



## Measure Applications Partnership Hospital Workgroup In-Person Meeting Agenda

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December 9-10, 2014

National Quality Forum Conference Center  
1030 15th Street NW, 9th Floor, Washington, DC 20005

**Public Dial-In:** 1 (877) 303-9138

**Day 1 Conference Code:** 32735665

**Webinar Link Day 1:** <http://nqf.commpartners.com/se/Rd/Mt.aspx?320602>

**Day 2 Conference Code:** 32735677

**Webinar Link Day 2:** <http://nqf.commpartners.com/se/Rd/Mt.aspx?767733>

**Link to Discussion Guide:**

[http://public.qualityforum.org/MAP/MAP%20Hospital%20Workgroup/MAP\\_Hospital\\_Discussion\\_Guide.html](http://public.qualityforum.org/MAP/MAP%20Hospital%20Workgroup/MAP_Hospital_Discussion_Guide.html)

### Meeting Objectives

- Review and provide input on measures under consideration for federal programs
- Identify high-priority measure gaps for each program measure set
- Finalize input to the MAP Coordinating Committee on measures for use in federal programs

### Day 1: December 9, 2014

**8:00 am**      **Breakfast**

**8:30 am**      **Welcome, Review Meeting Objectives, and Pre-Rulemaking Approach**

*Frank Opelka, Workgroup Chair*

*Ron Walters, Workgroup Co-Chair*

*Taroon Amin, Senior Director, NQF*

**8:45 am**      **Pre-Rulemaking Input on Hospital Outpatient Quality Reporting Measure Set.**

- **OQR Calendar 1: Support**
  1. Advance Care Plan
  2. External Beam Radiotherapy for Bone Metastases

3. Health literacy measure derived from the health literacy domain of the C-CAT
- OQR Calendar 2: **Conditional support pending NQF endorsement**
    1. Use of Brain Computed Tomography (CT) in the Emergency Department for Atraumatic Headache
  - OQR Calendar 3: **Conditional support pending the development of the single composite measure**
    1. Administrative Communication
    2. Medication Information
    3. Vital Signs
    4. Nursing Information
    5. Procedures and Tests
    6. Physician Information
    7. Patient Information
  - OQR Calendar 4: **Encouraged for continued development**
    1. O/ASPECS Overall Facility Rating
    2. O/ASPECS Recommend
    3. O/ASPECS Facility Environment
    4. O/ASPECS Communication
    5. O/ASPECS Discharge and Recovery

**9:45 am**      **Pre-Rulemaking Input on Ambulatory Surgical Center Quality Reporting Measure Set**

- ASCQR Calendar 1: **Support**
  1. Advance Care Plan
- ASCQR Calendar 2: **Conditional support pending the completion of reliability testing and NQF endorsement**
  1. Unplanned Anterior Vitrectomy
  2. Normothermia Outcome
- ASCQR Calendar 3: **Do Not Support**
  1. Ambulatory surgery patients with appropriate method of hair removal
- ASCQR Calendar 4: **Encouraged for continued development**
  1. O/ASPECS Overall Facility Rating
  2. O/ASPECS Recommend
  3. O/ASPECS Facility Environment
  4. O/ASPECS Communication
  5. O/ASPECS Discharge and Recovery

**10:45 am**      **Opportunity for Public Comment**

**11:00**      **Break**

**11:15 pm**      **Pre-Rulemaking Input on Medicare Shared Savings Program Measure Set**

- **MSSP Calendar 1: Support**
  1. Perioperative Anti-platelet Therapy for Patients undergoing Carotid Endarterectomy
  2. Thorax CT: Use of Contrast Material
  3. In-hospital mortality following elective open repair of AAAs
  4. Payment-Standardized Medicare Spending Per Beneficiary (MSPB)
- **MSSP Calendar 2: Conditional support pending resolution of data concerns**
  1. National Healthcare Safety Network (NHSN) Catheter-associated Urinary Tract Infection (CAUTI) Outcome
  2. National Healthcare Safety Network (NHSN) Central line-associated Bloodstream Infection (CLABSI) Outcome
- **MSSP Calendar 3: Conditional Support pending NQF review and/or endorsement**
  1. Proportion of patients sustaining a bladder injury at the time of any pelvic organ prolapse repair
  2. Proportion of patients sustaining a major viscus injury at the time of any pelvic organ prolapse repair
  3. Proportion of patients sustaining a ureter injury at the time of any pelvic organ prolapse repair
  4. Performing cystoscopy at the time of hysterectomy for pelvic organ prolapse to detect lower urinary tract injury
- **MSSP Calendar 4: Conditional Support pending resubmission to NQF for endorsement review**
  1. MRI Lumbar Spine for Low Back Pain
- **MSSP Calendar 5: Do Not Support**
  1. Performing an intraoperative rectal examination at the time of prolapse repair
- **MSSP Calendar 6: Encouraged for continued development**
  1. Door to puncture time for endovascular stroke treatment
  2. Prevention of Post-Operative Nausea and Vomiting (PONV) – Combination
  3. Post-Anesthetic Transfer of Care: Use of Checklist or Protocol for Direct Transfer of Care from Procedure Room to Intensive Care Unit (ICU)
  4. Post-Anesthetic Transfer of Care Measure: Procedure Room to a Post Anesthesia Care Unit (PACU)
- **MSSP Calendar 7: Do not encourage further consideration**
  1. Preoperative Use of Aspirin for Patients with Drug-Eluting Coronary Stents
  2. Perioperative Temperature Management
  3. Anesthesiology Smoking Abstinence

**12:30 pm**      **Lunch**

**1:30 pm**      **Pre-Rulemaking Input on HAC Reduction Program Measure Set**

- **HAC Calendar 1: Support**

1. National Healthcare Safety Network (NHSN) Catheter-associated Urinary Tract Infection (CAUTI) Outcome
2. National Healthcare Safety Network (NHSN) Central line-associated Bloodstream Infection (CLABSI) Outcome

**2:00 pm**      **Pre-Rulemaking Input on Inpatient Psychiatric Facility Quality Reporting Measure Set**

- IPFQR Calendar 1: **Support**
  1. Transition Record with Specified Elements Received by Discharged Patients (Discharges from an Inpatient Facility to Home/Self Care or Any Other Site of Care)
  2. TOB-3 Tobacco Use Treatment Provided or Offered at Discharge AND TOB-3a Tobacco Use Treatment at Discharge
  3. SUB-2 Alcohol Use Brief Intervention Provided or Offered. SUB-2a Alcohol Use Brief Intervention Received
- IPFQR Calendar 2: **Conditional Support upon harmonization with HBIPS-7**
  1. Timely Transmission of Transition Record (Discharges from an Inpatient Facility to Home/Self Care or Any Other Site of Care)

**2:35 pm**      **Break**

**2:45 pm**      **Pre-Rulemaking Input on Medicare and Medicaid EHR Incentive Program for Hospitals and CAHs (Meaningful Use) Measure Set**

- MU Calendar 1: **Encouraged for continued development**
  1. Hospital-Wide All-Cause Unplanned Readmission Hybrid eMeasure
  2. Perinatal Care Cesarean section (PC O2) Nulliparous women with a term, singleton baby in vertex position delivered by cesarean section
  3. Adverse Drug Events: - Inappropriate Renal Dosing of Anticoagulants
  4. Timely Evaluation of High-Risk Individuals in the Emergency Department

**3:20 pm**      **Opportunity for Public Comment**

**3:35 pm**      **Summary of Day**

**3:50 pm**      **Adjourn**

**Day 2: December 10, 2014**

**8:00 am**      **Breakfast**

**8:30 am**      **Welcome and Review of Day 1**  
*Frank Opelka, Workgroup Chair*

Ron Walters, Workgroup Co-Chair  
Taroon Amin, Senior Director, NQF

8:45 am

### Pre-Rulemaking Input on Hospital Inpatient Quality Reporting Measure Set

- IQR Calendar 1: **Support**
  1. National Healthcare Safety Network (NHSN) Central line-associated Bloodstream Infection (CLABSI) Outcome
  2. National Healthcare Safety Network (NHSN) Catheter-associated Urinary Tract Infection (CAUTI) Outcome
  3. Hospital 30-day, all-cause, risk-standardized readmission rate (RSRR) following pneumonia hospitalization
  4. Hospital 30-day, all-cause, risk-standardized mortality rate (RSMR) following pneumonia hospitalization
  5. Cardiac Rehabilitation Patient Referral From an Inpatient Setting
- IQR Calendar 2: **Conditional support pending NQF review of the testing data in a Medicare population and resolution of parsimony concerns with measures currently in the IQR program**
  1. Proportion of Patients Hospitalized with AMI that have a Potentially Avoidable Complication (during the Index Stay or in the 30-day Post-Discharge Period)
  2. Proportion of Patients Hospitalized with Pneumonia that have a Potentially Avoidable Complication (during the Index Stay or in the 30-day Post-Discharge Period)
  3. Proportion of Patients Hospitalized with Stroke that have a Potentially Avoidable Complication (during the Index Stay or in the 30-day Post-Discharge Period)
- IQR Calendar 3: **Conditional support. This measure should be quickly replaced with a measure assessing results of a survey of a culture of patient safety.**
  1. Participation in a Patient Safety Culture Survey
- IQR Calendar 4: **Conditional Support pending demonstration of applicability at the facility level and resolution of the duplicative nature of this measure with the falls and trauma component of PSI-90.**
  1. Falls with injury
  2. Patient fall rate
- IQR Calendar 5: **Conditional Support pending NQF review and endorsement**
  1. Hospital 30-day, all-cause, unplanned risk-standardized days in acute care following acute myocardial infarction (AMI) hospitalization
  2. Hospital 30-day, all-cause, unplanned risk-standardized days in acute care following heart failure hospitalization
  3. Hospital 30-day, all-cause, unplanned risk-standardized days in acute care following pneumonia hospitalization

4. Hospital-level, risk-standardized payment associated with an episode of care for primary elective total hip and/or total knee arthroplasty (THA/TKA)
- IQR Calendar 6: **Do Not Support**
    1. Skill mix (Registered Nurse [RN], Licensed Vocational/Practical Nurse [LVN/LPN], unlicensed assistive personnel [UAP], and contract)
    2. Nursing Hours per Patient Day
  - IQR Calendar 7: **Encouraged for continued development**
    1. Kidney/Urinary Tract Infection Clinical Episode-Based Payment Measure
    2. Adverse Drug Events: - Inappropriate Renal Dosing of Anticoagulants
    3. Spine Fusion/Refusion Clinical Episode-Based Payment Measure
    4. Hospital-Wide All-Cause Unplanned Readmission Hybrid eMeasure
    5. Cellulitis Clinical Episode-Based Payment Measure
    6. Timely Evaluation of High-Risk Individuals in the Emergency Department
    7. Gastrointestinal Hemorrhage Clinical Episode-Based Payment Measure
    8. Perinatal Care Cesarean section (PC O2) Nulliparous women with a term, singleton baby in vertex position delivered by cesarean section

**10:35 am**      **Public Comment on IQR Consent Calendars**

**10:45 am**      **Break**

**11:00 am**      **Pre-Rulemaking Input on Hospital Value-based Purchasing (VBP) Program Measure Set**

- VBP Calendar 1: **Support**
  1. Hospital 30-Day, All-Cause, Risk-Standardized Mortality Rate (RSMR) following Chronic Obstructive Pulmonary Disease (COPD) Hospitalization
  2. Hospital 30-day, all-cause, risk-standardized mortality rate (RSMR) following pneumonia hospitalization
  3. National Healthcare Safety Network (NHSN) Central line-associated Bloodstream Infection (CLABSI) Outcome
  4. National Healthcare Safety Network (NHSN) Catheter-associated Urinary Tract Infection (CAUTI) Outcome
  5. Death among surgical inpatients with serious, treatable complications (PSI 4)

**12:20 pm**      **Public Comment on VBP Consent Calendars**

**12:30 pm**      **Lunch**

**1:30 pm**      **Pre-Rulemaking Input on PPS-Exempt Cancer Hospital Quality Reporting Program Measure Set**

- PCHQR Calendar 1: **Support**

1. At least 12 regional lymph nodes are removed and pathologically examined for resected colon cancer
  2. Post breast conservation surgery irradiation
  3. Needle biopsy to establish diagnosis of cancer precedes surgical excision/resection
  4. Hospice and Palliative Care – Treatment Preferences
  5. National Healthcare Safety Network (NHSN) Facility-wide Inpatient Hospital-onset Methicillin-resistant Staphylococcus aureus (MRSA) Bacteremia Outcome Measure
  6. National Healthcare Safety Network (NHSN) Facility-wide Inpatient Hospital-onset Clostridium difficile Infection (CDI) Outcome Measure
  7. Influenza Immunization
  8. Influenza vaccination coverage among healthcare personnel (HCP)
- PCHQR Calendar 2: **Encourage continued development**
    1. 30 Day Unplanned Readmissions for Cancer Patients

**2:20 pm**      **Public Comment on PCHQR Consent Calendars**

**2:30 pm**      **Pre-Rulemaking Input on Hospital Readmission Reduction Program (HRRP) Measure Set**

- HRRP Calendar 1: **Support**
  1. Hospital 30-day, all-cause, risk-standardized readmission rate (RSRR) following pneumonia hospitalization

**3:00 pm**      **Opportunity for Public Comment**

**3:15 pm**      **Feedback on Process Improvements**

**3:45 pm**      **Wrap Up**

**4:00 pm**      **Adjourn**