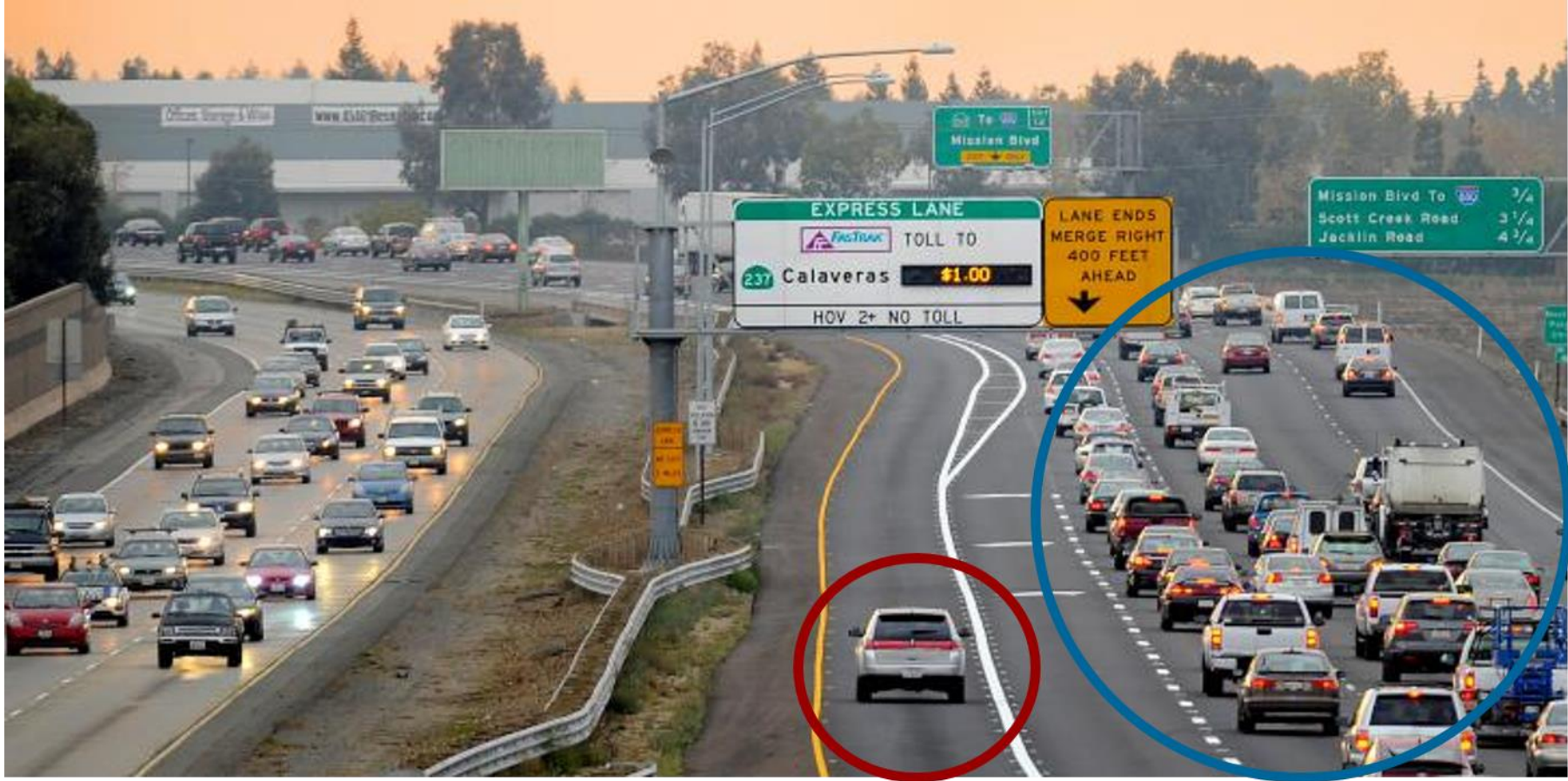


# MBQIP Freeway

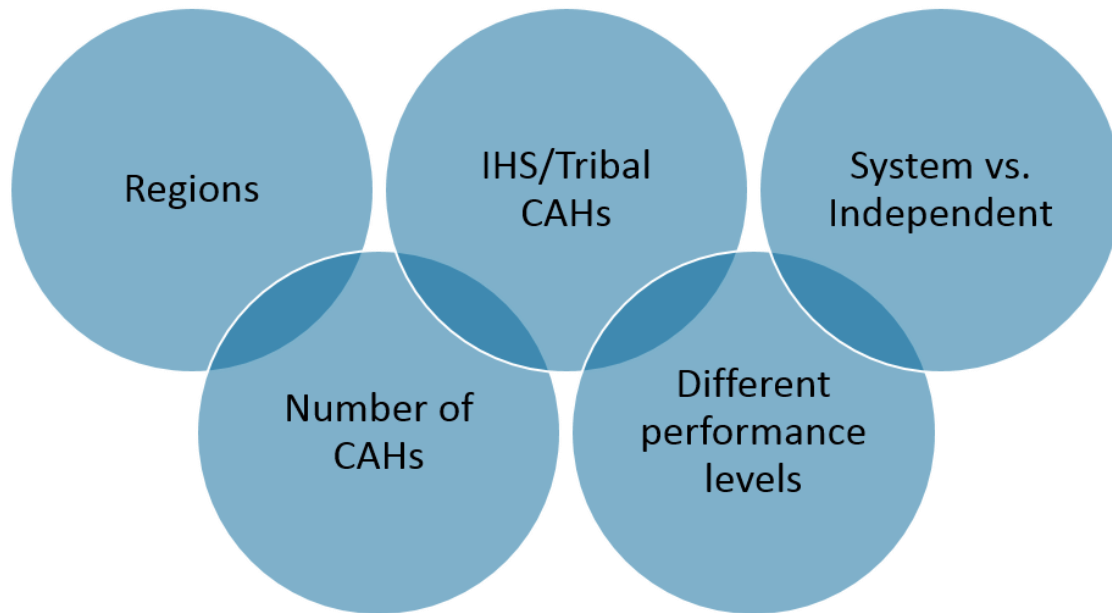
## July 17, 2018

**Yvonne Chow, MPP**  
**MBQIP Coordinator, HSD**  
**Federal Office of Rural Health Policy (FORHP)**  
**Health Resources and Services Administration (HRSA)**





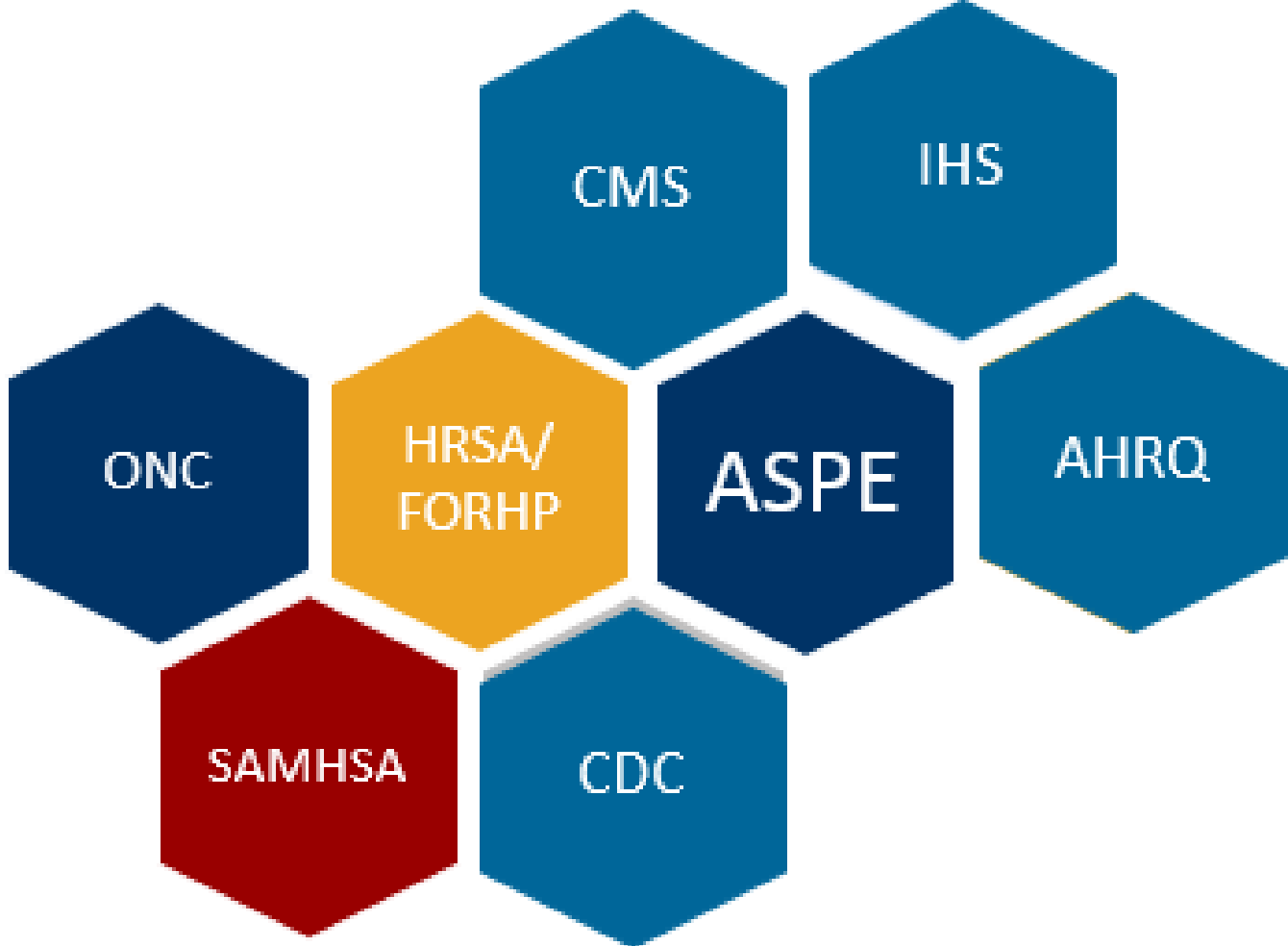
# Subgroups within MBQIP







# Collaborations with Partners



# RQITA: Rural Quality Improvement Technical Assistance



## Recent Tools and Resources

- [MBQIP Fundamentals](#)
  - MBQIP Data Reports Anticipated Release Dates
- [CAH eCQM Resource List](#)
- [National Quality Reporting Crosswalk for CAHs](#)

## Upcoming Tools and Resources

- RQITA Annual Assessment
- Abstraction for Accuracy: Summary document
- One-on-One Telephone Interviews
- Short-term focus groups

# FMT: Flex Monitoring Team



## Quality Peer Group Indicators for CAHs

- Adjusted annual admissions
- System-affiliation
- Census region



# Where are we going?/Are we there yet?



# A Different Perspective



**The Storseisundet Bridge Atlantic Road, Norway**

# Coming around the bend



- MBQIP benchmarks/goals
- Reporting out more/sharing data back more often
- Improvements in data reports

# Current MBQIP Status



**99%** Signed MOUs to participate in MBQIP

**93%** Reporting in at least one quarter in at least two domains

**1,224** CAHs enrolled in NHSN



# How We Tell the MBQIP Story

## MBQIP Overall

PIMs measures

FMT Evaluation  
and Reports

MBQIP  
Reporting Rates

**NEW** Quality  
Benchmark

## MBQIP Core Measures

Patient  
Safety/Inpatient

Outpatient

Care Transitions

Patient  
Engagement



# MBQIP Quality Improvement Benchmark (QIB)

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## Purpose

- To better inform MBQIP progress and set goals for the program
- To better understand improvement rates at the national, state, and CAH level
- Provide more flexibility to splice/dice data
- Provide more targeted technical assistance

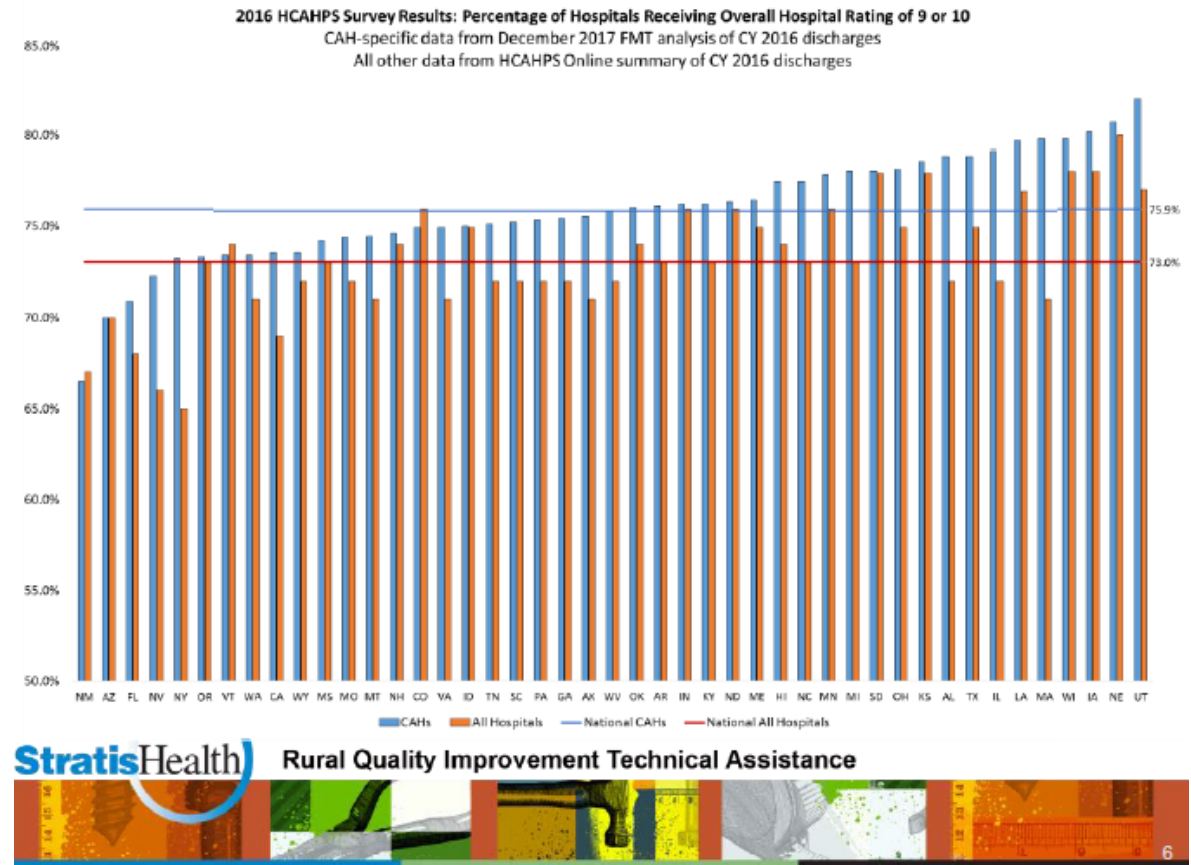


# MBQIP Quality Improvement Benchmark, cont.

Outpatient	Total Hospitals Submitting Data	1,335	
	Percent of Hospitals Included in Calculation	71%	Percent of Hospitals showing improvement in at least one outpatient measure or meeting the 90 <sup>th</sup> percentile 93%

# Reporting out more/sharing data back

- Improvements to MBQIP Virtual Knowledge Groups
- Best practices from state Flex performance narratives, Flex data tables, other elements for progress reports (as applicable)





# Improvements in Data Reports

## NHSN Patient Safety Component: Annual Facility Survey

NHSN Annual Facility Survey	Your Hospital's Performance for Previous and Current Survey Years		CAH State Percentage for Current Survey Year		CAH National Percentage for Current Survey Year		ALL National Current Survey Year
	Previous Survey Year: 2016	Current Survey Year: 2017	Percentage of CAHs Meeting Element	# CAHs with MBQIP MOU Submitting Data	Percentage of CAHs Meeting Element	# CAHs with MBQIP MOU Submitting Data	Percentage of ALL National Meeting Element
Element 1: Leadership	N/A	Y	100%	9	82%	1030	N/A
Element 2: Accountability	N/A	Y	100%	9	93%	1030	N/A
Element 3: Drug Expertise	N/A	Y	100%	9	94%	1030	N/A
Element 4: Action	N/A	Y	100%	9	95%	1030	N/A
Element 5: Tracking	N/A	Y	100%	9	81%	1030	N/A
Element 6: Reporting	N/A	Y	89%	9	85%	1030	N/A
Element 7: Education	N/A	Y	100%	9	83%	1030	N/A
All Elements Met	N/A	7	89%	9	57%	1030	N/A







# Contact Information

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