



## NATIONAL QUALITY FORUM

Driving measurable health  
improvements together

## Agenda – Day One

### Measure Applications Partnership (MAP) Rural Health Advisory Group 2022-2023 Measures Under Consideration (MUC) Review Meeting

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December 8, 2022

10:00 AM – 6:00 PM ET

#### Participant Instructions

1. Register for this meeting: <https://qualityforum-org.zoom.us/joining/register/tZwkfuCvrjwvG9PaLV2N9fM6lmJL21EtJXbH>
2. After registering, you will receive a confirmation email containing information about joining the meeting.
3. Please note agenda times are estimates and may fluctuate based on actual meeting discussion.
4. In order to accommodate all voices during public comment, please limit comments to two minutes.

#### Meeting Objectives

- Review the MAP 2022-2023 pre-rulemaking approach and Advisory Group process
- Review and provide input on measures under consideration (MUC) for the Measure Applications Partnership (MAP) hospital, post-acute care/long-term care (PAC/LTC), and clinician programs from the health rural perspective

#### CMS Programs

- Ambulatory Surgical Center Quality Reporting Program (ASCQR)
- End-Stage Renal Disease Quality Incentive Program (ESRD QIP)
- Home Health Quality Reporting Program (HH QRP)
- Hospital-Acquired Condition Reduction Program (HACRP)
- Hospital Inpatient Quality Reporting Program (Hospital IQR)
- Hospital Outpatient Quality Reporting Program (Hospital OQR)
- Hospital Value-Based Purchasing Program (HVBPP)
- Inpatient Psychiatric Facility Quality Reporting Program (IPFQR)
- Inpatient Rehabilitation Facility Quality Reporting Program (IRF QRP)
- Long-Term Care Hospital Quality Reporting Program (LTCH QRP)
- Medicare Part C and D Star Ratings
- Medicare Promoting Interoperability Program for Eligible Hospitals and Critical Access Hospitals (Medicare Promoting Interoperability Program)
- Merit-based Incentive Payment System Program (MIPS)
- Prospective Payment System-Exempt Cancer Hospital Quality Reporting Program (PCHQRP)
- Rural Emergency Hospital Quality Reporting Program (REHQRP)
- Skilled Nursing Facility Quality Reporting Program (SNF QRP)
- Skilled Nursing Value Based Purchasing Program (SNF VBP)

## Agenda

- 10:00 AM**      **Welcome, Introductions, Disclosures of Interest, and Review of Meeting Objectives**  
*Jenna Williams-Bader, Senior Director, National Quality Forum (NQF)*  
*Kimberly Rask, MAP Rural Health Advisory Group Co-Chair*  
*Keith Mueller, MAP Rural Health Advisory Group Co-Chair*  
*Tricia Elliott, Vice President, National Quality Forum (NQF)*  
*Dana Gelb Safran, President and CEO, National Quality Forum (NQF)*
- 10:20 AM**      **Centers for Medicare & Medicaid Services (CMS) Opening Remarks**
- 10:30 AM**      **Overview of MAP 2022-2023 Pre-Rulemaking Approach and Advisory Group Process**  
*Jenna Williams-Bader, Senior Director, NQF*
- 10:40 AM**      **Chronic Condition Management and Preventive Care Measures**  
*Tamara Funk, Director, NQF*  
*Kimberly Rask, MAP Advisory Group Co-Chair*
- Opportunity for public comment on chronic condition management and preventive care measures
  - Pre-rulemaking input
    - **MUC2022-043:** Kidney Health Evaluation for Patients with Diabetes (KED) -Health Plans (*Medicare Part C and D Star Ratings*)
    - **MUC2022-048:** Cardiovascular Disease (CVD) Risk Assessment Measure - Proportion of pregnant/postpartum patients that receive CVD Risk Assessment with a standardized instrument (*MIPS*)
    - **MUC2022-065:** Preventive Care and Wellness (composite) (*MIPS*)
    - **MUC2022-125:** Gains in Patient Activation Measure (PAM) Scores at 12 Months (*MIPS, ESRD QIP*)
- 11:30 AM**      **Renal Measures**  
*Tamara Funk, Director, NQF*  
*Keith Mueller, MAP Advisory Group Co-Chair*
- Opportunity for public comment on renal measures
  - Pre-rulemaking input
    - **MUC2022-060:** First Year Standardized Waitlist Ratio (FYSWR) (*MIPS*)
    - **MUC2022-063:** Percentage of Prevalent Patients Waitlisted (PPPW) and Percentage of Prevalent Patients Waitlisted in Active Status (aPPPW) (*MIPS*)
    - **MUC2022-075:** Standardized Modality Switch Ratio for Incident Dialysis Patients (SMoSR) (*ESRD QIP*)
    - **MUC2022-076:** Standardized Fistula Rate for Incident Patients (*ESRD QIP*)
    - **MUC2022-079:** Standardized Emergency Department Encounter Ratio (SEDR) for Dialysis Facilities (*ESRD QIP*)
- 12:30 PM**      **Break**
- 1:00 PM**      **Rural Emergency Hospital Quality Reporting Program (REHQR) Measures**  
*Tamara Funk, Director, NQF*  
*Kimberly Rask, MAP Advisory Group Co-Chair*
- Opportunity for public comment on REHQR measures
  - Pre-rulemaking input
    - **MUC2022-039:** Median Time from emergency department (ED) Arrival to ED Departure for Discharged ED Patients

- **MUC2022-066:** Facility 7-Day Risk-Standardized Hospital Visit Rate after Outpatient Colonoscopy
- **MUC2022-067:** Risk-standardized hospital visits within 7 days after hospital outpatient surgery
- **MUC2022-081:** Abdomen Computed Tomography (CT) Use of Contrast Material

**3:00 PM**      **Break**

**3:10 PM**      **Patient Experience Measures**

*Tamara Funk, Director, NQF*

*Keith Mueller, MAP Advisory Group Co-Chair*

- Opportunity for public comment on patient experience measures
- Pre-rulemaking input
  - **MUC2022-014:** Ambulatory palliative care patients' experience of feeling heard and understood (*MIPS*)
  - **MUC2022-078:** Psychiatric Inpatient Experience Measurement (*IPFQR*)
  - **MUC2022-120:** Documentation of Goals of Care Discussions Among Cancer Patients (*PCHQRP*)

**4:10 PM**      **Break**

**4:20 PM**      **COVID-19 Measures**

*Tamara Funk, Director, NQF*

*Kimberly Rask, MAP Advisory Group Co-Chair*

- Opportunity for public comment on COVID-19 measures
- Pre-rulemaking input
  - **MUC2022-052:** Adult COVID-19 Vaccination Status (*MIPS*)
  - **MUC2022-084:** COVID-19 Vaccination Coverage among Healthcare Personnel (HCP) (2022 revision) (*ASCQR, Hospital IQR, Hospital OQR, HVBP, HACRP, IPFQR, IRF QRP, LTCH QRP, PCHQRP, SNF QRP, ESRD QIP*)
  - **MUC2022-089:** COVID-19 Vaccine: Percent of Patients/Residents Who Are Up to Date (*IRF QRP*)
  - **MUC2022-090:** COVID-19 Vaccine: Percent of Patients/Residents Who Are Up to Date (*HH QRP*)
  - **MUC2022-091:** COVID-19 Vaccine: Percent of Patients/Residents Who Are Up to Date (*LTCH QRP*)
  - **MUC2022-092:** COVID-19 Vaccine: Percent of Patients/Residents Who Are Up to Date (*SNF QRP*)

**5:25 PM**      **Eye Care Measures**

*Tamara Funk, Director, NQF*

*Keith Mueller, MAP Advisory Group Co-Chair*

- Opportunity for public comment on eye care measures
- Pre-rulemaking input
  - **MUC2022-114:** Appropriate screening and plan of care for elevated intraocular pressure following intravitreal or periocular steroid therapy (*MIPS*)
  - **MUC2022-115:** Acute posterior vitreous detachment appropriate examination and follow-up (*MIPS*)
  - **MUC2022-116:** Acute posterior vitreous detachment and acute vitreous

hemorrhage appropriate examination and follow-up (*MIPS*)

**5:50 PM**      **Preview of Day Two**  
*Jenna Williams-Bader, Senior Director, NQF*

**6:00 PM**      **Adjourn**



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## Agenda – Day Two

### Measure Applications Partnership (MAP) Rural Health Advisory Group 2022-2023 MUC Review Meeting

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December 9, 2022

10:00 am – 6:00 pm ET

#### Participant Instructions

1. Use the meeting link provided for day one to join the meeting on day two. If you did not attend day one, follow the registration instructions below.
2. Register for this meeting: <https://qualityforum-org.zoom.us/meeting/register/tZwkfuCvrjwvG9PaLV2N9fM6lmJL21EtJXbH>
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#### Meeting Objectives

- Review and provide input on measures under consideration (MUC) for the Measure Applications Partnership (MAP) hospital, post-acute care/long-term care (PAC/LTC), and clinician programs from the rural health perspective

#### Agenda

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|-----------------|---|
| <b>10:00 AM</b> | <b>Welcome, Preview of Day Two, and Roll Call</b><br><i>Jenna Williams-Bader, Senior Director, National Quality Forum (NQF)</i><br><i>Tricia Elliott, Vice President, National Quality Forum (NQF)</i>  |
| <b>10:10 AM</b> | <b>Behavioral Health Measures</b><br><i>Tamara Funk, Director, NQF</i><br><i>Kimberly Rask, MAP Rural Health Advisory Group Co-Chair</i> <ul style="list-style-type: none"> <li>• Opportunity for public comment on behavioral health measures</li> <li>• Pre-rulemaking input               <ul style="list-style-type: none"> <li>○ <b>MUC2022-122:</b> Improvement or Maintenance of Functioning for Individuals with a Mental and/or Substance Use Disorder (<i>MIPS</i>)</li> <li>○ <b>MUC2022-127:</b> Initiation, Review, And/Or Update To Suicide Safety Plan For Individuals With Suicidal Thoughts, Behavior, Or Suicide Risk (<i>MIPS</i>)</li> <li>○ <b>MUC2022-131:</b> Reduction in Suicidal Ideation or Behavior Symptoms (<i>MIPS</i>)</li> </ul> </li> </ul> |
| <b>11:00 AM</b> | <b>Patient Safety Measures</b><br><i>Tamara Funk, Director, NQF</i>   |

*Keith Mueller, MAP Rural Health Advisory Group Co-Chair*

- Opportunity for public comment on patient safety measures
- Pre-rulemaking input
  - **MUC2022-007:** Excessive Radiation Dose or Inadequate Image Quality for Diagnostic Computed Tomography (CT) in Adults (Clinician and Clinician Group Level) (*MIPS*)
  - **MUC2022-018:** Excessive Radiation Dose or Inadequate Image Quality for Diagnostic Computed Tomography (CT) in Adults (Hospital Level – Inpatient)(*Hospital IQR*)
  - **MUC2022-020:** Excessive Radiation Dose or Inadequate Image Quality for Diagnostic Computed Tomography (CT) in Adults (Hospital Level – Outpatient) (*Hospital OQR*)
  - **MUC2022-035:** Percent of Residents Experiencing One or More Falls with Major Injury (Long-Stay) (*SNF VBP*)
  - **MUC2022-064:** Hospital Harm - Pressure Injury (*Hospital IQR, Medicare Promoting Interoperability Program*)
  - **MUC2022-024:** Hospital Harm- Acute Kidney Injury (*Hospital IQR, Medicare Promoting interoperability Program*)
  - **MUC2022-082:** Severe Sepsis and Septic Shock: Management Bundle (*HVBP*)

12:10 PM

**Break**

12:30 PM

**Health Equity Measures**

*Tamara Funk, Director, NQF*

*Kimberly Rask, MAP Advisory Group Co-Chair*

- Opportunity for public comment on single existing measures
- Pre-rulemaking input
  - **MUC2022-027:** Facility Commitment to Health Equity (*ESRD QIP, IPFQR, PCHQRP*)
  - **MUC2022-050:** Screen Positive Rate for Social Drivers of Health (*ESRD QIP, IPFQR, PCHQRP*)
  - **MUC2022-053:** Screening for Social Drivers of Health (*ESRD QIP, IPFQR, PCHQRP*)
  - **MUC2022-058:** Hospital Disparity Index (HDI) (*Hospital IQR*)
  - **MUC2022-098:** Connection to Community Service Provider (*MIPS*)
  - **MUC2022-111:** Resolution of At Least 1 Health-Related Social Need (*MIPS*)

1:40 PM

**Break**

1:45 PM

**Outcomes – Readmissions, Mortality, and Unplanned Hospitalizations Measures**

*Tamara Funk, Director, NQF*

*Keith Mueller, MAP Advisory Group Co-Chair*

- Opportunity for public comment on outcomes – readmissions, mortality, and unplanned hospitalizations measures
- Pre-rulemaking input
  - **MUC2022-055:** Hybrid Hospital-Wide All-Cause Risk Standardized Readmission Measure (*Hospital IQR*)
  - **MUC2022-057:** Hybrid Hospital-Wide All-Cause Risk Standardized Mortality Measure (*Hospital IQR*)
  - **MUC2022-099:** Skilled Nursing Facility (SNF) Within-Stay (WS) Potentially Preventable Readmissions (PPR) Measure (*SNF VBP*)

- **MUC2022-113:** Number of hospitalizations per 1,000 long-stay resident days (SNF VBP)

2:15 PM

### Structural (Hospital/Surgery) Measures

*Tamara Funk, Director, NQF*

*Kimberly Rask, MAP Advisory Group Co-Chair*

- Opportunity for public comment on Structural (Hospital/Surgery) measures
- Pre-rulemaking input
  - **MUC2022-028:** ASC Facility Volume Data on Selected Surgical Procedures (formerly ASC-7) (ASCQR)
  - **MUC2022-030:** Hospital Outpatient Department Volume Data on Selected Outpatient Surgical Procedures (formerly OP-26) (Hospital OQR)
  - **MUC2022-032:** Geriatrics Surgical Measure (Hospital IQR)
  - **MUC2022-112:** Geriatrics Hospital Measure (Hospital IQR)

2:50 PM

### Break

3:00 PM

### Cost Measures

*Tamara Funk, Director, NQF*

*Keith Mueller, MAP Advisory Group Co-Chair*

- Opportunity for public comment on Cost measures
- Pre-rulemaking input
  - **MUC2022-097:** Low back pain (MIPS)
  - **MUC2022-100:** Emergency medicine (MIPS)
  - **MUC2022-101:** Depression (MIPS)
  - **MUC2022-106:** Heart failure (MIPS)
  - **MUC2022-129:** Psychoses and Related Conditions (MIPS)

3:35 PM

### Functional Outcome Measures

*Tamara Funk, Director, NQF*

*Kimberly Rask, MAP Advisory Group Co-Chair*

- Opportunity for public comment on single existing measures
- Pre-rulemaking input
  - **MUC2022-083:** Cross-Setting Discharge Function Score (IRFQRP)
  - **MUC2022-085:** Cross-Setting Discharge Function Score (HH QRP)
  - **MUC2022-086:** Cross-Setting Discharge Function Score (SNF QRP, SNF VBP)
  - **MUC2022-087:** Cross-Setting Discharge Function Score (LTCH QRP)
  - **MUC2022-026:** Risk-Standardized Patient-Reported Outcomes Following Elective Primary Total Hip and/or Total Knee Arthroplasty (THA/TKA PRO-PM) in the HOPD or ASC Setting (ASCQR, Hospital OQR)

4:00 PM

### Staffing Measure

*Tamara Funk, Director, NQF*

*Keith Mueller, MAP Advisory Group Co-Chair*

- Opportunity for public comment on staffing measure
- Pre-rulemaking input
  - **MUC2022-126:** Total nursing staff turnover (SNF VBP)

4:30 PM

### Discussion of Broad Themes

*Kimberly Rask, MAP Advisory Group Co-Chair*

- 4:45 PM**      **Opportunity for Public Comment**  
*Jenna Williams-Bader, Senior Director, NQF*
- 4:55 PM**      **Next Steps**  
*Jenna Williams-Bader, Senior Director, NQF*
- 5:00 PM**      **Adjourn**