

Substance Exposed Newborns

Data Reporting Instructions

October 1, 2026



Instructions

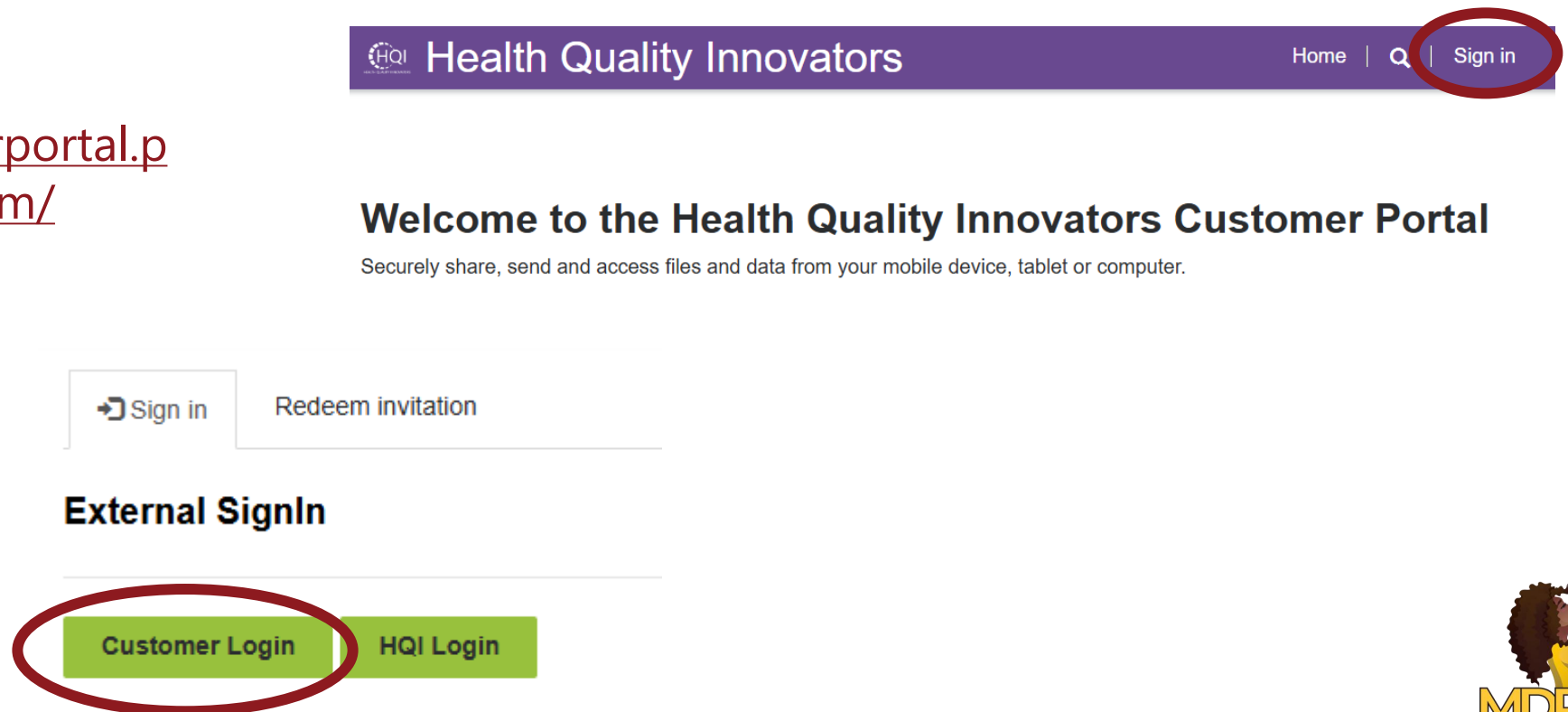
- To make data collection easier, the MDPQC team put together an Excel template that you can use for compiling your measures, available here:
 - [Substance Exposed Newborns Data Reporting Template](#)
- Once you have your data compiled, you can input the data into the HQI Customer Portal using the following instructions.
- If you are unable to enter your data into the portal, you may send it to an MDPQC team member to enter on your behalf.

Step 1: Log into the HQI Customer Portal

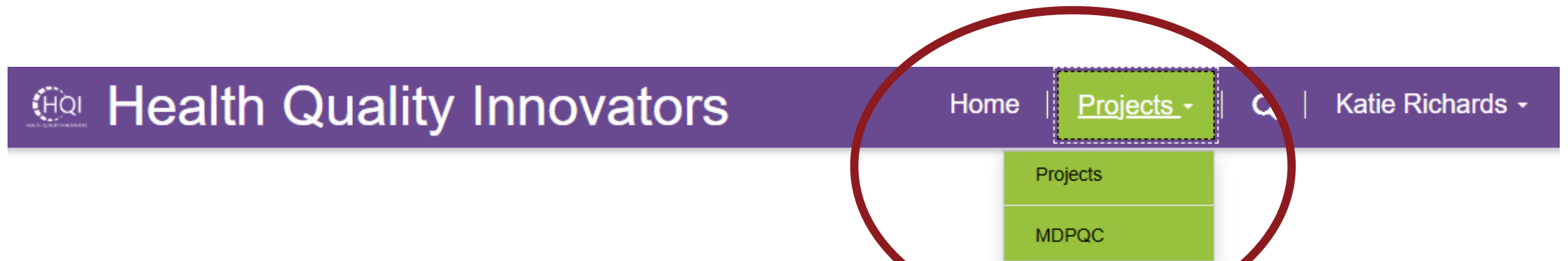
Note: You must already have an account set up in the Portal. If you do not, reach out to an MDPQC team member for an invitation.

→Your login from the hypoglycemia initiative carries forward!

- Access link:
<https://hqicustomerportal.powerappsportals.com/>



Step 2: Select the MDPQC Project



Welcome to the Health Quality Innovators Customer Portal

Securely share, send and access files and data from your mobile device, tablet or computer.

Step 3: Select "Create" under the Substance Exposed Newborn Measure section

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HEALTH QUALITY INNOVATORS


MDPQC

Substance Exposed Newborn Measure

This is where facility-specific data is added. Data entered here is only accessible to HQI and your facility.

Create

Account	Name	Created On ↓	Contact	
Health Quality Innovators	HealthQualityInnovators_Q32026	9/30/2026 3:16 PM	Alyna Nguyen	▼
Health Quality Innovators	HealthQualityInnovators_Q32026	9/30/2026 8:55 AM	Katie Richards	▼



Step 4: Select your Reporting Quarter and enter the Reporting Year Then click "Next"

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Step 1 - Create SEN Measure

Step 2 - Create Process Measure

Step 3 - Create Education Measure

Step 4 - Create Structure Measure

Reporting Quarter *

Select ▾

Year *

Account
Health Quality Innovators

Next

Step 5: Enter Process Measure Data

Notes:

1. This is only applicable starting with Q4-2026 data, due January 2027. You can just click “Next” for Q3-2026 data to move to the next screen.
2. There are no required fields here, so enter what you can.

Step 1 - Create SEN Measure ✓

Step 2 - Create Process Measure

Step 3 - Create Education Measure

Step 4 - Create Structure Measure

Process Measures

Births

Non-Hispanic White	Non-Hispanic Black	Non-Hispanic American Indian and Alaska Native	Non-Hispanic Asian, Native Hawaiian, or Pacific Islander
Other/Unknown	Non-Hispanic Multi-Race	Hispanic	TOTAL

Births To Well-Baby Nursery

Non-Hispanic White	Non-Hispanic Black	Non-Hispanic American Indian and Alaska Native	Non-Hispanic Asian, Native Hawaiian, or Pacific Islander
Other/Unknown	Non-Hispanic Multi-Race	Hispanic	TOTAL

Step 6: Enter Education Measure Data

Notes:

1. This is only applicable starting with Q4-2026 data, due January 2027. You can just click “Next” for Q3-2026 data to move to the next screen.
2. There are no required fields here, so enter what you can.

Step 1 - Create SEN Measure ✓

Step 2 - Create Process Measure ✓

Step 3 - Create Education Measure

Step 4 - Create Structure Measure

% Physicians/NPs/PAs receiving education within the last two years on hospital protocols and best practices for providing care to infants with substance exposure

SCN/NICU

Well-Baby Nursery

L&D

Select

Select

Select

% Nurses receiving education within the last two years on hospital protocols and best practices for providing care to infants with substance exposure

SCN/NICU

Well-Baby Nursery

L&D

Select

Select

Select

Previous

Next

Step 7: Enter Structure Measure Data

Note: Your options are No, Yes, In Development

Step 1 - Create SEN Measure ✓	Step 2 - Create Process Measure ✓	Step 3 - Create Education Measure ✓	Step 4 - Create Structure Measure
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Hospital provides standardized staff education on compassionate, non-judgmental screening, patient education, and support

Select ▼

Hospital uses standardized definitions of SEN/NAS

Select ▼

Hospital uses a standardized screening protocol for maternal substance use at L&D intake, reviewed and updated based on legal requirements and best practices.

Select ▼

Hospital uses a standardized protocol for referral to Child Protective Services related to in-utero substance use. reviewed and updated based on legal

Step 8: Click "Submit" at the bottom

Previous

Submit

Data Entry Complete!

Once submitted, you will be able to view your previous submissions on the home page of the HQI Customer Portal. The naming convention will be Hospital_QQYYYY. You will only be able to see your own hospital's data.

Substance Exposed Newborn Measure

This is where facility-specific data is added. Data entered here is only accessible to HQI and your facility.

				Create
Account	Name	Created On ↓	Contact	
Health Quality Innovators	HealthQualityInnovators_Q32026	9/30/2026 3:39 PM	Katie Richards	✓



Measure FAQs

1. How do you define a Substance Exposed Newborn?

Baby exposed to substances that can cause withdrawal symptoms (including but not limited to: alcohol, illegal substances, prescription drugs like SSRIs, nicotine, marijuana)

2. What timeline should substance use during pregnancy be included? For example, what about alcohol use in the first trimester?

This is up to the hospital to determine what makes sense clinically and can be more easily pulled for data reporting, based on the information that is available at the time of delivery (i.e., collected during a verbal screening).

3. What and what severity of withdrawal symptoms should be included?

If withdrawal symptoms are enough to be transferred to a higher level of care for management, regardless of the specific withdrawal symptoms, then this would count for the measures.

4. What about babies that are being managed for substance exposure in the well-baby nursery?

If babies are being treated in nursery, then that is a step up in care, and can be considered a higher level of care. If possible, you can count based on if they are coded differently for management.

5. The few NAS babies our facility see are directly admitted to the NICU. Based on the data template, those babies would be excluded from the data. How do we address that?

We are updating the wording for the process measure to say "Infants transferred out of or excluded from well-baby nursery for treatment/management of withdrawal symptoms". In this case, the infant was excluded from admission to the well-baby due to having neonatal abstinence syndrome.

6. How do we include, if we include, infants that were admitted to the NICU for a primary reason other than NAS, but ended up remaining in the NICU due to NAS? Specific ex - The infant was initially admitted for respiratory issues. However, after ESC care, the infant remained hospitalized for an additional two months, failed ESC management, and ultimately required pharmacologic treatment. As a result, the primary reason for the prolonged NICU stay became NAS.

We are updating our exclusion criteria to state "Excluding infants that go straight to the NICU for non-substance-related issues after birth". In this case, this baby would not be counted because they were initially transferred to the NICU for a non-substance-related concern, and it would add additional complexity to distinguish when the care was strictly for substance exposure.

7. Since all patients and families receive a survey, would that satisfy the requirement, or are you looking for a feedback tool specifically designed for this population? (Structure Measure: *Hospital has established a mechanism of obtaining feedback from parents and caregivers about their care experience and regularly reviews this feedback.*)

We are ideally looking for hospitals to collect feedback beyond the regular patient satisfaction surveys (i.e., HCAHPS), specific to this patient population. It can be something as simple as "did you feel welcome here?".



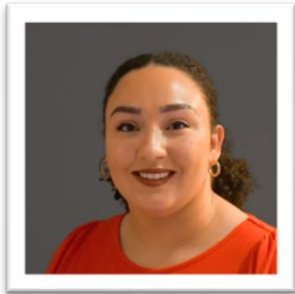
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