

**From:** Allen, Nadine <nallen@wha.org>

**Sent:** Thursday, May 30, 2024, 11:54 AM

**Subject:** WHA Quality Alert: Measure Changes to CheckPoint

Hello Quality and Infection Prevention Leaders!

It has been several years since we have added new measures to our CheckPoint website. If you hadn't already heard, [CheckPoint](#) just celebrated its 20<sup>th</sup> anniversary in March! Be sure to check it out and see the over 40 measures represented and transparently reported by our Wisconsin hospitals.

When new measures are recommended by the Quality Measures Team, the WHA Board must approve them before they can be added to CheckPoint. With the board approval in April 2024, we have created the templates to pull the data, and most are ready for preview.

1. Birth:

- New Measure – [PC-07](#) Severe Obstetric Complications, submitted as eCQM.

Numerator: Inpatient hospitalizations for patients with severe obstetric complications (not present on admission that occur during the current delivery encounter) including the following:

- **Severe maternal morbidity diagnoses**

- Cardiac
  - Acute heart failure
  - Acute myocardial infarction
  - Aortic aneurysm
  - Cardiac arrest/ventricular fibrillation
  - Heart failure/arrest during procedure or surgery
- Hemorrhage
  - Disseminated intravascular coagulation
  - Shock
- Renal
  - Acute renal failure
- Respiratory
  - Adult respiratory distress syndrome
  - Pulmonary edema
- Sepsis
- Other OB
  - Air and thrombotic embolism
  - Amniotic fluid embolism
  - Eclampsia
  - Severe anesthesia complications
- Other Medical
  - Puerperal cerebrovascular disorder
  - Sickle cell disease with crisis

- **Severe maternal morbidity procedures**

- Blood transfusion
- Conversion of cardiac rhythm
- Hysterectomy
- Temporary tracheostomy
- Ventilation

- **Discharge disposition of expired**

\*\* Please note that present on admission codes may be those entered by coding staff, extracted from billing/claims data.

Denominator: Inpatient hospitalizations for patients delivering stillborn or live birth with  $\geq 20$  weeks, 0 days gestation completed

- Current Measure: [PC-02](#) Cesarean Birth (revised)

Numerator: Inpatient hospitalizations for patients who deliver by cesarean section

Denominator: Inpatient hospitalizations for nulliparous patients who delivered a live term singleton newborn  $\geq 37$  weeks' gestation.

Measure changes:

- eCQM only (N/D reported)
- N/D submitted annually (Ex: submit 2024 data by March 1, 2025 by quarter)
- Retired measures:
  - PC-01: Early Elective Delivery
  - PC-05: Exclusive Breast Milk Feeding
  - PC-06: Term Newborn Complications

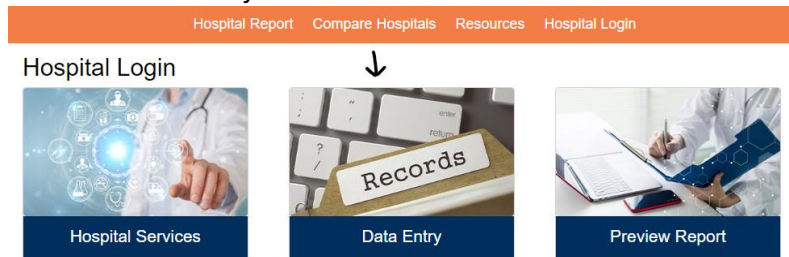
Manual entry has ended with the final 2023 entries complete. These retirements align with CMS guidelines.

Birth measure submissions are captured here with **final measures** on CheckPoint:

Measure ID	Measure Name	CMS	TJC	CheckPoint	Submission Date
PC-01	Elective Delivery	Retired	Active	Retire	
<b>PC-02</b>	Cesarean Birth	Active	Active eCQM	Required	Annually-March 2025
PC-05	Exclusive Human Milk Feeding	Retired	Active	Retire	
PC-06	Newborn Complications	Inactive	Active chart or eCQM	Retire	
<b>PC-07</b>	Severe Obstetric Complications	Active	Active eCQM	New	Annually-March 2025
<b>NBS</b>	Newborn Screening Card Transit Time			Required	Quarterly

How to manually enter data:

1. Log into CheckPoint>Data Entry>select hospital>select year/quarter>enter data per measure: <https://checkpoint.wha.org/HospitalLogin/HospitalLogin>
2. Select Data Entry tile:



## 2. Patient Safety – All Patients

- New Measure: SEP-1 Severe Sepsis and Septic Shock: Management Bundle (Composite Measure)

**Description:** Sepsis 1 focuses on prompt interventions including lactate measurement, blood cultures, antibiotic administration, fluid resuscitation, vasopressor use, and reassessment, within specific time frames for adults diagnosed with severe sepsis or septic shock.

**Information for Patients:** This measure focuses on adults 18 years and older with a diagnosis of severe sepsis or septic shock. Consistent with Surviving Sepsis Campaign guidelines, it assesses

measurement of lactate, obtaining blood cultures, administering broad spectrum antibiotics, fluid resuscitation, vasopressor administration, reassessment of volume status and tissue perfusion, and repeat lactate measurement. As reflected in the data elements and their definitions, the first three interventions should occur within three hours of presentation of severe sepsis, while the remaining interventions are expected to occur within six hours of presentation of septic shock

**Desired Direction:** Higher is Better

**Units:** %

**Measure Source:** Centers for Medicare & Medicaid Services (CMS)

[Link to Specifications](#)

- New Measure: AHRQ PSI 08 – In-Hospital Fall-Associated Fracture Rate (will replace current WHA Falls with Major Injury)

This replacement will take place on August 1, 2024. WHA Falls with Major Injury will remain on CheckPoint until this time. This change is to align with a national/endorsed measure with AHRQ's measure expansion that is not just inclusive of hip fractures.

[Link to AHRQ Specifications](#)

Please forward any questions to Nadine Allen [nallen@wha.org](mailto:nallen@wha.org) or Amber Hollerich [ahollerich@wha.org](mailto:ahollerich@wha.org).

Thanks,  
Nadine

**Nadine Allen, MBA, CPHQ**

*Chief Quality Officer*

*5510 Research Park Drive, Ste. 200*

*Fitchburg, WI 53711*

*Office: 608-274-1820*

