

## Disparities Standing Committee Orientation



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*Helen Burstin  
Elisa Munthali  
Erin O'Rourke  
Michael Pheulpin  
Severa Chavez*

## Welcome and Introductions

## NQF Project Staff

- Helen Burstin, MD, MPH, FACP
  - Chief Scientific Officer
- Elisa Munthali, MPH
  - Vice President, Quality Measurement
- Erin O'Rourke
  - Senior Project Manager
- Michael Pheulpin, MS
  - Project Manager
- Severa Chavez
  - Project Analyst

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## Standing Committee

<i>(co-chair)</i> Marshall Chin, MD, MPH, FACP, University of Chicago	Nancy Garrett, PhD, Hennepin County Medical Center
<i>(co-chair)</i> Ninez Ponce, MPP, PhD, UCLA Center for Health Policy Research	Romana Hasnain-Wynia, PhD, Patient Centered Outcomes Research Institute
Philip Alberti, PhD, Association of American Medical Colleges	Lisa Iezzoni, MD, MSc, Harvard Medical School
Susannah Bernheim, MD, MHS, Yale New Haven Health System Center for Outcomes Research and Evaluation	David Nerenz, PhD, Henry Ford Health System
Michelle Cabrera, SEIU California	Yolanda Ogbolu, PhD, CRNP-Neonatal, University of Maryland Baltimore, School of Nursing
Juan Emilio Carrillo, MD, MPH, Weill Cornell Medical College	Robert Rauner, MD, MPH, FAAFP, Partnership for a Healthy Lincoln
Lisa Cooper, MD, MPH, FACP, Johns Hopkins University School of Medicine	Eduardo Sanchez, MD, MPH, FAAFP, American Heart Association
Ronald Copeland, MD, FACS, Kaiser Permanente	Sarah Hudson Scholle, MPH, DrPH, National Committee for Quality Assurance
José Escarce, MD, PhD, UCLA Fielding School of Public Health	Thomas Sequist, MD, MPH, Partners Healthcare System
Traci Ferguson, MD, MBA, CPE, WellCare Health Plans, Inc.	Christie Teigland, PhD, Inovalon, Inc.
Kevin Fiscella, MD, University of Rochester	Mara Youdelman, JD, LL.M., National Health Law Program

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## Agenda for the Call

- Brief overview of NQF
- Review of the Committee Charge
  - Definition of disparities
- NQF Overview
  - NQF's prior work on disparities
  - Overview of SDS Trial Period
- Roles of the Standing Committee, co-chairs, NQF staff
- SharePoint tutorial
- Next steps

## The National Quality Forum: A Unique Role

Established in 1999, NQF is a non-profit, non-partisan, membership-based organization that brings together public and private sector stakeholders to reach consensus on healthcare performance measurement. The goal is to make healthcare in the U.S. better, safer, and more affordable.

**Mission:** To lead national collaboration to improve health and healthcare quality through measurement

- An Essential Forum
- Gold Standard for Quality Measurement
- Leadership in Quality

## NQF Activities

- **Measure Endorsement**
  - 600+ NQF-endorsed measures across multiple clinical areas
  - 11 empaneled standing expert committees
- **Measure Application Partnership**
  - Advises HHS on selecting measures for 20+ federal programs, Medicaid, and health exchanges
- **Measurement Science**
  - Convenes private and public sector leaders to reach consensus on complex issues in healthcare performance measurement
- **National Quality Partners**
  - Convenes stakeholders around critical health and healthcare topics
  - Spurs action on patient safety, early elective deliveries, and other issues

## Disparities Committee Charge

1. Develop a roadmap for how measurement and associated policy levers can be used to proactively eliminate disparities
2. Review implementation of the revised NQF policy regarding risk adjustment for SDS factors and evaluate the SDS trial period.
3. Provide a cross-cutting emphasis on healthcare disparities across all of NQF's work.

## Definitions of Health Care Disparities

- AHRQ *Quality and Disparities Report* focuses on race, ethnicity, and socioeconomic status. The 2014 report incorporated analyses of other priority populations, including women, children, older adults, people with disabilities and at the end of life, and residents of rural areas and inner cities.
- The IOM defined disparities as “racial or ethnic differences in the quality of health-care that are not due to access-related factors or clinical needs, preferences, and appropriateness of intervention.”
- The WHO considers disparities to be “differences in health which are not only unnecessary and avoidable but, in addition, are considered unfair and unjust.”

## Definition of Health Care Disparities

- The *CMS Equity Plan for Medicare* focuses on racial and ethnic minorities, sexual and gender minorities, persons with disabilities, as well as individuals living in rural areas.
- NQF has previously focused on disparities related to race, ethnicity, primary language and socioeconomic status as a starting point for measurement and reporting.
- Recent measurement efforts focused on rural and disabled populations.

**What factors does the Disparities Standing Committee want to focus on for its work?**

## Committee Charge #1

**Task 1: Develop a roadmap for how measurement and associated policy levers can be used to proactively eliminate disparities**

## NQF's Prior Work in Healthcare Disparities

- 2006 – Established criteria to identify “disparities sensitive” measures
- 2009 – Developed a framework and set of 45 practices for measuring and reporting cultural competency.
- 2012 – Endorsed performance measures related to disparities and cultural competency
- 2014 – Considered risk adjustment of performance measures for sociodemographic factors when appropriate.
- 2015 – Launch of the SDS trial period

### What are the Critical Dimensions of a Roadmap for how measurement and associated policy levers can be used to proactively eliminate disparities?

- How can measurement proactively eliminate disparities?
- How does NQF ensure disparities are integral part of quality measurement throughout the measure lifecycle (development, endorsement, selection, and implementation)?
- How can NQF guide policy to eliminate disparities in care?
  - How to approach measure use in pay-for-performance versus pay-for-improvement; innovative approaches to quality measurement explicitly designed to eliminate disparities?
  - How to assess the potential impact on disadvantaged populations?
  - How to develop payment policies to help eliminate disparities?

### Committee Charge #2

**Task 2. Review implementation of the revised NQF policy regarding risk adjustment for SDS factors and evaluate the SDS trial period.**

## Committee Charge #2

### Committee Action Items

- Review and provide guidance related to methodologies for adjustment and stratification and standard sociodemographic data collection
- Conduct a formal evaluation of the SDS trial period
  - Assess emerging evidence of the impact of adjusted measures on patients and providers
  - Examine unintended consequences of the trial period.
  - Assess trends in disparities

## SDS Adjustment – Final Recommendations

- NQF will conduct a two-year trial period prior to a permanent change in NQF policy.
- If SDS adjustment deemed appropriate for a given measure, NQF will endorse one measure with specifications to compute
  - 1) SDS-adjusted measure
  - 2) Non-SDS adjusted measure, and
  - 3) Stratification of the non-SDS-adjusted version
- NQF will convene a new NQF Standing Disparities Committee to monitor implementation of the revised policy as well as ensure continuing attention to disparities
- NQF and others such as CMS, ONC, and AHRQ should develop strategies to identify a standard set of sociodemographic variables (patient and community-level) to be collected and made available for performance measurement and identifying disparities



## SDS Trial - Background

- Each measure must be assessed individually to determine if SDS adjustment is appropriate
  - Not all outcomes should be adjusted for SDS factors (e.g., central line infection would not be adjusted)
  - Need conceptual basis (logical rationale, theory) and empirical evidence
- During the trial period, if SDS adjustment is determined to be appropriate for a given measure, NQF will endorse one measure with specifications to compute:
  - SDS-adjusted measure
  - Non-SDS version of the measure (clinically-adjusted only) to allow for stratification of the measure

## SDS Trial - Scope

### Newly-submitted measures

- **ALL measures submitted to NQF after April 15, 2015 will be considered part of the trial period**, and Standing Committees may consider whether such measures are appropriately adjusted for SDS factors as part of their evaluation.

### Previously-endorsed measures

- **Measures undergoing endorsement maintenance review during the trial period** will also be considered “fair game” for consideration of SDS adjustment.
- Other paths for evaluation of SDS adjustment for endorsed measures:
  - Ad hoc requests
  - Conditional endorsement (e.g., Readmissions, Cost & Resource Use)

## NQF Standing Committee Consideration of SDS Adjustment

- The standing committees will be asked to consider the following questions:
  - » Is there a conceptual relationship between the SDS factor and the measure focus?
  - » What are the patient-level sociodemographic variables that were available and analyzed during measure development?
  - » Does empirical analysis (as provided by the measure developer) show that the SDS factor has a significant and unique effect on the outcome in question?
  - » Does the reliability and validity testing match the final measure specifications?

## Evaluation of Trial Period - 1

- To evaluate the success of the trial period – and the appropriateness of the change in policy to allow SDS adjustment – NQF will focus on a number of indicators, including but not limited to:
  - Number/types of measures submitted with SDS adjustment, and the outcome of those evaluations
  - Number/types of measures with requests for ad hoc review related to SDS adjustment
  - What SDS factors and variables were analyzed
  - The extent to which SDS adjustment follows accepted methods as outlined in the Expert Panel report
- NQF will solicit feedback from stakeholders on the impact of the trial period.

## Evaluation of Trial Period - 2

- Longer-term questions for evaluating the impact of SDS adjustment may include:
  - The availability of data on SDS variables, and the quality of that data
  - How healthcare entities react to SDS-adjusted scores and stratified data for improvement
  - How purchasers and payers use SDS-adjusted scores in accountability programs
  - Whether SDS adjustment has any impact on disparities

## Disparities Standing Committee and SDS Trial

- Full discussion of SDS trial period planned at disparities in-person meeting
  - Update on measures considered in the trial period to date
  - Need input into preliminary evaluation approach for SDS trial evaluation
  - Early lessons learned and opportunities for disparities committee input (e.g., availability of SDS variables)

### Committee Charge #3

**Task 3: Provide a cross-cutting emphasis on healthcare disparities across all of NQF's work.**

### Committee Charge #3

#### Committee Action Items

- Provide advice and/or technical expertise on disparities to other committees
  - Provide guidance to Consensus Standards Approval Committee (CSAC), Measure Applications Partnership (MAP) and NQF Standing Committees.
  - As appropriate, the DSC may make recommendations regarding evaluation criteria to the CSAC and MAP Coordinating Committee.
- Provide strategic direction and guidance to NQF and the measurement field on measure development activity and enhancing growth of the NQF portfolio of disparity-sensitive and cultural competency measures.

## Role of the Standing Committee, Co-Chairs, and Staff

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### Role of the Standing Committee

- Act as a proxy for the NQF multi-stakeholder membership
- Serve 2-year or 3-year terms
- Work with NQF staff to achieve the goals and action items of the project
- Respond to public comments

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## Role of the Standing Committee Co-Chairs

- Co-facilitate Standing Committee (SC) meetings
- Work with NQF staff to achieve the goals of the project
- Assist NQF in anticipating questions and identifying additional information that may be useful to the SC
- Keep SC on track to meet goals of the project without hindering critical discussion/input
- Represent the SC at CSAC meetings and Coordinating Committee meetings
- Participate as a SC member

## Role of NQF Staff

- **NQF project staff works with SC to achieve the goals of the project:**
  - Organize and staff SC meetings and conference calls
  - Guide the SC through NQF policy and procedures
  - Prepare materials for Committee review
  - Draft and edit reports for SC review
  - Ensure communication among all Committee Members
  - Facilitate necessary communication and collaboration between different NQF projects

## Role of NQF Staff

### *Communication*

- Respond to NQF member or public queries about the project
- Maintain documentation of project activities
- Post project information to NQF website
- Work with measure developers to provide necessary information and communication
- Publish final project report

## Activities and Timeline

\*All times ET

Meeting	Date/Time
Orientation Call	Thursday, December 3, 2015
In-Person Meeting (2 days in Washington, D.C.)	Wednesday, January 20-Thursday, January 21 2016
Quarterly Conference Calls	Tuesday, April 26, 2016 from 2:00-4:00 pm ET Thursday, July 21, 2016 from 12:00-2:00 pm ET Wednesday, October 19, 2016 from 2:00-4:00 pm ET

## SharePoint Overview

## SharePoint Overview

<http://share.qualityforum.org/Projects/Disparities/SitePages/Home.aspx>

- Accessing SharePoint
- Standing Committee Policy
- Standing Committee Guidebook
- Meeting and Call Documents
- Committee Roster and Biographies
- Calendar of Meetings



## SharePoint Overview

### Screen shot of homepage:

The screenshot shows the SharePoint homepage for the National Quality Forum, specifically for the Disparities site. The page has a blue header with the title 'SharePoint Overview'. Below the header, there is a navigation bar with links to 'NQF Share', 'Intranet', 'Projects', 'HHS', 'CSAC', 'Workgroups', and 'SharePoint Help'. The main content area is titled 'Disparities' and contains two sections: 'General Documents' and 'Meeting Documents'. The 'General Documents' section lists four documents: 'Disparities Standing Committee Final Roster' (modified 11/20/2015 12:08 PM), 'NQF Glossary' (modified 11/19/2015 2:58 PM), 'Standing Committee Guidebook' (modified 10/28/2015 9:45 AM), and 'Standing Committee Policy' (modified 11/19/2015 2:58 PM). The 'Meeting Documents' section lists one document: 'Meeting Title : 12/3/2015 Disparities Standing Committee Orientation Call (1)' (modified 11/20/2015 12:08 PM). The footer of the page displays 'NATIONAL QUALITY FORUM' and the page number '33'.

## SharePoint Overview

### Please keep in mind:

- + and – signs :

The screenshot shows the SharePoint homepage for the National Quality Forum, specifically for the Measure Documents and Meeting and Call Documents sections. The page has a blue header with the title 'SharePoint Overview'. Below the header, there is a navigation bar with links to 'NQF Share', 'Intranet', 'Projects', 'HHS', 'CSAC', 'Workgroups', and 'SharePoint Help'. The main content area is divided into two sections: 'Measure Documents' and 'Meeting and Call Documents'. The 'Measure Documents' section lists one document: 'Measure Sub-Topic : (1)' (modified 11/20/2015 12:08 PM). The 'Meeting and Call Documents' section lists one document: 'Meeting Title : 1/30/2014 Orientation Call (1)' (modified 11/20/2015 12:08 PM). Red arrows point to the '+' and '-' signs next to the document titles in both sections. The footer of the page displays 'NATIONAL QUALITY FORUM' and the page number '34'.

## Next Steps

## Next Steps

- In-Person Meeting
  - Wednesday, January 20-Thursdays, January 21 2016
- Quarterly Conference Calls
  - Tuesday, April 26, 2016 from 2:00-4:00 pm ET
  - Thursday, July 21, 2016 from 12:00-2:00 pm ET
  - Wednesday, October 19, 2016 from 2:00-4:00 pm ET

**Future meetings will be scheduled based  
on the availability of the Committee.**

## Project Contact Info

- Email: [Disparities@qualityforum.org](mailto:Disparities@qualityforum.org)
- NQF Phone: 202-783-1300
- Project page:  
[http://www.qualityforum.org/Disparities\\_Project.aspx](http://www.qualityforum.org/Disparities_Project.aspx)
- SharePoint site:  
<http://share.qualityforum.org/Projects/Disparities/SitePages/Home.aspx>

# Questions?



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