

MBSAQIP Standards Revision Log

Optimal Resources for Metabolic and Bariatric Surgery 2019- Revised

Standard	Revision	Rationale	Compliance Date
General Changes			
Document Sub-Title	2019 Standards- Revised	To distinguish between the original 2019 Standards release and this revised version. Updating the year of release in the sub-title is reserved for major Standards updates and releases with significant compliance changes.	N/A
Language	Case Logs --> Operative Logs	Any mention of “case log” or “administrative data file” has been updated to also specify operative logs. This is more universally understood terminology.	N/A

Standard	Revision	Rationale	Compliance Date
Standard 1- Institutional Administrative Commitment			
1.1 Administrative Commitment	<p>Only one letter of commitment is required for each triennial accreditation cycle.</p> <p>The letter must be written and signed in the most recent 12 months.</p> <p>Previous letters from past accreditation cycles are not acceptable.</p>	<p>The letter of commitment must be from the most recent year, showing continuous commitment to the bariatric program.</p> <p>The required content of the letter contains information that naturally changes over time, thus the requirement that the letter be updated and written in the most recent year of the application cycle.</p>	N/A
Standard 2- Program Scope and Governance			
2.1 Volume Criteria	<p>Significantly expanded and revised the “Adolescent Patient” definition.</p> <p><u>MBSAQIP Adolescent Centers only:</u> Clarification that Adolescent Centers are approved to operate on patients > 18.</p> <p>Patients > 21 must be reviewed by the MBS Committee for appropriateness of care.</p>	<p>Previous language was overly restrictive and implied that Adolescent Centers could not operate on patients > 18, when that was never the intent.</p> <p>Patients >21 need to be reviewed by the MBS Committee to determine if continuity of care should be maintained or deferred to an adult inpatient facility.</p>	N/A

2.2 Low Acuity Patient and Procedure Selection	Acceptable revisional procedure list condensed. Revisions are still exclusive to adjustable gastric banding procedures.	Clarification that Low Acuity Centers are allowed to replace adjustable gastric bands. This has always been allowed.	N/A
2.3 Ambulatory Surgery Center Patient and Procedure Selection	Acceptable revisional procedure list condensed.	Clarification that ASCs are allowed to replace adjustable gastric bands. This has always been allowed.	N/A
2.4 Metabolic and Bariatric Surgery (MBS) Committee	Strengthened language around non-surgeon proceduralists and their required involvement in the MBS Committee.	It has always been required for non-surgeon proceduralists providing treatment for weight loss and metabolic diseases to be part of the MBS Committee.	October 1, 2022
	COMPLIANCE CHANGE: Patient Education Pathways (Standard 5.1) must be reviewed annually by the MBS Committee during the annual comprehensive review meeting.	Patient education materials must be reviewed and revised annually to provide up-to-date information on case volume, procedure mix, outcomes data, and other relevant changes.	
	COMPLIANCE CHANGE: MBSAQIP Adolescent Centers only: Must review patients > 21	Patients >21 need to be reviewed by the MBS Committee to determine if continuity of care should be maintained or deferred to an adult inpatient facility.	
2.5 Metabolic and Bariatric Surgery (MBS) Director	NO CHANGES	NO CHANGES	N/A
2.6 Metabolic and Bariatric Surgery (MBS) Coordinator	NO CHANGES	NO CHANGES	N/A
2.7 Metabolic and Bariatric Surgery (MBS) Clinical Reviewer	The center is required to terminate access for any personnel who are no longer authorized to access the MBSAQIP Registry using the Data Platform Contacts management page in the Quality Portal.	This language was updated to emphasize the center's responsibility to update and manage their site contacts with the new functionality added to the MBSAQIP Quality Portal.	N/A
2.8 Obesity Medicine Director (OMD)	NO CHANGES	NO CHANGES	N/A

Standard 3- Facilities and Equipment Resources			
3.1 Health Care Facility Accreditation	NO CHANGES	NO CHANGES	N/A
3.2 Facilities, Equipment, and Furniture	NO CHANGES	NO CHANGES	N/A
3.3 Designated Bariatric Unit	NO CHANGES	NO CHANGES	N/A
Standard 4- Personnel and Services Resources			
4.1 Credentialing Guidelines for Metabolic and Bariatric Surgeons	Introductory paragraphs rewritten.	These changes were made to emphasize that the center must have separate and distinct MBS credentialing requirements that are based on the guidelines outlined in the Standards. The credentialing requirements determine eligibility for granting MBS privileges to MBS practitioners. The center must specify its own requirements following the guidelines outlined in Standard 4.1.	N/A
4.2 MBSAQIP Surgeon Verification	NO CHANGES	NO CHANGES	N/A
4.3 Metabolic and Bariatric Surgery Call Coverage	NO CHANGES	NO CHANGES	N/A
4.4 Staff Training	Added both course materials and records of training completion to the Documentation section.	There are no compliance changes in this Standard. The updated language clarifies the expected documentation that must be provided.	N/A
4.5 Multidisciplinary Team	NO CHANGES	NO CHANGES	N/A

4.6 Advanced Cardiovascular Life Support (ACLS)	NO CHANGES	NO CHANGES	N/A
4.7 Patient Stabilization	NO CHANGES	NO CHANGES	N/A
4.8 Critical Care Unit (CCU)/Intensive Care Unit (ICU) Services	NO CHANGES	NO CHANGES	N/A
4.9 Anesthesia Services	NO CHANGES	NO CHANGES	N/A
4.10 Endoscopy Services	NO CHANGES	NO CHANGES	N/A
4.11 Diagnostic and Interventional Radiology Services	NO CHANGES	NO CHANGES	N/A
4.12 Specialty Services	NO CHANGES	NO CHANGES	N/A
4.13 Pediatric Medical Advisor (PMA)	NO CHANGES	NO CHANGES	N/A
4.14 Pediatric Behavioral Specialist	NO CHANGES	NO CHANGES	N/A

4.15 Children’s Hospital Service Requirements	<p>COMPLIANCE CHANGE: Patients > 21 must be reviewed by the MBS Committee for appropriateness of care.</p> <p>Significantly expanded and revised the “Adolescent Patient” definition.</p> <p>Clarification that Adolescent Centers are approved to operate on patients > 18.</p>	<p>Patients >21 need to be reviewed by the MBS Committee to determine if continuity of care should be maintained or deferred to an adult inpatient facility.</p> <p>Previous language was overly restrictive and implied that Adolescent Centers could not operate on patients > 18, when that was never the intent.</p>	October 1, 2022
Standard 5- Patient Care: Expectations and Protocols			
5.1 Patient Education Pathways	<p>COMPLIANCE CHANGE: The pathways must be reviewed and revised annually by the MBS Committee with updated procedural volumes and outcomes data.</p>	<p>Patient education pathways must be reviewed and revised annually to provide up-to-date information on case volume, procedure mix, outcomes data, and other relevant changes to properly address the informed consent process.</p>	October 1, 2022
5.2 Patient Care Pathways	NO CHANGES	NO CHANGES	N/A
5.3 Written Transfer Agreement	NO CHANGES	NO CHANGES	N/A
5.4 Inpatient Admitting Privileges	NO CHANGES	NO CHANGES	N/A
5.5 Risk Assessment Protocol	NO CHANGES	NO CHANGES	N/A
5.6 Obesity Medicine Services	NO CHANGES	NO CHANGES	N/A
Standard 6- Data Surveillance and Systems			

6.1 Data Entry	NO CHANGES	NO CHANGES	N/A
6.2 30-Day and Long-Term Follow-Up	NO CHANGES	NO CHANGES	N/A
6.3 Data Review	NO CHANGES	NO CHANGES	N/A
6.4 Obesity Medicine Data Collection	NO CHANGES	NO CHANGES	N/A
Standard 7- Quality Improvement			
7.1 Adverse Event Monitoring	The MBS Committee must review all mortalities occurring within the first 90-day post-operative period. Removed requirement for “in-hospital” mortality review.	The “in-hospital” language was confusing and redundant, prompting review of mortality cases when it was not intended or required.	N/A
7.2 Quality Improvement Initiatives	All QI initiatives must be based on an existing problem identified by a reliable data source.	There are no compliance changes in this Standard. The updated language more strongly emphasizes the existing requirement of properly structured, data-driven QI initiatives.	N/A
7.3 Annual Compliance Reports	NO CHANGES	NO CHANGES	N/A
Standard 8- Professional and Community Outreach			
8.1 Support Groups	NO CHANGES	NO CHANGES	N/A