CALL FOR MEASURES AND MEASURE CONCEPTS:
Cost and Resource Use

NQF is seeking new measures and concepts in the areas of cost and resource use.

NQF is particularly interested in measures that:
- Are applicable to more than one setting;
- Capture broad populations, including children and adolescents where applicable;
- Are harmonized with similar measures; and,
- Are sensitive to vulnerable populations, including racial/ethnic minorities; and Medicaid populations.

The call for measures launched **November 7, 2016**. The final submission deadline is **December 15, 2016.**

BACKGROUND

As ongoing health reform efforts focus on expanding coverage, increasing access to care, and reducing costs, it is important to understand how resources are currently being used in the healthcare system in the context of quality, preferably related to health outcomes. Aligning resource use (or cost) and quality measures will enable the healthcare system and other stakeholders to better evaluate efficiency of care. Recent legislation including the Affordable Care Act (ACA), the Improving Medicare Post-Acute Care Transformation (IMPACT) of 2014 and Medicare Access & CHIP Reauthorization Act of 2015 (MACRA) require using resource use data to support further efforts to move toward a value-based purchasing (VBP) payment model. Resource use data will be included on the physician compare website, and will ultimately be included in the Merit-based Incentive Payment System (MIPS) for physicians.

To expand the NQF portfolio of endorsed cost and resource use measures that in turn could be used as building blocks toward understanding efficiency and value, NQF embarked in 2010 on its first effort to evaluate and endorse cost and resource use measures. This learning was captured in the final and technical reports, yielded the first eight endorsed cost and resource use measures in the NQF portfolio, and the NQF Resource Use Measure Evaluation Criteria. Building on this work, NQF began another project to evaluate non-condition specific measures of resource use, using per-capita and per-hospitalization approaches. This work is currently ongoing. In upcoming work, NQF will continue efforts to evaluate cost and resource use measures for all conditions in the fourth phase of work.

Measure Submissions Due by Thursday, December 15, 2016, 6:00 PM ET

MEASURE CONCEPTS

In addition to soliciting fully-developed measures for consensus-based endorsement review, NQF is also soliciting measure concepts through NQF's Measure Inventory Pipeline. This pipeline will serve as an important source of information for HHS and other stakeholders on new measure development in the broader healthcare community. It will also enable NQF to track current and planned measure development to ensure early collaboration among developers to drive harmonization and alignment of measures.

In an effort to capture comprehensive information on measures in development, NQF seeks input on several variables including:
- measure description;
- numerator statement;
- denominator statement (target population);
- planned use;
- stage of development; and
- other relevant information.

Please note that the information entered through NQF's Measure Inventory Pipeline will not be evaluated by the Standing Committee against the NQF Criteria. Submitted information will be catalogued by NQF and used to help inform the Standing Committee's measure gaps discussion. NQF will also share the information with HHS to inform CMS' Measure Inventory Pipeline, which is a reference for several stakeholders.

MEASURE SUBMISSION REQUIREMENTS

To submit a measure, please complete the following:

- 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.   You must use the Cost & Resource Use measure submission form.
- Measure Steward Agreement Please note that no materials will be accepted without submission of a fully executed *Measure Steward Agreement Form.* All materials not meeting this requirement will be returned to the sender.

PROCESS PARTICIPATION

Measure developers are strongly encouraged to attend (either in person or via web/conference call) the following scheduled meeting dates to represent their measure(s) and respond to questions from the Committee and members of the public.

Scheduled meeting dates

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Meeting	Date/Time
Workgroup Calls (2.5 hours) *NQF will attempt to group measures by developer but developers may need to attend multiple calls*	February 22, 2017, 2:00-4:30pm ET February 24, 2017, 1:00-3:30pm ET February 27, 2017, 2:00-4:30pm ET March 1, 2017, 1:00-3:30pm ET March 3, 2017, 12:00-2:30pm ET March 7, 2017, 2:00-4:30pm ET
Three day in-person Meeting (Washington, DC)	March 15, 2017, 8:00am ET-5:00pm ET March 16, 2017, 8:00am ET- 5:00pm ET March 17, 2017, 8:00am ET-2:30pm ET
Post-Meeting Call #1	March 22, 2017, 2:00-4:30pm ET
Post-Meeting Call #2	March 24, 2017, 1:00-3:30pm ET
Post-Comment Call #1	June 6, 2017 at 2:00-4:30pm ET

Materials must be submitted using the online submission form by 6:00 pm, ET December 15, 2016. If you have any questions, please contact, Rachel Roiland or Suzanne Theberge, Senior Project Managers, at 202-783-1300 or via e-mail at efficiency@qualityforum.org.

Conditions for Consideration:

☐ 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.[1]

☐ The intended use of the measure includes both public accountability and quality improvement.

☐ The measure is fully specified and tested for reliability and validity. Measures that are not tested will not be accepted in this project.

☐ The measure developer/steward attests that harmonization with related measures and issues with competing measures have been considered and addressed, as appropriate.

☐ The requested measure submission information is complete and responsive to the questions so that all the information needed to evaluate all criteria is provided.

Submission Guidance:

☐ Developer Guidebook:
　　☐ A Developer Guidebook has been created to assist developers in the measure submission and evaluation process. The Guidebook contains all the information developers need to know when submitting a measure to NQF.

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[1] Measure stewards must execute a Measure Steward Agreement with NQF.

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- ☐ ICD-10-CM/PCS:
  - ☐ Beginning April 1, 2013 measures specified with administrative claims data must submit a set of ICD-9-CM and ICD-10-CM/PCS codes. Click here for further information on this requirement.
- ☐ eMeasures:
  - ☐ Must be specified in the Heath Quality Measures Format (HQMF) and use the Quality Data Model (QDM) and value sets vetted through the National Library of Medicine's Value Set Authority Center (VSAC).
  - ☐ Review the current measure evaluation criteria and guidance.
- ☐ Composite measures:
  - ☐ Please notify project staff if you plan to submit a composite measure.

Technical Assistance

NQF project staff will provide technical assistance to measure developers at any time during the measure submission process up to the submission deadline. Contact the project team with any questions about the criteria, how to answer the questions in the form, any technical issues with the online submission process… or anything else!

MEASURE SUBMISSION COMPLETENESS CHECKLIST
- ☐ Measure steward agreement or concept agreement is completed and signed.
- ☐ All conditions for submission are met.
- ☐ There are responses in all fields on measure submission form (MSF) unless a particular item is not applicable as indicated in the item instructions.
- ☐ Attachments include: eMeasure specifications (S.2a) if applicable; data dictionary/code list (S.2b); Evidence and Measure Testing attachments.
- ☐ All URLs are active and accurate.
- ☐ Harmonization/competing measures: Did you present a plan for harmonization of the related/competing measures identified by staff during early identification/triage or justify submitting competing or non-harmonized measures? (see Harmonization process in the 2016 Developer Guidebook).
- ☐ Paired measures should be submitted on separate forms.
- ☐ An eMeasure must be specified in HQMF format, using QDM and value sets vetted through the VSAC.
- ☐ Composite performance measures: responses to the composite measure items are included.
- ☐ Both ICD-9 and ICD-10 codes are included.
- ☐ If a proprietary risk adjustment methodology is used, please provide an estimate of the cost associated with purchasing the product.
- ☐ If the CRU measure uses a standardized pricing approach, please provide a table

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mapping standardized prices to unit codes.

RESOURCES FOR MEASURE DEVELOPERS AND STEWARDS

For more details on measure submission and evaluation, please see:

- Submitting Standards Web Page
- 2016 Measure Evaluation Criteria and Guidance PDF
- Episode Grouper Evaluation Criteria
- Guidance on Quality Performance Measure Construction
- Endorsement Maintenance Policy
- What Good Looks Like - Measure Submission Examples
- Composite Measure Evaluation Guidance Report
- Patient Reported Outcomes Report
- eMeasure Feasibility Report
- Reserve Status Policy
- NQF's Cost and Resource Use Projects, Phases 1-3

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