2027 MBSC P4P Scorecard

Measure 1: Improvement/Excellence in Grade 1 Complication Rate:

Weight: 10%
Scoring Methodology: Hospital-Level
Reduce grade 1 complications to 4%, will be measured on a per site basis. If the site does not meet the 4% goal, a z-score will be calculated to determine relative improvement.
Improvement *(z-score)* will be measured using trended data from OR dates of 10/1/2024 to 9/30/2027 and rounded to the nearest whole number.
Excellence *(adjusted rate)* will be measured using OR dates of 10/1/2026 to 9/30/2027 and rounded to the nearest whole number. The better of the two scores will be used.
Measurement periods:

Improvement - OR dates 10/1/2024 to 9/30/2027
Excellence - OR dates 10/1/2026 to 9/30/2027

Criteria	Points
Major improvement (z-score less than -1 or Grade 1 complication rate < = 4%)	10
Moderate improvement/maintained complication rate (z-score between 0 and -1)	5
No improvement/rates of grade 1 complications increased (z-score > = 0)	0

Measure 2: Reduce Grade 2 and 3 Complications:

Weight: 10%
Scoring Methodology: Hospital-Level
Reduce grade 2 and 3 complications (serious complications) to < = 1.8%, will be measured on a per site basis. Percentage adjusted and rounded to one decimal point.
Measurement period:

OR Dates 10/1/2026 to 9/30/2027

Criteria	Points
< = 1.8%	10
1.9 to 2.5%	5
> = 2.6%	0

Measure 3: Non-Medical Drivers of Health (NMDH) Screening, Data Abstraction and Entry into the MBSC website

Weight: 10%

Scoring Methodology: Collaborative-Level

Increase non-Medical Drivers of Health (NMDH) Screening, Data Abstraction and Entry into the MBSC website (percentage adjusted and rounded to the nearest whole number)

Measurement period:

OR Dates: 10/1/2026 – 9/30/2027

Criteria	Points
> = 65% to 100% NMDH screening	10
30% to 64% NMDH screening	5
0% to 29% NMDH screening	0

Measure 4: Compliance with VTE Prophylaxis - Pre-Operatively and Post-Operatively:

Weight: 5%

Scoring Methodology: Hospital-Level

Must meet 95% compliance for both pre-op AND post-op to receive the points. Percentage unadjusted and rounded to the nearest whole number.

Measurement period:

OR dates 10/1/2026 to 9/30/2027

Criteria	Points
> = 95% compliance with guidelines	5
0 to 94% compliance with guidelines	0

Measure 5: Compliance with VTE Prophylaxis - Post Discharge:

Weight: 5%

Scoring Methodology: Hospital-Level

Based on the post-discharge risk stratification recommendations for 1-month prophylaxis per the updated MBSC - Weigh The Odds VTE risk calculator

Percentage unadjusted and rounded to the nearest whole number.

Measurement period:

OR dates 10/1/2026 to 9/30/2027

Criteria	Points
> = 95% compliance with guidelines	5
65 to 94% compliance with guidelines	2.5
0 to 64% compliance with guidelines	0

Measure 6: Weight Loss and Cancer Education:

Weight: 10%
Scoring Methodology: Collaborative-Level
Increase the percentage of patients receiving education on the relationship between obesity, bariatric surgery and cancer risk reduction.
Percentage unadjusted and rounded to the nearest whole number.
Measurement period:

OR dates 4/1/2027 to 9/30/2027

Criteria	Points
> = 35%	10
0 to 34%	0

Measure 7: Opioid Use - Reduce Opioid Prescriptions within 30 Days:

Weight: 10%
Scoring Methodology: Hospital-Level
Measurement period:

OR date 10/1/2026 to 9/30/2027

Criteria	Points
< = 18 MME	10
19-30 MME	5
> = 31 MME	0

Measure 8: Reduce Avoidable ED Visits (not resulting in a readmission, "avoidable"):

Weight: 5%
Scoring Methodology: Hospital-Level
Percentage unadjusted and rounded to the nearest whole number.
Measurement period:

OR dates 10/1/2026 to 9/30/2027

Criteria	Points
< = 6% Avoidable ED visits	5
> 6% Avoidable ED visits	0

Measure 9: Compliance with Ursodiol Prescribing:

Weight: 5%
Scoring Methodology: Hospital-Level
Patients who have a gallbladder following bariatric surgery will receive Ursodiol prophylactically.
Recommended dose is Ursodiol 300mg BID for 6 months following primary bariatric surgery.
For sleeve gastrectomy, Ursodiol 250mg BID or 500mg daily is adequate.
Percentage unadjusted and rounded to the nearest whole number.
Measurement period:

OR Dates: 10/1/2026 - 9/30/2027

Criteria	Points
> = 80% compliance	5
0 to 79% compliance	0

Measure 10: Meeting Attendance - Surgeon:

Weight: 5%
Scoring Methodology: Hospital-Level
**In order for a surgeon to earn meeting attendance credit for a hospital, they must complete 10 bariatric surgery cases at that hospital for the dates of 10/1/2026 to 9/30/2027
Measurement period:

OR Dates 10/1/2026 to 9/30/2027

Criteria	Points
Attended 3 out of 3 meetings	5
Attended 2 meetings or less	0

Measure 11: Meeting Attendance - Abstractor/Coordinator:

Weight: 5%
Scoring Methodology: Hospital-Level
Measurement period:

OR Dates 10/1/2026 to 9/30/2027

Criteria	Points
Attended 3 out of 3 meetings	5
Attended 2 meetings or less	0

Measure 12: Timely Monthly Data Submissions (30-day information & registry paperwork):

Weight: 5%
Scoring Methodology: Hospital-Level
(Submitted to coordinating center by the last business day of each month - Please refer to 2027 Data Entry Deadlines Spreadsheet)
**In order to be eligible for this measure, you must achieve > 90% on the 2027 yearly audit when applicable. If the hospital does not reach > 90% for the yearly audit, they will receive 0 points for this measure.
Measurement period:

OR Dates 10/1/2026 to 9/30/2027

Criteria	Points
On time 11-12 months	5
On time 10 months	3
On time 9 months or less	0

Measure 13: Consent Rate:

Weight: 5%
Scoring Methodology: Hospital-Level
Percentage is unadjusted and rounded to the nearest whole number.
Measurement period:

OR Dates 10/1/2026 to 9/30/2027

Criteria	Points
> = 90% consented patients	5
80-89% consented patients	3
<80% consented patients	0

Measure 14: Physician Engagement:

Weight: 10%
Scoring Methodology: Hospital-Level
** Note: For each site, a surgeon or surgeons must participate in at least 2 of the engagement activities listed below in order to receive the 10 points available for this measure.**
***In order for a surgeon to earn points for a hospital, they must complete 10 bariatric surgery cases at that hospital for the dates of 10/1/2026 to 9/30/2027
Measurement period:

OR Dates 10/1/2026 to 9/30/2027

The following items count as 1 activity point:

- Committee participation
- MBSC survey response
- Participate in a qualitative interview
- Coauthor a paper
- Participate in quality improvement initiatives (FUTURE/MSHIELD/etc.)
- Attend or present at a pre-meeting session (IH committee/surgeon skill/etc.) on the day of the MBSC tri-annual meeting
- Present MBSC data at a MBSC Tri-annual meeting
- Attend quality site visit as a guest surgeon
- Hospital follow up rate of > = 68% for the OR dates of 10/1/2026 to 9/30/2027

The following items count as 2 activity points:

- Host quality site visit
- Present MBSC data at a national meeting
- Lead author on an MBSC publication

Criteria	Points
Meets	10
None	0