September 22, 2014



**SCIP**

**Brief guidelines for reporting the Surgical Care Improvement Program (SCIP) quality data set**

Maine Chapter 270 requires Maine acute care and critical access hospitals report to MHDO the same set of SCIP measures that CMS includes in their current Core Measures. In the past, Maine hospitals reported their Core Measure indicator data to CMS, and then the former QIO that served Maine would compile the numerators and denominators and report those, to MHDO. Now that this service is no longer offered, following the recent national restructuring of the QIO system, Maine hospitals will need to report their numerators and denominators for the SCIP measures directly to MHDO.

MHDO is preparing an Excel-based SCIP measures reporting form (similar to the new HAI reporting form), and will have it ready for distribution by October 1st. Meanwhile, as previously announced, the normal September 1st deadline for reporting SCIP data for 2014-Q1 has been moved back to October 15th.

In the meantime, so that you can begin to collect your SCIP measure numerators and denominators for reporting to MHDO, here is a list of the required measures, and a link to where you can obtain CMS’ own specifications for the SCIP measures. Remember that these are the same SCIP measures that you’ve reported to MHDO before, via the former QIO.

### The Required SCIP Measures

Chapter 270 specifies that each hospital collect and report the proper numerators and denominators, "for…[the] surgical patient[s] receiving one of the selected surgeries specified in the current version of the CMS Specifications Manual for National Hospital Quality Measures...."

[Note: The SCIP chapter of the current version of the CMS Manual, (version 4.3B) remains in effect through the end of calendar year 2014 and can be downloaded at:

<http://www.qualitynet.org/dcs/BlobServer?blobkey=id&blobnocache=true&blobwhere=1228890291048&blobheader=multipart%2Foctet-stream&blobheadername1=Content-Disposition&blobheadervalue1=attachment%3Bfilename%3D2.4_SCIP_v4_3b%2C0.pdf&blobcol=urldata&blobtable=MungoBlobs>]

**SCIP-Card-2:**  Surgery patients on beta-blocker therapy prior to arrival who received a beta-blocker during the perioperative period;

**SCIP-Inf-1:**  Prophylactic antibiotic received within one hour prior to surgical incision – overall rate and seven subcategory surgery rates:

**SCIP-Inf-1a**: Overall rate  
 **SCIP-Inf-1b**: Coronary artery bypass graft  
 **SCIP-Inf-1c**: Cardiac surgery  
 **SCIP-Inf-1d**: Hip arthroplasty  
 **SCIP-Inf-1e**: Knee arthroplasty  
 **SCIP-Inf-1f**: Colon surgery  
 **SCIP-Inf-1g**: Hysterectomy  
 **SCIP-Inf-1h**: Vascular surgery;

**SCIP-Inf-2**: Prophylactic antibiotic selection for surgical patients – overall rate and seven subcategory surgery rates:

**SCIP-Inf-2a**: Overall rate  
 **SCIP-Inf-2b**: Coronary artery bypass graft  
 **SCIP-Inf-2c**: Cardiac surgery  
 **SCIP-Inf-2d**: Hip arthroplasty  
 **SCIP-Inf-2e**: Knee arthroplasty  
 **SCIP-Inf-2f**: Colon surgery  
 **SCIP-Inf-2g**: Hysterectomy  
 **SCIP-Inf-2h**: Vascular surgery;

**SCIP-Inf-3:** Prophylactic antibiotics discontinued within 24 hours after surgery end time – overall rate and seven subcategory surgery rates:

**SCIP-Inf-3a**: Overall rate  
 **SCIP-Inf-3b**: Coronary artery bypass graft  
 **SCIP-Inf-3c**: Cardiac surgery  
 **SCIP-Inf-3d**: Hip arthroplasty  
 **SCIP-Inf-3e**: Knee arthroplasty  
 **SCIP-Inf-3f**: Colon surgery  
 **SCIP-Inf-3g**: Hysterectomy  
 **SCIP-Inf-3h**: Vascular surgery;

**SCIP-Inf-4:** Cardiac surgery patients with controlled 6 A.M. postoperative serum glucose;

**SCIP-Inf-9:** Urinary catheter removed on postoperative day I (POD 1) or postoperative day 3 (POD 3);

**SCIP-Inf-10:** Surgery patients with perioperative temperature management; and

**SCIP-VTE-2:** Surgery patients who received appropriate venous thromboembolism (VTE) prophylaxis within 24 hours prior to surgery to 24 hours after surgery.

**Sampling Methods and Requirements**: "...the hospital or ambulatory surgical facility shall be subject to the current sampling strategy for the SCIP measures as specified in the current version of the CMS Specifications Manual for National Hospital Quality Measures." (See page SCIP 12 of the CMS Manual)

### Submitting your hospital’s SCIP measures to MHDO

Once you receive or have downloaded the soon-to-be-released MHDO Excel form for SCIP indicator data submission, you can enter the numerator and denominator for each measure. With most desktop software-based email systems, you will be able to click a button on the completed Excel form that will automatically save your data file under the correct file name (according to MHDO specifications), attach it to a pre-addressed email message with the subject line already filled out, and send it off to MHDO without need for any further action on your part. For other email systems, especially web-based, you can click a button to automatically name and save the file to your desktop, and you will need to attach it to an email addressed to:

[QualitySubmissions.MHDO@maine.gov](mailto:QualitySubmissions.MHDO@maine.gov)

If you have any questions or suggestions about the SCIP measure data submission process, please contact Kim Wing at [Kimberly.Wing@maine.gov](mailto:Kimberly.Wing@maine.gov) .