



AMERICAN ACADEMY OF
FAMILY PHYSICIANS
STRONG MEDICINE FOR AMERICA

August 18, 2010

Janet Corrigan, MBA, PhD
President and Chief Executive Officer
National Quality Forum
601 13th Street NW, Suite 500 North
Washington, DC 20005

Dear Dr. Corrigan,

On behalf of the American Academy of Family Physicians (AAFP), an organization that represents over 94,700 physicians and medical students nationwide, I write to offer comments to the National Quality Forum's (NQF) proposed member selection criteria, member responsibilities, and operating procedures for the Partnership for Applying Measures to Improve Quality (PAM). The Academy appreciates NQF's proactive approach to solicit public input regarding the potential new responsibilities that NQF could assume if NQF is assigned the additional task of serving as a neutral convener, as outlined in Sec. 3014 of the Affordable Care Act (ACA). I urge the NQF to consider these comments to help inform deliberations of the PAM Nominating Committee that will propose the PAM membership criteria and responsibilities to the whole NQF Board of Directors at its September 23, 2010 meeting.

Member Selection Criteria

AAFP remains supportive of NQF and the outreach exhibited through this supplementary comment opportunity. However AAFP must also request further explanation on the proposed member selection criteria and sequencing of the nominating process. Specifically, it must be clarified whether the NQF board will choose the multi-stakeholder groups before or after a public comment opportunity. In addition, AAFP urges NQF to further specify the specific roles, responsibilities, and timing deadlines of a nominating committee as well as what opportunities the public will have to provide additional input to the process.

Since Sec. 3014 specifically calls for convening a multi-stakeholder group, AAFP above all advocates for the Patient-Focused Coordinating Committee and other workgroups to be balanced in representation so that no single industry group unfairly enjoys a majority. Doing so will ensure that all participating groups trust, get a fair assessment, and fully understand how quality and efficiency measures generated by the PAM will eventually impact the quality of care to their members.

Furthermore, NQF should define more precisely the term "leading stakeholder groups" so that interested parties are fully aware of all aspects before applying for membership. The NQF needs to specify whether a group's size, longevity, size and/or type of membership, etc. will eventually guide the NQF to eventually deem which organizations are or are not labeled "leading stakeholder groups".

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Member Responsibilities

Involvement in quality improvement initiatives already requires patient and provider organizations to commit staff time to accomplish important coalition goals. In order to convene as diverse a range of multi-stakeholders as possible, AAFP urges NQF to clarify that PAM participation does not require any financial commitments and/or member dues. Since the Affordable Care Act already funds these quality improvement activities, NQF should clearly state this in the finalized member responsibility information made available for prospective participants.

Similar to comments made concerning the need for a diverse and transparent Patient-Focused Coordinating Committee, I also urge NQF to clarify that the NQF Board, in its selection of chair and vice-chair for the coordinating committee and workgroups, must also appoint from a diverse range of stakeholders. Doing so would both prevent biases from any single interest group and facilitate the goal of creating a consensus based entity to promote the development of quality and efficiency measures.

Operating Procedures

Scheduling conflicts should not bar participation in this important consensus based process. AAFP opposes the NQF plan to not allow organizational representatives to send substitutes or allow proxy voting at future meetings. Since NQF's intended goal is to convene "leading stakeholder groups", these leaders will consistently encounter conflicts that prevent or limit participation from attending all meetings. When these conflicts occur, voting by proxy through a well-informed and chosen staff person must be allowed.

As always, the AAFP looks forward to working with NQF in its continued efforts to study and improve the quality of physician services.

Sincerely,

A handwritten signature in black ink that reads "Ted Epperly MD". The signature is written in a cursive style and is positioned below a horizontal line that starts under the word "Sincerely," and extends to the right.

Ted D. Epperly, MD, FAAFP
Board Chair