

Endorsement and Maintenance (E&M) Committee Orientation

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The analyses upon which this publication is based were performed under Contract Number 75FCMC23C0010, entitled, "National Consensus Development and Strategic Planning for Health Care Quality Measurement," sponsored by the Department of Health and Human Services, Centers for Medicare & Medicaid Services (CMS).

Meet the E&M Leadership Team



Nicole Brennan | Executive Director



- Provides strategic and operational oversight
- 20+ years' health care, public health, and quality experience

Brenna Rabel | Deputy Director



- Facilitates collaboration across CBE activities to ensure consistency and excellence
- 10+ years' health care, public health, and quality experience

Jeffrey Geppert | Sr. Research Leader



- Leads Measurement Science team for E&M
- 25+ years' measurement science, health care, and quality experience

Matthew Pickering | E&M Task Lead



- Oversees E&M processes and activities
- 10+ years' quality experience

Anna Michie | E&M Deputy Task Lead



- Provides strategic and technical support on E&M processes and activities
- 10+ years' quality experience

Meeting Purpose and Agenda



Purpose

To orient E&M committee members to the E&M process and their roles and responsibilities.

Agenda

- Introduction to Battelle and the Partnership for Quality Measurement (PQM)
- Overview of E&M Committee Structure, Roles, and Responsibilities
- Walkthrough of the E&M Process
- Timeline of Fall 2024 E&M Activities
- Conducting Independent Measure Reviews
- Q&A

Helpful Resources



- **[E&M Guidebook](#)** – provides information about the various steps of the endorsement and maintenance (E&M) process, including each phase of review, possible endorsement decision outcomes, the appeals process, E&M policies and procedures, and the E&M committee structure.
- **[PQM Measure Evaluation Rubric](#)*** – provides measure evaluation criteria for Fall 2024 cycle, as well as additional guidance for evaluating measures based on the criteria.
- **[E&M Webpage](#)** – contains additional information about E&M, including E&M project information, E&M committee meeting materials, and more.
- **[Measure Management System \(MMS\) Hub/Blueprint](#)** – provides a start-to-finish overview of quality measure development, implementation, and maintenance steps and processes.

* An updated PQM Evaluation Rubric effective for the Spring 2025 cycle can be found [here](#).

Introduction to Battelle and the Partnership for Quality Measurement (PQM)

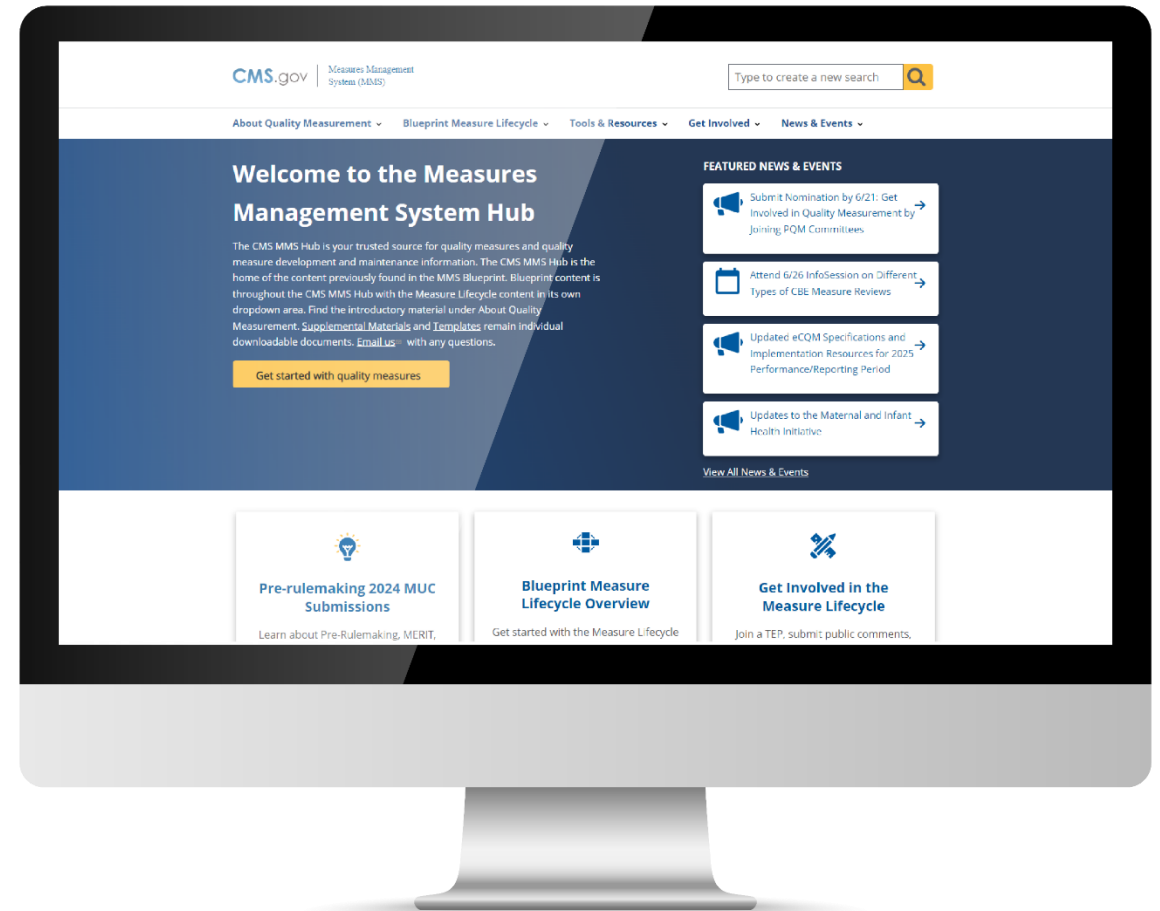
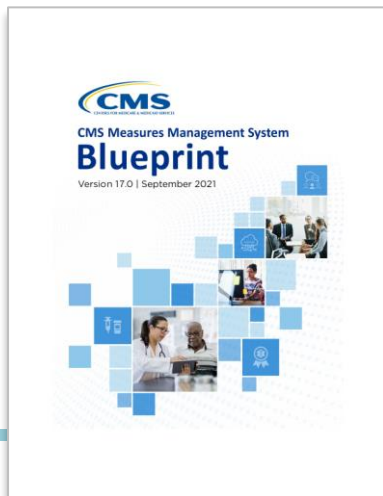


Battelle & Health Care Quality

Battelle is the world's largest independent nonprofit applied science and technology organization.

Over 20 years of contributions and leadership in the science of health care quality measurement including:

- Centers for Medicare & Medicaid Services (CMS) Measures Management System (MMS)
- CMS Blueprint
- Agency for Healthcare Research and Quality (AHRQ) Quality Indicators
- Gordon and Betty Moore Foundation



Battelle as a Consensus-Based Entity



CMS-certified consensus-based entity (CBE)



Awarded CMS National Consensus Development and Strategic Planning for Health Care Quality Measurement contract in 2023

Partnership for Quality Measurement

Powered by Battelle

- **Who we are:** Partnership of members across the health care and quality landscape interested in promoting meaningful quality measurement.
- **Vision:** The quality measure endorsement process should be reliable, transparent, attainable, equitable, and, most of all, meaningful.
- **Approach:** Ensure informed and thoughtful endorsement reviews of qualified measures by conducting a consensus-based process involving a variety of experts—clinicians, patients, measure experts, and health information technology specialists.

CONSENSUS-BASED ENTITY 2023

Annual Report to Congress and the Secretary of Health and Human Services

FINAL REPORT

FEBRUARY 2024



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Overview of E&M Committee Structure, Roles, and Responsibilities

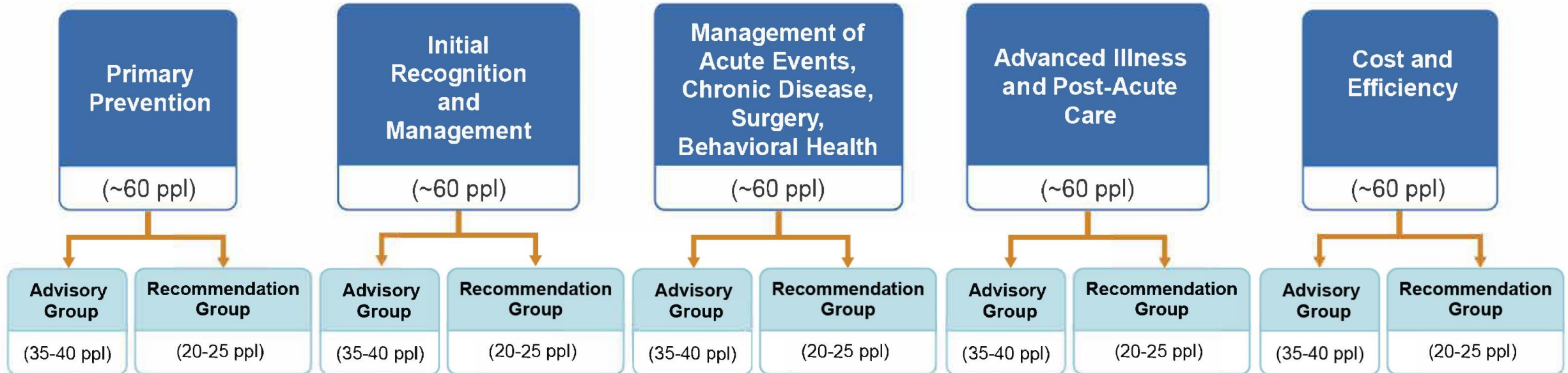


E&M Projects



Project Title	Areas Covered	Example Measures
 Primary Prevention	Education, prevention, and screening related to health status and/or health risk	<ul style="list-style-type: none"> • CBE #0028 Preventive Care and Screening: Tobacco Use: Screening and Cessation Intervention • CBE #2372 Breast Cancer Screening
 Initial Recognition and Management	Recognition and timely diagnosis of conditions, including diagnostic accuracy, and monitoring of early signs and symptoms of disease/condition	<ul style="list-style-type: none"> • CBE #0058 Avoidance of Antibiotic Treatment in Adults With Acute Bronchitis (AAB) • CBE #3671 Inappropriate diagnosis of community-acquired pneumonia (CAP) in hospitalized medical patients
 Management of Acute Events, Chronic Disease, Surgery, Behavioral Health	<ul style="list-style-type: none"> • Treatment of acute events • Management of chronic disease <ul style="list-style-type: none"> - Includes structural or functional changes related to chronic disease • Surgery and related outcomes 	<ul style="list-style-type: none"> • CBE #0711 Depression Remission at Six Months • CBE #0729 Optimal Diabetes Care
 Advanced Illness and Post-Acute Care	<ul style="list-style-type: none"> • Advanced illness and/or end-stage disease management • Palliative and hospice care • Post-acute care • Home care 	<ul style="list-style-type: none"> • CBE #0384e Oncology: Medical and Radiation - Pain Intensity Quantified • CBE #2651 Consumer Assessment of Healthcare Providers and Systems (CAHPS®) Hospice Survey
 Cost and Efficiency	The amount or frequency of health services applied to a population or event (e.g., procedures, encounters)	<ul style="list-style-type: none"> • CBE #2158 Medicare Spending Per Beneficiary (MSPB) - Hospital • CBE #3575 Total Per Capita Cost (TPCC)

E&M Committee Structure and Terms



- Committee members are appointed to a 3-year term, during which they serve on both the Advisory and Recommendation Groups.
- Newly appointed committee members are initially seated on the Advisory Group for the first 2 years of their term and then move into the Recommendation Group to conclude their 3-year term.

Advisory and Recommendation Groups



Advisory (Delphi) Group

- **Reviews measures and provides feedback and questions** regarding the measures under review during Advisory Group meetings 1-2 months prior to the Recommendation Group endorsement meeting.
- **Contributes to the consensus-building process by serving as the larger number of voices on the committee.** Battelle shares the Advisory Group input with the Recommendation Group for review and discussion during the Recommendation Group endorsement meeting.

Recommendation (Nominal) Group

- **Reviews and provides ratings and written comments on measures** prior to the Recommendation Group endorsement meeting.
- **Reviews the Advisory Group's feedback and questions, public comments, and respective developer/steward responses** pertaining to the measures under review prior to the endorsement meeting.
- **Renders an endorsement decision via a vote** during the Recommendation Group endorsement meeting.

E&M Committee Composition



Roster Category	Advisory Group Targets	Recommendation Group Targets
Patients, families, caregivers, patient advocates	8	4
Clinicians, including physicians, nurses, pharmacists, physical therapists, etc.	3	5
Facilities and institutions, including accountable care organizations (ACOs), hospitals/hospital systems, and post-acute/long-term care facilities	3	5
Purchasers and plans (state, federal, and/or private)	5	3
Rural health experts	2	2
Health equity experts	2	2
Researchers in health services, alternative payment models, and population health	6	2
Other interested parties (representatives of electronic health record [EHR] vendors, provider and facility associations, and experts in areas such as quality improvement/implementation science, care coordination, patient safety, behavioral health, and national policymakers)	6	2
Total	35	25

Roles and Responsibilities of Committee Members



During your term on the committee, you will:

- Work with Battelle staff to evaluate and endorse measures.
- Participate in scheduled calls and endorsement meetings.
- Review relevant E&M materials (e.g., measure submission, public comments, staff assessments) in advance of the endorsement meetings.
- Conduct independent measure reviews using the PQM Measure Evaluation Rubric by established deadlines.
- Complete disclosure of interest forms.
- Notify the E&M Project Team (via PQMsupport@battelle.org and add “E&M” to the subject line) if you:
 - Change employers and/or contact information
 - Are unable to attend a scheduled meeting⁺
 - Have a significant, prolonged conflict of interest emerge
 - You wish to resign or be moved to inactive status⁺⁺



⁺If a committee member has poor attendance or participation, as determined by not attending one or more endorsement meetings without advanced notice and/or by not submitting independent reviews of measures for endorsement review, the committee member may be asked to resign or their term may be ended early.

⁺⁺E&M committee members with inactive status continue with their terms, but they are not active committee participants for a given cycle. A committee member may be granted inactive status at any time before the endorsement meeting.

Roles of the Committee Co-Chairs



Patient Representative Co-Chair

Ensures the patient community voice is considered.



Non-Patient Representative Co-Chair

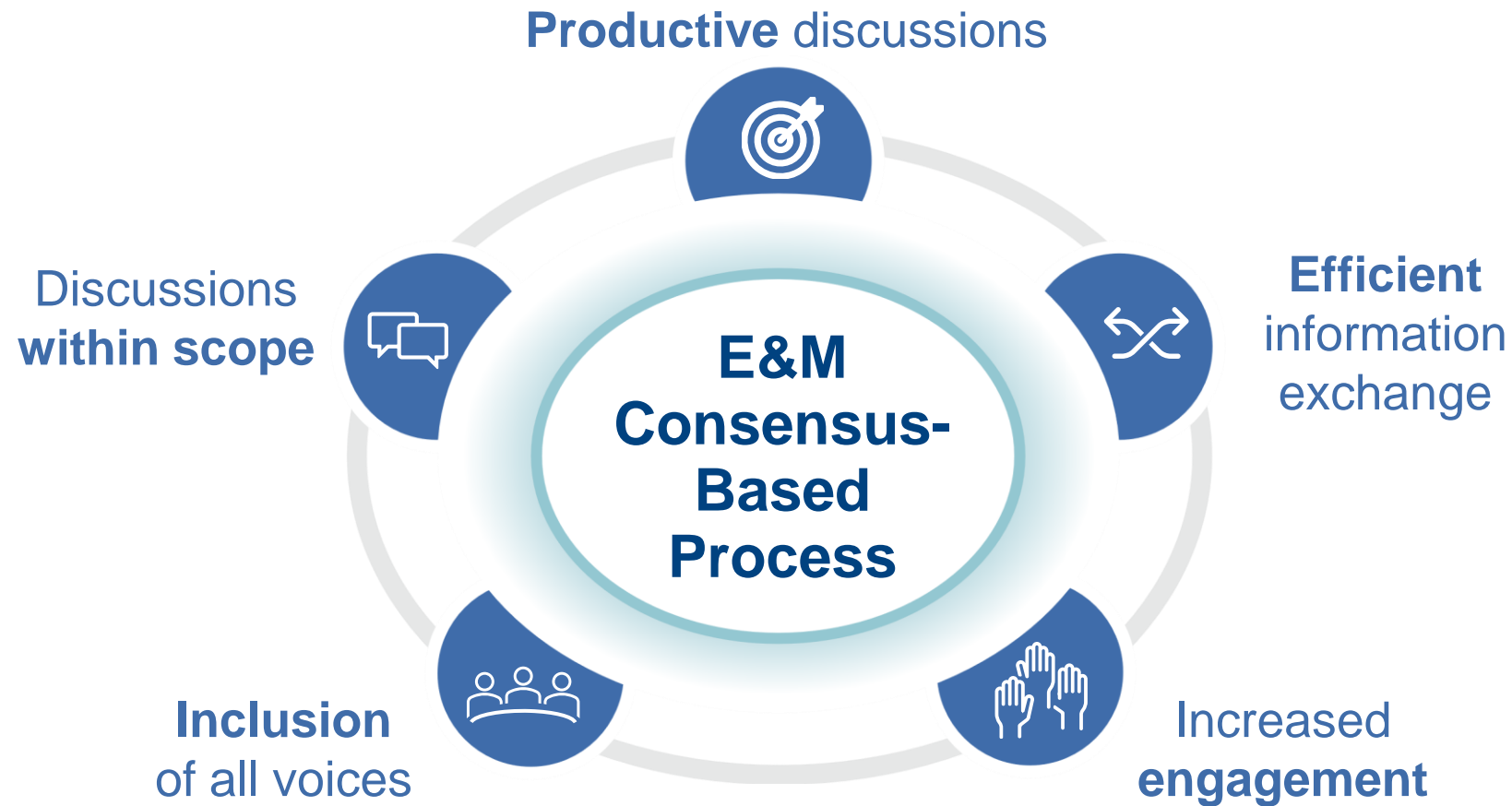
Ensures the Advisory Group voice is considered.

- **Co-facilitate virtual endorsement meetings, along with Battelle staff**
- **Participate on the committee** as a full voting member for the entirety of your term
- **Serve on the appeals committee**
 - Includes attending the half- to full-day virtual appeals committee meeting at the end of every E&M cycle (contingent upon whether an appeal is received)
- Work with Battelle staff to **achieve the goals** of the project
- Assist Battelle staff in **anticipating questions and identifying additional information** that may be useful to the committee

Overview of the E&M Process



What is the E&M Consensus-Based Process?



E&M Cycle Timeline



	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep
	Fall Measure Review Cycle							Spring Measure Review Cycle					
Intent to Submit		●						●					
Full Measure Submission			●						●				
Staff Assessments													
Measure Posted for 30-day Public Comment													
Listening Sessions													
Advisory Group Meetings													
Developer Responses													
Recommendation Group Independent Review													
Endorsement Meetings													
Endorsement Meeting Summaries Drafted and Posted													
Appeals Period													
Appeals Committee Meeting (as needed) and Final Decisions Posted													

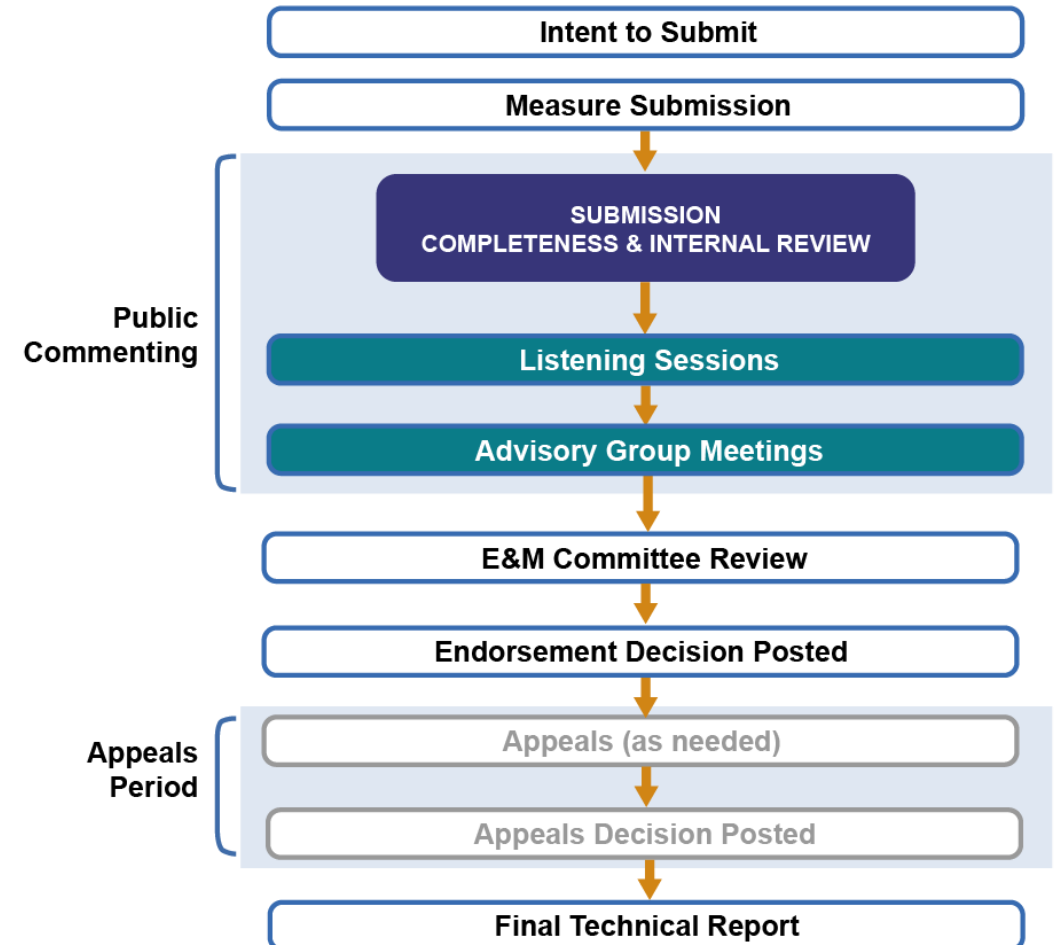
Spring 2024 Process



Six major steps:

1. Intent to Submit
2. Full Measure Submission
3. Staff Internal Review and Measure Public Comment Period
 - Public Comment Listening Sessions
 - Advisory Group Meetings
4. E&M Committee Review
5. Endorsement Decision
 - Recommendation Group Meetings
6. Appeals Period (as warranted)

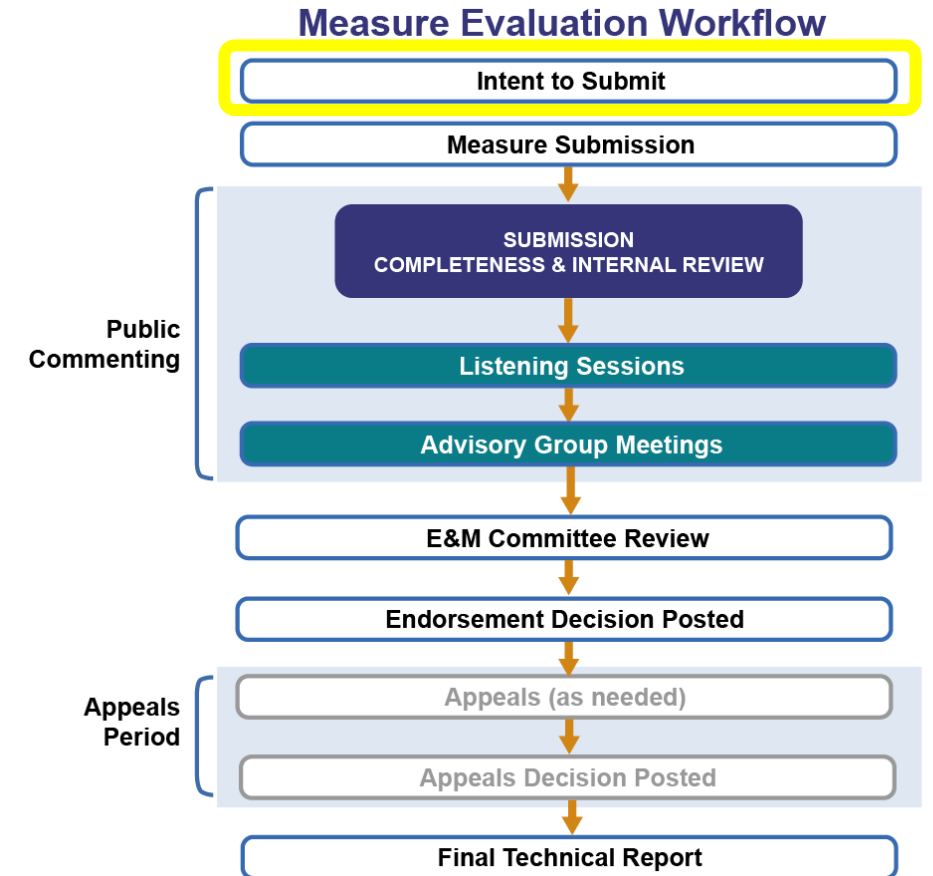
Measure Evaluation Workflow



1. Intent to Submit

- **Step:**
 - Developers/stewards submit key measure information to Battelle
- **Timing:**
 - October 1* and April 1*
- **Where to submit:**
 - PQM website via the Submission Tool and Repository (STAR)
- **Where to find more information & guidance:**
 - PQM website
 - E&M Guidebook

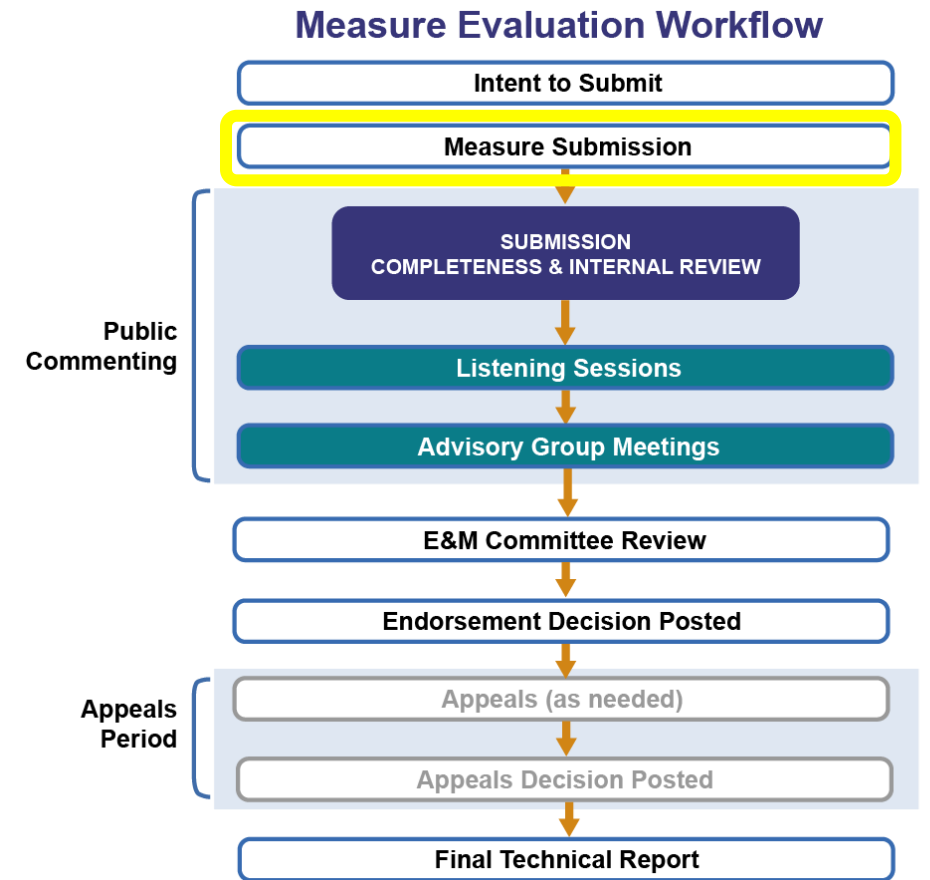
**If a date falls on a weekend or holiday, then the deadline will be the next immediate business day.*



2. Full Measure Submission



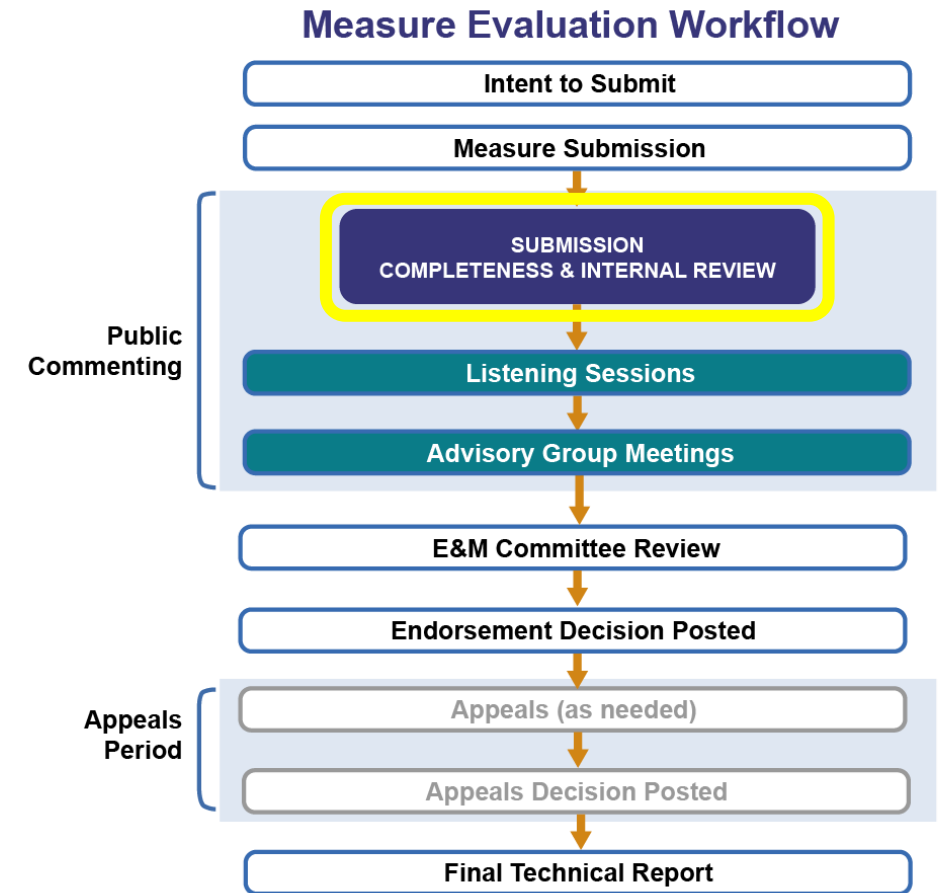
- **Step:**
 - Developers/stewards submit full measure information to Battelle
- **Timing:**
 - November 1* and May 1*
- **Where to submit:**
 - PQM website via STAR
- **Where to find more information & guidance:**
 - PQM website
 - E&M Guidebook



**If a date falls on a weekend or holiday, then the deadline will be the next immediate business day*

3. Staff Internal Review

- **Steps:**
 - Measure submission completeness review
 - Staff assessments using PQM rubric (see E&M Guidebook)
 - Five domains: Importance, Equity, Scientific Acceptability (i.e., Reliability and Validity), Feasibility, and Use and Usability
- **Timing:**
 - 4-5 weeks
- **Outputs:**
 - Staff assessments and ratings of submitted measures
 - Shared with developers and stewards for factual review



3. Measure Public Comment Period



- **Step:**

- Measure information posted to PQM website for public comment
- Convene Public Comment Listening Sessions
- Convene Advisory Group meetings

- **Timing:**

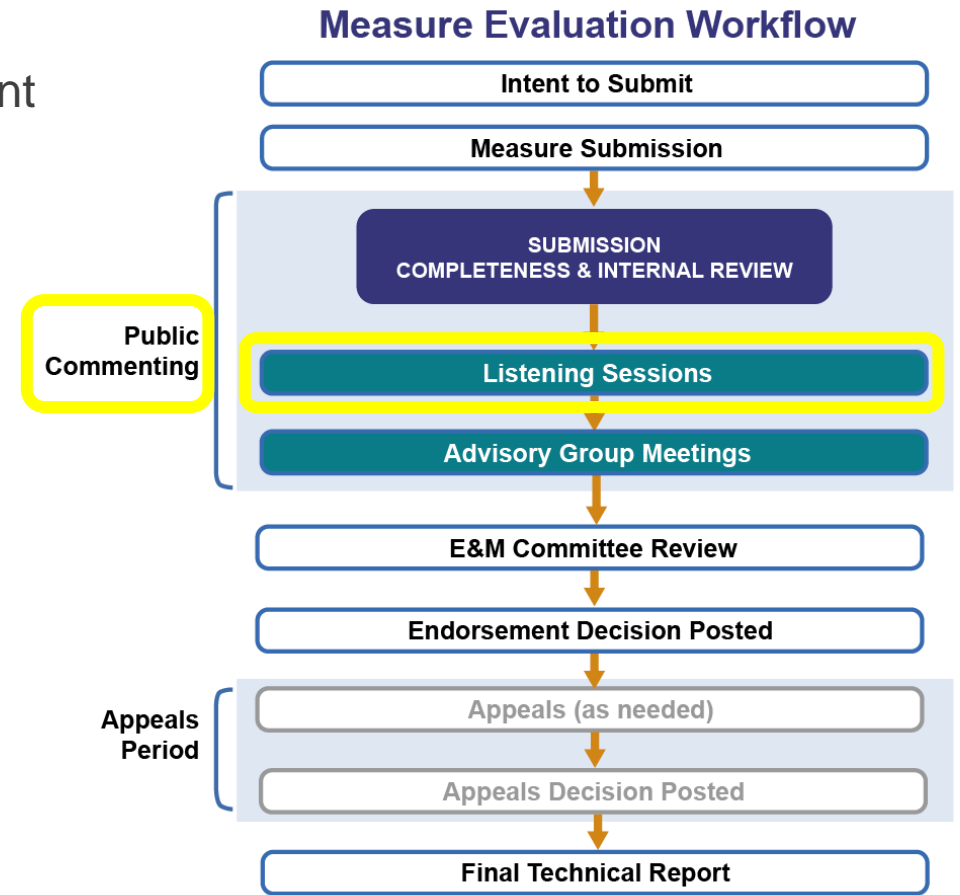
- 30-day comment period

- **Public comment platform:**

- PQM website and virtual webinar

- **Outputs:**

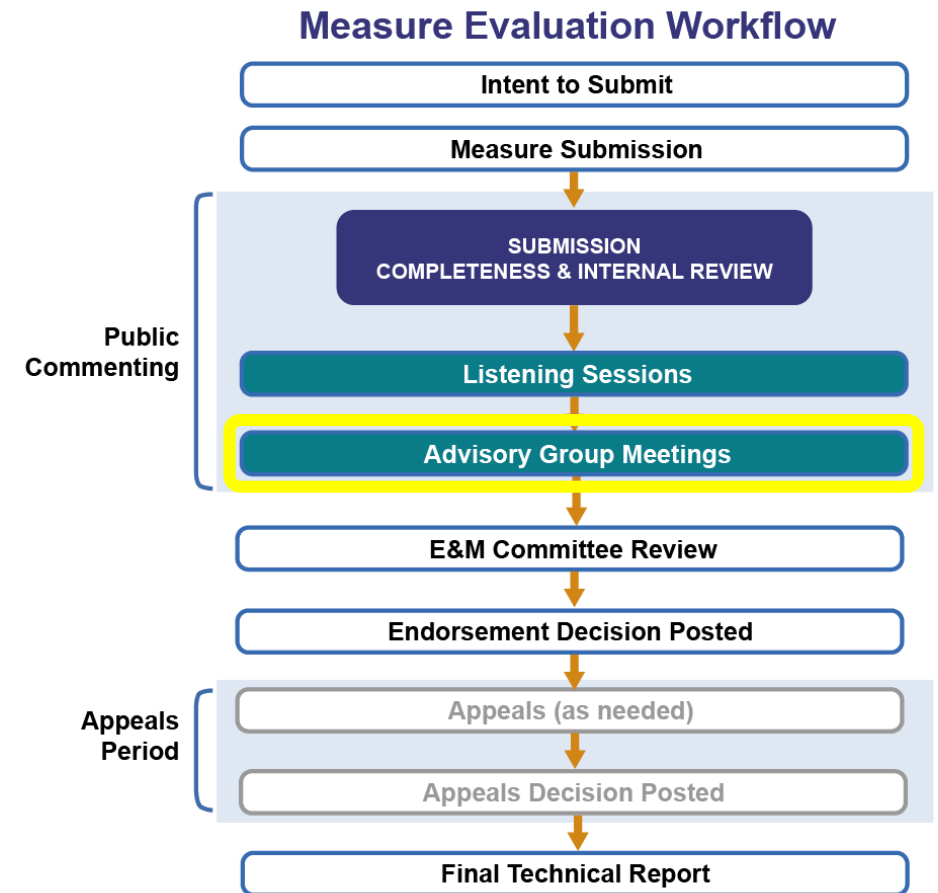
- Full record of public comment available on PQM website
- Summary of public comments by E&M staff



3. Advisory Group Meetings



- **Step:**
 - The Advisory Group from each E&M committee convenes to comment on strengths and limitations of the measure(s) and ask questions of developers/stewards
 - Developers/stewards respond to Advisory Group member questions and feedback
- **Timing:**
 - First weeks in December (Fall) and June (Spring)
- **Outputs:**
 - Summary of Advisory Group member feedback, questions, and developer/steward responses, posted to the PQM website



4. Endorsement Committee Review



- **Steps:**

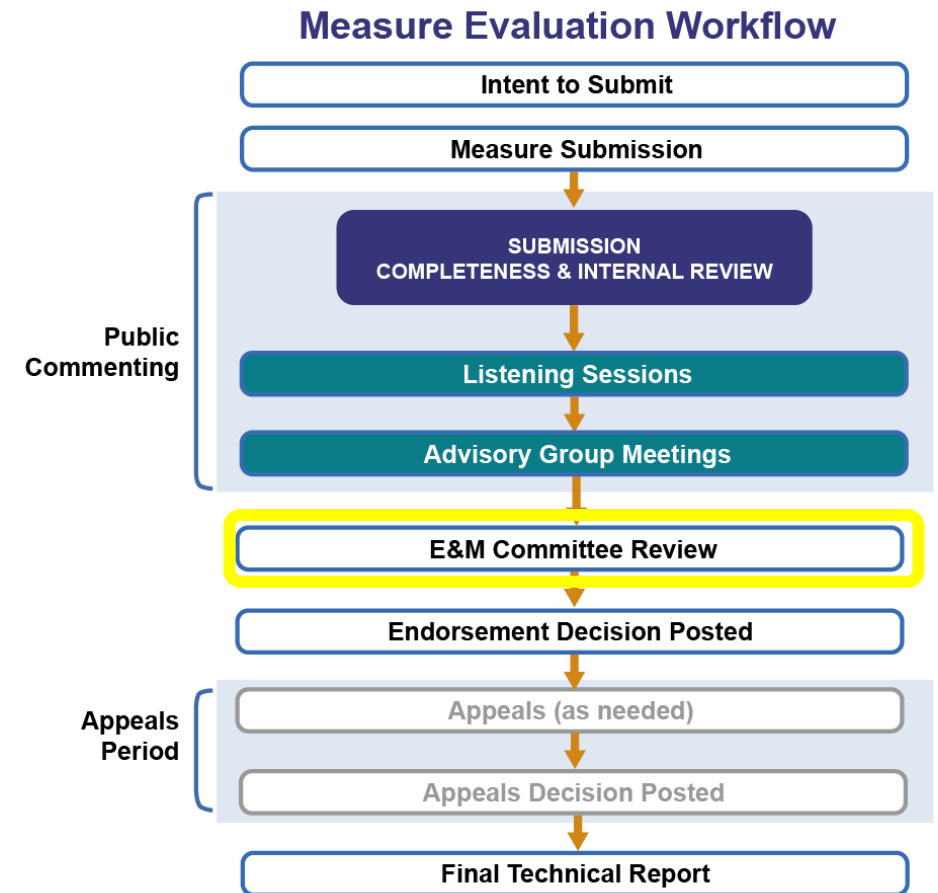
- Independent Recommendation Group member review of measures using PQM Measure Evaluation Rubric
- Recommendation Group members also consider Advisory Group feedback, staff preliminary assessments, public comments, and developer/steward responses
- Staff aggregation of committee review to determine key areas for discussion

- **Timing:**

- ~3 weeks prior to Recommendation Group endorsement meeting

- **Outputs:**

- Aggregated individual reviewer ratings



5. Endorsement Decision: *Recommendation Group Endorsement Meeting*



- **Steps:**

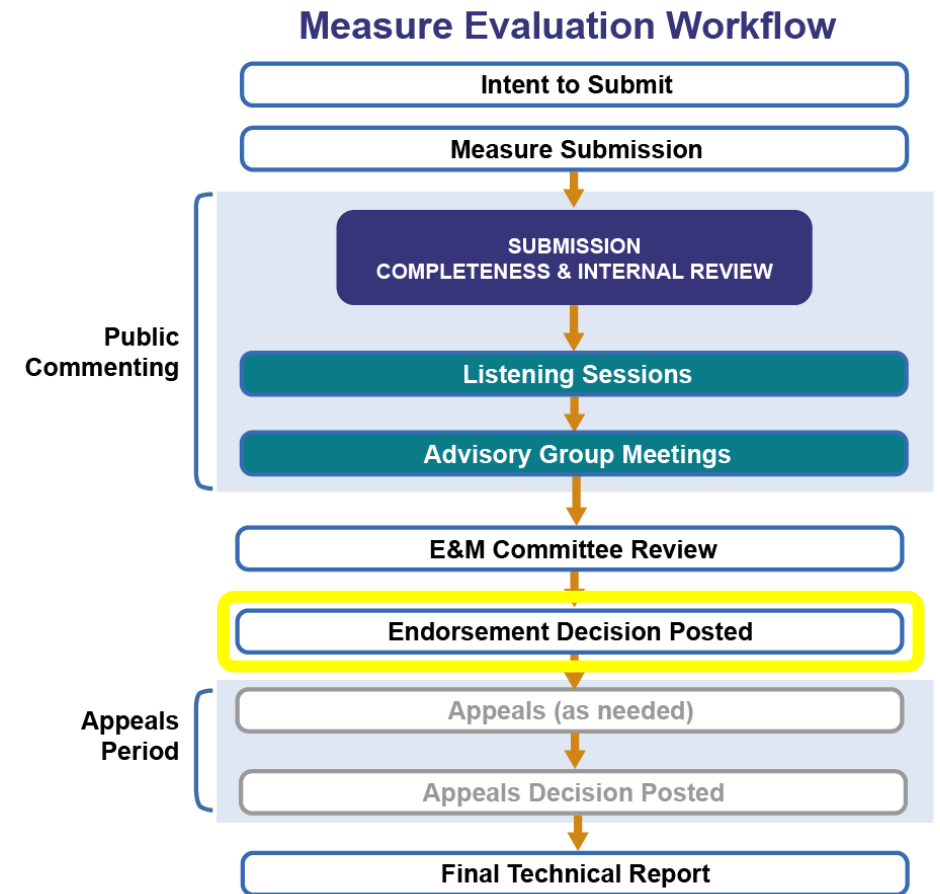
- The Recommendation Group of each E&M committee meets to review measures using aggregated feedback from the Advisory Group, public comment, staff assessments, and independent committee-member reviews.
- Meeting quorum requires that 60% of the Recommendations Group members are present during roll call at the beginning of the meeting.
- Endorsement decision confirmed via a vote after Recommendations Group discussions. Voting quorum is at least 80% of active Recommendation Group members, who have not been recused.

- **Timing:**

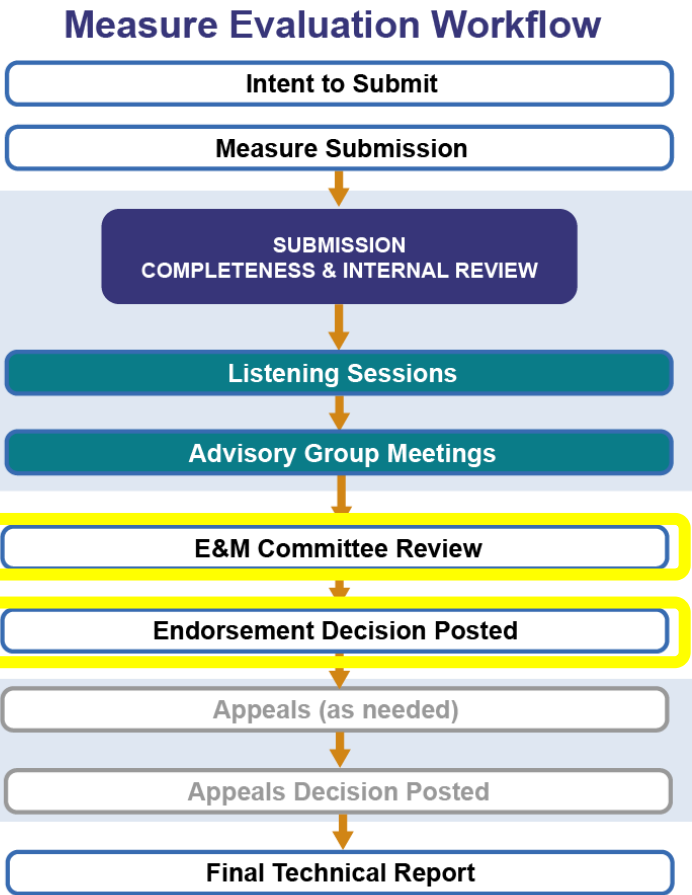
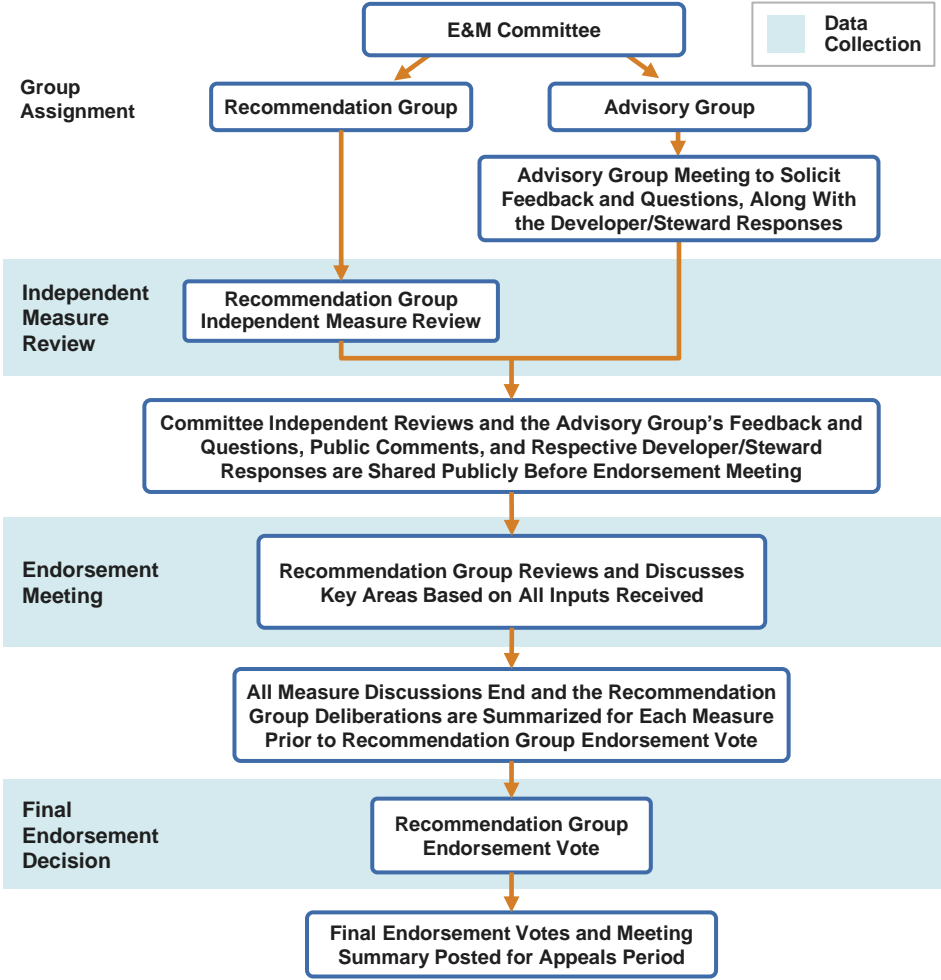
- Early February (Fall) and late July/early August (Spring)

- **Outputs:**

- Endorsement decision posted to PQM website



E&M Independent Review vs. Endorsement Meeting



Endorsement Decision Outcomes



Decision Outcome	Description	Maintenance Expectations
Endorsed	<p>Applies to new and maintenance measures.</p> <p>The E&M committee agrees by 75% or more to endorse the measure.</p>	<p>Measures undergo maintenance of endorsement reviews every 5 years with a status report review at 3 years.</p>
Endorsed with Conditions	<p>Applies to new and maintenance measures.</p> <p>The E&M committee agrees by 75% or greater that the measure can be endorsed, as it meets the criteria, but committee reviewers have conditions they would like addressed when the measure comes back for maintenance. If these recommendations are not addressed, the developer/steward should provide a rationale for consideration by the E&M committee review.</p>	<p>Measures undergo maintenance of endorsement reviews every 5 years with an status update at 3 years, unless the condition requires the measure to be reviewed earlier. The E&M committee evaluates whether conditions have been met, in addition to all other maintenance endorsement minimum requirements.</p>
Not Endorsed	<p>Applies to new measures only.</p> <p>The E&M committee agrees by 75% or greater to not endorse the measure.</p>	<p>None</p>
Endorsement Removed	<p>Applies to maintenance measures only. Either:</p> <ul style="list-style-type: none"> • The E&M committee agrees by 75% or greater to remove endorsement; or • A measure steward retires a measure (i.e., no longer pursues endorsement); or • A measure steward never submits a measure for maintenance, and the steward does not respond after targeted outreach; or • There is no longer a meaningful gap in care, or the measure has “topped out” (i.e., no significant change in measure results for accountable entities over time). 	<p>None</p>

Decision Outcomes:

Endorsed with Conditions Examples



PQM Rubric Domain/Criterion	Condition(s)	Example
Importance	<p>a. Conduct additional evaluation/assessment of meaningfulness to the patient community (e.g., patients, caregivers, advocates).</p> <p>b. <i>[For maintenance]</i> Expand performance gap testing to a larger population.</p>	<p>a. Developer/steward has not, or to a limited degree, provided evidence from literature, focus groups, expert panels, etc., that the target population (e.g., patients) values the measured outcome, process, or structure and finds it meaningful for improving health and health care.</p> <p>b. Maintenance measure has narrow gap, which may be due to limited data/testing within a population that may not be fully representative.</p>
Reliability	<p>a. Consider mitigation strategies to improve measure's reliability, such as increasing the case volume, including more than 1 year of data.</p> <p>For any facilities that are unable to exceed the threshold, give a rationale for why the reliability being below the threshold is acceptable for those specific facilities.</p>	<p>a. The developer/steward has performed measure score reliability testing (accountable entity-level reliability). Less than half of facilities did not meet the expected reliability value of 0.6.</p>
Feasibility	<p>a. Provide implementation guidance or a near-term path (within 1 year) for implementing the measure. This includes providing clear system requirements for implementation of the measure.</p>	<p>a. Measure has experienced or is projected to experience implementation challenges.</p>
Use and Usability	<p>a. Implement a systematic feedback approach to better understand if challenges exist with implementing the measure.</p> <p>b. <i>[For maintenance]</i> Collect additional feedback from providers to ascertain the reasons why the measure is leveling off and describe appropriate mitigation approaches.</p>	<p>a. Measure has limited feedback due to low use and/or non-systematic feedback approach.</p> <p>b. Trend data show a leveling off of measure performance.</p>

Non-Negotiable Considerations



Several non-negotiable areas exist for endorsement, meaning if a measure meets one or more of the following criteria, the measure cannot be endorsed, even with conditions:

- Lack of a clear business case (i.e., evidence suggesting that the measure can accomplish its stated purpose)
- Lack of evidence supporting the business case
- Significantly poor feasibility for the measure to be implemented due to challenges, (e.g., data availability or missingness)
- Inappropriate methodology, calculations, formulas, or testing approach used to demonstrate reliability or validity
- Specifications, testing approach, results, or data descriptions are insufficient
- When a measure with an “Endorsed with Conditions” designation is evaluated for maintenance but it has not met the prior conditions

Consensus Voting for Final Determinations



Endorse (A)	Endorse with Conditions (B)	Do Not Endorse (C)	Consensus Voting Status
75% or More	0%	Less than 25%	A
75% or More		Less than 25%	B
Less than 25%		75% or More	C
26% to 74%		26% to 74%	No consensus

If no consensus is reached, based on the 75% threshold, the measure is not endorsed.

6. Appeals Period

- **Steps:**

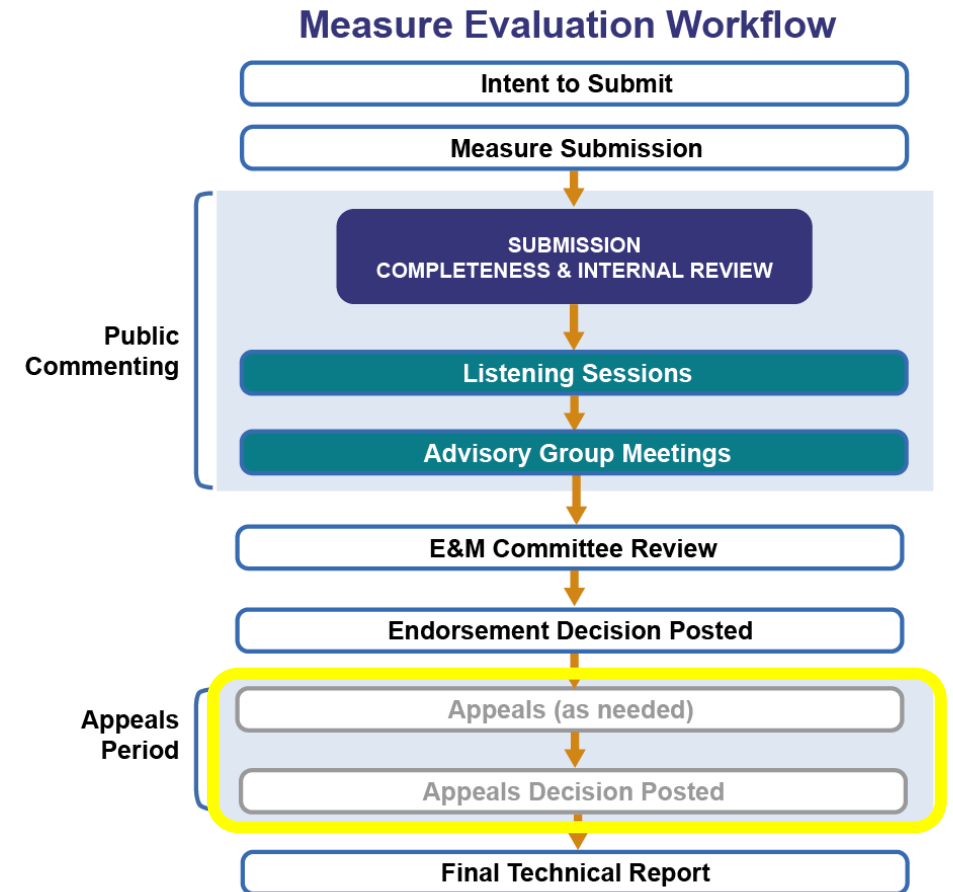
- Any interested party can submit an appeal request for any E&M committee endorsement decision
- Ad hoc Appeals Committee review of an appeal based on eligibility of appeal, which is reviewed by Battelle staff

- **Timing:**

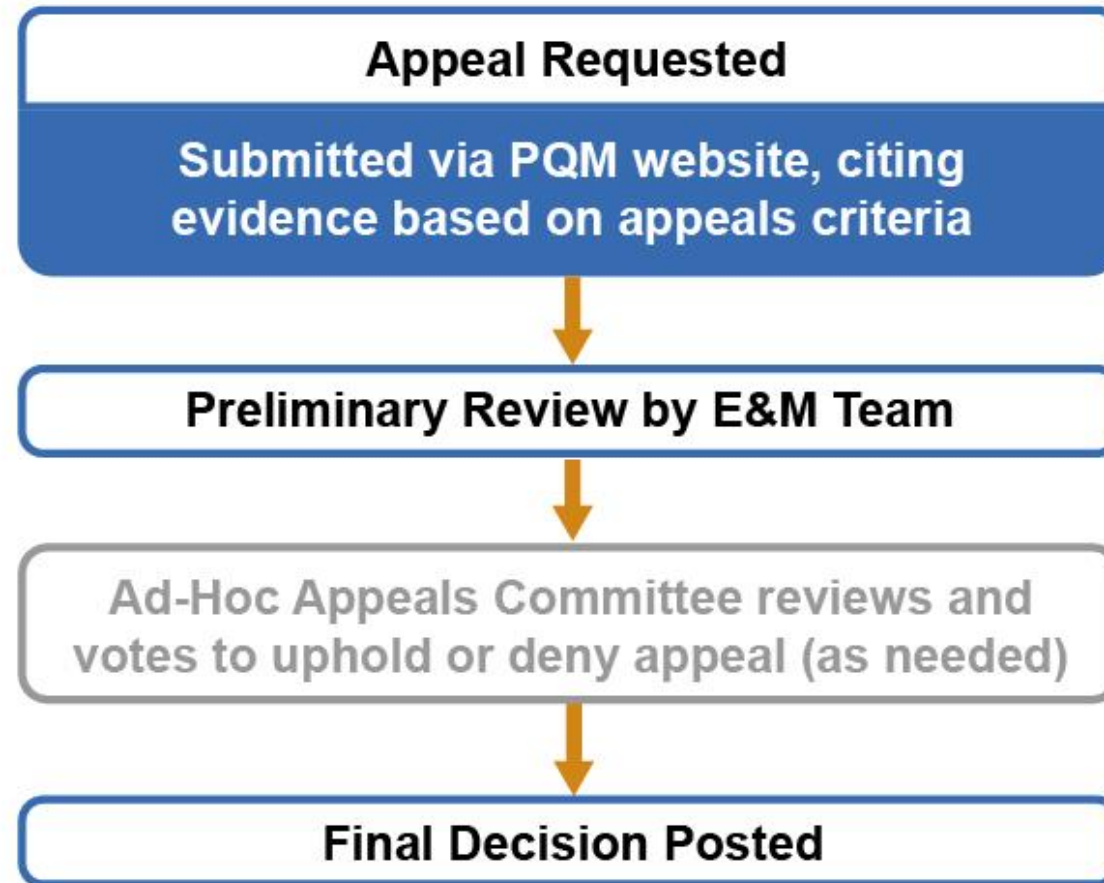
- February/March (Fall) and August/September (Spring)

- **Outputs:**

- Eligibility decision communicated with appellant, developer/steward, and respective E&M committee
- Appeals Committee decision published (if convened) to respective measure page in STAR



Appeals Process

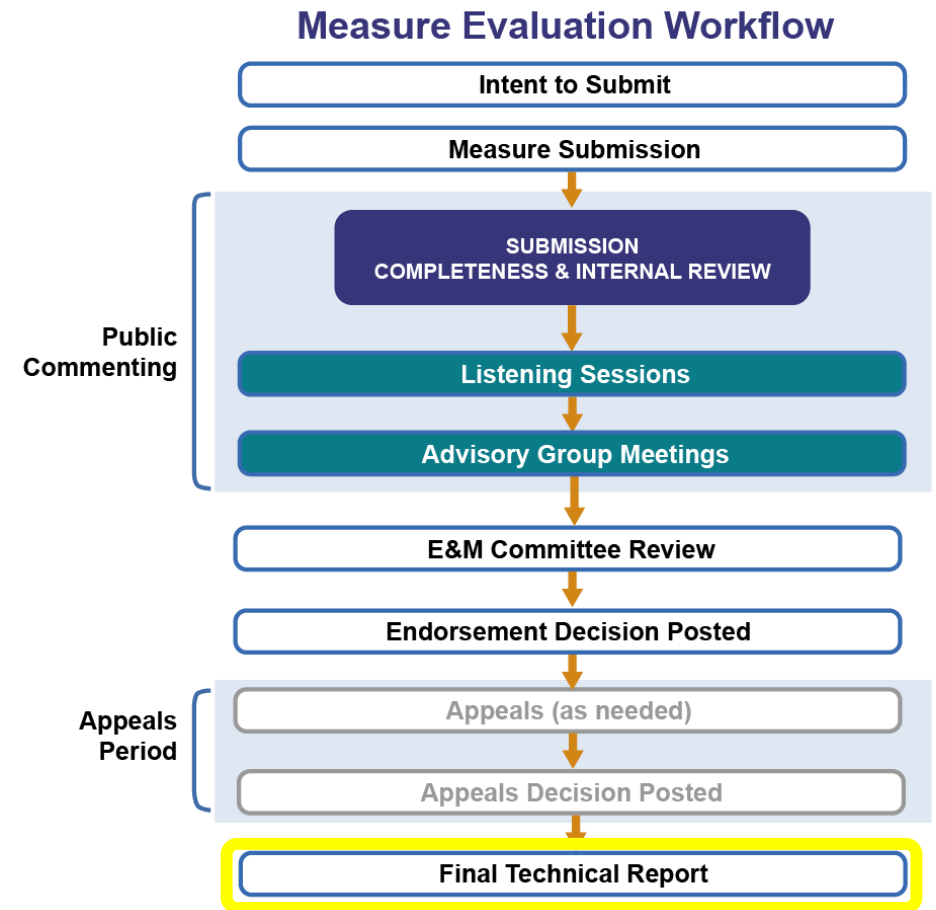


Appeals Committee consists of all chairs from that cycle's E&M committees (n=10).

Final Endorsement Decision Posted



- **Steps:**
 - If no appeal, original endorsement decision remains
 - If appeal is eligible, decision of appeal posted
- **Timing:**
 - No later than March 31 (Fall) and September 30 (Spring)
- **Outputs:**
 - Final endorsement decisions of measures published in STAR
 - Final technical report published in April/May (Fall) and October/November (Spring)



Timeline of Fall 2024 E&M Activities and Deadlines



Fall 2024 Timeline of Activities



Fall 2024 Endorsement Cycle Step	Respective Date(s)
1. Intent to Submit	October 1
2. Full Measure Submission	November 1
3. Staff Internal Review and Public Comment <ul style="list-style-type: none">Public Comment Listening Session	November 15-December 16 <ul style="list-style-type: none">November 20-21
3. Advisory Group Members Review Published Measures <ul style="list-style-type: none">Advisory Group Meetings	November 15-December 1 <ul style="list-style-type: none">December 2-5
4. Recommendation Group Independent Reviews	January 2-22
5. Recommendation Group Endorsement Meetings	February 7-February 13
6. Appeals Period <ul style="list-style-type: none">Appeals Committee Meeting (if needed)Final Endorsement Decision Posted	March 4-24 <ul style="list-style-type: none">March 28 or 31March 31

Conducting Independent Measure Reviews



What You Will Need



- **E&M Guidebook** – provides information about the various steps of the endorsement and maintenance (E&M) process, including each phase of review, possible endorsement decision outcomes, the appeals process, E&M policies and procedures, and the E&M committee structure.
- **PQM Measure Evaluation Rubric*** – provides measure evaluation criteria for Fall 2024 cycle as well as additional guidance for evaluating measures based on the criteria.
- **E&M Webpage** – contains additional information about E&M, including E&M project information, E&M committee meeting materials, and more.
- **Measure Management System (MMS) Hub/Blueprint** – provides a start-to-finish overview of quality measure development, implementation, and maintenance steps and processes.

* An updated PQM Evaluation Rubric effective for the Spring 2025 cycle can be found [here](#).

PQM Measure Evaluation Rubric?



- 1. Importance** - Extent to which the measure is evidence-based AND is important for making significant gains in health care quality or cost where there is variation in or overall less-than-optimal performance.
- 2. Feasibility** - Extent to which the measure specifications (i.e., numerator, denominator, exclusions) require data that are readily available OR could be captured without undue burden AND can be implemented for performance measurement.
- 3. Scientific Acceptability [i.e., Reliability and Validity]** - Extent to which the measure, as specified, produces consistent (reliable) and credible (valid) results about the quality of care when implemented.
- 4. Equity (optional)** - Extent to which the measure can identify differences in care for certain patient populations, which can be used to advance health equity and reduce disparities in care.
- 5. Use and Usability** - Extent to which potential audiences (e.g., consumers, purchasers, providers, and policymakers) are using or could use measure results for both accountability and performance improvement to achieve the goal of high-quality, efficient health care for individuals or populations.

PQM Measure Evaluation Rubric Ratings



The rubric guides reviewers to a rating of “Met,” “Not Met but Addressable,” or “Not Met” based on the criteria listed for each rubric domain.

Met

The measure meets the assertions/aspirations of the respective domain.

Not Met but Addressable

The measure does not meet the assertions/aspirations of the respective domain. However, the measure developer/steward can address any insufficiencies through reasonable changes to the measure (e.g., specifications, testing, evidence), which would improve its evaluation against the respective domain.

Not Met

The measure information does not meet the assertions/aspirations of the respective domain and there are no reasonable changes to the measure (e.g., specifications, testing, evidence) that would allow the measure to meet the domain.

Initial vs. Maintenance Endorsement Expectations



- **Initial Endorsement** – this designation refers to either a newly submitted measure or a measure that lost endorsement and is being resubmitted for PQM endorsement consideration.
- **Maintenance Endorsement** – measures undergo evaluation for maintenance of endorsement every 5 years. The measure steward is responsible for making the necessary updates to the measure, informing E&M committees about any changes that are made, and providing the required measure information for the maintenance of endorsement evaluation.

Importance
Attach a logic model depicting the relationship between structures and processes and the desired outcome.
Summarize evidence of measure importance from the literature linking the structure/process/intermediate outcome to the outcome
[For initial endorsement] If implemented, what is the measure's anticipated impact on important outcomes?
[For maintenance] Provide evidence of performance gap or measurement gap by providing performance scores on the measure as specified (current and over time) at the specified level of analysis
Explain why existing measures/quality improvement programs are insufficient for addressing this health care need?
Provide evidence the target population (e.g., patients) values the measured outcome, process, or structure, and finds it meaningful. Describe how and from whom you obtained input.

Feasibility
[For Initial Endorsement] Describe the feasibility assessment showing you considered the people, tools, tasks, and technologies necessary to implement this measure. If an eCQM, please attach your completed eCQM Feasibility Scorecard .
Describe how the feasibility assessment informed the final measure, indicating any decisions made to adjust the measure in response to data availability.
Describe any fees, licensing, or other requirements to use any aspect of the measure as specified (e.g., value/code set, risk model, programming code, algorithm).

How to Conduct Committee Independent Measure Reviews?



Submission Tool and Repository (STAR)

STAR is a measure submission tool and database of quality performance measures

Measure Database

- The STAR is updated regularly as new and maintenance measures are submitted to Battelle for endorsement review by PQM.
- Battelle will provide additional enhancements to the STAR database as measure information is submitted to better support the accessibility of timely and accurate measure information for all interested parties.
- Any interested party can access the searchable database by going to the PQM website: [Submission Tool and Repository Measure Database | Partnership for Quality Measurement \(p4qm.org\)](https://www.p4qm.org)

Measure Submission via STAR

- The STAR submission tool allows developers/stewards to submit measures to Battelle for PQM review. The STAR also allows Recommendation Group members to review measures submitted to Battelle for endorsement review. To do so, developers/stewards must:
 1. Create an account and login
 2. Navigate to “My Account”
 3. Click on “Review” next to each measure awaiting your review.
 4. Review the measure against the PQM rubric and submit your independent review.

PQM Measure Evaluation Rubric

Screen Share



Next Steps for Fall 2024 E&M Cycle



Create Your STAR Account

- Recommendation Group members should navigate to the E&M webpage to create their STAR account: <https://p4qm.org/user/register>



Upcoming Meetings

- **Public Comment Listening Sessions:** November 20-21
- **Advisory Group Meetings:** December 2-5
- **Recommendation Group Meetings:** February 7-February 13



Additional Educational Webinars

- **Measure Developer Workshop:** October 30, 10 am-5:30 pm ET. Register here: [Meeting Registration - Zoom \(zoomgov.com\)](#)
- **Educational Webinar – Patient and Caregiver Engagement:** January 2025

View the monthly PQM Newsletter and [PQM Event Calendar](#) for continuous updates on meetings and registration links.

Thank You!

Have questions? Contact us at
PQMsupport@battelle.org



Questions & Answers





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