## NATIONAL QUALITY FORUM

## CALL FOR NOMINATIONS TO STEERING COMMITTEE Renal endorsement maintenance

NQF is seeking additional nominations for members of a Steering Committee for a new project to endorse and review measures that specifically address renal-related conditions for public reporting and quality improvement. In addition, NQF-endorsed<sup>®</sup> renal-related consensus standards that were endorsed prior to June 2008 will undergo maintenance review. Some members of the Steering Committee appointed to the recent end stage renal disease (ESRD) project will continue to serve on this project. NQF is seeking to complement the existing Committee with additional nominations.

**BACKGROUND:** Renal-related diseases are a leading cause of morbidity and mortality in the United States.

An estimated 31 million adults (16 percent of the population) in the U.S. have chronic kidney disease (CKD). It is associated with premature mortality, decreased quality of life, and increased healthcare costs totaling 24.5 percent of overall Medicare expenditures in 2008.<sup>1</sup> Risk factors for CKD include cardiovascular disease, diabetes, hypertension, and obesity.

Untreated CKD can result in ESRD. Currently, over half a million people in the U.S. have received a diagnosis of ESRD. In 2008, costs for ESRD rose 13.2 percent to \$26.8 billion. It is the only disease-specific condition that is explicitly guaranteed Medicare coverage. Additionally, racial and ethnic differences continue to persist. In 2007, rates in the African American and Native American populations were 3.7 and 1.8 times greater, respectively, than the rate among Caucasians. Additionally, the rate in the Hispanic population was 1.5 times higher than that of non-Hispanics.<sup>2</sup> Adjusted rates of all-cause mortality rates are roughly six to eight times higher for dialysis patients than for the general population.

Other examples of renal-related conditions that contribute to morbidity and mortality include, but are not limited to, polycystic kidney disease (PKD), nephrolithiasis, and lupus nephritis.

Previously, NQF has endorsed 32 consensus standards to evaluate the quality of care for renal-related diseases in the areas of anemia; dialysis adequacy; mineral metabolism; vascular access; influenza immunization; mortality; and patient education, perception of care, and quality of life. These measures were designed to improve the quality of care delivered to patients with renal diseases in all care settings, including dialysis facilities, in-home settings, physician offices, and hospitals.

**STEERING COMMITTEE:** A Steering Committee will oversee the development of a draft consensus report, including recommendation of which measures should be endorsed as consensus standards for renal-related conditions. *Steering Committee members should not have a vested interest in the candidate standards. This includes employees or contractors of measure owners/developers; members of workgroups that developed the measures; and members of committees that approve measures, or direct or set policy for measure development.* Please see the NQF website for additional information about the conflict of interest policy. All potential Steering Committee members must disclose any current and past activities during the nomination process.

NQF is seeking additional nominations to the existing Steering Committee with various stakeholder perspectives and expertise in renal-related conditions. Specific areas of expertise include, but are not limited to CKD, ESRD, and other important renal-related conditions such as polycystic kidney disease, nephrolithiasis, and lupus nephritis.

NOMINATIONS DUE BY June 8, 2011, 6:00 PM ET

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As with all NQF projects, the Steering Committee will work with NQF staff to develop specific project plans, provide advice about the subject, ensure input is obtained from relevant stakeholders, review draft products, and recommend specific measures and research priorities to NQF Members for consideration under the Consensus Development Process (CDP).

**TIME COMMITMENT:** The Steering Committee will meet via conference call for orientation on **Friday**, *July 8, 2011*. Dial-in instructions and materials will be sent at a later date.

The Steering Committee will also meet in person for a two-day meeting on **Tuesday and Wednesday**, **August 16-17, 2011,** in Washington, DC. Additionally, Steering Committee members may meet approximately three to four times by conference call for two hours each and be asked to review materials and provide feedback throughout the process.

**CONSIDERATION AND SUBSTITUTION:** Priority will be given to nominations from NQF Members. Please note that nominations are to an individual, not an organization, therefore "substitutions" of other individuals from an organization at conference calls and meetings are not permitted.

**MATERIAL TO SUBMIT:** Self-nominations are welcome. Third-party nominations must indicate that the individual has been contacted and is willing to serve. To be considered for appointment to the Steering Committee, please send the following information:

- a completed Nomination Form (online);
- confirmation of availability to participate on the July 8<sup>th</sup> orientation call <u>AND</u> the August 16-17<sup>th</sup>, in-person meeting;
- a 2-page letter of interest and a 100-word maximum biography, highlighting experience/knowledge relevant to the expertise described above and involvement in candidate standard development;
- curriculum vitae or list of relevant experience (e.g., publications) up to 20 pages; and
- completed "Non-Disclosure Agreement" <u>form.</u>

**DEADLINE FOR SUBMISSION:** All nominations *must* be submitted electronically via the online submission form by **6:00 pm ET on June 8, 2011.** 

**QUESTIONS:** If you have any questions, please contact Lauren Richie, project manager, at 202-783-1300 or <u>renal@qualityforum.org</u>. Thank you for your assistance with this project.

## **NOTES:**

 U.S. Renal Data System, USRDS 2010 Annual Data Report: Atlas of Chronic Kidney Disease and End-Stage Renal Disease in the United States, National Institutes of Health, National Institute of Diabetes and Digestive and Kidney Diseases, Bethesda, MD, 2009. Available at <u>http://www.usrds.org/atlas.htm</u> Last accessed March 2011.
Vassalotti, JA, Stevens, LA, Levey, AS, Testing for Chronic Kidney Disease: A Position Statement From the National Kidney Foundation, *American Journal of Kidney Disease*, 2007; 50(2):169-344, p.A1-A48.