

Medicare Beneficiary Quality Improvement Project (MBQIP)

The Health Resources and Services Administration created the MBQIP in 2010 as a key quality improvement activity within the Medicare Rural Hospital Flexibility grant program. The project officially kicked off in September 2011. The goal of MBQIP is to improve the quality of care provided in small, rural critical access hospitals. While many rural hospitals have low patient volume, *every patient matters!*



2015-2018 MBQIP Quality Domains

To participate in Medicare Rural Hospital Flexibility (FLEX) - sponsored activities and/or to receive Small Rural Hospital Improvement Program (SHIP) grant funds ...

Hospitals must be actively reporting the measures below to CMS QualityNet by December 31, 2015.

Patient Safety

- **Imm-2:** Influenza Immunization

Patient Engagement

- Hospital Consumer Assessment of Healthcare Providers and Systems

Outpatient

- **OP-1:** Median time to Fibrinolysis
- **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-20:** Door to diagnostic evaluation by a qualified medical professional
- **OP-21:** Median time to pain management for long bone fracture
- **OP-22:** Patient left without being seen

Hospitals must also demonstrate efforts to build capacity in collecting the measures below, with the ability to report measures by September 1 2016.

Patient Safety

- **HCP / OP-27:** Influenza vaccination coverage among healthcare personnel
Measure should be reported through the National Healthcare Safety Network (NHSN)

Care Transitions

- **EDTC-1:** Administrative Communication
 - **EDTC-2:** Patient Information
 - **EDTC-3:** Vital Signs
 - **EDTC-4:** Medication Information
 - **EDTC-5:** Physician or Practitioner Generated Information
 - **EDTC-6:** Nurse Generate Information
 - **EDTC-7:** Procedures and Tests
- Measures will be reported through the Quality Health Indicators*

More information, including planned education and technical support, will be sent out in fall 2015.

For questions, please contact KDHE Office of Primary Care and Rural Health at ruralhealth@kdheks.gov