# Memo



#### August 27, 2021

- To: NQF members
- From: NQF staff
- Re: Cost and Efficiency Spring 2021 Measure Review Cycle

## Background

This report reflects the review of measures in the Cost and Efficiency project. Measures in this portfolio address cost of care measures, which calculate total healthcare spending. The portfolio also includes efficiency measures, which NQF defines as the resource use or cost associated with a specific level of performance with respect to the other five Institute of Medicine (IOM) aims of quality: safety, timeliness, effectiveness, equity, and patient-centeredness.

The 22-person Cost and Efficiency Standing Committee reviewed five measures undergoing maintenance review. All five measures were recommended for continued endorsement.

#### **Recommended Measures:**

- NQF #1598 Total Resource Use Population-Based PMPM Index (HealthPartners)
- NQF #1604 Total Cost of Care Population-Based PMPM Index (HealthPartners)
- NQF #2431 Hospital-Level, Risk-Standardized Payment Associated With a 30-day Episode-of-Care for Acute Myocardial Infarction (AMI) (Centers for Medicare & Medicaid Services [CMS]/Yale Centers for Outcomes Research and Evaluation [CORE])
- NQF #2436 Hospital-Level, Risk-Standardized Payment Associated With a 30-Day Episode-of-Care for Heart Failure (HF) (CMS/Yale CORE)
- NQF #2579 Hospital-level, Risk-Standardized Payment Associated with a 30-day Episode of Care for Pneumonia (PN) (CMS/Yale CORE)

#### The Standing Committee requests comments on all measures.

### **NQF** Member and Public Commenting

NQF members and the public are encouraged to provide comments via the online commenting tool on the draft report as a whole, or on the specific measures evaluated by the Cost and Efficiency Standing Committee.

Please note that commenting concludes on September 27, 2021 at 6:00 pm ET—no exceptions.