

# Value Set Harmonization

## *Value Set Harmonization Committee Meeting*

*Chris Millet (Consultant)  
Kathryn Streeter  
Ann Phillips*

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NATIONAL  
QUALITY FORUM

# Agenda at a Glance

- **Welcome and Roll Call**
- **Project Status - Pilot Harmonization TEP**
- **Governance and Policy Discussion**
- **Next Steps –**



# Welcome and Roll Call

# NQF Project Staff

- **Jason Goldwater**
  - **Senior Director**
- **Kathryn Streeter**
  - **Senior Project Manager**
- **Ann Phillips**
  - **Project Analyst**
- **Chris Millet**
  - **Consultant**
- **Jay Lyle**
  - **Consultant**

# Value Set Harmonization Committee

- Zahid Butt, MD, FACG (co-chair)
- Michael Lieberman, MD MS (co-chair)
- Howard Bregman, MD, MS
- Chengjian Che, MD
- Christopher Chute, MD, DrPH
- Cynthia Cullen, MS, MBA, PMP
- Ellen Harper, DNP, RN-BC, MBA, FAAN
- Yan Heras, PhD
- Wendy Hofner, RN
- Stan Huff, MD
- Matt Humphrey
- Rute Martins, MS
- Robert McClure, MD
- Marjorie Rallins, DPM
- Joseph Schneider, MD, MBA, FAAP
- Ann Smith, RN, BSN, MSHA
- James Tcheng, MD, FACC, FSCAI, FESC
- Nancy Walker, MHA, RHIA



# **Project Status - Pilot Harmonization TEP**

# Project Status

## Pilot Process for Harmonization

- **Intent**
  - Measure Intent
  - Value Set Intent
- **Overlap, Duplication and Omission**
  - Manual Review
  - Jaccard Analysis
- **Prioritization**
  - Identified overlap
    - Distinct – Harmonization may not be needed
    - Significant Overlap – Harmonization is needed
    - Ambiguous – more information needed to determine if harmonization is needed
- **Recommendation for Harmonization**
  - Why is a change recommended?
  - What improvements will result from this change?

# Project Status

## Harmonization of Medication Value Sets

- Jaccard analysis performed on Medication value sets from AMI and VTE measures
- Six value sets were identified as having a Jaccard index of over .49
- A worksheet was developed for the Technical Expert Panel that identified the measures containing those value sets, the intent of the measures, the value sets, the intent of the value sets and which ones were potentially overlapping
- NQF will take on the role of identifying classes of Medications for those overlapping value sets



# Overall Results of Technical Expert Panel Discussion

- The members of the TEP were evenly divided about whether the value sets for a select group of AMI and VTE measures should be harmonized.
- The major reason for harmonization: there was too much overlap in medications across value sets and simplification should be the goal.
- The major reason for not harmonizing: The intent for both the measures and the value sets was distinct enough that harmonization was not needed.

# Other Anticoagulants for AMI/Oral Factor Xa Inhibitor

- Value sets have different uses; Dabigatran is used in the AMI value set, but is not an Oral Factor Xa Inhibitor
- Dabigatran is a direct thrombotic inhibitor, which is distinctly different from a Factor Xa Inhibitor
- Dabigatran is not indicated for general VTE prophylaxis; it is only used for VTE prophylaxis if the patient has atrial fibrillation or has a history of VTE
- **Recommendation:** Harmonization not needed as value sets are distinct

# Low Dose Unfractionated Heparin for VTE Prophylaxis/Unfractionated Heparin.

- These value sets represent smaller subsets of the different types of heparin, which allows reuse across multiple measures
- Low Dose Unfractionated Heparin for VTE Prophylaxis indicates subcutaneous administration of heparin, while Unfractionated Heparin indicates intravenous administration
- The creation of an extensional value set listed could not be done without compromising the intent of both the measure and value set
- **Recommendation:** Harmonization is not needed

# Low Molecular Weight Heparin for VTE Prophylaxis (LMWH)/Parenteral Anticoagulant

- Parenteral anticoagulant value set includes medications used for treatment of VTE. LMWH value set includes medications used for VTE prophylaxis.
- LMWH value set is more granular as is required in the CMS measures that employ this set (CMS 108, 114 and 190).
- Parenteral Anticoagulant is not as granular as it has numerous drugs captured in other value sets. This makes it distinct from LMWH as one is intended to be more granular than the other.
- **Recommendation:** Harmonization not needed.

# Next Steps for the Harmonization Pilot

- NQF will be examining encounter value sets within the Depression measures in Meaningful Use
- We are currently working on the methodology on how to evaluate and derive intentional value sets.
- We will also be working with our co-chairs on this as well (Zahid and Mike) and will share with you all the results for your comments and input.



# **Ground Rules for the Evaluation of “Straw-Man” Governance Proposals: Sample Proposal**

# General Ground Rules

- ❑ How to Define and Use High Quality Value Sets
- ❑ Maintain Value Set Harmonization
- ❑ Encourage use of High Quality and Harmonized Value Sets
  - Relationship to Measure Development
  - Recommendations for NQF Endorsement
  - Relationship to CMS Programs

# Compare Proposals Using Ground Rules

	Proposal 1	Proposal 2	Proposal 3	Proposal 4
Define High Quality Value Set				
Maintains Value Set Harmonization				
Supports Measure Development				
Recommendations for Endorsement				
Use in CMS Programs				





# **Proposal 1 - “Portfolio Clean Up Proposal”**

# Defining High Quality Value Sets

## Objective Criteria

- ❑ Automatically Checked by VSAC
  - Proper Technical Use of Code Systems
  - Value Set Purpose is Present and Complete

# Defining High Quality Value Sets

## Subjective Criteria

- ❑ Code System Fit
  - Does the Value Set use code systems consistent with the latest ONC Standards advisory?
  - Is the code system being used properly for Value Set purpose?  
*(i.e. using drug class vs. brand name in RxNorm for Medications)*
- ❑ Is the Value Set Purpose Clearly Described?
- ❑ Are Value Set Members Consistent with the Value Set Purpose?
- ❑ Does the Value Set Conflict with Other High Quality Value Sets?

# Defining High Quality Value Sets

## Subjective Criteria

- ❑ Evaluated by a TEP
  - TEP meets monthly to review
    - *existing value sets in the VSAC*
    - *newly submitted value sets*
    - *expired High Quality VS (in the future)*
  - Provides ample opportunity to support new Value Set/eCQM development

# Defining High Quality Value Sets

## Subjective Criteria

- Evaluated by a Technical Expert Panel
  - Technical Expert Panel comprised of:
    - *Experts in domain area of all Value Sets being reviewed*
    - *Experts in all code systems used in Value Sets being reviewed*

# Defining High Quality Value Sets

## Approval Process for New Value Sets

- Stewards Submit Value Sets for “High Quality Value Sets” Approval in VSAC
  - Value Set Stewards
    - Can be CMS, measure stewards, speciality societies etc.
    - Most likely will be eCQM stewards and developers

# Defining High Quality Value Sets

## Maintenance of High Quality Value Sets

### High Quality Approval Expires:

- Automatically
  - When underlying code system updates impact value set members\*
  - Manually when a “challenge” is submitted to VSAC

*\*should not matter if Value Set is intentional or extenstional*

# Maintaining VS Harmonization

## Limit Comparison to High Quality Value Sets

- ❑ Ensures Comparisons Are Between “Like” Value Sets
- ❑ Occurs During Monthly Value Set Reviews
- ❑ Comparison Process
  - TEP determines the Value Set purpose is duplicative w/ another high quality Value Set
  - VSAC determines there is a high enough overlap in Value Set members



# Supports Measure Development

- ❑ **High Quality Value Sets Distinguishable in VSAC for Measure Developers**
- ❑ **Measure/Value Set Developers Can Submit Value Set for “High Quality Approval”**
- ❑ **Measure Developers Can Challenge High Quality Approval**
  - Challenges Must be Based on an Approval Criterion that is Not Met

# Recommendations for Endorsement

## eCQMs Evaluated for NQF Endorsement or Trial Approval must use High Quality Value Sets

- ❑ All Value Sets must *have Submitted, Expired, or Challenged* Status
- ❑ Value Sets Remain in *Expired* or *Challenged* Status During Measure Review; Measure Developers Present to NQF Committees on Status Impacts to Feasibility

# Promoted by CMS Programs

## Use of eCQMs in CMS Programs

- ❑ Rely on NQF Endorsement to check for use of High Quality Value Set and Value Set Harmonization issues
- ❑ Prevents re-evaluating acceptability of Value Sets instead of whether or not eCQM is a good fit for a program

# Next Steps

- **Value Set Harmonization Committee Webinars**
  - September 24, 2015
  - October 19, 2015
- **In Person Meeting**
  - November 10, 2015
- **Public Comment on Draft Report**
  - December 1, 2015
- **Post Comment Call**
  - January 21, 2016

# Project Contact Info

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**THANK YOU!**