, MD
- Naftali Zvi Frankel, MS

- Jake Galdo, PharmD, MBA, BCPS, BCGP
- Ellen Hillegass, PT, EdD, CCS, FAACVPR, FAPTA
- Charles Mahan, PharmD, PhC, RPh
- Soeren Mattke, MD, DSc
- Gwen Mayes, JD, MMSc
- Kristi Mitchell, MPH
- Jason Spangler, MD, MPH, FACPM
- Susan Strong
- Mladen Vidovich, MD
- David Walsworth, MD, FAAFP
- Daniel Waxman, MD, PhD, FACC

## **Measures Under Review**



## **Spring 2020 Cycle Measures**

- Four Maintenance Measures for Committee Review
  - 0066 Coronary Artery Disease (CAD) Angiotensin-Converting Enzyme (ACE) Inhibitor or Angiotensin Receptor Blocker (ARB)
  - 0067 Coronary Artery Disease (CAD) Antiplatelet Therapy
  - 0076 Optimal Vascular Care
  - 0290 Median Time to Transfer to Another Facility for Acute Coronary Intervention
- One Maintenance Measure Deferred to Future Cycle
  - 0669 Cardiac Imaging for Preoperative Risk Assessment for Non-Cardiac, Low Risk Surgery



## **NQF Scientific Methods Panel Review**

- The Scientific Methods Panel independently evaluated the Scientific Acceptability of this/these measures:
  - 0076 Optimal Vascular Care
  - 0715 Standardized adverse event ratio for children < 18 years of age undergoing cardiac catheterization
- The Panel, consisting of individuals with methodologic expertise, was established to help ensure a higher-level evaluation of the scientific acceptability of complex measures.
- The Panel's comments and concerns are provided to developers to further clarify and update their measure submission form with the intent of strengthening their measures to be evaluated by the Standing Committee.
- Certain measures that do not pass reliability and/or validity are eligible to be pulled by a standing committee member for discussion and revote.



## **NQF Scientific Methods Panel Review**

- I of 2 measures did not pass the SMP Review
  - 0715 Standardized adverse event ratio for children < 18 years of age undergoing cardiac catheterization, did not pass <u>validity</u>
- Scientific Acceptability is a must-pass criteria. The Panel felt measure 0715 needed to be revised to be methodologically sound for validity and it is therefore not eligible for re-vote.

## **Overview of Evaluation Process**



### Roles of the Standing Committee During the Evaluation Meeting

- Act as a proxy for the NQF multistakeholder membership
- Work with NQF staff to achieve the goals of the project
- Evaluate each measure against each criterion
  - Indicate the extent to which each criterion is met and rationale for the rating
- Make recommendations regarding endorsement to the NQF membership
- Oversee the portfolio of Cardiovascular measures



## **Ground Rules for Today's Meeting**

#### 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)**

- Related and Competing Discussion
- Overall Suitability for Endorsement

#### 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 (e.g., 16 of 23 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



## **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 the missed measures.



# **Questions?**

## **Voting Test**

## **Consideration of Candidate Measures**



### **0066 Coronary Artery Disease (CAD) Angiotensin-Converting Enzyme (ACE) Inhibitor or Angiotensin Receptor Blocker (ARB)**

- Measure Steward: American Heart Association
  - Maintenance

#### Brief Description of Measure:

 Percentage of patients aged 18 years and older with a diagnosis of coronary artery disease seen within a 12-month period who also have diabetes OR a current or prior LVEF < 40% who were prescribed ACE inhibitor or ARB therapy



### **0067 Coronary Artery Disease (CAD): Antiplatelet** Therapy

- Measure Steward: American Heart Association
  - Maintenance

#### Brief Description of Measure:

 Percentage of patients aged 18 years and older with a diagnosis of coronary artery disease (CAD) seen within a 12-month period who were prescribed aspirin or clopidogrel

## **NQF** Member and Public Comment

## Break



## **0076 Optimal Vascular Care**

- Measure Steward: MN Community Measurement
- Maintenance

#### Brief Description of Measure:

- The percentage of patients 18-75 years of age who had a diagnosis of ischemic vascular disease (IVD) and whose IVD was optimally managed during the measurement period as defined by achieving ALL of the following:
- Blood pressure less than 140/90 mmHg
- On a statin medication, unless allowed contraindications or exceptions are present
- Non-tobacco user
- On daily aspirin or anti-platelet medication, unless allowed contraindications or exceptions are present



### 0290 Median Time to Transfer to Another Facility for Acute Coronary Intervention

- Measure Steward: Centers for Medicare and Medicaid Services
  - Maintenance

#### Brief Description of Measure:

 This measure calculates the median time from emergency department arrival to time of transfer to another facility for acute coronary intervention.

## **NQF** Member and Public Comment

## Lunch

## **Related and Competing Discussion**



### **Related and Competing Measures**

If a measure meets the four criteria <u>and</u> there are endorsed/new related measures (same measure focus <u>or</u> same target population) or competing measures (both the same measure focus <u>and</u> same target population), the measures are compared to address harmonization and/or selection of the best measure.

	Same concepts for measure focus-target process, condition, event, outcome	Different concepts for measure focus-target process, condition, event, outcome
Same target population	<b>Competing measures-Select best</b> <b>measure</b> from competing measures or justify endorsement of additional measure(s).	<b>Related measures-Harmonize</b> on target patient population or justify differences.
Different target patient population	<b>Related measures-Combine</b> into one measure with expanded target patient population or justify why different harmonized measures are needed.	Neither harmonization nor competing measure issue.

The National Quality Forum. Measure Evaluation Criteria and Guidance for Evaluating Measure for Endorsement. September 2019; 32-33.



- 0081 Heart Failure (HF): Angiotensin-Converting Enzyme (ACE) Inhibitor or Angiotensin Receptor Blocker (ARB) or Angiotensin Receptor-Neprilysin Inhibitor (ARNI) Therapy for Left Ventricular Systolic Dysfunction (LVSD)
- 0081e Heart Failure (HF): Angiotensin-Converting Enzyme (ACE) Inhibitor or Angiotensin Receptor Blocker (ARB) or Angiotensin Receptor-Neprilysin Inhibitor (ARNI) Therapy for Left Ventricular Systolic Dysfunction (LVSD)
- 0137 ACEI or ARB for left ventricular systolic dysfunction- Acute Myocardial Infarction (AMI) Patients
- 1662 Angiotensin Converting Enzyme (ACE) Inhibitor or Angiotensin Receptor Blocker (ARB) Therapy



 0465 Perioperative Anti-platelet Therapy for Patients undergoing Carotid Endarterectomy

NQF Staff identified additional related measures:

- 0073 Ischemic Vascular Disease (IVD): Use of Aspirin of Another Antiplatelet
- 0076 Optimal Vascular Care



- 0067 Coronary Artery Disease (CAD): Antiplatelet Therapy
- 0068 Ischemic Vascular Disease (IVD): Use of Aspirin or Another Antiplatelet
- 0073 Ischemic Vascular Disease (IVD): Blood Pressure Control

NQF Staff identified an additional related measure:

• 0018 Controlling High Blood Pressure



• 0288 Fibrinolytic Therapy Received Within 30 Minutes of ED Arrival

## **NQF Member and Public Comment**

## **Next Steps**



### Activities and Timeline –Spring 2020 Cycle \*All times ET

Meeting	Date, Time
Draft Report Comment Period	August 3 – September 1, 2020
Committee Post-Comment Web Meeting	September 23, 2020, 1-3 PM ET
CSAC Review	November 17-18, 2020
Appeals Period (30 days)	November 23-December 22, 2020



## **Project Contact Info**

- Email: <u>cardiovascular@qualityforum.org</u>
- NQF phone: 202-783-1300
- Project page: <u>http://www.qualityforum.org/cardiovascular</u>
- SharePoint site: <u>http://share.qualityforum.org/Projects/cardiovascular/SitePages/Ho</u> <u>me.aspx</u>

## **Questions**?

## THANK YOU.

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