



**NATIONAL
QUALITY FORUM**

Driving measurable health
improvements together

<https://www.qualityforum.org>

Patient Safety, Spring 2021 Measure Review Cycle Post-Comment Standing Committee Meeting

Matthew Pickering, Senior Director

Tamara Funk, Director

Erin Buchanan, Manager

Yemsrach Kidane, Project Manager

Hannah Ingber, Senior Analyst

Sean Sullivan, Coordinator

Jesse Pines, Consultant

October 13, 2021

Funded by the Centers for Medicare & Medicaid Services under contract HHSM-500-2017-00060I Task Order HHSM-500-T0001

Welcome



Housekeeping Reminders

- This is a Webex meeting with audio and video capabilities:
 - ▣ **Meeting**
link: <https://nqf.webex.com/nqf/j.php?MTID=ma544586bfa346d2eed3721b8d4754836>
 - ▣ **Meeting number: 2331 670 5125**
 - ▣ **Password: QMEvent**
- Optional: 1-844-621-3956
- 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 Standing Committee roll call once the meeting begins

If you are experiencing technical issues, please contact the NQF project team at patientsafety@qualityforum.org



Project Team — Patient Safety

- Matthew Pickering, PharmD, Senior Director
- Tamara Funk, MPH, Director
- Erin Buchanan, MPH, Manager
- Yemsrach Kidane, PMP, Project Manager
- Hannah Ingber, MPH, Senior Analyst
- Sean Sullivan, MA, Coordinator
- Jesse Pines, MD, MSCE, MBA, Consultant

Agenda

- Attendance
- Discuss and Revote on Consensus Not Reached (CNR) Measure
- Discussion of Comments Received
- Related and Competing Measures Discussion
- NQF Member and Public Comment
- Activities and Timelines
- Adjourn

Attendance and Disclosures of Interest

Patient Safety Spring 2021 Cycle Standing Committee

- Ed Septimus, MD (*Co-chair*)
- Iona Thraen, PhD, ACSW (*Co-chair*)
- Emily Aaronson, MD, MPH (*inactive*)
- Joel Bundy, MD, FACP, FASN, CPE
- Elissa Charbonneau, DO, MS
- Curtis Collins, PharmD, MS
- Theresa Edelstein, MPH, LNHA
- Jason Falvey, PT, DPT, PhD
- Terry Fairbanks, MD, MS, FACEP
- Robert Green, MD, MPH, MA
- Sara Hawkins, PhD, RN, CPPS
- Bret Jackson
- John James, PhD
- Laura Kinney, MA, BSN, RN, CPHQ, CPHRM, CPMA, CPC
- Arpana Mathur, MD, MBA
- Raquel Mayne, MPH, MS, RN
- Anne Myrka, RPh, MAT
- Edward Pollak, MD
- Jamie Roney, DNP, NPD-BC, CCRN-K
- Nancy Schoenborn, MD
- David Seidenwurm, MD, FACR
- Geeta Sood, MD, ScM
- David Stockwell, MD, MBA
- Donald Yealy, MD, FACEP
- Yanling Yu, PhD

Spring 2021 Cycle Measures

■ Six Measures

▣ Consensus Not Reached Measure

- » #3501e : Hospital Harm - Opioid-Related Adverse Events(IMPAQ International, LLC)

▣ Measures Recommended for Endorsement

- » #3621: Composite weighted average for 3 Computed Tomography (CT) Exam Types (American College of Radiology)
- » #0500: Severe Sepsis and Septic Shock: Management Bundle (Henry Ford Hospital)
- » #3389: Concurrent Use of Opioids and Benzodiazepines (COB) (Pharmacy Quality Alliance)
- » #0674: Percent of Residents Experiencing One or More Falls with Major Injury (Long Stay) (Acumen, LLC)
- » #0679: Percent of High Risk Residents with Pressure Ulcers (Long Stay) (Acumen, LLC)

Voting Test

Consideration of Consensus Not Reached Measures

3501e: Hospital Harm - Opioid-Related Adverse Events

- **Measure Steward:** IMPAQ International, LLC / CMS
 - ▣ New measure
- **Brief Description of Measure:**
 - ▣ This measure assesses the proportion of inpatient hospital encounters where patients ages 18 years of age or older have been administered an opioid medication, subsequently suffer the harm of an opioid-related adverse event, and are administered an opioid antagonist (naloxone) within 12 hours. This measure excludes opioid antagonist (naloxone) administration occurring in the operating room setting.
- **Criteria where consensus was not reached:** Performance Gap



3501e: Hospital Harm - Opioid-Related Adverse Events

- **Criteria where consensus was not reached:** Performance Gap
- **Concerns:**
 - ▣ Low absolute measure rates (ranging from 0.11 to 0.45 percent)
 - ▣ Low number of events may not show differences across sites
- **Summary of Comments Received:** Four
 - ▣ Comments expressed concerns regarding unintended consequences
 - ▣ Comments also expressed concerns regarding performance gap
- **Revote on Performance Gap**
 - ▣ If Performance Gap passes, revote on overall recommendation for endorsement

Review and Discuss Comments Received on Draft Report



3621: Composite Weighted Average for 3 CT Exam Types

- **Measure Steward:** American College of Radiology
 - ▣ New measure
- **Brief Description of Measure:**
 - ▣ Weighted average of 3 CT Exam Types: Overall Percent of CT exams for which Dose Length Product is at or below the size-specific diagnostic reference level (for CT Abdomen-pelvis with contrast/single phase scan, CT Chest without contrast/single phase scan and CT Head/Brain without contrast/single phase scan)
- **Summary of Comments Received:** one
 - ▣ Comments expressed concerns that the measure only includes single-phase CT scans and excludes double-phase scans
 - ▣ Comments expressed concerns regarding denominator's population definition
 - ▣ Comments expressed concerns that there is no evidence suggesting the higher phase protocol provides better diagnostic utility



0500: Severe Sepsis and Septic Shock: Management Bundle

- **Measure Steward:** Henry Ford Hospital
 - ▣ Maintenance measure
- **Brief Description of Measure:**
 - ▣ This measure focuses on adults 18 years and older with a diagnosis of severe sepsis or septic shock. Assesses measurement of lactate, obtaining blood cultures, administering broad spectrum antibiotics, fluid resuscitation, vasopressor administration, reassessment of volume status and tissue perfusion, and repeat lactate measurement.
- **Summary of Comments Received:** five
 - ▣ Comments expressed concerns regarding burden of chart abstraction
 - ▣ Comments expressed concerns regarding unintended consequences of including both sepsis and septic shock in measure
 - ▣ Comments expressed concerns regarding inclusion of serial lactate measurements due to lack of evidence of improved outcomes



3389: Concurrent Use of Opioids and Benzodiazepines (COB)

- **Measure Steward:** Pharmacy Quality Alliance

- ▣ Maintenance measure

- **Brief Description of Measure:**

- ▣ The percentage of individuals ≥ 18 years of age with concurrent use of prescription opioids and benzodiazepines during the measurement year.

- **Summary of Comments Received:** five

- ▣ Comments expressed support for measure due to feasibility, evidence, and performance gap



0674: Percent of Residents Experiencing One or More Falls with Major Injury (Long Stay)

- **Measure Steward:** Acumen, LLC / Centers for Medicare & Medicaid Services (CMS)
 - ▣ Maintenance measure
- **Brief Description of Measure:**
 - ▣ This measure reports the percentage of long-stay residents in a nursing home who have experienced one or more falls resulting in major injury reported in the look-back period no more than 275 days prior to the target assessment.
- **No comments received**



0679: Percent of High Risk Residents with Pressure Ulcers (Long Stay)

- **Measure Steward:** Acumen, LLC / CMS
 - ▣ Maintenance measure
- **Brief Description of Measure:**
 - ▣ This measure reports the percentage of long-stay, high-risk, residents in a nursing home who have Stage II-IV or unstageable pressure ulcers on a selected target assessment in the target quarter.
- **No comments received**

Related and Competing Measures¹

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	Competing measures-Select best measure from competing measures or justify endorsement of additional measure(s).	Related measures-Harmonize on target patient population or justify differences.
Different target patient population	Related measures-Combine into one measure with expanded target patient population or justify why different harmonized measures are needed.	Neither harmonization nor competing measure issue.



Related and Competing Measures(*continued*)

- Related and competing measures will be grouped and discussed after recommendations for all related and competing measures are determined. Only measures recommended for endorsement will be discussed.
- Committee will not be asked to select a best-in-class measure if all related and competing measures are not currently under review. Committee can discuss harmonization and make recommendations. Developers of each related and competing measure will be encouraged to attend any discussion.



3501e Related Measures

- #3316: Safe Use of Opioids – Concurrent Prescribing
- #3389: Concurrent Use of Opioids and Benzodiazepines (COB)

NQF Member and Public Comment

Activities and Timelines



NATIONAL
QUALITY FORUM

Activities and Timeline –Spring 2021 Cycle

*All times ET

Meeting	Date, Time*
CSAC Review	Nov 30 – Dec 1, 2021
Appeals Period (30 days)	Dec 7, 2021 – Jan 5, 2022



Project Contact Info

- Email: patientsafety@qualityforum.org
- NQF phone: 202-783-1300
- Project page:
 - » http://www.qualityforum.org/Topics/Patient_Safety.aspx
- SharePoint site:
 - » <https://share.qualityforum.org/portfolio/PatientSafety/SitePages/Home.aspx>

THANK YOU.

NATIONAL QUALITY FORUM

<https://www.qualityforum.org>