

The National Quality Forum is an independent, nonprofit, nonpartisan organization. As part of its mission, NQF works to improve the nation's health and healthcare by bringing together the best available evidence, science, and expertise to review, endorse, and recommend measures for use in public and private accountability programs. These accountability programs include pay-for-performance and public reporting initiatives, among others, and are designed to provide incentives for high-quality care. In its work, NQF benefits from the involvement of its more than 430 member organizations representing the full spectrum of healthcare, and some 850 volunteers that include the nation's quality experts.

WHAT DOES NQF DO?

- Sets standards for measures through endorsement
- Identifies areas where measures are underdeveloped or nonexistent
- Recommends measures for use in payment and public reporting programs
- Advances electronic measurement
- Identifies and accelerates quality improvement priorities
- Provides information and tools to help healthcare decisionmakers

NQF has evolved dramatically in the 16 years since it was established and endorsed its first performance measures. While its focus on improving quality, enhancing safety, and reducing costs through measurement has remained a constant, its role has expanded. NQF also has provided private-sector input into the development of the National Quality Strategy (NQS), defines measurement gaps, and recommends measures for an array of public programs. What has also changed is the centrality of performance measures to efforts by public and private policymakers to transform delivery and payment systems. In essence, performance measures are now widely viewed as a critical component of healthcare delivery system reform.

NQF WORK HIGHLIGHTS

National Quality Strategy Recommendations

The NQS sets a cohesive roadmap for better care, smarter spending, and healthier communities. Since the inception of the NQS in 2011, NQF has continued to further the strategy by endorsing measures linked to the NQS priority areas and by helping diverse stakeholders reach a consensus on key strategies for performance measurement, including:

- Improving population health within communities;
- Addressing gaps in quality measurement in home and community-based services; and
- Exploring the application of quality measurement and improvement programs for rural communities.

Improving Quality and Efficiency in Measurement

Best-in-Class Measures

Measure endorsement and maintenance projects help ensure that the measure portfolio contains the “best-in-class” measures across a variety of clinical and cross-cutting topic areas. In 2015, NQF endorsed 161 measures—55 percent were outcomes measures—and removed 42 measures from its portfolio across 14 HHS-funded projects. NQF endorsed measures to:

- **Drive the healthcare system to be more responsive to patient/family needs** including continued work in Person- and Family-Centered Care and Care Coordination, and Palliative and End-of-Life Care endorsement projects, which included endorsing patient-reported outcome measures and patient experience surveys.

- **Improve care for highly prevalent conditions** including Cardiovascular, Renal, Endocrine, Behavioral Health, Musculoskeletal, Eye Care and Ear/Nose/Throat Conditions, Pulmonary/Critical Care, Neurology, Perinatal, and Cancer endorsement projects.
- **Emphasize cross-cutting areas to foster better care and coordination** including Behavioral Health, Patient Safety, Cost and Resource Use, and All-Cause Admissions and Readmissions endorsement projects.

Recommending Measures for Use in Federal Programs

For five years, NQF has been convening the Measure Applications Partnership (MAP) to provide input to HHS on selecting quality and efficiency measures for more than 20 federal public reporting and performance-based payment programs. In addition, this year a new MAP working group focused on post-acute care and long-term care to provide recommendations to HHS about measures under consideration for use in the implementation of the Improving Medicare Post-Acute Care Transformation (IMPACT) Act of 2014.

MAP also convened task forces to address the unique needs of Medicare and Medicaid dual-eligible beneficiaries, as well as made recommendations on strengthening the core sets of measures used in Medicaid and the Children's Health Insurance Program.

Identifying Measure Gaps in HHS Programs

In 2015, NQF conducted a thorough review of its measure portfolio and identified more than 250 areas where measurement is underdeveloped or nonexistent. Additionally, NQF led MAP to develop a scorecard to quantify the number of MAP-recommended measures in gap areas, organized by NQS priorities. The areas with the largest number of gaps include Neurology, Cancer, Behavioral Health, Care Coordination, and Resource Use. Gaps persist for many reasons, including lack of measure development due to a funder's priorities or agendas, lack of a champion for these gap areas, data limitation, etc.

Coordinating with Measurement Initiatives Implemented by Other Payers

NQF worked to better understand how patient socioeconomic status (SES) can affect performance on measures. NQF commenced a two-year trial period evaluating risk adjustment of measures for SES and other demographic factors—a temporary policy

change that will allow for the SES risk adjustment of performance measures where there is a sound conceptual and empirical basis for doing so. At the end of the trial period, NQF will determine whether to make this policy change permanent.

Moving the Field Forward

NQF's work in evolving the science of performance measurement has expanded over the years, and recent projects focus on addressing challenges to achieving high-value outcome and cost measures, as well as bringing new kinds of providers into accountability programs. This past year, the Centers for Medicare & Medicaid Services (CMS) charged NQF with two new tasks in the areas of variation of measures and attribution, both of which relate to how a measure works in the field and to efforts to link payment performance to a specific measure. In addition, NQF focused closely on how to address patient safety issues arising from health information technology as well as value set harmonization, a key building block for measure development.

With private funding, NQF convened forums to influence the development and implementation of quality measures. While NQF does not develop measures, it launched the Measure Incubator as an innovative effort that facilitates efficient measure development and testing through collaboration and partnership. Filling priority measure gap areas is a leading goal of the Incubator.

NQF also brought together those with key links to the delivery system to devise and implement strategies to improve care in pressing areas such as antibiotic stewardship and advanced illness care.

NQF is also helping to facilitate the transition to eMeasurement. Efforts in this area included encouraging the submission of eMeasures for endorsement, creating a framework to help advance the notion of using measures to improve the safety of health information technology, and facilitating the development of related evaluation criteria. Additionally, efforts included an overall approach to the harmonization and approval of value sets to ensure measures can be consistently implemented across disparate HIT systems.

Moving forward, the National Quality Forum seeks to address other issues, including advancing use of eMeasures, continuing our progress in addressing measurement science challenges, and furthering a portfolio of focused, high-value measures that public and private payers, providers, and patients rely on to improve health and healthcare.