

MBQIP Monthly

Medicare Beneficiary Quality Improvement Project



A publication for Flex Coordinators to share with their critical access hospitals

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Contact your Flex Coordinator if you have questions about MBQIP.

Find your state Flex Coordinator on the [Technical Assistance and Services Center \(TASC\) website](#).

Find past issues of this newsletter and links to other MBQIP resources on TASC's [MBQIP Monthly](#) webpage.

First Episode Now Available: Quality Time: Sharing PIE (performance improvement experience) Conversations

As part of Stratis Health's [National Rural Virtual Quality Improvement Mentor](#) program, the first installment of Quality Time: Sharing PIE (performance improvement experience) recorded conversations is online and ready for listening!

In this series, the mentors, experienced critical access hospital quality improvement (QI) staff from across the country, come together periodically to share PIE—their performance improvement experience. They discuss key topics that help drive quality improvement in their rural hospitals. You can hear their lessons learned, strategies, tips, and ideas. Included with each episode are supportive resources for each of their topics, along with their favorite real pie recipes!

In the [first session of Quality Time: Sharing PIE](#), Cindy Gilman from Carrol County Memorial Hospital in Carrolton Missouri, and Karen Hooker from Kit Carson County Health Service District in Burlington Colorado, healthcare professionals from very different backgrounds, talk about how they became quality leaders. You can listen from the [QI Mentor webpage](#), or on the go by subscribing to the podcast version through your favorite [streaming service](#).

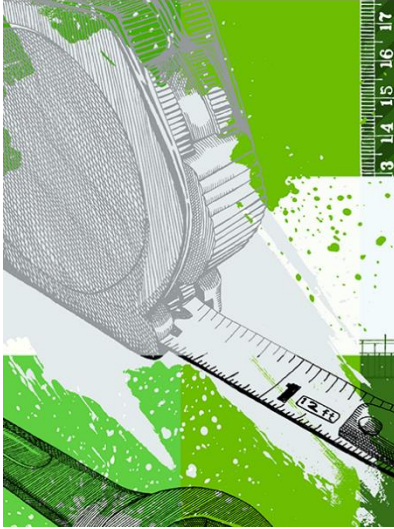


Burning QI Question? Ask a QI Mentor.

The virtual QI mentors want to share their performance improvement experience in critical access hospitals with you. Have a burning question? Want to suggest a PIE conversation topic? Just submit this [short form](#).

The National Rural Virtual Quality Improvement Mentor program is led by [Stratis Health](#). Contact [Sarah Brinkman](#) for more information.

Data



CAHs Measure Up: Reviewing Your Performance in EDTC Data Elements

Beginning with Q1 2020 encounters, the Emergency Department Transfer Communication (EDTC) measure is made up of eight data elements that are rolled up into the overall EDTC Measure. Reviewing your performance in each of these data elements is a great way to identify specific areas for improvement – as is digging a little bit.

The screenshot below is taken from a sample EDTC report produced by the Stratis Health Excel tool. (You may be using this tool or a different tool – the suggestions for improvement apply no matter which tool you are using.) The report summarizes all 22 transfer encounters in Q1 2020.

Overall, things look pretty good! Element 3 (Medications Administered in ED) has a bit lower performance than the others, so this hypothetical hospital might want to explore what might be driving that lower performance.

This hospital could also look at performance according to discharge disposition. The previous report summarizes all 22 transfer encounters in Q1 2020. What if we only look at transfers to Other health care facilities, specifically just Skilled Nursing Facility, Sub-Acute Care, or Swing Bed?

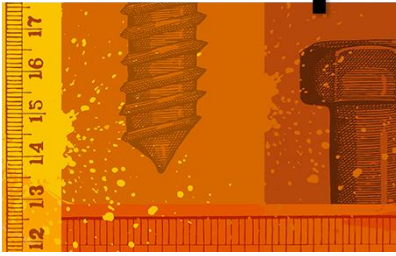
Data Elements	Q1 2020		# of Records Reviewed (N)
	# of Records Reviewed (N):	22	
	Number (n) and percent (%) of whose medical record documented and commu		
	n	%	
1. Home Medications	20	90.91%	
2. Allergies and/or Reactions	21	95.45%	
3. Medications Administered in ED	18	81.82%	
4. ED Provider Note	20	90.91%	
5. Mental Status/Orientation Assessment	21	95.45%	
6. Reason for Transfer and/or Plan of Care	20	90.91%	
7. Tests and/or Procedures Performed	20	90.91%	
8. Tests and/or Procedures Results	19	86.36%	
Overall EDTC Measure (All eight data elements were documented and communicated in a timely manner)	18	81.82%	

The report at right summarizes the four encounters (a subset of the total 22) that were transferred from the ED to SNF, Sub-Acute Care, or Swing Bed. As we can see, performance here looks quite a bit different! Digging into the data by discharge disposition shows that this setting has more opportunities for improvement.

Review all of the data elements that make up the EDTC measure and focus on improving your transfer communication documentation and processes for those data elements that have lower performance. Consider doing this overall, but also looking at performance by different discharge dispositions for further improvement. Check out the [MBQIP Quality Improvement Measure Summaries in the Quality Improvement Implementation Guide and Toolkit for CAHs](#) for some ideas to get you started.

Data Elements	Q1 2020		Q2
	# of Records Reviewed (N):	4	# of Records Reviewed (N)
	Number (n) and percent (%) of pe whose medical record documen documented and commur		
	n	%	n
1. Home Medications	2	50.00%	N/A
2. Allergies and/or Reactions	3	75.00%	N/A
3. Medications Administered in ED	1	25.00%	N/A
4. ED Provider Note	2	50.00%	N/A
5. Mental Status/Orientation Assessment	3	75.00%	N/A
6. Reason for Transfer and/or Plan of Care	2	50.00%	N/A
7. Tests and/or Procedures Performed	2	50.00%	N/A
8. Tests and/or Procedures Results	1	25.00%	N/A
Overall EDTC Measure (All eight data elements were documented and communicated in a timely manner)	1	25.00%	N/A

Tips



Go to Guides

Hospital Quality Measure Guides

- [MBQIP Quality Reporting Guide](#)
- [Emergency Department Transfer Communication](#)
- [Inpatient Specifications Manual](#)
- [Outpatient Specifications Manual](#)



Quality Reporting Updates Due to COVID-19

In recognition of the strain COVID-19 is putting on healthcare providers, FORHP announced exceptions for reporting. See the [April MBQIP Monthly](#) for more details. Hospitals that can report MBQIP measures are encouraged to continue reporting.

Robyn Quips - tips and frequently asked questions

Setting Up a HARP Account

Have you been getting emails from QualityNet telling you to set up a HARP account? Here's some information on why you need to pay attention to the emails and set up an account.

The Centers for Medicare & Medicaid Services (CMS) will be updating the QualityNet Secure Portal account management to the Health Care Quality Information Systems Access Roles and Profile (HARP) system. It is a secure identity management portal that will be replacing the current secure portal login on the QualityNet site. The update to this system will include the following enhancements:

- **One Login:** Streamline your access to multiple applications like the *QualityNet* Secure Portal (QNSP), Quality Payment Program (QPP), Internet Quality Improvement Evaluation System (iQIES), and potentially more in the future with just one username, password, and authenticator.
- **One Profile:** Ability to update your profile and request account roles in one central location for all accounts.
- **Ultra-Secure:** Advanced security for modern systems to keep your facility's data protected, while providing you the convenience of one login, one profile, and choice of two-factor authenticator.

To maintain access to your QualityNet account, you will need to transition to the HARP system. The transition period has started and goes through June 15, 2020. Follow these steps to begin to transition your account:

1. Go to the <https://qualitynet.org> - *Opens in new browser tab*
2. Click Log in to **Secure Portal** in the upper right-hand corner
3. Choose **Hospital Quality Reporting** from the drop-down
4. Click **Let's Go**
5. Enter your **QualityNet login** credentials and click **Submit**
Once you log in, a pop-up window will appear in front of the My Tasks page alerting you to create a new HARP Login
6. Click Enable HARP Account and follow the prompts
*(If you accidentally close the pop-up, the My Tasks page will appear with a blue alert at the top of the page. Click **Enable HARP Account** there.)*

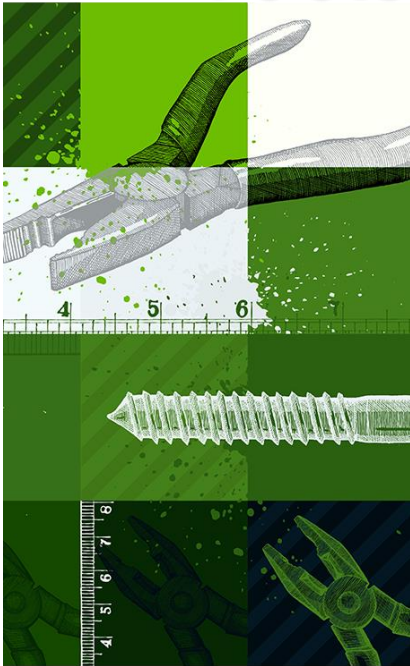
A [prerecorded webinar](#) is available to walk you through this process. You may also download the [HARP User Guide](#).

I set up my account, it was easy and took about 10 minutes. The HARP system uses two-step authentication for security instead of the Symantec Validation and ID Protection used now for the Secure Portal. You can indicate how you want to receive your security code.

At this time, you can still submit your measure data through the Secure Portal on QualityNet, but HARP is going to replace it at some point. CMS hasn't indicated when that transition will happen, but I would advise not waiting until the last minute to set up your account. You don't want to be in a situation where you can't submit data because the Secure Portal is discontinued, and you haven't set up a HARP account.

If you need assistance setting up your account you can contact the QualityNet Help Desk at gnetsupport@hcqis.org, or 866-288-8912 (TTY: 877-715-6222), weekdays from 7 a.m. to 7 p.m. CT.

Tools



We recognize that our friends and colleagues in critical access hospitals and across the care continuum are deeply affected by the current pandemic. Thank you for the amazing and important work you do. You are appreciated!

COVID-19 Information

Resources to support health care providers in responding to COVID-19 are continually being updated. The Rural Health Information Hub is regularly updating and adding links for Rural Response to COVID-19:

- [Federal and National Response Resources](#)
- [State Response Resources](#)

Advance Care Planning has taken on heightened importance during the COVID-19 pandemic, a variety of resources and supports are available to support health care providers and families with challenging conversations:

- [COVID-Ready Communication Skills: A playbook of VitalTalk Tips](#): Practical advice on how to talk about difficult topics related to COVID-19. Includes suggested language and framing, as well as conversation maps that help support a variety of challenging conversations, including proactive planning discussions, addressing resource limitations, and helping family members have final conversations with loved ones over video or phone.
- [COVID-19 Goals of Care Script for Older Adults](#): The Yale Geriatrics and Palliative Care faculty and fellows have adapted brief script guides for the difficult conversations many clinicians are having with patients and families during the COVID pandemic.
- [Being Prepared in the Time of COVID-19](#): Ariadne Labs and [The Conversation Project](#) have developed a patient-facing guide helping individuals and families be prepared for the pandemic, identifying three important things each of us can do, right now, to be prepared. Ariadne Labs also has a [COVID-19 Response Toolkit](#) available to support health systems and clinicians in addressing the communication needs of patients in the community and those in the hospital.

MBQIP Resources

Updated! [MBQIP Data Abstraction Training Series Videos](#)

This recorded training series is for critical access hospital staff with responsibility for data collection of CMS Inpatient and Outpatient quality measures. Pick specific topics that you have questions about or listen to the full series for a comprehensive overview of the process to identify each measure population and abstract the required data elements. These updated videos are also referenced in the latest version of the [MBQIP Quality Reporting Guide](#).



MBQIP Monthly is produced by Stratis Health to highlight current information about the Medicare Beneficiary Quality Improvement Project (MBQIP). This newsletter is intended for Flex Coordinators to share with their critical access hospitals.

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