

## MBQIP SDOH Measures Calendar Year 2023



## MICAH QN Data Quality Reporting

- This presentation is meant to provide data in a meaningful way to the MICAH QN. The data measures and compares quality standards and identifies gaps as they relate to Medicare Beneficiary Quality Improvement Program and the Methodology used for the CMS 5 Star Rating.
  - SDOH Screening
  - SDOH Screening Positive
  - Hospital Commitment to Health Equity
- The data provides information that demonstrates the high-quality services provided by Michigan's Critical Access Hospitals. It identifies opportunities for change that lead to continued improvement in the health status of the population we serve.

## Measure Description & Rational

## SDOH Screening

The Screening for Social Drivers of Health Measure assesses whether a hospital implements screening for all patients that are 18 years or older at time of admission for food insecurity, housing instability, transportation needs, utility difficulties and interpersonal safety. A specific screening tool is not required to be used, but all areas of health-related social needs must be included.

Economic and social factors, known as drivers of health, are known to affect health outcomes and costs, and exacerbate health inequities. The intent of this measure is to help ensure hospitals are considering and addressing social needs in the care they provide to their community.

### SDOH Screening Positive

The Screen Positive Rate for Social Drivers of Health Measure provides information on the percent of patients admitted for an inpatient hospital stay who are 18 years or older on the date of admission, were screened for an HSRN, and who screen positive for one or more of the following five health related social needs (HSRNs): Food insecurity, housing instability, transportation problems, utility difficulties, or interpersonal safety.

Economic and social factors, known as drivers of health, are known to affect health outcomes and costs, and exacerbate health inequities. The intent of this measure is to help ensure hospitals are considering and addressing social needs in the care they provide to their community.

## SDOH Measure Report CY 2023 results

CAH State	Erroneous 0s	Screened 0 Patients	Has MBQIP MOU	Note for TA
MI		Yes	Yes	Needs TA - to help screen patients
MI		Yes	Yes	Needs TA - to help screen patients
MI		Yes	Yes	Needs TA - to help screen patients
MI		Yes	Yes	Needs TA - to help screen patients
MI		Yes	Yes	Needs TA - to help screen patients
MI		Yes	Yes	Needs TA - to help screen patients
MI	Yes		Yes	Not Actually Reporting - Needs TA - impossible to have no eligible patients within a calendar year
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MI	Yes		Yes	Not Actually Reporting - Needs TA - impossible to have no eligible patients within a calendar year
MI			Yes	

CAH Reporting	Reporting N/D	Erroneous 0s	Screened 0 pts.	Not Reporting
18	5	7	6	17
51%	28%	39%	33%	49%

## **Definitions and Wins**

#### Erroneous 0's

#### Definition

Those who Reported 0 numerator/0 denominator

#### • WINS

You became familiar with the reporting process

#### Screened 0 Patients

#### Definition

Those who screened 0 patients but reported the denominator

#### WINS

You were able to pull your eligible in patients, and became familiar with the reporting process

#### **CAH Reporting Both Measures**

#### Definition

Those who screened and reporting both numerator and denominator

#### • WINS

We have 5 CAH's who are now experts at tracking and reporting. Leverage their knowledge for calendar year 2024 submission on May 15, 2025

## Technical Assistance and Moving forward.

#### Non reporting CAH's consider these questions:

- 1. Have you decided on a screening tool if not using your EMR.
  - a. CMS does not indicate the type of tool you use.
  - b. Telligen is in the process of having a collection tool approved that is similar to the EDTC tool.
- Who will be using this tool for screening.
  - a. Admitting, Nursing (RN), Community Health Worker, Advanced Health Professional (NP, PA).
- 3. Who will be responsible for gathering the data from the screening tool.
  - a. Quality Department, Medical Records, Community Health Worker.

## Measure Description & Rational

# Hospital Commitment to Health Equity

This structural measure assesses hospital commitment to health equity. Hospitals will receive points for responding to questions in five (5) different domains of commitment to advancing health equity:

- Domain 1 Equity is a Strategic Priority Domain 2 Data Collection
- Domain 3 Data Analysis

- Domain 4 Quality Improvement
- Domain 5 Leadership Engagement

Hospital score can be a total of zero (0) to five (5) points (one point for each domain, must attest "yes" to all subquestions in each domain, no partial credit).

The intent of this measure is to help ensure hospitals are considering and addressing equity in the care they provide to their community.

# Hospital Commitment to Health Equity CY 2023 results

CAH Name	CAH State	Reporting HC 🔻
Paul Oliver Memorial Hospital	MI	yes
Ascension Standish Hospital	MI	yes
Mackinac Straits Hospital	MI	yes
Scheurer Hospital	MI	yes
Deckerville Community Hospital	MI	yes
McKenzie Memorial Hospital	MI	yes
Ascension Borgess-Lee Hospital	MI	yes
Hills and Dales General Hospital	MI	yes
Aspirus Iron River Hospital	MI	yes
Aspirus Keweenaw Hospital	MI	yes
UP Health System - Bell	MI	yes
Munson Healthcare Charlevoix Hospital	MI	yes
Spectrum Health Reed City Campus	MI	yes
Eaton Rapids Medical Center	MI	yes
MyMichigan Medical Center Gladwin	MI	yes
Sparrow Clinton Hospital	MI	yes
Sparrow Eaton Hospital	MI	yes
Ascension Borgess Allegan Hospital	MI	yes
McLaren Caro Regional Hospital	MI	yes
Marlette Regional Hospital	MI	yes
Sparrow Ionia Hospital	MI	yes
Lakeview Community Hospital (Bronson Lakeview)	MI	yes
Aspirus Ironwood Hospital	MI	yes
OSF St. Francis Hospital	MI	yes
Spectrum Health Gerber	MI	yes
Spectrum Health Pennock	MI	yes
McLaren Thumb Regional Hospital	MI	yes

Reporting Yes	Reporting No
75%	25%

## Thank you.





For Questions. Please reach out to:

Amanda St. Martin

amanda.saintmartin@affiliate.msu.edu

Or

Jeff Nagy

Jeff.nagy@affiliate.msu.edu