Current Medicare Beneficiary Quality Improvement Project (MBQIP) Measures

MBQIP measures are divided into two categories:

- **Core MBQIP Measures** are those that all state Flex Programs are expected to support. Reporting on these measures contributes towards a CAH's Flex <u>eligibility requirements.</u>
- Additional MBQIP Measures are those that state Flex Programs can elect to support in addition to the Core measures, particularly in alignment with other partners or initiatives. While these measures are also rural relevant, they may not be as widely applicable across all CAHs. The MBQIP Measures resource includes a list of potential additional measures, but that list is not meant to be exhaustive. Flex programs can propose to work on other quality improvement topics within the four MBQIP domains. If there is not a nationally standardized or standardly reported measure currently available, Flex programs can propose a data collection mechanism.

Core MBQIP Measures					
Patient Safety/Inpatient	Patient Engagement	Care Transitions	Outpatient		
HCP/IMM-3 (formerly OP-27): Influenza Vaccination Coverage Among Healthcare Personnel (HCP) Antibiotic Stewardship: Measured via Center for Disease Control National Healthcare Safety Network (CDC NHSN) Annual Facility Survey	Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) 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 The survey also includes screener questions and demographic items. The survey is 29 questions in length.	Emergency Department Transfer Communication (EDTC) 1 composite; 8 elements • All EDTC Composite • 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-2: Fibrinolytic Therapy Received within 30 minutes OP-3: Median Time to Transfer to another Facility for Acute Coronary Intervention ED Throughput OP-18: Median Time from ED Arrival to ED Departure for Discharged ED Patients OP-22: Patient Left Without Being Seen 		

Current Medicare Beneficiary Quality Improvement Project (MBQIP) Measures

Additional MBQIP Measures					
Patient Safety/Inpatient	Patient Engagement	Care Transitions	Outpatient		
Healthcare-Associated Infections (HAI) • CLABSI: Central Line-Associated Bloodstream Infection	Emergency Department Patient Experience	Discharge Planning Medication Reconciliation	Chest Pain/AMI Aspirin at Arrival Median Time to ECG		
 CAUTI: Catheter-Associated Urinary Tract Infection CDI: Clostridioides difficile (C.diff) Infection MRSA: Methicillin-resistant Staphylococcus aureus 		Swing Bed Care Claims-Based Measures Measures are automatically calculated for hospitals using Medicare	 ED Throughput Door to Diagnostic Evaluation by a Qualified Medical Professional 		
SSIs: Surgical Site Infections Colon or Hysterectomy		Administrative Claims DataReadmissionsComplications			
Perinatal Care PC-01: Elective Delivery PC-05: Exclusive Breast Milk Feeding (eCQM)		Hospital Return Days			
 Falls Falls with Injury Patient Fall Rate Screening for Future Fall Risk 					
 Adverse Drug Events (ADE) Opioids Glycemic Control Anticoagulant Therapy 					
Patient Safety Culture Survey					
Inpatient Influenza Vaccination					
VTE-1: Venous Thromboembolism Prophylaxis Safe Use of Opioids: Concurrent Prescribing ED-2: Median Admit Decision Time to ED Departure Time for Admitted Patients					

This list of additional measures is not meant to be exhaustive. Flex programs can propose to work on other quality improvement topics within the four MBQIP domains.