

1Q22 Core Measures & 1Q22 MBQIP Data Reports



Any information included in the following reports is for quality improvement and benchmarking purposes only.



The information in this report is based on data obtained from National Institutes of Health & Quantros.

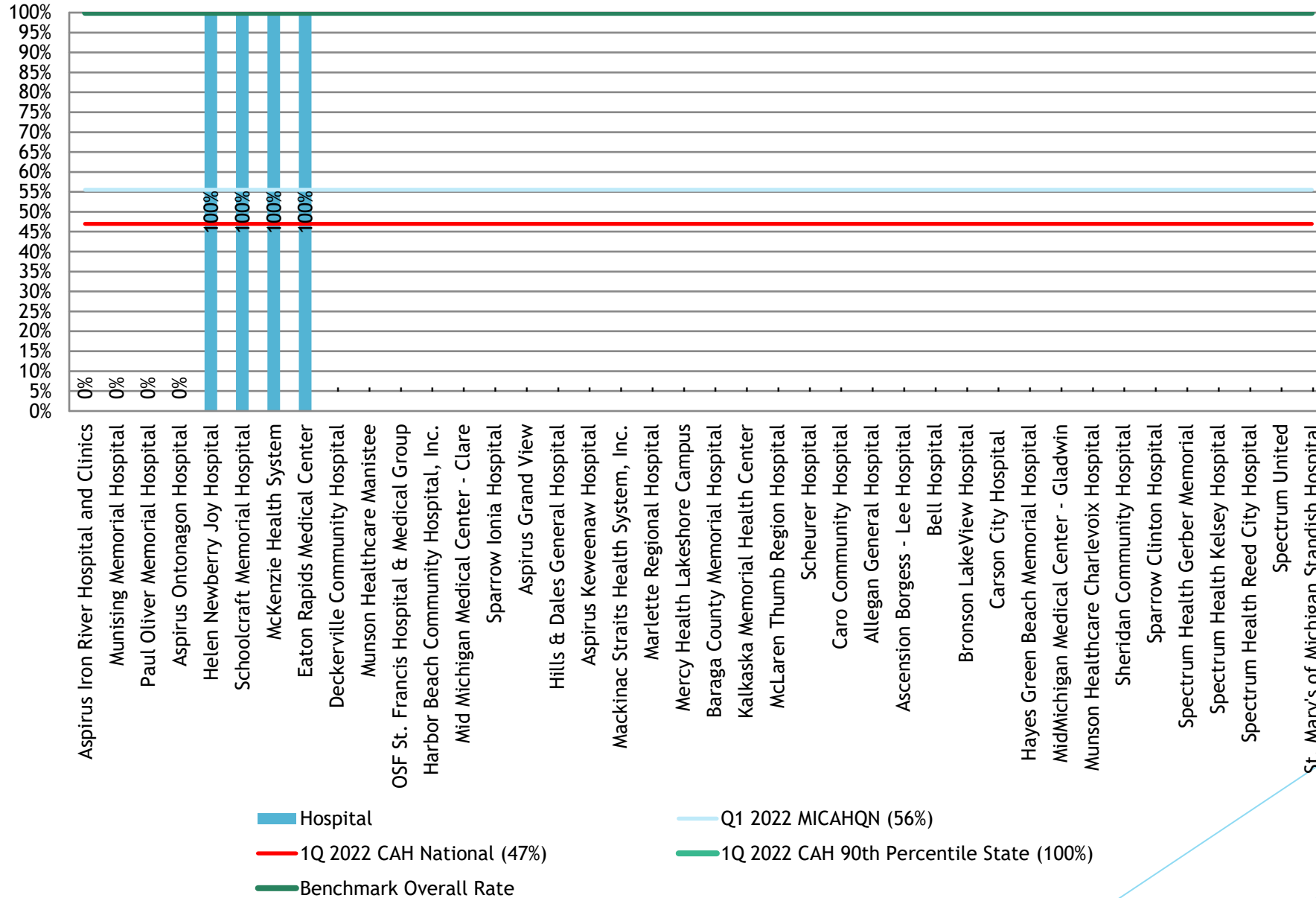
<u>Measure</u>	<u># Hospitals</u>	<u>Denominator</u>	<u>Current</u>	<u>Top Performer(s)</u>
			<u>Rate/Value</u>	
OP-2	8/39	9	55.6%	McKenzie Health System, Eaton Rapids Medical Center, Helen Newberry Joy Hospital, Schoolcraft Memorial Hospital 100%
OP-3b	10/20	11	93	Sparrow Eaton Hospital 30 minutes
OP-18b	38/39	3,611	116	McLaren Caro Region, followed by Spectrum Health Kelsey Hospital 72 & 82 minutes respectively
OP-22	23/39	231,789	1.6	Aspirus Ontonagon Hospital, followed by Aspirus Grand View 0%
HPC/IMM-3	27/39	10,072	81.7	Bronson Lakeview Hospital at 99.7%

"*" indicates that a CAH either: reported a population of 0, meaning there were no patients that met the patient population, or submitted eligible cases that were accepted to the CMS Clinical Warehouse, but those cases were excluded for the measure. Instead of * you will see nothing or a 0 (zero)

CCN	State	Core MBQIP Measures												
		OP-2		OP-3b		OP-18b		HCP/IMM-3			OP-22			
		Numerator	Denominator	Median	Count	Median	Count	Numerator	Denominator		Numerator	Denominator		
MI	231300	0	1*	*		112	113							
MI	231301	*	*	*	*	104	115	616	641	96.1%		177	14748	1.2%
MI	231303	1	1*	*	*	154	80	247	253	97.6%				
MI	231304	1	1*	*	*	185	56	305	320	95.3%		79	3728	2.1%
MI	231305	*	*	*	*	115	93	176	200	88.0%		60	8519	0.7%
MI	231306	*	*	*	*	138	84					119	5836	2.0%
MI	231307	*	*	*	*	117	48							
MI	231308	0	1*	*	*	128	66					7	2240	0.3%
MI	231309	0	1*	*	*	112	65					1	2263	0.0%
MI	231310	*	*	*	*	110	100	458	613	74.7%				
MI	231311	*	*	*	*	88	54	64	102	62.7%				
MI	231312	*	*	*	*	92	222					43	2641	1.6%
MI	231313	*	*	*	*	155	68							
MI	231314	2	2*	*	*	113	93	158	353	44.8%				
MI	231315	*	*	*	*	104	128	36	43	83.7%		43	7888	0.5%
MI	231316	*	*	*	*	93	85	295	396	74.5%		14	6869	0.2%
MI	231317	*	*	*	*	82	102	142	151	94.0%		121	7254	1.7%
MI	231318	0	1*	*	*	123	91	183	247	74.1%		7	6826	0.1%
MI	231319	*	*	*	*	138	92	443	561	79.0%		93	6025	1.5%
MI	231320	*	*	*	*	90	83							
MI	231321	*	*		243	1135	93	327	342	95.6%		195	9560	2.0%
MI	231322	*	*	*	*	181	62	435	445	97.8%				
MI	231323	*	*	*	*	112	104	285	299	95.3%		276	14584	1.9%
MI	231324	1	1	93		1115	117	220	301	73.1%				
MI	231325	*	*	47		1152	92	173	311	55.6%		173	11451	1.5%
MI	231326	*	*	47		1169	124	282	349	80.8%		81	12736	0.6%
MI	231327	*	*	30		1153	119	483	614	78.7%		187	14284	1.3%
MI	231328	*	*	*	*	114	88	48	54	88.9%		25	9070	0.3%
MI	231329	*	*	*	*	74	80	121	167	72.5%				
MI	231330	*	*	135		1119	114	251	414	60.6%				
MI	231331	*	*	41		1125	118	383	447	85.7%		284	15895	1.8%
MI	231332	*	*	*	*	154	112	873	876	99.7%		374	18613	2.0%
MI	231333	*	*	100		1136	90	411	463	88.8%		3	9545	0.0%
MI	231337	*	*	172		1226	86	440	683	64.4%		523	16252	3.2%
MI	231338	*	*	60		1170	105	372	427	87.1%		878	24962	3.5%
MI	231340	*	*	*	*	100	83							
		5	9			10		3425	8227	10072	81.7%	3763	231789	1.6%

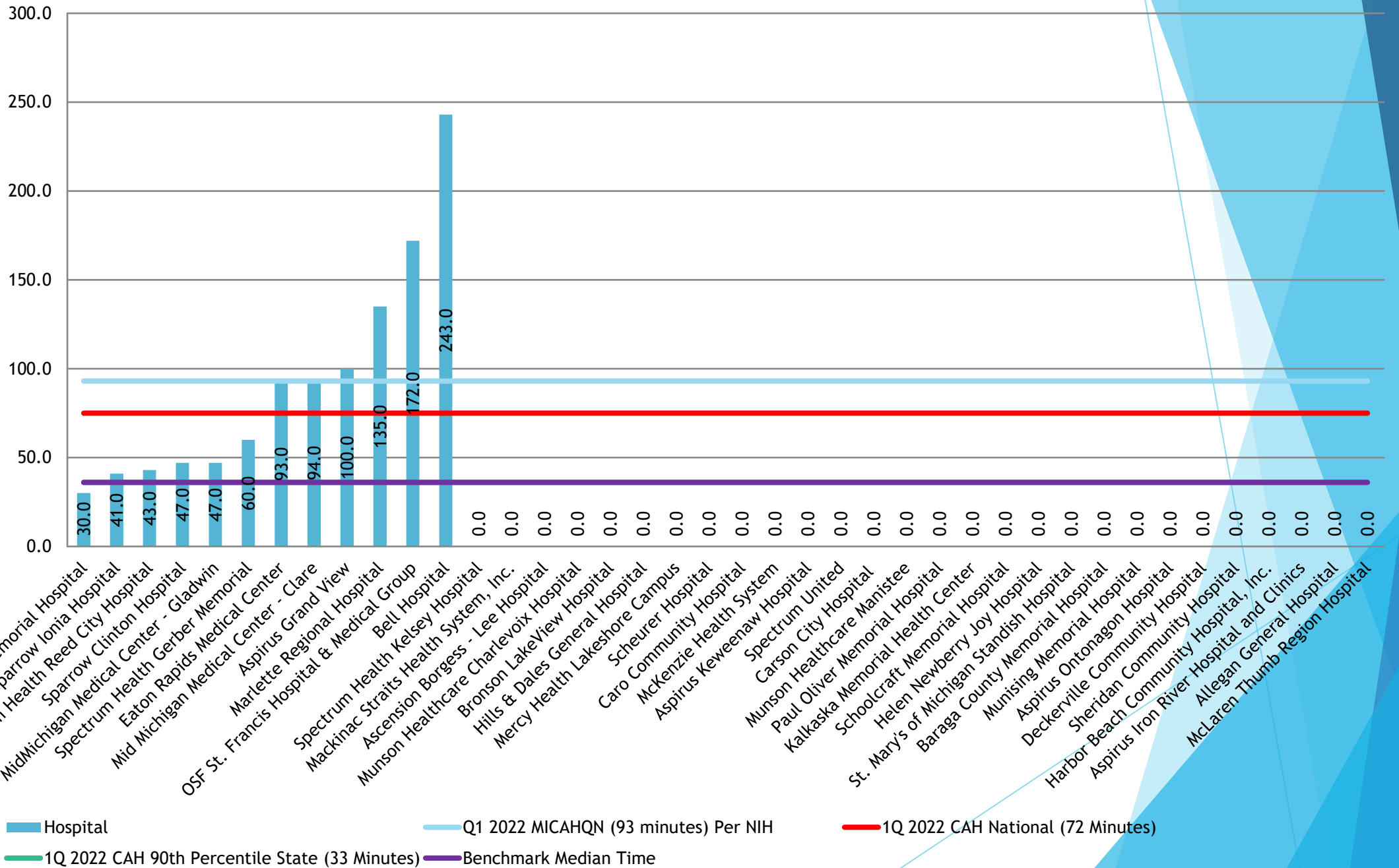
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OP-2: Fibrinolytic Therapy Received Within 30 Minutes



- Hospital
- 1Q 2022 CAH National (47%)
- Benchmark Overall Rate
- Q1 2022 MICAHQN (56%)
- 1Q 2022 CAH 90th Percentile State (100%)

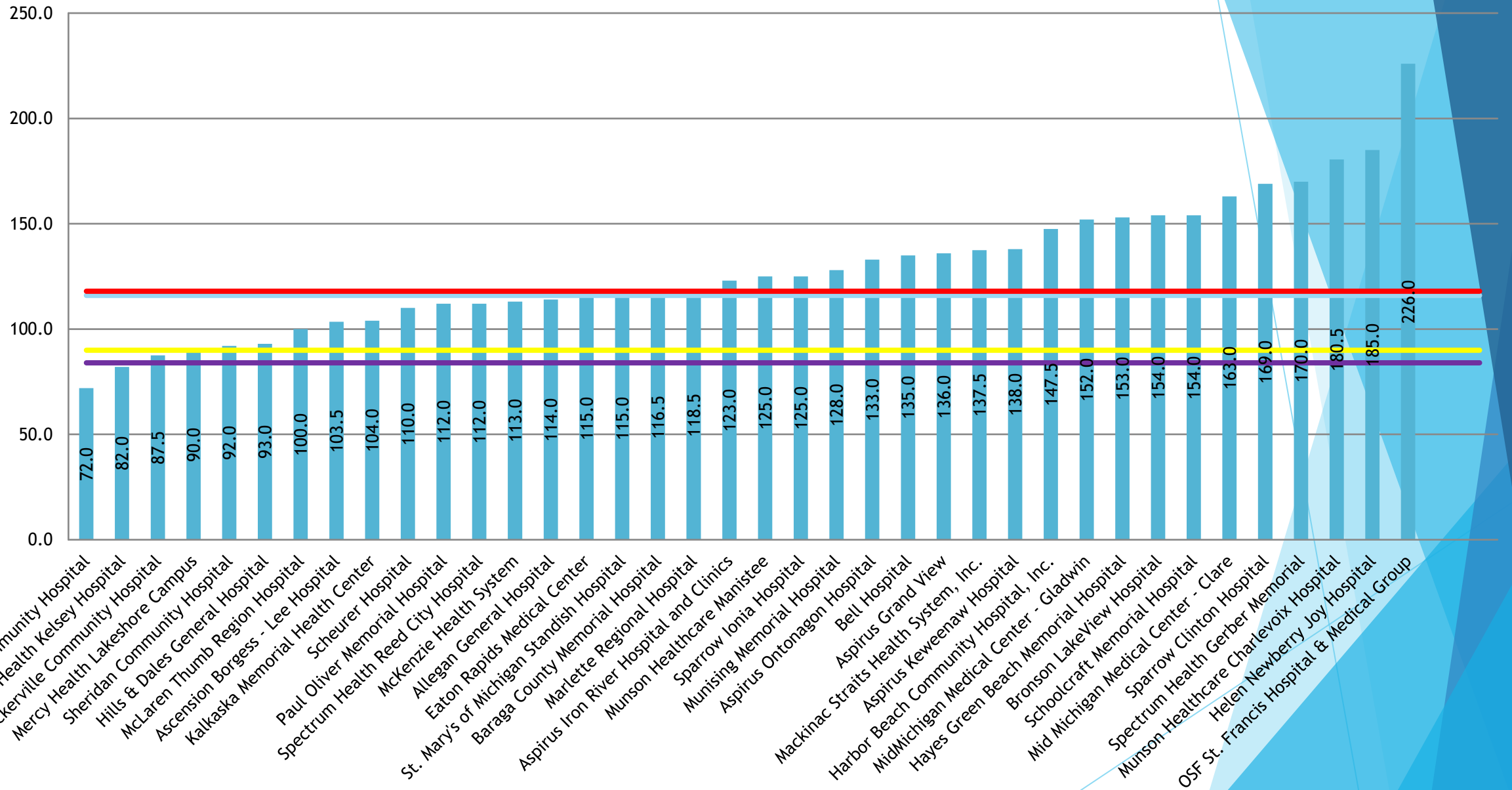
OP-3b: Median Time to Transfer to Another Facility for Acute Coronary Intervention - Reporting Measure



■ Hospital
 — Q1 2022 MICAHQN (93 minutes) Per NIH
 — 1Q 2022 CAH National (72 Minutes)

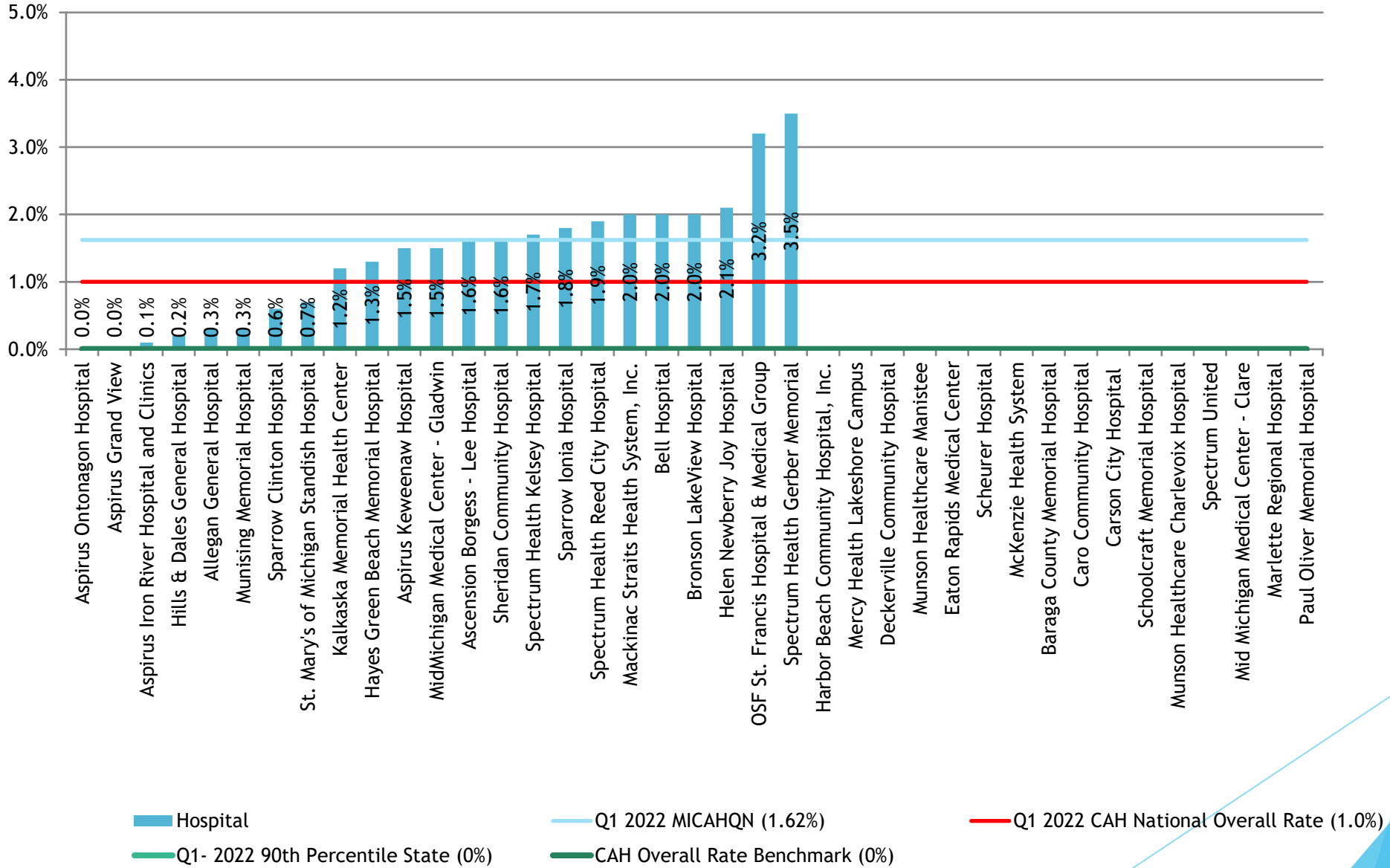
— 1Q 2022 CAH 90th Percentile State (33 Minutes)
 — Benchmark Median Time

OP-18b: Median Time from ED Arrival to ED Departure for Discharged ED Patients - Reporting Measure

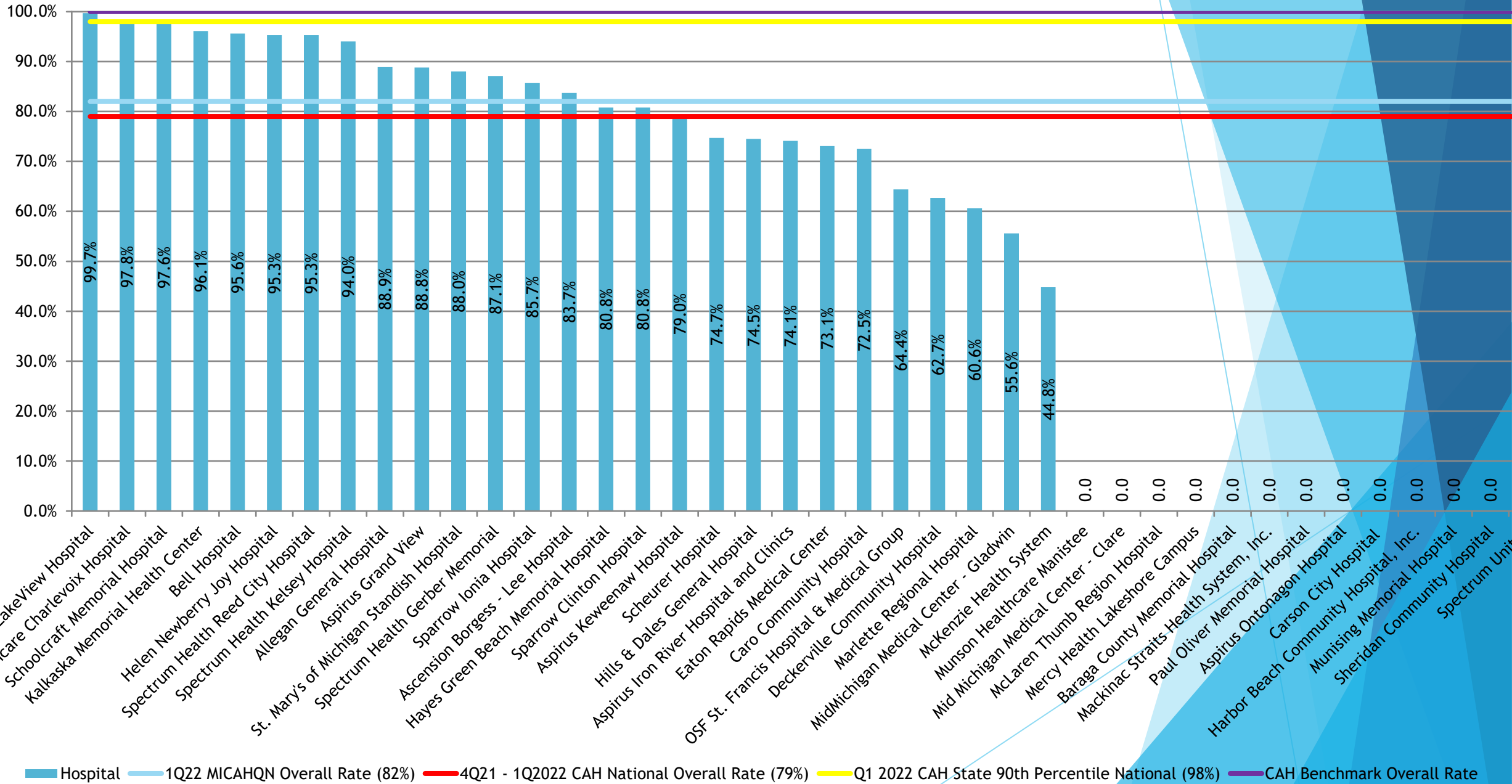


■ Hospital
 — Q1 2022 MICAHQN (116 minutes)
 — 1Q 2022 CAH National (118 Minutes)
 — 1Q 2022 MI CAH 90th Percentile National (90 Minutes)
 — Benchmark Median Time (84 Minutes)

OP-22 Patient Left Without Being Seen



HCP/IMM-3: Healthcare Provider Influenza Vaccination



■ Hospital
 — 1Q22 MICAHQN Overall Rate (82%)
 — 4Q21 - 1Q2022 CAH National Overall Rate (79%)
 — Q1 2022 CAH State 90th Percentile National (98%)
 — CAH Benchmark Overall Rate

Michigan

State-Level Patient Safety/Inpatient and Outpatient MBQIP Core Measures Report

Quarter 1 - 2022

Generated on 11/15/22

	State Percentage by Survey Year		State Percentage for Current Survey Year		National Percentage for Current Survey Year		Bench- mark
	Survey Year 2020	Survey Year 2021	# CAHs Reporting	% of CAHs Meeting Element	# CAHs Reporting	% of CAHs Meeting Element	% of CAHs Meeting Element
Antibiotic Stewardship Measure – CDC Core Elements							
All Elements Met	84%	94%	32	94%	1,157	89%	100%
Element 1: Leadership	97%	94%	32	94%	1,157	98%	100%
Element 2: Accountability	97%	97%	32	97%	1,157	97%	100%
Element 3: Drug Expertise	97%	100%	32	100%	1,157	97%	100%
Element 4: Action	100%	100%	32	100%	1,157	97%	100%
Element 5: Tracking	100%	97%	32	97%	1,157	96%	100%
Element 6: Reporting	90%	100%	32	100%	1,157	98%	100%
Element 7: Education	87%	100%	32	100%	1,157	99%	100%

“N/A” indicates that no CAHs in the state submitted data for this measure.