



## Technical Expert Panel for Opioid and Opioid Use Disorder

### BACKGROUND

Opioid-related overdose fatalities have increased markedly over the last 10 years in epidemic proportions. In 2017, there were over 47,000 U.S. deaths attributable to opioid use, both prescription and illicit.<sup>1</sup> These alarming numbers eclipse the total mortality related to other substantial mortality/morbidity crises recently experienced by the United States including peak automobile accidents, the Vietnam War, HIV/AIDS, and gun violence.<sup>2</sup> Moreover, an increasing proportion of those opioid deaths are tied to heroin use.<sup>3,4</sup>

Quality measurement related to opioid use is a key component to holding care providers, payers, and policymakers accountable as direct purveyors or indirect sponsors of the best possible care regarding pain management and substance use disorder treatment and prevention.

### TECHNICAL EXPERT PANEL CHARGE

Pursuant to the passage of the federal Substance Use-Disorder Prevention that Promotes Opioid Recovery and Treatment (SUPPORT) for Patients and Communities Act (P.L. 115-271), NQF will assemble a technical expert panel (TEP) to work towards consensus decisions that yield a scholarly and practical environmental scan report regarding the current state of opioid-related healthcare quality measures. The TEP will use the scan to identify gaps and provide recommendations on the inclusion of measures in various federal programs and future measure development efforts regarding challenges posed by opioid use in the U.S.

### TEP STRUCTURE

The TEP will comprise up to 25 individuals for one year and will provide input and feedback on an environmental scan.

**Participation on the TEP requires a significant time commitment. To apply, TEP members should be available to participate in all currently scheduled calls/meetings.** Over the course of the

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<sup>1</sup> Scholl L, Seth P, Kariisa M, et al. Drug and opioid-involved overdose deaths – United States, 2013-2017. *MMWR Morb Mortal Wkly Rep.* 2019;67(5152):1419-1427. DOI: [dx.doi.org/10.15585/mmwr.mm675152e1](https://doi.org/10.15585/mmwr.mm675152e1)

<sup>2</sup> Saloner B and Barry C. Ending the opioid epidemic requires a historic investment in medication-assisted treatment. *J of Policy Anal and Mgt*; 2018;37(2)431-438.

<sup>3</sup> Barry C. Fentanyl and the evolving opioid epidemic: what strategies should policy makers consider? *Psychiatr Serv.* 2018;69(1):100-103.

<sup>4</sup> Saloner B, McGinty E, Beletsky L, et al. A public health strategy for the opioid crisis. *Public Health Rep.* 2018;133 (Suppl) 24S-34S.

project, additional calls may be scheduled, or calls may be rescheduled based on project needs; new dates will be set based on the availability of the majority of the TEP.

**TEP participation includes:**

- Seven two-hour web meetings
- Additional web meetings as needed

**Scheduled Meeting Dates**

Meeting	Date
Web Meeting #1	April 24, 2019, 3-5 pm ET
Web Meeting #2	May 13, 2019, 12-2 pm ET
Web Meeting #3	June 4, 2019, 1-3 pm ET
Web Meeting #4	August 13, 2019, 1-3 pm ET
Web Meeting #5	September 16, 2019, 3-5 pm ET
Web Meeting #6	October 10, 2019, 12-2 pm ET
Web Meeting #7	January 21, 2020, 3-5 pm ET

**PREFERRED EXPERTISE AND COMPOSITION**

TEP members will be selected to ensure representation from a variety of stakeholders, including consumers (patients and their advocates), payers, health plans, clinicians, suppliers, academia, and policy makers. NQF is thus seeking those with knowledge and expertise in the treatment of chronic and acute pain, and separately or jointly in the treatment and prevention of opioid use disorders. Additionally, to achieve broad representation across these two domains, knowledge and expertise in the following areas is also sought:

- Rural health
- Medicaid/Medicare
- Quality measure development/ health services research
- Emergency/urgent/first responder care
- Psychiatry/neurology
- Anesthesiology/surgery
- Palliative care/cancer care
- Primary care/pediatrics/internal medicine
- Pharmacy/pharmaceutical sciences
- Dentistry
- Behavioral change/behavioral economics
- OB/GYN

- Criminal Justice/Drug Interdiction

Because NQF attempts to represent a diversity of stakeholder perspectives, a limited number of individuals from each of these stakeholder groups can be seated on a TEP.

**Please review the NQF conflict of interest policy to learn about how NQF identifies potential conflict of interest.** All potential TEP members must disclose any current and past activities prior to and during the nomination process in order to be considered.

## CONSIDERATION AND SUBSTITUTION

Priority will be given to nominations from NQF members when nominee expertise is comparable. Please note that nominations are to an individual, not an organization, so “substitutions” of other individuals are not permitted. TEP members are encouraged to engage colleagues and solicit input from colleagues throughout the process.

## APPLICATION REQUIREMENTS

Nominations are sought for individual subject matter experts. Self-nominations are welcome. Third-party nominations must indicate that the individual has been contacted and is willing to serve.

To nominate an individual to the Opioid and Opioid Use Disorder TEP, please **submit** the following information:

- a completed [online nomination form](#), including:
  - a brief statement of interest
  - a brief description of nominee expertise highlighting experience relevant to the TEP
  - a short biography (maximum 100 words), highlighting experience/knowledge relevant to the expertise described above
  - curriculum vitae or list of relevant experience (e.g., publications) *up to 20 pages*
- A completed disclosure of interest form. This will be requested upon your submission of the nominations form for members actively seeking nominees.

## DEADLINE FOR SUBMISSION

All nominations *MUST* be submitted by **6:00 pm ET on March 18, 2019.**

## QUESTIONS

If you have any questions, please contact [opiod@qualityforum.org](mailto:opiod@qualityforum.org). Thank you for your interest.