

Implementing Malnutrition Quality Improvement and Reporting on the Global Malnutrition Composite Score (GMCS)

How to Use the GMCS for CMS Hospital Quality Reporting

This practice tool is for use by clinicians in implementing malnutrition quality improvement and reporting on the GMCS through your hospital quality reporting system.

Why Is Malnutrition Quality Improvement Important and What Are the Steps for Implementing It?

Implementing malnutrition quality improvement (QI) can help yield better patient and healthcare outcomes. It is an important first step for reporting performance on the GMCS to the Centers for Medicare & Medicaid Services (CMS). To get started, check out the resources from [MalnutritionQuality.org/Starting-QI](https://www.malnutritionquality.org/starting-qi).

What Is the Hospital Inpatient Quality Reporting (IQR) Program?¹

- CMS's Hospital IQR Program is a voluntary, pay-for-reporting program.
- The IQR promotes reporting of specific inpatient quality-of-care measures to CMS, and is tied to a hospital's Medicare Annual Payment Update (APU).
- To receive full Medicare payment for the care they provide, hospitals are required to report data to CMS on specific measures for health conditions common in Medicare patients that typically result in hospitalization.
- Among other requirements, CMS's FY 2023 Inpatient Prospective Payment System (IPPS) final rule states hospitals must report data from 3 quarters annually for 3 electronic clinical quality measures (eCQM) of their choice. (Visit bit.ly/3UmlVkW for more information on FY 2023 IPPS.)

What Is the GMCS Measure?

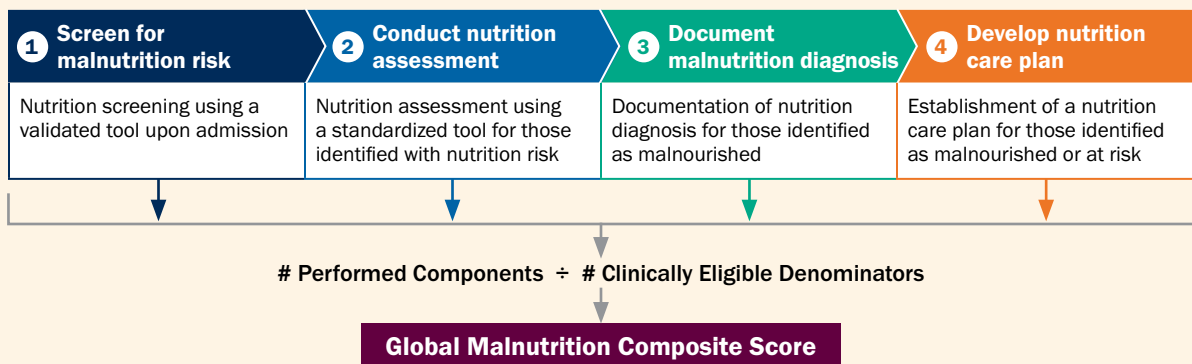
- The GMCS is an evidence-based eCQM with 4 components reflecting inpatient malnutrition identification and care in accordance with best practices.
- The GMCS is the first and only nutrition-focused quality measure endorsed by the National Quality Forum and included in any CMS payment program. GMCS performance score is based on the average of performance on 4 component measures.²

Why Is the GMCS Important to Report on as an Inpatient Quality Measure?

- Because the GMCS is 1 of the 3 eCQMs on which hospitals can self-select to report, it can help fulfill this reporting requirement and enable a hospital to potentially receive its full payment as well as ensure that patients receive appropriate care.
- Participating hospitals can start reporting performance based on the GMCS beginning in CY

2024. Thereafter, performance data will be publicly available at [medicare.gov/care-compare](https://www.medicare.gov/care-compare).

- Hospitals are required to report on quality measures through IQR (and other programs). CMS adopted the GMCS as a health equity quality measure and hospitals and health systems today are increasingly focused on improving health equity.
- Hospitals are also focused on improving health outcomes. Evidence suggests implementation of components of the GMCS is associated with improved patient/hospital outcomes as demonstrated by:
 - » Reducing hospital length of stay, infection rates, and 30-day hospital readmission³
 - » Lowering healthcare costs⁴
 - » Identifying at-risk patients
 - » Documenting relevant nutrition diagnosis and discharge plans^{5,6}
- The GMCS reflects the recommended nutrition care process for patients already in place in many hospitals.



Adapted with permission from the [MQii Global Malnutrition Composite Score Overview](#).¹

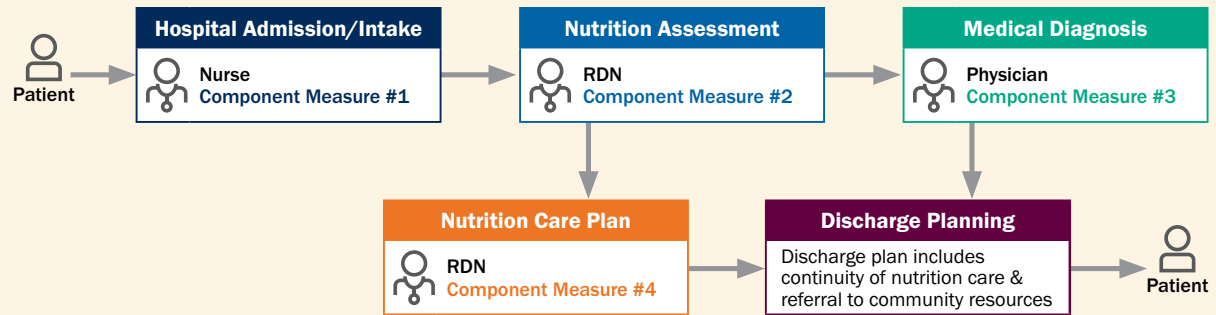
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How Can My Interprofessional Clinical Team Partner with Hospital Administration and Quality Teams to Report on the GMCS?

1. Compile evidence showing the burden of malnutrition, including impact of malnutrition on health outcomes and health equity
 - a. Emphasize how malnutrition affects those patient populations most important to your hospital and that the GMCS is a measure that can be used to advance health equity
2. Communicate how the malnutrition care process already in place in your hospital is consistent with the steps of the GMCS
3. Engage implementation team members, including quality improvement and informatics staff, who will be instrumental in quality measure reporting
 - a. Find a provider champion who can help advocate for GMCS reporting with senior level administrators
 - b. Coordinate with EMR vendor to know when and how GMCS can be built in your system
4. Develop plan with implementation team to encourage hospital administration to report on measure
 - a. Use the MQii GMCS Reporting Overview Presentation at bit.ly/3UGIXVb as a resource
5. Develop education and communication materials
 - a. Train staff (including physicians, dietitians, nurses, other HCPs) to appropriately document completion of malnutrition care workflow steps in your EMR in preparation for 2024 reporting to CMS
 - b. Communicate trends to internal team and administrators

Workflow Guided by Global Malnutrition Composite Score¹ Measure

- The 4 components of the GMCS are guided by a workflow that reflects best practices for malnutrition quality improvement using an interprofessional care team, as shown below.
- Coordination of care within the hospital to follow this workflow can also lead to more comprehensive discharge planning.
- Following this workflow can ensure patients are connected to necessary nutrition care and community resources at discharge to help improve outcomes and avoid readmission to the hospital.



Adapted with permission from the MQii Global Malnutrition Composite Score Overview.¹

6. Monitor/evaluate and implement performance improvement to achieve better workflow; implement further malnutrition QI over time

Where Can I Learn More?

- Malnutrition Quality Improvement Initiative at malnutritionquality.org (more resources under development)
- Academy of Nutrition & Dietetics Global Malnutrition Composite Score at cdrnet.org/GMCS
- ASPEN Malnutrition Solution Center at nutritioncare.org/malnutrition
- Centers for Medicare & Medicaid Services eCQI Resource Center at bit.ly/3G3nkZg

References

1. Malnutrition Quality Improvement Initiative. Global Malnutrition Composite Score. <https://malnutritionquality.org/gmcs-for-iqr/>.
2. Danis K, Kline M, Munson M, et al. Identifying and managing malnourished hospitalized patients utilizing the Malnutrition Quality Improvement Initiative: The UPMC Experience. *J Acad Nutr Diet.* 2019;119(9 Suppl 2):S40-S43.
3. Valladares AF, et al. How a malnutrition quality improvement initiative furthers malnutrition measurement and care: results from a hospital learning collaborative. *JPEN J Parenter Enteral Nutr.* 2021;45:366-371.
4. Sulo S, et al. Budget impact analysis of a home-based nutrition program for adults at risk for malnutrition. *Am Health Drug Benefits.* 2017;10:262-270.
5. Wills-Gallagher J, Kerr KW, Macintosh B, et al. Implementation of malnutrition quality improvement reveals opportunities for better nutrition care delivery for hospitalized patients. *JPEN J Parenter Enteral Nutr.* 2022;46(1):243-248.
6. Bruno M, Kerr K, Badaracco C, et al. Malnutrition quality improvement initiative data support continued opportunities in malnutrition care. *J Acad Nutr Diet.* 2022;122(10-S2):S34-S38.

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