



**NATIONAL
QUALITY FORUM**

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Renal, Fall 2020 Measure Review Cycle

Post-Comment Standing Committee Meeting

Shalema Brooks, MS, MPH, Director

Janaki Panchal, MSPH, Manager

Monika Harvey, PMP, MBA, Project Manager

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Welcome

Housekeeping Reminders

- This is a Webex meeting with audio and video capabilities
- Please direct your browser to:
<https://nqf.webex.com/nqf/j.php?MTID=m1ed7c7ac1d145455af3e93ca79f0d5c7>
 - ▣ **Meeting number:** 173 829 9144; **Password:** RenalFall2020!
- Optional: Dial **1-844-621-3956** and enter passcode **173 829 9144**
- Please place yourself on mute when you are not speaking
- We encourage you to use the following features
 - ▣ Chat box: to message NQF staff or the group
 - ▣ Raise hand: to be called upon to speak
- We will conduct a Committee roll call once the meeting begins

If you are experiencing technical issues, please contact the NQF project team at renal@qualityforum.org

Project Team — Renal Committee



Shalema Brooks,
MS, MPH
NQF Director



Janaki Panchal,
MSPH
NQF Manager



Monika Harvey,
MBA, PMP
NQF Project Manager

Agenda

- Attendance
- Review and Discuss Public Comments
- Related and Competing Measure Discussion
- NQF Member and Public Comment
- Next Steps
- Adjourn

Attendance

Renal Fall 2020 Cycle Standing Committee

- Constance Anderson, BSN, MBA (Co-Chair)
- Lorien Dalrymple, MD, MPH (Co-Chair)
- Andrew Chin, MD
- Annabelle Chua, MD
- Rajesh Davda, MD, MBA, CPE
- Gail Dewald, BS, RN, CNN
- Renee Garrick, MD, FACP
- Stuart Greenstein, MD
- Mike Guffey
- Lori Hartwell
- Frederick Kaskel, MD, PhD
- Myra Kleinpeter, MD, MPH
- Alan Kliger, MD
- Mahesh Krishnan, MD, MPH, MBA, FASN
- Karilynne Lenning, MHA, LBSW
- Precious McCowan
- Andrew Narva, MD, FACP, FASN
- Jessie Pavlinac, MS, RD, CSR, LD
- Jeffrey Silberzweig, MD
- Michael Somers, MD
- Cher Thomas, RHD
- Jennifer Vavrinchik, MSN, RN, CNN
- Bobbi Wager, MSN, RN
- John Wagner, MD, MBA
- Gail Wick, MHSA, BSN, RN, CNNe

Review and Discuss Public Comments



2701 Avoidance of Utilization of High Ultrafiltration Rate (≥ 13 ml/kg/hour)

- **Measure Steward:** Kidney Care Quality Alliance (KCQA)
 - ▣ Maintenance measure
- **Brief Description of Measure:**
 - ▣ Percentage of adult in-center hemodialysis patients in the facility whose average ultrafiltration rate (UFR) is ≥ 13 ml/kg/hour AND who receive an average of < 240 minutes per treatment during the calculation period.
- **Summary of Comments Received:** (One comment received)
 - ▣ Fluid management is a critical area to address through performance measurement.

3567 Hemodialysis Vascular Access: Practitioner Level Long-term Catheter Rate

- **Measure Steward:** University of Michigan Kidney Epidemiology and Cost Center / CMS
 - ▣ New measure
- **Brief Description of Measure:**
 - ▣ Percentage of adult hemodialysis patient-months using a catheter continuously for three months or longer for vascular access attributable to an individual practitioner or group practice.
- **Summary of Comments Received:** (Four comments received)
 - ▣ Importance to Measure & Report
 - ▣ Accountability for patients for whom a catheter is the only or most appropriate choice
 - ▣ Measure specifications
 - ▣ Expansion of Denominator Exclusions
 - ▣ Opportunity for Improvement in consistency scoring Performance Gap
 - ▣ Unintended Consequences of dialysis units preferentially accepting only patients with established AV access

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.

	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 harmonization nor competing measure issue.

Related and Competing Measures (continued)

- Related and competing measures will be grouped and discussed after recommendations for all related and competing measures are determined. Only measures recommended for endorsement will be discussed.
- Committee will not be asked to select a best-in-class measure if all related and competing measures are not currently under review. Committee can discuss harmonization and make recommendations. Developers of each related and competing measure will be encouraged to attend any discussion.

2701 Related Measures

- NQF #0249 : Delivered Dose of Hemodialysis Above Minimum
- NQF #0256 : Minimizing Use of Catheters as Chronic Dialysis Access
- NQF #0257 : Maximizing Placement of Arterial Venous Fistula (AVF)
- NQF #0258 : Consumer Assessment of Healthcare Providers and Systems (CAHPS) In-Center Hemodialysis Survey (ICH CAHPS)
- NQF #1460 : Bloodstream Infection in Hemodialysis Outpatients
- NQF #2977 : Hemodialysis Vascular Access: Standardized Fistula Rate
- NQF #2978 : Hemodialysis Vascular Access: Long-term Catheter Rate

NQF Member and Public Comment

Next Steps



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Activities and Timeline – Fall 2020 Cycle

***All times ET**

Meeting	Date, Time EST
CSAC Review	June 29 – 30, 2021
Appeals Period (30 days)	July 7 – August 5, 2021



Project Contact Info

- Email: renal@qualityforum.org
- NQF phone: 202-783-1300
- Project page: <http://www.qualityforum.org/Renal.aspx>
- SharePoint site:
<https://share.qualityforum.org/portfolio/Renal/SitePages/Home.aspx>

THANK YOU.

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