

NATIONAL QUALITY FORUM

CALL FOR MEASURES: CARDIOVASCULAR ENDORSEMENT MAINTENANCE 2010

The human and financial costs of cardiovascular disease are enormous. Heart disease is the leading cause of death for men and women in the United States and will cost the United States \$316.4 billion in 2010. Hypertension affects 1 in 3 Americans which increases their risk for heart disease, stroke or kidney disease and will cost \$76.6 billion in health care services, medications, and missed days of work.¹

NQF has endorsed a large number of consensus standards to evaluate the quality of care for cardiovascular conditions in the ambulatory and hospital settings over the past 9 years. As the quality measurement enterprise has matured better data systems have become available, electronic health records are closer to reality and the demand for meaningful performance measures has prompted development of more sophisticated measures of healthcare processes and outcomes for cardiovascular disease. An evaluation of all NQF-endorsed[®] cardiovascular measures and consideration of new measures will ensure the currency of NQF's portfolio of voluntary consensus standards.

This Consensus Standards Endorsement Maintenance project consists of two activities:

1. Evaluation of new submissions of measures for cardiovascular conditions including: hypertension, coronary artery disease, acute myocardial infarction (AMI), percutaneous coronary intervention (PCI), heart failure, atrial fibrillation, or any other heart disease and any treatments, diagnostic studies, interventions, or procedures associated with these conditions.

Submitted measures may be:

- a. structure, process, outcome or composite measures;
 - b. applicable to any care setting and ideally applicable to multiple care settings; and
 - c. applicable to any age, including children as appropriate.
2. Maintenance of endorsement for NQF-endorsed voluntary cardiovascular consensus standards that were endorsed prior to [June 2008](#).

Due to the number of measures, the project will be conducted in two phases:

¹ Lloyd-Jones D, Adams RJ, Brown TM, et al. Heart Disease and Stroke Statistics—2010 Update. A Report from the American Heart Association Statistics Committee and Stroke Statistics Subcommittee. *Circulation*. 2010;121(7):e46-e215.

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Phase 1 – coronary artery disease, AMI, and PCI, including treatments, diagnostic studies, interventions, or procedures associated with these conditions.

The *Call for Measures* for Phase 1 will begin on September 29, 2010.

The online submission forms for measures undergoing maintenance and new measure submissions will be available **September 15, 2010**.

Phase 2 – hypertension, heart failure, atrial fibrillation, and other heart disease and treatments, diagnostic studies, interventions, or procedures associated with these conditions.

The online submission forms for measures undergoing maintenance and new measure submissions will be available **September 15, 2010**.

Any organization or individual may submit measures for consideration. To be evaluated, candidate consensus standards must be within the scope of the project and meet the following general conditions as specified in the [measure evaluation criteria](#)

- A. The measure is in the public domain² or an [intellectual property agreement](#) is signed.
- B. The measure owner/steward verifies there is an identified responsible entity and process to maintain and update the measure on a schedule that is commensurate with the rate of clinical innovation, but at least every three years.³
- C. The intended use of the measure includes both public reporting and quality improvement.
- D. The requested measure submission information is complete. Generally, measures should be fully developed and tested* so that all the evaluation criteria have been addressed and information needed to evaluate the measure is provided.

*Measures without testing results as outlined in the [Scientific Acceptability of Measure Properties](#) may be eligible for time-limited endorsement if all of the following conditions are met:

- An incumbent measure does not address the specific topic of interest in the proposed measure;
- A critical timeline must be met (e.g., legislative mandate);
- The measure is not complex (e.g., composite, requires risk adjustment); and
- The measure steward must verify a timeline and committed resources to conduct testing within 12 months if granted time-limited endorsement.

² NQF requires any nongovernment organization submitting a measure for endorsement to execute a Measure Steward Agreement that addresses intellectual property protection and disclosure of the measure's proprietary components, including but not limited to specifications, risk adjustment methodologies, data collection instrument, data collection or analysis software, and database access. For details, please see the [Policy on Endorsement of Proprietary Measures](#).

³ Measure stewards must execute a [Measure Steward Agreement](#) with NQF.

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To **submit a measure**, please complete the following:

- [Online Measure Submission Form](#)
Clicking on this link will redirect you to the webpage for this project, from which you can access the online measure submission form.
- [Measure Steward Agreement Form](#)

Please note that no material will be accepted without fully executing the attached *Measure Steward Agreement Form*. All materials not meeting this requirement will be returned to the sender.

Materials must be submitted using the online submission process by 6:00 pm, Eastern Time on Thursday, October 28, 2010. If you have any questions, please contact, Reva Winkler, MD, MPH or Ashley Morsell, MPH at 202-783-1300 or via e-mail at cardiovascular@qualityforum.org
Thank you for your assistance with this project!