



**NATIONAL  
QUALITY FORUM**

Driving measurable health  
improvements together

# Measure Developer Webinar

The NQF Measure Maintenance Team

*December 14, 2020*

*Funded by the Centers for Medicare and Medicaid Services under contract HHSM-500-2017-00060I Task Order HHSM-500-T0001.*

# Welcome



NATIONAL  
QUALITY FORUM

## Agenda

- Consensus Development Process (CDP) Overview
- Fall 2019 Track 2, Spring 2020, Fall 2020, and Spring 2021 Cycle Updates

## Measure Maintenance Team

- Sai Ma, PhD, NQF Managing Director/Senior Technical Expert
- Kathryn Goodwin, MS, NQF Director
- Hannah Bui, MPH, NQF Manager
- Caitlin Flouton, MS, NQF Analyst

# About NQF

## The National Quality Forum: A Unique Role

Established in 1999, NQF is a nonprofit, nonpartisan, membership-based organization that brings together public and private sector stakeholders to reach consensus on healthcare performance measurement. The goal is to make healthcare in the U.S. better, safer, and more affordable.

**Mission:** To lead national collaboration to improve health and healthcare quality through measurement

- An Essential Forum
- Gold Standard for Quality Measurement
- Leadership in Quality



## NQF Activities in Multiple Measurement Areas

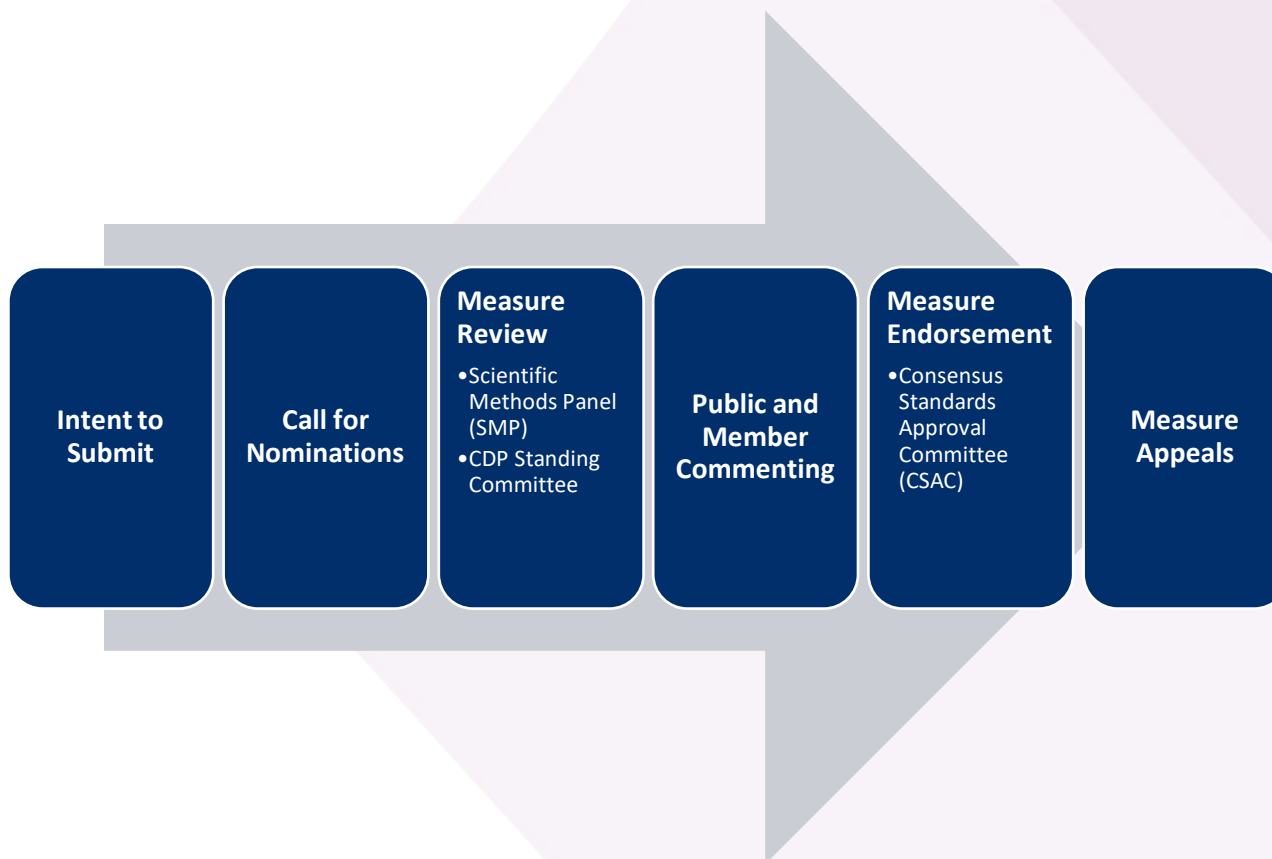
- **Performance Measure Endorsement**
  - ▣ 400+ NQF-endorsed measures across multiple clinical areas
  - ▣ 15 empaneled standing expert committees including the Scientific Methods Panel
- **Measure Applications Partnership (MAP)**
  - ▣ Provides recommendations to HHS on selecting measures for 19 federal programs
- **Advancing Measurement Science**
  - ▣ Convenes private and public sector leaders to reach consensus on complex issues in healthcare performance measurement
    - » Examples include CMS-funded projects such as HCBS, rural issues, telehealth, interoperability, attribution, risk-adjustment for social risk factors, diagnostic accuracy and disparities
- **Other Measurement Work**
  - ▣ Creation of action-oriented playbooks and implementation guides that include measurement frameworks and/or opportunities for organizations to measure progress on high-priority healthcare topics
  - ▣ Conducts Strategy Sessions with stakeholders to identify measure gaps and opportunities

## Consensus Development Process Defined

- Multistakeholder participation is foundational to NQF
- NQF has been endorsing measures since 2001
  - ▣ “NQF-endorsed measure” is considered the gold standard for health care quality
  - ▣ NQF awarded contract by HHS as the “consensus-based entity” designated in federal statute for endorsement activities
  - ▣ All 400+ NQF-endorsed measures are included in Quality Positioning System
  - ▣ Endorsement via the CDP
- Consensus depends on participation and feedback from members and stakeholders
- Over the years, the CDP has been revised to streamline the process and encourage more feedback from members and stakeholders



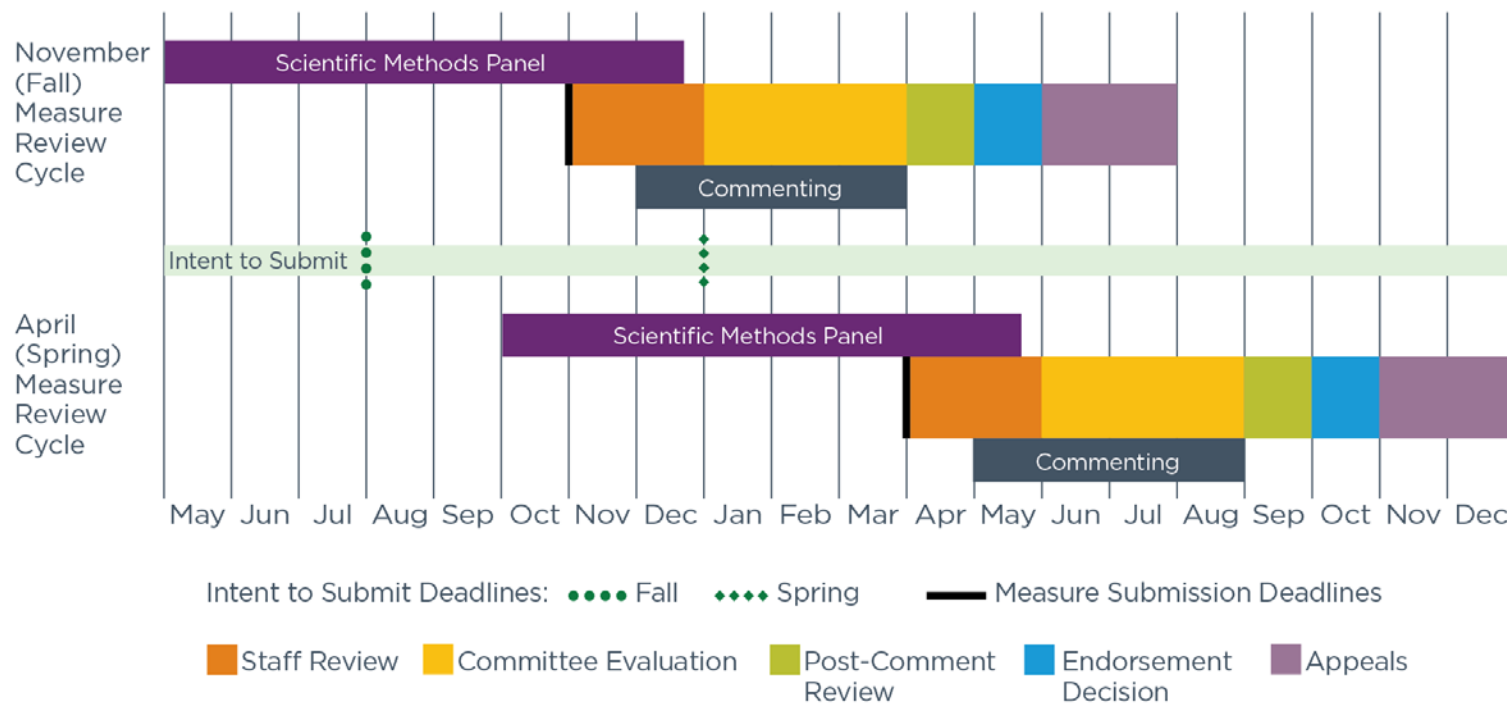
## NQF Consensus Development Process



More info about [NQF's CDP](#)

## Measure Review: Two Cycles Per Year

Consensus Development Process:  
Two Cycles Every Contract Year



## 14 Measure Review Topical Areas

- All Cause Admission/Readmissions
- Behavioral Health and Substance Use
- Cancer
- Cardiovascular
- Cost and Efficiency
- Geriatric and Palliative Care
- Neurology
- Patient Experience and Function
- Patient Safety
- Perinatal and Women's Health
- Prevention and Population Health
- Primary Care and Chronic Illness
- Renal
- Surgery

# Intent to Submit



## Intent to Submit

- NQF requires measure stewards or developers to submit an *Intent to Submit* at least **three months** prior to the designated cycle's measure submission deadline.
- This will notify NQF of the measure steward or developer's readiness to submit measures for endorsement consideration and will allow NQF to adequately plan for measures that are being submitted
- Complete and finalized measure details and testing information\* (i.e. the measure testing attachment) are due on the intent to submit deadline – see next slide for details

\*Note: there are different testing forms required depending on measure type. More information can be found on our [Submitting Standards page](#) or the [Measure Developer Guidebook](#)

## Intent to Submit – Measure Details

- ▣ Measure Type
- ▣ Measure Title
- ▣ Measure Description
- ▣ Brief narrative of the measure that includes the type of score, measure focus, target population, and/or time frame
- ▣ Measure-specific Web Page
- ▣ HQMF Specifications, BONNIE Testing and feasibility scorecard (eCQMs only)
- ▣ Data Dictionary, Code Table, or Value Sets
- ▣ Changes to measure specifications since last endorsement
- ▣ Numerator Statement & Details
- ▣ Denominator Statement & Details
- ▣ Denominator Exclusions & Details
- ▣ Stratification Information
- ▣ Risk-Adjustment Type
- ▣ Type of Score
- ▣ Interpretation of Score
- ▣ Calculation Algorithm/Measure Logic
- ▣ Sampling
- ▣ Survey/Patient-Reported Data
- ▣ Data Source and/or Collection Instrument
- ▣ Level of Analysis
- ▣ Care Setting
- ▣ Additional specifications for composite measures

## Intent to Submit – Testing Attachment

**NATIONAL QUALITY FORUM—Measure Testing (subcriteria 2a2, 2b1-2b6)**

**Measure Number** (if previously endorsed): Click here to enter NQF number

**Measure Title:** Click here to enter measure title

**Date of Submission:** Click here to enter a date

**Type of Measure:**

<input type="checkbox"/> Outcome (including PRO-PM)	<input type="checkbox"/> Composite – <b>STOP – use composite testing form</b>
<input type="checkbox"/> Intermediate Clinical Outcome	<input type="checkbox"/> Cost/resource
<input type="checkbox"/> Process (including Appropriate Use)	<input type="checkbox"/> Efficiency
<input type="checkbox"/> Structure	

**Instructions**

- Measures must be tested for all the data sources and levels of analyses that are specified. *If there is more than one set of data specifications or more than one level of analysis, contact NQF staff* about how to present all the testing information in one form.
- For **all** measures, sections 1, 2a2, 2b1, 2b2, and 2b4 must be completed.
- For **outcome and resource use** measures, section 2b3 also must be completed.
- If specified for **multiple data sources/sets of specifications** (e.g., claims and EHRs), section 2b5 also must be completed.
- Respond to **all** questions as instructed with answers immediately following the question. All information on testing to demonstrate meeting the subcriteria for reliability (2a2) and validity (2b1-2b6) must be in this form. An appendix for *supplemental* materials may be submitted, but there is no guarantee it will be reviewed.
- If you are unable to check a box, please highlight or shade the box for your response.
- Maximum of 25 pages (including questions/instructions; minimum font size 11 pt; do not change margins). **Contact NQF staff if more pages are needed.**
- Contact NQF staff regarding questions. Check for resources at [Submitting Standards webpage](#).
- For information on the most updated guidance on how to address social risk factors variables and testing in this form refer to the release notes for version 7.1 of the Measure Testing Attachment.

**Note:** The information provided in this form is intended to aid the Standing Committee and other stakeholders in understanding to what degree the testing results for this measure meet NQF's evaluation criteria for testing.

**2a2. Reliability testing**<sup>10</sup> demonstrates the measure data elements are repeatable, producing the same results a high proportion of the time when assessed in the same population in the same time period and/or that the measure score is precise. For **instrument-based measures** (including PRO-PMs) and **composite performance measures**, reliability should be demonstrated for the computed performance score.

**2b1. Validity testing**<sup>11</sup> demonstrates that the measure data elements are correct and/or the measure score correctly reflects the quality of care provided, adequately identifying differences in quality. For **instrument-based measures** (including PRO-PMs) and **composite performance measures**, validity should be demonstrated for the computed performance score.

**2b2. Exclusions** are supported by the clinical evidence and are of sufficient frequency to warrant inclusion in the specifications of the measure;<sup>12</sup>

Version 7.1 9/6/2017

NQF Testing attachment (v7.1, 2017)  
for outcome, intermediate clinical  
outcome, process, structure,  
cost/resource, efficiency measures

# Intent to Submit – Testing Attachment

## NQF Composite Testing Attachment (v3.1, 2017) for composite measures

### NATIONAL QUALITY FORUM—Composite Measure Testing (subcriteria 2a2, 2b1-2b6)

**Measure Number** (if previously endorsed): [Click here to enter NQF number](#)

**Composite Measure Title:** [Click here to enter measure title](#)

**Date of Submission:** [Click here to enter a date](#)

**Composite Construction:**

- ☐ Two or more individual performance measure scores combined into one score
- ☐ All-or-none measures (e.g., all essential care processes received or outcomes experienced by each patient)

**Instructions:** Please contact NQF staff before you begin.

- If a component measure is submitted as an individual performance measure, the non-composite measure testing form must also be completed and attached to the individual measure submission.
- Measures must be tested for all the data sources and levels of analyses that are specified. **If there is more than one set of data specifications or more than one level of analysis, contact NQF staff** about how to present all the testing information in one form.
- **Sections 1, 2a2, 2b1, 2b2, and 2b4 must be completed.**
- For composites with **outcome and resource use** measures, section **2b3** also must be completed.
- If specified for **multiple data sources/sets of specifications** (e.g., claims and EHRs), section **2b5** also must be completed.
- Respond to **all** questions as instructed with answers immediately following the question. All information on testing to demonstrate meeting the subcriteria for reliability (2a2) and validity (2b1-2b6) and composites (2c) must be in this form. An appendix for *supplemental* materials may be submitted, but there is no guarantee it will be reviewed.
- If you are unable to check a box, please highlight or shade the box for your response.
- Maximum of 25 pages (including questions/instructions; minimum font size 11 pt; do not change margins).
- **Contact NQF staff if more pages are needed.**
- Contact NQF staff regarding questions. Check for resources at [Submitting Standards webpage](#).
- For information on the most updated guidance on how to address social risk **factors variables** and testing in this form refer to the release notes for version 7.1 of the Measure Testing Attachment. and the 2017 Measure Evaluation Criteria and Guidance.

**Note:** The information provided in this form is intended to aid the Standing Committee and other stakeholders in understanding to what degree the testing results for this measure meet NQF's evaluation criteria for testing.

**2a2. Reliability testing** <sup>10</sup> demonstrates the measure data elements are repeatable, producing the same results a high proportion of the time when assessed in the same population in the same time period and/or that the measure score is precise. For **instrument-based measures** (including **PRO-PMs**) and **composite performance measures**, reliability should be demonstrated for the computed performance score.

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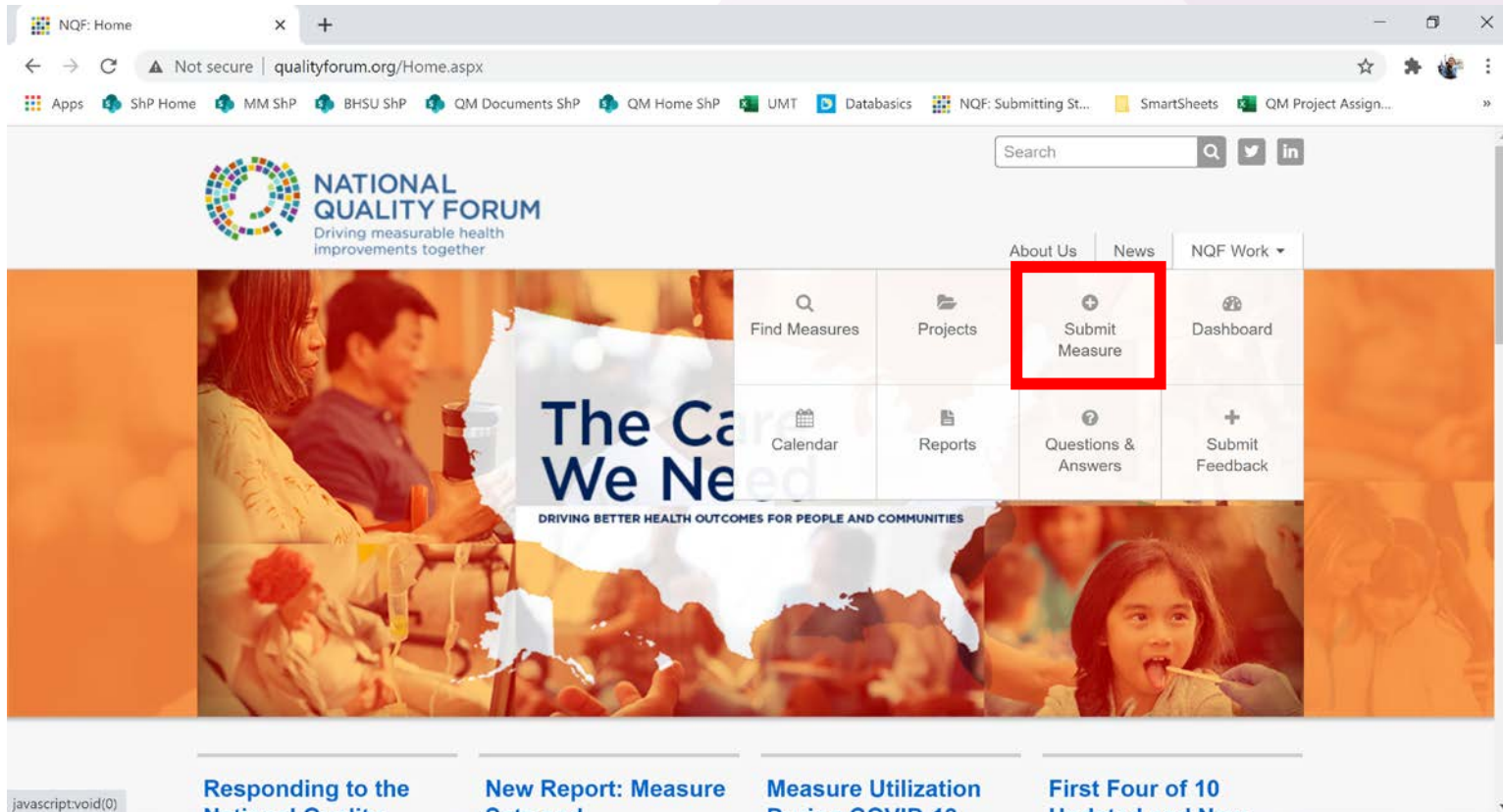


## Intent to Submit Deadlines\*

- Spring Cycle: January 5
- Fall Cycle: August 1

*\*if the date takes place on a weekend, the deadline will occur on the next business day*

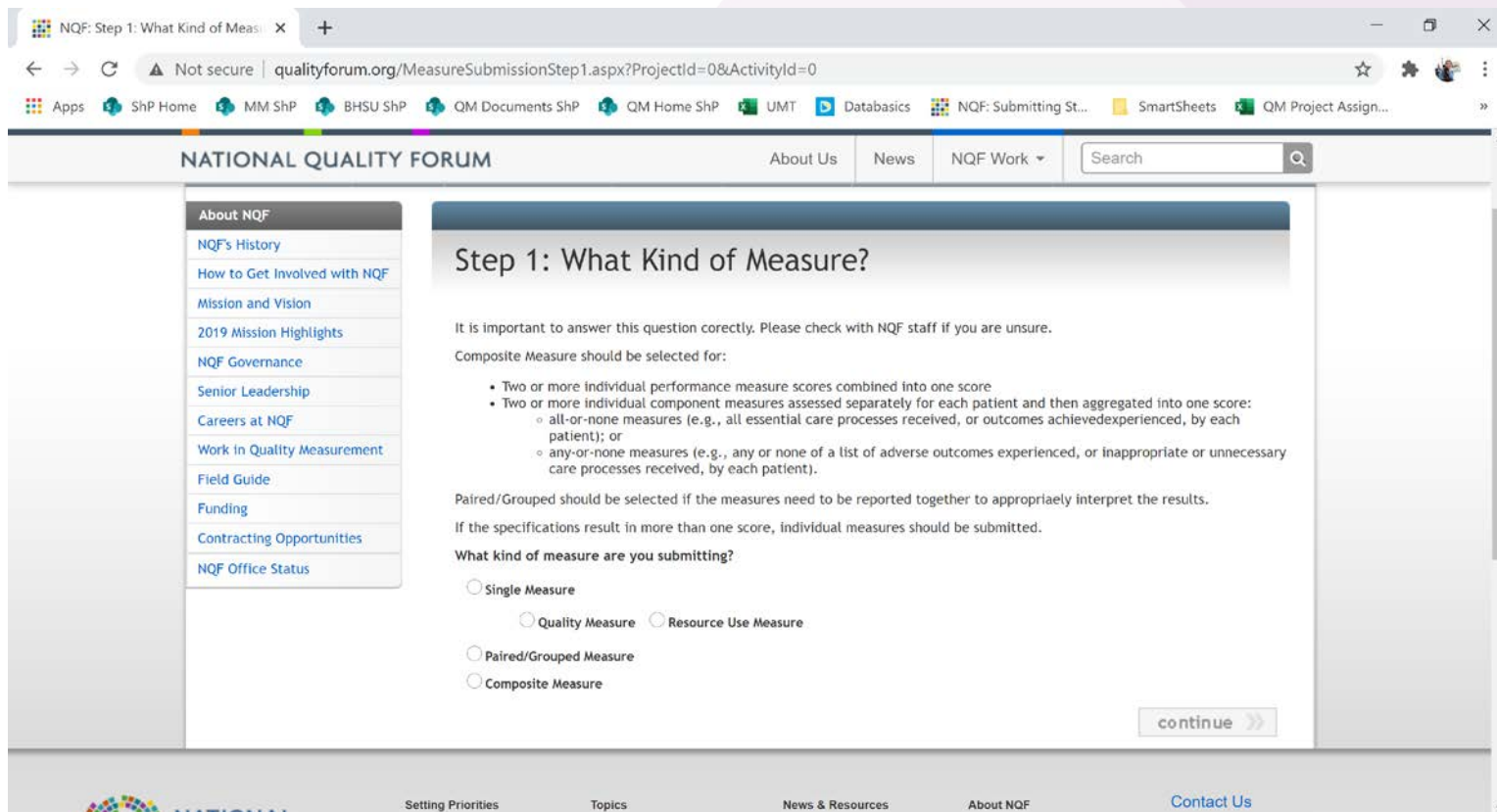
## Intent to Submit – How To for New Measures



The screenshot shows the National Quality Forum (NQF) website. The browser address bar displays "qualityforum.org/Home.aspx". The website header includes the NQF logo and the tagline "Driving measurable health improvements together". A search bar is located in the top right. Below the header, a navigation menu contains links for "About Us", "News", and "NQF Work". A central grid of buttons includes "Find Measures", "Projects", "Submit Measure" (highlighted with a red box), "Dashboard", "Calendar", "Reports", "Questions & Answers", and "Submit Feedback". The background of the grid features a collage of images, including a group of people and a child. At the bottom, there are four featured articles: "Responding to the National Quality", "New Report: Measure", "Measure Utilization", and "First Four of 10".

[Link to submit a new measure](#)

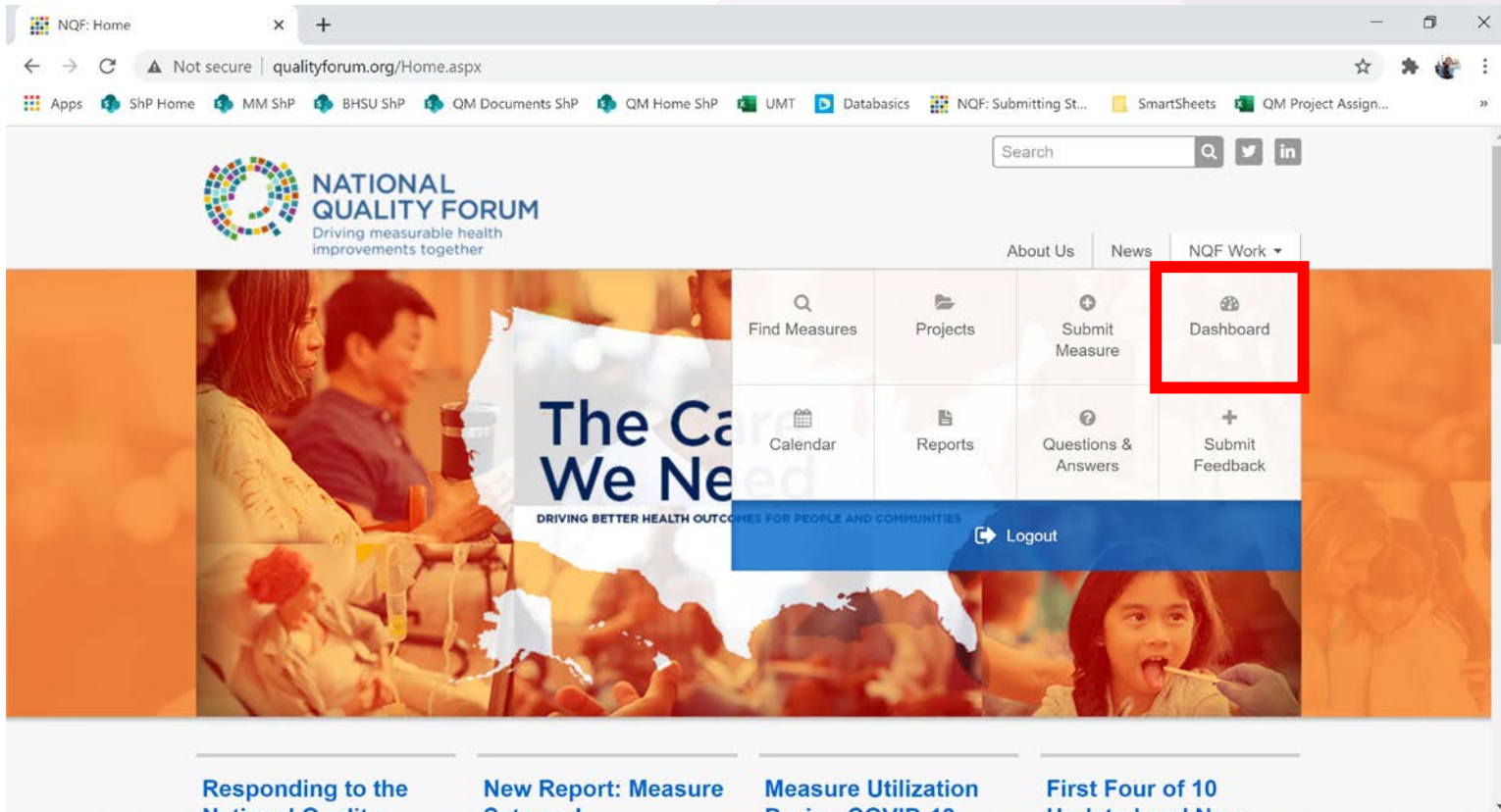
# Intent to Submit – How To for New Measures



The screenshot shows a web browser window with the URL `qualityforum.org/MeasureSubmissionStep1.aspx?ProjectId=0&ActivityId=0`. The page title is "NQF: Step 1: What Kind of Measure?". The left sidebar contains a menu with links: "About NQF", "NQF's History", "How to Get Involved with NQF", "Mission and Vision", "2019 Mission Highlights", "NQF Governance", "Senior Leadership", "Careers at NQF", "Work in Quality Measurement", "Field Guide", "Funding", "Contracting Opportunities", and "NQF Office Status". The main content area is titled "Step 1: What Kind of Measure?". It contains the following text: "It is important to answer this question correctly. Please check with NQF staff if you are unsure. Composite Measure should be selected for:" followed by a bulleted list: "• Two or more individual performance measure scores combined into one score", "• Two or more individual component measures assessed separately for each patient and then aggregated into one score: all-or-none measures (e.g., all essential care processes received, or outcomes achieved/experienced, by each patient); or any-or-none measures (e.g., any or none of a list of adverse outcomes experienced, or inappropriate or unnecessary care processes received, by each patient).". Below this, it says "Paired/Grouped should be selected if the measures need to be reported together to appropriately interpret the results. If the specifications result in more than one score, individual measures should be submitted." The question "What kind of measure are you submitting?" is followed by four radio button options: "Single Measure", "Quality Measure", "Resource Use Measure", "Paired/Grouped Measure", and "Composite Measure". A "continue" button with a right arrow is at the bottom right of the form.

[Link to submit a new measure](#)

# Intent to Submit – How To for Endorsed Measures



The screenshot shows the National Quality Forum website interface. The header includes the logo, navigation links (About Us, News, NQF Work), and a search bar. The main content area features a large banner with the text "The Care We Need" and "DRIVING BETTER HEALTH OUTCOMES FOR PEOPLE AND COMMUNITIES". Below the banner is a grid of links: Find Measures, Projects, Submit Measure, Dashboard (highlighted with a red box), Calendar, Reports, Questions & Answers, and Submit Feedback. A blue bar at the bottom of the grid contains a "Logout" button. The footer displays four sections: "Responding to the National Quality", "New Report: Measure", "Measure Utilization", and "First Four of 10".

# Intent to Submit – How To for Endorsed Measures

NQF: Mydashboard

Not secure | qualityforum.org/Mydashboard.aspx

Apps ShP Home MM ShP BHSU ShP QM Documents ShP QM Home ShP UMT Databasics NQF: Submitting St... SmartSheets QM Project Assign...

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National Priorities Partner

**Welcome to Your Dashboard**

NQF is an independent, nonprofit, Membership organization that brings together diverse organizations and individuals from across the country dedicated to improving health and healthcare through quality measurement. Membership in NQF gives your organization access to a wealth of educational workshops, networking opportunities, and other Members-only benefits.

**Become a part of the quality community! Join NQF.**

**Visit the NQF Store!**

**My Workspaces** **Subscribe** **Measure Portfolios**

- Access SharePoint workspaces.
- Nominate an individual or an organization for a committee.

To file an Intent to Submit for measures undergoing Endorsement Maintenance, first click "Confirm" under your measure entry to indicate you plan to submit the measure in the cycle to which it has been assigned. Clicking "Confirm" opens your measure submission - please access the submission and, at a minimum, update the measure testing attachment to the latest version, and revise all specifications as needed.

**My Measures** **My Comments**

**+ Measure Process** **+ Status** ☐ Harmonization Requested **Reset** **Search**

Measure #	Name	Process	Status	Last Edited Date	Cycle
2879e	Hybrid Hospital-Wide Readmission (HWR) Measure with Claims and Electronic Health Record Data	Endorsement Maintenance	Draft	Nov 09, 2020 11:12 AM	Spring 2021

**REMINDER! Your measure is not officially submitted to NQF for consideration.**

[Confirm](#) [Request submission cycle deferral](#)

# Scientific Methods Panel

## Scientific Methods Panel (SMP)

- Role:
  - ▣ Conduct evaluation of complex measures for the Scientific Acceptability criterion, with a focus on reliability and validity analyses and results
  - ▣ Serve in an advisory capacity to NQF on methodologic issues, including those related to measure testing, risk adjustment, and measurement approaches.
- The SMP was created to ensure higher-level and more consistent reviews of the scientific acceptability of measures
- The SMP review helps inform the standing committee's endorsement decision. The panel does not render endorsement recommendations.





## Scientific Methods Panel (cont.)

- The SMP reviews measures with reliability and validity testing, analyses, and results that are deemed as **complex**

### *Complex Measures*

- Outcome measures, including intermediate clinical outcomes
- Instrument-based measures (e.g., PRO-PMs)
- Cost/resource use measures
- Efficiency measures (those combining concepts of resource use and quality)
- Composite measures

### *Noncomplex Measures*

- Process measures
- Structural measures
- Previously endorsed complex measures with no changes/updates to the specifications or testing



## Scientific Methods Panel (cont.)

- Complex measures are reviewed by the SMP when:
  - ▣ Newly submitted
  - ▣ Maintenance measures with updated testing
  - ▣ NQF staff requests (e.g., expert opinion needed to support review of testing, review of unfamiliar methodology)
- All measures reviewed by the SMP can be discussed by the Standing Committee
- Standing Committee will evaluate and make recommendations for endorsement for:
  - » Measures that pass SMP review
  - » Measures where the SMP did not reach consensus

## Scientific Methods Panel (cont.)

- Measures that did not pass the SMP can be pulled by the Standing Committee member for further discussion
  - Measures rated as “Low” or “Insufficient” for reliability or validity by staff or the SMP will not be eligible for re-vote if any of the following circumstances apply:
    - » Inappropriate methodology or testing approach applied to demonstrate reliability or validity
    - » Incorrect calculations or formulas used for testing
    - » Description of testing approach, results, or data is insufficient for staff or the Scientific Methods Panel to apply the criteria
    - » Appropriate levels of testing not provided or otherwise did not meet NQF’s minimum evaluation requirements

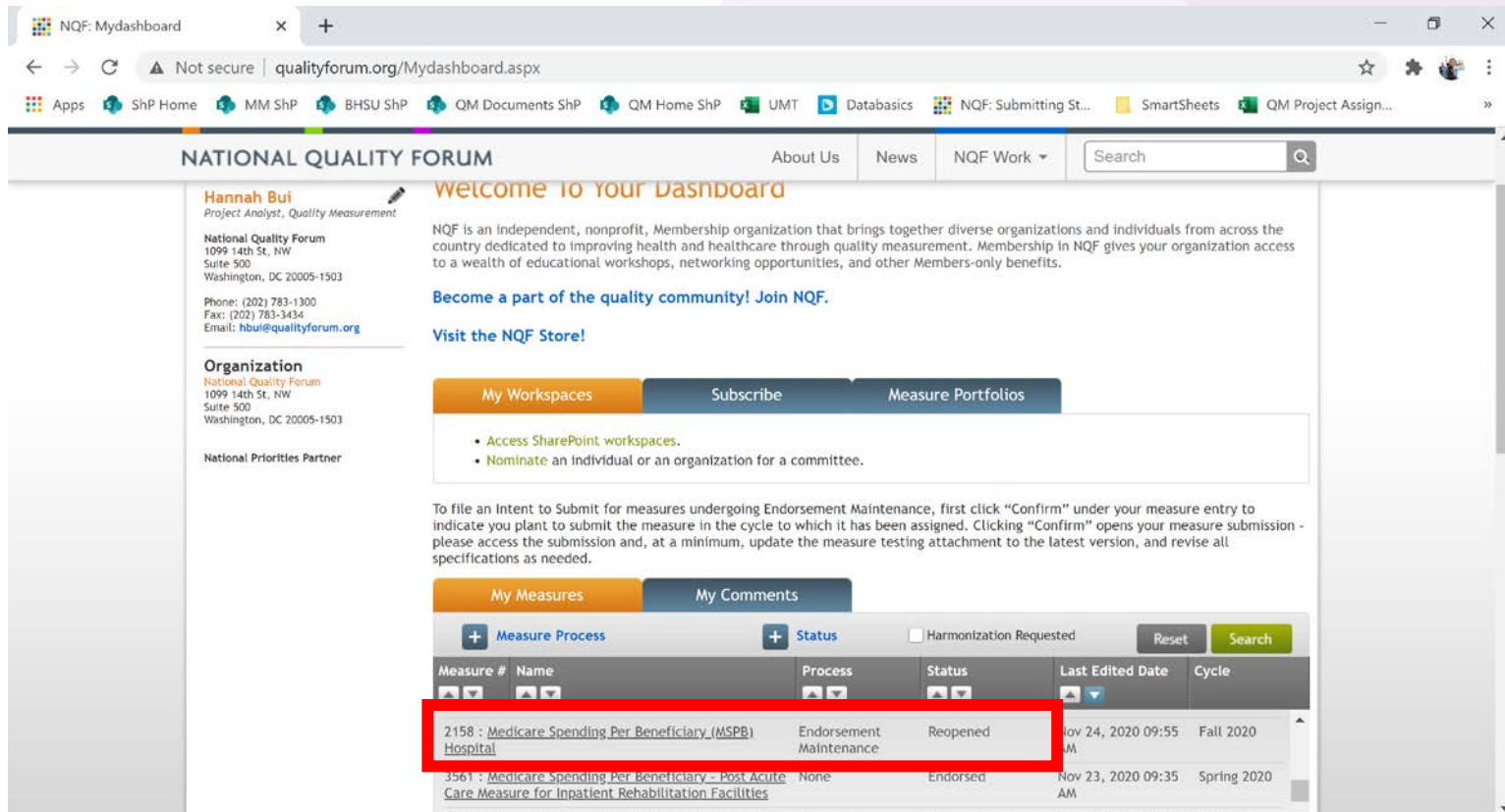
# Full Measure Submission



## Full Measure Submission

- Committee members are notified of methods panel evaluation results for complex measures
  - ▣ Committee members can pull failed measures for discussion (and re-vote for eligible measures)
- All other forms and measure information are due 3 months after intent to submit
- Following the full measure submission deadline, NQF staff will check the measure submission for completeness ensuring:
  - ▣ All required submission form items have a response
  - ▣ Submission meets the minimum requirements to be reviewed (e.g. testing is performed at requisite levels, forms meet 508 compliance, etc.), as highlighted in the [Measure Developer Guidebook](#)
- After completeness checks have been conducted, NQF staff will provide any feedback to developers on changes that need to be made to the submission. Developers will be given an opportunity to make such updates. Feedback will fall under one of two categories:
  - ▣ Missing components resulting in an incomplete submission (measure will not be reviewed)
  - ▣ Other suggested improvements

# Full Measure Submission – How To



**NQF: Mydashboard**

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Apps ShP Home MM SHP BHSU SHP QM Documents SHP QM Home SHP UMT Databasics NQF: Submitting St... SmartSheets QM Project Assign...

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**My Measures** **My Comments**

**+ Measure Process** **+ Status** ☐ Harmonization Requested **Reset** **Search**

Measure #	Name	Process	Status	Last Edited Date	Cycle
2158	Medicare Spending Per Beneficiary (MSPB) Hospital	Endorsement Maintenance	Reopened	Nov 24, 2020 09:55 AM	Fall 2020
3561	Medicare Spending Per Beneficiary - Post Acute Care Measure for Inpatient Rehabilitation Facilities	None	Endorsed	Nov 23, 2020 09:35 AM	Spring 2020

## Measure Submission and 508 Compliance Requirements

- NQF requires all CDP materials to be fully accessible to persons with disabilities. We require the use of NQF-provided Word documents as templates for evidence and testing attachments
- Other requirements are outlined starting on page 54 of the [Measure Developer Guidebook](#)
- NQF staff will provide feedback as part of the completeness check on any items that do not meet 508-compliance requirements

## Full Measure Submission Deadlines\*

Topic Area	Spring Cycle	Fall Cycle
Behavioral Health and Substance Use Neurology Patient Safety Renal	April 2	November 1
All-Cause Admissions and Readmissions Cardiovascular Patient Experience and Function Perinatal and Women's Health Primary Care and Chronic Illness	April 9	November 8
Cancer Cost and Efficiency Geriatric and Palliative Care Prevention and Population Health Surgery	April 16	November 15

*\*if the date takes place on a weekend, the deadline will occur on the next business day*

# Public and Member Commenting – Measures



## Public and Member Commenting

- After the full measure submission deadline, measures will enter a 16-week continuous commenting period, giving NQF members and members of the public the opportunity to provide their feedback and expressions of support (for members) on measures being reviewed
  - ▣ Any comments received in the first 30 days of the continuous commenting period will be included in the preliminary analysis of the measure and will be discussed and adjudicated during the measure evaluation meeting

# Measure Evaluation

## Measure Evaluation

- **Preliminary analysis (PA):** to assist the Committee evaluation of each measure against the criteria, NQF staff and the SMP (if applicable) will prepare a PA of the measure submission and offer preliminary ratings for each criteria
  - ▣ The preliminary analysis is used as a starting point for Committee discussion and evaluation
  - ▣ The Scientific Methods Panel will complete review of the Scientific Acceptability criterion for complex measures
- **Individual evaluation:** each Committee member will conduct an in-depth evaluation on all measures under review
- Project teams will inform measure developers and stewards of the results of the preliminary analyses, as well as any Committee comments, ahead of the Standing Committee measure evaluation meeting



## Measure Evaluation (cont.)

- NQF staff compiles the Committee's comments and redistributes measure worksheet with summary of all members' preliminary evaluation
- **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.
  - ▣ Measure Developers are expected to attend the meeting(s) to briefly introduce their measure(s) and answer any questions from the Standing Committee

## Measure Evaluation (cont.)

- Measures will be reviewed against each of NQF's endorsement criteria:
  - ▣ **Importance to measure and report:** Goal is to measure those aspects with greatest potential of driving improvements; if not important, the other criteria are less meaningful (**must-pass**)
  - ▣ **Reliability and Validity-scientific acceptability of measure properties :** Goal is to make valid conclusions about quality; if not reliable and valid, there is risk of improper interpretation (**must-pass**)
  - ▣ **Feasibility:** Goal is to, ideally, cause as little burden as possible; if not feasible, consider alternative approaches
  - ▣ **Usability and Use:** Goal is to use for decisions related to accountability and improvement; if not useful, probably do not care if feasible (**must-pass** for maintenance measures)
  - ▣ **Comparison to related or competing measures**

More info about [NQF's Measure Evaluation Criteria](#)

# Public and Member Commenting – Draft Report

## Public and Member Commenting

- After the Measure Evaluation Meeting, NQF staff will draft a report detailing the measure evaluation and the committee discussion. The report is posted for a 30-day public and member commenting period.
- Comments are triaged:
  - ▣ Developers respond to comments related to specifications or testing. They may also respond to questions about issues the committee did not discuss
  - ▣ NQF staff respond to comments related to the measure evaluation process or NQF policy
  - ▣ The Committee responds to comments related to why the committee decided something or voted a certain way
- NQF staff compile the comments and responses into a post-comment memo for the post-comment meeting

# Post-Comment Meeting



## Post-Comment Meeting\*

- The Standing Committee will re-convene to consider the comments received and member expressions of support/non-support, and adjust any recommendations as needed
- The Committee discusses any measures where consensus was not reached (CNR) and re-votes
- Committee addresses any committee business not addressed during the Measure Evaluation Meeting, such as related and competing measures
- Developers are encouraged to be present for the discussion and to be available to answer any questions from the Committee

\*if no comments are received during the post-measure evaluation commenting period and there is no committee business to discuss, this meeting will be cancelled

# Measure Endorsement



## Measure Endorsement

- Consensus Standards Approval Committee (CSAC) reviews, approves, and endorses measures following public and member comment
  - ▣ Reviews across the portfolios for consistent application of the criteria
  - ▣ Either upholds committee decision or delays its decision and returns to Standing Committee for reconsideration\* if there are concerns with any of the rationale/criteria below:
    - » Strategic importance of the measure
    - » Cross-cutting issues concerning measure properties
    - » Consensus development process concerns
- Developers are invited to attend the CSAC meeting and be available to answer any questions that the CSAC may have

\*measures undergoing maintenance review will retain endorsement as they are sent back to the Standing Committee for reconsideration

# Appeals

## Appeals

- Any party may request an appeal of a CSAC decision to endorse or not endorse a measure, except in the case where a Standing Committee does not recommend a measure for endorsement and the CSAC concurs
- Endorsement decisions may only be appealed on the following grounds:
  - ▣ Procedural errors reasonably likely to affect the outcome of the original endorsement decision
  - ▣ New information or evidence, unavailable at the time the CSAC made its endorsement decision, that is reasonably likely to affect the outcome of the original endorsement decision
- The Appeals Board consists of Board members, former co-chairs and members of the CSAC, NQF standing committees, and current Board members to include individuals with diverse stakeholder perspectives, experience reaching consensus, and familiarity with NQF's CDP
  - ▣ The Appeals Board may uphold the CSAC endorsement decision, overturn the CSAC endorsement decision, or dismiss the appeal

# Questions?

# Updates

## Fall 2019 Track 2 and Spring 2020 Cycle Updates

- Measures that were endorsed are currently in the 30-day appeals period
- For the Fall 2019 Track 2 Cycle, the CSAC:
  - ▣ Endorsed 12 measures, consistent with the SC's recommendation
  - ▣ Did not endorse 2 measures, consistent with the SC's recommendation
- For the Spring 2020 Cycle, the CSAC:
  - ▣ Endorsed 27 measures, consistent with the SC's recommendation
  - ▣ Did not endorse 12 measures, consistent with the SC's recommendation



## Fall 2020 Cycle Updates

- The SMP has completed their review of 25 complex measures and results have been communicated with both developers and standing committees. A meeting summary will be posted on the [SMP webpage](#).
  - ▣ 21 measures passed both validity and reliability evaluation
  - ▣ Two measures did not pass validity, one measure did not reach a consensus on reliability, and one measure did not reach a consensus on validity
  - ▣ The Committees can pull an eligible measure for discussion. If the measure is being pulled, developers will be notified
- The [full measure submission deadlines](#) for each topic area have passed
- NQF staff are in the process of conducting preliminary analyses and will send them to developers in the coming weeks



## Spring 2021 Cycle Updates

- Intent to Submit is on **Tuesday, January 5, 2021**
- Measures due for maintenance of endorsement have been reopened and should be appearing on your Dashboard
  - ▣ If your measure needs to be deferred, please reach out to [measuremaintenance@qualityforum.org](mailto:measuremaintenance@qualityforum.org) and the project team with a request
- Project teams are available to provide technical assistance. Please reach out to the project inboxes or to the Measure Maintenance team for assistance

# Measure Developer Resources



## Submitting Standards Web Page

- Measure Evaluation Criteria and Guidance Document
  - ▣ Includes evaluation algorithms for evidence, reliability, and validity
    - » Lays out the logic that committees will use for rating Evidence, Reliability, and Validity subcriteria
- Measure Developer Guidebook
  - ▣ Explains the NQF process and expectations for developers
- What Good Looks Like: examples of good submissions
- Blank copies of submission forms
- Resource Libraries:
  - ▣ Recordings of SMP and Developer Webinar meetings
  - ▣ On-demand educational recordings
  - ▣ TIPS for developers

## Tips for Measure Developers

- General reminders:
  - ▣ Refer to the NQF Submitting Standards web page
  - ▣ Attend the bi-monthly measure developer webinars to ensure you are up to date with NQF timelines and process changes
  - ▣ Check your Dashboard regularly and verify the correct measure developer/steward contacts are listed. If this changes, please notify NQF immediately via the appropriate project mailbox. NQF uses the contacts listed in the Dashboard to send updates and reminders about deadlines related to your measure.



## NQF Technical Assistance

- Contact [measuremaintenance@qualityforum.org](mailto:measuremaintenance@qualityforum.org) for general inquiries or questions related to the Consensus Development Process (CDP), measure evaluation criteria, or technical assistance
- Seek technical assistance from NQF staff **early and often**. Measure submission deadlines are firm and extensions will not be granted. If you would like NQF staff to provide input on your draft submission, please contact the appropriate NQF project team (see next slide) and request technical assistance well in advance of the deadline

## NQF Technical Assistance

Project	Inbox
All-Cause Admissions and Readmissions	<a href="mailto:readmissions@qualityforum.org">readmissions@qualityforum.org</a>
Behavioral Health and Substance Use	<a href="mailto:behavioralhealth@qualityforum.org">behavioralhealth@qualityforum.org</a>
Cancer	<a href="mailto:cancerem@qualityforum.org">cancerem@qualityforum.org</a>
Cardiovascular	<a href="mailto:cardiovascular@qualityforum.org">cardiovascular@qualityforum.org</a>
Cost and Efficiency	<a href="mailto:efficiency@qualityforum.org">efficiency@qualityforum.org</a>
Geriatric and Palliative Care	<a href="mailto:palliative@qualityforum.org">palliative@qualityforum.org</a>
Neurology	<a href="mailto:neurology@qualityforum.org">neurology@qualityforum.org</a>
Patient Experience and Function	<a href="mailto:patientexperience@qualityforum.org">patientexperience@qualityforum.org</a>
Patient Safety	<a href="mailto:patientsafety@qualityforum.org">patientsafety@qualityforum.org</a>
Perinatal and Women's Health	<a href="mailto:perinatal@qualityforum.org">perinatal@qualityforum.org</a>
Primary Care and Chronic Illness	<a href="mailto:primarycare@qualityforum.org">primarycare@qualityforum.org</a>
Prevention and Population Health	<a href="mailto:populationhealth@qualityforum.org">populationhealth@qualityforum.org</a>
Renal	<a href="mailto:renal@qualityforum.org">renal@qualityforum.org</a>
Surgery	<a href="mailto:surgery@qualityforum.org">surgery@qualityforum.org</a>
Measure Maintenance	<a href="mailto:measuremaintenance@qualityforum.org">measuremaintenance@qualityforum.org</a>

# Questions?



**THANK YOU.**

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<http://www.qualityforum.org>