



**NATIONAL
QUALITY FORUM**

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Cardiovascular, Fall 2020 Measure Review Cycle

Post-Comment Standing Committee Meeting

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Welcome

Housekeeping Reminders WebEx

- This is a WebEx meeting with audio and video capabilities
- Optional: Dial **1-844-621-3956** and enter passcode **173 275 5735**
- Please place yourself on mute when you are not speaking
- We encourage you to use the following features
 - ▣ Chat box: to message NQF staff or the group
 - ▣ Raise hand: to be called upon to speak
- We will conduct a Committee roll call once the meeting begins

If you are experiencing technical issues, please contact the NQF project team at cardiovascular@qualityforum.org

Cardiovascular Team



**Amy Moyer, MS,
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Senior Director



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Manager



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**Senior Project
Manager**

Agenda

- Attendance
- Review and Discuss Public Comments
- Related and Competing Measure Discussion
- NQF Member and Public Comment
- Next Steps
- Adjourn

Attendance

Cardiovascular Fall 2020 Cycle Standing Committee

- Thomas Kottke, MD, MSPH (Co-Chair)
- Tim Dewhurst, MD, FACC (Co-Chair)
- Michael Alexander, MD, MPH, FACC
- Jacqueline Hawkins Alikhaani
- David Boston, MD, MS
- Linda Briggs, DNP
- Leslie Cho, MD
- Helene Clayton-Jeter, OD
- Abdulla Damluji, MD, MPH, PhD
- Kumar Dharmarajan, MD, MBA
- William Downey, MD
- Howard Eisen, MD
- Naftali Zvi Frankel, MS
- Jake Galdo, PharmD, MBA, BCPS, BCGP
- Lori Hull-Grommesh, DNP, RN, APRN-BC, ACNP-BC, NEA-BC, FAANP
- Wen-Chih Hank Wu, MD, MPH
- Tiffany Johnson
- Charles Mahan, PharmD, PhC, RPh
- Soeren Mattke, MD, DSc
- Gwen Mayes, JD, MMSc
- Kristi Mitchell, MPH
- Ashley Tait-Dinger, MBA
- David Walsworth, MD, FAAFP
- Daniel Waxman, MD, PhD, FACC
- Jeffrey Wexler

Review and Discuss Public Comments



0229 Hospital 30-Day, All-Cause, Risk-Standardized Mortality Rate (RSMR) Following Heart Failure (HF) Hospitalization

- **Measure Steward:** Centers for Medicare & Medicaid Services (CMS)/Yale Center for Outcomes Research & Evaluation (CORE)
- Maintenance measure – recommended for endorsement
- **Brief Description of Measure:**
 - ▣ The measure estimates a hospital-level 30-day, all-cause, risk-standardized mortality rate for patients discharged from the hospital with a principal diagnosis of HF. Mortality is defined as death for any cause within 30 days after the date of admission for the index admission. CMS annually reports the measure for patients who are 65 years or older and enrolled in fee-for-service (FFS) Medicare and hospitalized in non-federal hospitals or are patients hospitalized in Veterans Health Administration (VA) facilities.



0229 Hospital 30-Day, All-Cause, Risk-Standardized Mortality Rate (RSMR) Following Heart Failure (HF) Hospitalization

■ Summary of Comments Received:

- Three post-meeting comments
 - ▣ Measure reliability, particularly at lower case counts, does not meet reliability standards
 - ▣ Concern about decision to not include social risk adjustment
 - ▣ Concern that exclusions are inadequate (do not include palliative care or advanced therapies)



0230 Hospital 30-Day, All-Cause, Risk-Standardized Mortality Rate (RSMR) Following Acute Myocardial Infarction (AMI)

- **Measure Steward:** CMS/Yale CORE
- Maintenance measure – recommended for endorsement
- **Brief Description of Measure:**
 - ▣ The measure estimates a hospital-level 30-day risk-standardized mortality rate (RSMR) for patients discharged from the hospital with a principal diagnosis of AMI. Mortality is defined as death for any cause within 30 days after the date of admission for the index admission. CMS annually reports the measure for patients who are 65 years or older and are either Medicare fee-for-service (FFS) beneficiaries and hospitalized in non-federal hospitals or are hospitalized in Veterans Health Administration (VA) facilities.



0230 Hospital 30-Day, All-Cause, Risk-Standardized Mortality Rate (RSMR) Following Acute Myocardial Infarction (AMI)

- **Summary of Comments Received:**
- Two post-meeting comments
 - ▣ Measure reliability, particularly at lower case counts, does not meet reliability standards
 - ▣ Concern about decision to not include social risk adjustment
 - ▣ Concern that the number of outliers (best and worst performers) is insufficient to adequately distinguish performance

Related and Competing Discussion

Related and Competing Measures

- If a measure meets the four criteria **and** there are endorsed/new related measures (same measure focus **or** same target population) or competing measures (both the same measure focus **and** 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	Competing measures-Select best measure from competing measures or justify endorsement of additional measure(s).	Related measures-Harmonize on target patient population or justify differences.
Different target patient population	Related measures-Combine into one measure with expanded target patient population or justify why different harmonized measures are needed.	Neither harmonization nor competing measure issue.



Related and Competing Measures (continued)

- Related and competing measures will be grouped and discussed after recommendations for all related and competing measures are determined. Only measures recommended for endorsement will be discussed.
- Committee will not be asked to select a best-in-class measure if all related and competing measures are not currently under review. Committee can discuss harmonization and make recommendations. Developers of each related and competing measure will be encouraged to attend any discussion.



0229 Related Measures

- 0330 Hospital 30-day, all-cause, risk-standardized readmission rate (RSRR) following heart failure (HF) hospitalization (Yale CORE)
- 0358 Heart Failure Mortality Rate (IQI 16) (Agency for Healthcare Research and Quality)
- 0468 Hospital 30-day, all-cause, risk-standardized mortality rate (RSMR) following pneumonia hospitalization (Yale CORE)
- 1789 Hospital-Wide All-Cause Unplanned Readmission Measure (HWR) (Yale CORE)
- 1893 Hospital 30-Day, all-cause, risk-standardized mortality rate (RSMR) following chronic obstructive pulmonary disease (COPD) hospitalization (Yale CORE)
- 3502 Hybrid Hospital-Wide (All-Condition, All-Procedure) Risk-Standardized Mortality Measure (Yale CORE)
- 3504 Claims-Only Hospital-Wide (All-Condition, All-Procedure) Risk-Standardized Mortality Measure (Yale CORE)



0230 Related Measures

- 0229 Hospital 30-Day, All-Cause, Risk-Standardized Mortality Rate (RSMR) Following Heart Failure (HF) Hospitalization (Yale CORE)
- 0330 Hospital 30-day, all-cause, risk-standardized readmission rate (RSRR) following heart failure (HF) hospitalization (Yale CORE)
- 0468 Hospital 30-day, all-cause, risk-standardized mortality rate (RSMR) following pneumonia hospitalization (Yale CORE)
- 0505 Hospital 30-day all-cause risk-standardized readmission rate (RSRR) following acute myocardial infarction (AMI) hospitalization. (Yale CORE)
- 0506 Hospital 30-day, All-Cause, Risk-Standardized Readmission Rate (RSRR) Following Pneumonia Hospitalization (Yale CORE)
- 0730 Acute Myocardial Infarction (AMI) Mortality Rate
- 1893 Hospital 30-Day, all-cause, risk-standardized mortality rate (RSMR) following chronic obstructive pulmonary disease (COPD) hospitalization (Yale CORE)



0230 Related Measures Continued

- 2431 Hospital-level, risk-standardized payment associated with a 30-day episode-of-care for Acute Myocardial Infarction (AMI) (Yale CORE)
- 3502 Hybrid Hospital-Wide (All-Condition, All-Procedure) Risk-Standardized Mortality Measure (Yale CORE)
- 3504 Claims-Only Hospital-Wide (All-Condition, All-Procedure) Risk-Standardized Mortality Measure (Yale CORE)

NQF Member and Public Comment

Next Steps



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Activities and Timeline – Fall 2020 Cycle

***All times ET**

Meeting	Date, Time
CSAC Review	June 29 (9:00 AM – 5:00 PM) June 30 (9:00 AM – Noon)
Appeals Period (30 days)	July 7 – August 5



Project Contact Info

- Email: cardiovascular@qualityforum.org
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- Project page:
<http://www.qualityforum.org/Cardiovascular.aspx>
- SharePoint site:
<https://share.qualityforum.org/portfolio/Cardiovascular/SitePages/Home.aspx>

THANK YOU.

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