



NATIONAL
QUALITY FORUM

National Consensus Standards for Surgery

*Standing Committee Meeting
February 1, 2018*

*Melissa Mariñelarena, RN, MPA, CPHQ, Senior Director
Kathryn Goodwin, Senior Project Manager
Christy Skipper, MS, Project Manager
Mauricio Menendez, MSc, Project Analyst*

Welcome

- **This will be the Surgery Standing Committee's first measure evaluation web meeting conducted completely via webinar – we thank you in advance for your patience!**
- **Dial In**
 - *Speaker/Leader (NQF Staff and Committee Co-Chairs)*
 - » 866-599-6630
 - *Participant/Public (Committee, Measure Developers, Members of the Public)*
 - » 855-599-0737
- **Public Web Link**
 - *Web Link: <http://nqf.commpartners.com/se/Rd/Mt.aspx?589443>*
- **Committee Web Link**
 - ***Please be sure you have logged in via the web link sent by CommPartners.***

NQF Staff

- Project Staff
 - ▢ *Melissa Mariñelarena, RN, MPA, CPHQ, Senior Director*
 - ▢ *Kathryn Goodwin, MS, Senior Project Manager*
 - ▢ *Christy Skipper, MS, Project Manager*
 - ▢ *Mauricio Menendez, MSc, Project Analyst*
- NQF Quality Measurement Leadership Staff
 - ▢ *Elisa Munthali, Acting Senior Vice President*

Welcome – February 1, 2018

- Housekeeping
 - *Please do not put this call on hold*
 - *Please mute the microphones on your computer to eliminate feedback*
 - *When you are not speaking, please mute your phone line with *6*
 - *NQF will be monitoring the chat room but we would request that participants make verbal comments as the webinar is being recorded*

Introductions and Disclosures of Interest

Surgery Standing Committee

- Karl Bilimoria, MD, MS
- Robert Cima, MD, MA
- Richard Dutton, MD, MBA
- Elisabeth Erekson, MD, MPH
- **Lee Fleisher, MD (Co-Chair)**
- Frederick Grover, MD
- **William Gunnar, MD, JD (Co-Chair)**
- John Handy, MD
- Mark Jarrett, MD, MBA
- Clifford Ko, MD, MS, MSHS, FACS
- Barbara Levy, MD, FACOG, FACS
- Barry Markman, MD
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- Amy Moyer, MS, PMP
- Keith Olsen, PharmD, FCCP, FCCM
- Lynn Reede, DNP, MBA, CRNA
- Christopher Saigal, MD, MPH
- Salvatore T. Scali, MD
- Allan Siperstein, MD
- Joshua Stein, MD, MS
- Larissa Temple, MD
- Barbee Whitaker, PhD
- A.J. Yates, MD

Portfolio Review

Surgery Portfolio

By Care Setting	#
Home Care	1
Hospital: Inpatient Rehabilitation Facility	1
Hospital: Inpatient	49
Hospital: Inpatient/Outpatient Services	8
Hospital: Outpatient Services	3

By Level of Analysis	#
Clinician: Individual	18
Clinician: Group/Practice	40
Facility	17
Integrated Delivery System	1
Population: National/Regional/State/County/City	1

By Measure Type	#
Structure	4
Process	12
Outcome	40
Composite	6

By Topic Area	#
Abdominal and Colorectal Surgery	2
Anesthesia	1
Cardiac Surgery	30
General Surgery	2
Cross-Cutting (Inpatient & Outpatient Surgery)	1
Cross-Cutting (Inpatient Surgery)	1
Cross-Cutting (Outpatient Surgery)	2
Orthopedic Surgery	3
Ophthalmology	5
Thoracic Surgery	2
Urogynecology/Gynecology	4
Vascular Surgery	9

Overview of Evaluation Process

Roles of the Standing Committee During the Evaluation Meeting

- Act as a proxy for the NQF multistakeholder membership
- Work with NQF staff to achieve the goals of the project
- Evaluate each measure against each criterion
 - *Indicate the extent to which each criterion is met and rationale for the rating*
- Make recommendations regarding endorsement to the NQF membership
- Oversee portfolio of Surgery measures

Ground Rules for Today's Meeting

During the discussions, Committee members should:

- Be prepared, having reviewed the measures beforehand
- Base evaluation and recommendations on the measure evaluation criteria and guidance
- Remain engaged in the discussion without distractions
- Keep comments concise and focused and indicate agreement without repeating what has already been said
- Avoid dominating a discussion and allow others to contribute
- ***Use the raise hand function – raise hand button located on the upper left corner of your screen. To put your hand down, re-select the raise hand button.***

Process for Measure Discussion

- Measure developer will introduce the measure (2-3 min.)
- Lead discussants will begin Committee discussion by:
 - *Providing a summary of the pre-meeting evaluation comments*
 - *Emphasizing areas of concern or differences of opinion*
- Developers will be available to respond to questions at the discretion of the Committee
- Committee will vote on criteria/sub-criteria

Voting

Be sure you have logged into this web meeting via the link sent by CommPartners

- Votes will be taken after the discussion of each criterion
- Importance to measure and report (must pass):
 - *Vote on Evidence*
 - *Vote on Gap*
 - *Composite measures only - rationale*
- Scientific acceptability of measure properties (must pass):
 - *Vote on Reliability*
 - *Vote on Validity*
 - *Composite measures only – quality construct*
- Feasibility
- Use (must pass)
 - *Must pass for maintenance measures*
- Usability
- **If a measures does not pass a must pass criterion discussion and subsequent voting on remaining criteria will stop.**
- **Vote on the measure as specified.**

Quorum and Minimum Agreement

- Quorum: 66% of the Committee
- Pass/Recommended: Greater than 60% “Yes” votes of the quorum (this percent is the sum of high and moderate)
- Consensus not reached: 40-60% “Yes” votes (inclusive of 40 and 60%) of the quorum
- Does not pass/Not Recommended: Less than 40% “Yes” votes of the quorum

Questions?

Consideration of Candidate Measures

Measure 3357: Facility-Level 7-Day Hospital Visits after General Surgery Procedures Performed at Ambulatory Surgical Centers

(Centers for Medicare & Medicaid
Services)

Related and Competing Measures

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.

Related and Competing Measures

NQF #	3357	2687	2539
Title	Facility-Level 7-Day Hospital Visits after General Surgery Procedures Performed at Ambulatory Surgical Centers (ASC)	Hospital Visits after Hospital Outpatient Surgery	Facility 7-Day Risk-Standardized Hospital Visit Rate after Outpatient Colonoscopy
Steward	CMS	CMS	CMS
Measure focus	Acute, unplanned hospital visits w/in 7 days after general surgery at an ASC	Unplanned hospital visits w/in 7 days of a same-day surgical procedure performed at a hospital outpatient department (HOP)	Unplanned hospital visits w/in 7 days of an outpatient colonoscopy performed at an ASC or hospital outpatient dept.
Patient population	65 and older	65 and older	65 and older
Exclusions	Pts. w/out 7 or more days of cont. enrollment in Medicare FFS Part A & B after surgery	Pts. w/out 7 or more days of cont. enrollment in Medicare FFS Part A & B after surgery; Surgeries in which a pt. had an ED visit on the same day, but the ED visit was billed on a different claim.	Pts. w/out continuous enrollment in Medicare FFS Part A & B in the 7 days after the procedure; Concurrent high-risk upper GI endoscopy; Hx/dx IBD; hx/dx diverticulitis; colonoscopies that occur on same hospital OP claim as ED visit/same hospital/observation stay or followed by subsequent OP colonoscopy w/in 7 days
Measure timing	7 days after ASC procedures for unplanned hospital visits	7 days after HOP procedures for unplanned hospital visits	7 days after ASC or HOP procedures for unplanned hospital visits
Level of analysis	Facility	Facility	Facility
Setting	Outpatient Services	Inpatient/Hospital	Acute Care Facility, Outpatient Services
Data source	Claims, Enrollment Data	Claims, Enrollment Data	Claims, Enrollment Data

Public Comment

Next Steps

Evaluation Process

- **Measure evaluation and recommendations at the in-person/web meeting:** The entire Committee will discuss and rate each measure against the evaluation criteria and make recommendations for endorsement
- **Staff will prepare a draft report** detailing the Committee's discussion and recommendations
 - *This report will be released for a 30-day public and member comment period*
- **Post-comment call:** The Committee will re-convene for a post-comment call to discuss comments submitted
- **Final endorsement decision by the CSAC**
- **Appeals (if any)**

Activities and Timeline

Process Step	Timeline
Measure Evaluation Web Meeting #2	February 6, 2-4 pm ET
Measure Evaluation Web Meeting #3 (if needed)	February 7, 1-3 pm ET
Post-Meeting Call (if needed)	February 20, 2-4 pm ET
Draft Report posted for 30-day Public and NQF Member Comment	March 14 – April 12
SC Call to review and respond to Comments	May 3, 3-5 pm ET

Adjourn



National Consensus Standards for Surgery

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Measure 1790: Risk-Adjusted Morbidity and Mortality for Lung Resection in Lung Cancer

(Society of Thoracic Surgeons)

Measure 3294: STS Lobectomy for Lung Cancer Composite Score

(The Society of Thoracic Surgeons)

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