



Cardiovascular Standing Committee – Post-Comment Web Meeting

The National Quality Forum (NQF) convened a public web meeting for the Cardiovascular Standing Committee on June 30, 2020.

Welcome, Introductions, and Review of Web Meeting Objectives

Amy Moyer, NQF director, welcomed participants to the web meeting. Ms. Moyer provided an overview of the meeting objectives and conducted the Committee roll call. The Committee co-chairs, Mary George, MD, MSPH, FACS, FAHA, and Tom Kottke, MD, MSPH, welcomed the Committee to the call.

Ms. Moyer reminded the Committee that commenting periods for all measures evaluated in the fall 2019 cycle were extended from 30 days to 60 days. Based on the comments received during this 60-day extended commenting period, measures entered one of two tracks:

Track 1: Measures Continuing in Fall 2019 Cycle

Measures that did not receive public comments or only received comments in support of the Standing Committees' recommendations

Track 2: Measures Deferred to Spring 2020 Cycle

Fall 2019 measures requiring further action or discussion from a Standing Committee were deferred to the spring 2020 cycle

Review and Discuss Public Comments Received

Ms. Moyer reported that NQF received two comments, one each, on two different measures during the 60-day extended commenting period. The comments were from two different NQF member organizations. Ms. Moyer briefly reviewed the comment received for fall 2019 measure NQF #3534: *30 Day All-cause Risk Standardized Mortality Odds Ratio following Transcatheter Aortic Valve Replacement (TAVR)*. This measure was recommended for endorsement by the Standing Committee during the fall 2019 cycle. The comment was supportive of the measure and provided recommendations for future areas of measure development, both for aortic stenosis and for TAVR. The Committee had no questions regarding the comment. Measure #3534 will be included in Track 1.

Ms. Moyer then briefly reviewed the fall 2019 measure NQF #0018 *Controlling High Blood Pressure*. This measure was recommended for endorsement by the Standing Committee during the fall 2019 cycle. Ms. Moyer also provided a summary of the Committee discussion on this measure from the fall 2019 cycle. The comment outlined the following concerns:

- The definition of blood pressure (BP) control does not align with the American Academy of Family Physician's (AAFP) clinical guidelines, specifically the recommendation of a goal SBP < 150 mmHg and goal DBP < 90 mmHg in the general population aged ≥ 60 years.
- That self-monitoring and reporting of blood pressure by the patient is not allowed.

- Using blood pressure readings taken over time as this may be more reliable than the point reading used for this measure.

Dr. George and Dr. Kottke facilitated the Standing Committee discussion in response to the concerns highlighted in the comment. The Committee noted that all three concerns had been discussed during the initial measure evaluation meeting and included in the draft report for comment. The Committee discussed the challenges in determining the best evidence-based blood pressure goals, given conflicting guideline recommendations and the trade-offs between avoiding complications due to high blood pressure and minimizing potential side effects due to treatment. The Committee noted that while targets for patients must be individualized, this measure covers a broad population at the health plan level. The Committee also noted that the appropriate target for the measure is not 100% and that the developer had introduced exclusions in this cycle to remove vulnerable populations from the measure denominator.

Ms. Moyer noted that the specifications reviewed for endorsement included out-of-office blood pressures if the readings are taken directly from the device or a physician reads the device. The developer affirmed this and added that they will be further updating the specifications to include any blood pressure readings in the medical record, even if patient reported. The Committee had no questions or comments. The developer stated they would like to transition from point readings to a series of readings as suggested in the commenter concern; however most health plans are gathering this data via chart abstraction and it is not currently feasible for the plans to capture a series of blood pressure readings. The Committee had no questions or comments and they reaffirmed their original conclusions and recommendation for endorsement. Measure #0018 will be included in *Track 2*.

Public Comment

No public or NQF member comments were provided during the post-comment web meeting.

Next Steps

Karri Albanese, NQF analyst, reviewed next steps. The Committee will meet again in January 2020 for the fall 2020 orientation web meeting. Ms. Albanese also informed the Committee that the CSAC would consider the Committee's endorsement recommendations for Track 1 measures during its July 28-29, 2020 meeting. Endorsement recommendations for Track 2 measures will be considered during the November 17-18 CSAC meeting.