



TO: Care Coordination Standing Committee
FR: NQF Staff
RE: Post-Comment Call to Discuss Public and Member Comments
DA: May 11, 2017

Purpose of the Call

The Care Coordination Standing Committee will meet via conference call on Tuesday, May 16, 2017 from 2:00pm – 3:00pm ET. The purpose of this call is to:

- Review and discuss comments received during the post-evaluation public and member comment period.
- Provide input on proposed responses to the post-evaluation comments.
- Determine whether reconsideration of any measures or other courses of action are warranted.

Due to time constraints, during this call we will review comments by exception where the Committee disagrees with the proposed responses.

Standing Committee Actions

1. Review this briefing memo and [Draft Report](#).
2. Review and consider the full text of all comments received and the proposed responses to the post-evaluation comments (see [Comment Table](#)).
3. Be prepared to provide feedback and input on proposed post-evaluation comment responses.

Conference Call Information

Please use the following information to access the conference call line and webinar:

Speaker dial-in #: 877-457-4684 (*NO CONFERENCE CODE REQUIRED*)
Web Link: <http://nqf.commpartners.com/se/Rd/Mt.aspx?889415>
Registration Link: <http://nqf.commpartners.com/se/Rd/Rg.aspx?889415>

Background

On February 22, 2017, the 20-member [Care Coordination Standing Committee](#) met during a one-day in-person meeting to evaluate seven measures against NQF's standard evaluation criteria. The Committee evaluated two newly-submitted measures and five measures undergoing maintenance review. The Committee recommended one maintenance measure for endorsement. The Committee did not recommend the remaining six measures for endorsement.

Comments Received

NQF solicits comments on measures undergoing review in various ways and at various times throughout the evaluation process. First, NQF solicits comments on endorsed measures on an ongoing basis through the Quality Positioning System (QPS). Second, NQF solicits member and

public comments prior to the evaluation of the measures via an online tool located on the project webpage. Third, NQF opens a 30-day comment period to both members and the public after measures have been evaluated by the full committee and once a report of the proceedings has been drafted.

Pre-evaluation comments

The pre-evaluation comment period was open from January 9, 2017 to January 23, 2017 for all seven measures under review. No pre-evaluation comments were received.

Post-evaluation comments

The Draft Report was posted for Public and Member comment on the NQF website from April 3, 2017 to May 2, 2017. During this commenting period, NQF received 20 comments from six member organizations:

Consumers – 0	Professional – 2
Purchasers – 0	Health Plans – 1
Providers – 1	QMRI – 2
Supplier and Industry – 0	Public & Community Health – 0

In order to facilitate discussion, the majority of the post-evaluation comments have been categorized into major topic areas or themes. Where possible, NQF staff has proposed draft responses for the Committee to consider. Although all comments and proposed responses are subject to discussion, we will not necessarily discuss each comment and response on the post-comment call. Instead, we will spend the majority of the time considering the major topics and/or those measures with the most significant issues that arose from the comments. Note that the organization of the comments into major topic areas is not an attempt to limit Committee discussion.

We have included all of the comments that we received in the Comment Table. This comment table contains the commenter's name, comment, associated measure, topic (if applicable), and draft responses for the Committee's consideration. Please refer to this comment table to view and consider the individual comments received and the proposed responses to each comment and their disposition.

Three themes were identified in the post-evaluation comments, as follows:

1. Support for the measure
2. Transition of care measures
3. Submission of additional data

Theme 1 - Support for the measure

Measure **#0326** *Advance Care Plan* received two comments supporting the Committee's recommendation to endorse the measure. However, one commenter noted that claims data do not reliably capture the care plan and the physician does not always bill for this service. Another commenter suggested being mindful of implementation challenges and any unintended consequences. During the in-person meeting, the Committee did not express any concerns with the validity of the measure or any unintended consequences or potential harms to patients because of this measure.

Developer Response: We appreciate your support of endorsement for #0326: Advance Care Plan as a clinician/group practice level measure. We understand the challenges of retrieving this information through claims data and have expanded the list of codes that count toward the numerator for this measure. This list includes the CPT II codes: 1123F,

1124F and the CPT codes 99497, or 99497 and 99498. Medicare began allowing reimbursement for advance care planning discussions through codes 99497 and 99498 effective January 1, 2016. We expect this will encourage more physicians to record these codes when providing this service.

Action Item: None.

Theme 2 – Transition of Care Measures

Two commenters expressed their disappointment with the Committee's decision not to recommend four transition of care measures for continued endorsement: **#0646 Reconciled Medication List Received by Discharged Patients**, **#0647 Transition Record with Specified Elements Received by Discharged Patients**, **#0648 Timely Transmission of Transition Record** and **#0649 Transition Record with Specified Elements Received by Discharged Patients**.

Proposed Committee Response: Thank you for your comment. The Committee recognizes the importance of transitions of care measures and encourages the developer to monitor the performance of these measures. The Committee did not recommend the four transition of care measures for continued endorsement because the developer did not provide updated performance data and sufficient reliability testing data for each measure as required per NQF's measure evaluation criteria.

NQF Response: Performance scores on the measure as specified are required for maintenance of endorsement per NQF criteria. In addition, the developer did not submit disparities data as required by NQF. Please note that NQF does not require additional testing for maintenance measures if prior testing is adequate; however, prior testing must meet current NQF evaluation criteria.

Action Item: Does the Committee agree with the proposed response?

Theme 3 - Submission of additional data

Measure **#3170 Proportion of Children with ED Visits for Asthma with Evidence of Primary Care Connection before the ED Visit** and **#3171 Percentage of Asthma ED Visits Followed by Evidence of Care Connection** received two comments expressing their concern with the developer's intent to present reliability testing results to the Committee at the post-comment call. The developer did not provide measure score reliability testing data as required for composite measures. The commenters state that presenting new information at the end of the public and member commenting period that could lead to a change in the Committee's recommendations would comply with NQF's Consensus Development Process (CDP). The commenters recommend a second public and member commenting period if new data are presented.

Proposed Committee Response: Thank you for your comment. During the comment period, the developer did not submit new data as stated at the in-person meeting. The measures as currently specified do not meet NQF criteria and are not recommended for endorsement.

Action Item: Does the Committee agree with the proposed response?