



# Item #7: California Maternal Quality Care Collaborative (CMQCC) Updates on Hospital Utilization of Reporting Resources

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### Meet the Team



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### HCAI Hospital Equity Report in the MDC

- CMQCC is supporting CA member hospitals by providing <u>partially</u> stratified data via a .CSV report, downloadable from the MDC (herein referred to as the "MDC Report"), on the following three measures from the *HCAI Hospital Equity Report: Measures Submission Guide:* 
  - "CMQCC NTSV Cesarean Birth Rate" (a.k.a. PC-02)
  - "CMQCC VBAC-TSV Rate, Uncomplicated" (a.k.a. IQI 22)
  - "CMQCC Exclusive Breast Milk Feeding" (a.k.a. PC-05)
    - Optional in the MDC







### MDC Report: Which Data Will be Provided?

- The following HCAI-requested stratifications of the three measures
  - are included in the MDC Report:
    - Expected Payor
    - Maternal Age
    - Preferred Language
    - Race and Ethnicity (R&E)\*

#### \*A special note on R&E stratifications

While HCAI is requesting the 2024 federal stratifications set forth by the Office of Management and Budget (OMB), they understand that CA hospitals currently report R&E to CMQCC via the Birth Certificate (BC), which is not aligned with the OMB stratifications at this time (e.g., Middle Eastern/North African ("MENA") is not a stratification available in the MDC). Once the CA BC categorizations are modified to reflect the OMB stratifications, CMQCC will update the categorizations in the MDC to align.







### MDC Report: Which Data Will **Not** be Provided?

- The following HCAI-requested stratifications of the three measures are not included in the MDC Report:
  - Disability Status
    - **Note:** While this data was not historically included in patient records, CMQCC plans to eventually add *Disability Status* to the list of supplemental data elements hospitals may choose to upload to the MDC
  - Gender Identity\*
  - Sex Assigned at Birth\*
  - Sexual Orientation\*



<sup>\*</sup>Not currently available for request from the state





### MDC Report: How Data is Displayed

- If data is missing or unavailable, these cells will be **blank** 
  - E.g., cells for measures stratified by disability status
- If data is available, and the "true" value of the cell is zero (i.e., no patients), these cells will display **zeroes** 
  - E.g., if your facility had no Asian patients in its breastfeeding denominator for 2024, the numerator, denominator, and rate cells will all display zeroes
- Rates for each of the three measures are displayed differently:
  - NTSV Cesarean Birth/PC-02: Reported as direct rate/proportion (e.g., 0.273)
  - VBAC-TSV/IQI 22: Reported as rate per 1,000 discharges (e.g., 272.7)
  - Exclusive Human Milk Feeding/PC-05: Reported as **percentage** (e.g., 27.3)







### Accessing the MDC Report

Clinical Quality Measures view all 164 by name reporting org

#### ★ HCAI Hospital Equity Report

**Description:** As part of the Department of Health Care Access and Information (HCAI)'s Hospital Equity Measures Reporting Program (Assembly Bill 1204, Chapter 751), hospitals and hospital systems are mandated to submit aggregate data on their overall and stratified rates of key health measures, as well as their top 10 disparities as identified in the prepared data, to the HCAI Hospital Equity Report Portal.

CMQCC Role: CMQCC has special reports in the Maternal Data Center that hospitals can optionally use to support their reporting.

Measures: Open measure list

- Cesarean Birth: NTSV Nullip Term Singleton Vertex (PC-02 TJC v2024B)
- Vaginal Birth After Cesarean (VBAC) Rate, TSV (AHRQ IQI 22)
- Exclusive Human Milk Feeding (PC-05 TJC v2024B)

#### **Special Notes:**

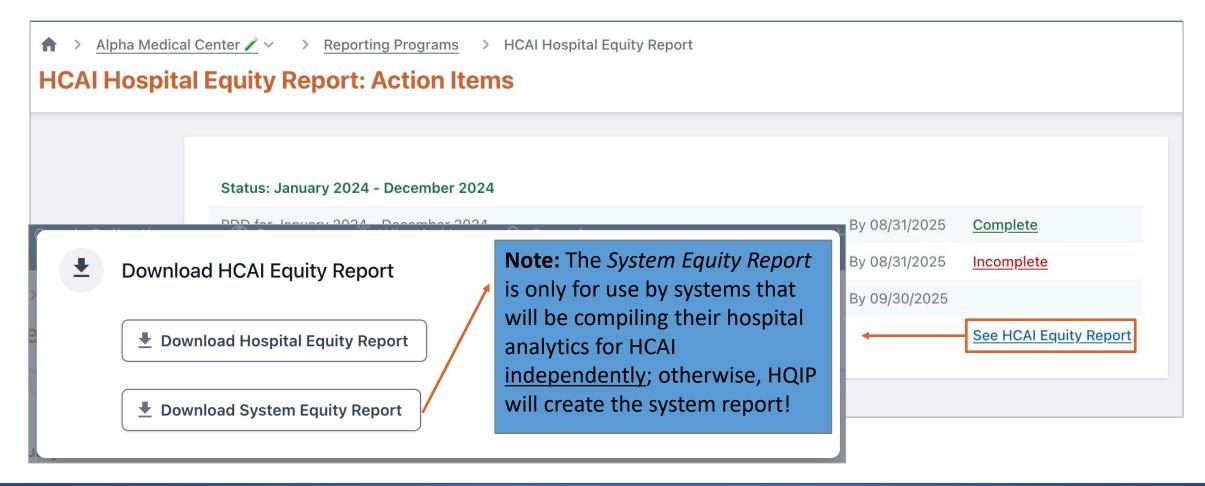
- At this time, CMQCC is only able to stratify the three measures noted above by Maternal Age, Payor, Preferred Language, and Race/Ethnicity, per the data available in the MDC.
- For the CY 2024 reporting period, HCAI is requesting the submission of PC-02 and PC-05 data as outlined in Version 2024B of the Joint Commission's measure specification manual (hence the "TJC v2024B" in the parentheticals above).
- For hospitals that are working with the Hospital Quality Institute (HQI) to support the fulfillment of their reporting requirements via the Hospital Quality Improvement Platform (HQIP), CMQCC's report is compatible with upload to the HQIP for streamlined data synthesis.

See My Hospital's Action
Steps for Using the MDC
for this Reporting Program





### Accessing the MDC Report







### **Preparing Data for Submission**

**Option 1: HQI-Facilitated Reporting** 

- HQI can support hospitals' fulfillment of equity reporting requirements via its Hospital Quality Improvement Platform (HQIP), a fee-for-service platform programmed to stratify reports for calculable measures and generate pre-filled, templated equity reports with available data for hospitals to edit as desired
  - Step 1: Complete all data submissions to the MDC
  - Step 2: Download the Report from the MDC
  - Step 3: Upload the Report to the HQIP
  - Step 4 (automatic): Perinatal data will be integrated with the rest of the hospital's data, deidentified per *Data De-Identification Guidelines (DDG)* to protect patients from reidentification
  - Step 5: Incorporate your hospital's/system's improvement plan







### **Preparing Data for Submission**

**Option 2: Independent Reporting** 

- Hospitals may opt to complete their own analytics (e.g., stratify and deidentify data, complete rate-ratio (RR) calculations, identify top ten disparities based on all aggregated data, etc.)
  - Step 1: Complete all data submissions to the MDC
  - Step 2: Download the Report from the MDC
  - Step 3: Incorporate data into the rest of your hospital or system report
  - Step 4: Incorporate your hospital's/system's improvement plan







## Submitting Data to HCAI

- Hospitals and systems are responsible for their own data submissions!
   Neither CMQCC nor HQI are involved in the data submission process.
  - CMQCC highly encourages our member hospitals to attend as many upcoming HCAI and HQI (if applicable) webinars as possible to ensure compliance and understanding of the regulations
- Hospitals and systems are also responsible for establishing their own improvement plans to prioritize and address disparities identified in the data to be submitted
- Final reports to be submitted to HCAI's Hospital Report Submission Portal at https://hdc.hcai.ca.gov/







### Frequently Asked Questions

• I don't have access to the MDC. How do I acquire access?

You can reach out to us at <u>datacenter@cmqcc.org</u> and we will put you in touch with your facility's *MDC Administrator*, the individual responsible for MDC user management at your site.

Are there any additional fees associated with accessing the Report?

No, access to the MDC and all resources within it are included with CMQCC membership benefits.





### Frequently Asked Questions

• My hospital's L&D Unit closed in 2024, so our data requirements are showing as "Incomplete." How can we access our Report?

Please email us at <u>datacenter@cmqcc.org</u> and we can work with your team to get this resolved.

All of the breastfeeding measure results in my hospital's Report are blank.
 Why?

If your hospital does not currently submit PC-05 data to the MDC, all relevant columns will be blank in the Report. If you would like for breastfeeding data to be included in your facility's Report with the available stratifications, please review this user guide.







### Additional Insights: Hospital Engagement

- Webinar attendees: 313
  - Member hospitals represented: 131
- Report downloads
  - Hospital-level: 206
  - System-level: 15
- Action Item screen page views: 342
- Number of tickets: 21







### CMQCC Resources

- CMQCC Webpage: <u>HCAI Hospital Equity Measures Report</u> [updates in progress]
- MDC Report User Guide: <u>HCAI Hospital Equity Report in the Maternal Data</u> <u>Center (MDC)</u>
- For any CMQCC-specific questions: datacenter@cmqcc.org