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### Neurology Spring 2020 Topical Web Meeting

Matthew Pickering, PharmD, Senior Director Oroma Igwe, MPH, Manager Ngozi Ihenacho, MPH, Analyst Yemsrach Kidane, PMP, Project Manager

July 16, 2020

### Welcome



#### Welcome

- The CenturyLink web platform will allow you to visually follow the presentation
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- Please do not put the call on hold.
- You may submit questions to project staff via the CenturyLink web platform chat function.
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#### **Project Team** — Neurology Committee



Matthew Pickering, PharmD Senior Director



Oroma Igwe, MPH Manager

Ngozi Ihenacho, MPH Analyst



Yemsrach Kidane, PMP Project Manager



#### Agenda

- Welcome
- Introductions and Meeting Objectives
  - Roll Call
- Neurology CQMC Workgroup Environmental Scan
  - Overview of the CQMC
  - Measure Selection Principles
  - Environmental Scan and Workgroup Discussion
  - Completed Environmental Scan
  - Gaps and Measures under Development

- Neurology Project Team Overview of Neurology Portfolio
- Neurology Standing Committee Measure Gap Discussion
- NQF Member and Public Comment
- Next Steps
- Adjourn

### Introductions and Meeting Objectives



#### **Neurology Standing Committee**

- David Knowlton, MA (co-chair)
- David Tirschwell, MD, MSc (co-chair)
- Mary Kay Ballasiotes
- Jocelyn Bautista, MD
- James Burke, MD
- Valerie Cotter, DrNP, AGPCNP-BC, FAANP
- Rebecca Desrocher, MS

- Bradford Dickerson, MD, MMSc
- Charlotte Jones, MD, PhD, MSPH
- Melody Ryan, PharmD, MPH
- Jane Sullivan, PT, DHS, MS
- Kelly Sullivan, PhD
- Ross Zafonte, DO



#### **Objectives**

- Discuss the purpose and role of the Core Quality Measure Collaborative (CQMC)
- Review and discuss findings CQMC environmental scan of Neurology measures
- Describe current NQF-endorsed Neurology Measure portfolio
- Discuss gaps and garner input on the Neurology Measure Portfolio



#### **Housekeeping Rules**

#### During the discussions, Committee members should:

- Remain engaged in the discussion without distractions
- Attend the meeting at all times
- Keep comments concise and focused
- Allow others to contribute



http://www.qualityforum.org/cqmc

### CQMC Neurology Workgroup -Presentation to the Neurology Standing Committee Amy Moyer, Director, Quality Measurement

July 16, 2020



#### Topics

- Overview of the Core Quality Measures Collaborative (CQMC)
- Environmental Scan and Workgroup Discussion
- Gaps and Measures Under Development
- Questions?

## **Overview of the CQMC**



#### **NQF Project Team**

- Nicolette Mehas, PharmD, Director
- Amy Moyer, MS, PMP, Director
- Teresa Brown, MHA, Senior Manager
- Yvonne Kalumo-Banda, MS, Project Manager
- Amy Guo, MS, Project Analyst
- Kabir Suri, Project Analyst



#### **Funding Statement**

The CQMC is a membership-driven and funded effort, with additional funding provided by CMS and AHIP.









America's Health Insurance Plans



#### **CQMC** Background

- The CQMC is a broad-based coalition of health care leaders originally convened by America's Health Insurance Plans (AHIP) in 2015 with the goal of identifying a core set of measures for select clinical practice areas.
- Membership includes the Centers for Medicare & Medicaid Services (CMS), health insurance providers, medical associations, consumer groups, purchasers (including employer group representatives), and other quality collaboratives.
- Led to the public release of eight consensus core sets in 2016.



### **CQMC** Today

- NQF is working with AHIP and CMS to:
  - Convene the CQMC to maintain the core sets,
  - Identify priority areas for new core sets,
  - Prioritize measure gaps, and
  - Provide guidance on dissemination and adoption.



#### **CQMC** Aims

- Identify high-value, high-impact, evidence-based measures that promote better patient outcomes, and provide useful information for improvement, decision-making and payment.
- Align measures across public and private payers to achieve congruence in the measures being used for quality improvement, transparency, and payment purposes.
- Reduce the burden of measurement by eliminating low-value metrics, redundancies, and inconsistencies in measure specifications and quality measure reporting requirements across payers.



#### What Are Core Measure Sets?

- The CQMC defines a core measure set as a parsimonious group of scientifically sound measures that efficiently promote a patient-centered assessment of quality and should be prioritized for adoption in value-based purchasing and alternative payment models.
- The CQMC core measure sets primarily focus on outpatient, clinician-level measurement.



#### **Current Core Measure Sets**

- Accountable Care Organizations (ACO), Patient Centered Medical Homes (PCMH), and Primary Care
- Cardiology
- Gastroenterology
- HIV and Hepatitis C
- Medical Oncology
- Obstetrics and Gynecology
- Orthopedics
- Pediatrics



#### **New Workgroups**

- Behavioral Health
- Neurology
- Implementation



#### **Project Approach**

- Convene a workgroup
  - Identify existing measures and inputs for environmental scan
  - Perform environmental scan and gather measure information
  - Discuss measures and reach consensus on whether to include in electronic voting
  - Vote on whether to add measures to core set
    - » 60% of voting members AND at least one vote from each voting category (medical association, private or public payer, and other)
      - Other can include Patient/Consumer Groups, Purchaser/Employer Group, Quality
        Collaboratives
  - Identify remaining gaps and strategies to fill the gaps
  - Discuss how to present and disseminate the core set
- Core sets are presented to the Steering Committee and the Full Collaborative for final approval

### **Measure Selection Principles**



#### **Principles for the CQMC core measure sets**

- Provide a person-centered and holistic view of quality, including consideration of Social Determinants of Health (SDOH) and experience of care.
- Provide meaningful and usable information to all stakeholders.
- Promote parsimony, alignment, and efficiency of measurement (i.e., minimum number of measures and the least burdensome measures).
- Include an appropriate mix of measure types while emphasizing outcome measures and measures that address cross-cutting domains of quality.
- Promote the use of innovative measures (e.g., eMeasures, measures intended to address disparities in care, or patient-reported outcome measures).
- Include measures relevant to the medical condition of focus (i.e., "specialtyspecific measures").



# Principles for measures included in the CQMC core measure sets

- Advance health and healthcare improvement goals and align with stakeholder priorities.
  - Address a high-impact aspect of healthcare where a variation in clinical care and opportunity for improvement exist.
- Are unlikely to promote unintended adverse consequences.
- Are scientifically sound (e.g., NQF-endorsed or otherwise proven to be evidencebased, reliable, and valid in diverse populations).
  - The source of the evidence used to form the basis of the measure is clearly defined.
  - There is high quality, quantity, and consistency of evidence.
  - Measure specifications are clearly defined.
- Represent a meaningful balance between measurement burden and innovation.
  - Minimize data collection and reporting burden, while maintaining clinical credibility (i.e., measures that fit into existing workflows, are feasible, and do not duplicate efforts).
  - Are ambitious, yet providers being measured can meaningfully influence the outcome and are implemented at the intended level of attribution.
  - Are appropriately risk adjusted and account for factors beyond control of providers, as necessary.

### Environmental Scan and Workgroup Discussion



#### **Potential Sources for Measures**

- Measures currently endorsed by NQF
- Measures used in public programs with specifications available
- Measures suggested by CQMC Members
   American Academy of Neurology's (AAN's) Axon Registry



#### **Neurology Measurement - Existing Areas**

Based on NQF-endorsed measures and MIPS measures

- Stroke
- Dementia
- Readmissions
- Functional Change
- Amyotrophic Lateral Sclerosis (ALS)
- Epilepsy
- Primary Headache
- Parkinson's disease

### **Completed Environmental Scan**



#### **Environmental Scan Approach**

Searching potential sources for measures including:

NQF's QPS (Measures numbered NQF XXXX)

- MIPS Program (Measures numbered QPP XXX)
- AAN's Axon registry listing (Measures numbered AANXX)
- Capturing the following information:

Measure TitleNQF Number (if applicable)AligMeasure StewardScieNotesMinMeasure DescriptionProNumerator DescriptionOpDenominator DescriptionRisCare SettingEvel of AnalysisMeasure TypeData SourceMeasure UseKeasure Setting

Align with goals and priorities Scientifically Sound Minimize Burden Provider can influence outcome Opportunity for Improvement Risk-adjusted/account for factors outside control?



#### **Neurology Measurement – Areas**

- Amyotrophic Lateral Sclerosis (ALS)
- Back Pain
- Child Neurology
- Dementia
- Distal Symmetric Polyneuropathy (DSP)
- Epilepsy

- Headache
- Multiple Sclerosis (MS)
- Neuro-otology
- Parkinson's Disease
- Sleep
- Stroke
- Cross-cutting



#### **Amyotrophic Lateral Sclerosis (ALS)**

 QPP 386 Amyotrophic Lateral Sclerosis (ALS) Patient Care Preferences



#### **Back Pain**

- AAN26 Activity Counseling for Back Pain
- NQF 0425, QPP 220 Functional Status Change for Patients with Low Back Impairments



#### **Child Neurology**

 AAN20 Querying for co-morbid conditions of tic disorder (TD) and Tourette Syndrome (TS)



#### Dementia

- NQF 2872e/QPP 281 Dementia: Cognitive Assessment
- QPP 282 Dementia: Functional Status Assessment
- QPP 283 Dementia: Associated Behavioral and Psychiatric Symptoms Screening and Management
- QPP 288 Dementia: Caregiver Education and Support
- QPP 286 Dementia: Counseling Regarding Safety Concerns



#### **Distal Symmetric Polyneuropathy (DSP)**

 AAN28 Diabetes/Pre-Diabetes Screening for Patients with DSP



### Epilepsy

- QPP 268 Epilepsy: Counseling for Women of Childbearing Potential with Epilepsy
- AAN12 Quality of Life Assessment for Patients with Epilepsy


## Headache

- AAN5 Medication Prescribed for Acute Migraine Attack
- QPP 435 Quality of Life Assessment for Patients with Primary Headache Disorder
- QPP 419 Overuse of Imaging for the Evaluation of Primary Headache



#### **Multiple Sclerosis**

 AAN8 Exercise and Appropriate Physical Activity Counseling for Patients with MS



#### **Neuro-otology**

 AAO35 Benign Positional Paroxymal Vertigo (BPPV): Dix-Hallpike and Canalith Repositioning



#### **Parkinson's Disease**

- QPP 290 Parkinson's Disease: Psychiatric Symptoms Assessment for Patients with Parkinson's Disease
- AAN9 Querying About Symptoms of Autonomic Dysfunction for Patients with Parkinson's Disease
- QPP 291 Parkinson's Disease: Cognitive Impairment of Dysfunction Assessment
- QPP 293 Parkinson's Disease: Rehabilitative Therapy Options



## Sleep

- QPP 277 Sleep Apnea: Severity Assessment at Initial Diagnosis
- QPP 279 Sleep Apnea: Assessment of Adherence to Positive Airway Pressure Therapy



#### Stroke

#### QPP 187 Stroke and Stroke Rehabilitation: Thrombolytic Therapy



#### **Cross-cutting Measure Areas**

- Medication Documentation, Reconciliation, and Management
  NQF 0097 Medication Reconciliation Post-Discharge
- Patient Experience
  NQF 0005 CG CAHPS (Adult and Pediatric)
- Functional Status
  - NQF 2624 Functional Outcome Assessment
- Quality of Life Assessment
  - No measure identified in scan
- Opioid Use and/or Misuse
  - Desire to align with other workgroups. Challenging measurement area.



#### **Neurology Workgroup Status and Takeaways**

- Most measures omitted for this cycle due to concerns about testing and gap
- AAN conducting testing across their portfolio of measures
- Strong measures that will fill priority gaps are coming soon

# Gaps and Measures Under Development



#### Gaps

- Outcome measures for neurological illness
  - This may mean measuring the avoidance of bad outcomes
- Transitions of care
  - Pediatrics to adult
  - Generalist to specialist and back to generalist
- Pain assessment for neurological conditions



#### **Measures Under Development**

- AAN developing a quality of life measure (Global Health 10)
- AAN prioritizing: child neurology, dementia and MCI, polyneuropathy, epilepsy, headache, multiple sclerosis, and Parkinson's disease
- AAN also working on cross-cutting falls measures

## Neurology Project Team Overview of Neurology Portfolio



#### **Neurology Portfolio of Measures**

- This project evaluates measures related to neurological conditions that can be used for accountability and public reporting for all populations and in all settings of care.
- During the 2015-2016 cycle, NQF had 15 number of endorsed Neurology measures.
- NQF did not receive measure submissions during Fall 2017, Spring 2018, and Fall 2018 cycles.
- During the Spring 2019 cycle, NQF had 18 endorsed Neurology measures, while Fall 2019 cycle had 17 endorsed Neurology measures.



#### **Overall Table of Neurology Portfolio Measures\***

	Phase 1: 2015 2016**		Spring 2019		Fall 2019	
Condition	Outcome	Process	Outcome	Process	Outcome	Process
Dementia	0	3	0	2	0	1
Stroke	1	10	2	14	2	14
Other	0	1	0	0	0	0
Total	1	14	2	16	2	15

\*2017 – 2018 cycles not represented due to an absence of measure submissions; NQF held topical webinars in the absence of measure evaluation meetings.

\*\*NQF 2872 was approved for trial use during 2015-2016 and is not included in the count of endorsed 2015-2016 measures.



#### **Table by Accountable Entity\***

Level of Accountability	2015 2016**	Spring 2019	Fall 2019
Facility	13	15	15
Clinician: Group Practice	0	1	1
Clinician: Individual	1	2	2
Health Plan	1	1	0
Integrated Delivery System	0	8	0
Population: Community, County, or City	0	0	0
Population: Regional and State	0	0	0
Other	12	13	12

\*2017 – 2018 cycles not represented due to an absence of measure submissions; NQF held topical webinars in the absence of measure evaluation meetings.

\*\*NQF 2872 was approved for trial use during 2015-2016 and is not included in the count of endorsed 2015-2016 measures.

## Neurology Standing Committee Measure Gap Discussion



#### **Discussion (**tentative questions**)**

- Why is NQF experiencing an absence of or decline in Neurology measure submissions?
- What are potential barriers/challenges to developing measures in this field?
- Where is the current need for Neurology quality measures?
- What is an emerging area of concern that can be addressed?
  - Are there opportunities for measurement within Neurology?
  - Underserved areas?
- What are the kind of quality measures needed? (e.g., PRO-PMs, eCQMs)?
- Are you aware of Neurology measures that are currently under development?
- What can NQF do to stimulate quality measurement efforts in this area?

## **Opportunity for Public and Member Comment**

# Next Steps



## **Activities and Timeline – Spring 2020 Cycle**

Date, Time	
20	
)	



#### Fall 2020 Cycle Updates

- Intent to submit deadline is August 3, 2020
- Measure Submission is November 2, 2020



#### **Project Contact Info**

- Email: <u>neurology@qualityforum.org</u>
- NQF phone: 202-783-1300
- Project page: <u>https://www.qualityforum.org/Neurology\_.aspx</u>
- SharePoint site: <u>http://staff.qualityforum.org/Projects/Neurology%202015/SitePages</u> <u>/Home.aspx</u>

## THANK YOU.

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