

## MBQIP Reporting Requirements & Deadlines\_Wyoming CAHs

| Hospital Outpatient Quality Reporting (OQR) Program Important Dates & Deadlines  |   |   |  |   |
|--|---|---|--|---|
| Included Outpatient Clinical Chart-Abstraction Measures  | Encounter Quarter<br>Time Frame   | Clinical Submission<br>Due Date   | Population & Sampling<br>Due Date  | Reporting Mechanism   |
| AMI_OP-2: Fibrinolytic Therapy Received Within 30 Minutes  | Q4 2018 October-December  | May 1st 2019  | May 1st 2019   | <i>Data collected via CART application or Vendor Tool and submitted via the secure pages of QualityNet website</i>  |
| AMI_OP-3: Median Time to Transfer to another Facility for Acute Coronary Intervention  | Q1 2019 January-March   | August 1st 2019   | August 1st 2019  |   |
| AMI_OP-5: Median Time to ECG   | Q2 2019 April-June  | November 1st 2019   | November 1st 2019  |   |
| ED_OP-18: Median Time from ED Arrival to ED Departure for Discharged ED Patients   | Q3 2019 July-September  | February 1st 2020   | February 1st 2020  |   |
| Included Outpatient Web-Based Measures   | Encounter Quarter - Time Frame  | Submission Dates  |  | Reporting Mechanism   |
| ED_OP-22: Left Without Being Seen* (Web-based)   | January 1st-December 31st 2018<br>January 1st-December 31st 2019                                  | <i>no later than</i> May 15th 2019<br><i>no later than</i> May 15th 2020      |  | OP-22 entered directly into QNet website  |
| HAI_OP-27: Influenza Vaccination Healthcare Personnel (Web-based)<br><i>Please Note - Check with your Infection Preventionist, it's submitted by them to NHSN.<br/>Reminder - The Inpatient IMM:2 measure is different from the OP-27 measure. The IMM:2 measure is for acute-care inpatients and OP-27 is for healthcare personnel.</i>   | October 1, 2017-March 31, 2018<br>October 1, 2018-March 31, 2019                                  | <i>no later than</i> May 15th 2019<br><i>no later than</i> May 15th 2020      |  | OP-27 entered directly into NHSN website  |
| Hospital Inpatient Quality Reporting (IQR) Program Important Dates & Deadlines   |   |   |  |   |
| Included Inpatient Clinical Chart-Abstraction Measures   | Encounter Quarter<br>Time Frame   | Clinical Submission<br>Due Date   | Population & Sampling<br>Due Date  | Reporting Mechanism   |
| <b>ED-1:</b> Median Time from ED Arrival to ED Departure for Admitted ED Patients<br><b>ED-2:</b> Admit Decision Time to ED Departure Time for Admitted Patients<br><b>IMM-2:</b> Influenza Immunization<br><i>Reminder: For MBQIP Flex CAHS should continue to report this measure through Q4 2018 discharges (due 5/15/2019); afterwards voluntary.<br/>Reminder: For MBQIP Flex CAHS should continue to report this measure through Q4 2019 discharges (due 5/15/2020); afterwards voluntary.</i> | Q4 2018 October-December<br>Q1 2019 January-March<br>Q2 2019 April-June<br>Q3 2019 July-September | May 15th 2019<br>August 15th 2019<br>November 15th 2019<br>February 15th 2020 | May 1st 2019<br>August 1st 2019<br>November 1st 2019<br>February 1st 2020  | <i>Data collected via CART application or Vendor Tool and submitted via the secure pages of QualityNet website to the Feds i.e. CMS</i>                           |
| Hospital Consumer Assessment of Healthcare Providers & Systems (HCAHPS)  |   |   |  |   |
| Patient Experience Survey  | Encounter Quarter - Time Frame  | Submission Due Date   |  | Reporting Mechanism   |
| HCAHPS: Hospital Consumer Assessment of Healthcare Providers and Systems<br><i>For more information please check out <a href="http://www.hcahpsonline.org/home.aspx">http://www.hcahpsonline.org/home.aspx</a></i>   | Q4 2018 October-December<br>Q1 2019 January-March<br>Q2 2019 April-June<br>Q3 2019 July-September | April 3rd 2019<br>July 3rd 2019<br>October 2nd 2019<br>January 2nd 2020       |  | <i>Conducted &amp; reported by a CMS Approved Vendor</i><br><a href="http://www.hcahpsonline.org/app_vendor.aspx">http://www.hcahpsonline.org/app_vendor.aspx</a> |
| Emergency Department Transfer Communication (EDTC) Important Dates & Deadlines   |   |   |  |   |
| EDTC Chart-Abstraction Measures  | Encounter Quarter - Time Frame  | Submission Due Date   | Reporting Mechanism  |   |
| EDTC-1: Administrative Communications<br>EDTC-2: Patient Information<br>EDTC-3: Vital Signs<br>EDTC-4: Medication Information<br>EDTC-5: Physician or Practitioner Generated Info.<br>EDTC-6: Nurse Generated Info.<br>EDTC-7: Procedures and Tests  | Q1 2019 January-March<br>Q2 2019 April-June<br>Q3 2019 July-September<br>Q4 2019 October-December | April 30th 2019<br>July 31st 2019<br>October 31st 2019<br>January 31st 2020   | <i>Data is entered into the EDTC Excel Data Collection Tool or directly into QHi. The Quarterly Report then needs to be submitted to</i><br><a href="mailto:Kyle.Cameron@wyo.gov">Kyle.Cameron@wyo.gov</a><br><b>AND</b><br><a href="mailto:Shanelle.VanDyke@QualityReportingServices.com">Shanelle.VanDyke@QualityReportingServices.com</a> |   |

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**Updated: 03.31.2019**

## \* Immunizations

- HCP/OP-27: Influenza vaccination coverage among healthcare personnel
- **IMM-2: Influenza Immunization**

## \* HCAHPS:

- Communication about Nurses
- Communication about Doctors
- Responsiveness of Staff
- **Pain Management**
- Communication about Meds
- Cleanliness of Hospital
- Quietness of Hospital
- Discharge Information
- Care Transitions
- Overall Rating
- Willingness to Recommend

## \* Antibiotics:

Antibiotic stewardship program established based on CDC guidelines

# 2018 MBQIP MEASURES

## \* EDTC:

- 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 Data Elements

## \* Outpatient:

- \* OP-2: Fibrinolytic Therapy Received within 30 minutes
- \* OP-3: Median Time to Transfer to another Facility for Acute Coronary Intervention
- \* OP-5: Median time to ECG
- \* OP-18: Median time ED to discharge
- \* OP-22: Patient left without being seen

## \* Inpatient:

- **ED-1: Median Time from ED Arrival to ED Departure for Admitted ED Patients**
- **ED-2: Admit Decision Time to ED Departure Time for Admitted Patients**

*Note: CAHs should continue to report these measures through 4Q 2018 encounters (due 5/15/2019), CAHs should continue to report this measure through 4Q 2019 encounters (due 5/15/2020), and vendors will continue to report HCAHPS pain management through 09/2019 but it will no longer appear on MBQIP Telligen reports.*