

NQF Social Risk Trial Web Meeting 5

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Agenda

- Welcome, Roll Call, and Meeting Objectives
- Overview of Disparities Standing Committee Work
- Risk Adjustment Models (New NQF Project)
- Social Risk Trial Update
- Discussion: Final Report
- Next Steps

Welcome, Roll Call, and Meeting Objectives



NQF Project Staff

- Sai Ma, PhD, NQF Managing Director
- Nicole Williams, MPH, NQF Director
- Isaac Sakyi, MSGH, NQF Analyst
- Ngozi Ihenacho, MPH, NQF Analyst



Roll Call

- Philip Alberti, PhD
- Nancy Garrett, PhD
- Susannah Bernheim, MD, MHS
- Michelle Cabrera, SEIU
- Juan Emilio Carrillo, MD, MPH
- Marshall Chin, MD, MPH, FACP
- Lisa Cooper, MD, MPH, FACP
- Traci Ferguson, MD, MBA, CPE
- Kevin Fiscella, MD
- Romana Hasnain-Wynia, PhD
- Lisa Lezzoni, MD, MSc

- David Nerenz, PhD
- Yolanda Ogbolu, PhD, CRNP
- Ninez Ponce, NPP, PhD
- Bob Rauner, MD,MPH, FAAFP
- Eduardo Sanchez, MD, MPH, FAAFP
- Jesse Schold, PhD
- Sarah Hudson Scholle, MPH, DrPH
- Thomas Sequist, MD, MPH
- Christie Teigland, PhD
- Mara Youdelman, JD, LLM

NQF Update



NQF Update

- Disparities Standing Committee
- Future NQF work on Disparities and Health Equity



Best Practices for Developing and Testing Risk Adjustment Models (New NQF Project)

- In June 2020, NQF was awarded a new task order to address Best Practice for Developing and Testing Risk Adjustment Models.
- Build on NQF 2014 technical guidance and social risk factor trials and explore the different ways risk adjustment influences quality measurement.
- Project Deliverables:
 - Environmental scan and Technical Guidance Report
 - Focus on functional, clinical, and social risk factors in measurement, the availability and scientific acceptability of any standardized risk adjustment frameworks, the process of developing risk adjustment models and the appropriateness of a standard risk adjustment framework.

Social Risk Trial Update



Background and Context

Social Risk Trial: Project Goals

- Allow measure developers to submit measures for endorsement with social risk factors included in their risk-adjustment model
- Explore unresolved issues from the initial trial period to advance the science of risk adjustment
- Explore the challenges and opportunities related to including social risk factors in risk-adjustment models



Overview of Spring 2020 Cycle Submissions

Measures Reviewed:

- 44 measures submitted
- 17 outcome (including intermediate outcome and PRO-PM)

Risk Adjusted Measures:

- 19 utilized some form of risk adjustment
- 15 measures provided a conceptual rationale for potential impact of social risk factors
- 15 used literature to support, 14 used internal data analysis. The use of expert group consensus was not recorded for Spring 2020 cycle



Overview of Fall 2020 Submission

Measures with Conceptual Relationship:

 19 with conceptual rationale supporting inclusion of social risk factors

Measures Adjusted for Social Risk:

- 8 included adjustment for social risk
- Reasons for not adjusting: no meaningful impact of SES adjustment, potential to mask poor performance and disparities in care, relatively constant distribution of patients with risk factors

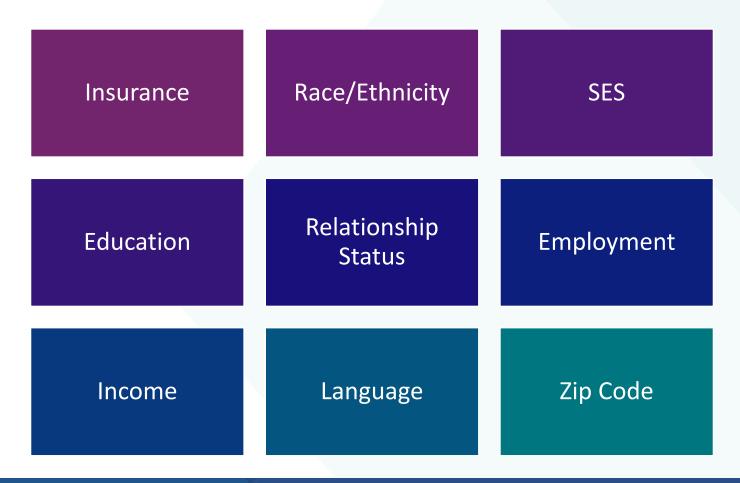


Summary of Submissions for Fall 2017 to Fall 2020

Total Number of Measures Submitted	317
Measures Using Risk Adjustment	124
Measures with a Conceptual Model Outlining Impact of Social Risk Used Published literature to develop rationale Used "Expert Group Consensus" to develop rationale Used "Internal Data Analysis" to develop rationale	119 91 14 67
Measures with Social Risk Factor included in Model	37



Common Social Risk Factors Considered Fall 2017 to Fall 2020





Early Findings

- Disconnect between conceptual relationship and empirical analysis
- Many developers continue to examine race
- Ongoing concern about the need to account for social risk factors



Measures with Supportive Conceptual

74 measures included a conceptual rationale that supported the link between social risk factors and the measure

- 37 measures included social risk factors adjustment
 - Projects represented: Geriatrics and Palliative Care, Patient Experience & Function, Cost and Efficiency, Behavioral Health, Primary Care & Chronic Illness
 - Factors included: insurance product, deprivation index, education, language, disability, patient lives alone
- 37 did not adjust for any social risk factors
 - Projects most commonly choosing not to adjust: All Cause Admissions & Readmissions, Cost & Efficiency, Patient Experience & Function, and Primary Care & Chronic Illness
 - Reasons were varied, but many included lack of meaningful change or statistical significance and concerns about masking disparities



Discussion

- What are your general reflections on the trial results to date?
- Does the Disparities Standing Committee have any guidance on how CDP Standing Committees can continue to evaluate measures for appropriate adjustment for social risk?
- Does the Committee have any guidance on how the Standing Committees should consider concerns about masking disparities?

Final Report Outline Discussion



Social Risk Considerations

Unresolved Issues

- Preferred methodology
- Preferred data sources and factors
- Preferred method to build conceptual rationale
- Appropriate level of adjustment (system vs. individual vs. patient's community/neighborhood)



Questions to Consider for Final Report

- What additional data sources could be used for testing?
- What approaches to social risk adjustment were used?
- Are there multiple ways to display the data using the master measure list (outcome measures, cost and efficiency measures, etc)?
- What key themes or recommendations should we include for this report?
- Final Report structure and format
 - Technical Report
 - Narrative Report
- Has there been a change over the course of this trial in the number of measures that include social risk adjustment? Or in the types of social risk factors considered?

Open Discussion

Opportunity for Public and Member Comment

Next Steps



Next Steps

Task	Date
Disparities Standing Committee Web Meeting 5	October 20, 2020
Disparities Standing Committee Web Meeting 6	November 20, 2020
Draft Report sent to CMS	January 15, 2021
Public Commenting Period	Feb 26 – March 29, 2021
Disparities Standing Committee Web Meeting 7	April 14, 2021
Final Report to CMS	May 14, 2020

Adjourn

THANK YOU.

NATIONAL QUALITY FORUM

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