

2023 Medicaid Quality Incentive Measure

Measure 3	
Contact Person	Rosemary Grant, (206) 216-2516
Measure Name:	Sepsis- Protocols and Education (new)
Measure eligibility:	All acute care hospitals including free-standing psychiatric facilities that participate in MQI are eligible to complete this metric
Why?	Prompt recognition and treatment of patients with sepsis is key to reducing mortality so educating clinical staff about sepsis is fundamental to improving patient outcomes. WSHA is asking hospitals what protocols/policies/procedures and educational cadence are currently in place regarding sepsis in their facilities. Future measures around sepsis may look at specific elements of the protocols/policies/procedures and/or about the percentage and/or cadence of staff trained in these protocols/policies/procedures.
Clinical Rationale:	<p>Sepsis is the body’s extreme response to an infection. It is a life-threatening medical emergency. Sepsis happens when an infection you already have triggers a chain reaction throughout your body. Infections that lead to sepsis most often start in the lung, urinary tract, skin, or gastrointestinal tract. Without timely treatment, sepsis can rapidly lead to tissue damage, organ failure, and death. Delaying recognition and treatment of sepsis has a significant impact on mortality.</p> <p>According to Kumar (2006) for every hour of delay in initiation of antibiotics, survival decreases by 7.6%.</p> <p>There is evidence that requiring sepsis protocols for timely recognition and treatment decreases mortality (Gigli, 2021).</p>
Definition:	Answer the questions about sepsis protocols and education for full MQI point award. Full points will be awarded for both yes and no answers.
Included Populations:	Populations included in the policy are pediatrics, admitted adult patients (i.e., ≥ 18 years of age), and specialty patients as appropriate to your hospital’s designation.
Exclusions:	No exclusions.
Fields to be reported:	<p>Three questions to be answered by the hospital:</p> <ol style="list-style-type: none"> 1. Does your hospital have a sepsis policy, protocol, or procedure? If yes, please submit. 2. Are all relevant clinical staff required to complete education on the signs and symptoms of sepsis and/or of the sepsis policy, protocol, pathway, or procedure during orientation/onboarding (within the first 60 days of employment)? If yes, answer next question. If no, no further questions. 3. Are all relevant clinical staff required to complete yearly refresher training on the signs and symptoms of sepsis and/or of the sepsis policy, protocol, pathway, or procedure?
Data Collection period:	July 1, 2023, to December 31, 2023.
Reporting deadline:	30 days after the close of the performance period or by January 31, 2024.
Audits and validation: Do not change	Data are subject to audit by the state. WSHA will not audit but will complete a few basic validity checks.
Submission Frequency:	Once during the performance period from July 1, 2023, to December 31, 2023.

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Data collection system:	Washington State Hospital Association Quality Benchmarking System, QBS.	
Data Scoring:	10 points awarded regardless of the answer “yes” or “no” for answering all eligible questions.	
	Thresholds	Answer all the questions regardless of (yes or no) answers
	Points Awards 2023	10 points