



Perinatal and Women's Health Standing Committee Fall 2019 Post-Comment Web Meeting

The National Quality Forum (NQF) convened a public web meeting for the Perinatal and Women's Health Standing Committee on June 26, 2020.

Welcome, Introductions, and Review of Web Meeting Objectives

Matt Pickering, NQF senior director, welcomed participants to the web meeting and provided an overview of the meeting objectives and conducted the Committee roll call.

Review and Discuss Public Comments Received

Dr. Pickering reviewed measure #3543 *Patient-Centered Contraceptive Counseling (PCCC)*, which was recommended for endorsement by the Standing Committee during the fall 2019 cycle. Dr. Pickering reported that NQF received 25 comments on the draft report from eight NQF member organizations and 17 members of the public during the extended 60-day commenting period. These comments addressed the following three themes:

- Consideration of disparities during measure development
- Capturing pregnancy intendedness
- Utility of survey questions

Dr. Pickering summarized the themes and opened the floor to Committee discussion. The developer was also provided with an opportunity to give a summary of its responses to the comments submitted.

Regarding the first theme, the developer recognized the desire to see additional information on the composition of study populations. This was provided in some parts of the measure submission, but the developer stated it will include additional information in future published manuscripts regarding the measure. The developer also acknowledged that the inclusion of researchers of color in the measure development team might have led to a different result during measure development. The Committee had no comments on this theme or the developer's response.

The Committee discussed the issue of pregnancy intendedness and its relevance to the measure. The developer stated that the measure denominator includes individuals who have received contraceptive care to avoid pregnancy. The measure does not rely on having pregnancy intention, but rather it captures individuals who have received and/or wanted contraceptive care. The developer indicated an interest exists in a measure of whether people are being assessed for their pregnancy desires, but this would be a distinctly different measure. The Committee expressed interest in another measure to capture pregnancy intendedness due to its influence on pregnancy outcomes.

Commenters expressed concerns with the framing of certain questions and their utility in the survey. Specifically, there were questions regarding the developer's research into what a quality contraceptive counseling visit might include and whether the survey questions were contrary to the patient-

centeredness of the measure. For the last item of survey, which asks patients whether they received enough information to make the best decision about their birth control method, commenters expressed that the survey language could imply that the provider has all knowledge and expertise needed for the patient to make the 'best' contraceptive decision. The developer responded that the content of quality contraceptive counseling from a provider perspective is up for debate, but this measure is meant to assess the patient's experience of counseling, so the content of the visit is less important for this particular measure. The developer also pointed out that the term "enough information" in one question is not a concern in the measure's context, since the question is being posed to the patients for their assessment of whether they received what they needed. The developer also noted that during measure development, participants were answering this question from their own perspective and not from an externally defined standard. The developer indicated that it tested for face validity and those results showed that patients felt this question represented their perceptions of patient-centered quality. The Committee further questioned if health literacy would be an issue with the concept of "enough information." Although the developer agreed that health literacy could be an issue, it felt that it is the responsibility of the system to meet different patients' needs depending on their health literacy level.

After the comments and themes were discussed, the Committee expressed continued support for measure #3543 *Patient-Centered Contraceptive Counseling (PCCC)*.

Public Comment

There were no public comments.

Next Steps

Hannah Ingber, NQF analyst, reviewed next steps. The CSAC will consider the Committee's endorsement recommendations during its November 17-18, 2020, meeting.