POURPOSE
As of January 1, 2013, the benchmark on every quality measure must be met to receive full payment from Medicare. However, in the past patients have been discharged without all measures being met. A process change was necessary in order to consistently meet the goal of 100% compliance, as set forth by the Center for Medicare & Medicaid Services (CMS).

SIGNIFICANCE
The Affordable Care Act of 2010 mandates "Value-Based Purchasing" in the Medicare program with a stipulation that payment be tied to hospital performance on quality measures, moving the focus of payment from volume of patients to quality of care delivered. As of January 1, 2013, reimbursement is determined by improvement and the achievement of quality measure benchmark scores.

REFERENCES
• www.qualitymeasures.ahrq.gov
• www.jointcommission.org
• www.qualitynet.org

STRATEGY / IMPLEMENTATION
The Core Measure Nurse position was integrated into the Quality Department to meet this goal of 100% compliance with all quality measures.

The Core Measure Nurses:
• collaborate with abstractors in morning huddles utilizing Quality Measures Dashboard in the Electronic Medical Record (EMR) to determine patients needing attention to meet the quality measures and follow up with nursing staff on these needs.
• are paged when discharge orders are received and review the EMR ensuring that all quality measures are met.
• constantly communicate with abstractors, physicians, nurses, and others to identify issues and intervene to move all activities forward in meeting these goals.

IMPLICATIONS FOR PRACTICE
The partnership of the Nursing and Quality Departments and the utilization of the Electronic Medical Record combined have demonstrated improvements in the quality of care delivered to patients since implementation of this new nursing role. Combining partnership strategies and technology continues to be our vision for the future in providing the highest quality of patient care.

EVALUATION
• Prior to implementation of this process, 58% of core measures reached the 100% goal.
• Following implementation, 83% of core measures reached the 100% goal.

Improvement in Core Measures
(October 2011 - Present)

* Includes Inpatient AMI, HF, Pneumonia, SCIP, Stroke, & Immunizations