

**2026 Anesthesiology Quality Improvement and Reporting Exchange (ASPIRE)  
Collaborative Quality Initiative Performance Index Scorecard  
Cohorts 9  
Measurement Period: 10/01/2025 - 09/30/2026**

Measure #	Weight	Scoring Methodology	Measure Description	Points
1	20%	Hospital	<b>Collaborative Meeting Participation: ASPIRE Quality Champion and Anesthesiology Clinical Quality Reviewer (ACQR) combined attendance at meetings. Three total meetings with six opportunities for attendance.</b>	
			6 / 6 Meetings	20
			5 / 6 Meetings	10
			4 or Less	0
2	10%	Hospital	<b>Attend ASPIRE Quality Committee e-meetings: ASPIRE Quality Champion or ACQR attendance across six meetings.</b>	
			5 - 6 / 6 Meetings	10
			4 Meetings	5
			3 or Less Meetings	0
3	10%	Hospital	<b>Timeliness of Regulatory/Legal documentation: Business Associate Agreement (BAA), Data Use Agreement (DUA), Multicenter Perioperative Outcomes Group (MPOG) Bylaws &amp; IRB</b>	
			Submitted by February 1, 2026	10
			Submitted by March 1, 2026	5
			Submitted after March 1, 2026	0
4	10%	Hospital	<b>Hire an Anesthesiology Clinical Quality Reviewer (ACQR)</b>	
			ACQR Start Date on or before December 1, 2025	10
			ACQR Start Date on or before January 1, 2026	5
			ACQR Start Date on or after January 1, 2026	0
5	20%	Hospital	<b>Timeliness of data submission (with Case by Case Validation and Data Diagnostic Attestations Completed)</b>	
			Submitted by July 1, 2026	10
			Submitted by September 1, 2026	5
			Submitted after September 1, 2026	0
6	20%	Hospital	<b>Performance Metric: Accuracy of data of "High" and "Required" priority data diagnostics marked as "Data Accurately Represented" in Data Diagnostics Tool</b>	
			≥ 90% diagnostics marked as "Data Accurately Represented"	20
			≥ 75 - 90% marked as "Data Accurately Represented"	10
			< 75% marked as "Data Accurately Represented"	0
7	10%	Hospital	<b>Timeliness of Responses to Coordinating Center Inquiry Requests</b>	
			Within 2 business days	20
			Within 5 business days	15
			Greater than 5 business days	10

**Anesthesiology Performance Improvement and Reporting Exchange (ASPIRE)**  
**2026 Performance Index Scorecard Measure Explanation: Cohort 9**  
**Measurement Period: 10/01/2025 - 09/30/2026**

Measure number and description	Additional narrative describing the measure
Collaborative Meeting Participation: ASPIRE Quality Champion and Anesthesiology Clinical Quality Reviewer (ACQR) combined attendance at meetings. Three total meetings with six opportunities for attendance.	<p>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 2025-26. There are three total meetings with six opportunities for attendance:</p> <ol style="list-style-type: none"> <li>1. MPOG (Multicenter Perioperative Outcomes Group) Retreat: Friday, October 10, 2025</li> <li>2. MSQC (Michigan Surgical Quality Collaborative) / ASPIRE Meeting: Friday, March 13, 2026</li> <li>3. ASPIRE Collaborative Meeting: Friday, July 17, 2026</li> </ol>
Attend ASPIRE Quality Committee e-meetings: ASPIRE Quality Champion or ACQR attendance across six meetings.	<p>There will be six Quality Committee e-meetings in 2025-26. One representative (ASPIRE Quality Champion or ACQR) must attend the following 2025-26 meetings:</p> <ol style="list-style-type: none"> <li>1. Monday, November 24, 2025</li> <li>2. Monday, January 26, 2026</li> <li>3. Monday, February 23, 2026</li> <li>4. Monday, May 18, 2026</li> <li>5. Monday, July 27, 2026</li> <li>6. Monday, September 28, 2026</li> </ol>
Timeliness of Regulatory/Legal documentation: Business Associate Agreement (BAA), Data Use Agreement (DUA), Multicenter Perioperative Outcomes Group (MPOG) Bylaws & IRB	All regulatory documents must be submitted to the Coordinating Center by February 1, 2026.
Hire an Anesthesiology Clinical Quality Reviewer (ACQR)	Must hire Anesthesiology Clinical Quality Reviewer (ACQR) by December 1, 2025. The success of the program is greater when the ACQR is hired early in the process.
Timeliness of data submission (with Case-by-Case Validation and Data Diagnostic Attestations Completed)	The minimum data requirements must be uploaded into the Multicenter Perioperative Outcomes Group (MPOG) central repository by July 1, 2026. The MPOG minimum data requirements can be found on the MPOG <a href="#">website</a> .
Performance Metric: Accuracy of data of "High" and "Required" priority data diagnostics marked as "Data Accurately Represented" in Data Diagnostics Tool	Data must be of high quality before the July 1, 2026 upload. The ASPIRE team will assist in determining if data is approved for uploading to MPOG.
Timeliness of Responses to Coordinating Center Inquiry Requests	Timeliness of responses to the coordinating center requests. The ASPIRE team will evaluate response rates.