



**NATIONAL
QUALITY FORUM**

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Surgery, Spring 2020 Measure Review Cycle

Measure Evaluation Standing Committee Meeting

Amy Moyer, Director

Janaki Panchal, Manager

Karri Albanese, Analyst

Mike DiVecchia, Project Manager

July 8, 2020

Welcome

Welcome

- The CenturyLink web platform will allow you to visually follow the presentation
- Please mute your lines when you are not speaking to minimize background noise.
- Please do not put the call on hold.
- You may submit questions to project staff via the CenturyLink web platform chat function.
- You may raise your hand using the CenturyLink web platform.

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

Project Team — Surgery Committee



**Amy Moyer, MS,
PMP**
Director



**Janaki Panchal,
MSPH**
Manager



Karri Albanese,
Analyst



**Mike DiVecchia,
MBA, PMP**
Project Manager

Agenda

- Introductions and Disclosures of Interest
- Measures Under Review
- Overview of Evaluation Process and Voting Process
- Consideration of Candidate Measures
- Related and Competing Measures
- NQF Member and Public Comment
- Next Steps
- Adjourn

Introductions and Disclosures of Interest

Surgery Spring 2020 Cycle Standing Committee

- William Gunnar, MD, JD (Co-Chair)
- Ashrith Amarnath, MD
- Kenya Brown, LCSW-C
- TeMaya Eatmon
- Elisabeth Erekson, MD, MPH, FACOG, FACS
- Frederick Grover, MD
- John Handy, MD
- Mark Jarrett, MD, MBA
- Vilma Joseph, MD, MPH, FASA
- Clifford Ko, MD, MS, MSHS, FACS, FASCRS
- Barbara Levy, MD, FACOG, FACS
- Shawn Rangel, MD, MSCE
- Christopher Saigal, MD, MPH
- Salvatore T. Scali, MD, FACS, RPVI
- Allan Siperstein, MD
- Alex Sox-Harris, PhD, MS
- Joshua D. Stein, MD, MS
- Larissa Temple, MD
- Kevin Wang, MHA

Measures Under Review



Spring 2020 Cycle Measures

- **One Maintenance Measure for Committee Review**
 - ▣ 2687 Hospital Visits after Hospital Outpatient Surgery



NQF Scientific Methods Panel Review

- The Scientific Methods Panel independently evaluated the Scientific Acceptability of this measures
 - ▣ 2687 Hospital Visits after Hospital Outpatient Surgery
- The Panel, consisting of individuals with methodologic expertise, was established to help ensure a higher-level evaluation of the scientific acceptability of complex measures.
- The Panel's comments and concerns are provided to developers to further clarify and update their measure submission form with the intent of strengthening their measures to be evaluated by the Standing Committee.
- Certain measures that do not pass reliability and/or validity are eligible to be pulled by a standing committee member for discussion and revote.

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 the 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
- Attend the meeting at all times
- Keep comments concise and focused
- Allow others to contribute



Process for Measure Discussion and Voting

- Brief introduction by measure developer (3-5 minutes)
- Lead discussants will begin Committee discussion for each criterion by:
 - ▣ Briefly explaining information on the criterion provided by the developer
 - ▣ Providing a brief summary of the pre-meeting evaluation comments
 - ▣ Emphasizing areas of concern or differences of opinion
 - ▣ Noting, if needed, the preliminary rating by NQF staff
 - » This rating is intended to be used as a guide to facilitate the Committee's discussion and evaluation.
- Developers will be available to respond to questions at the discretion of the Committee
- Full Committee will discuss, then vote on the criterion, if needed, before moving on to the next criterion

Endorsement Criteria

- **Importance to Measure and Report (Evidence and Performance Gap):** Extent to which the measure focus is evidence-based and important to making significant gains in healthcare quality where there is variation in or overall less-than-optimal performance (**must-pass**)
- **Scientific Acceptability (Reliability and Validity):** Extent to which the measure produces consistent (reliable) and credible (valid) results about the quality of care when implemented (**must-pass**)
- **Feasibility:** Extent to which the specifications require data that are readily available or could be captured and implemented without undue burden
- **Usability and Use:** Extent to which the measure is being used for both accountability and performance improvement to achieve the goal of high-quality, efficient healthcare (**must-pass** for maintenance measures).
- **Comparison to related or competing measures:** If a measure meets the above criteria and there are endorsed or new related measures or competing measures, the measures are compared to address harmonization and/or selection of the best measure.



Voting on Endorsement Criteria

- Votes will be taken after the discussion of each criterion
- **Importance to Measure and Report**
 - ▣ Vote on Evidence (must pass)
 - ▣ Vote on Performance Gap (must pass)
 - ▣ Vote on Rationale - Composite measures only
- **Scientific Acceptability Of Measure Properties**
 - ▣ Vote on Reliability (must pass)
 - ▣ Vote on Validity (must pass)
 - ▣ Vote on Quality Construct - Composite measures only
- **Feasibility**
- **Usability and Use**
 - ▣ Use (must pass for maintenance measures)
 - ▣ Usability



Voting on Endorsement Criteria (continued)

- **Related and Competing Discussion**
- **Overall Suitability for Endorsement**
- **Procedural Notes**
 - ▣ If a measure fails on one of the must-pass criteria, there is no further discussion or voting on the subsequent criteria for that measure; Committee discussion moves to the next measure.
 - ▣ If consensus is not reached, discussion continues with the next measure criterion.

Achieving Consensus

- Quorum: 66% of active committee members (e.g., 16 of 23 members)

| Vote | Outcome |
|----------------------|-------------------------------|
| Greater than 60% yes | Pass/Recommended |
| 40% - 60% yes | Consensus Not Reached (CNR) |
| <40% yes | Does Not Pass/Not Recommended |

- “Yes” votes are the total of high and moderate votes
- CNR measures move forward to public and NQF-member comment and the Committee will revote during the post-comment web meeting



Committee Quorum and Voting

- Please let staff know if you need to miss part of the meeting.
- We must have quorum to vote. Discussion may occur without quorum.
- If we do not have quorum at any point during the meeting, live voting will stop, and staff will send a survey link to complete voting.
 - ▣ Committee member votes must be submitted within 48 hours of receiving the survey link from NQF staff.
- If a Committee member leaves the meeting and quorum is still present, the Committee will continue to vote on the measures. The Committee member who left the meeting will not have the opportunity to vote on the missed measures.



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Questions?

Voting Test

Consideration of Candidate Measures

2687 Hospital Visits after Hospital Outpatient Surgery

- **Measure Steward:** The Centers for Medicare & Medicaid Services (CMS)
 - ▣ Maintenance
- **Brief Description of Measure:**
 - ▣ Facility-level risk-standardized rate of acute, unplanned hospital visits within 7 days of a procedure performed at a hospital outpatient department (HOPD) among Medicare Fee-For-Service (FFS) patients aged 65 years and older. An unplanned hospital visit is defined as an emergency department (ED) visit, observation stay, or unplanned inpatient admission.

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. |



2687 Related Measures

- 0697 Risk Adjusted Case Mix Adjusted Elderly Surgery Outcomes Measure
- 1789 Hospital-Wide All-Cause Unplanned Readmission Measure (HWR)
- 2539 Facility 7-Day Risk-Standardized Hospital Visit Rate after Outpatient Colonoscopy
- 3357 Facility-Level 7-Day Hospital Visits after General Surgery Procedures Performed at Ambulatory Surgical Centers
- 3366 Hospital Visits after Urology Ambulatory Surgical Center Procedures
- 3470 Hospital Visits after Orthopedic Ambulatory Surgical Center Procedures
- 3490 Admission and Emergency Department (ED) Visits for Patients Receiving Outpatient Chemotherapy

NQF Member and Public Comment

Next Steps

Activities and Timeline –Spring 2020 Cycle

*All times ET

| Meeting | Date, Time |
|------------------------------------|----------------------------------|
| Draft Report Comment Period | August 10-September 08, 2020 |
| Committee Post-Comment Web Meeting | September 29, 2020, 1-3 PM ET |
| CSAC Review | November 17-18, 2020 |
| Appeals Period (30 days) | November 23-December 22, 2020 |



Project Contact Info

- Email: surgery@qualityforum.org
- NQF phone: 202-783-1300
- Project page: <http://www.qualityforum.org/surgery>
- SharePoint site:
<http://share.qualityforum.org/Projects/Surgery/SitePages/Home.aspx>

Questions?

THANK YOU.

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