

# 2024 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, 2024, and ends December 31, 2024. Awards are incentive-based, as evidenced by data submissions that support quality improvement, reduction of patient harm, and improving continuity/transitions of care.

Each of the measure thresholds and point awards 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 are considered eligible for the increase. Hospitals that don't submit measures, will not attain any points.

### Climate Change: Monitoring of Greenhouse Gas Emissions

Thresholds	Submission of GHG survey. *Yes/No, ONLY a response of Yes will receive point awards*	Form a team of 2+ to address GHG	Collaborate with team to establish 2+ goals to reduce GHG	Submit 2+ barriers on tracking GHG
Point Awards 2024	2 points = Yes response 0 points = No response	4 points	2 points	2 points

### Opioid Harm Prevention: Naloxone Distribution

Thresholds	Submission of the Needs Assessment in Qualtrics	Submission of all six months of data
Point Awards 2024	5 points	5 points

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### **(NEW) Equity: Patient Demographics**

November 2024 data will be scored for this measure as follows:

The target for the percent “unknown” is 20% or less for each demographic. For each of the four demographics, 2.5 points will be awarded if the target is met.

Threshold for Demographic Reporting	Target met (“unknown”) <20%	Target not met (“unknown”) >20%
Sexual Orientation	2.5	0
Gender Identity	2.5	0
Disability Condition	2.5	0
Disability Daily Living	2.5	0

### **Falls: Falls Prevention and Harm Reduction**

Thresholds	All Falls	Post Fall Huddle Completion documented with each fall	Age of the Patient
Point Awards 2024	2 points	60-79% = 4 pts  ≥ 80% = 5 pts	60-79% = 2 pts  ≥ 80% = 3pts

### **(NEW) Safe Deliveries Roadmap: Perinatal Mental Health**

This measure is all or nothing scoring. Each hospital with a labor and birth unit must complete part A and part B to be eligible for scoring.

Hospitals that do not complete part A and B will receive 0 points. Hospitals that complete and submit part A and part B will receive 10 points.

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\*For hospitals that are reporting under one licensure (share a CCN): Data must be submitted from each hospital to be considered for this measure. Scores from each hospital will be averaged.

Thresholds	No Submissions for Part A AND Part B	Submit Part A (Needs Assessment) and Part B (Upload of Process, Resource & Policy Documents)
Point Awards 2024	0 points	10 points

### **(NEW) Sepsis: Sepsis and Diagnostic Excellence**

Needs Assessment (1 point) Full survey must be completed by September 1, 2024 for 1 point. If not completed by this date or partially completed, no points will be awarded.

Dashboard Engagement (2 points) Must access dashboard each month for 2 points. If dashboard is accessed 4 or 5 of the 6 months, hospital receives 1 point. If accessed 3 or fewer months during submission period, no points will be awarded.

Sepsis Case Reviews (7 points) Hospitals must submit data on case reviews of 30 random cases from the populations specified above (except for smaller hospitals that may not have 30 cases). If a hospital has less than 30 cases total for these 2 populations for a 1 year period, they should complete case reviews and submit data on 100% of cases. Hospitals must submit data on 30 cases (or 100% of cases if less than 30 are part of the population) to receive the 7 points.

Thresholds	Needs Assessment completed	Dashboard Engagement and Access	Sepsis Case Reviews completed
Point Awards 2024	1 point	1 point = ≤ 4 or 5 months 2 points = ≥ 6 months	7 points = 30 cases or 100% of cases if less than 30 of pt. population

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## Workforce Safety: Workplace Violence (WPV)

Submission of all WPV events for all 6 months with no “N/A” entries.

Hospitals that submit N/A or -1 for responses will receive 0 points.

Hospitals must submit data except for N/A or -1 to receive the full 10 points.

Thresholds	All Patient WPV Events N/A or -1 submissions	All Patient WPV Events Age   Location  # non-English speakers # of times non-English speakers were offered a translator
Point Awards 2024	0 points	10 points