



## CALL FOR NOMINATIONS: COST, EFFICIENCY AND AFFORDABILITY PROJECTS

NQF aims to incorporate affordable care, cost, resource use, and efficiency measurement as a top priority across our work in measure endorsement and use, and for tracking progress on the National Quality Strategy. As a neutral convener, NQF seeks to facilitate the alignment of affordability, cost and efficiency measurement, as well as performance improvement efforts across public and private sector stakeholders. By convening and collaborating with thought-leaders for guidance on resolving key challenges to measurement development, endorsement, and measure application and use, NQF is uniquely positioned to provide a pathway for the identification of measurement priorities, gaps, and benchmarking metrics for monitoring progress on the National Quality Strategy (NQS) in cost and affordable care.

To accomplish these goals, in 2013 NQF is launching a body of work comprised of four projects that will seek to address several of the challenges in measuring costs, affordable care and efficiency. For each of these projects, NQF is seeking nominations for specific expertise to guide the work. Click on a project below to learn more about the charge specific to each committee, important dates and requirements for application.

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### Preferred Expertise & Composition

NQF is seeking to set experts to guide four projects within this topic area. Standing Committee and Expert Panel members are selected to ensure representation from a variety of stakeholders, including consumers, purchasers, providers, professionals, plans, suppliers, community and public health, and healthcare quality experts. Because NQF attempts to represent a diversity of stakeholder perspectives on committees, a limited number of individuals from each of these stakeholder groups can be seated onto a committee.

**Nominations Due By Tuesday, November 26th, 2013, 6:00 PM ET**

NQF is seeking Panel and Committee members to serve on these projects with expertise in and experience as:

- Health services research, cost effectiveness research, and health economics;
- Measurement science, particularly cost, resource use, or efficiency methods;
- Experts in developing grouper-based measurement systems, or risk-adjustment systems using claims data;
- Measure development, specifically outcome performance measures or cost measures;
- Users and implementers use of cost, resource use, or efficiency measures;
- Patients, consumers and consumer advocates;
- Purchasers (state, federal, and/or private);
- Clinicians and healthcare providers;

### **Cost and Resource Use Measure Endorsement**

In 2010 NQF embarked on its first effort to evaluate and endorse cost and resource use measures to expand the NQF portfolio of endorsed cost and resource use measures that in turn could be used as building blocks toward understanding efficiency and value. This learning was captured in the [final](#) and [technical reports](#), yielded the first eight endorsed cost and resource use measures in the NQF portfolio, and the [NQF Resource Use Measure Evaluation Criteria](#). Building on this work, NQF began another project to evaluate non-condition specific measures of resource use, using per-capita and per-hospitalization approaches. This work is currently ongoing. In upcoming work, NQF will continue efforts to evaluate cost and resource use measures focused cardiovascular and pulmonary conditions across two phases of work.

#### ***Standing Committee Charge***

A multi-stakeholder *Standing* Committee will be established to evaluate newly submitted measures and measures undergoing maintenance review and make recommendations for which measures should be endorsed as consensus standards.

The Standing Committee's primary work is to evaluate the submitted measures against the [NQF Resource Use Measure Evaluation Criteria](#) and make recommendations for endorsement. The Committee will also:

- oversee the cost and resource use portfolio of measures
- identify and evaluate competing and related measures
- identify opportunities for harmonization of similar measures
- recommend measure concepts for development to address gaps in the portfolio
- provide advice or technical expertise about the subject to other committees (i.e. cross cutting committees or the Measures Application Partnership)
- ensure input is obtained from relevant stakeholders
- review draft products
- recommend specific measures and research priorities to NQF Members for consideration under the Consensus Development Process.

#### ***Standing Committee Time Commitment***

This Committee will be seated as a standing committee comprised of 20-25 individuals, with members serving terms that may encompass multiple measure review cycles. *Committee members currently serving on the Cost and Resource Use Committee will be given the option to continue their participation for an assigned term. Remaining seats will be filled with newly submitted nominations.*

**Terms**

**Standing Committee members will initially be appointed to a 2 or 3 year term.** Each term thereafter would be a 3 year term, with Committee members permitted to serve two consecutive terms. After serving two terms, the Committee member must step down for one full term (3 years) before becoming eligible for reappointment. For more information, please reference the Standing Committee Policy.

Participation on the Committee requires a significant time commitment. To apply, Committee members should be available to participate in all currently scheduled calls/meetings. Over the course of the Committee member’s term, additional calls will be scheduled or calls may be rescheduled; new dates will be set based on the availability of the majority of the Committee.

Each measure review cycle generally runs about 7 months in length.

Committee participation includes:

- Review measure submission forms during each cycle of measure review:
  - Each committee member will be expected to fully review and provide a preliminary evaluation of submitted measures (approximately 2-3 hours/measure)
- Participate in the orientation call (2 hours)
- The option to attend one of two NQF staff-hosted measure evaluation Q &A calls (2 hours)
- Attendance at scheduled in-person meetings (2 full days in Washington, DC);
- Complete measure review by attending the post-comment conference call (2 hours)
- Complete additional measure reviews by conference call [to be scheduled, if needed]
- Participate in additional calls as necessary
- Complete surveys and pre-meeting evaluations
- Present measures and lead discussions for the Committee on conference calls and in meetings

Table of scheduled meeting dates – Phase 2 - Cardiovascular Condition-Specific

Meeting	Date/Time
Orientation Call (2 hours)	January 13, 2014 3:00 – 5:00 PM ET
Measure Evaluation Q&A (2 hours)	February 10, 2014 11:00 AM - 1:00 PM ET or February 19, 2014 11:00 AM - 1:00 PM ET
In-person meeting (2 days in Washington, DC)	March 4, 2014 8:30 AM – 5:00 PM ET March 5, 2014 8:30 AM – 3:00 PM ET
Post Draft Report Comment Call (2 hours)	June 4, 2014, 11:00 AM – 1:00 PM ET

Table of scheduled meeting dates – Phase 3 - Pulmonary Condition-Specific

Meeting	Date/Time
Orientation Call (2 hours)	April 23, 2014 12:00 – 2:00 PM ET
Measure Evaluation Q&A (2 hours)	May 28, 2014 12:00 – 2:00 PM ET or June 11, 2014 12:00 – 2:00 PM ET
In-person meeting (2 days in Washington, DC)	June 25, 2014 8:30 AM – 5:00 PM ET June 26, 2014 8:30 AM – 3:00 PM ET
Post Draft Report Comment Call (2 hours)	September 17, 2014, 12:00 – 2:00 PM ET

## Linking Cost and Quality Measures

Measuring efficiency presents special challenges as there is currently no standardized and transparent way to assess cost in the context of quality. With funding from the Robert Wood Johnson Foundation (RWJF), and the guidance of an expert panel, the National Quality Forum (NQF) will produce a white paper exploring:

- The current approaches in the field used for measuring and understanding efficiency
- The methodological challenges to linking cost and quality measures for an efficiency signal
- Best practices for combining cost measures with clinical quality measures to assess efficiency of care

The white paper produced through this work of this project will provide guidance and a pathway toward efficiency measures that matter.

### *Expert Panel Charge*

A multi-stakeholder Expert Panel, consisting of 20-25 individuals, will be established to review and to provide guidance on the white paper. The panel will be tasked with:

- deliberating on efficiency measurement approaches and trade-offs identified in the environmental scan
- recommending key methodological approaches to combine cost and quality and technical issues related to individual cost measures
- ensuring input is obtained from relevant stakeholders
- reviewing draft products

### *Time Commitment*

Participation on the Expert Panel requires a significant time commitment. To apply, Panel members should be available to participate in all currently scheduled calls/meetings. Over the course of the Panel member's term, additional calls will be scheduled or calls may be rescheduled; new dates will be set based on the availability of the majority of the Panel.

This project will span a one year timeframe.

Expert Panel participation includes:

- Reviewing draft outlines from author and NQF Staff throughout the course of the project (2-3 hours)
- Participating in an introductory webinar call (2 hours)
- Attending an in-person workshop (2 full days in Washington, DC)
- Participating in follow-up webinar conferences (2 hours each)
- Reviewing public and member comments and attending a webinar to discuss and respond to comments (2 hours)
- Participating in additional calls as necessary

Table of scheduled meeting dates

<b>Meeting</b>	<b>Date/Time</b>
<b>Orientation Call (1 hour)</b>	January 23, 2014 12:00 PM – 1:00 PM ET

Meeting	Date/Time
Web Meeting (2 hours)	February 21, 2014 1:00 PM -3:00 PM ET
In-person meeting (2 days in Washington, DC)	May 1, 2014 8:30 AM – 5:00 PM ET May 2, 2014 8:30 AM – 3:00 PM ET
Call to review comments on draft white paper (2 hours)	June 23, 2014, 12:00 PM – 2:00 PM ET

## Measuring Affordable Care

The National Quality Strategy (NQS) serves as a blueprint for achieving a high-value healthcare system. There are three interdependent aims that guide the NQS: better care, affordable care, and healthy communities; measurement supports driving and tracking progress towards the aims. While significant advances have been made in measuring progress on the aims of better care and healthier communities, progress in the affordable care aim has slow. One challenge is the lack of a clear definition of affordability as it is a broad concept that can be interpreted in many ways. A first step in addressing cost of care is defining “cost to whom” and how it should be measured. With funding from the Robert Wood Johnson Foundation (RWJF), with the guidance of an expert panel, NQF will examine measurement concepts for affordability from the patient perspective. With the guidance of an expert panel, NQF will produce a white paper to explore more patient-oriented cost measures. Key questions include:

- What types of measures are most important to consumers?
- What types of data will be needed?
- How can we best leverage patient-reported data?
- What factors influence a consumer’s perceptions of whether care is affordable?
- How can this information be reported to address consumer needs for discerning affordable and efficient providers?

The white paper produced through this work will focus on understanding how patients use cost data and will provide a path way towards more effective patient-oriented measures addressing affordability.

### Expert Panel Charge

A multi-stakeholder Expert Panel, consisting of 20-25 individuals, will be established to review and to provide guidance on the white paper.

### Time Commitment

Participation on the Expert Panel requires a significant time commitment. To apply, potential Panel members should be available to participate in all currently scheduled calls/meetings. Over the course of the Panel member’s term, additional calls will be scheduled or calls may be rescheduled; new dates will be set based on the availability of the majority of the Panel. This project should approximately take one year for completion.

Expert Panel participation includes:

- Reviewing draft products from author and NQF staff throughout the course of the project
- Participating in an introductory webinar call
- Attending an in-person workshop (2 full days in Washington, DC)
- Participating in follow-up webinar conferences (2 hours each)

- Participating in additional calls as necessary

Table of scheduled meeting dates

Meeting	Date/Time
Orientation Call (1 hour)	January 24, 2014 3:00 PM – 4:00 PM ET
Web Meeting (2 hours)	February 7, 2014 3:00 PM – 5:00 PM ET
In-person meeting (2 days in Washington, DC)	March 27, 2014 8:30 AM – 5:00 PM ET March 28, 2014 8:30 AM – 3:00 PM ET
Call to review comments on draft white paper (2 hours)	May 1, 2014, 1:00 PM – 3:00 PM ET

### Episode Grouper Evaluation Criteria

Understanding how to group and assign healthcare costs to an episode of care, particularly when multiple co-occurring conditions are present, is an important step toward making meaningful comparisons and assessments about costs and amount of resources used to provide care. Episode groupers are software tools programmed to create condition-specific episodes of care (EOC) from administrative claims data to determine the cost of care associated with those claims. Groupers enable the analysis of services delivered by providers over a defined period of time and for specific clinical conditions, to generate an overall picture of the services used to treat and manage that condition for a given patient. Grouping claims at the EOC level affords the opportunity to make meaningful comparisons about clinical conditions between providers on the basis of cost and resource use.

Episode groupers present a number of challenges, particularly in the presence of multiple and concurrent episodes as well as comorbidities. Decision rules built into the grouper help to determine which claims from an individual patient get assigned to various condition episodes, potentially dividing costs for one hospitalization into multiple episodes. When comparing the various grouper systems currently available in the market, the methods by which costs are grouped and attributed to condition-specific episodes of care can vary significantly among methodologies.

Given these challenges, this project seeks to:

- Define the characteristics of an episode grouper versus other measurement systems, including classification or risk adjustment systems
- Identify the key elements required for the evaluation of an episode grouper
- Review the best practices for the construction of an episode grouper
- Provide guidance and determine the appropriate criteria for the evaluation of an episode grouper

### *Expert Panel Charge*

The Expert Panel will be comprised of 15-20 individuals representing multiple stakeholders, including measurement experts, patients and consumers, purchasers, providers, and policy makers. Given the technical nature of this topic area, a significant proportion of panel members will be methodological experts in measurement science, cost and resource use, episodes of care, and developing episode grouper methodologies.

### *Time Commitment*

Participation in the Expert Panel requires a significant time commitment. To apply, potential Panel members must be available to participate in all currently scheduled calls/meetings. Occasionally,

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additional calls are scheduled or existing calls must be rescheduled; new dates are set based on the availability of the majority of the Panel.

This project will last approximately eight (8) months, but the majority of the Panel’s participation will be the first five (5) months of the project through [insert month, year].

Expert Panel participation includes:

- Participate in the orientation call (2 hours)
- Review materials prior to the meeting (2 hours)
- Attendance at initial in-person meeting (2 full days in Washington, DC);
- Review the draft recommendations and report (2 hours)
- Participate in two post-meeting calls to refine the draft recommendations and report (2 hours each)
- Review comments received and assist with responses (2-4 hours depending on volume)
- Participate in the post-comment conference call to finalize recommendations (2 hours)
- Co-chairs participate in CSAC call to review final recommendations
- Participate in additional calls as necessary

Table of scheduled meeting dates

Meeting	Date/Time
Orientation Call (2 hours)	January 22 <sup>nd</sup> , 2014, 12:00 PM – 2:00 PM ET
In-person meeting (2 days in Washington, DC)	February 5 <sup>th</sup> , 2014, 8:30 AM – 5:00 PM ET February 6 <sup>th</sup> , 2014, 8:30 AM – 3:00 PM ET
Post-Meeting Calls (2) (2 hours each)	March 12 <sup>th</sup> , 2014, 12:00 PM – 2:00 PM ET March 19 <sup>th</sup> , 2014, 12:00 PM – 2:00 PM ET
Post Draft Report Comment Call (2 hours)	May 14 <sup>th</sup> , 2014, 12:00 PM – 2:00 PM ET

## Conflicts of Interest

Please review the latest NQF [Conflict of interest policy](#) to learn about how NQF identifies potential conflict of interest. All potential Committee and Expert Panel members must disclose any current and past activities prior to and during the nomination process in order to be considered.

## Consideration and Substitution

Priority will be given to nominations from NQF Members when nominee expertise is comparable. Please note that nominations are to an individual, not an organization, so “substitutions” of other individuals from an organization at conference calls or meetings is not permitted. Committee members are encouraged to engage colleagues and solicit input from colleagues throughout the process.

## Application Requirements

Self-nominations are welcome. Third-party nominations must indicate that the individual has been contacted and is willing to serve. **Nominations for an individual may be submitted for multiple projects.** To be considered for appointment to a Committee or Panel, please submit the following information:

- a completed [online nomination form](#), including:
  - a brief statement of interest

- a brief description of nominee expertise highlighting experience relevant to the committee
- a short biography (maximum 100 words), highlighting experience/knowledge relevant to the expertise described above and involvement in candidate measure development;
- curriculum vitae or list of relevant experience (e.g., publications) *up to 20 pages*
- a completed disclosure of interest form. This will be requested upon your submission of the nominations form.
- confirmation of availability to participate in currently scheduled calls and meeting dates. Committees or projects actively seeking nominees will solicit this information upon submission of the online nomination form.

**To be considered for these expert bodies, completed nomination packets must be submitted by 6pm on November 26, 2013.**

*Please note that due to the Thanksgiving holiday nominees will not receive a confirmation email until the following week.*

**Project Staff Contacts**

Project	Contact
Cost and Resource Use Measure Endorsement	Evan M. Williamson, MPH, MS, or Ashlie Wilbon, MPH, RN, at 202-783-1300 or <a href="mailto:efficiency@qualityforum.org">efficiency@qualityforum.org</a>
Linking Cost and Quality Measures	Erin O'Rourke or Ashlie Wilbon, MPH, RN, at 202-783-1300 or <a href="mailto:costandquality@qualityforum.org">costandquality@qualityforum.org</a>
Measuring Affordable Care	Erin O'Rourke or Ashlie Wilbon, MPH, RN, at 202-783-1300 or <a href="mailto:affordability@qualityforum.org">affordability@qualityforum.org</a>
Episode Grouper Evaluation Criteria	Evan M. Williamson, MPH, MS, or Ashlie Wilbon, MPH, RN, at 202-783-1300 or <a href="mailto:groupercriteria@qualityforum.org">groupercriteria@qualityforum.org</a>

Click [here](#) to submit your nomination