



NATIONAL QUALITY FORUM

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Memo

October 19, 2022

To: Prevention and Population Standing Committee, Spring 2022

From: NQF staff

Re: Post-comment web meeting cancellation

Background

Following the Standing Committee's evaluation of the measures under review, NQF received one comment from a member organization pertaining to the draft report and the measures under review. The comment was supportive of the Standing Committee's recommendation, thus NQF, along with the Standing Committee co-chairs, determined that the meeting could be canceled. For the spring 2022 cycle of the Prevention and Population Health project, the Standing Committee evaluated two newly submitted measures and four measures undergoing maintenance review against NQF's evaluation criteria.

The Standing Committee recommended the following measures:

- NQF #0041 Preventive Care and Screening: Influenza Immunization (National Committee for Quality Assurance)
- NQF #0431 Influenza Vaccination Coverage Among Healthcare Personnel (Centers for Disease Control and Prevention)
- NQF #0681 Percent of Residents Who Were Assessed and Appropriately Given the Seasonal Influenza Vaccine (Short-Stay) (Centers for Medicare & Medicaid Services)
- NQF #2528 Prevention: Topical Fluoride for Children, Dental Services (American Dental Association [ADA])
- NQF #3700 Prevention: Topical Fluoride for Children, Dental or Oral Health Services (ADA)
- NQF #3701 Prevention: Topical Fluoride for Children, Oral Health Services (ADA)

Comments Received

NQF accepts comments on endorsed measures on an ongoing basis through the [Quality Positioning System \(QPS\)](#). In addition, NQF solicits comments for a continuous 16-week period during each evaluation cycle via an online tool located on the project webpage. For this evaluation cycle, the commenting period opened on May 18, 2022, and closed on September 13, 2022. The two comments that were received by June 15, 2022, were shared with the Standing Committee prior to the measure evaluation meeting. As stated above, following the Standing Committee's evaluation of the measures under review, NQF received one comment from a member organization pertaining to the draft report and the measures under review.

NQF members also had the opportunity to express their support (“support” or “do not support”) for each measure submitted for endorsement consideration. No NQF members submitted an expression of support.

NQF staff have included all comments that were received (both pre- and post-evaluation) in this memo in [Appendix A](#). The appendix contains the commenter’s name, comment, associated measure, and responses (including measure steward/developer responses if appropriate).

Appendix A: Comment Brief

Post-Evaluation Measure-Specific Comments on Prevention and Population Health Spring 2022 Submissions

NQF #0041 Preventive Care and Screening: Influenza Immunization (Recommended)

Dr. Holley Bermel, UnityPoint Health; Submitted by Stephanie Collingwood

Comment ID#: 8149 (Submitted: 09/01/2022)

Council / Public: Public

Level of Support: N/A

Comment

UnityPoint Health agrees, Influenza vaccinations are evidence-based recommendations important and recognized as such by the medical community. However, we do have concerns around changes made to this measure regarding patient declination. UnityPoint Health appreciates this metric allows for the discussion and shared decision making to occur between patient and provider. We would recommend NQF consider for inclusion of the measure that a provider would still receive “credit” for their partnership in shared decision making as well as education provided to patients on the value of the influenza vaccination, even if the patient declines.

Developer Response

The numerator can be met by submitting either administration of an influenza vaccination or that the patient reported previous receipt of the current season’s influenza immunization. However, if the performance of the numerator is not met, a clinician can submit a valid denominator exception for having not administered an influenza vaccination. A denominator exception is any condition that should remove a patient, procedure, or unit of measurement from the denominator of the performance rate only if the numerator criteria are not met. A denominator exception allows for adjustment of the calculated score for those providers with higher risk populations and provides for the exercise of clinical judgment. For clinicians submitting a denominator exception, there should be a clear rationale and documented reason for not administering an influenza immunization if the patient did not indicate previous receipt, which could include a medical reason (e.g., patient allergy), patient reason (e.g., patient declined), or system reason (e.g., vaccination not available). The information must be documented in a structured manner as defined by the measure.

NQF Response

Thank you for your comment. It has been shared with the Standing Committee and measure developer.

NQF Committee Response

N/A

Public Comments on Prevention and Population Health Spring 2022 Draft Report

N/A

Pre-Evaluation Measure-Specific Comments on Prevention and Population Health Spring 2022 Submissions

NQF #0041 Preventive Care and Screening: Influenza Immunization (Recommended)

Fern McCree, NCQA; Submitted by Mr. Bob Rehm, MBA

Comment ID#: 8092 (Submitted: 06/09/2022)

Council / Public: QMRI

Level of Support: Member Does Support

Comment

In 2017, MIPS replaced the Physician Quality Reporting System (PQRS) which ended in 2016. Clinician-level MIPS performance results from 2017 through 2019 are not available. The average MIPS performance rate in 2020 was 69.8%. The most recent year of available reporting data for PQRS is 2014. The average performance rate in 2014 was 46.3%. There has been an improvement in performance between 2014 and 2020.

NQF Response

Thank you for your comment. It has been shared with the Standing Committee and measure developer.

Ms. Koryn Y. Rubin, MHA, American Medical Association

Comment ID#: 8107 (Submitted: 06/14/2022)

Council / Public: HPR

Level of Support: Member Does Support

Comment

The American Medical Association (AMA) appreciates the opportunity to comment on this measure. We are writing to request clarification on several items in the measure submission form. On review of the measure specifications, the developer notes that it includes a denominator exception for medical or patient reasons (see sp.13 as an example) and sp.22 outlines how these exceptions should be removed from the denominator. However, sp.16, which describes denominator exclusions, is marked "None" nor did the developer provide any analysis on the frequency of exceptions in the measure testing section (see 2b.15 through 2b.18). We believe that these inconsistencies must be addressed, and the developer must ensure that what is endorsed is aligned with the version of the measure currently in the Merit-Based Incentive Payment System (MIPS). We also request clarification on the use and usability of the measure. On our review, it does not appear that this section was updated since stewardship of the measure was transitioned from the PCPI to the National Committee for Quality Assurance. The AMA requests that these discrepancies be addressed prior to continued endorsement of this measure. We appreciate the Committee's consideration of our comments.

NQF Response

Thank you for your comment. It has been shared with the Standing Committee and measure developer.