



NATIONAL
QUALITY FORUM

Cost and Efficiency, Fall 2018 Measure Review Cycle

Standing Committee Measure Evaluation Web Meetings

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February 12, 2019

February 13, 2019

Welcome

NQF Staff

- Project staff
 - ▣ *Ashlie Wilbon, Senior Director*
 - ▣ *Poonam Bal, Senior Project Manager*
 - ▣ *Hiral Dudhwala, Project Manager*
 - ▣ *Taroon Amin, Consultant*

- NQF Quality Measurement leadership staff
 - ▣ *Elisa Munthali, Senior Vice President*

Agenda

- Welcome
- Consideration of One New Candidate Measure
- Public Comment
- Consideration of Related and Competing Measures
- Next Steps

Introductions and Disclosures of Interest

Standing Committee

- Brent Asplin, MD, MPH (co-chair)
- Cheryl Damberg, PhD (co-chair)
- Kristine Martin Anderson, MBA
- Larry Becker
- Mary Ann Clark, MHA
- Troy Fiesinger, MD, FAAFP
- Nancy Garrett, PhD
- Andrea Gelzer, MD, MS, FACP
- Rachael Howe, MS, BSN, RN
- Jennifer Eames Huff, MPH, CPEH
- Sunny Jhamnani, MD
- Lisa Latts, MD, MSPH, MBA, FACP
- Jason Lott, MD, MHS, MSHP, FAAP
- Martin Marciniak, MPP, PhD
- James Naessens, ScD, MPH
- Jack Needleman, PhD
- Janis Orlowski, MD, MACP
- Carolyn Pare
- John Ratliff, MD, FACS, FAANS
- Andrew Ryan, PhD (*Inactive*)
- Srinivas Sridhara, PhD, MHS
- Lina Walker, PhD
- Bill Weintraub, MD, FACC
- Herbert Wong, PhD
- Dolores Yanagihara, MPH

Voting Preparation

- Check your email for link to voting website
- Voting will be conducted during today's webinar
- Voting must be accessed and submitted on a computer; voting from a mobile device is not yet enabled

Measure Review

Cost and Efficiency Portfolio Review

NQF #	Measure Title
1598	Total Resource Use Population-Based PMPM Index
1604	Total Cost of Care Population-Based PMPM Index
2158	Medicare Spending Per Beneficiary
2431	Hospital-Level, Risk-Standardized Payment Associated with a 30-Day Episode of Care for Acute Myocardial Infarction (AMI)
2436	Hospital-Level, Risk-Standardized Payment Associated with a 30-Day Episode of Care for Heart Failure
2579	Hospital-Level, Risk-Standardized Payment Associated with a 30-Day Episode of Care for Pneumonia

Fall 2018 Cycle Measure Review

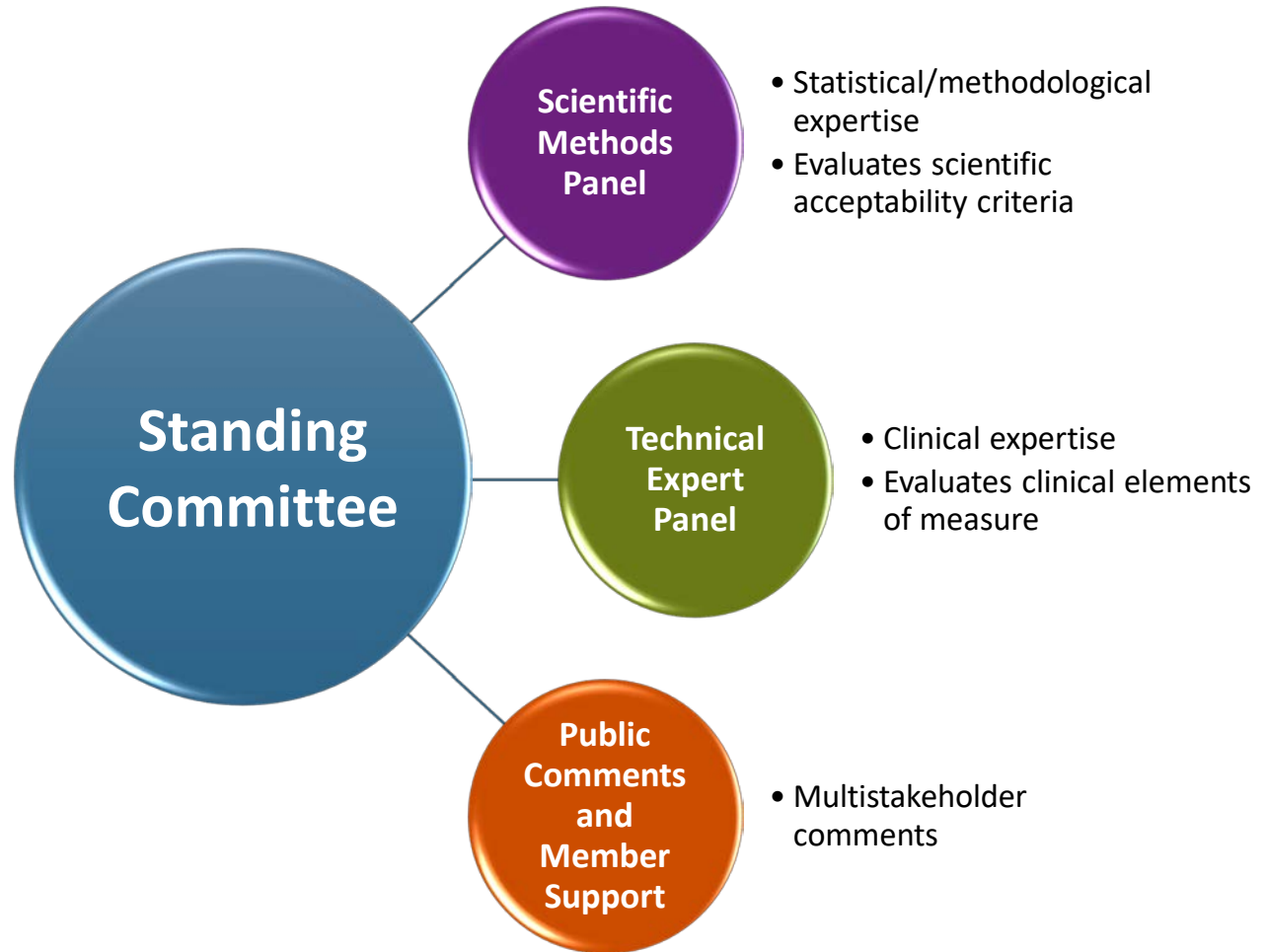
One New Measure

- 3474 Hospital-level, risk-standardized payment associated with a 90-day episode of care for elective primary total hip and/or total knee arthroplasty (THA/TKA)
 - ▣ *CMS/Yale-CORE*

Measure Evaluation Inputs

Measure Evaluation Inputs to the Standing Committee

- Multistakeholder Committee
- Evaluates all evaluation criteria
- Makes recommendation for endorsement



NQF Scientific Methods Panel Review

- The Panel consists of individuals with methodologic expertise
 - ▣ *Established to help ensure consistent evaluation of the scientific acceptability of complex measures for clinically focused Committees*
- Evaluated reliability and validity testing only, no (or limited) evaluation of threats to validity or specifications
- This measure received passing ratings for reliability and validity
- Scope of future reviews of CRU measures by Methods Panel is being evaluated

Technical Expert Panel Review

- (4) Orthopedic surgeons reviewed the clinical aspects of the measure specifications:
 - ▣ *Clinical Logic*
 - ▣ *Evidence to Support Clinical Logic*
 - ▣ *Measure Trigger and End Mechanisms of the Episode*
 - ▣ *Risk Adjustment (clinical factors)*
 - ▣ *Clinical Exclusions and Inclusions*
- No voting, qualitative review only

Committee Evaluation Process

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
- 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

- Brief introduction by measure developer (3-5 minutes)
- Lead discussants will begin Committee discussion for each criterion:
 - ▣ *Briefly explaining information on the criterion provided by the developer*
 - ▣ *Providing a brief summary of the pre-meeting evaluation comments (from TEP, SMP, or other Committee members)*
 - ▣ *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

Lead Discussants

- Lead Discussants:
 - ▣ *Lead the discussion on their assigned criterion*
 - ▣ *Begin the discussion of the measure evaluation including:*
 - » summarize the evaluation of each criterion based on all of the Standing Committee's pre-meeting evaluation comments
 - » highlight areas of concern or difference of opinion and the issues or questions posed in the preliminary analysis
 - ▣ *Verbalize conclusions regarding how well the measure meets NQF's evaluation criteria*
 - ▣ *Be fully conversant with the submitted measure information on their assigned measure criterion;*
- Discussants:
 - ▣ *Be fully conversant with the submitted measure information on their assigned criterion*
 - ▣ *Supplement the Lead Discussant comments with evaluative remarks as needed*

Voting Process

Voting on Endorsement Criteria

- **Importance to Measure and Report (must-pass):**
 - Discuss performance gap and disparities and vote
- **Scientific Acceptability (must-pass):**
 - Committee may choose to re-adjudicate reliability and validity in lieu of SMP votes **OR** accept the SMP votes on reliability and validity
- **Feasibility:**
 - Discuss and vote on feasibility
- **Usability and Use**
 - Discuss and vote on usability and use
- **Overall Suitability for Endorsement**

If a measure fails on one of the must-pass criteria, there is no further discussion or voting on the subsequent criteria for that measure; we move to the next measure.

Voting Test

Achieving Consensus

- Quorum: 66% of the Committee
- Pass/Recommended: Greater than 60% “Yes” votes (high + moderate ratings) of the quorum
- Consensus not reached (CNR): 40-60% “Yes” votes (inclusive of 40% and 60%) of the quorum
 - ▣ *Measure moves forward to public and NQF member comment and the Committee will revote*
- Does not pass/Not Recommended: Less than 40% “Yes” votes of the quorum

Questions?

Consideration of Candidate Measure

Fall 2018 Cycle Measure Review

One New Measure

- 3474 Hospital-level, risk-standardized payment associated with a 90-day episode of care for elective primary total hip and/or total knee arthroplasty (THA/TKA)
 - ▣ *CMS/Yale-CORE*

Related and Competing Measures

Related and Competing Measures

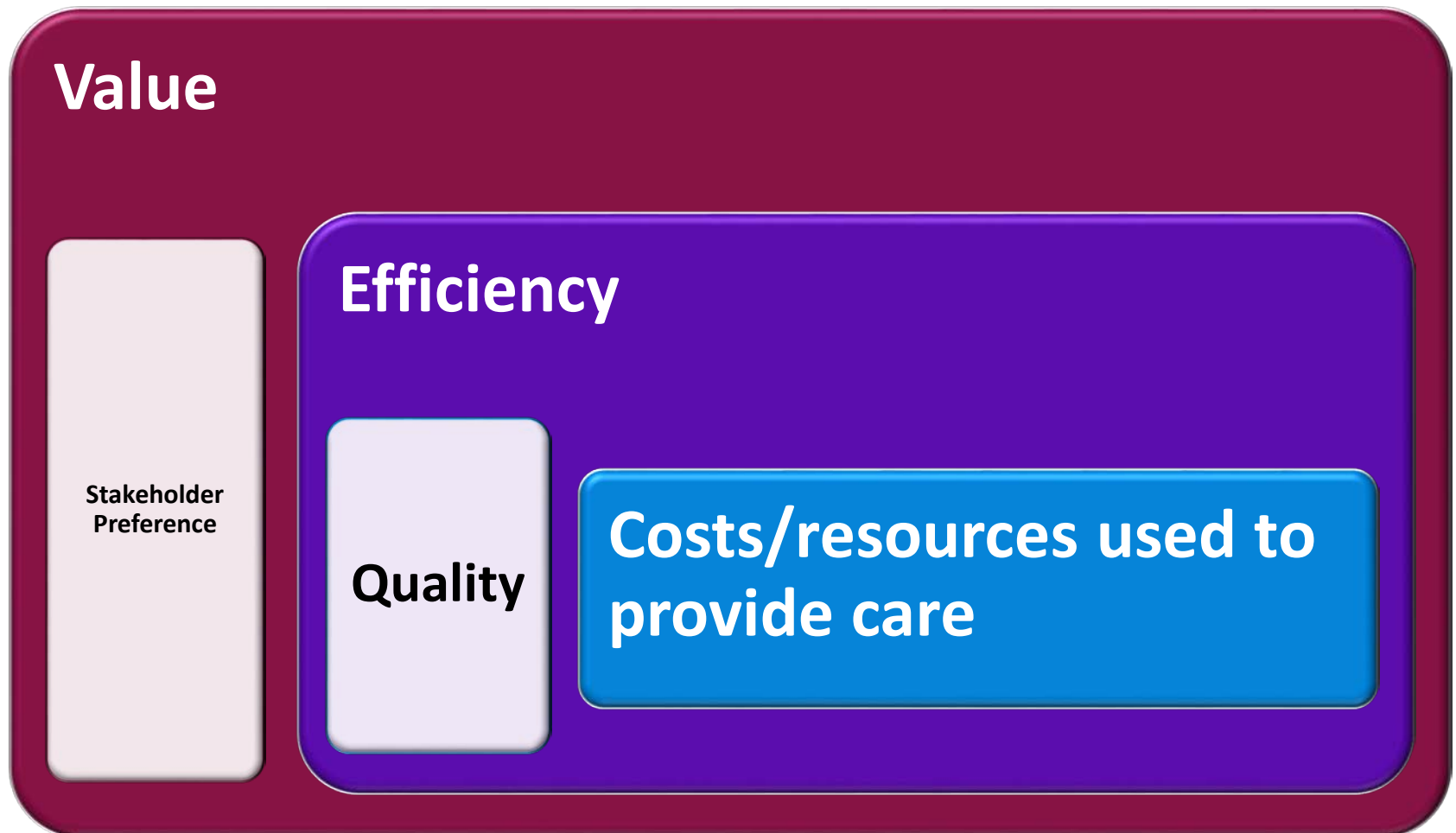
- If a new measure meets the four criteria and there are similar measures, they are compared to address harmonization and/or selection of the best measure
 - ▣ *Related measures: Same measure focus or same target population*
 - ▣ *Competing measures: Both the same measure focus and same target population*
- No competing measures, but related outcome measures have been identified that may be used in combination with the cost measure

Getting to Efficiency and Value

Current State

- Ongoing evaluation of cost measures without the quality signal
- No direction to users/implementers on how endorsed cost/resource use measures should be reported in combination with process/outcome measures
- Cost and quality measures are submitted and reviewed separately, by different Committees (dictated by current NQF process guidance)

Cost, Resource Use, Efficiency, and Value



Getting to Efficiency and Value

■ Next Steps

- *Review prior relevant work*
 - » Linking cost and quality report
 - » Measurement systems report
 - » Composite measure guidance
- *Identify related quality measures in NQF portfolio that may align with newly submitted and endorsed quality measures*
- *Determine what process is needed to facilitate more global review of cost and quality signal*
- *Determine what type of evaluation, guidance, or recommendations could be provided for pairs or groups of measures that can be used together for an efficiency signal*

Related Cost and Quality Measures

Cost and Efficiency Measure	Related Quality Measures
3474 Hospital-level, risk-standardized payment associated with a 90-day episode of care for elective primary total hip and/or total knee arthroplasty (THA/TKA)	1550 Hospital-level risk-standardized complication rate (RSCR) following elective primary total hip arthroplasty (THA) and/or total knee arthroplasty (TKA) 1551 Hospital-level 30-day risk-standardized readmission rate (RSRR) following elective primary total hip arthroplasty (THA) and/or total knee arthroplasty (TKA)

Public Comment

Next Steps

Next Steps for Fall 2018 Cycle

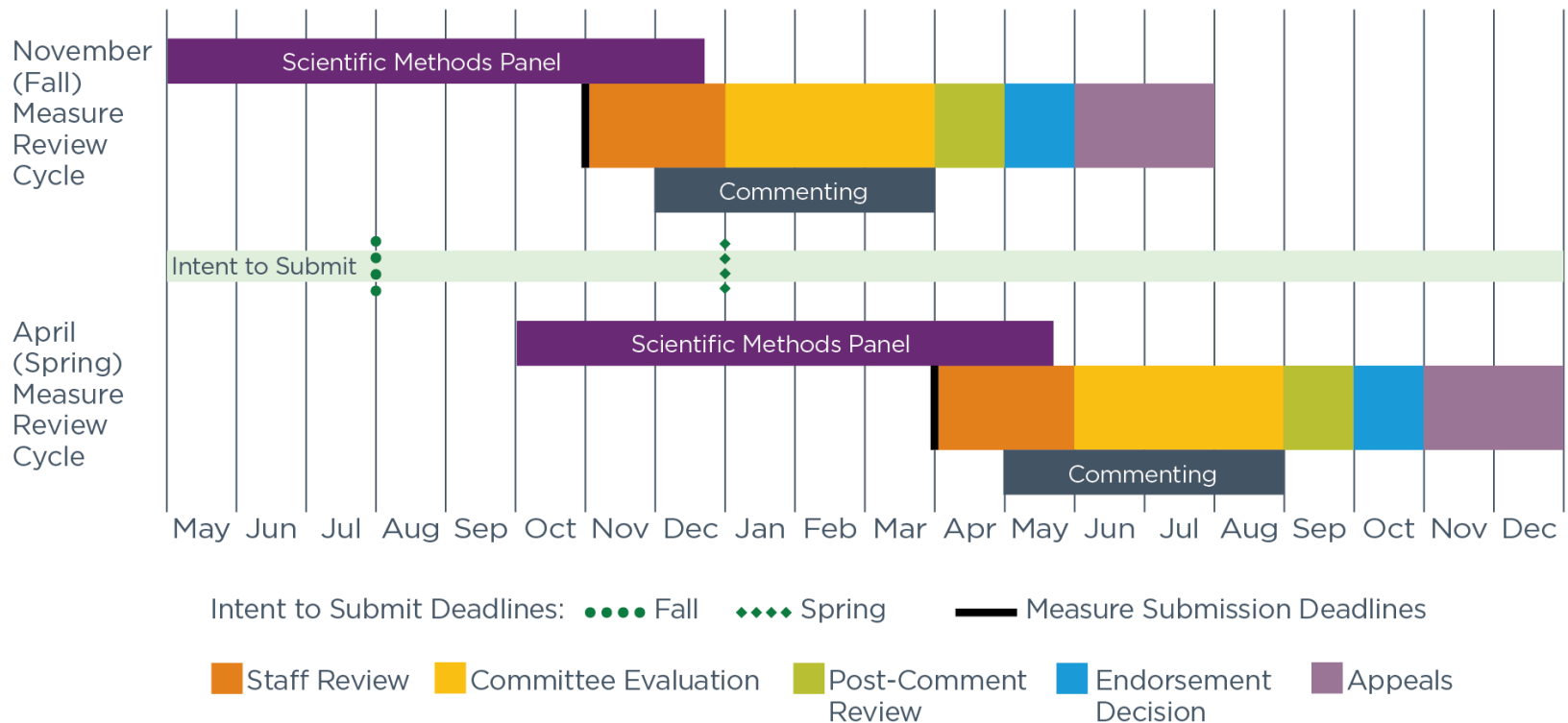
- Draft Report Comment Period (30 days)
 - ▣ *March 21-April 19, 2019 (tentative)*
- Committee Post-Comment Web Meeting
 - ▣ *May 8, 2019 2-4 pm EST*

Cost and Resource Use Measure Evaluation Pipeline

- Statutory requirement to develop cost measures that cover 50% of Medicare costs
- Mix of measurement approaches
 - ▣ *Episode-based, clinician level (grouper based, but no overlapping episodes)*
 - ▣ *Cost per capita*
 - ▣ *Spending per beneficiary*
- Maintenance reviews
- Assessment of NQF capacity and process
 - ▣ *SMP review*
 - ▣ *Accommodation of clinical TEP reviews*
 - ▣ *Timelines*
 - ▣ *Staff and Committee capacity*

Measure Review: Two Cycles Per Year

Consensus Development Process: Two Cycles Every Contract Year



Spring 2019 Cycle

- (8) New episode-based, clinician-level measures (CMS)
 - ▣ **3508** *Elective Outpatient Percutaneous Coronary Intervention (PCI)*
 - ▣ **3509** *Routine Cataract Removal with Intraocular Lens (IOL) Implantation*
 - ▣ **3510** *Screening/Surveillance Colonoscopy*
 - ▣ **3511** *Revascularization for Lower Extremity Chronic Critical Limb Ischemia*
 - ▣ **3512** *Knee Arthroplasty*
 - ▣ **3513** *Simple Pneumonia with Hospitalization*
 - ▣ **3514** *Intracranial Hemorrhage or Cerebral Infarction*
 - ▣ **3515** *ST-Elevation Myocardial Infarction (STEMI) with Percutaneous Coronary Intervention (PCI)*
- Measures are currently under SMP review
- In-Person Meeting-June 27, 2019

Fall 2019 Cycle

- (~13) New measures (CMS)
 - ▣ *IMPACT Act Measures: (~8-10 new measures)*
 - » Medicare Spending per Beneficiary (MSPB)–PAC IRF QRP
 - » Medicare Spending per Beneficiary (MSPB)–PAC LTCH QR
 - » Medicare Spending per Beneficiary (MSPB)–PAC SNF QR
 - » Medicare Spending per Beneficiary (MSPB)–PAC HH QRP
 - ▣ *Measures due for maintenance:*
 - » **2431** Hospital-level, risk-standardized payment associated with a 30-day episode-of-care for Acute Myocardial Infarction (AMI)
 - » **2436** Hospital-level, risk-standardized payment associated with a 30-day episode-of-care for heart failure (HF)
 - » **2579** Hospital-level, risk-standardized payment associated with a 30-day episode of care for pneumonia

Spring 2020 – Spring 2021

- Spring 2020
 - ▣ *(13) New Measures*
 - » Total Per Capita Cost
 - » Medicare Spending per Beneficiary (MSPB) (clinician level)
 - » 11 episode-based, clinician level measures
- Fall 2020 [TBD]
- Spring 2021
 - ▣ *~10 episode-based, clinician level measures*

Questions?

Project Contact Info

- Email: efficiency@qualityforum.org
- NQF Phone: 202-783-1300
- Project page:
[https://www.qualityforum.org/Cost and Efficiency.aspx](https://www.qualityforum.org/Cost_and_Efficiency.aspx)
- SharePoint site:
<http://share.qualityforum.org/Projects/costEff/SitePages/Home.aspx>

Adjourn