NATIONAL QUALITY FORUM

NQF Endorses Resource Use Measures

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CONTACT: Erin Weireter
202-478-9326
press@qualityforum.org

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Washington, DC – the National Quality Forum (NQF) Board of Directors has approved for endorsement four measures on healthcare resource use and costs. The measures – focusing on diabetes and cardiovascular care costs as well as total primary-care costs– will provide vital data on how resources are used in these areas of care. Such data will help create a more efficient, less wasteful healthcare system.

Resource use measures as defined by NQF are comparable measures of actual dollars or standardized units of resources applied to the care given to a specific population or event, such as a specific diagnosis or procedure.

"Healthcare spending in the United States has been rising too fast and our dollars are not always put to the best use" said Janet Corrigan, PhD, MBA, president and CEO of NQF. "We have an opportunity to create a higher-quality, lower-cost healthcare system; resource use measures can provide a more granular, detailed picture of what is driving costs and help providers more effectively manage cost and healthcare quality."

This project was NQF's first effort at endorsing measures that evaluate how resources are used in care delivery, as a result of keen interest from government and private payers. Several provisions in recent policy require use of resource data over the next several years to support efforts to move toward a value-based purchasing payment model, and private payers have been utilizing these types of measures for several years.

"The endorsed resource measures – when used alongside measures of the quality of care – can be useful to a wide range of healthcare stakeholders," said Tom Rosenthal, MD, chief medical office and associate vice chancellor at UCLA School of Medicine and co-chair of the Cost and Resource Use Steering Committee. "Providers can better manage costs and care delivery if they understand how resources are being used, and health plans and consumers can better identify providers who are delivering high-quality care at lower costs when the measures are publicly reported."

"Resource use data are an integral part of evaluating care efficiency and value," said Bruce Steinwald, MBA, health policy independent consultant and co-chair of the Cost and Resource Use Steering Committee. "These new measures are timely, given recent private and governmental initiatives that focus on using resource use data to develop new healthcare delivery models in order to make quality care more affordable."

NQF is a voluntary consensus standards-setting organization. Any party may request reconsideration of any of the four endorsed quality measures listed below by submitting an appeal no later than February 29 (to submit an appeal, go to the NQF Measure Database). For an appeal to be considered, the notification must include information clearly demonstrating that the appellant has interests directly and materially affected by the NQF-endorsed recommendations and that the NQF decision has had (or will have) an adverse effect on those interests.

Endorsed Measures

- 1557: Relative Resource Use for People with Diabetes (National Committee for Quality Assurance)
- 1558: Relative Resource Use for People with Cardiovascular Conditions (National Committee for Quality Assurance)
- 1598: Total Resource Use Population-based per member per month Index (HealthPartners)
- 1604: Total Cost of Population-based per member per month Index (HealthPartners)

Learn more about the Resource Use endorsement project (PDF)

NQF operates under a three-part mission to improve the quality of American healthcare by:

- *building consensus on national priorities and goals for performance improvement and working in partnership to achieve them;*
- *endorsing national consensus standards for measuring and publicly reporting on performance; and*
- *promoting the attainment of national goals through education and outreach programs.*