

Why join CMQCC?

- **Improve outcomes** for moms and babies at your hospital
- **Measure** key performance indicators and benchmark quality data between your providers and against other hospitals
- **Learn** from local and national experts and your peers
- **Get recognized** – demonstrate to California stakeholders that you take maternity quality improvement seriously
- **Get rewarded** – many health plans are offering financial incentives and recognition for CMQCC membership

MEMBERSHIP BENEFITS – *Join the 200+ hospitals already participating!*

CMQCC membership offers hospitals a complete package of services to drive perinatal performance improvement.

QI Toolkits – Evidence-based guides for delivering high-quality care

CMQCC's toolkits provide detailed, evidence-based, multi-disciplinary implementation guides for improving perinatal quality in the inpatient setting. They include:

- Improving Health Care Response to Cardiovascular Disease in Pregnancy and Postpartum
- Elimination of Early Elective Delivery
- Improving Health Care Response to Maternal Venous Thromboembolism
- Improving Health Care Response to Obstetric Hemorrhage
- Improving Health Care Response to Preeclampsia
- Supporting Vaginal Birth and Reducing Primary Cesareans

QI Implementation - Putting evidence into action

- **New!** California Birth Equity Collaborative's aim is to improve birth care, experiences and outcomes for, by and with Black mothers and birthing people in California.
- **New!** The Mother & Baby Substance Exposure Initiative, a project of the California State Opioid Response, is a hospital and community-based effort to improve outcomes for mothers and newborns impacted by substance exposure, with a specific focus on Opioid Use Disorder.
- **QI Academy:** A year-long educational initiative focused on your hospital's maternal QI project of choice to strengthen your multidisciplinary maternal QI team and build OB quality improvement leaders
- Online clinical education on evidence-based best practices for supporting women during labor
- Sharing of QI policies, best practices and ideas with other member hospitals on our SHARE discussion platform

Maternal Data Center (MDC) – Data to drive action

CMQCC's Maternal Data Center is a user-friendly, low-burden tool that enables rapid-cycle performance measurement and insights for improvement. More than 200 hospitals use the MDC to:

- Compare hospital performance to statewide, regional and system benchmarks
- View provider-level results and benchmarks
- Generate one-click reports for OB Committees
- Perform drill-down analysis to identify a hospital's unique QI opportunities
- Identify data coding issues that impact performance measure results
- Create system-level dashboards for multi-hospital networks
- Facilitate performance reporting requirements to the Leapfrog Group, the CMS Inpatient Quality Reporting Program and the Joint Commission OPPE program and others.

CMQCC is composed of leaders from the hospital, public health, academic and clinical communities, including the California Hospital Association, Hospital Quality Institute, the American College of Obstetricians and Gynecologists and the Association of Women's Health, Obstetric and Neonatal Nurses. CMQCC is based at Stanford University.

Transforming Maternity Care

CMQCC programs result in real performance success stories!

Reducing Early Elective Deliveries

Hospitals participating with CMQCC for at least 10 months achieved an overall 55% reduction in the Early Elective Delivery rate. Results from some of the CMQCC stars look like this:



Reducing Severe Maternal Morbidity from Hemorrhage

Severe maternal morbidity was reduced by 20.8% among 126 hospitals (288,210 births) participating in the California Partnership for Maternal Safety Collaborative from 2014-2016; in contrast, a 48-hospital (83,632 births) comparison sample had a 1.2% reduction in maternal morbidity.

Improving Support for Vaginal Birth and Reducing Primary C-sections

CMQCC is actively helping hospitals reduce their first-birth, low-risk (NTSV) cesarean rate to meet the Healthy People 2020 target of 23.9% as part of the *Collaborative to Support Vaginal Birth and Reduce Primary Cesareans*. The 2018 average of all CMQCC participating hospitals was 23.3%

CMQCC participation is recommended by California health care leadership

In letters to hospital CEOs, the following organizations strongly encouraged hospitals to join CMQCC:*

- California Department of Public Health (CDPH)
- California Health and Human Services Agency (CHHS)
- California Public Employees Retirement System (CalPERS)
- Covered California
- Department of Health Care Services / Medi-Cal
- Hospital Quality Institute (CHA/HQI)
- Pacific Business Group on Health (PBGH)

*Letters can be found at www.cmqcc.org in Hospital Membership Fees — Endorsement Letters

2020 Membership Fees

Our goal is to ensure participation by all interested hospitals. We strive for fees that are fair, affordable and consistent with the value received. Discounts are available as noted below.

1-2 Site Hospitals

If your hospital is a single, stand-alone facility or in a network of 2 hospitals, your fees are:

Annual Fee Per Site \$9,000/ year

Discounts for Multi-Hospital Systems

If your hospital is part of a system with >2 hospitals, pricing is contingent on the number of system hospitals that **continue** CMQCC participation in 2020.

Timeline	Fee per site		
	3-5 sites	6-15 sites	15+ sites
Annual Fee per Site: Continued Participation Standard* Not Met	\$9,000/ year	\$9,000/ year	\$9,000/ year
Annual Fee per Site: Continued Participation Standard* Met	\$7,150/ year	\$6,600/ year	\$6,050/ year

**Continued Participation Standard - All system hospitals that were CMQCC members as of December 2019 must continue to participate in CY 2020 in order to receive the system discount.*

Discounts for Members in Need

If your hospital meets the criteria below and formally applies for a CMQCC scholarship*, you may be eligible for the following discounted fees.

Members in Need Scholarship*	Fee per site
A. <1000 annual births and 70% or more Medi-Cal Patients Or <750 annual births and 60% or more Medi-Cal Patients Or < 500 annual births and 50% or more Medi-Cal Patients Or a Critical Access Hospital	\$2,500/ year
B. 1000-3500 annual births and 80% or more Medi-Cal Patients	\$5,500/ year

Scholarship applications must be submitted by **Friday, August 16th. If your hospital is approved for a scholarship, it is only guaranteed for calendar year 2020.*

Invoices will be sent in January 2020 for payment by March 20, 2020 for calendar year 2020 membership.

Transforming Maternity Care