

#### Primary Care and Chronic Illness *Committee Meeting*

John Bernot, MD Suzanne Theberge, MPH Hiral Dudhwala, RN, MSN/MPH Madison Jung

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## Welcome

# Project Team – Primary Care and Chronic Illness





John Bernot, MD Senior Director

Suzanne Theberge, MPH Senior Project Manager





Madison Jung Project Manager

## Primary Care and Chronic Illness Standing Committee

- Dale Bratzler, DO, MPH (Co-Chair)
- David Lang, MD
- Kelly Clayton (Co-Chair)
- Anne Leddy, MD, FACE
- Thiru Annaswamy, MD
- Richard Madonna, OD
- Kenneth Benson
- John McClay, MD
- Lindsay Botsford, MD
- Daniel Merenstein, MD
- Tamala Bradham, DHA, PhD, CCC-A
- Richard Murray, MD
- Roger Chou, MD

- Andrew Schachat, MD
- Woody Eisenberg, MD
- Michael Stewart, MD, MPH
- Kim Elliott, PhD
- William Taylor, MD
- Scott Friedman, MD
- Kimberly Templeton, MD
- William Glomb, MD, FCCP, FAAP
- Adam Thompson, BA
- Donald Goldmann, MD
- Kathleen Yaremchuk, MD, MSA
- Jeffrey Hart, MS

## Primary Care and Chronic Illness Expert Reviewers

- Emily Aaronson, MD
- Amesh Adalja, MD
- Esther Babady, PhD, D(ABMM)
- Carlos Bagley, MD, FAANS
- Robert Bailey, MD
- Gerene Bauldoff, PhD, RN, FAAN
- Kathleen Brady, MD, MSCE
- Steven Brotman, MD, JD
- Craig Butler, MD, MBA, CPE
- William Curry, MD, MS

- Jim Daniels, BSN
- Laura Evans, MD, MSc
- Piero Garzaro, MD
- V. Katherine Gray, PhD
- Stephen Grossbart, PhD
- James Mitchell Harris, PhD
- Marci Harris Hayes, PT, DPT, MSCI, OCS
- Starlin Haydon-Greatting, MS, BS, Pharm, FAPhA
- Mark Jarrett, MD, MBA
- Ella Kazerooni, MD, MS

## Primary Care and Chronic Illness Expert Reviewers

- Ann Kearns, MD, PhD
- Michael Lane, MD, MSc, MPHS, CPPS
- Grace Lee, MD
- Jeffrey Lewis, BA
- Jason Matuszak, MD, FAAFP, CAQSM, RMSK
- Anna McCollister-Slipp
- Janice Miller, DNP, CRNP, CDE
- Melinda Neuhauser, PharmD, MPH, FCCP, FASHP
- Rocco Orlando, MD, FACS
- Susan Pollart, MD

- Todd Rambasek, MD, FAAAAI
- Crystal Riley, PharmD, MHA, MBA, CPHQ, CHPIT
- Catherine Roberts, MD
- James Rosenzweig, MD
- Christine Schindler, PhD, RN, CPNP-AC/PC, WCC
- Steven Strode, MD, Med, MPH, FAAFP
- John Ventura, DC
- Christopher Visco, MD
- Chana West, RN, MSN
- Jacquelyn Youde, AuD, CCC-A



- Overview of Primary Care and Chronic Illness Portfolio
  - Discussion of Measurement Gap Areas
- Introduction to NQF Prioritization
- Overview of Upcoming Spring 2018 Cycle

# Overview of NQF's Primary Care and Chronic Illness Portfolio

	Primary Care and Chronic Illness Project Measures	Primary Care and Chronic Illness Comprehensive Portfolio
Measure count	<ul> <li>58 measures*</li> </ul>	• TBD^
Standing Committee Role	<ul> <li>Review and vote on whether these measures meet NQF's endorsement criteria</li> </ul>	<ul> <li>Provide background and context when Committee is evaluating gaps and prioritization for the Primary Care and Chronic Illness Project</li> </ul>

\*NQF staff reviews and assigns appropriate project measures to each CDP Project.

^Included in the meeting materials is an excel containing a list of measures for consideration in the comprehensive portfolio.

## Summary of Feedback for Primary Care and Chronic Illness Comprehensive Portfolio

#### **SurveyMonkey Questions:**

- Which measures/measure topics do you feel SHOULD be included in the Comprehensive Primary Care and Chronic Illness Portfolio?
- Which measures/measure topics do you feel should NOT be included in the Comprehensive Primary Care and Chronic Illness Portfolio?
- Have you identified any gap areas?

#### Summary of Feedback — Include

#### Measures and topics to include

- Cardiovascular and cardiovascular-related
- Diabetes and diabetes-related
- Family experience with coordination for care
- Functional status
- Patient activation
- Literacy assessment
- Admission rates
  - » Asthma
  - » Urinary tract infection
  - » Diabetes complications
- Quality of life

#### Summary of Feedback—Exclude

#### Measures and topics to exclude

- Medication reconciliation post-discharge
- Functional status
- Dehydration and gastroenteritis admission rates
- Improvement in bathing
- Hearing screening prior to hospital discharge
- Proportion of patients with pneumonia that that have a potentially avoidable complication

## Gap Areas

- Ischemic vascular disease evaluation and treatment
- Chronic kidney disease evaluation and treatment (Stage 4 referrals, as an example)
- Wound care/Wound Status measures
- Nutrition/Malnutrition Measures (Screening, Assessment, plan, discharge, etc.)
- Additional Functional Status Measures
- Telehealth/ Remote Patient Monitoring Measures
- Community Acquired Pneumonia Measures including those related to appropriate use of rapid diagnostic testing to direct treatment and prevent antimicrobial resistance
- Acute sinusitis
- Imaging for sinusitis
- Long-Term Complications of Diabetes
- Depression measures
- Counseling
  - Accident prevention in children (helmets, seat belts)
  - Accident prevention in adults (seat belt use, distracted driving)
  - Fall prevention in the elderly (exercise)
- Quality of Life



#### NQF Measure Prioritization Initiative

#### **Strategic Vision**



#### **NQF** Measure Prioritization Initiative



## **Prioritization Criteria: Environmental Scan**

- National Quality Strategy
- IOM Vital Signs
- NQF Prioritization Advisory Committees
- Healthy People 2020 Indicators
- Kaiser Family Foundation Health Tracker
- Consumer priorities for Hospital QI and Implications for Public Reporting, 2011
- IOM: Future Directions for National Healthcare Quality and Disparities Report, 2010
- IHI Whole System Measures
- Commonwealth Fund International Profiles of Healthcare Systems, 2015

- OECD Healthcare Quality Project
- OECD Improving Value in Healthcare: Measuring Quality
- Conceptual Model for National Healthcare Quality Indicator System in Norway
- Denmark Quality Indicators
- UK NICE standards Selecting and Prioritizing Quality Standard Topics
- Australia's Indicators used Nationally to Report on Healthcare, 2013
- European Commission Healthcare Quality Indicators
- Consumer-Purchaser Disclosure Project – Ten criteria for meaningful and usable measures of performance

#### **NQF** Prioritization Criteria



## **NQF** National Priorities

National Priorities	Translation into Patient Voice					
Health outcomes (including mortality, functional status)	Are you getting better?					
Patient experience (including care coordination, shared decision making)	How was your care?					
Preventable harm/complications	Did you suffer any adverse effects from your care?					
Prevention/healthy behaviors	Do you need more help staying healthy?					
Total cost/low value care	Did you receive the care you needed and no more?					
Access to needed care	Can you get the care you need when and where you need it?					
Equity of care	Are you getting high quality care regardless of who you are or where you live?					

## Prioritization Criteria and Approach: Phased Implementation

Prioritization criteria and approach have been pilot tested with Standing Committees



NQF staff will collect feedback via survey.

## Example of Prioritization Scoring *Patient Safety*

NQF Number	Title	Outcome focused (2,1,0)	Improvea ble (2,1,0)	Meaningful to Patients and Family Caregivers (2, 1,0)	Support Systemic/integrate d view of care (0- 4)	Criteria total (out of 1)	Out of 5	1		ritiza latin		1
141	Patient Fall Rate	2	2		2	0.75	3.75	☆	☆	☆	1	☆
202	Falls with injury	2	2	1	2	0.75	3.75	☆	☆	☆	13	☆
138	Urinary Catheter- Associated Urinary Tract Infection for Intensive Care Unit (ICU) Patients	2	2	1	2	0.75	3.75	*	*	*	☆	~
2723	Wrong-Patient Retract-and- Reorder (WP-RAR) Measure	2	1	1	2	0.63						
3000	PACE-Acquired Pressure Ulcer-Injury Prevalence Rate	2	1	1	1	0.56						
	Safety Network (NHSN) Antimicrobial Use Measure	0										
687	Percent of Residents Who Were Physically Restrained (Long Stay)	0	1	1	1	0.31						
	Documentation of Current Medications in the Medical Record	0	1	o	2	0.25						
2732	INR Monitoring for Individuals on Warfarin after Hospital Discharge	0	1	0	1							

# Overview of Upcoming Spring 2018 Cycle

#### Changes to the Committee Composition

- In the next few weeks, NQF will be identifying and reaching out to Committee Members and Expert Reviewers with the necessary expertise to serve on the Committee for the upcoming cycle.
  - Spring 2018 measures are focused on diabetes and osteoporosis
  - Availability for in-person Committee meeting (June 21) and scheduled calls is required for participation as a Standing Committee member
- Role of Expert Reviewer in Measure Evaluation

## Spring 2018 Measures

#### **10 Maintenance Measures:**

- NQF #0037: Osteoporosis Testing in Older Women (OTO)
- NQF #0045: Communication with the physician or other clinician managing ongoing care post fracture for men and women aged 50 years and older
- NQF #0046: Screening for Osteoporosis for Women 65-85 Years of Age
- NQF #0053: Osteoporosis Management in Women Who Had a Fracture
- NQF #0055: Comprehensive Diabetes Care: Eye Exam (retinal) performed
- NQF #0056: Comprehensive Diabetes Care: Foot Exam
- NQF #0057: Comprehensive Diabetes Care: Hemoglobin A1c (HbA1c) Testing
- NQF #0059: Comprehensive Diabetes Care: Hemoglobin A1c (HbA1c) Poor Control (>9.0%)
- NQF #0062: Comprehensive Diabetes Care: Medical Attention for Nephropathy
- NQF #0575: Comprehensive Diabetes Care: Hemoglobin A1c (HbA1c) Control (<8.0%)</li>

#### Activities and Timeline—Spring Cycle 2018 \*All times ET

Meeting	Date/Time					
Measure Submission Deadline	Monday, April 9, 2018					
Commenting Period	May 1 - June 12, 2018					
Committee Measure Evaluation Tutorial Web	Wednesday, May 9, 2018, 2-4 pm					
Meeting						
Committee In-Person Meeting (1 day)	Thursday, June 21, 2018 (all day)					
Committee Post-Measure Evaluation Web	Tuesday, June 26, 2018, 2-4 pm					
Meeting (2 hours)						
Draft Report Comment Period (30 days)	TBD (July/August, 2018)					
Committee Post-Comment Web Meeting	Wednesday, September 19, 2018, 1-3pm					
CSAC Review	October 15 - November 2, 2018					
Appeals Period (30 days)	November 6 - December 5, 2018					

#### Public Comment

# Next Steps

#### Project Contact Info

- Email: primarycare@qualityforum.org
- NQF Phone: 202-783-1300
- Project page: <u>http://www.qualityforum.org/Primary Care and Chroni</u> <u>c Illness.aspx</u>
- SharePoint site: <u>http://share.qualityforum.org/Projects/Primary%20Care</u> <u>%20and%20Chronic%20Illness/SitePages/Home.aspx</u>