

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			
<i>Patient Safety/Inpatient</i>	<i>Patient Engagement</i>	<i>Care Transitions</i>	<i>Outpatient</i>
<p>HCP/IMM-3 (formerly OP-27): Influenza Vaccination Coverage Among Healthcare Personnel (HCP)</p> <p>Antibiotic Stewardship: Measured via Center for Disease Control National Healthcare Safety Network (CDC NHSN) Annual Facility Survey</p>	<p>Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS)</p> <p><i>The HCAHPS survey contains 21 patient perspectives on care and patient rating items that encompass eight key topics:</i></p> <ul style="list-style-type: none"> • 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 <p><i>The survey also includes screener questions and demographic items. The survey is 29 questions in length.</i></p>	<p>Emergency Department Transfer Communication (EDTC)</p> <p><i>1 composite; 8 elements</i></p> <ul style="list-style-type: none"> • 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 	<p>*AMI:</p> <ul style="list-style-type: none"> • OP-2: Fibrinolytic Therapy Received within 30 minutes • OP-3: Median Time to Transfer to another Facility for Acute Coronary Intervention <p>ED Throughput</p> <ul style="list-style-type: none"> • OP-18: Median Time from ED Arrival to ED Departure for <i>Discharged</i> ED Patients • OP-22: Patient Left Without Being Seen <p><small>*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.</small></p>

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Additional MBQIP Measures			
<i>Patient Safety/Inpatient</i>	<i>Patient Engagement</i>	<i>Care Transitions</i>	<i>Outpatient</i>
<p>Healthcare-Associated Infections (HAI)</p> <ul style="list-style-type: none"> • CLABSI: Central Line-Associated Bloodstream Infection • CAUTI: Catheter-Associated Urinary Tract Infection • CDI: <i>Clostridioides difficile</i> (<i>C.diff</i>) Infection • MRSA: Methicillin-resistant <i>Staphylococcus aureus</i> • SSIs: Surgical Site Infections Colon or Hysterectomy <p>Perinatal Care</p> <ul style="list-style-type: none"> • PC-01: Elective Delivery • PC-05: Exclusive Breast Milk Feeding (eCQM) <p>Falls</p> <ul style="list-style-type: none"> • Falls with Injury • Patient Fall Rate • Screening for Future Fall Risk <p>Adverse Drug Events (ADE)</p> <ul style="list-style-type: none"> • Opioids • Glycemic Control • Anticoagulant Therapy <p>Patient Safety Culture Survey</p> <p>Inpatient Influenza Vaccination</p> <p>eQMs</p> <ul style="list-style-type: none"> • VTE-1: Venous Thromboembolism Prophylaxis • Safe Use of Opioids: Concurrent Prescribing • ED-2: Median Admit Decision Time to ED Departure Time for Admitted Patients 	<p>Emergency Department Patient Experience</p>	<p>Discharge Planning</p> <p>Medication Reconciliation</p> <p>Swing Bed Care</p> <p>Claims-Based Measures <i>Measures are automatically calculated for hospitals using Medicare Administrative Claims Data</i></p> <ul style="list-style-type: none"> • Readmissions • Complications • Hospital Return Days 	<p>Chest Pain/AMI</p> <ul style="list-style-type: none"> • Aspirin at Arrival • Median Time to ECG <p>ED Throughput</p> <ul style="list-style-type: none"> • Door to Diagnostic Evaluation by a Qualified Medical Professional

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.