



TO: NQF Health and Wellbeing 2015-2017 Standing Committee
FROM: Biotechnology Innovation Organization (BIO)
DATE: November 22, 2016

BIO appreciates the opportunity to comment on the **National Quality Forum (NQF) Health and Wellbeing 2015-2017 report ("the report")**.

The Biotechnology Innovation Organization (BIO) is the world's largest trade association representing biotechnology companies, academic institutions, state biotechnology centers and related organizations across the United States and in more than 30 other nations. BIO members are involved in the research and development of innovative healthcare, agricultural, industrial and environmental biotechnology products. Our membership includes more than 30 companies focused on the research and development of new vaccines to fulfill unmet medical needs and protect Americans throughout the lifespan from a variety of infectious diseases.

Vaccines protect us from a variety of common diseases that can be serious and even deadly. Every year, more than 50,000 adults die from vaccine-preventable diseases and thousands more suffer serious health problems. Despite the Advisory Committee on Immunization Practices' (ACIP) evidence-based recommendations, vaccines have been consistently underutilized in the adult population and lag behind the Healthy People 2020 goals for the most commonly recommended vaccines (influenza, pneumococcal, Tdap (tetanus, diphtheria, pertussis), hepatitis B, herpes zoster, and human papilloma virus (HPV)). Disparities are even greater for at-risk populations, including seniors and people with chronic illnesses.

BIO has closely followed NQF's work to identify gaps and prioritize measurement needs in the adult vaccines space. In its August 2014 report, "Priority Setting for Healthcare Performance Measurement: Addressing Performance Measures Gaps for Adult Immunizations," NQF provided a comprehensive assessment of the areas of performance measurement used in federal programs for adult vaccines where substantial measure gaps exist outside of influenza and pneumococcal disease vaccination. The report further highlighted ten age-specific and composite measure gap priorities that should be addressed.¹

The report included a conceptual framework to prioritize measurement needs along with recommended short-term and long-term priorities. It also provided recommendations for addressing issues of measurement accuracy and efficiency, and guidance for measuring what is most meaningful in adult vaccines. The overarching goal of this report was to provide a pathway for adult vaccine performance measurement development that would ultimately improve immunization rates and outcomes across adult populations.

¹ http://www.qualityforum.org/Prioritizing_Measure_Gaps_-_Adult_Immunization.aspx

Achieving increased adult immunization rates through federal benchmarks and measures is a top priority for BIO and its members. We therefore believe that measures that encourage tracking and reporting of recommended vaccines is the optimal strategy. BIO works with other vaccine stakeholders to advocate through regulatory comment opportunities to Center for Medicare and Medicaid Services (CMS). BIO has previously recommended that CMS conduct an assessment of adult vaccine quality measures to ensure they are up-to-date with current Advisory Committee on Immunization Practices (ACIP). BIO has also encouraged CMS and others to engage in a process to align and streamline the variety of measures currently employed to track influenza and pneumococcal immunizations. The multiplicity of measures around these two conditions is not efficient and crowds out opportunities to enhance and improve quality measurement for other vaccine-preventable diseases.

The draft NQF Health and Wellbeing 2015-2017 report outlines a portfolio of measures critical to healthy living across 5 key areas: Community-Level Indicators of Health and Disease; Health-Related Behaviors and Practices to Promote Healthy Living; Modifiable Social, Economic, and Environmental Determinants of Health; Oral Health, and Primary Prevention and/or Screening. Measures considered for endorsement by NQF are presently utilized in a variety of public and private programs including the Medicare Shared Savings Program (MSSP), Physician Value-Based Payment Modifier (VBM), Meaningful Use Stage 2, Medicare Physician Quality Rating System (PQRS), the Merit-Based Incentive Payment System (MIPS), and the Nursing Home Quality Reporting System, among others.

We believe the influenza vaccine-related measures under consideration show progress toward closing the measure gaps. However, the draft report falls short of expectations in other areas. Prioritizing quality measures around the full range of ACIP-recommended immunizations would help close existing measure gaps, as well as improve immunization rates and health outcomes for millions of patients nationwide.

NQF-endorsed measures provide the foundation for the National Quality Strategy (NQS) "triple aim" of better care, affordable care, and healthy people/communities. This serves as the overarching framework for guiding and aligning public and private efforts to improve quality healthcare. In turn, the National Prevention Strategy (NPS) serves as the overarching framework for improving quality of life by shifting the focus from sickness and disease to prevention and wellness. BIO fully supports the goals and mission of the NQS and NPS and believes doing so will strengthen and enhance the development and implementation of adult immunization quality measures.

The draft NQF Health and Wellbeing 2015-2017 report notes the proliferation of care setting-specific influenza measures. NQF has previously issued a strong recommendation for a single, standardized, universal influenza immunization measure, even though multiple developers are involved. BIO wholeheartedly agrees with NQF's assessment and urges NQF to take a leadership role in bringing together the various stakeholders to streamline and standardize influenza measures across care settings. Moreover, we urge NQF to take specific action to address not only the lack of disparities in the data for the influenza



measure as noted in the draft report, but also to begin to address the performance measure gaps for other adult immunizations that NQF cited in the August 2014 report.

Of the 24 measures reviewed for the draft NQF Health and Wellbeing 2015-2017 report, 8 pertain to influenza. Many of these measures are presently employed in a range of federal and private programs and provide an essential foundation for appropriate administration of influenza immunization. We greatly appreciate the work of NQF to strengthen and improve the integrity of these measures and the work of the Committee to encourage better reporting of disparities data. BIO strongly believes that immunization quality measures for influenza and the range of other vaccine preventable illnesses will lead to improved health outcomes, reduced disease burden, and lower overall healthcare costs.

We urge NQF to play a leadership role in highlighting performance measure gaps for adult immunization quality measures. NQF should lead the efforts necessary to close gaps and drive work towards improved age and composite measures for the range of vaccine preventable conditions affecting adults. Immunization is considered the ultimate mechanism for prevention. Implementing broad immunization measures will lead to reduced rates of morbidity and mortality from a growing number of preventable conditions and, consequently, an improvement in overall health in a cost-efficient manner.

Thank you for this opportunity to offer our perspective on this draft NQF report. We look forward to further discussion with NQF staff on these important issues.

Respectfully submitted,

/s/

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