Medicare Beneficiary Quality Improvement Project (MBQIP) Measures

	MBQIP Core Measure Set								
Current Measures in *black (for reporting data from calendar years 2023 and 2024)									
MBQIP 2025 Core Measure Set (adding in the additional orange measure reporting data by calendar year 2025)									
Global Measures	Patient Safety	Patient Experience	Care Coordination	Emergency Department					
*CAH Quality Infrastructure (annual submission)	*HCP/IMM-3: Influenza Vaccination Coverage Among Healthcare Personnel (HCP) (annual submission) *Antibiotic Stewardship: Measured via Center for Disease Control National Healthcare Safety Network (CDC NHSN) Annual Facility Survey (annual submission) Safe Use of Opioids (eCQM) (annual submission)	 *Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) (quarterly submission): The HCAHPS survey contains 21 patient perspectives on care and patient rating items that encompass eight key topics: Communication with Doctors Communication with Nurses Responsiveness of Hospital Staff Communication about Medicines Discharge Information Cleanliness of the Hospital Environment Quietness of the Hospital Environment Transition of Care 	Hybrid Hospital-Wide Readmission (annual submission) Social Drivers of Health Screening (annual submission) Social Drivers of Health Screening Positive (annual submission)	 *Emergency Department Transfer Communication (EDTC) (quarterly submission): The following eight elements roll up into a single composite result: Home Medications Allergies and/or Reactions Medications Administered in ED ED provider Note Mental Status/Orientation Assessment Reason for Transfer and/or Plan of Care Tests and/or Procedures Performed Test and/or Procedure Results *OP-18: Median Time from ED Arrival to ED Departure for Discharged ED Patients (quarterly submission) *OP-22: Patient Left Without Being Seen (annual submission) 					

*Measures in current MBQIP set (reporting data from calendar years 2023 and 2024)

+Data collection began in 2023 to inform state Flex quality programs. Data will continue to be collected going forward.

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Flex programs and hospitals are always welcome to work on additional quality improvement areas in addition to the core set. This includes, but is not limited to, those listed below.

Suggested Additional Quality Measures for Flex Improvement Activities						
Global	Patient Safety	Patient	Care Coordination	Emergency		
Measures		Experience		Department		
Quality Improvement Basics Quality Related Certification	Antibiotic Use (AU)COVID VaccinationHealthcare-Associated Infections (HAI)Perinatal Care• Birthing-Friendly Hospital Designation• PC-01: Elective Delivery• PC-05: Exclusive Breast Milk Feeding (eCQM)Falls• Falls with Injury• Patient Fall Rate• Screening for Future Fall RiskAdverse Drug Events (ADE)• Opioids• Glycemic Control• Anticoagulant TherapyPatient Safety Culture SurveyInpatient Influenza ImmunizationeCQMs• VTE-1: Venous Thromboembolism Prophylaxis• ED-2: Median Admit Decision Time to ED Departure Time for Admitted Patients	Emergency Department Patient Experience Swing Bed Patient Experience Clinic Group CAHPS	Discharge Planning Medication Reconciliation Swing Bed Care Claims-Based Measures: The following Measures are automatically calculated for hospitals using Medicare Administrative Claims Data • Complications • Hospital Return Days Global Malnutrition Composite Score (eCQM)	 OP-40: ST-Segment Elevation Myocardial Infarction (eCQM) Chest Pain/Acute Myocardial Infarction ED Throughput Door to Diagnostic Evaluation by a Qualified Medical Professional American Heart Association Get with the Guidelines (Stroke, Heart Failure, AMI) 		