



2026 BMC2 Collaborative Quality Initiative Performance Index Scorecard VS Sites

		Points Earned	Points Possible
Measure 1: Vascular Surgery Meeting Participation – Clinical Lead			
	Yes/No		
VS In-Person Physician Meeting – 5/20/26			
VS Virtual Physician Meeting – 9/9/26			
VS Annual In-Person Collaborative Meeting – 10/15/26			
Total Meetings Attended:			
Attended 2-3 meetings = 10 points			10
Attended 1 meeting = 5 points			
Measure 2: Vascular Surgery Data Coordinator Expectations and Participation			
	Yes/No		
Submitted 2 QI project forms			
Cases were submitted on time			
Peer review uploads were completed on time			
Submitted report distribution attestation			
	Yes/No		
VS Recurring Virtual Coordinator Meeting – 1/21/26			
VS Recurring Virtual Coordinator Meeting – 3/18/26			
VS Recurring Virtual Coordinator Meeting – 8/19/26			
VS Annual In-Person Coordinator Meeting – 10/14/26			
VS Annual In-Person Collaborative Meeting – 10/15/26			
VS Recurring Virtual Coordinator Meeting – 12/2/26			
Total Meetings Attended:			
Meets all expectations = 10 points			10
Meets most expectations = 7.5 points			
Measure 3: Vascular Surgery Physician Peer Review of assigned cases for procedural indications & technical quality			
	Percentage		
Reviewed and submitted 100% of VS cases = 10 points			
Reviewed and submitted < 100 VS cases = 0 points			10
Vascular Surgery sites select two measures for scoring from measures 4, 5, and 6			
Measure 4: Vascular Surgery Performance Goal – Documentation of EVAR* imaging performed on the 1-year follow-up form. Measurement period: 1/1/2026 – 6/30/2026. Baseline period: 1/1/2024 – 12/31/2024			
	Percentage		
≥ 85% = 25 points			

75% - < 85% = 15 points				
< 75% = 0 points				25
Measure 5: Vascular Surgery Performance Goal – Duplex ultrasound completed prior to asymptomatic carotid endarterectomy. Measurement period: 1/1/2026 – 6/30/2026. Baseline period: 1/1/2024 – 12/31/2024.				
	Percentage			
≥ 90% = 25 points				
80% - < 90% = 15 points				
< 80% = 0 points				25
Measure 6: Vascular Surgery Performance Goal – Vein mapping completed before elective lower extremity open bypass. Measurement period: 1/1/2026 – 6/30/2026. Baseline period: 1/1/2024 – 12/31/2024.				
	Percentage			
≥ 90% = 25 points				
80% - < 90% = 15 points				
< 80% = 0 points				25
Measure 7: Vascular Surgery Performance Goal – Smokers receive smoking cessation treatment prior to discharge. Measurement period: 1/1/2026 – 6/30/2026. Baseline period: 1/1/2023 – 3/31/2024.				
	Percentage			
≥ 65% = 20 points				
55% - < 65% = 15 points				
< 55% = 0 points				20
Measure 11: Extra Credit – 1 point per approved activity (maximum of 5 points) Examples include: Physician attendance at the annual in-person collaborative meeting; presenting at a meeting; engagement in a work group/committee; referral of an engaged patient advisor; special initiatives (TBD). Measurement period: 1/1/2026 – 12/31/2026.				
	1 point per activity			
Total Number of Extra Credit Activities:				5
2026 P4P Index Score:				
				100

*EVAR = Endovascular aneurysm repair
Total score does not include extra credit