



Partnership for
Quality Measurement

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Endorsement and Maintenance (E&M) Committee Orientation

Nicole Brennan, Executive Director
Brenna Rabel, Deputy Director
Matthew Pickering, E&M Task Lead

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Meet the Leadership Team



Nicole Brennan | Executive Director



- Provides strategic and operational oversight.
- 20+ years healthcare, public health and quality experience

Brenna Rabel | Deputy Director



- Facilitates collaboration across E&M, PRMR & MSR, and CQMC to ensure consistency & excellence in CBE activities
- 10+ years healthcare, public health & quality experience

Matthew Pickering | E&M Technical Lead



- Oversees endorsement & management processes
- 10+ years quality experience

Jeff Geppert | Senior Research Leader



- Leads Measurement Science team for E&M
- 25+ years measurement science, healthcare & 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 2023 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 phased review, possible endorsement decision outcomes, the appeals process, E&M policies and procedures, and the E&M committee structure.
- [**PQM Measure Evaluation Rubric**](#) and Worksheet – provides measure evaluation criteria as well as additional guidance for evaluating measures based on the criteria.
- [**PQM Website**](#) – contains additional information about PQM, 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.

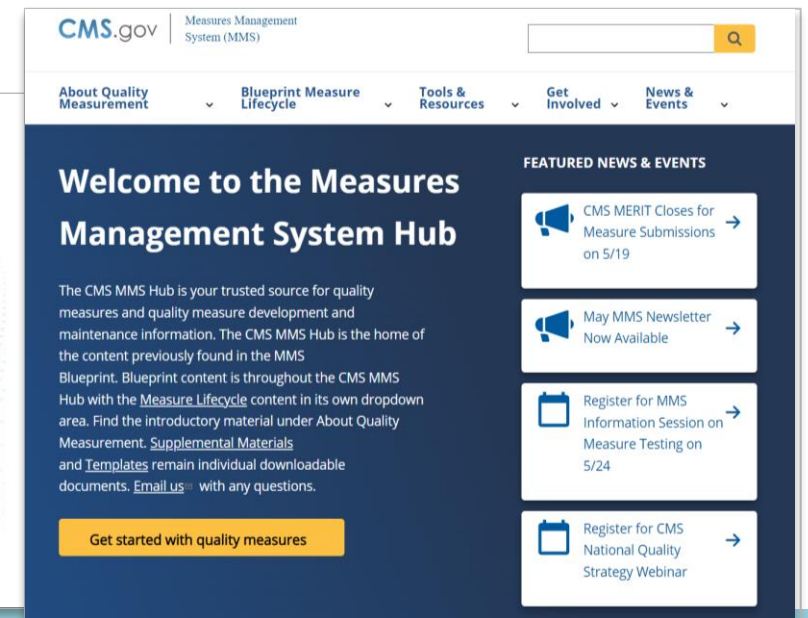
Introduction to Battelle and the Partnership for Quality Measurement (PQM)



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
 - Centers for Medicare & Medicaid Services (CMS) Measures Management System
 - CMS Blueprint
 - AHRQ contracts
 - 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

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- **Who we are:** Partnership of members across the health care & 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 that there are 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.

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

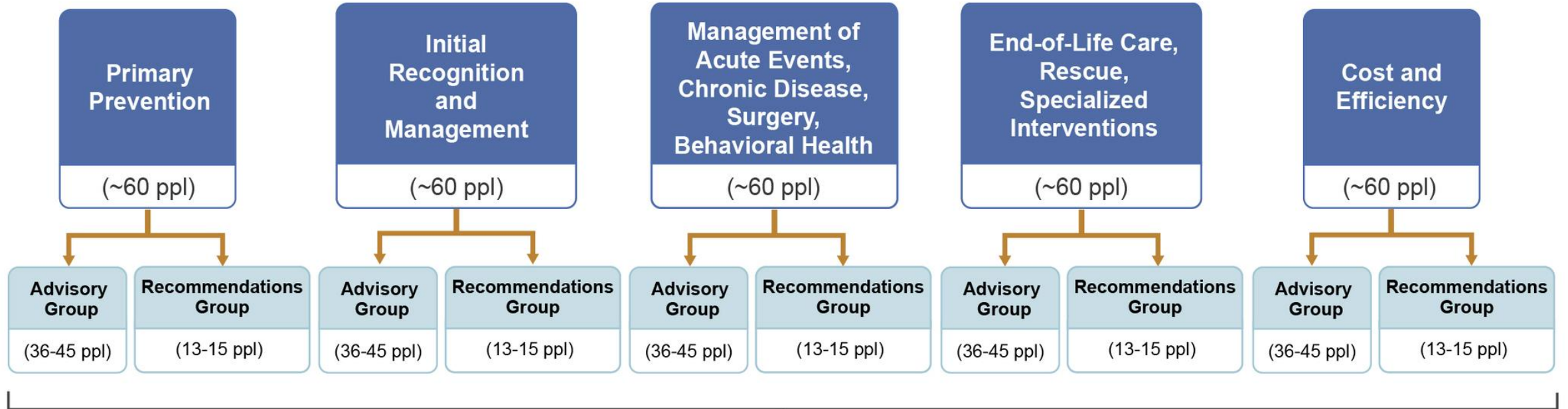


E&M Projects



Project Title	Areas Covered	Example Measures*
 Primary Prevention	<ul style="list-style-type: none"> 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 CBE #3620 Adult Immunization Status
 Initial Recognition and Management	<ul style="list-style-type: none"> Recognition and timely diagnosis of conditions Diagnostic accuracy 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 CBE #3663e Excessive Radiation Dose or Inadequate Image Quality for Diagnostic Computed Tomography (CT) in Adults (Clinician Level)
 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 CBE #3025 Ambulatory Breast Procedure Surgical Site Infection (SSI) Outcome Measure
 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 CBE #2978 Hemodialysis Vascular Access: Long-term Catheter Rate
 Cost and Efficiency	<ul style="list-style-type: none"> Total health care spending for a health care service or group of services associated with a specified patient population, time period, and/or unit of clinical accountability 	<ul style="list-style-type: none"> CBE #2158 Medicare Spending Per Beneficiary (MSPB) - Hospital CBE #3575 Total Per Capita Cost (TPCC) CBE #3561 Medicare Spending Per Beneficiary: Post Acute Care Measure for Inpatient Rehabilitation Facilities

E&M Committee Structure



- Advisory and Recommendations Groups provide individual preliminary reviews in advance of Endorsement Meeting
- Recommendations Group meets to review and discuss areas of non-consensus based on independent preliminary reviews and public comment
 - Both Groups vote on final endorsement decision

Advisory and Recommendations Groups



Advisory (Delphi) Group

- Members in this group **review and provide ratings and written recommendations on measures** prior to the Recommendations Group endorsement meeting.
- These inputs ensure that a larger number of voices contribute to the consensus-building process.
- The Advisory Group members **attend the Recommendations Group endorsement meeting** to listen to the Recommendations Group discussions and to **vote on endorsement decisions for measures** at the end of the meeting.

Recommendations (Nominal) Group

- Members in this group also **review and provide ratings and written recommendations on measures** prior to the Recommendations Group endorsement meeting.
- **Areas of disagreement** (i.e., lack of consensus) identified from the initial measure ratings from both groups will **inform the Recommendations Group discussions during the endorsement meeting**.
- Recommendations Group members will also **vote on endorsement decisions of measures** at the end of the meeting.

E&M Committee Composition



Roster Category	Advisory Group Targets	Recommendation Group Targets
Patients, families, caregivers, patient advocates	9	3
Clinicians, including physicians, nurses, pharmacists, physical therapists, etc.	6	2
Facilities & Institutions, including ACOs, hospitals/hospital systems and post-acute/long-term care facilities	6	2
Purchasers and plans (state, federal and/or private)	6	2
Rural health experts	3	1
Health equity experts	3	1
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 policy makers)	6	2
Total	45	15

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 PQM@Battelle.org) if you:
 - Change employers and/or contact information
 - Have a significant, prolonged conflict of interest emerge
 - Are unable to attend a scheduled meeting⁺
 - You wish to resign or be moved to inactive status⁺⁺



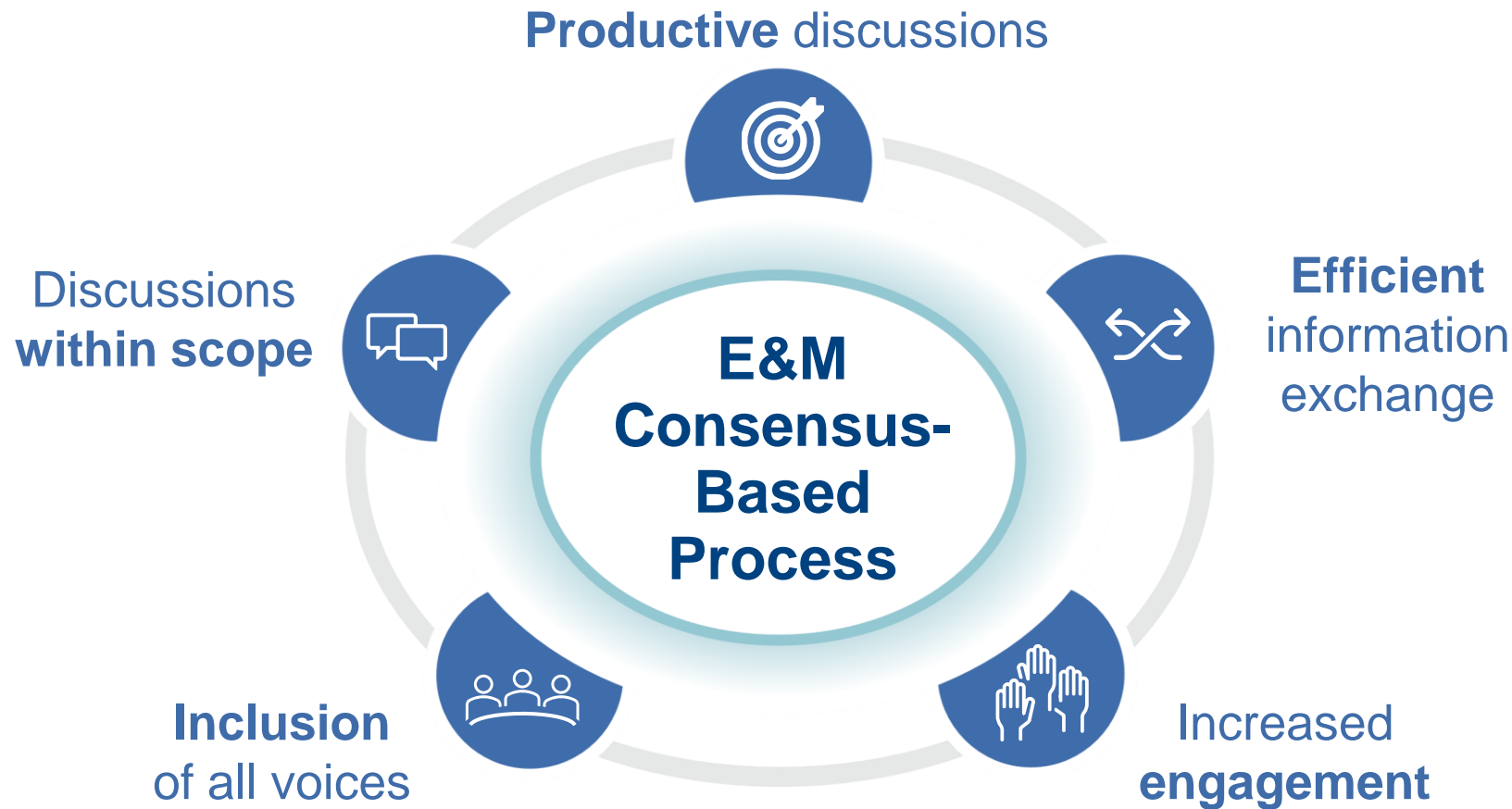
⁺If a committee member has poor attendance or participation, as determined by not attending one or more endorsement meetings without advanced notice and/or by not submitting independent reviews of measures for endorsement review, the committee member may be asked to resign, or their term may be ended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

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					
Rolling Intent to Submit Deadlines*		●						●					
Measure Submitted via Portal			●						●				
Submission Completeness and Scientific Acceptability Review			●						●				
Internal Review			■						■				
Public Comment				■						■			
Endorsement Committee Review					■						■		
Endorsement Decision Posted						●	●					●	●
Appeals (as needed)							■					■	

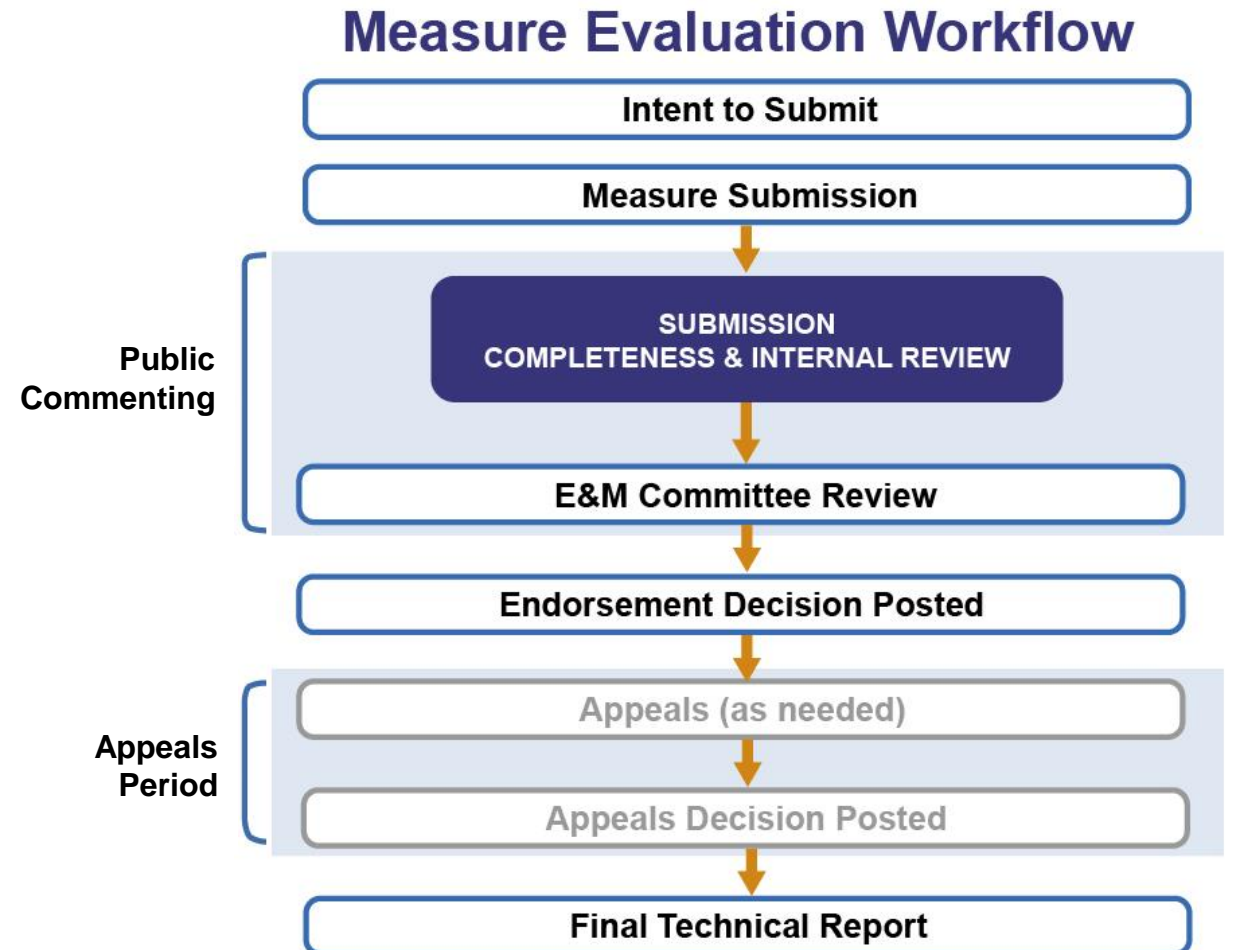
*Accepted year-round, 1 month ahead of measure submission

Fall 2023 Process



Six major steps:

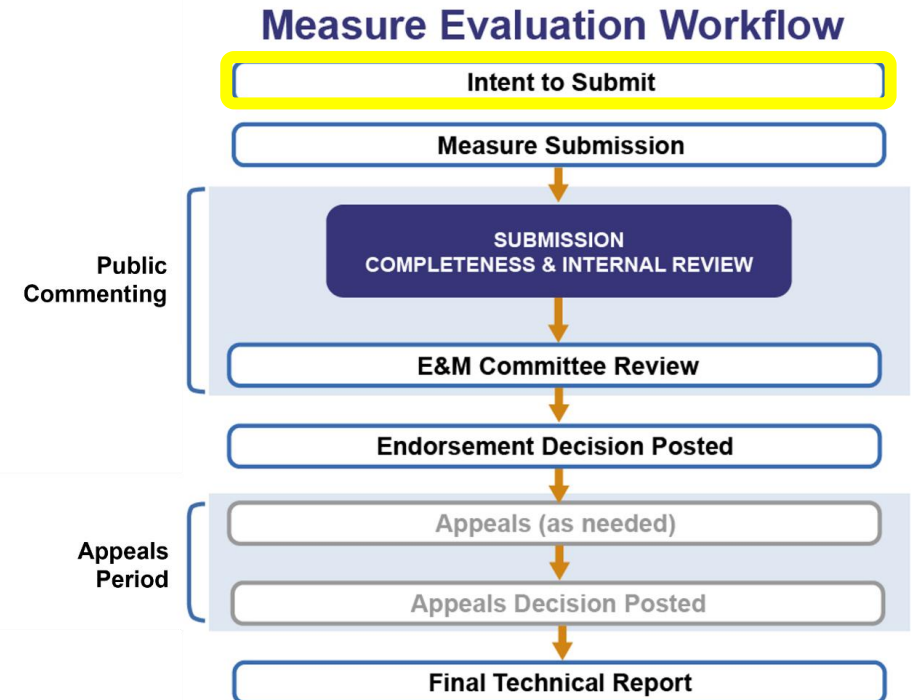
1. Intent to Submit
2. Full Measure Submission
3. Staff Internal Review and Measure Public Comment Period
4. E&M Committee Independent Review
5. Endorsement Decision
6. Appeals Period (as warranted)



1. Intent to Submit

- **Step:**
 - Submit key measure information to Battelle
- **Timing:**
 - October 1st* and April 1st*
- **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*

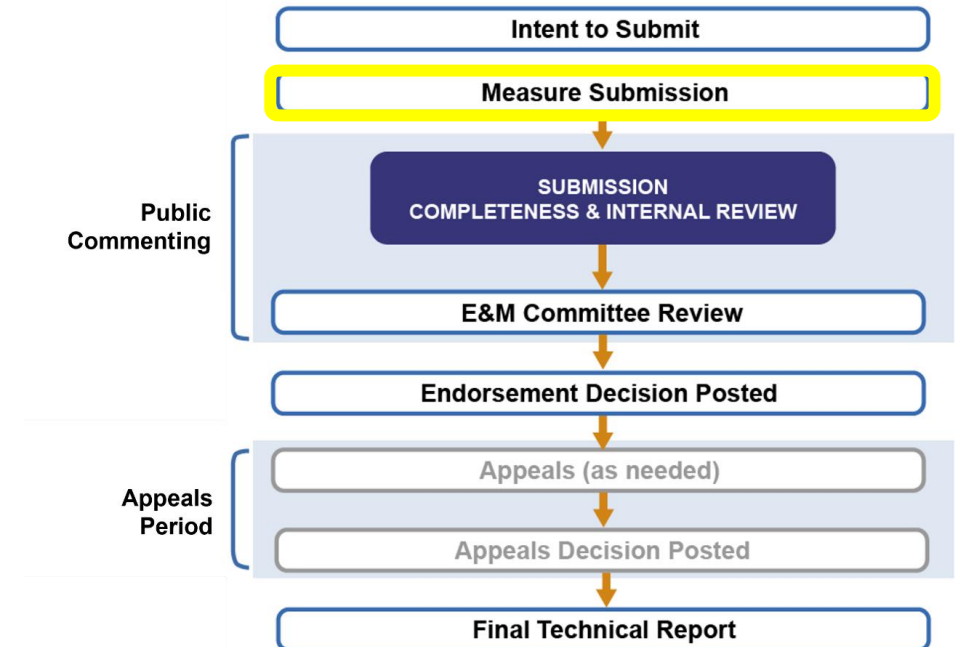


2. Full Measure Submission

- **Step:**
 - Submit full measure information to Battelle
- **Timing:**
 - November 1st * & May 1st *
- **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

Measure Evaluation Workflow



3. Staff Internal Review



- **Steps:**

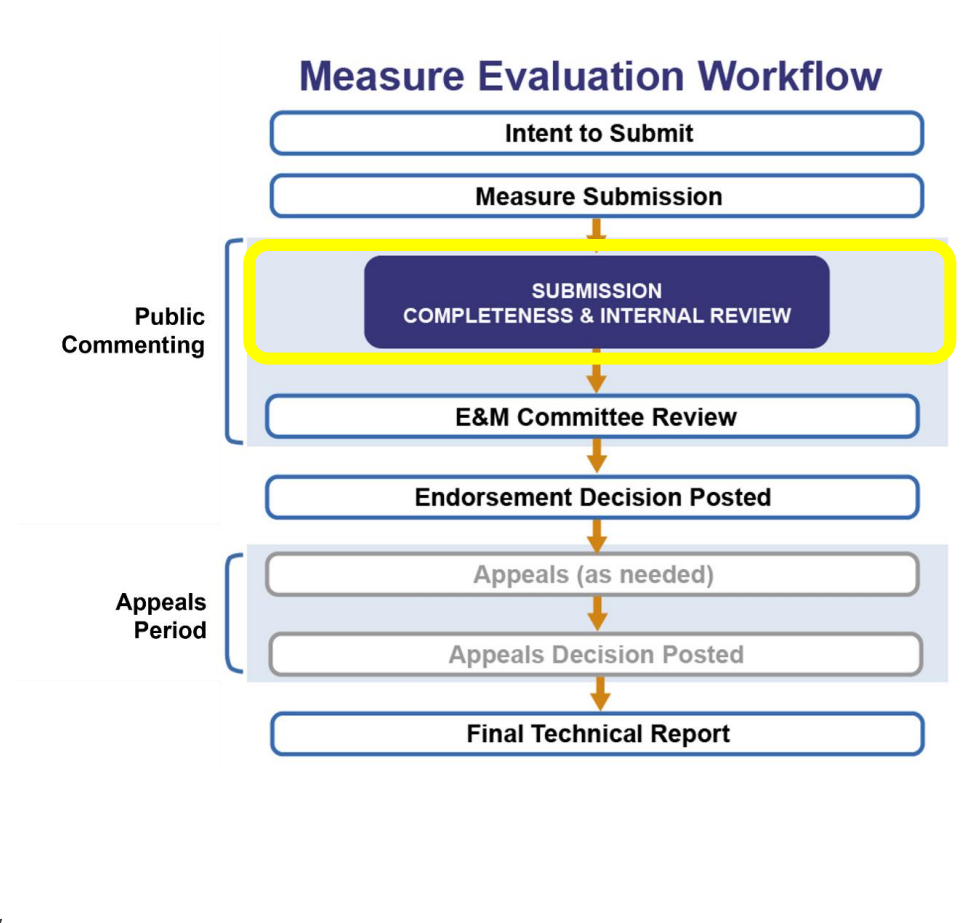
- Submission completeness review
- Staff assessments using PQM rubric (see E&M Guidebook)
 - 5 Domains: Importance, Feasibility, Scientific Acceptability (i.e., Reliability and Validity), Equity, and Use & Usability

- **Timing:**

- 4-5 weeks

- **Outputs:**

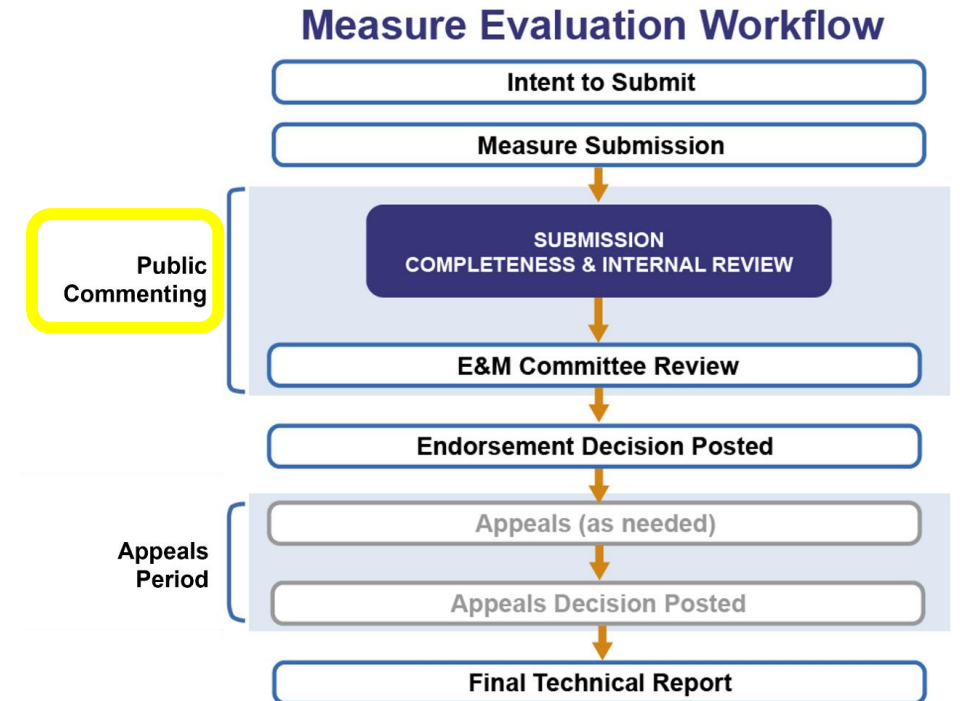
- Staff assessments and ratings of submitted measures
- Shared with developers and stewards for factual review



3. Measure Public Comment Period



- **Step:**
 - Measure information posted to PQM website for public comment
- **Timing:**
 - 30-day comment period
- **Public comment platform:**
 - PQM website
- **Outputs:**
 - Full record of public comment available on PQM website
 - Summary of public comments by E&M staff



4. Endorsement Committee Review



- **Steps:**

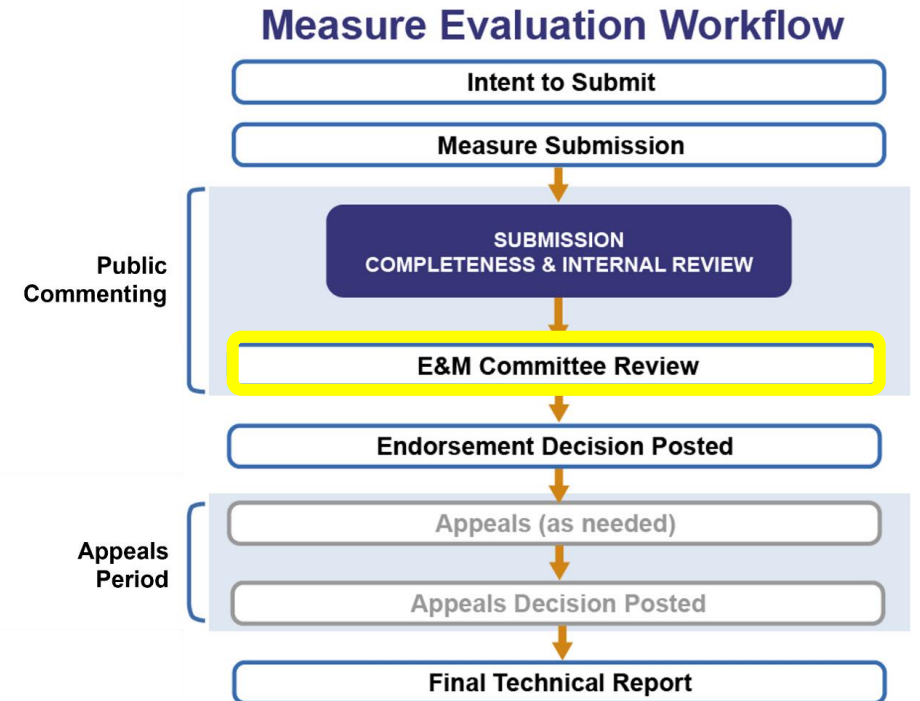
- Independent E&M committee-member review of measures, staff preliminary assessments, and public comments using PQM Measure Evaluation Rubric.
- Staff aggregation of committee review to determine areas of non-consensus using an evidence-based consensus measure.

- **Timing:**

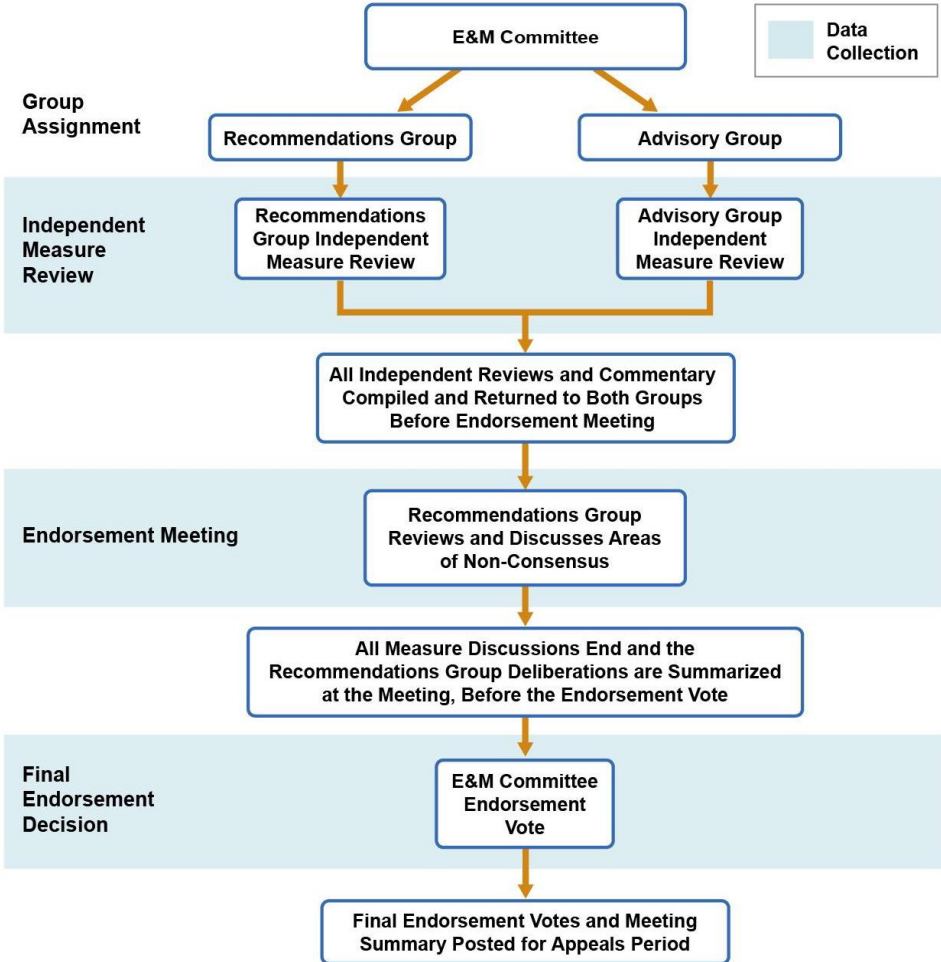
- ~3 weeks prior to E&M committee endorsement meeting

- **Outputs:**

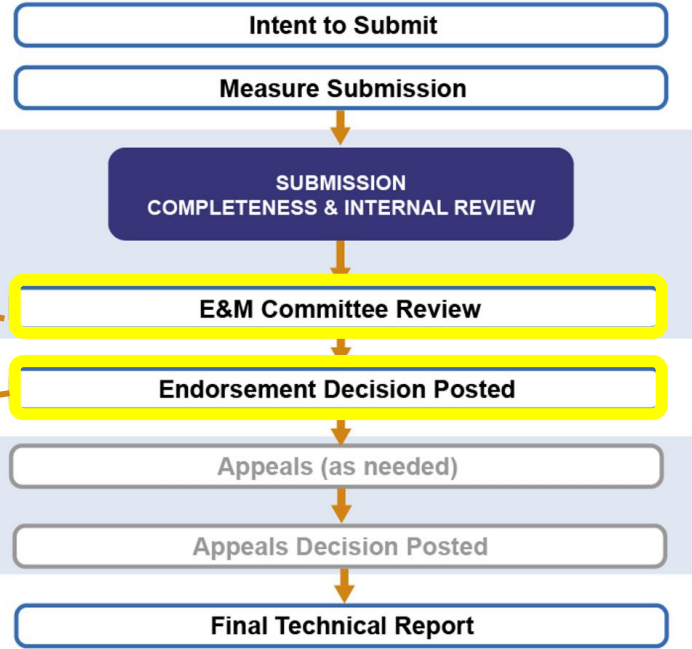
- Aggregated individual reviewer ratings



E&M Independent Review vs. Endorsement Meeting



Measure Evaluation Workflow



Endorsement Decision: *Endorsement Committee Meeting*

- **Steps:**

- E&M committee meets to review measures that lack consensus, based on aggregated independent committee-member reviews. Committee uses the NHDNG process to drive consensus.
- 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 committee members (Recommendations Group and Advisory Group), who have not been recused.

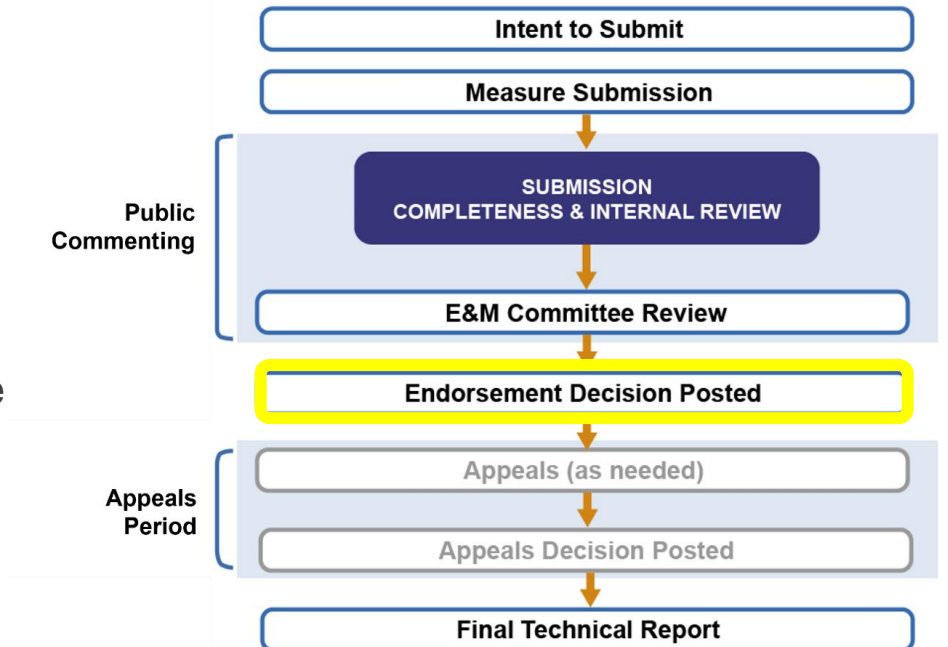
- **Timing:**

- February (Fall) and August (Spring)

- **Outputs:**

- Endorsement decision posted to PQM website

Measure Evaluation Workflow



Endorsement Decision Outcomes



Decision Outcome	Description	Maintenance Expectations
Endorsed	<p>Applies to new and maintenance measures.</p> <p>There is 75% or greater agreement for endorsement by the E&M committee</p>	<p>Measures undergo maintenance of endorsement reviews every 5 years with an annual update review at 3 years.</p>
Endorsed with Conditions*	<p>Applies to new and maintenance measures.</p> <p>There is 75% or greater agreement that the measure can be endorsed as it meets the criteria, but there are recommendations/areas committee reviewers would like to see when the measure comes back for maintenance. If these recommendations are not addressed, then a rationale from the developer/steward should be provided for consideration by the E&M committee review.</p>	<p>Measures undergo maintenance of endorsement reviews every 5 years with an annual 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. There is 75% or greater agreement to not endorse the measure by the E&M committee.</p>	<p>None</p>
Endorsement Removed	<p>Applies to maintenance measures only. Either:</p> <ul style="list-style-type: none"> • There is 75% or greater agreement for endorsement removal by the E&M committee; or • A measure steward retires a measure (i.e., no longer pursues endorsement); or • A measure steward never submits a measure for maintenance and there is no response from the steward after targeted outreach; or • There is no longer a meaningful gap in care, or the measure has plateaued (i.e., no significant change in measure results for accountable entities over time) 	<p>None</p>

Decision Outcomes:

Endorsed with Conditions



The types of conditions that may be placed on a measure include but are not limited to:

- Conducting/providing additional testing across a larger population, accountable entity-level, and/or different level of analysis
- Expanding the measure use beyond quality improvement and into an accountability application

Battelle has identified several non-negotiable areas, meaning if a measure meets one or more of the following criteria, the measure cannot be endorsed, even with conditions:

- Lack of or unclear business case
- Lack of evidence supporting the business case
- 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
- If 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:**

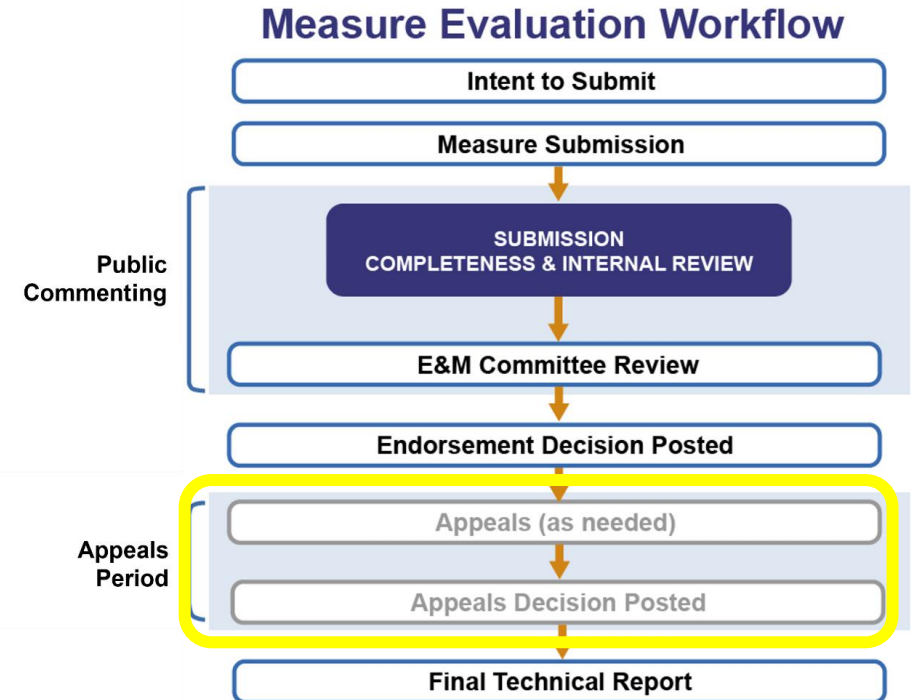
- Any interested party can submit an appeal request for any E&M committee endorsement decision
- Ad-hoc Appeals Committee review of an appeal based on eligibility of appeal, which is reviewed by Battelle staff

- **Timing:**

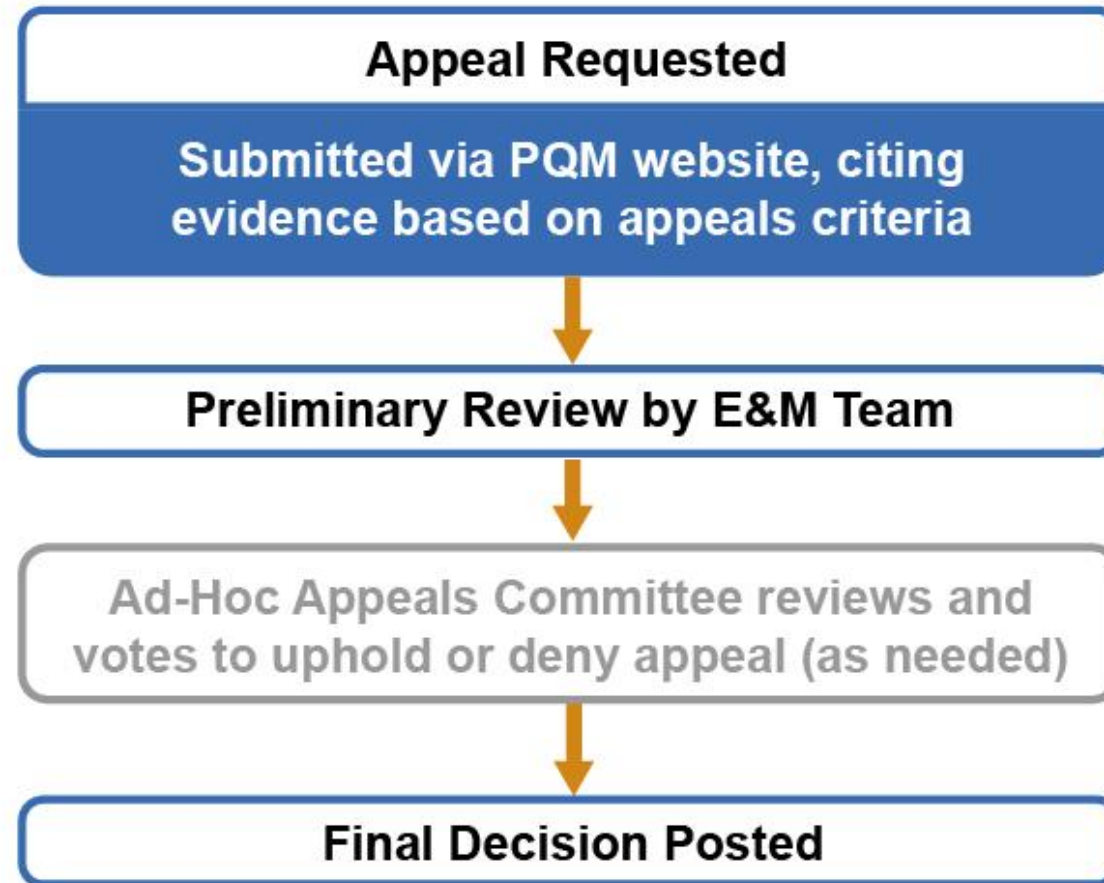
- February/March (Fall) and August/September (Spring)

- **Outputs:**

- Eligibility decision
- Appeals Committee decision (if convened)



Appeals Process



The Appeals committee consists of all chairs from that cycle's E&M committees

Final Endorsement Decision Posted



- **Steps:**

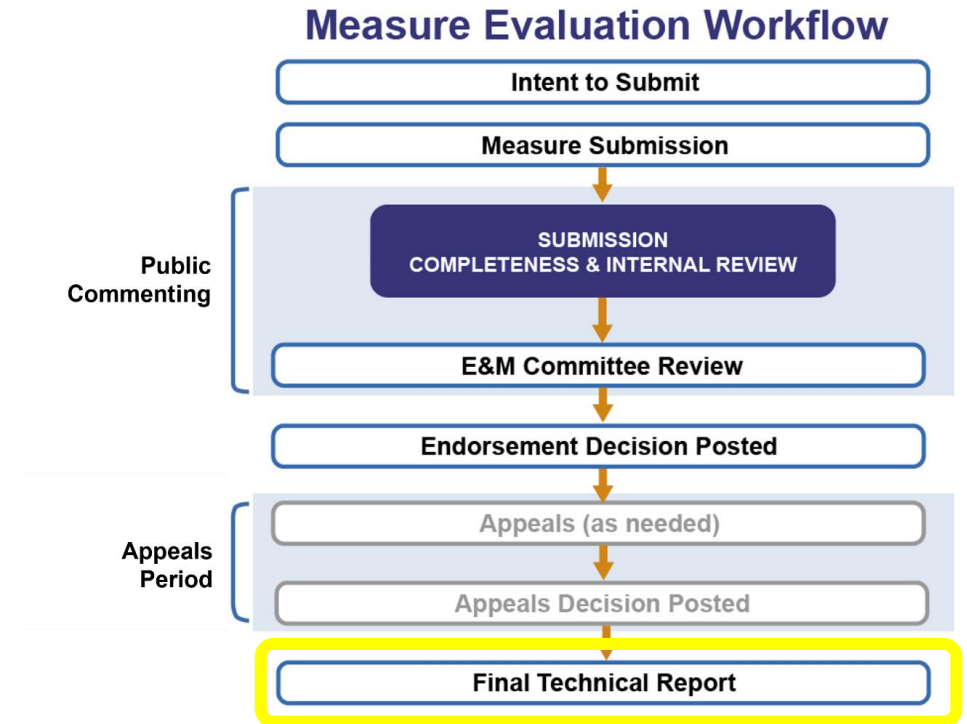
- If no appeal, original endorsement decision remains
- If appeal is eligible, decision of appeal posted

- **Timing:**

- After Appeals Period

- **Outputs:**

- Final endorsement decision & updates to repository
- Final Technical report



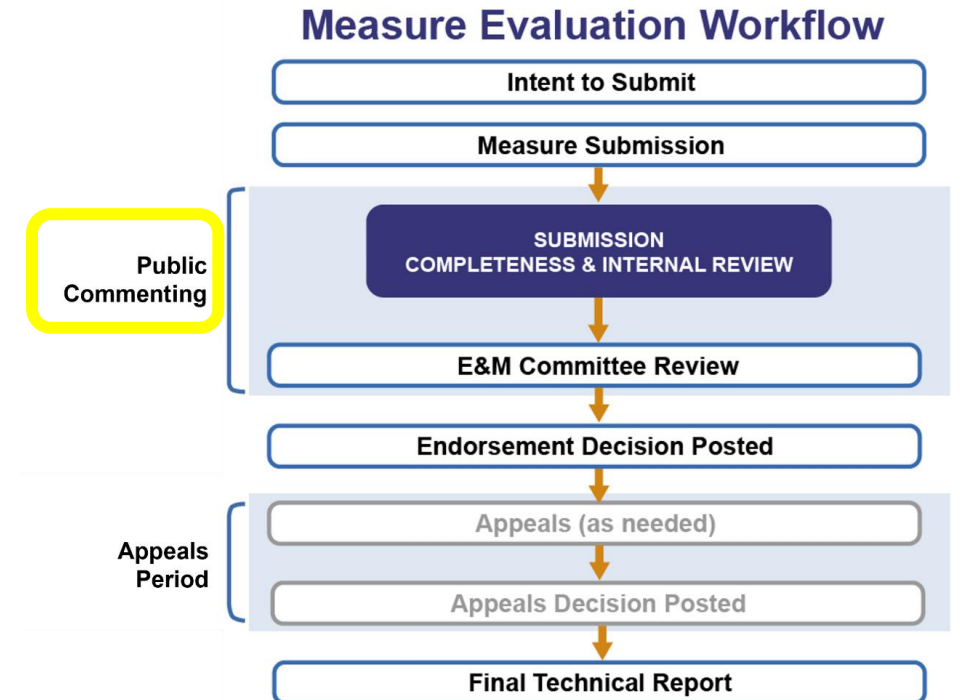
Timeline of Fall 2023 E&M Activities and Deadlines



Fall 2023 Timeline of Activities



Fall 2023 Endorsement Cycle Step	Status	Respective Date(s)
Intent to Submit	Complete	October 2
Full Measure Submission	Complete	November 1
Staff Internal Review	In Progress	November 20 – December 15
Public Comment	In Progress	December 1 – January 2
Independent Committee Reviews	Upcoming	January 2 – 22
E&M Committee Endorsement Meetings	Upcoming	January 29 – February 9
Appeals Period	Upcoming	February 26 – March 18
Final Endorsement Decision Posted	Upcoming	No later than March 29



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 phased review, possible endorsement decision outcomes, the appeals process, E&M policies and procedures, and the E&M committee structure.
- **PQM Measure Evaluation Rubric** and Worksheet – provides measure evaluation criteria as well as additional guidance for evaluating measures based on the criteria.
- **Established Reviewer Account on the PQM Website** – Please be sure to create a user account so that you will be able to log into the system and review the staff assessments, public comments, and measures for each cycle. Please follow this link to create a user account: <https://p4qm.org/user/login>. A video tutorial is also available here: https://youtu.be/ayX11wOw_2A.
- **Completed Measure-Specific Disclosure of Interest Form** – Please be sure to submit your MS-DOI form for the Fall 2023 measures. If you have not received one, please contact PQMsupport@battelle.org.

What is the PQM Measure Evaluation Rubric?



The PQM Measure Evaluation Rubric (Rubric) consists of five (5) major domains:

- 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 five (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 the Partnership for Quality Measurement (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. 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 and Worksheet

Screen Share





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Thank You!

Have questions? Contact us at
PQMsupport@battelle.org



Questions & Answers





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