

Medicare Beneficiary Quality Improvement Project



A publication for Flex Coordinators to share with their critical access hospitals

## In This Issue

### 1 CAHs Can!

Quality Time: Sharing PIE (performance improvement experience) Conversations

### 2 Data: CAHs Measure Up:

Finding and Using Benchmarking Data

### 3 Tips: Robyn Quips – tips and frequently asked questions:

Hospital Quality Reporting Site Updates

### 4 Tools and Resources:

Helping CAHs succeed in quality reporting & improvement

Contact your Flex Coordinator if you have questions about MBQIP.

Find your state Flex Coordinator on the [Technical Assistance and Services Center \(TASC\) website](#).

Find past issues of this newsletter and links to other MBQIP resources on TASC's [MBQIP Monthly](#) webpage.

## New Episode Now Available: Quality Time: Sharing PIE (performance improvement experience) Conversations

As part of Stratis Health's [National Rural Virtual Quality Improvement Mentor](#) program, the latest installment of Quality Time: Sharing PIE (performance improvement experience) recorded conversations is online and ready for listening!

In this series, the mentors, experienced critical access hospital quality improvement (QI) staff from across the country, come together to share PIE—their performance improvement experience. They discuss key topics that help drive quality improvement in their rural hospitals. You can hear their lessons learned, strategies, tips, and ideas. Included with each episode are supportive resources for the topic, along with one of the mentor's favorite real pie recipes!

In the [latest session of Quality Time: Sharing PIE](#), QI Mentors Cindy Gilman from Carroll County Memorial Hospital in Carrollton Missouri, and Christy Mintah from Avera Holy Family Hospital in Estherville, Iowa share their advice and tools for engaging the whole hospital team in quality improvement.

You can listen from the [Sharing PIE webpage](#), or on the go by subscribing to the podcast version through your favorite [streaming service](#).



### Burning QI Question? Ask a QI Mentor.

The virtual QI mentors want to share their performance improvement experience in critical access hospitals with you. Have a burning question? Want to suggest a PIE conversation topic? Just submit this [short form](#).

The National Rural Virtual Quality Improvement Mentor program is led by [Stratis Health](#). Contact [Karla Weng](#) for more information.

# Data



## CAHs Measure Up: Finding and Using Benchmarking Data

Benchmarks can be used to look at how your hospital fares in relation to other hospitals in your state, the nation, or other groups on various measures, and to set performance goals and targets.

### How to find benchmarking data:

- Check your MBQIP reports for data to benchmark your CAH against other hospitals in the state and nationally. The reports contain both averages and 90th percentiles for CAHs. The average represents the “middle of the road,” and the 90th percentile shows you where the best 10 percent of hospitals are performing for a given measure.
- MBQIP HCAHPS reports do not contain 90th percentiles, but they do contain averages. However, HCAHPS Online is a good source

of percentile data for HCAHPS measures – scroll to the “HCAHPS Percentiles Table” to take a look.

Remember that on HCAHPS Online, benchmarks represent data for all hospitals in the state and/or nation (not just CAHs).

- Some other good sources of benchmarking data for MBQIP measures as well as other measures include quality measure and other reports from the [Flex Monitoring Team](#). The Agency for Healthcare Research and Quality maintains a [list of useful national data sources](#). Consider also reaching out to organizations within your state for benchmarking suggestions, such as your state Flex program or hospital association.

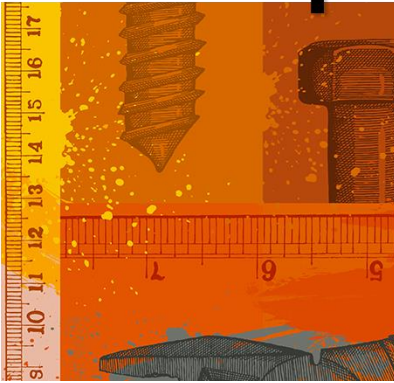


### How to use benchmarking data:

- Track your hospital’s performance against benchmarks – ideally, use the 90th percentile. Use that benchmark as the goal you strive to reach (or to stay above). Consider plotting your hospital’s performance on a graph and include the most current benchmark to visualize your progress. The Internal Quality Monitoring Tool, part of the [Quality Improvement Implementation Guide and Toolkit for Critical Access Hospitals](#), can help you start plotting your performance in this way.
- Benchmarks can also help you set priorities for improvement. If your hospital is already performing at or above the 90th percentile for a specific measure in both your state and the nation, for example, you should celebrate and keep up the good work – but you might want to focus your improvement efforts on a measure that’s performing below the state or national average. Consider using the CAH Quality Prioritization Tool, also part of the [Quality Improvement Implementation Guide and Toolkit for Critical Access Hospitals](#), to help determine which measures to focus on.

In general, make sure you know which time period you’re looking at regardless of the data source. Your MBQIP reports often contain more recent data than what you might find in other sources, but if you request data internal to your hospital or within your state, the data could be even more recent.

# Tips



## Go to Guides

### Hospital Quality Measure Guides

- [MBQIP Quality Reporting Guide](#)
- [Emergency Department Transfer Communication](#)
- [Inpatient Specifications Manual](#)
- [Outpatient Specifications Manual](#)



## Robyn Quips - tips and frequently asked questions

### Hospital Quality Reporting Site Updates

CMS is continuing to modernize their Hospital Quality Reporting (HQR) site. We've pulled together some of the information that has been emailed out regarding changes to the site. Please realize this is subject to change as CMS hasn't completed the updates as of this issue.

The link to the QualityNet home page is now <https://qualitynet.cms.gov>

The process for registering a Basic User or Security Administrator in the new system is as follows:

1. Log into [HARP Sign In](#) at <https://hqr.cms.gov/hqrng/login> with your HARP user name and password.  
(No HARP account? Create one on the [HCQIS Access Roles and Profile page](#) at [https://harp.qualitynet.org/.](https://harp.qualitynet.org/))
2. Go to **My Profile** (Under your Username in the upper right). From this page, you can **Request** access, and **View Current Access**.
3. Select **Basic User** or **Security Administrator/Official** when prompted to select a user type.
4. Select your required permissions and click **submit an access request**.

You will be notified by email when your request has been approved.

### Submitting Population and Sampling Data

HQR users can navigate to [HARP Sign In](#) at <https://hqr.cms.gov/hqrng/login> to submit their Population and Sampling Hospital Quality Reporting data. Submit Q3 and Q4 submissions using either Simple File Submissions or Data Entry process starting on November 05, 2020. To submit via **Simple File Submissions**, take the following steps.

- Submit XML files by navigating to **File Upload**.
- Click **Population and Sampling** or use step 3 below.
- From the new navigation, click **Data Submissions** and then **Population and Sampling**.

To Submit via **Data Entry** (new), take the following steps:

1. Go to the **Dashboard**.
2. Click **Data Entry**.
3. Click the **Select Population & Sampling** tab.
4. Click **Data Form**.
5. Click **IQR** or **OQR**.

Additionally, from the new navigation, on the left-hand side of the screens, click Data Submissions > select Population & Sampling tab > Data Form > IQR or OQR.

There was a QualityNet Notification email that went out on 11/24/20 with news on the new HQR reports tool. The process will be rolled out in two phases and the e-mail discussed Phase 1. It's a bit too involved to post here but this is regarding reports you can run allowing you to analyze for file accuracy, measure results and reporting requirements for the CMS Reporting Programs.

Make sure you sign up for the email updates on the QualityNet home page to get the latest information on the latest CMS updates to the Hospital Reporting Program. I would also advise logging in to your HARP account before you try and submit data to get yourself familiar with the site changes.

# Tools



## COVID-19 Information

Resources to support health care providers in responding to coronavirus disease 2019 (COVID-19) are continually being updated. The Rural Health Information Hub is regularly updating and adding links for Rural Response to COVID-19:

- [Federal and National Response Resources](#)
- [State Response Resources](#)
- [Rural Healthcare Surge Readiness](#)

[COVID-19 Funding Sources Impacting Rural Providers](#) Developed by the National Rural Health Resource Center, intended to support rural health care providers, along with their state and local partners, navigate the availability of federal funds to support the COVID-19 pandemic response and recovery efforts.

### [HHS/ASPR COVID-19 Clinical Rounds](#)

In partnership with Project ECHO, the U.S. Department of Health and Human Services and the Assistant Secretary for Preparedness and Response are hosting free weekly training to develop a virtual peer-to-peer community of practice to support EMS, critical care, and emergency departments in addressing COVID-19.

## MBQIP Resources

### Ask Robyn – Quarterly Open Office Hours Calls for Data Abstractors

Tuesday, January 12, 2020, 2:00 – 3:00 p.m. CT – [Register](#)

Sometimes it just helps to talk to someone! Quality Reporting Specialist Robyn Carlson will be offering open office hour calls to discuss your MBQIP abstraction questions. Sessions are free of charge, but registration is required. For more information about the Ask Robyn calls, contact Robyn Carlson, [rcarlson@stratishealth.org](mailto:rcarlson@stratishealth.org).

### New CMS Listserv for Rural Populations

The Centers for Medicare & Medicaid Services (CMS) has a new rural health care listserv dedicated to sharing information about programs, policies and resources to help ensure rural populations have access to quality health care. [Subscribe](#), then scroll to find **Outreach and Education**, then **Rural Health**. To find more information on rural health activities at CMS, visit [go.cms.gov/ruralhealth](http://go.cms.gov/ruralhealth) or contact [RuralHealth@cms.hhs.gov](mailto:RuralHealth@cms.hhs.gov).

### [Alcohol Use Disorder: Addressing Stigma and Treatment Access in Rural America](#)

From decreasing stigma to increasing treatment access and the impact of COVID-19, experts and rural healthcare organizations speak out on alcohol use and misuse in rural America in this article from the Rural Health Information Hub. A variety of best practices and resource links are also included.

### [2020 Rural Behavioral Health Care Coordination Summit Findings](#)

Hosted by the National Rural Health Resource Center the 2020 Rural Behavioral Health Care Coordination Summit included 10 nationally recognized leaders in rural health policy, practice, and payment focused on the rural hospital's role in addressing behavioral health through collaborative, community-wide initiatives and identified strengths, barriers, and actionable next steps for implementing and improving care coordination.

### [Free On-Demand Webinar: Sepsis Process Improvement in the COVID Era](#)

Sepsis is the #1 cause of death in hospitals and #1 cause of readmissions. Learn how to improve processes for identifying and treating patients for sepsis in this on-demand webinar from Luminare (sign-up required).



MBQIP Monthly is produced by Stratis Health to highlight current information about the Medicare Beneficiary Quality Improvement Project (MBQIP). This newsletter is intended for Flex Coordinators to share with their critical access hospitals.

*This project is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) as part of an award totaling \$625,000 with 0% financed with non-governmental sources. The contents are those of the author(s) and do not necessarily represent the official view of, nor an endorsement, by HRSA, HHS or the U.S. Government. (December 2020)*