



Measure Feedback Loop Committee Web Meeting #2

The National Quality Forum (NQF) convened a public web meeting for the Measure Feedback Loop Committee on February 19, 2019.

Welcome, Introductions, and Review of Web Meeting Objectives

Madison Jung, NQF Project Manager, welcomed participants to the web meeting and reviewed the meeting agenda and objectives. The goal of the meeting was to discuss the updates on the findings of the sources of information for measure feedback to inform the Environmental Scan Report. Ms. Jung provided an overview of the project scope, timeline, and its deliverables.

Review of Environmental Scan Findings to Date

Jean-Luc Tilly, NQF Senior Manager, Data Analytics, introduced the scope and purpose of the environmental scan. The environmental scan includes four key sources of information on measure feedback (1) performance data, (2) public comments, (3) findings from literature, and (4) results from key informant interviews.

Mr. Tilly discussed potential sources of measure feedback information from performance data, including CMS data repositories and registries. There are eight data sets available that address measure performance: Hospital Compare, Nursing Home Compare, Physician Compare, Home Health Compare, Dialysis Facility Compare, Hospice Compare, Inpatient Rehabilitation Facility Compare, and Long-Term Care Hospital Compare. These eight data sets vary on the level of analysis and the schedule of updates. Related to registries, sources of information include Qualified Clinical Data Registries (QCDR), Qualified Registries (QR), as well as the National Quality Registry Network. Information on measures could also be found through public comments. Sources of public comments include the Centers for Medicare and Medicaid Services (CMS) annual rulemaking process, the Consensus Development Process (CDP), the Measure Applications Partnership (MAP) process, and usability information documented in the NQF measure submission form.

Mr. Tilly reviewed the results of a literature scan using over 20 search terms, which identified several gaps and challenges for providing measure feedback information. These included issues in clinician access to performance data, lack of systematic reviews of clinician use of performance measure results, and limitations in benchmarks, or comparisons with similar providers.

Allen Frommelt, NQF Senior Director, then reviewed the status of key informant interview results conducted by NQF staff. Stakeholders interviewed included an electronic health record (EHR) vendor, chief health informatics officers, chief medical officers, a leader of quality improvement departments, a measure developer, and a measure implementer. Key themes from interviews as of February 19, 2019 included the need for feedback from frontline staff, passive (e.g., public comment) and active (e.g., site visit) tools, and the need for feedback to be collected during all phases of measure creation and use.

NQF staff asked for the Committee's feedback on its current approach and current search criteria. Committee co-chairs, Rose Baez and Eddie Machado, facilitated the discussion. The committee discussion touched on the following themes:

Additional Sources of Measure Feedback

Committee members suggested that JIRA, an issue tracking tool, should be considered as one of the sources of measure feedback, in particular, as it includes public comments submitted on electronic Clinical Quality Measures (eCQMs). Committee members also suggested outreach to other organizations that routinely collect feedback information to learn from their methods, such as CMS, Physician Consortium for Performance Improvement (PCPI), Accountable Care Organization (ACO) platforms, and International Consortium for Health Outcomes Measurement (ICHOM). NQF staff noted that they are already reaching out to several of these organizations to better understand their processes.

Additional Perspectives to Incorporate

During the discussion, Committee members identified numerous additional perspectives to consider during the identification of feedback or challenges and gaps. Committee members suggested additional outreach to committee members from NQF standing committees, specialty societies and professional societies that create measures, practicing clinicians—particularly to offer feedback on the Merit-Based Incentive Payments System (MIPS) and other established targets—pharmacists, and other measure developers (for example, from groups such as PCPI and The Joint Commission).

Committee members also highlighted the need to gather further information from end-users, such as patients and families, on measure feedback—and the need to clearly communicate measure findings and limitations, such as the lag time between data collection and publication.

Challenges for Capturing and Identifying Measure Feedback

Committee members identified challenges in identifying the appropriate timing of when feedback should be provided in the MAP and CDP processes, noting a specific example of measures evaluated by the End-Stage Renal Disease (ESRD) Committee. Committee members noted the need to better reconcile the NQF endorsement processes with CMS use of measures in performance programs. Committee members noted that developers often appreciate receiving feedback directly rather than through a third party (for example NQF). Measure developer-designed processes, such as expert panels and help-desks, help provide feedback directly during the measure development process.

Committee members representing the measure developer perspective emphasized their interest in receiving feedback from a wide variety of stakeholders. However, Committee members noted that the information provided directly to measure developers could also have some benefit to the wider measurement community—and should also be shared more broadly. Committee members noted that the solicitation and provision of feedback could be better organized through a community vehicle, so that stakeholders do not receive one-off requests or need to understand multiple pathways to provide feedback. NQF staff noted that one of the main tasks of the Committee will be to identify what information needs to be included in such a process.

Committee members noted that the farther along in the measure development process a measure travels, the less likely it is to fail. Committee members recommended that there should be a clear mechanism to allow measures to fail if they are found not to be feasible or are not producing valid results in beta-testing. Committee members discussed the challenges of getting information after a measure is put into use for measure maintenance. Feedback is received through JIRA and data through CMS, but there are few other mechanisms for measures to receive measure feedback systematically—especially when implementation and interpretation might vary across measure users. Finally, Committee members noted the need to provide this feedback to measure developers.

Future Considerations for the Measure Feedback Loop

Committee members suggested that the group explore better methods to identify unintended consequences and potential problems with measures before they go into widespread use. Committee members also noted the need to consider Goodhart’s law, and potential changes to performance caused by the activity of target setting.

Committee members also discussed the need for a taxonomy of ways in which measures could potentially fail, so that the measure development process could address these issues. NQF could potentially take a lead in developing methods for how to examine potential failure points, for example in categorizing issues of use or unintended consequences.

Committee members emphasized the need that everyone that touches a measure be involved in the measure development process. This should include practicing clinicians to provide feedback early in development, for example, in a beta-testing phase or earlier (concept phase). However, Committee members also noted that the provision of feedback could be burdensome for practicing clinicians, and there are significant difficulties in getting them to provide feedback. Systems for feedback should be designed with measure users in mind (for example, an immediate feedback button on a dashboard or in an EHR). Collected data should also be standardized and collected in one location.

Finally, Committee members noted that there should be multiple points throughout measure development to allow for measure feedback from measure users. They also suggested a review of incentives for encouraging the receipt of feedback, and effective ways to demonstrate the value proposition of measure feedback.

Public Comment

Navya Kumar, NQF Project Analyst, opened the web meeting to allow for public comment. No public comments were offered.

Next Steps

Following the web meeting, NQF will finalize the draft environmental scan report. NQF will continue to schedule key informant interviews and will collect feedback to include in the draft report. This report will be posted for NQF member and public comment from March 11-25, 2019. The final environmental scan report will be posted on April 12, 2019.