# Medicare Beneficiary Quality Improvement Program
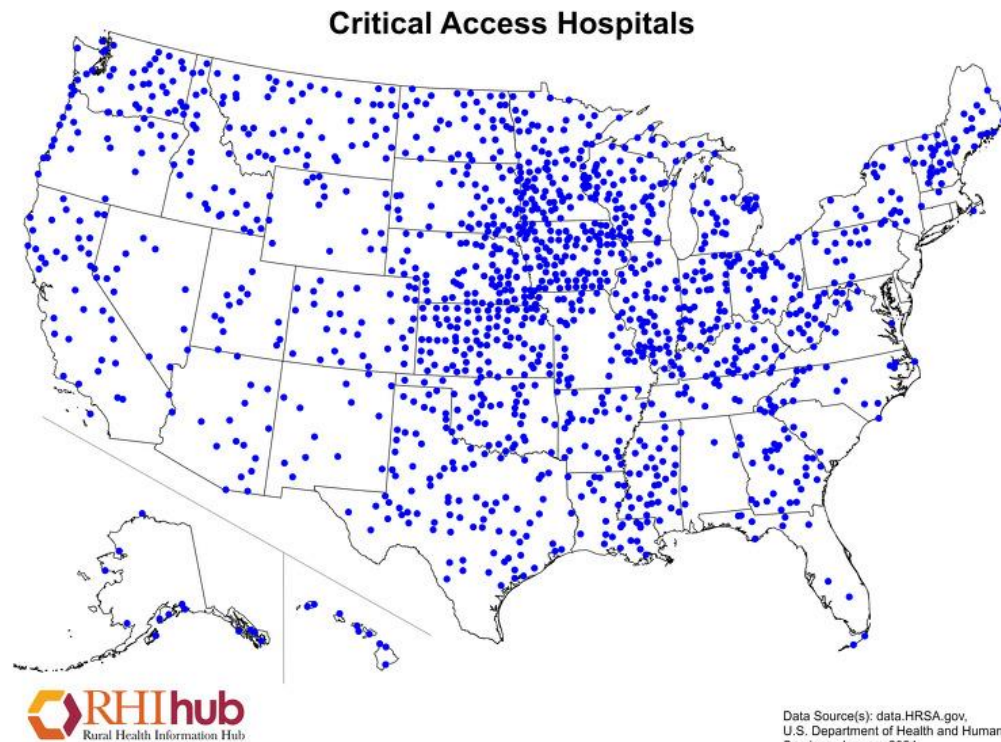## *Reintroduction &*
## *Upcoming Changes*

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# What is [MBQIP](#)?

MBQIP is a Federal program created by the Health Resources and Services Administration to support Critical Access Hospitals with quality reporting and improvement.



**Critical Access Hospitals**

Data Source(s): data.HRSA.gov,
U.S. Department of Health and Human
Services, January 2024

**RHI**hub
Rural Health Information Hub

- **1,368 CAHs in the US**
- **1,360 CAHs participate in MBQIP**
- **100% (8/8) of Vermont CAHs have historically participated in MBQIP**

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# Why participate?

- Requirement for Flex & SHIP-funded activities
    - *ex*: SHIP funds through State Office of Rural Health for offsetting HCAHPS vendor costs
    - *ex*: Minigrants through the Suicide Prevention in the ED QI Project
- Comparative reporting, rural-relevant benchmarking, benchmarked against other CAHs locally and nationally
- Access to technical assistance, support, and quality improvement resources

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# *Current* MBQIP measure set

## Core MBQIP Measures

| Patient Safety/Inpatient | Patient Engagement | Care Transitions | Outpatient |
|---|---|---|---|
| **HCP/IMM-3 (formerly OP-27):** Influenza Vaccination Coverage Among Healthcare Personnel (HCP)<br><br>**Antibiotic Stewardship:** Measured via the Centers for Disease Control and Prevention National Healthcare Safety Network (CDC NHSN) Annual Facility Survey | **Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS)**<br><br>The HCAHPS survey contains 21 patient perspectives on care and patient rating items that encompass eight key topics:<br><br>• Communication with Doctors<br>• Communication with Nurses<br>• Responsiveness of Hospital Staff<br>• Communication about Medicines<br>• Discharge Information<br>• Cleanliness of the Hospital Environment<br>• Quietness of the Hospital Environment<br>• Transition of Care<br><br>The survey also includes screener questions and demographic items. The survey is 29 questions in length. | **Emergency Department Transfer Communication (EDTC)**<br>One composite; eight elements<br><br>• **All EDTC Composite**<br>• Home Medications<br>• Allergies and/or Reactions<br>• Medications Administered in ED<br>• ED provider Note<br>• Mental Status/Orientation Assessment<br>• Reason for Transfer and/or Plan of Care<br>• Tests and/or Procedures Performed<br>• Test and/or Procedure Results | **Emergency Department (ED) Throughput**<br><br>• **OP-18:** Median Time from ED Arrival to ED Departure for Discharged ED Patients<br>• **OP-22:** Patient Left Without Being Seen<br><br>*The AMI Outpatient measures, OP-2 and OP-3 are being removed by the center for Medicare & Medicaid Services (CMS) following submission of Quarter 1 2023 data. |

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# *Upcoming* MBQIP measure set (September <u>2025</u>)

- Six new measures (noted in blue)
- 12 total measures (nine submitted annually, three submitted quarterly)

## 2025 MBQIP Core Measure Set

| Global Measures | Patient Safety | Patient Experience | Care Coordination | Emergency Department |
|---|---|---|---|---|
| • CAH Quality Infrastructure *(annual submission)*<br><br>• Hospital Commitment to Health Equity *(annual submission)* | • Healthcare Personnel Influenza Immunization *(annual submission)*<br><br>• Antibiotic Stewardship *(annual submission)*<br><br>• Safe Use of Opioids (eCQM) *(annual submission)* | • Hospital Consumer Assessment of Healthcare Providers & Systems (HCAHPS) *(quarterly submission)* | • Hybrid Hospital-Wide Readmissions *(annual submission)*<br><br>• SDOH Screening *(annual submission)*<br><br>• SDOH Screening Positive *(annual submission)* | • Emergency Department Transfer Communication (EDTC) *(quarterly submission)*<br><br>• OP-18 Time from Arrival to Departure *(quarterly submission)*<br><br>• OP-22 Left Without Being Seen *(annual submission)* |

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

- *** This is new. Instead of needing to meet minimum participation requirements, information will now be collected annually to identify why hospitals may not be able to report a specific measure. ***

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# 2025 MBQIP Submission Deadline Document

**MBQIP 2025 – Measures Being Added to Core Set**

| Measure ID | Description | MBQIP Domain | Reported To | Submission Process and Deadlines[1,2] | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | Encounter Period | | | | | | | | | |
| | | | | Q3 / 2023 Jul - Sep | Q4 / 2023 Oct - Dec | Q1 / 2024 Jan - Mar | Q2 / 2024 Apr - Jun | Q3 / 2024 Jul - Sep | Q4 / 2024 Oct - Dec | Q1 / 2025 Jan – Mar | Q2 / 2025 Apr - Jun | Q3 / 2025 Jul - Sep | Q4 / 2025 Oct - Dec |
| TBD | CAH Quality Infrastructure | Global Measures | FMT via Qualtrics | MBQIP 2025 Core Measure starting with this measurement period due Dec 15, 2023 | | National CAH Inventory and Assessment Continues Due date TBD | | | | National CAH Inventory and Assessment Continues Due date TBD | | | |
| HCHE | Hospital Commitment to Health Equity | Global Measures | HQR Secure Portal | Hospitals may choose to report to CMS. Data submission is available starting April 1, 2024 Deadline May 15, 2024 (CY 2023 data) | | Hospitals may choose to report to CMS Submission Deadline May 15, 2025 (CY 2024 data) | | | | MBQIP 2025 Core Measure starting with this measurement period Submission Deadline May 15, 2026 (CY 2025 data) | | | |
| Safe Use of Opioids | Safe Use of Opioids-Concurrent Prescribing | Patient Safety | HQR Secure Portal | Hospitals may choose to report to CMS[3]. Deadline February 29, 2024 (CY 2023 data) | | Hospitals may choose to report to CMS[3] Submission Deadline February 28, 2025 (CY 2024 data) | | | | MBQIP 2025 Core Measure starting with this measurement period[3] Submission Deadline February 27, 2026 (CY 2025 data) | | | |
| Hybrid HWR | Hybrid Hospital-Wide Readmission | Care Coordination | HQR Secure Portal | Hospitals may choose to report to CMS Submission Deadline September 30, 2024 (Q3 2023 - Q2 2024 data) | | | | MBQIP 2025 Core Measure starting with this measurement period Submission Deadline September 30, 2025 (Q3 2024 - Q2 2025 data) | | | | Submission Deadline September 30, 2026 (Q3 2025 - Q2 2026 data) | |
| SDOH-1 | Social Drivers of Health (SDOH) Screening | Care Coordination | HQR Secure Portal | Hospitals may choose to report to CMS. Data submission is available starting April 1, 2024 Deadline May 15, 2024 (CY 2023 data) | | Hospitals may choose to report to CMS Submission Deadline May 15, 2025 (CY 2024 data) | | | | MBQIP 2025 Core Measure starting with this measurement period Submission Deadline May 15, 2026 (CY 2025 data) | | | |
| SDOH-2 | Screen Positive for Social Drivers of Health (SDOH) | Care Coordination | HQR Secure Portal | Hospitals may choose to report to CMS. Data submission is available starting April 1, 2024 Deadline May 15, 2024 (CY 2023 data) | | Hospitals may choose to report to CMS Submission Deadline May 15, 2025 (CY 2024 data) | | | | MBQIP 2025 Core Measure starting with this measurement period Submission Deadline May 15, 2026 (CY 2025 data) | | | |

MBQIP Data Submission Deadlines

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# Resources

[MBQIP Measures](#): This guide provides an overview of measures included in the MBQIP 2025 Measure Core set. This Includes information about the data collection, reporting processes, and descriptions for each of the measures.

[MBQIP Measure Core Set Information Guide](#): This recording provides an overview of the MBQIP 2025 measures including reporting details, submission information, and resources for implementation.

[MBQIP 2025 Submission Deadlines](#): This document describes a timeline for upcoming changes to MBQIP.

[The Future of MBQIP: Are you Ready?:](#) This resource includes implementation timeline details for the MBQIP 2025 Core Measure Set. Included are data submission deadlines and data submission details.

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# What should I do right now?

- Continue reporting current MBQIP measures
- You have time! But start familiarizing yourself with upcoming changes (refer to resources on previous slide)
- Be prepared to discuss concerns or difficulties with new measures with VPQHC/SORH
- Connect with your hospital system/vendor to confirm EHR reporting functionalities are in place or on track to be implemented. Know when your updates and server changes are scheduled.
- Consider:
    - Bookmarking measure specification manuals on the [QualityNet](#) website for quick access.
    - Familiarizing yourself with [QualityNet](#) (measure specific manuals, CART tool, register for HARP account)
    - Subscribing to email listservs through [QualityNet](#): (HARP Notify, Quality Net Notifications, CART Notifications (if you use CART), HIQR and HOQR)

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# What to expect from VPQHC?

- Ramp up of technical assistance
    - *newsletter with key MBQIP updates & deadlines*
    - *open MBQIP offices hours*
    - *what else?*
- Distribution of comparative data reports

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