							New-2016 New-2016		
Measure Name	Data Steward	Focus Area/Domain	Measure Definitions	Units	Data Source	Time Period	Rate, Mean (15 or More Disch)	Rate, Mean (30 or More Disch)	
Acute MI Mortality (IQI #15)	AHRQ	Mortality	In-hospital deaths per 1,000 hospital discharges with acute myocardial infarction (AMI) as a principal diagnosis for patients ages 18 years and older. Excludes obstetric discharges and transfers to another hospital.	Rate per 1,000 Discharges	NYSDOH (SPARCS)	2016	93.0202	80.0807	
Stroke Mortality (IQI #17)	AHRQ	Mortality	In-hospital deaths per 1,000 hospital discharges with acute stroke as a principal diagnosis for patients ages 18 years and older. Includes metrics for discharges grouped by type of stroke. Excludes obstetric discharges and transfers to another hospital.	Rate per 1,000 Discharges	NYSDOH (SPARCS)	2016	81.8370	82.7880	
Pneumonia Mortality (IQI #20)	AHRQ	Mortality	In-hospital deaths per 1,000 hospital discharges with pneumonia as a principal diagnosis for patients 18 years and older.	Rate per 1,000 Discharges	NYSDOH (SPARCS)	2016	33.1170	32.9086	
CAUTI Rate per 10,000 Patient Days (Population Rate)	NHSN	Hospital Acquired Conditions	Catheter–associated urinary tract infections (CAUTI)	CAUTI Rate per 10,000 Patient Days	NYSPFP	2016	2.0058	2.0058	
CAUTI Rate per 1,000 Device Days	NHSN	Hospital Acquired Conditions	Catheter-associated urinary tract infections (CAUTI)	CAUTI Rate per 1,000 Device Days	CMS- Hospital Compare	07/01/16 – 06/30/17	1.0089	1.0158	
CLABSI Rate per 10,000 Patient Days (Population Rate)	NHSN	Hospital Acquired Conditions	Central line-associated bloodstream infections (CLABSI)	CLABSI Rate per 10,000 Patient Days or 1,000 Device Days	NYSPFP	2016	1.4485	1.4485	
CLABSI Rate per 1,000 Device Days	NHSN	Hospital Acquired Conditions	Central line–associated bloodstream infections (CLABSI)	CLABSI Rate per 10,000 Patient Days or 1,000 Device Days	CMS – Hospital Compare	07/01/16 – 06/30/17	0.8862	0.8862	
CDI Healthcare Facility – Onset Incidence Rate per 10,000 Patient Days	NHSN	Hospital Acquired Conditions	Clostridium difficile (C diff) Laboratory-identified Events	CDI Rate per 10,000 Patient Days	CMS	07/01/16 – 06/30/17	4.8984	4.9633	
Falls with Injury	NDNQI	Hospital Acquired Conditions	Acute Patient Fall Rate	Falls per 1,000 Patient Days	NYSPFP	2015	0.5202	0.5202	
3–Hour Sepsis Bundle	NYSDOH	Hospital Acquired Conditions	The percentage of adult patients with sepsis who received all the recommended early treatments in the 3-hour early management bundle within three (3) hours	Percent Compliance	NYSDOH	2017	66.6799	66.0515	
Pressure Ulcer Rate, Stage 2	NDNQI	Hospital Acquired Conditions	Prevalence rate of facility–acquired pressure ulcers of Stage 2 or higher per 100 patients	Ulcers per 100 patients	NYSPFP	2015	1.8040	1.8040	
Episiotomy Rate	Pediatric Measureme nt Center of Excellence	Maternity	Patients who underwent an episiotomy	Per 100 Vaginal Deliveries	NYSDOH	2016	13.2761	14.9389	
Primary C-Section (IQI #33)	AHRQ	Maternity	First-time Cesarean deliveries without a hysterotomy procedure per 1,000 deliveries. Excludes deliveries with complications (abnormal presentation, preterm delivery, fetal death, multiple gestation diagnoses, or breech procedure).	Rate per 1,000 Deliveries	NYSDOH (SPARCS)	2016	183.0921	184.1759	
Avoidable ED Use	зм	Utilization	Potentially Avoidable ED Use	Rate per 100 Discharges	NYSDOH (SPARCS)	2016	67.9838	68.0106	
Avoidable Admissions	зм	Utilization	Potentially Avoidable Admissions	Rate per 100 Discharges	NYSDOH (SPARCS)	2016	19.8736	19.5173	
Fibrinolytic Therapy Received with 30 minutes of ED Arrival (OP- 2)	CMS	Timely and Effective Care	Outpatients with Chest Pain or Possible Heart Attack Who Got Drugs to Break Up Blood Clots Within 30 Minutes of Arrival (OP-2)	Percent Compliance	CMS	07/01/16 – 06/30/17	51.5714	N/A	
Median Time to Transfer to Another Facility for Acute Coronary Intervention (OP-3b)	CMS	Timely and Effective Care	Average (median) number of minutes before outpatients with chest pain or possible heart attack who needed specialized care were transferred to another hospital	Minutes	CMS	07/01/16 – 06/30/17	76.6429	N/A	
Median Time to ECG (OP-5)	CMS	Timely and Effective Care	Median number of minutes before outpatients with chest pain or possible heart attack got an ECG	Minutes	CMS	07/01/16 – 06/30/17	10.2018	N/A	
EDTC Emergency Department Transfer Communication (All or None)	NQF/Stratis Health	Transitions of Care	Patients who are transferred from an ED to another healthcare facility have all necessary communication with the receiving facility within 60 minutes of discharge	Rate per 100 transfers	Stroudwater	10/01/17 - 06/30/18	The National Benchmark for All EDTC is 83%	N/A	