



### Task Order 01: Renal Fall 2020 Post-Comment Web Meeting

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The National Quality Forum (NQF) held a web meeting for the Renal Standing Committee on Wednesday, May 26, 2021, from 1-3PM ET.

#### Welcome, Introductions, and Review of Meeting Objectives

Shalema Brooks, MS, MPH, NQF director, welcomed the participants to the web meeting. The Committee co-chairs, Constance Anderson, BSN, MBA, and Lorien Dalrymple, MD, MPH, welcomed the Committee to the web meeting. Janaki Panchal, MSPH, NQF manager, conducted the Standing Committee roll call. Ms. Brooks provided an overview of the meeting objectives:

- Review public comments received on the draft report
- Discuss any potential revisions to the Committee's recommendations and/or the draft report based on the comments received
- Discuss potential next steps

#### Review and Discuss Public Comments Received

Ms. Brooks reported that NQF received six comments, including one general comment, one comment on NQF #2701 *Avoidance of Utilization of High Ultrafiltration Rate ( $\geq 13$  ml/kg/hour)*, and four comments on NQF #3567 *Hemodialysis Vascular Access: Practitioner Level Long-Term Catheter Rate*, during the comment period. The comments were submitted from three organizations (including two member organizations). The co-chairs, Lorien Dalrymple and Constance Anderson, provided a summary of the comment submitted for NQF #2701 *Avoidance of Utilization of High Ultrafiltration Rate ( $\geq 13$  ml/kg/hour)*. The commenter noted that fluid management is a critical area to address through performance measurement and supported the Standing Committee's recommendation for continued endorsement of this measure. The Standing Committee did not provide additional comments or concerns.

The co-chairs then summarized the four comments submitted for NQF #3567 *Hemodialysis Vascular Access: Practitioner Level Long-Term Catheter Rate*. Three of the four comments supported the Standing Committee's decision to not recommend the measure for endorsement. In these three comments, the commenters questioned the measure's ability to distinguish whether the care received is based on patient preferences or whether treatment decisions are based on clinical appropriateness. They raised concerns about the opportunity for improvement in the performance gap, discussing what defines an acceptable standard. Commenters mentioned unintended consequences of dialysis units preferentially accepting only patients with established arteriovenous (AV) access, suggested the expansion of denominator exclusions, and stated that the measure does not account for patients for whom a catheter is the only or most appropriate choice. One commenter did not support the Standing Committee's recommendation to not endorse this measure. The commenter noted the discrepancy in applying the performance gap criterion during the review of NQF #3567 (reviewed in the fall 2020 cycle) versus NQF

#2978 (reviewed in the spring 2020 cycle). The Standing Committee discussed the concerns raised and noted that due to the differences in high versus low performance between the practitioner-level measure (NQF #3567) reviewed in the fall 2020 cycle and the facility-level measure (NQF #2978) reviewed in the spring 2020 cycle, it would be inappropriate to assess and compare performance between the two measures. NQF #3567 relies on older CROWNWeb data from 2016, while NQF #2978 utilized 2018 data as evidence for performance gap. The Standing Committee noted that comparing the differences in high and low performance between NQF #3567 and NQF #2978 is inadequate due to the utilization of performance data from different years. The Standing Committee re-emphasized that the median performance of 8.3 percent is likely close to the appropriate level of catheter use in clinical practice, but there is little opportunity for improvement. The Standing Committee discussed both issues extensively during the fall 2020 measure evaluation meeting in February. Additionally, a lack of clarity was noted regarding disparities data, as the text descriptions in the measure submission form differed from the data presented in the tables. Given these concerns, the Standing Committee did not pass the measure on performance gap. Therefore, the Standing Committee did not re-vote on this criterion or change their initial endorsement recommendation.

The developer did not request a reconsideration or provide any additional comments or questions.

### Related and Competing Discussion

Ms. Brooks then briefly reviewed the related measures to NQF #2701 *Avoidance of Utilization of High Ultrafiltration Rate ( $\geq 13$  ml/kg/hour)*. Ms. Brooks noted that the developer identified seven related measures, which have been harmonized to the extent possible. No competing measures were identified for this measure. The Standing Committee did not raise any additional questions or concerns.

### Member and Public Comments

No NQF member or public comments were provided during the post-comment web meeting.

### Next Steps

Ms. Panchal reviewed the next steps. The Committee will meet again in June for the spring 2021 measure evaluation web meeting. Ms. Panchal also informed the Committee that the Consensus Standards Approval Committee (CSAC) would consider the Standing Committee's endorsement recommendations during its meetings on June 29-30, 2021. Following the CSAC meeting, the 30-day appeals period will take place from July 7-August 5, 2021.

### Adjourn