



A Passionate Voice for Compassionate Care

April 16, 2014

Christine Cassel, M.D.
President and Chief Executive Officer
National Quality Forum
1030 15t Street NW, Suite 800
Washington, DC 20005

Re: NQF Draft Report and Recommendations on Risk Adjustment for Socioeconomic Status or Other Sociodemographic Factors

Dear Dr. Cassel,

On behalf of the Catholic Health Association (CHA), thank you for the opportunity to comment on the proposed recommendations of the NQF-convened Expert Panel on whether sociodemographic factors should be considered in outcome performance measurement. CHA is the national leadership organization for the Catholic health ministry, consisting of more than 2,000 Catholic health care sponsors, systems, hospitals, long-term care facilities, and related organizations located in all 50 states and the District of Columbia.

CHA applauds the Expert Panel for producing an excellent report and strongly endorses the report's conclusions and recommendations. We urge NQF to adopt the recommendations and to turn promptly to implementing them.

The Catholic health ministry is both committed to efforts to enhance the overall quality of care and health outcomes and deeply concerned about the persistent existence of racial and ethnic disparities in health outcomes, access to care and receipt of quality health care. That is why CHA supports the appropriate risk adjustment of performance measures to reflect differences in patient sociodemographic status. Sociodemographic factors such as income, education, race, homelessness and language proficiency have been shown to have a significant relationship to health outcomes. Failing to adjust for them in performance-based payment incentive programs can result in unnecessary and inappropriate payment reductions for providers that serve a high percentage of disadvantaged patients, harming both the patients and the providers by depriving them of the resources they need to make sure every patient receives quality care. In addition, more could be done to use performance measurement systems to identify and eliminate health disparities.

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CHA strongly supports the recommendation that performance accountability programs should include risk adjustment for those sociodemographic factors for which there is a conceptual relationship with outcomes or processes of care and empirical evidence of such an effect, for reasons unrelated to quality of care. Differences in performance measure outcomes due to actual variation in the quality of care provided to subgroups of patients should not be tolerated. We also endorse the use of performance measure stratification as a tool to identify and reduce health disparities, and the call for a national strategy to identify and collect data on the key sociodemographic factors relevant to health in order to identify health disparities and develop appropriate performance measures.

We would also like to note our agreement with the need for continued attention to the possibility of unintended consequences resulting from public reporting and pay for performance programs. Even with measures risk adjusted for sociodemographic factors, we must monitor the effect of such programs on vulnerable and disadvantaged populations and the providers that serve them to ensure they are not being harmed. For that reason, and to ensure the overall integrity of performance measurement programs, we also agree that the NQF should be more active in providing guidance on the appropriate implementation and use of NQF-endorsed measures in the intended contexts and populations.

Once again, thank you for the opportunity to comment on the Expert Panel's recommendations. The draft report and recommendations are an important contribution to the ongoing effort to identify, address and eliminate health disparities in our country. If you have any questions about these comments or need more information, please do not hesitate to contact me or Kathy Curran, Senior Director Public Policy, at 202-721-6300.

Sincerely,

A handwritten signature in black ink that reads "Michael Rodgers". The signature is written in a cursive, flowing style.

Michael Rodgers
Senior Vice President
Public Policy and Advocacy