

NPQIC Data Reference Guide

2027 Birth Ready Designation--- [Full Program Guide](#)

Important Notes	
<p>★ Denotes disaggregated by Race/Ethnicity ◇ Denotes disaggregated by Payer: Medicaid, Private, Other Public, Uninsured</p> <p>Definitions for Race and Ethnicity Categories</p> <ul style="list-style-type: none"> The current national standard for categorizing by race/ethnicity is to first remove Hispanics. Then, take the remaining patients and categorize by the selected race. If the patient is multi-race, selects “other”, or declines to answer, they are to be in the “other” category. 	
All Metrics (excluding Respectful Care Initiative)	Respectful Care Initiative
<ul style="list-style-type: none"> The sum of all race/ethnicity categories and all payer categories should equal the totals for the entire period of time being measured (patients should only be counted once). 	<ul style="list-style-type: none"> Due to some birthing parents belonging to more than one group, the sum of all race/ethnicity categories and a payer category may be more than the total number of deliveries.

Metric	Definition	Overall Benchmarks	Resources
<p>★ ◇ Timely Treatment of Persistent Severe Hypertension (HYPERTENSION INITIATIVE)</p>	<p>Numerator:</p> <ul style="list-style-type: none"> # Patients among the denominator who were treated within 1 hour with IV Labetalol, IV Hydralazine, or PO Nifedipine <p>Denominator:</p> <ul style="list-style-type: none"> # Pregnant and postpartum people with acute-onset severe hypertension that persists for 15 minutes or more, including those with preeclampsia, gestational or chronic hypertension <p><i>Note:</i> The 1 hour is measured from the first severe range BP reading, assuming confirmation of persistent elevation through a second reading.</p>	<p>>/=80%</p>	<p>NPQIC Severe Hypertension Guide</p> <p>IHI/AIM Severe Hypertension in Pregnancy Change Package</p>
<p>Scheduling of Postpartum Blood Pressure and Symptoms Check (HYPERTENSION INITIATIVE)</p>	<p>Numerator:</p> <ul style="list-style-type: none"> # Patients among the denominator who had a postpartum blood pressure and symptom check scheduled to occur <u>within</u> 3 days after their birth hospitalization <p>Denominator:</p> <ul style="list-style-type: none"> # Pregnant and postpartum people with acute-onset severe hypertension that persists for 15 minutes or more, including 	<p>>/=75%</p>	<p>SMFM Postpartum Follow-up Quality Metric Statement</p>

		Overall	
Metric	Definition	Benchmarks	Resources
	<p>those with preeclampsia, gestational or chronic hypertension</p> <p><i>Note:</i> The denominator should be the same as timely treatment of persistent severe hypertension</p>		
<p>★ ◇ Hemorrhage Risk Assessment on Admission (OB HEMORRHAGE INITIATIVE)</p>	<p>Numerator:</p> <ul style="list-style-type: none"> ◆ # Patients with hemorrhage risk assessment completed with risk level assigned, performed at least once between admission and birth <p>Denominator:</p> <ul style="list-style-type: none"> ◆ # All birth admissions 	>/=80%	<p>AWHONN Hemorrhage Risk Assessment Tool</p> <p>IHI/AIM OB Hemorrhage Change Package</p>
<p>★ ◇ QBL Calculation for All Deliveries (C/S & Vaginal Births) (OB HEMORRHAGE INITIATIVE)</p>	<p>Numerator:</p> <ul style="list-style-type: none"> ◆ # Patients with measurement of blood loss from birth through the recovery period using quantitative and cumulative techniques <p>Denominator:</p> <ul style="list-style-type: none"> ◆ # All birth admissions 	>/=80%	<p>AWHONN QBL Process Map</p> <p>AWHONN QBL Practice Brief</p>
<p>Postpartum Warning Sign Education (RESPECTFUL CARE INITIATIVE)</p>	<p>Numerator:</p> <ul style="list-style-type: none"> ◆ # Postpartum patients that had documentation of receiving verbal and written education on Urgent Maternal Warning Signs before discharge from birth hospitalization <p>Denominator:</p> <ul style="list-style-type: none"> ◆ # Charts audited 	>/=90%	<p>AIM UMWS</p> <p>UMWS Training Video</p> <p>CDC Hear Her Campaign</p> <p>NPOIC PP Band Initiative</p>
<p>★ ◇ Respectful Care (Deliveries)</p>	<ul style="list-style-type: none"> ◆ # Birthing people discharged by race and ethnicity 	No benchmark	
<p>★ Breastfeeding Initiation</p>	<p>Numerator:</p> <ul style="list-style-type: none"> ◆ # Newborns that were ever fed human breastmilk since birth <p>Denominator:</p> <ul style="list-style-type: none"> ◆ Total # Single (no more than one baby), term (≥ 37 weeks), newborns discharged alive from the hospital and not transferred/admitted to NICU <p><i>Note:</i> If the newborn is admitted to the NICU for observation or transitional care, you will count that in your metric (for not admitted to the NICU). Transitional care is defined as a stay of 4 hours or less in the NICU. There is no time limit for admission to observation.</p>	>/=70%	<p>The Joint Commission PC-05</p>

		Overall	
Metric	Definition	Benchmarks	Resources
<p>*Breastfeeding (Human Milk Feeding) Exclusivity</p>	<p>Numerator:</p> <ul style="list-style-type: none"> # Newborns fed only human breastmilk since birth <p>Denominator:</p> <ul style="list-style-type: none"> Total # Single (no more than one baby), term (≥ 37 weeks), newborns discharged alive from the hospital and not transferred/admitted to NICU <p><i>Note:</i> If the newborn is admitted to the NICU for observation or transitional care, you will count that in your metric (for not admitted to the NICU). Transitional care is defined as a stay of 4 hours or less in the NICU. There is no time limit for admission to observation.</p>	<p>$\geq 40\%$</p>	<p>The Joint Commission PC-05</p>
<p>*Nulliparous, Term, Singleton, Vertex (NTSV) Cesarean Birth</p>	<p>Numerator:</p> <ul style="list-style-type: none"> # NTSV patients delivered by Cesarean <p>Denominator:</p> <ul style="list-style-type: none"> Total # nulliparous (first-time pregnancies) patients who delivered a liveborn, term (≥ 37 weeks), singleton (no more than one baby), newborn in vertex (head-down position) <p>Exclusions:</p> <ul style="list-style-type: none"> See full list of exclusions on The Joint Commission PC-02 Resource link 	<p>NPQIC Birth Ready Designation: $\leq 25\%$</p> <p>Healthy People 2030 Goal: $\leq 23.6\%$</p>	<p>The Joint Commission PC-02</p> <p>State of Maternity Care Leapfrog Report</p>