

Frequently Asked Questions – New MBQIP Core Measure Set

Overarching Questions:

Is the new MBQIP core set of measures proposed or is it final?

- Currently, the new MBQIP core set is proposed. FORHP is soliciting feedback from State Flex Programs through August 31, 2024, so that we can adjust the core set before the ‘launch’ date of September 1, 2025, if needed. FORHP will provide an update when the core set is finalized after reviewing all the feedback received.
- Please share questions, comments, and feedback with your Flex Project Officer.

Where can I locate the recording for the August 10 VKG where the new MBQIP measures were introduced?

- The August 10 VKG recording can be found in the Flex Program Forum:
<https://ruralcenter.sharepoint.com/sites/Flex-Forum/SitePages/ProjectHome.aspx>
- The Flex Program Forum is now maintained on an external SharePoint site managed by TASC. For questions or to request access to the Flex Program Forum, please email tasc@ruralcenter.org.
- The August 30 follow-up Q&A recording can be accessed here: https://hrsa-gov.zoomgov.com/rec/share/Lez5bF8tg3FP5fSUdHls651MiAfN_AlvcLuLZPhkPyTUAtRyIJP_vnd13yg_STQe.kWdW8B80YJHg8cNz?startTime=1693418663000

Is FMT still creating the MBQIP reports or is that going back to Telligen?

- FMT will continue to create the MBQIP reports.

When will TA resources be available for State Flex Programs? For hospitals?

- FORHP and the RQITA team will work together to build TA resources and anticipate they will be available to State Flex Programs and hospitals prior to September 1, 2025.

How is this different from how we’ve been participating in MBQIP?

- FORHP expects that State Flex Programs will track hospital participation in MBQIP by using a tracking spreadsheet to determine how hospitals are reporting all MBQIP core measures. There are no more waivers to apply to. Instead, State Flex Programs will submit a measure tracking spreadsheet with their End of Year report. There are no longer any requirements per “domain.” hospitals participating in MBQIP are expected to report ALL measures on the MBQIP core set across all measure topic areas. Lastly, in comparison to previous years, there will be an optional measure depending on adequacy of patient volume to report for HCAHPS.

Timeline Questions:

When do the new MBQIP core set measures launch for hospital reporting?

- Tracking of non-reporting hospitals for the new MBQIP core measures starts in **September 2025** (this would be during the Flex grant year that is September 1, 2025 – August 31, 2026).

- September 2024 - August 2025 is the time for State Flex Programs to prepare hospitals to participate in reporting the new MBQIP measure core set.

When do I need to begin talking to hospitals about the new MBQIP measures?

- You can start conversations with hospitals now! FORHP released these MBQIP updates now to allow State Flex Programs to have plenty of time to work with their partners on planning for MBQIP participation.
- FORHP expects all State Flex Programs to build capacity for reporting new MBQIP measures starting **September 2024 - August 2025**.

When are hospitals expected to *start* reporting the MBQIP core measures?

- FORHP expects to capture hospital reporting for the MBQIP core measures starting in **September 2025** (this would be during the Flex grant year that is September 1, 2025 – August 31, 2026).

When do I have to submit tracking for all measures to FORHP?

- **November 2026**. State Flex Programs will submit tracking for non-reporting hospitals with their Flex End of Year Report.

Is FORHP going to provide a template for tracking non-reporting hospitals?

- Yes, FORHP is working in collaboration with FMT and the RQITA team to produce a template and will share the template with State Flex Programs prior to September 2025.

How should I plan to engage hospitals in participating in MBQIP?

- While hospitals are reporting measures on an ongoing basis, FORHP encourages State Flex Programs to engage hospitals in MBQIP participation by beginning to actively report (if they haven't already) the MBQIP core measures. Communication with hospitals can begin now; but FORHP expects that all State Flex Programs assess hospital reporting capacity beginning in September 2024 – August 2025. Starting in September 2025, FORHP expects that all hospitals will be participating in reporting the MBQIP measure core set.

Are all CAHs required to participate in reporting the MBQIP measure core set?

- Yes. In order to meet the MBQIP goals, FORHP encourages all CAHs to participate in MBQIP measure reporting. The overall goal of MBQIP is to improve health outcomes for rural populations and this goal is accomplished through the support we provide to CAHs to deliver safe and high-quality care. Quality measures help assess if the care in a hospital meets quality goals. CAHs are already reporting most MBQIP measures to other CMS programs, and participation in quality improvement activities only strengthens CAH capacity to meet the goal of MBQIP.

What happens if a CAH in my state (or multiple) cannot participate in MBQIP?

- FORHP understands that there are many reasons why a CAH may not participate in MBQIP, which is why we will provide a template for State Flex Programs to track non-reporting CAHs. If a CAH is unable to participate in reporting a specific measure, State Flex Programs are simply asked to provide that information to FORHP in the tracking template along with a reason why the CAH(s) cannot report a measure(s). This information will help FORHP and RQITA understand reporting challenges to develop resources that support measure reporting going forward.

Do I have to redo the deliverables for my 2023 Flex sub-contracts and our Flex work plan?

- No. September 2023 through September 2025 is the time to learn about the updated MBQIP core measures and have conversations with your sub-contractors about how to best prepare hospitals to meet the MBQIP core set measure reporting expectations. This is also the time to assess if State Flex Programs have needs to re-adjust Flex work plans.

Can you clarify how often we need to report the "why" people are not reporting?

- One time per year. State Flex Programs are expected to track why hospital(s) are not able to report one or multiple MBQIP measures. This information will be captured in the tracking template that will be submitted to FORHP with the End of Year Report.

Measure-specific Questions:

How will the new measures be reported?

- Each measure in MBQIP has a unique reporting channel. For example, for Antibiotic Stewardship, hospitals report the measure through NHSN, while EDTC gets reported to the State Flex Program using the EDTC template that FORHP provides each year. FORHP, in partnership with the RQITA team, will be producing a detailed break-down of reporting channels by measure.

When will the revised MBQIP Measure Reporting Table and corresponding measure Fact Sheets be released?

- FORHP expects to release an updated MBQIP Measure Reporting Table in December 2023, which will outline the reporting timeframes for each proposed measure in the MBQIP measure core set. This table will be updated by **August 31, 2024** when FORHP expects to finalize the MBQIP measure core set (refer to first question above).
- MBQIP measure fact sheets will be released in the **Fall of 2023**.

What support will be given to hospitals on reporting eQMs? Will hospitals that have thus far have not participated in the Promoting Interoperability program be at a disadvantage?

- At least one third of all CAHs are already reporting eCQMs. To ease the transition to eCQM reporting, FORHP has selected one eCQM for the updated MBQIP measure core set: Safe Use of Opioids. Hospitals can receive educational resources and support from the RQITA team to enhance their reporting for this measure, depending on specific hospital needs. Therefore, the hospitals that have not participated in the Promoting Interoperability Program will not suffer from this change as enhanced support through FORHP's RQITA program will be available to the state and to each facility, as requested.

Is it correct that hospitals will have to report on all measures and not choose from a menu of options?

- Yes, this is correct. Hospitals that participate in MBQIP are expected to report on all measures in the MBQIP measure core set. There is currently no "menu" of measures as FORHP is seeking to identify measures that are rural-relevant as part of the measure core set. The MBQIP measure core set will be updated regularly to ensure the measures are feasible for hospitals to report. FORHP also took this approach to harmonize measure reporting for MBQIP with other Federal reporting programs that many hospitals are already participating in.

Are there plans to find other sources for providing patient satisfaction beyond HCAHPS?

- Yes, FORHP has a partnership with the Agency for Healthcare Research and Quality (AHRQ) whose efforts are focused in part to the development of measures that evaluate patient experience along with other components of care such as effectiveness and safety, which are essential components of high-quality care. FORHP, in partnership with the RQITA team, FMT, and AHRQ will continue to identify the best opportunities to capture patient experience through the suite of CAHPS measures that are currently being collected and reported to either CMS or AHRQ for potential use in MBQIP. As FORHP continues conversations in developing this work, information will be updated and reflected for MBQIP accordingly.

Are Z-Codes needed for the new Social Drivers of Health (SDOH) Measures from CMS that are now part of the MBQIP measure core set?

- As part of the 2023 IPPS Final Rule two brand new measures (SDOH-1 and SDOH-2) are being mandated by CMS to report. In light of this decision, FORHP integrated the same measures into MBQIP. These measures are reported to the CMS Inpatient Quality Reporting Program. While Z-codes are used to identify when a patient has a social need, such as housing security services, CMS ultimately decided to avoid the use of Z-codes and instead, developed these as attestation measures. These are structural quality measures that intend to create meaningful collaboration between healthcare providers and community-based organizations to address health risks that fall outside of the control of hospitals.

When will the CAH Quality Infrastructure Assessment be finalized?

- FORHP is aiming to finalize the CAH Assessment in late October, 2023. We will share more details and information on the assessment during the webinar scheduled for October 25, 2023 at 3pm ET.

What type of support is planned to assist CAHs to effectively implement the 9 elements of the CAH Quality Infrastructure measure?

- The RQITA team will be working on developing resources to support implementation of the 9 elements for CAH Quality Infrastructure. Resources will be tailored to each element. In order to develop these tailored resources, our teams will need to have baseline data from the Assessment, so a release date for these resources will be communicated after the Assessment closes.

Additional Resources Related to FAQs:

If anyone is looking for tools for CAHs for interoperability/eCQMs, Mountain Pacific Quality Health has a training series on their website that is a great intro. Stratis also has slides with timelines, links etc that I think are on The Center's website but were presented at an earlier RQITA webinar.

<https://www.ruralcenter.org/resources/critical-access-hospital-ecqm-resource-list>

Mountain Pacific Resources - <https://www.mpqhf.org/corporate/health-and-transformation-services/hts-services/education-and-tools/>

Here's the specifications for the Safe Use of Opioids eCQM:

<https://ecqi.healthit.gov/ecqm/eh/2023/cms0506v5>