



Michigan Society of Thoracic and Cardiovascular Surgeons (MSTCVS)
Quality Collaborative
2023 Hospital CQI Performance Index

Measure #	Weight	Measure	Points Earned
#1	10	Accuracy of data 5-star audit score 4-star audit score 3-star audit score ≤ 2-star audit score	10 8 6 0
#2	10	Quarterly collaborative meeting participation – Surgeon and Data Manager Combined Attendance (January 1, 2023–December 31, 2023) Surgeon and data manager attended 4 quarterly meetings Surgeon and data manager attended 3 quarterly meetings Surgeon and data manager attended 2 quarterly meetings Surgeon and data manager attended 1 quarterly meeting Surgeon and data manager attended 0 quarterly meetings <i>*Alternate surgeon attendance counts towards this measure</i>	10 8 6 4 0
#3	2	Quarterly collaborative meeting participation – Alternate Surgeon (January 1, 2023–December 31, 2023) Alternate surgeon attended 1 quarterly meeting Alternate surgeon attended 0 quarterly meetings <i>* Alternate surgeon performs cardiac surgery at the site and is not the physician champion</i>	2 0
#4	4	Quarterly data manager educational meeting - Data Manager (January 1, 2023–December 31, 2023) Attended 4 data manager meetings Attended 3 data manager meetings Attended 2 data manager meetings Attended 1 data manager meeting Attended 0 data manager meetings	4 3 2 1 0
#5	4	Quarterly PERForm educational meeting - Perfusionist (January 1, 2023–December 31, 2023) Attended 4 PERForm meetings Attended 3 PERForm meetings Attended 2 PERForm meetings Attended 1 PERForm meeting Attended 0 PERForm meetings	4 3 2 1 0
#6	15	Collaborative-wide quality initiative 2023: Isolated CABG – Multiple Arterial Grafting (January 1, 2023–December 31, 2023) Collaborative mean Multiple Arterial Grafting rate $\geq 38.3\%$ Collaborative mean Multiple Arterial Grafting rate 37.3% - 38.2% Collaborative mean Multiple Arterial Grafting rate $<37.3\%$	15 8 0
#7	15	Site specific quality initiative Met improvement goal Improved but did not meet goal Implemented plan but did not improve Improved but unable to implement plan or unable to implement plan	15 10 5 0
#8	20	Isolated CAB: O/E mortality for 12 months (January 1, 2023–December 31, 2023) O/E ≤ 1.0 O/E ≤ 1.5 O/E > 1.5	20 10 0
#9	20	Isolated Valve +/- CAB Mortality and Major Morbidity OE for 36 months (January 1, 2021–December 31, 2023) O/E ≤ 1.0 O/E ≤ 1.5 O/E > 1.5	20 10 0
#10	1	Extra Credit Opportunities: 1 point per approved activity for surgeons (Maximum of 5 points) Examples include: Site visits Presentation at quarterly collaborative meeting Work group participation	