



MSTCVS Quality Collaborative 2023 VBR Quality Improvement Initiatives Final Report

Due to the Coordinating Center October 20, 2023

Hospital Name:	
Submitted by:	
Date:	

2023 MSTCVS VBR Measure #1

**Reimbursement will not be awarded without evidence that a plan was implemented and/or if no reports are submitted*

VBR Quality Initiative:	Multiple Arterial Grafting		
Target Patient Population:	Isolated CABG		
<i>Information related to this VBR measure will be reported on the MSTCVS P4P QI Initiatives Progress Report</i>			

2023 MSTCVS VBR Measure #2

**Reimbursement will not be awarded without evidence that a plan was implemented and/or if no reports are submitted*

VBR Quality Initiative:	Percentage of patients with intraoperative peak glucose <180 mg/dl			
Target Patient Population:	Isolated CABG			
Baseline Data:				
2023 Goal:	75%			
Results:	Q1 2023:	Q2 2023:	Q3 2023:	Jan-Sept 2023:
Was the progress of this QI reviewed by a multidisciplinary team? If yes, please list disciplines:				
Please describe all interventions and strategies and when they were implemented:				
Please describe any challenges or barriers that were encountered and how your team overcame them:				
Additional information, comments, or observations:				

2023 MSTCVS VBR Measure #3

**Reimbursement will not be awarded without evidence that a plan was implemented and/or if no reports are submitted*

VBR Quality Initiative:	Percentage of patients with myocardial infarction within 21 days prior to surgery with dual antiplatelets ordered at discharge			
Target Patient Population:	Isolated CABG			
Baseline Data:				
2023 Goal:	90%			
Results:	Q1 2023:	Q2 2023:	Q3 2023:	Jan-Sept 2023:
Was the progress of this QI reviewed by a multidisciplinary team? If yes, please list disciplines:				
Please describe all interventions and strategies and when they were implemented:				
Please describe any challenges or barriers that were encountered and how your team overcame them:				
Additional information, comments, or observations:				