

memo

DATE: December 19, 2022

SUBJECT: Statewide Quality Reporting and Measurement System Technical Update – 2023 Reporting Year

The Minnesota Department of Health has updated the Minnesota Statewide Quality Reporting and Measurement System (Quality Reporting System). We continuously work with providers and other stakeholders to create an evolving set of standard health care quality measures that are rooted in evidence. We publish changes to the measurement set annually.

Without changing any part of Minnesota Rules chapter 4654, we are modifying one physician clinic measure, three prospective payment system hospital measures, and removing two critical access hospital measures to maintain alignment with federal programs. Accordingly, and to ease administrative burdens, we are not promulgating a rule for the 2023 reporting year. Instead, we are issuing technical guidance about the changes.¹ Please visit [Quality Measures: 2023 Report Year https://www.health.state.mn.us/data/hcquality/measures](https://www.health.state.mn.us/data/hcquality/measures) for a list of Quality Reporting System measures, measure specifications, and other information.

Physician clinic quality measures

Modifications

MN Community Measurement (MNCM) updated specifications for the Colorectal Cancer Screening measure to align with those of the National Committee for Quality Assurance. MNCM expanded the age range from 50 to 75 years to 45 to 75, and updated exclusion criteria and test terminology.

Hospital quality measures

Prospective payment system hospital measure modifications

The Centers for Medicare & Medicaid Services (CMS) updated the specifications and adopted a measure suppression policy in response to the impact of the COVID-19 public health emergency for three measures for its fiscal year 2023 performance year that are also in the Quality Reporting System.

- Hospital Value-Based Purchasing Total Performance Score
- Hospital Readmissions Reduction Program Excess Readmission Ratio

¹Quality Rule Appendices A, B, and E indicate that quality measures are required for reporting in 2018 and every year thereafter

- Hospital Acquired Condition Reduction Program Score

Critical access hospital measure removals

CMS removed two measures from its outpatient reporting program that are also in the Quality Reporting System. Therefore, we are discontinuing these measures beginning with the April 1 through June 30, 2023 reporting period.

- Fibrinolytic Therapy Received Within 30 Minutes of ED Arrival (OP-2)
- Median Time to Transfer to Another Facility for Acute Coronary Intervention (OP-3)

Supplemental information

From 2018 through early 2020, MDH developed a new measurement framework in collaboration with a broad group of stakeholders. We have delayed framework implementation due to the statewide response to the COVID-19 pandemic. After completing current stakeholder engagement, we anticipate beginning to pilot the measurement framework during 2023 with partners. We expect framework implementation to inform future Quality Reporting System updates. Updates about implementation of the [Measurement Framework](https://www.health.state.mn.us/data/hcquality/measfrmwk) (<https://www.health.state.mn.us/data/hcquality/measfrmwk>) will be available online.

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