

Prevention and Population Health, Fall 2022 Measure Review Cycle **Measure Evaluation Standing Committee Meeting** Leah Chambers, MHA, Director Gabrielle Kyle-Lion, MPH, Manager Nicholas Barone, MPH, Analyst Isabella Rivero, BS, Associate

February 28, 2023

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

Welcome



Welcome to Today's Meeting!

- Housekeeping reminders:
 - The system will allow you to mute/unmute yourself and turn your video on/off throughout the event
 - Please raise your hand and unmute yourself when called on
 - Please lower your hand and mute yourself following your question/comment
 - Please state your first and last name if you are a Call-In-User
 - We encourage you to keep your video on throughout the event
 - Feel free to use the chat feature to communicate with NQF staff
- If you are experiencing technical issues, please contact the project team via chat on the virtual platform or at <u>populationhealth@qualityforum.org</u>



Using the Zoom Platform





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 reaction





Project Team — **Prevention and Population Health Committee**









Isabella Rivero, BS, Associate



Director

Erica Brown, MHA, PMP, **Project Manager**



Manager

Elizabeth Freedman, MPH, **Senior Director**



Nicholas Barone, MPH,

Analyst

Poonam Bal, MHSA, Consultant



Peter Amico, PhD, Consultant



Agenda

- Introductions and Disclosures of Interest
- Overview of Evaluation Process and Voting Process
- Voting Test
- Measures Under Review
- Consideration of Candidate Measures
- Related and Competing Measures
- NQF Member and Public Comment
- Next Steps
- Adjourn

Introductions and Disclosures of Interest



Prevention and Population Health Fall 2022 Cycle Standing Committee

- Amir Qaseem, MD, PhD, MHA, MRCP, FACP (Chair)
- Ron Bialek, MPP, CQIA
- Jayaram Brindala, MD, MBA, MPH, MS
- Gigi Chawla, MD, MHA
- Favio Freyre, MD
- Barry-Lewis Harris, II, MD
- Catherine A. Hill, DNP, APRN, GNP-BC, CMC
- Amy Nguyen Howell, MD, MBA, FAAFP
- Julia Logan, MD, MPH
- Lisa Nichols, MSW
- Patricia Quigley, PhD, APRN, CRRN,

FAAN, FAANP, FARN

- Anita Ravi, MD, MPH, MSHP, FAAFP (*Inactive*)
- Carol Siebert, OTD, OT/L, FAOTA
- Jason Spangler, MD, MPH, FACPM
- Matt Stiefel, MPA, MS
- Michael A. Stoto, PhD
- Arjun K. Venkatesh, MD, MBA, MHS
- Ruth E. Wetta, RN, PhD, MPH, MSN
- Whitney Bowman-Zatzkin, MPA, MSR

Overview of Evaluation Process and Voting Process



Roles of the Standing Committee During the Evaluation Meeting

- Act as a proxy for the NQF multistakeholder membership
- Evaluate each measure against each criterion
 - Indicate the extent to which each criterion is met and the rationale for the rating
- Respond to comments submitted during the public commenting period
- Make recommendations regarding endorsement to NQF membership
- Oversee the portfolio of Prevention and Population Health measures



Meeting Ground Rules

- Be prepared, having reviewed the measures 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



Process for Measure Discussion and Voting

- Brief introduction by measure developer (3-5 minutes)
- Lead discussants will begin the Standing Committee discussion for each criterion by:
 - briefly explaining information on the criterion provided by the developer;
 - providing a brief summary of the pre-meeting evaluation comments;
 - emphasizing areas of concern or differences of opinion; and
 - noting, if needed, the preliminary rating by NQF staff.
 - This rating is intended to be used as a guide to facilitate the Standing Committee's discussion and evaluation.
- Developers will be available to respond to questions at the discretion of the Standing Committee.
- The full Standing Committee will discuss, then vote on the criterion, if needed, before moving on to the next criterion.



Endorsement Criteria

- Importance to Measure and Report (Evidence and Performance Gap): Extent to which the measure focus is evidence based and important to making significant gains in healthcare quality where there is variation in or overall less-than-optimal performance (must-pass).
- Scientific Acceptability (Reliability and Validity): Extent to which the measure produces consistent (reliable) and credible (valid) results about the quality of care when implemented (must-pass).
- Feasibility: Extent to which the specifications require data that are readily available or could be captured and implemented without undue burden
- Usability and Use: Extent to which the measure is being used for both accountability and performance improvement to achieve the goal of high quality, efficient healthcare (use is must-pass for maintenance measures).
- Comparison to related or competing measures: If a measure meets the above criteria and there are endorsed or new related measures or competing measures, the measures are compared to address harmonization and/or selection of the best measure.



Voting on Endorsement Criteria Votes will be taken after the discussion of each criterion

Importance to Measure and Report

- Vote on Evidence (must pass)
- Vote on Performance Gap (must pass)
- Vote on Rationale Composite measures only (must pass)

Scientific Acceptability Of Measure Properties

- Vote on Reliability (must pass)
- Vote on Validity (must pass)
- Vote on Quality Construct Composite measures only
- Feasibility
- Usability and Use
 - Use (must pass for maintenance measures)Usability
- Overall Suitability for Endorsement



Voting on Endorsement Criteria (continued)

Related and Competing Discussion

Procedural Notes

- If a measure fails on one of the must-pass criteria, there will be no further discussion or voting on the subsequent criteria for that measure; the Standing Committee discussion moves to the next measure.
- If consensus is not reached, the discussion will continue with the next measure criterion, but a vote on overall suitability will not be taken.



Achieving Consensus

Quorum: 66% of active Standing Committee members (12 of 18 members).

Vote	Outcome
Greater than 60% yes	Pass/Recommended
40% - 60% yes	Consensus Not Reached (CNR)
<40% yes	Does Not Pass/Not Recommended

- "Yes" votes are the total of high and moderate votes based on the number of active and voting-eligible Standing Committee members who participate in the voting activity.
- Consensus Not Reached (CNR) measures move forward to public and NQF member comment, and the Standing Committee will re-vote during the post-comment web meeting.
- Measures that are not recommended will also move on to public and NQF member comment, but the Standing Committee will not re-vote on the measures during the post-comment meeting unless the Standing Committee decides to reconsider them based on submitted comments or a formal reconsideration request from the developer.



Committee Quorum and Voting

- Please let staff know if you need to miss part of the meeting.
- We must have quorum to vote. Discussion may occur without quorum unless 50% attendance is not reached.
- If we do not have quorum at any point during the meeting, live voting will stop, and staff will send a survey link to complete voting.
 - Standing Committee member votes must be submitted within 48 hours of receiving the survey link from NQF staff.
- If a Standing Committee member leaves the meeting and quorum is still present, the Standing Committee will continue to vote on the measures. The Standing Committee member who left the meeting will not have the opportunity to vote on measures that were evaluated by the Standing Committee during their absence.



Evaluation Process Questions?

Voting Test



Voting Via Desktop or Laptop Computer (Poll Everywhere)

- Click on the voting link that was emailed to you. You will see a wait message until voting begins.
- When voting opens, you will see the screen below. Enter your first and last name, then click "Continue" to access voting from the options that will appear on the screen.
- Please alert an NQF staff member if you are having difficulty with our electronic voting system.

Welcome to nqualityforumvote943's presentation!		
Introduce yourself		
Enter the screen name you would like to appear alongside your responses.		
Name		
0/50		
Continue		
Skip		
Using a screen name allows the presenter and other participants to attach your screen name to your responses. You can change your screen name at any time.		

Measures Under Review



Fall 2022 Cycle Measures

- 3 Maintenance Measures for Standing Committee Review
 - #0028 Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention (National Committee for Quality Assurance [NCQA])
 - #0038 Childhood Immunization Status (CIS) (NCQA)
 - #1407 Immunizations for Adolescents (NCQA)



NQF Scientific Methods Panel (SMP)

- The Scientific Methods Panel (SMP), consisting of individuals with methodologic expertise, was established to help ensure a higherlevel evaluation of the scientific acceptability of complex measures.
- The SMP's comments and concerns are provided to developers to further clarify and update their measure submission form with the intent of strengthening their measures to be evaluated by the Standing Committee.
- Certain measures that do not pass on reliability and/or validity are eligible to be pulled by a Standing Committee member for discussion and a revote.



NQF Scientific Methods Panel Review

No measures were reviewed by the SMP

Consideration of Candidate Measures



#0028 Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention

Measure Steward/Developer: NCQA

Maintenance measure

Brief Description of Measure:

 Percentage of patients aged 18 years and older who were screened for tobacco use one or more times within the measurement period AND who received cessation counseling intervention on the date of the encounter or within the previous 12 months if identified as a tobacco user.



#0038 Childhood Immunization Status (CIS)

Measure Steward/Developer: NCQA

Maintenance measure

Brief Description of Measure:

Percentage of children two years of age who received the recommended number of diptheria, tetanus, and acellar pertussis (DtaP); polio (IPV); measles, mumps, and rubella (MMR); haemphilus influenza type B (HiB); hepatitis B (HepB); chicken poz (VZV); pneumococcal conjugate (PCV); hepatitis A (HepA); rotavirus (RV); and influenza (flu) vaccines by their second birthday.



#1407 Immunizations for Adolescents

Measure Steward/Developer: NCQA

Maintenance measure

Brief Description of Measure:

 Percentage of adolescents 13 years of age who had one dose of meningococcal conjugate vaccine, one tetanus, diphtheria toxoids and acellular pertussis (Tdap) vaccine, and have completed the human papillomavirus (HPV) vaccine series by their 13th birthday.

Related and Competing Discussion



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.

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 a harmonization nor competing measure issue

The National Quality Forum. Measure Evaluation Criteria and Guidance for Evaluating Measure for Endorsement. September 2019; 32-33.



Related and Competing Measures (continued)

- Related and competing measures will be grouped and discussed after the recommendations for all related and competing measures are determined. Only measures recommended for endorsement will be discussed.
- The Standing Committee can discuss harmonization and make recommendations. The developers of each related and competing measure will be encouraged to attend any discussion.



Measure #0038 Childhood Immunization Status (CIS) Related Measures

- #0041 Preventive Care and Screening: Influenza Immunization
- #1659 Influenza Immunization
- #1407 Immunizations for Adolescents
- #3620 Adult Immunization Status
- #3484 Prenatal Immunization Status
- #0680 Percent of Residents Who Were Assessed and Appropriately Given the Seasonal Influenza Vaccine (Short-Stay)
- #0431 Influenza Vaccination Coverage Among Healthcare Personnel



Measure #0038 Related Measure

- #0041 Preventive Care and Screening: Influenza Immunization
 - Steward/Developer: NCQA
 - Description: Percentage of patients aged 6 months and older seen for a visit between October 1 and March 31 who received an influenza immunization OR who reported previous receipt of an influenza immunization
 - Numerator: Patients who received an influenza immunization OR who reported previous receipt of an influenza immunization.
 - Denominator: All patients aged 6 months and older seen for a visit
 - Target Population: Adults, Children under 18, and elderly 65 and older
 - Care Setting: Other
 - Level of Analysis: Clinician: Individual



Measure #0038 Related Measure (continued-1)

- #1659 Influenza Immunization
 - Steward/Developer: Centers for Medicare & Medicaid Services/Telligen
 - Description: Inpatients age 6 months and older discharged during October, November, December, January, February or March who are screened for influenza vaccine status and vaccinated prior to discharge if indicated.
 - Numerator: Inpatient discharges who were screened for influenza vaccine status and were vaccinated prior to discharge if indicated.
 - Denominator: Acute care hospitalized inpatients age 6 months and older discharged during the months of October, November, December, January, February or March.
 - Target Population: Children, Women, Elderly, Dual eligible beneficiaries, Individuals with multiple chronic conditions, Veterans, Populations at risk
 - Care Setting: Inpatient/Hospital
 - Level of Analysis: Facility



Measure #0038 Related Measure(continued-2)

- #1407 Immunizations for Adolescents
 - Steward/Developer: NCQA
 - Description: Percentage of adolescents 13 years of age who had one dose of meningococcal conjugate vaccine, one tetanus, diphtheria toxoids and acellular pertussis (Tdap) vaccine, and have completed the human papillomavirus (HPV) vaccine series by their 13th birthday.
 - Numerator: Adolescents who had at least one dose of meningococcal vaccine; at least one tetanus, diphtheria toxoids and acellular pertussis vaccine (Tdap); and the HPV vaccination series completed by their 13th birthday.
 - Denominator: Adolescents who turn 13 years of age during the measurement year.
 - Target Population: Children under the age of 18
 - Care Setting: Outpatient Services
 - Level of Analysis: Health Plan


Measure #0038 Related Measure (continued-3)

- #3620 Adult Immunization Status
 - Steward/Developer: NCQA
 - Description: The percentage of adults 19 years of age and older who are up-to-date on Advisory Committee on Immunization Practice (ACIP) recommended routine vaccines for influenza, tetanus and diphtheria (Td) or tetanus, diphtheria and acellular pertussis (Tdap), zoster and pneumococcal.
 - Numerator: Adults aged 19 and older who are up-to-date on recommended routine vaccines for influenza, tetanus (Td) or tetanus, diphtheria or acellular pertussis (Tdap), herpes zoster and pneumococcal based on age and recommendations.
 - Denominator: Adults ages 19 years and older.
 - Care Setting: Outpatient Services
 - Level of Analysis: Health Plan



Measure #0038 Related Measure (continued-4)

- #3484 Prenatal Immunization Status
 - Steward/Developer: NCQA
 - Description: Percentage of deliveries in the measurement period in which women received influenza and tetanus, diphtheria toxoids and acellular pertussis (Tdap) vaccinations.
 - Numerator: Deliveries in which women received influenza and tetanus, diphtheria toxoids and acellular pertussis (Tdap) vaccinations.
 - Denominator: Deliveries that occurred during the measurement period.
 - Target Population: Children, Women, Elderly, Dual eligible beneficiaries, Individuals with multiple chronic conditions, Veterans, Populations at risk
 - Care Setting: Outpatient Services
 - Level of Analysis: Health Plan



Measure #0038 Related Measure (continued-5)

- #0680 Percent of Residents Who Were Assessed and Appropriately Given the Seasonal Influenza Vaccine (Short-Stay)
 - Steward/Developer: Centers for Medicare & Medicaid Services
 - Description: This measure captures the percentage of short-stay nursing home residents who were assessed and appropriately given the influenza vaccine during the most recent influenza season.
 - Numerator: The number of residents in the denominator sample who, during the numerator time window, meet any one of the following criteria:
 - Resident received the influenza vaccine during the most recent influenza season, either in the facility or outside the facility; or
 - Resident was offered and declined the influenza vaccine; or
 - *Resident was ineligible due to medical contraindication(s).*
 - Denominator: The denominator consists of residents 180 days of age and older on the target date of the assessment who were in the facility for at least one day during the most recently completed IVS, from October 1 to March 31 of the following year. If a nursing home resident has more than one episode during this time window, only the more recent episode is included in this measure.
 - Target Population: Elderly adults aged >65
 - Care Setting: Post-Acute Care
 - Level of Analysis: Facility



Measure #0038 Related Measure (continued-6)

- #0431 Influenza Vaccination Coverage Among Healthcare Personnel
 - Steward/Developer: Centers for Disease Control and Prevention
 - Description: Percentage of healthcare personnel (HCP) who receive the influenza vaccination.
 - Numerator: HCP in the denominator population who during the time from October 1 (or when the vaccine became available) through March 31 of the following year: (a) received an influenza vaccination administered at the healthcare facility, or reported in writing (paper or electronic) or provided documentation that influenza vaccination was received elsewhere; or (b) were determined to have a medical contraindication/condition of severe allergic reaction to eggs or to other component(s) of the vaccine, or history of Guillain-Barré Syndrome within 6 weeks after a previous influenza vaccination; or (c) declined influenza vaccination
 - Denominator: Number of HCP in groups(a)-(c) below who are working in the healthcare facility for at least 1 working day between October 1 and March 31 of the following year, regardless of clinical responsibility or patient contact.
 - Target Population: Adults aged >=18
 - Care Setting: Inpatient/Hospital
 - Level of Analysis: Facility



Measure #0038 Related Measures 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?



Measure #1407 Immunizations for Adolescents Related Measures

- #0038 Childhood Immunization Status (CIS)
- #3620 Adult Immunization Status
- #3484 Prenatal Immunization Status



Measure #1407 Related Measure

- #0038 Childhood Immunization Status (CIS)
 - Steward/Developer: NCQA
 - Description: Percentage of children 2 years of age who had four diphtheria, tetanus and acellular pertussis (DtaP); three polio (IPV); one measles, mumps and rubella (MMR); three haemophilus influenza type B (HiB); three hepatitis B (HepB); one chicken pox (VZV); four pneumococcal conjugate (PCV); one hepatitis A (HepA); two or three rotavirus (RV); and two influenza (flu) vaccines by their second birthday
 - Numerator: Children who received the recommended vaccines by their second birthday.
 - Denominator: Children who turn 2 years of age during the measurement year.
 - Target Population: Children <18 years of age</p>
 - Care Setting: Outpatient Services
 - Level of Analysis: Health Plan



Measure #1407 Related Measure (Contuned-1)

- #3620 Adult Immunization Status
 - Steward/Developer: NCQA
 - Description: The percentage of adults 19 years of age and older who are up-to-date on Advisory Committee on Immunization Practice (ACIP) recommended routine vaccines for influenza, tetanus and diphtheria (Td) or tetanus, diphtheria and acellular pertussis (Tdap), zoster and pneumococcal.
 - Numerator: Adults aged 19 and older who are up-to-date on recommended routine vaccines for influenza, tetanus (Td) or tetanus, diphtheria or acellular pertussis (Tdap), herpes zoster and pneumococcal based on age and recommendations.
 - Denominator: Adults ages 19 years and older.
 - Care Setting: Outpatient Services
 - Level of Analysis: Health Plan



Measure #1407 Related Measure (continued-2)

- #3484 Prenatal Immunization Status
 - Steward/Developer: NCQA
 - Description: Percentage of deliveries in the measurement period in which women received influenza and tetanus, diphtheria toxoids and acellular pertussis (Tdap) vaccinations.
 - Numerator: Deliveries in which women received influenza and tetanus, diphtheria toxoids and acellular pertussis (Tdap) vaccinations.
 - Denominator: Deliveries that occurred during the measurement period.
 - Target Population: Children, Women, Elderly, Dual eligible beneficiaries, Individuals with multiple chronic conditions, Veterans, Populations at risk
 - Care Setting: Outpatient Services
 - Level of Analysis: Health Plan



Measure #1407 Related Measures 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



Measure Evaluation Process After the Measure Evaluation Meeting

- Staff will prepare a draft report detailing the Standing Committee's discussion and recommendations
 - This report will be released for a 30-day public and member comment period
- Staff compiles all comments received into a comment brief, which is shared with the developers and Standing Committee members
- Post-comment call: The Standing Committee will reconvene for a post-comment call to discuss the comments submitted
- Staff will incorporate comments and responses to comments into the draft report in preparation for the Consensus Standards Approval Committee (CSAC) meeting
- The CSAC meets to endorse measures
- Opportunity for public to appeal endorsement decision



Activities and Timeline – Fall 2022 Cycle *All times ET

Meeting	Date, Time*
Standing Committee Post-Measure Evaluation Web Meeting (if needed)	TBD
Draft Report Comment Period	TBD
Standing Committee Post-Comment Web Meeting	TBD
CSAC Review	TBD
Appeals Period (30 days)	TBD



Spring 2023 Cycle Updates

- Intent to submit deadline was January 5, 2023
- 14 measures total were submitted



Project Contact Info

- Email: populationhealth@qualityforum.org
- NQF phone: 202-783-1300
- Project page: <u>https://www.qualityforum.org/Prevention_and_Popula_tion_Health.aspx</u>
- SharePoint site: <u>https://share.qualityforum.org/portfolio/Prevention</u> <u>PopulationHealth/SitePages/Home.aspx</u>

Questions?

THANK YOU.

NATIONAL QUALITY FORUM https://www.qualityforum.org