



**NATIONAL  
QUALITY FORUM**

Driving measurable health  
improvements together

# Patient Experience and Function Spring 2021 Measure Review Cycle

## Measure Evaluation Standing Committee Meeting

Poonam Bal, MHSA, Interim Director, Quality Innovation

Oroma Igwe, MPH, Manager, Quality Measurement

Yemsrach Kidane, PMP, Project Manager, Quality Measurement

Gus Zimmerman, MPP, Coordinator, Quality Measurement

*June 30, 2021*

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# Welcome

## Housekeeping Reminders

- This is a WebEx meeting with audio and video capabilities
- Optional: Dial **1-844-621-3956** and enter passcode **173 832 5143**
- Please place yourself on mute when you are not speaking
- We encourage you to use the following features
  - ▣ Chat box: to message NQF staff or the group
  - ▣ Raise hand: to be called upon to speak
- We will conduct a Committee roll call once the meeting begins

If you are experiencing technical issues, please contact the NQF project team at [patientexperience@qualityforum.org](mailto:patientexperience@qualityforum.org).

## Project Team — Patient Experience and Function Committee



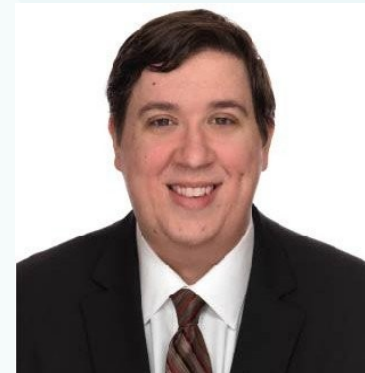
**Poonam Bal, MHSA  
Director, QI**



**Oroma Igwe, MPH  
Manager, QM**



**Yemsrach Kidane, PMP  
Project Manager, QM**



**Gus Zimmerman, MPP  
Coordinator, QM**

## Agenda

- Introductions and Disclosures of Interest
- Overview of Evaluation Process and Voting Process
- Measure Under Review
- Consideration of Candidate Measure
- Related and Competing Measures
- NQF Member and Public Comment
- Next Steps
- Adjourn

# Introductions and Disclosures of Interest

## Patient Experience and Function Spring 2021 Cycle Standing Committee

- **Gerri Lamb**, PhD, RN, FAAN (Co-chair)
- **Christopher Stille**, MD, MPH, FAAP (Co-chair)
- **Richard Antonelli**, MD, MS
- **Adrienne Boissy**, MD, MA
- **Desiree Collins Bradley**
- **Donald Casey**, MD, MPH, MBA, FACP, FAHA, FAAPL, DFACMQ
- **Ariel Cole**, MD
- **Ryan Coller**, MD, MPH
- **Sharon Cross**, LISW-S
- **Christopher Dezii**, MBA, RN, CPHQ
- **Shari Erickson**, MPH
- **Dawn Hohl**, RN, BSN, MS, PhD
- **Sherrie Kaplan**, PhD, MPH
- **Brenda Leath**, MHSA, PMP
- **Brian Lindberg**, BSW, MMHS
- **Lisa Morrise**, MA
- **Kirk Munsch**
- **Randi Oster**, MBA
- **Charissa Pacella**, MD
- **Lenard Parisi**, RN, MA, CPHQ, FNAHQ
- **Debra Saliba**, MD, MPH
- **Ellen Schultz**, MS (*inactive*)
- **Lisa Suter**, MD
- **Peter Thomas**, JD (*inactive*)

# Overview of Evaluation Process





## Roles of the Standing Committee During the Evaluation Meeting

- Act as a proxy for the NQF multistakeholder membership
- Evaluate each measure against each criterion
  - ▣ Indicate the extent to which each criterion is met and rationale for the rating
- Make recommendations regarding endorsement to the NQF membership
- Oversee the portfolio of Patient Experience and Function measures



## Meeting Ground Rules

**During the discussions, Standing Committee members should:**

- Be prepared, having reviewed the measures beforehand
- Base evaluation and recommendations on the measure evaluation criteria and guidance
- Remain engaged in the discussion without distractions
- Attend the meeting at all times
- Keep comments concise and focused
- Allow others to contribute



## Process for Measure Discussion and Voting

- Brief introduction by measure developer (3-5 minutes)
- Lead discussants will begin Standing Committee discussion for each criterion by:
  - ▣ Briefly explaining information on the criterion provided by the developer
  - ▣ Providing a brief summary of the pre-meeting evaluation comments
  - ▣ Emphasizing areas of concern or differences of opinion
  - ▣ Noting, if needed, the preliminary rating by NQF staff
    - » This rating is intended to be used as a guide to facilitate the Standing Committee's discussion and evaluation.
- Developers will be available to respond to questions at the discretion of the Standing Committee
- Full Standing Committee will discuss, then vote on the criterion, if needed, before moving on to the next criterion

## Endorsement Criteria

- **Importance to Measure and Report (Evidence and Performance Gap):** Extent to which the measure focus is evidence-based and important to making significant gains in healthcare quality where there is variation in or overall less-than-optimal performance (**must-pass**)
- **Scientific Acceptability (Reliability and Validity):** Extent to which the measure produces consistent (reliable) and credible (valid) results about the quality of care when implemented (**must-pass**)
- **Feasibility:** Extent to which the specifications require data that are readily available or could be captured and implemented without undue burden
- **Usability and Use:** Extent to which the measure is being used for both accountability and performance improvement to achieve the goal of high-quality, efficient healthcare (**must-pass** for maintenance measures).
- **Comparison to related or competing measures:** If a measure meets the above criteria and there are endorsed or new related measures or competing measures, the measures are compared to address harmonization and/or selection of the best measure.



## Voting on Endorsement Criteria

- Votes will be taken after the discussion of each criterion
- **Importance to Measure and Report**
  - ▣ Vote on Evidence (must pass)
  - ▣ Vote on Performance Gap (must pass)
  - ▣ Vote on Rationale - Composite measures only
- **Scientific Acceptability Of Measure Properties**
  - ▣ Vote on Reliability (must pass)
  - ▣ Vote on Validity (must pass)
  - ▣ Vote on Quality Construct - Composite measures only
- **Feasibility**
- **Usability and Use**
  - ▣ Use (must pass for maintenance measures)
  - ▣ Usability



## Voting on Endorsement Criteria (continued)

- **Related and Competing Discussion**
- **Overall Suitability for Endorsement**
- **Procedural Notes**
  - ▣ If a measure fails on one of the must-pass criteria, there is no further discussion or voting on the subsequent criteria for that measure; Standing Committee discussion moves to the next measure.
  - ▣ If consensus is not reached, discussion continues with the next measure criterion.



## Achieving Consensus

- Quorum: 66% of active committee members (e.g., 15 of 22 members)

Vote	Outcome
Greater than 60% yes	Pass/Recommended
40% - 60% yes	Consensus Not Reached (CNR)
<40% yes	Does Not Pass/Not Recommended

- “Yes” votes are the total of high and moderate votes
- CNR measures move forward to public and NQF-member comment and the Committee will revote during the post-comment web meeting
- Measures which are not recommended will also move on to public and NQF-member comment, but the Standing Committee will not revote on the measures during the post comment meeting unless the Standing Committee decides to reconsider them based on submitted comments or a formal reconsideration request from the developer.



## Standing Committee Quorum and Voting

- Please let staff know if you need to miss part of the meeting.
- We must have quorum to vote. Discussion may occur without quorum.
- If we do not have quorum at any point during the meeting, live voting will stop, and staff will send a survey link to complete voting.
  - ▣ Standing Committee member votes must be submitted within 48 hours of receiving the survey link from NQF staff.
- If a Standing Committee member leaves the meeting and quorum is still present, the Standing Committee will continue to vote on the measures. The Standing Committee member who left the meeting will not have the opportunity to vote on the missed measures.





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# Questions?

# Voting Test

# Measure Under Review



## Spring 2021 Cycle Measure

- **1 New Measure for Standing Committee Review**
  - ▣ **#3622** National Core Indicators for Intellectual and Developmental Disabilities (ID/DD) Home- and Community-Based Services (HCBS) Measures – (Human Services Research Institute (HSRI))



## NQF Scientific Methods Panel Review

- The Scientific Methods Panel independently evaluated the Scientific Acceptability of this measure:
  - ▣ #3622 National Core Indicators for Intellectual and Developmental Disabilities (ID/DD) Home- and Community-Based Services (HCBS) Measures
- The Panel, consisting of individuals with methodologic expertise, was established to help ensure a higher-level evaluation of the scientific acceptability of complex measures.
- The Panel's comments and concerns are provided to developers to further clarify and update their measure submission form with the intent of strengthening their measures to be evaluated by the Standing Committee.
- Certain measures that do not pass reliability and/or validity are eligible to be pulled by a standing committee member for discussion and revote.



## NQF Scientific Methods Panel Review

- 1 measure reviewed by the SMP
  - ▣ #3622 National Core Indicators for Intellectual and Developmental Disabilities (ID/DD) Home- and Community-Based Services (HCBS) Measures passed on reliability and did not gain consensus on validity
    - » Reliability: H-3; M-3; L-2; I-1 (Pass)
    - » Validity: H-0; M-4 ; L-0 ; I-3 (Consensus Not Reached)

# Consideration of Candidate Measure



## 3622 National Core Indicators for Intellectual and Developmental Disabilities (ID/DD) Home-and Community-Based Services (HCBS) Measures

- **Measure Steward:** Human Services Research Institute
  - ▣ New measure
- **Brief Description of Measure:**
  - ▣ The NCI for ID/DD HCBS Measures consist of **14 measures in total**, including:
    - » **Five measures** in the HCBS Domain: Person-Centered Planning (PCP) and Coordination
    - » **Four measures** in the HCBS Domain: Community Inclusion
    - » **Four measures** in the HCBS Domain: Choice and Control
    - » **One measure** in the HCBS Domain: Human and Legal Rights
  - ▣ Additional details on subsequent slides





# 3622 National Core Indicators for Intellectual and Developmental Disabilities (ID/DD) Home-and Community-Based Services (HCBS) Measures

## ■ Brief Description of Measure (continued):

- » **Five measures** in the HCBS Domain: Person-Centered Planning (PCP) and Coordination
  1. #PCP-1 The proportion of people who express they want a job who have a related goal in their service plan (Community Job Goal)
  2. #PCP-2 The proportion of people who report their service plan includes things that are important to them (Person-Centered Goals)
  3. #PCP-3 The proportion of people who express they want to increase independence in functional skills (ADLs) who have a related goal in their service plan (ADL Goal)
  4. #PCP-4 The proportion of people who report they are supported to learn new things (Lifelong Learning)
  5. #PCP-5 The proportion of people who report satisfaction with the level of participation in community inclusion activities (Satisfaction with Community Inclusion Scale)



## 3622 National Core Indicators for Intellectual and Developmental Disabilities (ID/DD) Home-and Community-Based Services (HCBS) Measures

### ■ Brief Description of Measure (continued):

» **Four measures** in the HCBS Domain: Community Inclusion

1. #CI-1 The proportion of people who reported that they do not feel lonely often (Social Connectedness)
2. #CI-2 The proportion of people who reported that they have friends who are not staff or family members (Has Friends)
3. #CI-3 The proportion of people who report adequate transportation (Transportation Availability Scale)
4. #CI-4 The proportion of people who engage in activities outside the home (Community Inclusion Scale)

## 3622 National Core Indicators for Intellectual and Developmental Disabilities (ID/DD) Home-and Community-Based Services (HCBS) Measures

### ■ Brief Description of Measure (continued):

» **Four measures** in the HCBS Domain: Choice and Control

1. #CC-1 The proportion of people who reported they chose or were aware they could request to change their staff (Chose Staff)
2. #CC-2 The proportion of people who reported they could change their case manager/service coordinator (Can Change Case Manager)
3. #CC-3 The proportion of people who live with others who report they can stay home if they choose when others in their house/home go somewhere (Can Stay Home When Others Leave)
4. #CC-4 The proportion of people who report making choices (independently or with help) in life decisions (Life Decisions Scale)



## **3622 National Core Indicators for Intellectual and Developmental Disabilities (ID/DD) Home- and Community-Based Services (HCBS) Measures**

### **■ Brief Description of Measure (continued):**

» **One measure** in the HCBS Domain: Human and Legal Rights

1. #HLR-1 The proportion of people who report that their personal space is respected in the home (Respect for Personal Space Scale)

# Related and Competing Discussion

## Related and Competing Measures

If a measure meets the four criteria and there are endorsed/new related measures (same measure focus or same target population) or competing measures (both the same measure focus and same target population), the measures are compared to address harmonization and/or selection of the best measure.

	Same concepts for measure focus-target process, condition, event, outcome	Different concepts for measure focus-target process, condition, event, outcome
Same target population	<b>Competing measures-Select best measure</b> from competing measures or justify endorsement of additional measure(s).	<b>Related measures-Harmonize</b> on target patient population or justify differences.
Different target patient population	<b>Related measures-Combine</b> into one measure with expanded target patient population or justify why different harmonized measures are needed.	Neither harmonization nor competing measure issue.



## 1 Related Measure

- 2967: CAHPS® Home- and Community-Based Services Measures (Truven Health Analytics)

# NQF Member and Public Comment



# Next Steps



# Activities and Timeline – Spring 2021 Cycle

\*All times ET

Meeting	Date, Time
Draft Report Comment Period	8/19/2021 – 9/17/2021
Committee Post-Comment Web Meeting	10/20/2021 2-4 PM
CSAC Review	11/30/2021- 12/1/2021
Appeals Period (30 days)	12/8/2021- 1/6/2022



## Fall 2021 Cycle Updates

- Intent to submit deadline is August 3, 2021

## Project Contact Info

- Email: [patientexperience@qualityforum.org](mailto:patientexperience@qualityforum.org)
- NQF phone: 202-783-1300
- Project page:
  - » [https://www.qualityforum.org/Patient\\_Experience\\_and\\_Function.aspx](https://www.qualityforum.org/Patient_Experience_and_Function.aspx)
- SharePoint site:
  - » <https://prod.qualityforum.org/portfolio/PatientExperienceFunction/SitePages/Home.aspx>

# Questions?

# THANK YOU.

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