



NATIONAL  
QUALITY FORUM

# Cardiovascular, Spring 2019 Measure Review Cycle

*Standing Committee Meeting  
June 19-20, 2019*

*Melissa Mariñelarena, Senior Director  
Ameera Chaudhry, Project Analyst*

# Agenda

- Welcome
- Introductions and Disclosure of Interest
- Overview of Evaluation Process
- Consideration of Candidate Measures
- NQF Member and Public Comment
- Next Steps

# NQF Staff

- Project staff
  - ▣ *Melissa Mariñelarena, RN, MPA, CPHQ, Senior Director*
  - ▣ *Ameera Chaudhry, MS, Project Analyst*
- NQF Quality Measurement leadership staff
  - ▣ *Elisa Munthali, Senior Vice President*

# Day 1

# Introductions and Disclosure of Interest

# Cardiovascular Standing Committee

- Mary George, MD, MSPH, FACS, FAHA (Co-chair)
- Thomas Kottke, MD, MSPH (Co-chair)
- Carol Allred, BA
- Linda Baas, PhD, RN
- Linda Briggs, DNP
- Leslie Cho, MD
- Joseph Cleveland, MD
- Michael Crouch, MD, MSPH, FAAFP
- Elizabeth DeLong, PhD
- Kumar Dharmarajan, MD, MBA
- William Downey, MD
- Brian Forrest, MD
- Naftali Frankel, MS
- Ellen Hillegass, PT, EdD, CCS, FAACVPR, FAPTA
- Thomas James, MD
- Charles Mahan, PharmD, PhC, RPh
- Joel Marrs, PharmD, FCCP, FASHP, FNLA, BCPS-AQ Cardiology, BCACP, CLS
- Kristi Mitchell, MPH
- Gary Puckrein, PhD
- Nicholas Ruggiero, MD FACP FACC FSCAI FSVM FCPP
- Susan Strong
- Jason Spangler, MD, MPH, FACPM
- Mladen Vidovich, MD
- Daniel Waxman, MD, PhD

# Cardiovascular Measures Under Review

## Measures for Maintenance Evaluation

- **0070** Coronary Artery Disease (CAD): Beta-Blocker Therapy-Prior Myocardial Infarction (MI) or Left Ventricular Systolic Dysfunction (LVEF <40%)
- **0070e** Coronary Artery Disease (CAD): Beta-Blocker Therapy-Prior Myocardial Infarction (MI) or Left Ventricular Systolic Dysfunction (LVEF <40%) eCQM
- **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) eCQM
- **0083** Heart Failure (HF): Beta-Blocker Therapy for Left Ventricular Systolic Dysfunction (LVSD)
- **0083e** Heart Failure (HF): Beta-Blocker Therapy for Left Ventricular Systolic Dysfunction (LVSD) eCQM

# NQF Scientific Methods Panel Review

- None of the measures from the Spring 2019 Cycle were reviewed by the Scientific Methods Panel.



# Overview of Evaluation Process

# Cardiovascular Portfolio of Measures

- This project evaluates measures related to Cardiovascular conditions that can be used for accountability and public reporting for adult populations in outpatient settings of care.
- The spring phase of this project addresses the following conditions:
  - ▣ *Myocardial Infarction*
  - ▣ *Heart Failure*
- NQF solicits new measures for possible endorsement.
- NQF currently has more than 50 endorsed measures within the cardiovascular area. Endorsed measures undergo periodic evaluation to maintain endorsement — “maintenance.”

# 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
- Select 2-year or 3-year terms

# Standing Committee Responsibilities

## **Oversee NQF's Cardiovascular Portfolio of Measures:**

- Provide input on the relevant measurement framework(s)
- Know which measures are included in the portfolio and understand their importance to the portfolio
- Consider issues of measure standardization and parsimony when assessing the portfolio
- Identify measurement gaps in the portfolio
- Become aware of other NQF measurement activities for the topic area(s)
- Be open to external input on the portfolio
- Provide feedback about how the portfolio should evolve
- Consider the current portfolio when evaluating individual 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
- Avoid dominating a discussion and allow others to contribute
- Indicate agreement without repeating what has already been said

# Process for Measure Discussion and Voting

- Brief introduction by measure developer (2-3 minutes)
- Lead discussants will begin Committee discussion for each criterion:
  - ▣ *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*
    - » 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

# Voting

- Votes will be taken after the discussion of each criterion
- Importance to measure and report (must pass):
  - ▣ *Vote on Evidence*
  - ▣ *Vote on Gap*
- Scientific acceptability of measure properties (must pass):
  - ▣ *Vote on Reliability*
  - ▣ *Vote on Validity*
- Feasibility
- Use (must pass)
  - ▣ *Must pass for maintenance measures*
- Usability
- If a measure does not pass a must-pass criterion, discussion and subsequent voting on remaining criteria will stop.
- Vote on the measure as specified

# Major Endorsement Criteria (page 28)

- **Importance to measure and report:** Goal is to measure those aspects with greatest potential of driving improvements; if not important, the other criteria are less meaningful (must-pass)
- **Reliability and Validity-Scientific Acceptability of measure properties:** Goal is to make valid conclusions about quality; if not reliable and valid, there is risk of improper interpretation (must-pass)
- **Feasibility:** Goal is to, ideally, cause as little burden as possible; if not feasible, consider alternative approaches
- **Usability and Use:** Goal is to use for decisions related to accountability and improvement; if not useful, probably do not care if feasible
- **Comparison to related or competing measures**



# Achieving Consensus

- Quorum: 66% of the Committee
- Pass/Recommended: Greater than 60% “Yes” votes of the quorum (this percent is the sum of high and moderate)
- Consensus not reached (CNR): 40-60% “Yes” votes (inclusive of 40% and 60%) of the quorum
- Does not pass/Not Recommended: Less than 40% “Yes” votes of the quorum
- CNR measures move forward to public and NQF member comment and the Committee will revote

# Voting During Today's Meeting

- We are piloting a new voting tool that allows Committee members to vote via computer.
- You received instructions on how to vote.
- When voting opens, please enter your first and last name where shown. Click “Continue.”
- You are now ready to vote from the options on the screen.
- Please alert an NQF staff member if you are having difficulty with the new electronic voting system

# Questions?

# Consideration of Candidate Measures

# Consideration of Candidate Measures

## Measure 0070 Coronary Artery Disease (CAD): Beta-Blocker Therapy-Prior Myocardial Infarction (MI) or Left Ventricular Systolic Dysfunction (LVEF <40%)

- **Measure Type:** Process
- **Description:** Percentage of patients aged 18 years and older with a diagnosis of coronary artery disease seen within a 12-month period who also have a prior MI or a current or prior LVEF <40% who were prescribed beta-blocker therapy

## 0070e Coronary Artery Disease (CAD): Beta-Blocker Therapy-Prior Myocardial Infarction (MI) or Left Ventricular Systolic Dysfunction (LVEF <40%) eCQM

- **Measure Type:** Process
- **Description:** Percentage of patients aged 18 years and older with a diagnosis of coronary artery disease seen within a 12-month period who also have a prior MI or a current or prior LVEF <40% who were prescribed beta-blocker therapy

## 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)

- **Measure Type:** Process
- **Description:** Percentage of patients aged 18 years and older with a diagnosis of heart failure (HF) with a current or prior left ventricular ejection fraction (LVEF) < 40% who were prescribed ACE inhibitor or ARB or ARNI therapy either within a 12-month period when seen in the outpatient setting OR at each hospital discharge



## 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) eCQM

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# NQF Member and Public Comment

# Next Steps

# Next Steps

\*All times ET

Meeting	Date/Time
Measure Evaluation Web Meeting #2	June 20, 2019 (11:30 -1:30 pm ET)

# Day 2

# Roll Call

# Cardiovascular Standing Committee

- Mary George, MD, MSPH, FACS, FAHA (Co-chair)
- Thomas Kottke, MD, MSPH (Co-chair)
- Carol Allred, BA
- Linda Baas, PhD, RN
- Linda Briggs, DNP
- Leslie Cho, MD
- Joseph Cleveland, MD
- Michael Crouch, MD, MSPH, FAAFP
- Elizabeth DeLong, PhD
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- Does not pass/Not Recommended: Less than 40% “Yes” votes of the quorum
- CNR measures move forward to public and NQF member comment and the Committee will revote

# Questions?

# Consideration of Candidate Measures

# 0083 Heart Failure (HF): Beta-Blocker Therapy for Left Ventricular Systolic Dysfunction (LVSD)

- **Measure Type:** Process
- **Description:** Percentage of patients aged 18 years and older with a diagnosis of heart failure (HF) with a current or prior left ventricular ejection fraction (LVEF) < 40% who were prescribed beta-blocker therapy either within a 12-month period when seen in the outpatient setting OR at each hospital discharge

# 0083e Heart Failure (HF): Beta-Blocker Therapy for Left Ventricular Systolic Dysfunction (LVSD) eCQM

- **Measure Type:** Process
- **Description:** Percentage of patients aged 18 years and older with a diagnosis of heart failure (HF) with a current or prior left ventricular ejection fraction (LVEF) < 40% who were prescribed beta-blocker therapy either within a 12-month period when seen in the outpatient setting OR at each hospital discharge

# Related and Competing Measure Discussion

# NQF Member and Public Comment

# Next Steps



# Next Steps

\*All times ET

Meeting	Date/Time
Committee Post-Meeting Web Meeting	June 27, 2019 (3-5 pm ET)
Post-Comment Web Meeting	September 24, 2019 (11–1 pm ET)

# Project Contact Info

- Email: [cardiovascular@qualityforum.org](mailto:cardiovascular@qualityforum.org)
- NQF phone: 202-783-1300
- Project page:  
[http://www.qualityforum.org/Project\\_Pages/Cardiovascular.aspx](http://www.qualityforum.org/Project_Pages/Cardiovascular.aspx)
- SharePoint site:  
<http://share.qualityforum.org/Projects/Cardiovascular/SitePages/Home.aspx>

# Questions?

# Thank You