

2020 MQI Measure Thresholds

Thresholds and Award Considerations:

Measure Thresholds are reviewed annually in consideration of historical hospital data performance, evidence-based guidance on reducing patient harm, improving transitions and continuity of care. Every year, WA State eligible hospitals have an opportunity to earn recognition and/or a one percent incentive payment under the Medicaid Quality Incentive Program (MQI) during the 6-month reporting window which begins July 1, 2020 and ends December 31, 2020. Awards are incentive-based, as evidenced by data submission that support quality improvement, reduction of patient harm and improving continuity/transitions of care.

Each of the measure thresholds and point award is an opportunity for an eligible hospital to participate in recognition and/or receive the awards based on hospital performance. Points are awarded for each quartile or quantile. For each measure, hospitals can earn 0 to 10 points. Points are averaged across all applicable measures and hospitals with an average score of 5 and above considered eligible for the increase.

Colon Surgical Site Infections

Threshold	> 2.5	> 1.3 to 2.5	> 0 to 1.3	0
Point Award	0	3	5	10

*These data are based on the 2019 WSHA Hospital Performance Reports and divided into quartiles.

CAUTI (catheter associated urinary tract infection)

Threshold	>1.68	1.67– 0.64	0.63 – 0	0
Point Award	0	3	5	10

*These data are based on the 2019 WSHA Hospital Performance Reports and divided into quartiles.

Worker Safety Events

*Threshold	0	1-2	3-5	6
Point Award	0	3	5	10

*Threshold columns represent the number of months during the performance period in which a valid value (0 or greater) was entered for at least one of the nine stratification areas. In WSHA's Quality Benchmarking System (QBS) enter a value of -1 instead of leaving a blank for the stratification areas that aren't applicable to your facility.

Pressure Ulcer

Threshold	> 0.58	> 0.2 to 0.58	> 0 to 0.2	0
Point Award	0	3	5	10

*These data are based on the 2019 WSHA Hospital Performance Reports and divided into quartiles.

* Hospitals with the same Tax ID that submit measure results separately will be awarded incentives based upon their combined scores.

2020 MQI Measure Thresholds

Fall Data Stratification

Threshold	Total Falls	Post Fall Huddle	Types of Falls	Age	Repeat
Point Award	0	2	3	3	2

*Post fall management includes leveraging data to improve falls with injuries. This includes conducting a post fall huddle after every fall and a systematic reporting and analysis of falls incidents.

Hospitals will receive and/or accumulate point award during the 6 months reporting window as a result of greater than 80% completion of data entry of each respective fall category. Total Falls is a required data element but no points are awarded for this measurement period as this is considered standard practice.

ER is for Emergencies

Threshold	<= 25%	> 25% to 35%	> 35% to 50%	> 50%
Point Award	0	3	5	10

*These data are based on the 2019 WSHA Hospital Performance Reports and divided into quartiles.

Safe Deliveries

Program Data Submission in AIM

Threshold	All AIM process measures NOT submitted. OR authorization for WSHA to transfer data to AIM Portal NOT submitted.	All AIM process measures submitted AND authorization for WSHA to transfer data to AIM Portal submitted.
Point Award	0	10

Medications for Opioid Use Disorder (MOUD)

Buprenorphine included in facility formulary and at least five Data 2000 waived prescribers

Threshold	Buprenorphine is on Hospital Formulary	At least five waived prescribers
Point Award	5	5

* Hospitals with the same Tax ID that submit measure results separately will be awarded incentives based upon their combined scores.

2020 MQI Measure Thresholds

MOUD Protocol in Place for ED and/or Inpatient

Threshold	Approved protocol for MOUD in the ED (CA-Bridge or other)	Approved protocol for MOUD in inpatient (CA-Bridge or other)
Point Award	5	5

Behavioral Health Safety Measures – Adult and Pediatrics

Admission Screening for Violence Risk, Substance Use, Psychological Trauma History and Patient Strengths Completed

Threshold	< 80%	80% - 94%	95% – 98%	≥ 99%
Point Award	0	3	5	10

Behavioral Health Transition Record with Four Specified Elements Received by Discharged Patients Overall Rate

Threshold	< 80%	80% - 94%	95% – 98%	≥ 99%
Point Award	0	3	5	10

Social Determinants of Health

Threshold	Answer “No” to Screening and Coding SDOH	Answer “Yes” to Screening for all three SDOH: Housing, Food Insecurity, Transportation	Answer “Yes” to Coding SDOH into EHR
Point Award	0	8	2

* Hospitals with the same Tax ID that submit measure results separately will be awarded incentives based upon their combined scores.