

MBQIP Measure Change Summary Removed Outpatient Measure OP-5 Changes to HCAHPS and OP-27 December 2018

Removal from MBQIP

The Centers for Medicare & Medicaid Services (CMS) has announced that one chart-abstracted inpatient measures currently required for MBQIP will be removed following **Q1 2019** data submission:

- **OP-5: Median Time to ECG**

Submission of OP-5 will be included in the evaluation of CAH participation in MBQIP for FY 2019, but will be removed from [MBQIP evaluation criteria](#) and MBQIP reports starting with **Q2 2019** discharges (discharges as of **April 1, 2019**). **CAHs should continue to collect this measure through Q1 2019 discharges (due August 1, 2019)**. Starting with **Q2 2019** discharges, the QualityNet warehouse will no longer be accepting submission of data for these measures.

Background

As part of the annual rule-making process, CMS regularly removes measures from the Inpatient and Outpatient Quality Reporting programs (IQR, OQR). Once CMS has removed a measure from the IQR or OQR program, it is no longer possible to submit data for this measure to the QualityNet Warehouse. When feasible, FORHP works to align MBQIP measures with other Federal reporting programs. Thus, removal of measures from the IQR or OQR programs typically results in removal of those measures from MBQIP.

The final rule provided additional information regarding removal and changes to these measures.

- **OP-5: Median Time to ECG** – CMS indicated that the rationale for removing this measure is that the cost to providers associated with submitting data outweighs the benefits of its continued use in the program. Based on analysis of data submitted by 1,995 hospitals from Quarter 3 in 2016 through Quarter 2 in 2017, the variation in average measure performance between hospitals is minimal, with a median time to ECG of less than two minutes between the 75th and 90th percentile hospitals. Furthermore, the difference between the 25th and 75th percentile, distinguishing between high and low performers, is only 5.5 minutes. Given clinical guidelines recommend that ECG be obtained within 10 minutes of arrival to the emergency department, CMS does not believe this difference is clinically significant and variations are not sufficiently large to inform beneficiary decision-making to justify the cost of collecting the data.

Changes to MBQIP Core Measures

CMS has also announced the changes below to current MBQIP measures. **Please Note!** These changes will not result in changes to MBQIP Core Measures as far as data submission is concerned.

- **OP-27: Influenza Vaccination Coverage Among Healthcare Providers (HCP)** - Will no longer be a part of the Outpatient Quality Reporting Program. However, this measure is included in the Inpatient Quality Reporting Program under the measure name HCP. Therefore, this will remain an MBQIP Core Measure under the new name HCP. Data for Q4 2018 through Q1 2019 is due May 15, 2019.
- **HCAHPS Composite 4: Pain Management** – The three recently revised pain communication questions will be removed from the Healthcare Consumer Assessment of Healthcare Providers and Systems (HCAHPS) survey beginning with October 2019 discharges. This will not change the status of HCAHPS as a

core measure for MBQIP. In most instances, the change will be made by the hospitals vendor. CAHs that are self-administering the survey will need to follow guidance available from [HCAHPSOnline.org](https://www.hcahpsonline.org).

Next Steps

- Information about the changes to these measures will be included in a future MBQIP Monthly that Flex programs can use as a communication mechanism to CAHs.
- Flex programs should encourage their CAHs to continue to report measure data for OP-5 through Q1 2019 (data submission deadline of August 1, 2019).
- Flex programs should communicate the name change from OP-27 to HCP and reiterate the importance of CAHs continuing to report their healthcare personnel influenza vaccination data through to the National Healthcare Safety Network (NHSN).
- If state Flex programs know of any CAHs that are self-administering HCAHPS they should notify those facilities of the forthcoming changes to the survey.
- FORHP and RQITA will be updating MBQIP resources and documents to reflect these measure changes.