

**2024 Michigan Bariatric Surgery Collaborative Collaborative Quality Initiative
Performance Index Scorecard**

Measure #	Weight	Measure Description	Points
1	10	Improvement/Excellence In Grade 1 Complication Rate: (Improvement will be measured with a z-score rounded to the nearest whole number using data trended over a 3-yr period from October 1, 2021 to September 30, 2024; Excellence (<i>adjusted rate</i>) will be measured using OR Dates 10/1/2023 to 9/30/2024 and rounded to the nearest whole number). The better of the two scores will be used.	
		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
2	20	Improvement/Excellence in Serious Complication Rate: (Improvement will be measured with a z-score rounded to the nearest whole number using data trended over a 3-yr period from October 1, 2021 to September 30, 2024; Excellence (<i>adjusted rate</i>) will be measured using OR Dates 10/1/2023 to 9/30/2024 and rounded to one decimal point). The better of the two scores will be used.	
		Major improvement (z-score less than -1 or serious complication rate ≤2.4%)	20
		Moderate improvement/maintained complication rate (z-score between 0 and -1)	10
		No improvement/rates of serious complications increased (z-score ≥0)	0
3	10	1-Year Follow-up Rates (For OR dates of October 1, 2022 to September 30, 2023) <i>*Adjusted; Rounded to nearest whole number*</i>	
		≥67% OR > 5% relative improvement from previous year (10/1/2021-9/30/2022)	10
		Maintained 1-year follow-up rate/ >0 to <5% relative improvement from previous year (10/1/2021-9/30/2022)	5
		1-year follow-up rate decreased/No improvement in 1-year follow-up rate (10/1/2021-9/30/2022)	0
4	5	Compliance with VTE prophylaxis - Pre-operatively and Post-operatively: (Calendar Year 2024), must meet 94% compliance for both pre-op AND post-op to receive the points <i>***Hospital wide measure, *Unadjusted; Rounded to nearest whole number*</i>	
		≥94% compliance with guidelines	5
		0 to 93% compliance with guidelines	0
5	5	Compliance with VTE prophylaxis - Post Discharge: based on the post-discharge risk stratification recommendations for 1-month prophylaxis per the new VTE risk calculator: (Calendar Year 2024) <i>***Hospital wide measure, *Unadjusted; Rounded to nearest whole number*</i>	
		≥70% compliance with guidelines or a >2.5% relative improvement from the previous year (1/1/2023 to 12/31/2023)	5
		0 to 69% compliance with guidelines	0
6	5	Opioid Use - Opioid prescriptions within 30 days (measured in MMEs) <i>***Collaborative wide measure, Unadjusted; Rounded to nearest whole number (October 1, 2023 to September 30, 2024); Baseline rate used to determine relative reduction 44 MME for OR Dates of 4/1/2022 to 3/31/2023</i>	
		≤42 MME or ≥10% relative reduction in opioid use	5
		5-9% relative reduction in opioid use	2.5
		< 5% relative reduction	0
7	10	Opioid Use - Opioid prescriptions within 30 days (measured in MMEs) <i>***Hospital wide measure, Unadjusted; Rounded to the nearest whole number (October 1, 2023 to September 30, 2024); Baseline rate used to determine relative reduction based on OR Dates of 4/1/2022 to 3/31/2023</i> <i>*****No points will be awarded if your hospital is > 70MME</i>	
		≤42 MME or ≥10% relative reduction in opioid use	10
		5-9% relative reduction in opioid use	5
		< 5% relative reduction	0

**2024 Michigan Bariatric Surgery Collaborative Collaborative Quality Initiative
Performance Index Scorecard**

Measure #	Weight	Measure Description	Points
8	5	ED Visits (not resulting in a readmission, "avoidable") ***Collaborative wide measure, unadjusted and rounded to the nearest whole number, OR Dates October 1, 2023 to September 30, 2024	
		≤ 6% Avoidable ED visits	5
		> 6% Avoidable ED visits	0
9	5	Meeting Attendance - Surgeon: (Calendar Year 2024) **In order for a surgeon to earn meeting attendance credit for a hospital, they must complete <u>10</u> bariatric surgery cases at that hospital for the dates of 1/1/2024 to 12/31/2024	
		Attended 3 out of 3 meetings	5
		Attended 2 out of 3 meetings	3
		Attended fewer than 2 meetings	0
10	5	Meeting Attendance - Abstractor/Coordinator: (Calendar Year 2024)	
		Attended 3 out of 3 meetings	5
		Attended 2 out of 3 meetings	3
		Attended fewer than 2 meetings	0
11	5	Timely Monthly Data Submissions (30-day information & registry paperwork): (Submitted to coordinating center by the last business day of each month - Please refer to 2024 Data Entry Deadlines Spreadsheet) (Calendar Year 2024) *****In order to be eligible for this measure, you must achieve >90% on the 2024 yearly audit when applicable. If the hospital does not reach >90% for the yearly audit, they will receive 0 points for this measure.	
		On time 11-12 months	5
		On time 10 months	3
		On time 9 months or less	0
12	5	Consent Rate: (October 1, 2023 to September 30, 2024) <i>*Unadjusted; Rounded to nearest whole number*</i>	
		≥90% consented patients	5
		80-89% consented patients	3
		<80% consented patients	0
13	10	Physician Engagement: (January 1, 2024 to December 31, 2024) ** 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 1/1/2024 to 12/31/2024	10
		Following items count as 1 activity point:	
		Committee participation	
		MBSC survey response	
		Participate in a qualitative interview	
		Coauthor a paper using MBSC data	
		Participate in quality improvement initiatives (MPIRRE/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	
		Following items count as 2 activity points:	
		Host quality site visit	
		Present MBSC data at a national meeting	
Lead author on an MBSC publication			
No participation	0		
Total		100	