

Memo

January 24, 2014

TO: Adult Immunizations Committee

RE: Preparation for Web Meeting on Wednesday, January 29, 2013

The Adult Immunization Committee will meet by WEB MEETING on January 29, 2013 from 2-4pm PM EST.

The purpose of the web meeting is to:

- Review project goals, committee's role, and timeline
- Review draft conceptual framework and environmental scan of measures
- Discuss key questions to prepare for the in-person meeting
- Solicit input on additional measures and measure concepts and exemplary uses of adult immunization measures

This memo is intended to provide background information on the Adult Immunization project and serve as discussion guide for the web meeting. As part of the initial stages of this project, NQF submitted a draft conceptual framework and draft environmental scan report to HHS in mid-December. This report is referenced throughout this document and is appended to this memo. Prior to the web meeting, <u>please</u> review this briefing memo and report and be prepared to discuss the key questions.

PROJECT GOALS AND OBJECTIVES

The Affordable Care Act (ACA) requires a consensus-based entity (NQF) to "synthesize evidence and convene key stakeholders to make recommendations...on... priorities for health care performance measurement in all applicable settings." Under contract with the Department of Health and Human Services (HHS), NQF will provide multi-stakeholder guidance on priorities for performance measurement to address the triple aim of the National Quality Strategy (NQS), focusing on five specific areas requested by HHS, including Adult Immunization. Specifically, this Adult Immunization sub-task will identify critical areas for performance measurement to optimize vaccination rates and outcomes across adult populations.

The primary goal of the project is to provide HHS with recommendations on where to prioritize their performance measurement development and endorsement efforts related to adult immunization. This project will identify gaps and provide recommendations related to measures for specific adult vaccines for which there are no NQF-endorsed measures (e.g., zoster, HPV, Td/Tdap, etc.); summary or composite measures of adult immunization; and outcome measures (e.g., hospitalizations, deaths, post-discharge readmission) for vaccine-preventable diseases.

The following is a table of key project activities and timing. More information related to the general approach of the project can be found in the Draft Conceptual Framework and Draft Environmental Scan report.

Activities	Dates
Finalize multistakeholder committee roster	December 15, 2013
Draft framework and environmental scan to HHS	December 16, 2014
Committee web meeting: Feedback on draft framework and	January 29, 2014
environmental scan	January 29, 2014
In-person Committee (2-day) meeting: Obtain multistakeholder	
recommendations to address priorities for measure	March 31-April 1, 2014
development and endorsement	
Public comment period on draft report (3 weeks)	June-July 2014
Public webinar: Feedback on report recommendations	June 24 or 26, 2014
Deliverable: Final Committee Report	August 15, 2014

DRAFT CONCEPTUAL FRAMEWORK

Please refer to the report with the Draft Conceptual Framework for an overview the framework that the multistakeholder group will refine and use in its analysis and prioritization of measurement needs.

In brief, a key tool to assist in performing the measure gap analysis will be the conceptual measurement framework. With guidance from the project advisors and using information obtained from the environmental scans and syntheses of evidence, as well as previously identified measure gap areas, NQF drafted a conceptual framework against which the multistakeholder group will assess the comprehensiveness and adequacy of available measures.

The framework builds upon concepts identified by the Quality and Performance Measures Workgroup (WG) of the HHS Interagency Adult Immunization Task Force that include structure-process-outcome and the two critical purposes of federal measures: 1) quality improvement/provider accountability, and 2) population health and planning. HHS specifically requested the framework accommodate age appropriate vaccinations (consistent with the adult immunization schedule issued by the Advisory Committee on Immunization Practices (APIC) and CDC), vaccines for age groups including young adults, maternity, adults and the elderly, or other categorizations identified by the environmental scan and the multi-stakeholder group, along with summary or composite measures.

Measure harmonization, measurement of disparities, data sources and suitability for EHR measurement as well as other important characteristics identified by the environmental scan and the multi-stakeholder group will be considered in further developing the conceptual framework.

QUESTIONS FOR COMMITTEE TO CONSIDER:

- Does the committee have any recommendations for revising or improving the framework?
- Will this framework enable further gap analysis and assist in the prioritization of these gaps?
- Is the framework consistent and acceptable for both private and federal systems?

ENVIRONMENTAL SCAN OF MEASURES AND MEASURE CONCEPTS

Please refer to the report with the Draft Environmental Scan for the results of the preliminary search for measures and concepts related to adult immunizations and the framework domains.

In brief, the purpose of the environmental scan is to identify existing measures applicable to adult immunization as well as concepts or ideas about what should be measured that could be further

developed into performance measures. The measures and concepts will populate the conceptual framework to provide a view of what measures exists and where there are gaps.

To identify existing performance measures or indicators, NQF staff searched the following sources:

- NQF's portfolio of endorsed measures;
- Federal list of measures
- AHRQ's National Quality Measures Clearinghouse and National Guidelines Clearinghouse;
- The Health Indicators Warehouse;
- Measures under consideration for federal programs in 2013; and
- Previously conducted environmental scans by NQF, including but not limited to a scan done as part of NQF's 2010 and 2011 HHS-funded efforts to prioritize the Medicare high-impact conditions and child health conditions, which yielded over 1,800 measure entries.

A total of 266 measures were identified as related to adult immunization. Duplicates were identified when possible and after excluding clear duplicates, 225 total measures were identified as relevant to adult immunization. The 225 measures or concepts found in the initial search are concentrated in a few areas:

- Seventy nine measures (35 %) address influenza immunization.
- Pneumococcal immunization is the second largest group with 60 measures (26 %).
- The majority of measures for all vaccines are process measures (69%).
- Only four of the 46 outcome measures are at the provider level –the majority are population surveillance measures.
- Fifteen composite measures provide examples of how measures can be combined. The composites include both measures that combine only immunizations as well as composites that include immunizations with other preventive services.

The need for harmonization and the identification of Immunization Information System (IIS) measures is discussed further in the report.

QUESTIONS FOR COMMITTEE TO CONSIDER:

- What are your thoughts about the current state of performance measures for adult immunization?
- What are the advantages and disadvantages of the current state of measurement for adult immunization?
- What additional sources of potential measures or indicators should be included in the environmental scan?
- Are there any individuals or organizations that you recommend we speak to about their use of adult immunization performance measures?

OVERARCHING QUESTIONS FOR COMMITTEE DISCUSSION

During the web meeting, the Committee will discuss the following issues and questions to be considered at the in-person meeting:

- What would be the ideal state of measurement for adult immunization?
 - o Consider the competing demands of parsimony/cost/burden and completeness.
- What are the potential uses of performance measures as levers to improve adult immunization?
 - Performance measures used for accountability purposes might include public reporting of provider/organization specific results; payment incentive programs; selection for networks; accreditation etc.
 - Accountable entities can include the public health system as well as the personal health system.
- What can we learn from childhood immunization?
- Are there specific examples where adult immunization measurement is highly successful in improving vaccination rates or outcomes?
- How can we promote harmonization among the various performance measures?
 - Harmonization is the process of editing the design of similar measures to ensure they are compatible. Harmonization helps reduce the confusion of having measures that are similar but slightly different.
- What other critical areas for performance measurement (i.e., level of analysis, data sources, accountability uses, EHRs, composites, data collection costs/burden) should be considered?
- What additional information does the committee need to use the conceptual framework and environmental scan to develop recommendations for future performance measure development for adult immunization?