MBQIP Open Call for Minnesota Critical Access Hospitals (CAHs)

July 12, 2023
1:00 p.m. – 2:00 p.m.

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Stratis Health Project Team

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Today's Agenda:

- Reminders:
  - Abstraction Training Modules
  - Individual Consultation
  - AMI measure reporting ending
- Review data reports
- Data submission – what's new
- QI – what are priority topics everyone is working on
- Open Discussion

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Reminders

- Abstraction Training Modules:
  - Minnesota Critical Access Hospital Reporting and Improvement Assistance - Stratis Health
  - Individual consultation with Robyn to check for accuracy of abstraction
- AMI measures reporting ending with Q1 2023 data submission

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Core MBQIP Measures Reminder

Core MBQIP Measures			
Patient Safety/Inpatient	*Patient Engagement*	*Care Transitions*	*Outpatient*
HCP/IMM-3 (formerly OP-27): Influenza Vaccination Coverage Among Healthcare Personnel (HCP) **Antibiotic Stewardship:** Measured via Center for Disease Control National Healthcare Safety Network (CDC NHSN) Annual Facility Survey	**Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS)** *The HCAHPS survey contains 21 patient perspectives on care and patient rating items that encompass eight key topics:* • 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 *The survey also includes screener questions and demographic items. The survey is 29 questions in length.*	**Emergency Department Transfer Communication (EDTC)** *1 composite; 8 elements* • **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	**AMI:** • **OP-2:** Fibrinolytic Therapy Received within 30 minutes • **OP-3:** Median Time to Transfer to another Facility for Acute Coronary Intervention **ED Throughput** • **OP-18:** Median Time from ED Arrival to ED Departure for *Discharged* ED Patients • **OP-22:** Patient Left Without Being Seen

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MBQIP Data Reporting Status

- Q4 2022: 75 CAHs reported on at least one measure
- Out of the 75 submitting:
  - 3 did not submit AMI (OP-2,OP-3) and ED-Throughput (OP-18)
  - 6 did not submit Healthcare Personnel (HCP) Influenza Vaccination
  - All 75 submitted OP-22

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MBQIP Data Reporting Status

Q2 2023 EDTC – ALL 77 CAHs reported!!!

MBQIP Data Reporting Deadlines Coming up

- EDTC Q2 2023 due July 31st

- AMI and ED Throughput Q1 2023 due August 1st
  - AMI measures – continue to submit data through Q1 2023 encounters

How to make sure your data submission was accepted and not rejected

After your data is submitted you should get confirmation that the data was received. To check and make sure the data was accepted and not rejected, run the Case Status Summary Report. This report is run from the HQR portal. To Run the Case Status Summary Report:

1. Log in to HQR via your HARP account.
2. Under the **Dashboard** on the left-hand side of the screen, select **Data Results** and **Chart Abstracted**.
3. Select the **File Accuracy** tab.
4. Under **Program** chose **OQR** (Outpatient Quality Reporting).
5. Under **Report** select **Case Status Summary**.
6. Under Encounter Quarter select the quarter for the data you have just submitted.
7. Click on **Export CSV**. Your report will appear in an Excel format showing the number of cases that made it to the warehouse for each measure submitted and the number accepted and/or rejected.

If your Case Status Summary Report shows that cases have been rejected, run the Submission Detail Report. This report will show you why your cases have been rejected. Correct the errors and resubmit those cases. Follow the above steps but select **Submission Detail** as your report.

If your Case Status Summary Report shows no data fits the criteria, then the data you submitted did not make it to the warehouse. Something must have gone wrong with your submission so try again.

Do not wait until right before the data due date to submit and check on your data. If you have rejected cases, you will want to have time to correct the errors and resubmit. Once the due date has passed, no further data will be accepted for the quarter.

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CMS Data Element Change

- **Starting with July 1, 2023 encounters**, the Centers for Medicare and Medicaid Services (CMS) measure data collection question is changing from **"What was the patient's sex on arrival"** to "**What is the patient's sexual orientation and/or gender identity?"** The data element is being updated to be able to capture additional information to help evaluate health equity.

- Reference the Hospital Outpatient Quality Reporting Specifications Manual version 16.0a

- The new version of CART that contains the updated sex data elements that are effective July 1, 2023 has been delayed. Data for Q3 2023 should not be entered in CART until the new version is made available.

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Quality Improvement Priorities

• What are priority topics everyone is working on?

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Wrap up

• MBQIP Open Call back in September – to be scheduled
• EDTC QI Open Call Schedule/Register:
  Minnesota Critical Access Hospital Reporting and Improvement
  Assistance - Stratis Health
  – **Next call: August 16, 2023| 11:00 – 12:00 p.m.**
• Work with Stratis Health to determine and correct reporting issues before next due dates in July-August
• Will be contacted by Robyn
• Team is always available to answer any questions

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See you again soon!

Thank you!

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