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 eligibility requirements.
- 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 ConsumerAssessment of HealthcareProviders and Systems(HCAHPS)The HCAHPS survey contains 21 patientperspectives on care and patient ratingitems 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• Transition of CareThe survey also includes screenerquestions and demographic items. The	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	 ED Throughput OP-18: Median Time from ED Arrival to ED Departure for <i>Discharged</i> ED Patients OP-22: Patient Left Without Being Seen *The AMI Outpatient measures, OP-2 and OP-3, are being removed by the Centers for Medicare & Medicaid Services (CMS) following submission of Quarter 1 2023 data. 	

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 • CAUTI: Catheter-Associated Urinary Tract Infection	Emergency Department Patient Experience	Discharge Planning Medication Reconciliation Swing Bed Care	Chest Pain/AMI • Aspirin at Arrival • Median Time to ECG • Fibrinolytic Therapy • Median Time to Transfer	
 CDI: Clostridioides difficile (C.diff) Infection MRSA: Methicillin-resistant Staphylococcus aureus SSIs: Surgical Site Infections Colon or Hysterectomy 		Claims-Based Measures Measures are automatically calculated for hospitals using Medicare Administrative Claims Data • Readmissions	 ED Throughput Door to Diagnostic Evaluation by a Qualified Medical Professional 	
 Perinatal Care PC-01: Elective Delivery PC-05: Exclusive Breast Milk Feeding (eCQM) 		 Complications 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				
 eCQMs 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.