### CONFERENCE CALL FOR THE RESOURCE USE STEERING COMMITTEE

#### September 1, 2010

*Committee Members Present:* Doris Lotz, MD, MPH (Co-Chair); Bruce Steinwald, MBA (Co-Chair); Paul Barnett, PhD; Jack Bowhan; Jeptha Curtis, MD; Kurtis Elward, MD, MPH; William Golden, MD; Lisa Grabert, MPH; Ethan Halm, MD, MPH; Ann Hendrich, RN, PhD(c); Thomas Lee, MD; David Penson, MD, MPH; Steve Phillips, MPA; David Redfearn, PhD; Jeffrey Rich, MD; William Rich, MD; Barbara Rudolph, PhD, MSSW; Joseph Stephansky, PhD; Dolores Yanagihara, MPH; Tom Rosenthal, MD

NQF Staff Present: Helen Burstin, MD, MPH; Sally Turbyville, MA, MS; Ashlie Wilbon, RN, MPH

*Others Present*: Gabrielena Alcala (Partners Healthcare), Kate Bloniarz (MedPAC), Niall Brennan (CMS), Pamela Cheetam (CMS), John Richardson (MedPAC), Sheila Roman (CMS)

#### WELCOME AND INTRODUCTIONS

Ms. Wilbon welcomed the Resource Use Steering Committee members, reviewed the goals for the call, and gave an overview of the Resource Use project activities to date as well as upcoming milestones.

- Since the in-person meeting in July, National Quality Forum (NQF) staff have been working with a sub-group of the Steering Committee tasked with reviewing the criteria in detail as well as determining which resource use specification steps should be subject to evaluation. The work group's recommendations were captured in the documents reviewed during this call.
- NQF staff have been editing the white paper and preparing it for the public and Member comment period to begin in early September.
- NQF staff clarified the Consensus Standards Approval Committee (CSAC) and Board of Directors (BOD) review process. During CSAC review, Steering Committee co-chairs will call in to the meeting during the discussion of the criteria to represent the Committee and clarify recommendations when needed. The dial-in information will also be distributed to Steering Committee members who would like to dial in. After the CSAC decision, NQF staff will summarize the discussion and distribute it to the Committee.

#### PURPOSE

The purpose of this call was to obtain Steering Committee input and agreement on the resource use evaluation criteria before they are posted for public and Member comment in early September.

#### **CRITERIA APPROACH**

The Committee's discussion began with general questions and concerns about the approach for developing the criteria.

• Throughout this process, the Committee has made recommendations to update the criteria to evaluate resource use measures. It appears that some changes have been lost as the criteria

have been reframed. It is still unclear whether retrofitting the current criteria in the context of resource use measures is the best approach.

- Resource use measures are complex, strengths in these measurement approaches vary, and there is a host of variables to consider when evaluating them. Should the Committee consider identifying requirements versus preferences within the criteria? Ultimately, prioritization may be difficult, because all steps are important.
- There was an overarching concern expressed that the criteria are comprehensive and complex, which could inhibit any innovative submissions and limit response to commercial developers only. While the Committee has put a lot of thought into the criteria, the threat to innovation should be weighed. The Committee also acknowledged that the bar has been set high for these measures, but given the NQF process is as precise as it is creates a high threshold. Ultimately there is no disagreement with the product so far and the Committee agreed to move forward with the criteria at hand, but recognize that the bar will be high, and this fact will likely limit the entry of "new players" to this process. At this point, however, even greatly reduced requirements would probably not change the players. The Committee agreed that down the road, if there is a low response to the Call for Measures, the criteria should be revisited.
- There was a comment that these criteria seem to cater more to episode-based resource use measures.
  - NQF staff responded that it is not the intention to cater to commercial episode-based measures and the criteria are meant to be broad enough to support the evaluation for all types of resource use measures. NQF staff will review the criteria with this comment in mind and ensure the criteria read as inclusively as possible.

#### MEASURE DEVELOPER OUTREACH

- During the public and Member comment period for the white paper and criteria, NQF staff plan to reach out to measure developers who have developed resource use measures and solicit feedback on the measures submission items and criteria.
- Steering Committee members requested that NQF staff obtain feedback on the criteria, more specifically, on those criteria that will be most challenging to meet.
  - The criteria will be posted for Member and public comment along with the white paper. Further, with the feedback on the submission form the developers will be asked to consider the items in conjunction with the posted evaluation criteria.
  - Suggestions about public and Member comment outreach were discussed, including:
    - Specialty Societies (and associated registries)
    - The John's Hopkins ACG System grouper, Verisk Health's DCG, and preventable hospital admissions methodologies may be interested. It was also noted that such approaches were not mentioned in the white paper.
      - NQF staff noted that the current version of the white paper did not describe any one vendor's measurement approach. Previous versions described some vendor approaches to aid the Steering Committee discussions.

#### **CRITERIA REVIEW**

#### Importance

The Committee was in agreement with the changes for the Importance criterion.

#### Scientific Acceptability

- In the definition for Scientific Acceptability:
  - "Rather than producing results about the quality of care, in the context of resource use measures, the reliability and validity results should be related to the cost or resources used to deliver care."
- In the description of Modules 2 & 3, drop "...or episode..." and use "measure" as umbrella.
  - Module 2: "Measure or episode clinical logic and method"
  - o Module 3: "Measure or episode construction logic"

#### Attribution & the Profiling Module (#5)

- In the submission form, one of the levels of attribution is population based (national, states, counties); is this appropriate attribution for resource use measures? When the Committee initially discussed this topic, it was in the context of a separate white paper on geographic variation that is no longer in the project plan. Given the current white paper, is this level of attribution still relevant or actionable?
  - Some stated that state-level attribution is very actionable and certainly of interest to some (if not all) Medicaid state agencies. States should be left in as an option for level of attribution.
  - This level of attribution may be a building block for an accountability measure.
  - One might want to look at resource use from this level; it is not always an issue of attribution.
  - It was agreed to leave this as an option, keep the options broad and revisit when the Call for Measures is being developed.
- Module 5: "Profiling, Implementation, Assigning and Reporting"
  - The "Profiling..." label is too long—suggestion to simplify the label. Also, the term "profiling" often has negative connotations—suggest removing that word from the module title.
- The Committee acknowledged that the Profiling module is critical, but questioned whether the "specifications" related to the components of this module should all be evaluated. Users of the endorsed measures might then use only the endorsed specifications (attribution, benchmarking, etc.), which may not be applicable for all users. It was argued that the measure would consequently not meet their needs and thus the limitation might lead users to discard the measure.
- Another concern about evaluating specifications related to the Profiling module is that NQF has not yet evaluated specifications for these measurement functions.

- NQF is currently reviewing this among all measures evaluated and its implications with the CSAC and BOD.
- The Committee questioned what responsibility the measure developer has with regard to ensuring the measure is implemented and applied correctly. Would the addition of this module set the bar too high and impose additional responsibility on the developer?
- This module is absolutely essential to how a measure is used. If someone is applying it in a different situation, the one endorsed approach may not apply to them. Is there a way to balance this somehow? Perhaps with rules, principles, guidelines rather than specifications?
  - For some measures, this methodology is "baked" into the measure itself as part of the specifications. The measure should be examined for its capacity to do these things (attribution, peer groups, etc.)
- The Committee decided to continue exploring whether this module should be submitted as part of the specifications or as guiding principles. That is, the Committee wants to maintain the module but allow measure developers to submit well thought out and tested principles or options available to users that have some validity.
  - NQF staff will insert wording in the white paper emphasizing this discussion on the potential to request guidelines or principles in place of specifications for this module.

## **Reliability & Validity**

- Some Committee members expressed concern that the validity/reliability testing requirements were too difficult and represented a higher bar than for quality measures.
  - NQF staff stated there was no intention to raise the bar for these measures and will examine the language in an attempt to align them. Staff is including additional notes in the criteria to help guide submitters.
- There was a question as to whether both reliability and validity are required—they are— and it was commented that reliability is critical.
- Technical Advisory Panels (TAPs) have struggled with disentangling the grouper logic from the clinical logic. If NQF and the Committee are not clear on what is needed, we could get such a high volume of information that it would be impossible to review. Criteria seem to require many types of testing; the process will be complicated.

## Usability & Feasibility

• As the Steering Committee did not get to these two criteria during the call, review and feedback will be done via e-mail.

## NEXT STEPS

- NQF staff will follow up with the Steering Committee to solicit feedback on the remaining items in the criteria that were not discussed during the call.
- The criteria will be updated based on the conference call discussion and feedback received via email and posted for public and Member comment in early September.
- The Resource Use Steering Committee will next meet by conference call on Wednesday, October 20 from 12:00 pm-1:30 pm ET to discuss the comments received on the white paper and the resource use evaluation criteria.