



### Cost and Efficiency Standing Committee – Spring 2021 Post-Comment Web Meeting

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The National Quality Forum (NQF) held a web meeting for the Cost and Efficiency Standing Committee on Friday, October 22, 2021, from 2:00 – 5:00 PM ET.

#### Welcome, Review of Meeting Objectives, and Attendance

LeeAnn White, NQF director, welcomed the participants to the web meeting. Standing Committee Co-Chairs Kristine Martin Anderson and Dr. Sunny Jhamnani welcomed the Standing Committee to the web meeting. Karri Albanese, NQF analyst, conducted the Standing Committee roll call. Ms. White provided an overview of the meeting objectives:

- Review and discuss comments received during the post-evaluation public and member commenting period
- Provide input on proposed responses to the post-evaluation comments
- Review and discuss NQF members' expression of support of the measures under consideration
- Determine whether reconsideration of any measures or other courses of action is warranted
- Discuss related and competing measures

During the spring 2021 review cycle, the Cost and Efficiency Standing Committee reviewed five measures during the three web meetings on July 9, 13, and 27, 2021. The Standing Committee recommended all five measures for endorsement. NQF posted the draft report on the project webpage for public and NQF member comment on August 27, 2021, for 30 calendar days. During this commenting period, NQF received three comments from one NQF member organization.

#### Review and Discuss Public Comments

Ms. White presented the public comments for three of the five measures by introducing each measure and describing the comments received, including the developer's responses. The following measures received comments:

- NQF #2431 Hospital-Level, Risk-Standardized Payment Associated With a 30-Day Episode-of-Care for Acute Myocardial Infarction (AMI)
- NQF #2436 Hospital-Level, Risk-Standardized Payment Associated With a 30-Day Episode-of-Care for Heart Failure (HF)
- NQF #2579 Hospital-Level, Risk-Standardized Payment Associated With a 30-Day Episode of Care for Pneumonia (PN)

To introduce the discussion, Ms. White reviewed the three major themes identified in the post-evaluation comments: Concern with the low signal-to-noise reliability statistics and the low reliability thresholds

- Concern with the way testing was conducted for social risk factors after adjusting for clinical risk

factors and the adequacy of the risk adjustment model due to the R-squared results

Concern with the correlation between the cost measures and any one quality measure within the hospital's quality programs when the specifications note that cost measures should not be evaluated alone

Ms. White briefly reviewed the comments for NQF #2431 *Hospital-Level, Risk-Standardized Payment Associated With a 30-Day Episode-of-Care for Acute Myocardial Infarction (AMI)*. The commenter expressed concern with the low signal-to-noise value ranges and minimum reliability threshold of 0.4 accepted by the Centers for Medicare & Medicaid Services (CMS), social risk, and the correlation between risk adjustment and cost/quality. Dr. Jhamnani opened the floor up to the Standing Committee for further discussion. One Standing Committee member voiced concern with the developer's response, stating that it does not address the commenter's concern and adding that they disagree with the proposed Standing Committee response. This Standing Committee member also noted the commenter's concern regarding signal-to-noise testing, in which the developer only addressed the split-sample reliability testing. The Standing Committee recognized the importance of higher reliability thresholds to discriminate performance between hospitals and clinicians in public reporting programs. The developer clarified that the proposed minimum signal-to-noise ratio value ranges provided for this measure meet CMS' requirements.

Ms. White then reviewed NQF #2436 *Hospital-Level, Risk-Standardized Payment Associated With a 30-Day Episode-of-Care for Heart Failure (HF)*, noting that the commenter raised similar concerns with reliability testing, social risk, and risk adjustment, as well as cost and quality correlations. Although the reliability threshold numbers for this measure do not meet 0.7, the Standing Committee found these numbers more suitable for public reporting. While the Standing Committee did agree that this measure had reliability concerns, they acknowledged that it was not as significant as NQF #2431.

After concluding the discussion for NQF #2436, Ms. White reviewed NQF #2579 *Hospital-Level, Risk-Standardized Payment Associated With a 30-Day Episode of Care for Pneumonia (PN)*. Ms. White noted that the comments received reflected similar concerns raised for NQF #2431 and NQF #2436 (i.e., social risk and risk adjustment and cost and quality correlations). The Standing Committee did not raise any additional concerns.

Ms. White reviewed the proposed Standing Committee responses, which can be found in the [comment narrative](#). One Standing Committee member requested that NQF add the concerns related to reliability testing to the proposed committee response(s), specifically split-sample reliability testing versus signal-to-noise ratios to distinguish hospital performance. The Standing Committee proposed to add the following statement to the social risk and risk adjustment proposed response: "the majority agreed to recommend these measures for endorsement." The Standing Committee did not have any further concerns or additions for NQF.

## Related and Competing Measures Discussion

Ms. White reminded the Standing Committee that the related and competing measures discussion was deferred to the post-comment meeting due to the discussion for endorsement during the July 2021 measure evaluation meeting. The goal of this discussion is to mitigate any potential burden to the system in the number of measures and the differences across related measures. Ms. White presented the related measures for NQF #2431, NQF #2436, and NQF #2579, which were identified by the developer during measure submission. The Standing Committee did not express any concerns to the

developer during the review of the related measures, nor did they have any recommendations for the developer that NQF will include in the final report.

### **NQF Member and Public Comments**

Ms. White opened the web meeting to allow for public comment. No public or NQF member comments were provided during this time.

### **Activities and Timelines**

Ms. Albanese reviewed the next steps for the project. Ms. Albanese informed the Standing Committee that the Consensus Standards Approval Committee (CSAC) will consider the Standing Committee's endorsement recommendations during its meetings on November 30 – December 1, 2021. Following the CSAC meeting, NQF will hold the 30-day Appeals period from December 7 – January 5, 2022.

### **Adjourn**