2021 Anesthesiology Performance Improvement and Reporting Exchange (ASPIRE) Collaborative Quality Initiative Performance Index Scorecard Cohort 6 (2021 Start)

Measurement Period: 01/01/2021 - 12/31/2021

| Measure | | | |
|---------|--------|--|--------|
| # | Weight | Measure Description | Points |
| | | Collaborative Meeting Participation: ASPIRE Quality Champion and | |
| | | Anesthesiology Clinical Quality Reviewer (ACQR) combined attendance at | |
| | | collaborative meetings. Three total meetings with six opportunities for | |
| | | attendance. | |
| | | 5 - 6 / 6 Meetings | 20 |
| | | 4/6 Meetings | 10 |
| 1 | 20% | 3 or Less Meetings | 0 |
| | | ASPIRE Champion or ACQR attend Monthly ASPIRE Quality Committee e- Meetings | |
| | | 5 - 6 / 6 Meetings | 10 |
| | | 4 / 6 Meetings | 5 |
| 2 | 10% | 3 or Less Meetings | 0 |
| | | Timeliness of Regulatory/Legal documentation: Business Associate | |
| | | Agreement (BAA), Data Use Agreement (DUA), Multicenter Perioperative | |
| | | Outcomes Group (MPOG) Bylaws & IRB | |
| | | Submitted by April 1, 2021 | 10 |
| | | Submitted by May 1, 2021 | 5 |
| 3 | 10% | Submitted after May 1, 2021 | 0 |
| | | Hiring an ACQR | |
| | | ACQR Start Date on or before February 1, 2021 | 10 |
| | | ACQR Start Date on or before April 1, 2021 | 5 |
| 4 | 10% | ACQR Start Date on or after April 2, 2021 | 0 |
| | | Timeliness of data submission (with Case by Case Validation and Data Diagnostic Attestations Completed) | |
| | | Submitted by September 1, 2021 | 20 |
| | | Submitted by December 1, 2021 | 10 |
| 5 | 20% | Submitted after December 1, 2021 | 0 |
| | | Performance Metric: Accuracy of data of "High" and "Required" priority data diagnostics marked as "Data Accurately Represented" in Data Diagnostics Tool | |
| | | ≥ 90% diagnostics marked as "Data Accurately Represented" | 20 |
| | | ≥ 75 - 90% marked as "Data Accurately Represented" | 10 |
| 6 | 20% | < 75% marked as "Data Accurately Represented" | 0 |
| | | Timeliness of Responses to Coordinating Center Inquiry Requests | |
| | | Within 2 business days | 10 |
| | | Within 5 business days | 5 |
| 7 | 10% | Greater than 5 business days | 0 |

Anesthesiology Performance Improvement and Reporting Exchange (ASPIRE)

2021 Performance Index Scorecard Measure Explanation: Cohort 6 (2021 Start)

Measure #1: The ASPIRE Quality Champion (or a designated representative who must be an anesthesiologist) and the Anesthesiology Clinical Quality Reviewer (ACQR), combined must attend ASPIRE Collaborative Meetings in 2021. There are three total meetings with six opportunities for attendance, 2021 meeting dates:

- 1. MSQC / ASPIRE Meeting: Friday, April 23, 2021
- 2. ASPIRE Collaborative Meeting: Friday, July 16, 2021
- 3. MPOG Retreat: Friday, October 8, 2021

Measure #2: There will be six ASPIRE Quality Committee e-meetings in 2021. One representative (ASPIRE Quality Champion or ACQR) must attend the meetings. The 2021 meeting dates are as follows:

- 1. Monday, January 25, 2021
- 2. Monday, March 22, 2021
- 3. Monday, May 24, 2021
- 4. Monday, July 26, 2021
- 5. Monday, September 27, 2021
- 6. Monday, November 22, 2021

Measure #3: All the following regulatory/legal documentation must be finalized by April 1, 2021:

- 1. Business Associate Agreement (BAA)
- 2. Data Use Agreement (DUA)
- 3. IRB
- 4. MPOG Bylaws

Measure #4: Must hire Anesthesiology Clinical Quality Reviewer (ACQR) by February 1, 2021. The success of the program is greater when the ACQR is hired early in the process.

Measure #5: The minimum data requirements must be uploaded into the Multicenter Perioperative Outcomes Group (MPOG) central repository by September 1, 2021. MPOG minimum data requirements can be found on the MPOG website.

Measure #6: Data must be of high quality before the September 1, 2021 upload. The ASPIRE team will assist in determining if data is approved for upload to MPOG.

Measure #7: Timeliness of responses to the coordinating center requests. The ASPIRE team will evaluate response rates.