

**MINNESOTA STATEWIDE QUALITY REPORTING AND MEASUREMENT SYSTEM  
MEASURES GRID  
PUBLISHED IN FINAL RULE DECEMBER 2009**

*Final Document revised 02/17/10*

Measure Set	Data Source	How data collected	Currently publicly reported anywhere	For which hospitals	Readily available data	Patient population	Validation
<b>Measures required for reporting beginning in January 2010 (beginning with Quarter 3 2009 discharges) and every year thereafter</b>							
<b>Acute Myocardial Infarction (AMI)</b>							
Aspirin at arrival (AMI-1)	Administrative + medical record	Vendor tool or CART	Hospital Compare	Required PPS and CAHs	Yes	All patients 18 years and older	Required
Aspirin prescribed at discharge (AMI-2)	Administrative + medical record	Vendor tool or CART	Hospital Compare	Required PPS and CAHs	Yes	All patients 18 years and older	Required
ACEI or ARB for LVSD (AMI-3)	Administrative + medical record	Vendor tool or CART	Hospital Compare	Required PPS and CAHs	Yes	All patients 18 years and older	Required
Adult smoking cessation advice/counseling (AMI-4)	Administrative + medical record	Vendor tool or CART	Hospital Compare	Required PPS and CAHs	Yes	All patients 18 years and older	Required
Beta blocker prescribed at discharge (AMI-5)	Administrative + medical record	Vendor tool or CART	Hospital Compare	Required PPS and CAHs	Yes	All patients 18 years and older	Required
Fibrinolytic therapy received within 30 minutes of hospital arrival (AMI-7a)	Administrative + medical record	Vendor tool or CART	Hospital Compare	Required PPS and CAHs	Yes	All patients 18 years and Older	Required
Primary PCI received within 90 minutes of hospital arrival (AMI-8a)	Administrative + medical record	Vendor tool or CART	Hospital Compare	Required PPS and CAHs	Yes	All patients 18 years and older	Required

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<b>Heart Failure (HF)</b>							
Discharge instructions (HF-1)	Administrative + medical record	Vendor tool or CART	Hospital Compare	Required PPS and CAHs	Yes	All patients 18 years and older	Required
Evaluation of LVS function (HF-2)	Administrative + medical record	Vendor tool or CART	Hospital Compare	Required PPS and CAHs	Yes	All patients 18 years and older	Required
ACEI or ARB for LVSD (HF-3)	Administrative + medical record	Vendor tool or CART	Hospital Compare	Required PPS and CAHs	Yes	All patients 18 years and older	Required
Adult smoking cessation advice/counseling (HF-4)	Administrative + medical record	Vendor tool or CART	Hospital Compare	Required PPS and CAHs	Yes	All patients 18 years and older	Required
<b>Pneumonia</b>							
Pneumococcal vaccination (PN-2)	Administrative + medical record	Vendor tool or CART	Hospital Compare	Required PPS and CAHs	Yes	Pneumonia patients age 65 and older	Required
Blood cultures performed in emergency department prior to initial antibiotic received in hospital (PN-3b)	Administrative + medical record	Vendor tool or CART	Hospital Compare	Required PPS and CAHs	Yes	All patients 18 years and older	Required
Adult smoking cessation advice/counseling (PN-4)	Administrative + medical record	Vendor tool or CART	Hospital Compare	Required PPS and CAHs	Yes	All patients 18 years and older	Required
Initial antibiotic received within 6 hours of hospital arrival (PN-5c)	Administrative + medical record	Vendor tool or CART	Hospital Compare	Required PPS and CAHs	Yes	All patients 18 years and older	Required
Initial antibiotic selection for community-acquired	Administrative + medical	Vendor tool or CART	Hospital Compare	Required PPS and CAHs	Yes	All patients 18 years and	Required

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pneumonia in immunocompetent patients (PN-6)	record					older	
Influenza vaccine (PN-7)	Administrative + medical record	Vendor tool or CART	Hospital Compare	Required PPS and CAHs	Yes	Pneumonia patients age 50 years and older hospitalized during October, November, December, January, February, or March	Required
<b>Surgical Care Improvement Project (SCIP) Measures</b>							
Prophylactic antibiotic received within one hour prior to surgical incision (SCIP-Inf-1)	Administrative + medical record	Vendor tool or CART	Hospital Compare	Required PPS and CAHs	Yes	All patients 18 years and older	Required
Prophylactic antibiotic selection for surgical patients (SCIP-Inf-2)	Administrative + medical record	Vendor tool or CART	Hospital Compare	Required PPS and CAHs	Yes	All patients 18 years and older	Required
Prophylactic antibiotics discontinued within 24 hours after surgery end time (SCIP-Inf-3)	Administrative + medical record	Vendor tool or CART	Hospital Compare	Required PPS and CAHs	Yes	All patients 18 years and older	Required
Cardiac surgery patients with controlled 6 a.m. postoperative blood glucose (SCIP-Inf-4)	Administrative + medical record	Vendor tool or CART	Hospital Compare	Required PPS and CAHs	Yes	All patients 18 years and older	Required
Surgery patients with appropriate hair removal (SCIP-Inf-6)	Administrative + medical record	Vendor tool or CART	Hospital Compare	Required PPS and CAHs	Yes	All patients 18 years and older	Required
Colorectal surgery patients	Administrative	Vendor tool	Hospital	Required PPS	Yes	All patients 18	Required

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with immediate postoperative normothermia (SCIP-Inf-7)	+ medical record	or CART	Compare	and CAHs		years and older	
Surgery patients on beta blocker therapy prior to arrival who received a beta blocker during the perioperative period (SCIP-Card-2)	Administrative + medical record	Vendor tool or CART	Hospital Compare	Required PPS and CAHs	Yes	All patients 18 years and older	Required
Surgery patients with recommended venous thromboembolism prophylaxis ordered (SCIP-VTE-1)	Administrative + medical record	Vendor tool or CART	Hospital Compare	Required PPS and CAHs	Yes	All patients 18 years and older	Required
Surgery patients who received appropriate venous thromboembolism prophylaxis within 24 hours prior to surgery to 24 hours after surgery (SCIP-VTE-2)	Administrative + medical record	Vendor tool or CART	Hospital Compare	Required PPS and CAHs	Yes	All patients 18 years and older	Required
<b>Agency for Healthcare Research and Quality (AHRQ) Inpatient Quality Indicators (IQI) and Patient Safety Indicators (PSI)</b>							
Abdominal aortic aneurysm repair volume (IQI 4) and mortality rate (IQI 11)	Claims data	Hospital discharge data		Required PPS and CAHs	Yes	Patients 18 years and older	Required
Coronary artery bypass graft volume (IQI 5) and mortality rate ((IQI 12)	Claims data	Hospital discharge data		Required PPS and CAHs	Yes	Patients 18 years and older	Required
Percutaneous transluminal coronary angioplasty volume (IQI 6) and mortality rate (IQI 30)	Claims data	Hospital discharge data		Required PPS and CAHs	Yes	Patients 18 years and older	Required
Hip fracture mortality (IQI 19)	Claims data	Hospital discharge data		Required PPS and CAHs	Yes	Patients 18 years and older	Required
Pressure ulcer (PSI 3)	Claims data	Hospital discharge		Required PPS and CAHs	Yes	Patients 18 years and	Required

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		data				older	
Death among surgical patients with serious treatable complications (PSI 4)	Claims data	Hospital discharge data		Required PPS and CAHs	Yes	Patients 18 years and older	Required
Postoperative pulmonary embolism or deep vein thrombosis (PSI 12)	Claims data	Hospital discharge data		Required PPS and CAHs	Yes	Patients 18 years and older	Required
Obstetric trauma – vaginal delivery with instrument (3 <sup>rd</sup> and 4 <sup>th</sup> degree lacerations) (PSI 18)	Claims data	Hospital discharge data		Required PPS and CAHs	Yes	All vaginal delivery patients	Required
Obstetric trauma – vaginal delivery without instrument (3 <sup>rd</sup> and 4 <sup>th</sup> degree lacerations) (PSI 19)	Claims data	Hospital discharge data		Required PPS and CAHs	Yes	All vaginal delivery patients	Required
<b>Health Information Technology (HIT)</b>							
Health Information Technology (HIT) This survey is used to assess a hospital's adoption and use of HIT in its clinical practice	Electronic survey from American Hospital Association (AHA) sent to the AHA survey contact person at each hospital (No date determined yet)			Required PPS and CAHs			

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<b>Measures required for reporting beginning in January 2011 and every year thereafter</b>							
<b>Outpatient Acute Myocardial Infarction (AMI) and Chest Pain measures</b>							
Median time to fibrinolysis (OP-1)	Administrative + medical record	Vendor tool or CART	No	Required PPS and CAHs	Yes	All patients 18 years and older	TBD
Fibrinolytic therapy received within 30 minutes of emergency department arrival (OP-2)	Administrative + medical record	Vendor tool or CART	No	Required PPS and CAHs	Yes	All patients 18 years and older	TBD
Median time to transfer to another facility for acute coronary intervention (OP-3)	Administrative + medical record	Vendor tool or CART	No	Required PPS and CAHs	Yes	All patients 18 years and older	TBD
Aspirin at arrival (OP-4)	Administrative + medical record	Vendor tool or CART	No	Required PPS and CAHs	Yes	All patients 18 years and older	TBD
Median time to ECG (OP-5)	Administrative + medical record	Vendor tool or CART	No	Required PPS and CAHs	Yes	All patients 18 years and older	TBD
<b>Outpatient Surgery Department Measures</b>							
Timing of antibiotic prophylaxis (OP-6)	Administrative + medical record	Vendor tool or CART	No	Required PPS and CAHs	Yes	All patients 18 years and older	TBD
Prophylactic antibiotic selection for surgical patients (OP-7)	Administrative + medical record	Vendor tool or CART	No	Required PPS and CAHs	Yes	All patients 18 years and older	TBD

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<b>Patient Experience (Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS))</b>							
Patient Experience of care (not required for hospitals with less than 500 admissions in the previous calendar year)	Survey of patients discharged	Random selection of adult – vendor or hospital	Yes	Required PPS and CAHs		Adults	No
<b>Agency for Healthcare Research and Quality (AHRQ) Inpatient Quality Indicators (IQI), Patient Safety Indicators (PSI), and Pediatric Patient Safety Indicators (PDI)</b>							
Mortality for selected conditions composite measure and component indicators: <ul style="list-style-type: none"> <li>• Acute myocardial infarction mortality rate (IQI 15)</li> <li>• Congestive heart failure mortality rate (IQI 16)</li> <li>• Acute stroke mortality rate (IQI 17)</li> <li>• Gastrointestinal hemorrhage mortality rate (IQI 18)</li> <li>• Hip fracture mortality rate (IQI 19)</li> <li>• Pneumonia mortality rate (IQI 20)</li> </ul>	Claims data	Hospital discharge data		Required PPS and CAHs	Yes	Patients 18 years and older	Required
Patient safety for selected indicators composite measure and component indicators: <ul style="list-style-type: none"> <li>• Pressure ulcer (PSI 3)</li> <li>• Iatrogenic pneumothorax</li> </ul>	Claims data	Hospital discharge data		Required PPS and CAHs	Yes	Patients 18 years and older	Required

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(PSI 6) <ul style="list-style-type: none"> <li>Selected infections due to medical care (PSI 7)</li> <li>Postoperative hip fracture (PSI 8)</li> <li>Postoperative pulmonary embolism or deep vein thrombosis (PSI 12)</li> <li>Postoperative sepsis (PSI 13)</li> <li>Postoperative wound dehiscence (PSI 14)</li> <li>Accidental puncture or laceration (PSI 15)</li> </ul>							
Pediatric patient safety for selected indicators composite measure and component indicators: <ul style="list-style-type: none"> <li>Accidental puncture or laceration (PDI 1)</li> <li>Pressure ulcer (PDI 2)</li> <li>Iatrogenic pneumothorax (PDI 5)</li> <li>Postoperative sepsis (PDI 10)</li> <li>Postoperative wound dehiscence (PDI 11)</li> <li>Selected infections due to medical care (PDI 12)</li> </ul>	Claims data	Hospital discharge data		Required PPS and CAHs	Yes	Patients under age 18	Required