



September 13, 2019

To: Perinatal and Women's Health Standing Committee
From: NQF staff
Re: September 20 Topical Committee Webinar
Purpose: Provide background for the upcoming September 20 web meeting.

Background on Spring 2019 Cycle Work

The National Quality Forum (NQF) did not receive any new measures or have existing measures for maintenance review by the Perinatal and Women's Health Standing Committee. To continue the important work of the Perinatal and Women's Health Standing Committee during this cycle, the Committee will engage in a discussion regarding measures and measure concepts for maternal mortality and morbidity and a discussion of measure gaps in the NQF portfolio for women's health more broadly (not related to measures for obstetric/gynecologic care or reproductive health).

Maternal Mortality and Morbidity Measures

NQF is interested in assessing the landscape of currently existing measures for maternal morbidity and mortality, as well as concepts for measures that could or should be developed. These could include anything from a measure of maternal mortality rates or a measure of hemorrhage rates and outcomes to measures assessing screening for various conditions, such as hypertension or prenatal diabetes. NQF's portfolio currently includes the following four endorsed measures, all reviewed by this Committee:

Measure Number	Measure Title	Measure Steward
0469	PC-01 Elective Delivery	The Joint Commission
0469e	PC-01 Elective Delivery [eMeasure]	The Joint Commission
0470	Incidence of Episiotomy	National Perinatal Information Center
0471	PC-02 Cesarean Birth	The Joint Commission

Discussion Questions

- What measures are you aware of that have been developed for maternal mortality and morbidity that are not in the NQF portfolio (e.g., for use only in internal quality improvement initiatives).
- What measures are you aware of that are under development or testing?
- What measure concepts would you suggest for this area?
- Are you aware of any groups/organizations working on measurement/measure development in this topic area?

Measure Gaps: Women's Health

NQF is seeking input from this Committee on gaps in women's health measurement for measures not related to obstetric/gynecologic care or reproductive health.

NQF has reviewed our portfolio of 541 endorsed measures and found the following 29 measures that apply to women's health. Measures on conditions that exclusively or largely apply to women (e.g., cervical cancer or osteoporosis) are included in this list. Measures that include women (but are not exclusive to them) in the population, measures for populations that are disproportionately women (such as measures for skilled nursing facilities), or measures that affect a large number of women (e.g., cardiovascular conditions), are not included.

Currently, NQF has 29 endorsed measures of women's health, including measures on the following topic areas (in addition to the perinatal set reviewed by this Committee):

- Breast cancer (screening, treatment)
- STI screening (chlamydia, HPV, general)
- Osteoporosis (screening, management)
- Hysterectomy

The complete list of women's health measures is included in Appendix A of this memo.

At NQF, measures are typically evaluated by the Committee with the type of clinicians most likely to treat a condition. Therefore, any measures of osteoporosis have been assigned to the Primary Care and Chronic Illness Committee, which includes both primary care providers and endocrinologists. Measures for breast or cervical cancer are reviewed by the Cancer Standing Committee. Vaccination measures are typically reviewed by the Prevention and Population Health Committee. When needed, standing committees will loop in expert reviewers to assist in the review of a particular topic area; expert reviewers may be pulled from existing Committee members when possible, or via a call for nominations if no current Committee members possess the expertise needed.

Discussion Question

Please review the overarching women's health portfolio and suggest measure gaps/concepts for all condition and topic areas, including those that would be reviewed by other committees.

Appendix A

Number	Title	Measure Steward
0032	Cervical Cancer Screening (CCS)	National Committee for Quality Assurance
0033	Chlamydia Screening in Women (CHL)	National Committee for Quality Assurance
0046	Screening for Osteoporosis for Women 65-85 Years of Age	National Committee for Quality Assurance
0053	Osteoporosis Management in Women Who Had a Fracture	National Committee for Quality Assurance
0219	Radiation therapy is administered within 1 year (365 days) of diagnosis for women under age 70 receiving breast conserving surgery for breast cancer	Commission on Cancer, American College of Surgeons
0220	Adjuvant hormonal therapy is recommended or administered within 1 year (365 days) of diagnosis for women with AJCC T1cN0M0, or stage IB - III hormone receptor-positive breast cancer	Commission on Cancer, American College of Surgeons
0469	PC-01 Elective Delivery	The Joint Commission
0469e	PC-01 Elective Delivery	The Joint Commission
0470	Incidence of Episiotomy	Christiana Care Health System
0471	PC-02 Cesarean Birth	The Joint Commission
0480	PC-05 Exclusive Breast Milk Feeding	The Joint Commission
0480e	PC-05 Exclusive Breast Milk Feeding	The Joint Commission
0508	Diagnostic Imaging: Inappropriate Use of “Probably Benign” Assessment Category in Screening Mammograms	American College of Radiology (ACR)
0509	Diagnostic Imaging: Reminder System for Screening Mammograms	American College of Radiology
0559	Combination chemotherapy is recommended or administered within 4 months (120 days) of diagnosis for women under 70 with AJCC T1cN0M0, or Stage IB - III hormone receptor negative breast cancer	Commission on Cancer, American College of Surgeons
1857	HER2 negative or undocumented breast cancer patients spared treatment with HER2-targeted therapies	American Society of Clinical Oncology
1858	Trastuzumab administered to patients with AJCC stage I (T1c) – III and human epidermal growth factor receptor 2 (HER2) positive breast cancer who receive adjuvant chemotherapy	American Society of Clinical Oncology
1878	HER2 testing for overexpression or gene amplification in patients with breast cancer	American Society of Clinical Oncology

Number	Title	Measure Steward
1959	Human Papillomavirus Vaccine for Female Adolescents (HPV)	National Committee for Quality Assurance
2038	Performing vaginal apical suspension at the time of hysterectomy to address pelvic organ prolapse	American Urogynecologic Society
2063	Performing cystoscopy at the time of hysterectomy for pelvic organ prolapse to detect lower urinary tract injury	American Urogynecologic Society
2372	Breast Cancer Screening	National Committee for Quality Assurance
2677	Preoperative evaluation for stress urinary incontinence prior to hysterectomy for pelvic organ prolapse.	American Urogynecologic Society
2902	Contraceptive Care - Postpartum	US Office of Population Affairs
2903	Contraceptive Care – Most & Moderately Effective Methods	US Office of Population Affairs
2904	Contraceptive Care - Access to LARC	US Office of Population Affairs
3025	Ambulatory Breast Procedure Surgical Site Infection (SSI) Outcome Measure	Surveillance Branch, Division of Healthcare Quality Promotion, Centers for Disease Control and Prevention
0387e	Breast Cancer: Hormonal Therapy for Stage I (T1b)-IIIC Estrogen Receptor/Progesterone Receptor (ER/PR) Positive Breast Cancer	PCPI Foundation
3475e	Appropriate Use of DXA Scans in Women Under 65 Years Who Do Not Meet the Risk Factor Profile for Osteoporotic Fracture	Centers for Medicare & Medicaid Services, Center for Clinical Standards and Quality, Quality Measurement and Value-Based Incentives Group (QMVIG), Division of Electronic and Clinician Quality, MS S3-02-01