## FY 2015 – 17: Medicare Beneficiary Quality Improvement Project (MBQIP) Measures

	Patient Safety	Patient Engagement	Care Transitions	Outpatient
Core Improvement Initiatives	Patient Safety  OP-27: Influenza Vaccination Coverage Among Healthcare Personnel (HCP) (Facilities report a single rate for inpatient and outpatient settings)  IMM-2: Influenza Immunization	Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) The HCAHPS survey contains 21 patient perspectives on care and patient rating items that encompass nine key topics:  Communication with Doctors  Responsiveness of Hospital Staff Pain Management Communication about Medicines Discharge Information Cleanliness of the Hospital Environment Quietness of the Hospital Environment Transition of Care	Care Transitions  Emergency Department Transfer Communication (EDTC) 7 sub-measures; 27 data elements; 1 composite  • EDTC-1: Administrative Communication (2 data elements)  • EDTC-2: Patient Information (6 data elements)  • EDTC-3: Vital Signs (6 data elements)  • EDTC-4: Medication Information (3 data elements)  • EDTC-5: Physician or Practitioner Generated Information (2 data elements)  • EDTC-6: Nurse Generated Information (6 data elements)  • EDTC-7: Procedures and Tests (2 data elements)  • All-EDTC: Composite of All 27 data elements	Over the dian Time to Fibrinolysis  OP-1: Median Time to Fibrinolysis  OP-2: Fibrinolytic Therapy Received within 30 minutes  OP-3: Median Time to Transfer to another Facility for Acute Coronary Intervention  OP-4: Aspirin at Arrival  OP-5: Median Time to ECG  OP-18: Median Time from ED Arrival to ED Departure for Discharged ED Patients  OP-20: Door to Diagnostic Evaluation by a Qualified Medical Professional  OP-21: Median Time to Pain Management for Long Bone Fracture  OP-22: Patient Left Without Being Seen
		The survey also includes four screener questions and seven demographic items. The survey is 32 questions in length.	•	Being Seen

## **Medicare Beneficiary Quality Improvement Project (MBQIP) Measures**

	Patient Safety	Patient Engagement	Care Transitions	Outpatient
	Healthcare Acquired		Discharge Planning	ED Throughput
	Infections (HAI)		Potential measurement TBD	• <b>ED-1</b> : Median Time from
	<ul> <li>CLABSI: Central Line-</li> </ul>		with FORHP	ED Arrival to ED Departure
	Associated Bloodstream			for Admitted ED Patients
	Infection		Medication Reconciliation	!
	CAUTI: Catheter-Associated		Potential measurement TBD	• ED-2: Admit Decision Time
	Urinary Tract Infection		with FORHP	to ED Departure Time for
	C. diff: Clostridium difficile			Admitted Patients
	Infection			
	MRSA: Methicillin-resistant			Stroke
	Staphlococcus aureus			• <b>OP-23:</b> ED – Head CT or
	B. J. J. J. C			MRI Scan Results for Acute
	Perinatal Care			Ischemic Stroke or
	PC-01: Elective Delivery			Hemorrhagic Stroke
Additional				Patients who Received
	Pneumonia			Head CT or MRI Scan
Improvement	Proportion of patients			Interpretation Within 45 Minutes of ED Arrival
Initiatives	hospitalized with Pneumonia – potentially avoidable			Ivillutes of ED Afrival
	complications			Surgery/Surgical Care
	Complications			Surgery/Surgical Care
	Falls			<ul> <li>OP-25: Safe Surgery</li> <li>Checklist Use</li> </ul>
	Potential measurement around:			Checklist Ose
	Falls with Injury			
	Patient Fall Rate			
	Screening for Future Fall Risk			
	23. 26			
	Adverse Drug Events (ADE)			
	Potential measurement around:			
	Opioids			
	Glycemic Control			
	Anticoagulant Therapy			
	Patient Safety Culture Survey			

## **Medicare Beneficiary Quality Improvement Project (MBQIP) Measures**

	Patient Safety	Patient Engagement	Care Transitions	Outpatient
Additional Improvement Initiatives	Reducing Readmissions (These measures are automatically calculated for hospitals using Medicare Administrative Claims Data)  Stroke  • STK-1, STK-8  All retired by the Centers for Medicare & Medicaid Services (CMS) as of 1/1/2016  • Proportion of patients hospitalized with Stroke — potentially avoidable complications			•
	Venous Thromboembolism (VTE)  • VTE-1, VTE-2, VTE-3 All retired by the Centers for Medicare & Medicaid Services (CMS) as of 1/1/2016			