

Quality Data Programs

Hospital Quality Improvement Collaborative (HQIC)

HQIC

The Hospital Quality Improvement Collaborative (HQIC) is a CMS-funded contract focused on Quality Improvement and Patient Safety.

The data collected in this project will be used to measure impact on three CMS goals:

Improve behavioral health outcomes, with a focus on decreased opioid misuse.

Increase patient safety, with a focus on reduction of harm

Increase the quality of care transitions, with a focus on high utilizers in an effort to improve overall utilization

Measurement

Administrative Claims	NHSN	Adverse Drug Events
<ul style="list-style-type: none"> • Pressure Ulcer Rate, Stage 3+ • Hospital Wide All-Cause Readmission Rate • Sepsis Mortality Rate 	<ul style="list-style-type: none"> • Hospital Onset C.diff • CAUTI • CLABSI 	<ul style="list-style-type: none"> • Excessive Anticoagulation with Warfarin • Hypoglycemia in Inpatients Receiving Insulin • ADE due to Opioids • Surgical Discharges with 12 or Fewer Opioid Pills

Measure Specifications: <https://mtpin.org/resource/hqic-encyclopedia-of-measures/>



HQIC

Administrative Measures – Claims & Reported

Administrative Measures:

These are obtained by Cynosure Health from Medicare Fee for Service Claims.

HOWEVER...this is not an all inclusive population and hospital reported data shows much better performance.

- Hospital-Wide All-Cause Readmission Rate
- Sepsis Mortality Rate
- Pressure Ulcer Rate, Stage 3+

Steps to Submission

1. Enter Numerator/Denominator values into QHi.

Measure Summary

Web Page: <https://mtpin.org/resource/hqic-encyclopedia-of-measures/>

Reporting Frequency: *Monthly*

Abstraction: *Numerator/Denominator*



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HQIC Measure Deadlines

Measure	Submit to:	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
Hospital-Wide All-Cause Readmission Rate	QHi	March 15	April 15	May 15	June 15	July 15	August 15	September 15	October 15	November 15	December 15	January 15	February 15
Sepsis Mortality Rate													
Pressure Ulcer Rate, Stage 3+													



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Adverse Drug Events (ADE)- Reported

ADE Measures:

- Excessive Anticoagulation with Warfarin (Inpatients)
- Hypoglycemia in Inpatients Receiving Insulin
- Adverse Drug Event Due to Opioids
- Surgical Discharges with 12 or Fewer Opioid Pills
- Overall Opioid Use in the Emergency Department

[MT HQIC Opioid Stewardship Resource Webpage](#)

Steps to Submission

1. Enter Numerator/Denominator values into QHi.

Measure Summary

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Reporting Frequency: *Monthly*

Abstraction: *Numerator/Denominator*



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HQIC Measure Deadlines

Measure	Submit to:	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	
Excessive Anticoagulation with Warfarin (Inpatients)	QHi													
Hypoglycemia in Inpatients Receiving Insulin														
Adverse Drug Event Due to Opioids		March 15	April 15	May 15	June 15	July 15	August 15	September 15	October 15	November 15	December 15	January 15	February 15	
Surgical Discharges with 12 or Fewer Opioid Pills														
Overall Opioid Use in the Emergency Department														



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Hospital-Acquired Infection (HAI) Measures – NHSN & Reported

HAI Measures in NHSN:

- SIR – Standardized Infection Ratio
- Hospital Onset C.Diff LabID Event & SIR
 - CAUTI (ICU & Other) Rate & SIR
 - Urinary Catheter Device Utilization Ratio
 - CLABSI (ICU & Other) Rate & SIR
 - Central Line Utilization Ratio
 - Hospital-onset MRSA Events

Steps to Submission

1. Enter Numerator/Denominator values into QHi.

OR

2. Enter data into NHSN

HAI Measures in QHi:

- Hospital Onset C.Diff Rate
- CAUTI (ICU & Other) Rate
- Urinary Catheter Device Utilization Ratio
- CLABSI (ICU & Other) Rate
- Central Line Utilization Ratio

Measure Summary

Web Page: <https://mtpin.org/resource/hqic-encyclopedia-of-measures/>

Reporting Frequency: *Monthly*

Abstraction: *Numerator/Denominator*



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HQIC Measure Deadlines

Measure	Submit to:	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	
Hospital Onset C.Diff LabID Event & SIR	QHi or NHSN													
CAUTI (ICU & Other) Rate & SIR														
Urinary Catheter Device Utilization Ratio		March 15	April 15	May 15	June 15	July 15	August 15	September 15	October 15	November 15	December 15	January 15	February 15	
CLABSI (ICU & Other) Rate & SIR														
Central Line Utilization Ratio														



Montana HQIC Program Staff



Do you have questions from this presentation?
We would love to hear from you!

Email our team or attend our monthly [Office Hours](#) call.

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