



**NATIONAL
QUALITY FORUM**

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Perinatal, Spring 2022 Measure Review Cycle

Post-Comment Standing Committee Meeting

Tamara Funk, Director

Erin Buchanan, Senior Manager

Hannah Ingber, Manager

Sean Sullivan, Analyst

Yemsrach Kidane, Senior Project Manager

October 19, 2022

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

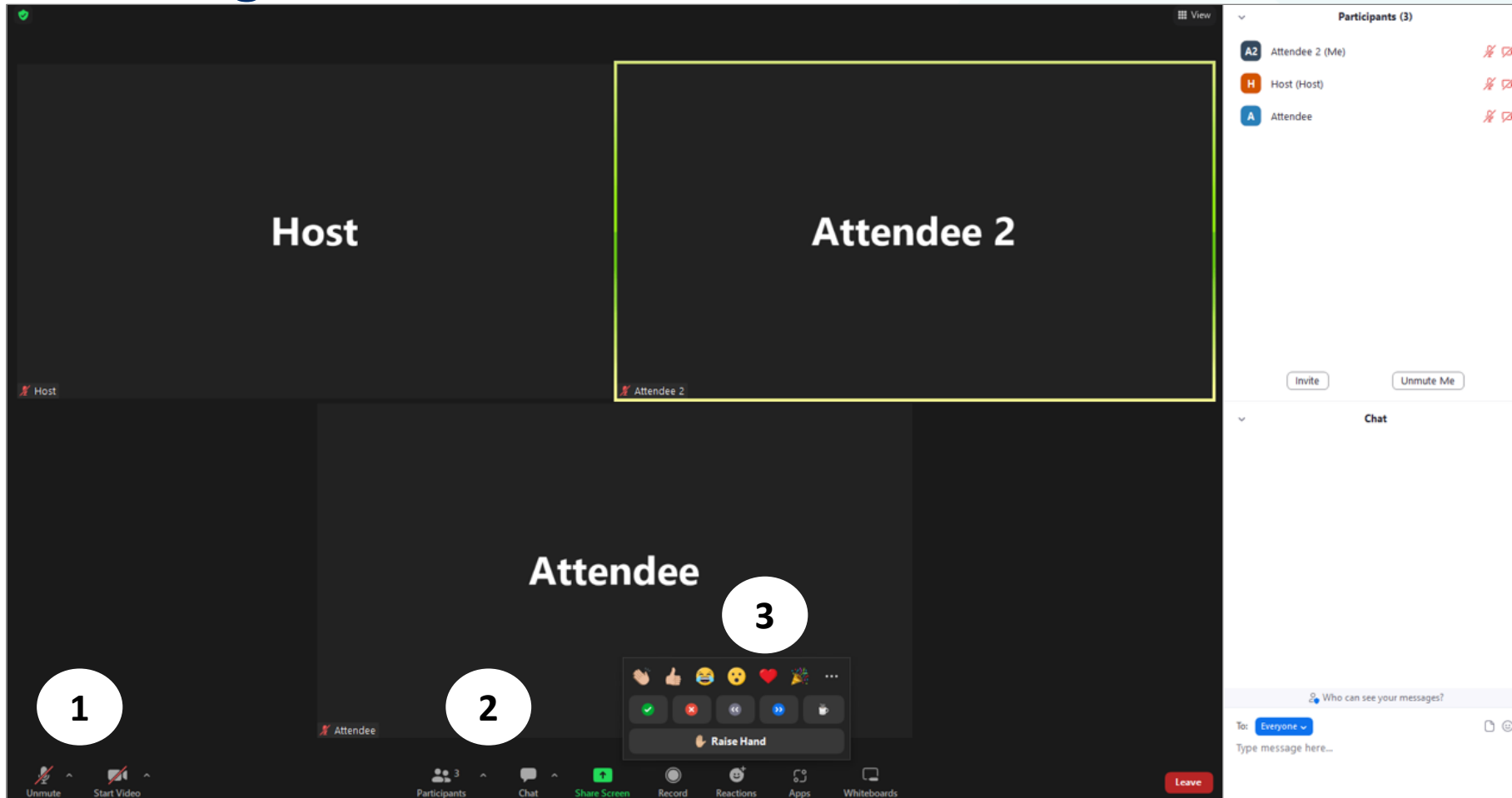
Welcome

Housekeeping Reminders

- This is a Zoom meeting with audio and video capabilities
- Please mute your computer when not speaking
- The system will allow you to mute/unmute yourself and turn your video on/off throughout the event
- We encourage you to keep the video on throughout the event
- 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 Standing Committee roll call once the meeting begins

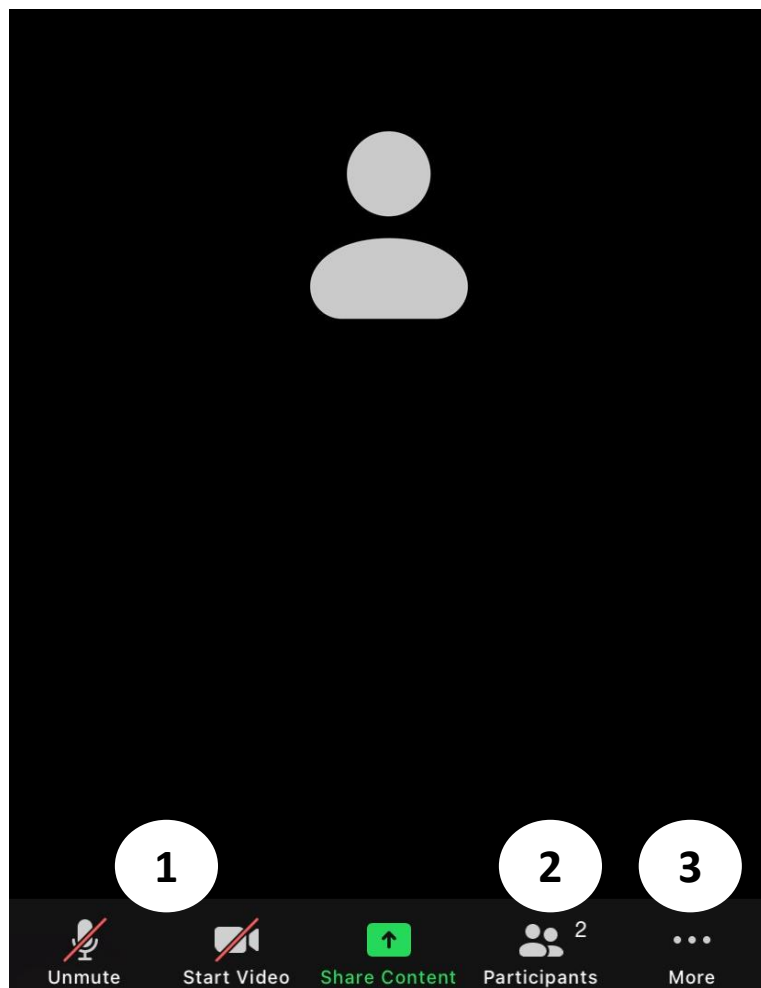
If you are experiencing technical issues, please contact the NQF project team at perinatal@qualityforum.org

Using the Zoom Platform

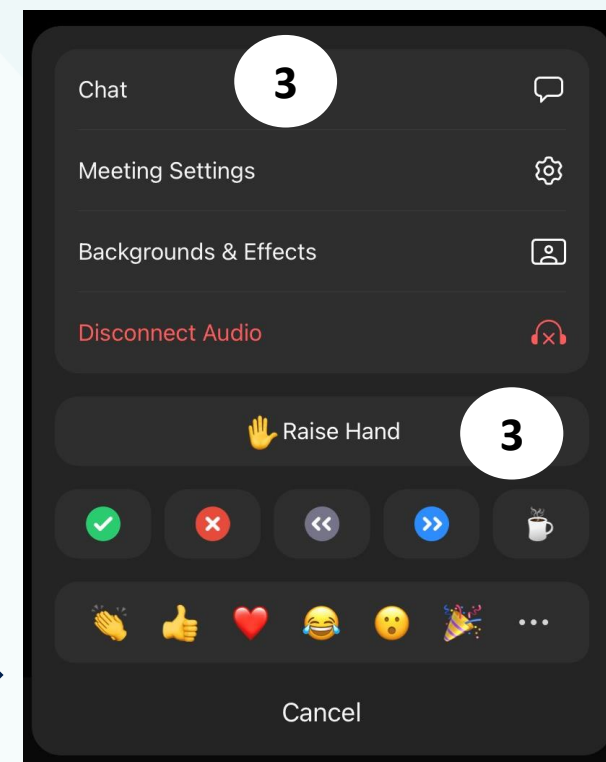


- 1 Click the lower part of your screen to mute/unmute, start or pause video
- 2 Click on the participant or chat button to access the full participant list or the chat box
- 3 To raise your hand, select the raised hand function under the reactions tab

Using the Zoom Platform (Phone View)



- 1 Click the lower part of your screen to mute/unmute, start or pause video
- 2 Click on the participant button to view the full participant list
- 3 Click on “more” button to view the chat box or raise your hand. To raise your hand, select the raised hand function under the reactions tab





Meeting Ground Rules

- Be prepared, having reviewed the meeting materials beforehand
- Respect all voices
- Remain engaged and actively participate
- Base your evaluation and recommendations on the measure evaluation criteria and guidance
- Keep your comments concise and focused
- Be respectful and allow others to contribute
- Share your experiences
- Learn from others

Agenda

- Review and Discuss Comments Received on Draft Report
- Related and Competing Measures
- NQF Member and Public Comment
- Next Steps
- Adjourn

Project Team — Perinatal Committee



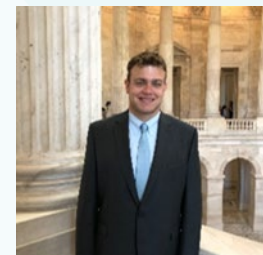
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Perinatal Spring 2022 Cycle Standing Committee

- Martha Carter, DHSc, MBA, APRN, CNM, FACNM (*Co-chair*)
- Kimberly Gregory, MD, MPH (*Co-chair*)
- Jill Arnold
- J. Matthew Austin, PhD
- Jennifer Bailit, MD, MPH
- Amy Bell, DNP, RNC-OB, NEA-BC, CPHQ
- Christina Davidson, MD
- Ashley Hirai, PhD
- Lisa Holtzclaw, DNP, BS, MHA, RN
- Mambarambath Jaleel, MD
- Diana Jolles, CNM, MS, PhD
- Elizabeth Jones, MPA (*inactive*)
- Sue Kendig, JD, WHNP-BC, FAANP
- Deborah Kilday, MSN, RN
- Sarah McNeil, MD
- Jennifer Moore, PhD, RN, FAAN
- Sarah Nathan, MSN, RN, FNP
- Sheila Owens-Collins, MD, MPH, MBA
- Diana E. Ramos, MD, MPH, FACOG
- Sindhu Srinivas, MD, MSCE
- Nan Strauss, JD
- Angeline Ti, MD, MPH
- Rajan Wadhawan, MD, MMM, CPE, FAAP

Spring 2022 Cycle Measures

▣ Measures Recommended for Endorsement

- **#0471e** ePC-02 Cesarean Birth (Joint Commission)
- **#3687e** ePC-07 Severe Obstetric Complications (Joint Commission)

▣ Measures Approved for Trial Use

- **#3682e** SINC-Based Contraceptive Care, Postpartum (University of California, San Francisco)
- **#3699e** SINC-Based Contraceptive Care, Non-Postpartum (University of California, San Francisco)

Review and Discuss Comments on Measures and the Draft Report



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Review and Discuss Comments Received on Measures and the Draft Report

Screenshare Memo

Related and Competing Measures

Related and Competing Measures (Cont-1)

- 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.

Target Population	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 (cont-2)

- 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 can discuss harmonization and make recommendations. Developers of each related and competing measure will be encouraged to attend any discussion.

#0471e Related Measure

- #0471: PC-02 Cesarean Birth

#0471e Related Measure (Cont.)

■ #0471 PC-02 Cesarean Birth

- **Steward/Developer:** Joint Commission
- **Description:** This measure assesses the rate of nulliparous women with a term, singleton baby in a vertex position delivered by cesarean birth. This measure is part of a set of four nationally implemented measures that address perinatal care (PC-01: Elective Delivery, ePC-01: Elective Delivery; PC-02: Cesarean Birth, ePC-02: Cesarean Birth will be added as an eCQM 1/1/2020; PC-05: Exclusive Breast Milk Feeding, ePC-05: Exclusive Breast Milk Feeding; PC-06 Unexpected Complications in Term Newborns was added 1/1/2019).
- **Target Population:** Women
- **Care Setting:** Inpatient/Hospital
- **Level of Analysis:** Facility

#0471e Related Measure Discussion

- Are the measure specifications for the related measure harmonized to the extent possible?
- Are there differences that could impact interpretability and add data collection burden?
- Are the differences justified?

#3682e Related Measure

- #2902: Contraceptive Care - Postpartum

#3682e Related Measure (Cont.)

- **#2902 Contraceptive Care - Postpartum**
 - ▣ **Steward/Developer:** US Office of Population Affairs
 - ▣ **Description:** Among women ages 15 through 44 who had a live birth, the percentage that is provided: 1) A most effective (i.e., sterilization, implants, intrauterine devices or systems (IUD/IUS)) or moderately (i.e., injectables, oral pills, patch, or ring) effective method of contraception within 3 and 60 days of delivery. 2) A long-acting reversible method of contraception (LARC) within 3 and 60 days of delivery.
 - ▣ **Target Population:** Women, Children
 - ▣ **Care Setting:** Other
 - ▣ **Level of Analysis:** Clinician/Group Practice, Population: Region and State, Health Plan

#3682e Related Measure Discussion

- Are the measure specifications for the related measure harmonized to the extent possible?
- Are there differences that could impact interpretability and add data collection burden?
- Are the differences justified?

#3699e Related Measure

- NQF #2903: Contraceptive Care – Most & Moderately Effective Methods
- NQF #2904: Contraceptive Care – Access to LARC
- NQF #3543: Person-Centered Contraceptive Counseling (PCCC) measure

#3699e Related Measure (Cont-1.)

- **#2903 Contraceptive Care - Most & Moderately Effective Methods**
 - ▣ **Steward/Developer:** US Office of Population Affairs
 - ▣ **Description:** The percentage of women aged 15-44 years at risk of unintended pregnancy that is provided a most effective (i.e., sterilization, implants, intrauterine devices or systems (IUD/IUS)) or moderately effective (i.e., injectables, oral pills, patch, or ring) method of contraception. The measure is an intermediate outcome measure because it represents a decision that is made at the end of a clinical encounter about the type of contraceptive method a woman will use, and because of the strong association between type of contraceptive method used and risk of unintended pregnancy.
 - ▣ **Target Population:** Women, Children
 - ▣ **Care Setting:** Other
 - ▣ **Level of Analysis:** Clinician: Group/Practice, Population: Regional and State, Facility, Health Plan

#3699e Related Measure (Cont-2.)

■ #2904 Contraceptive Care – Access to LARC

- ▣ **Steward/Developer:** US Office of Population Affairs
- ▣ **Description:** Percentage of women aged 15-44 years at risk of unintended pregnancy that is provided a long-acting reversible method of contraception (i.e., implants, intrauterine devices or systems (IUD/IUS)). It is an access measure because it is intended to identify very low rates (less than 1-2%) of long-acting reversible methods of contraception (LARC), which may signal barriers to LARC provision.
- ▣ **Target Population:** Women, Children
- ▣ **Care Setting:** Other
- ▣ **Level of Analysis:** Clinician: Group/Practice, Population: Regional and State, Facility, Health Plan

#3699e Related Measure (Cont-3.)

- **#3543 Person-Centered Contraceptive Counseling (PCCC) measure**
 - ▣ **Steward/Developer:**
 - ▣ **Description:** The PCCC is a four-item patient-reported outcome performance measure (PRO-PM) designed to assess the patient-centeredness of contraceptive counseling at the individual clinician/provider and facility levels of analysis. The PCCC is specifically designed to capture three key domains of contraceptive care quality, as described as high priorities by patients themselves in previous qualitative research conducted by our team. These domains include interpersonal connection between health care provider and patient, support in the contraceptive decision-making process, and adequate information to make such a decision.
 - ▣ **Target Population:** Women
 - ▣ **Care Setting:** Outpatient Services
 - ▣ **Level of Analysis:** Clinician: Individual, Facility

#3699e Related Measure Discussion

- Are the measure specifications for the related measure harmonized to the extent possible?
- Are there differences that could impact interpretability and add data collection burden?
- Are the differences justified?

NQF Member and Public Comment

Next Steps



Activities and Timeline – Spring 2022 Cycle

*All times ET

Meeting	Date, Time*
CSAC Review	December 9 & 12, 2022
Appeals Period (30 days)	December 15, 2022-January 13, 2023

- Staff will incorporate comments and responses to comments into meeting materials for the Consensus Standards Approval Committee (CSAC) meeting
- CSAC meets to endorse measures
- Opportunity for public to appeal endorsement decision



Project Contact Info

- Email: perinatal@qualityforum.org
- NQF phone: 202-783-1300
- Project page: <https://www.qualityforum.org/Perinatal>
- SharePoint
site: <https://share.qualityforum.org/Portfolio/Perinatal/SitePages/Home.aspx>

THANK YOU.

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