

NATIONAL QUALITY FORUM

**Moderator: Health and Well-Being
April 7, 2015
3:00 p.m. ET**

OPERATOR: This is Conference #: 78753753.

Welcome to the conference. Please note, today's call is being recorded.
Please stand by.

Adeela Khan: Hello everyone. Thank you to the Health and Well – Thank you for joining the Health and Well-Being Q&A Webinar. I am Adeela Khan. I'm the Project Manager for this project. I have with me our consultant Robyn Nishimi and also Project Analyst Kaitlynn Robinson-Ector.

I'll turn it over to Kaitlynn to walk us through the welcome.

Kaitlynn Robinson-Ector: OK. So, hi everyone. Thank you for calling in. So this is the agenda for the call. We've already done our welcome and introductions. We are going to go over the project overview, project background then updates on the pneumococcal specifications and then lastly we'll go over Q&A session on measure evaluations.

OK. So currently there are 62 measures in the Health and Well-Being portfolio and the measures in this portfolio fall under the following sub domains and domains. There's health related behaviors and practices to promote healthy living, community level indicators of health and disease, primary prevention and or screening, modifiable socio-economic and environmental determinants of health, oral health and that would be it.

So the first Population Health Consensus Development Project took place in 2011. And during this project, the committee evaluated NQF measure evaluation criteria and found that the measure criteria could be extended to population level measurement. The committee standardized terminology to aid in the comprehension of the criteria for population level measurements. The committee also provided developers with a framework for population level measurements – measures.

NQF also commissioned a paper which included environmental scan of existing measures, proposed and integrated measurement frameworks to included total population, determinants of health and improvement activities, guidance for measuring and assessing population, determinants of health and improvement activities. And lastly, discuss alignment between clinical care system and public health system.

They use one, Population Health, now called Health and Well-Being focused on review and endorsement of 19 clinical preventative services and immunization measures. The committee recommendation included a desire for universal measures for influenza and pneumococcal immunization. The committee recommended that the vaccination measures align with standard specifications. The committee called for further analysis of harmonization of measures across various care settings. And the committee also requested additional information on disparities and that measure developer stratify for disparities.

Last year, this standing committee began the consensus development process evaluating 15 measures, seven of which were nearly submitted to NQF and eight measures undergoing maintenance review. Measure 0280, dehydration admission rate was referred to this current cycle of Health and Well-Being 2014. After the committee measure evaluation faced 13 measures recommended for endorsement will measure 2581 care continuity dental services was designated as consensus not reached.

During CSAC, 13 measures were recommended for endorsement. Measure 2518 was not recommended for endorsement because CSAC found that the evidence supporting this measure is based on expert opinion.

This slide is a complete list of the measures endorsed by NQF Board of Directors Executive Committee. During this phase of Health and Well-Being, the committee discussed these overarching themes. Evaluation of performance measures for oral health, dental and oral outcome measures and dental versus oral health services and accountability in population health management.

This slide shows alignment between the gaps identified by this committee and the MAP Population Health Task Force, which recommended areas of future measurement development to CMS for possible federal program. Some of the identified gaps include socio-economic and environmental determinants of health, specific subpopulation such as people with disabilities or the elderly and composites that assess population experience.

These are the seven measures currently being evaluated in the space with Health and Well-Being 2014.

And are there any questions at this point?

OK.

Adeela Khan: Thank you, Kaitlynn. So what I'm going to be doing is actually giving a quick introduction to some additional work that's going on in this project. During this project, we're also going to be working on updating the NQF pneumococcal vaccination standard specification.

In response to a growing number of care setting and care setting and specific influenza, pneumonia vaccination measures also may have slightly different specifications. CMS requested that NQF recommend a standard set of specifications for both influenza and pneumonia that took place in 2011.

The NQF pneumococcal vaccination specifications were based on the CDC ACIP Guidelines which recommended the administration of Pneumovax in adults age 65 and older and for certain immune compromised populations. During the last two years there's actually been some new trials which have led

CDC and ACIP to update their guidelines which now include Prevnar 13 to be added to the vaccination schedule.

Next slide.

NQF currently has several measures as part of the Health and Well-Being portfolio that involve pneumococcal vaccination. We have five measures here that are listed on the slide. Currently, these measures are in alignment with the 2011 NQF standard specifications. With the guidelines in place, NQF is actually undertaking a project to update the standard specifications so that the measure stewards for existing measures can assess their measures against the newly standardized specification.

Next slide, please.

A small set of the committee actually met on March 12th to update the specification. We drafted three sets of specifications that red line the NQF standard specification to agree with the changes that were – are part of the new guidelines. We drafted three standard specifications because the guidelines differed. With regard to the time intervals for vaccine administration among the different age groups, we actually had conversations with CDC and CDC informed NQF that they're working to harmonize the eight to – six to 18 years and nine to four-year time intervals. In which case we'd actually be able to condense two of the measures into one and have – we'd have two total measures then depending on the outcome of those deliberations. They'll let us know that those – they're expecting to have those completed by the summer.

There was some discussion about creating one single composite measure to commit those sub workgroups thought that it would be too complex and potentially confusing and so we proposed splitting the specifications into three different measures.

Next slide, please.

The full committee is going to be reviewing the standard specifications during the April 22nd in-person meeting. These specifications will be part of our

draft report. So they'll be undergoing member and public comment. And once they then finalized the specifications will be published on the NQF website and shared with measure developers.

Are there any questions?

OK. Hearing none, at this time, I just wanted to turn it over to the committee. If there are any questions about any of the measure evaluations you've been looking at related to the NQF criteria. While you may be thinking of questions to ask, we also wanted to try and get some general feedback about our staff analysis. This is something we've introduced into all of our new CDP projects. It was based on recommendations that came from our developer advisory panel and our steering committee advisory panel, at least to help breakdown some of the information in the measure submission forum. We hope it's really valuable, so any feedback would be appreciated.

OK. Hearing none, that is actually the conclusion of our call. We don't have any other information to add but if there is anyone who's interested in getting a feedback or if you have any questions feel – please feel free to reach out to any of the staff members.

We also wanted to – if you could go to the last slide, please.

We also wanted to let everyone know that we have an upcoming event for our NQF members. Many of you are part of NQF's member organization and our member department is actually having an education session entitled Quality Measurement 101, The Basics. There's a link on the Webinar. On the left hand side, there's a link for you to register. It's going to be getting – a really nice overview of what is quality and how do different people payers, purchases, providers, patients and researchers, how they use quality measures and where does measurement fit into the health care landscape.

We hope you joined. We just wanted to share this information with you and again the link is at the bottom of the – at the – on the Webinar, on the right hand side.

And with that, thank you very much.

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