

CALL FOR MEASURES AND MEASURE CONCEPTS: Surgery Endorsement Maintenance

NQF is seeking new performance measures in the areas of general and specialty surgery that address surgical processes, including pre and post-surgical care, anesthesia, and surgical outcomes, including but not limited to survival, symptom and functional outcomes, and adverse outcomes.

NQF is particularly interested in measures:

- measures of intermediate clinical outcomes or longer term health outcomes, including complications;
- composite measures;
- measures applicable to both inpatient and outpatient settings;
- measures that capture broad populations, including children and adolescents where applicable;
- measures that are harmonized with similar measures; and,
- measures that are sensitive to vulnerable populations, including racial/ethnic minorities;
 and Medicaid populations.

This project launched October 28, 2013. The final submission deadline is March 17, 2014.

BACKGROUND

The rate of surgical procedures is increasing annually. In 2010, 51.4 million inpatient surgeries in the United States were performed, and 53.3 million procedures in ambulatory surgery centers were completed¹. Ambulatory surgery centers account for 43 percent of all same-day surgery in the United States, and have been the fastest growing provider type participating in Medicare².

The National Quality Forum (NQF) has endorsed surgical measures through a variety of projects beginning in 2004 with the National Voluntary Consensus Standards for Cardiac Surgery. Most recently, the Surgical Endorsement Maintenance 2010 evaluated general and specialty surgical care across settings of care. The current NQF surgery portfolio includes measures focused on key surgical care processes and outcomes for surgical procedures.

As part of NQF's ongoing work with performance measurement for patients undergoing surgery, this project seeks to identify and endorse performance measures for accountability and quality improvement that address a number of surgical areas including cardiac, thoracic, vascular, orthopedic, neurosurgery, urologic and general surgery. Twenty-four surgical measures endorsed



prior to 2011 are due for maintenance and will be re-evaluated against the most recent NQF measure evaluation criteria along with newly submitted measures.

MEASURE CONCEPTS

In addition to soliciting fully-developed measures for consensus-based endorsement review, NQF is also soliciting measure concepts through NQF's new Measure Inventory Pipeline. This pipeline will serve as an important source of information for HHS and other stakeholders on new measure development in the broader healthcare community. It will also enable NQF to track current and planned measure development to ensure early collaboration among developers to drive harmonization and alignment of measures.

In an effort to capture comprehensive information on measures in development, NQF seeks input on several variables including:

- measure description;
- numerator statement;
- denominator statement (target population);
- planned use,
- stage of development; and
- other relevant information.

Please note that the information entered through NQF's Measure Inventory Pipeline will not be evaluated by the Steering Committee against the NQF Criteria. Submitted information will be catalogued by NQF and used to help inform the Steering Committee's measure gaps discussion. NQF will also share the information with HHS to inform CMS' Measure Inventory Pipeline, which is a reference for several stakeholders.

NQF's Measure Inventory Pipeline will be available for concept submissions in November 2013.

MEASURE SUBMISSION REQUIREMENTS

To submit a measure, please complete the following:

- <u>Measure Submission Form</u> Clicking on this link will redirect you to the webpage for this project, from which you can access the online measure submission form.
- Measure Steward Agreement Please note that no materials will be accepted without submission of a fully executed *Measure Steward Agreement*. All materials not meeting this requirement will be returned to the sender.



Materials must be submitted using the online submission form by 6:00 pm, ET March 17, 2014. If you have any questions, please contact, Andrew Lyzenga or Wunmi Isijola, at 202-783-1300 or via e-mail at surgery@qualityforum.org.

Conditions for Consideration:

- The measure owner/steward verifies there is an identified responsible entity and process to maintain and update the measure on a schedule that is commensurate with the rate of clinical innovation, but at least every three years.¹
- The intended use of the measure includes both public accountability and quality improvement.
- The measure is fully specified and <u>tested for reliability and validity</u>. Measures that are not tested will not be accepted in this project.
- The measure developer/steward attests that <u>harmonization</u> with related measures and issues with competing measures have been considered and addressed, as appropriate.
- The requested measure submission information is complete and responsive to the questions so that all the information needed to evaluate all criteria is provided.

Submission Guidance:

- Developer guidebook:
 - A Developer Guidebook as has been created to assist developers in the measure submission and evaluation process. The Guidebook contains all the information developers need to know when submitting a measure to NQF.
- ICD-10-CM/PCS:
 - Beginning April 1, 2013 measures specified with administrative claims data must submit a set of ICD-9-CM and ICD-10-CM/PCS codes. Click here for further information on this requirement.
- eMeasures:
 - Must be submitted in Heath Quality Measures Format (HQMF) and the quality data model (QDM);
 - o Review the current measure evaluation criteria and guidance
- Composite measures:
 - o Please notify project staff if you plan to submit a composite measure

Technical Assistance

NQF project staff will provide technical assistance to measure developers at any time during the measure submission process up to the submission deadline. Contact the project team with any questions about the criteria, how to answer the questions in the form, any technical issues with

¹ Measure stewards must execute a Measure Steward Agreement with NQF.



the online submission process... or anything else!

MEASURE SUBMISSION COMPLETENESS CHECK	LIST
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Measure steward agreement or concept agreement is completed and signed, and
attached to the submission.
Conditions for submission are addressed.
There are responses in all fields on measure submission form (MSF.)
Attachments included: eMeasure specifications (S.2a); data dictionary/code list (S.2b);
Evidence and Measure Testing appendices
All URLs are active and accurate.
Harmonization/competing measures: Did you present a plan for harmonization of the
related/competing measures identified by staff during early identification/triage? (see
Harmonization process in <u>Developer Guidebook</u>)
Paired measures should be submitted on separate forms.
An eMeasure must be submitted in HQMF format and the quality data model (QDM).
Composite measures (contains individual measures with a single score) - responses to
the composite measure questions are included.
Both ICD-9 and ICD-10 codes included

RESOURCES FOR MEASURE DEVELOPERS AND STEWARDS

For more details on measure evaluation criteria, please see the following reports:

- Evidence Task Force Report
- Measure Testing Task Force Report
- Harmonization Report
- Competing Measures Report

Evaluation and Measure Submission Guidance:

- eMeasure Testing Guidance Report
- Guidance on Quality Performance Measure Construction
- Evidence and Importance to Measure and Report
- Measure Testing and Scientific Acceptability of Measure Properties
- Composite Evaluation Criteria
- Resource Use Measure Evaluation Criteria
- Endorsement Maintenance Policy



¹ <u>National Hospital Discharge Survey: 2010 table, Procedures by selected patient characteristics - Number by procedure category and age</u>

procedure category and age

http://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/SurveyCertificationGenInfo/Downloads/ASC_HAI_MAP.pdf