ADDITIONAL INFORMATION REGARDING ELECTRONIC CLINICIAL QUALITY MEASURES (eCQMs) FOR CMS QUALITY REPORTING PROGRAMS FOR ELIGIBLE HOSPITALS (EH) AND CRITICAL ACCESS HOSPITALS (CAH)

The table below titled "Electronic Clinical Quality Measures for Eligible Hospitals and Critical Access Hospitals" contains additional up-to-date information for Electronic Clinical Quality Measures (eCQMs) that are to be used to electronically report 2023 clinical quality measure data for the Centers for Medicare & Medicaid Services (CMS) quality reporting programs. Measures will not be eligible for 2023 reporting unless and until they are proposed and finalized through notice-and-comment rulemaking for each applicable program. Subsequent updates will be provided in a new version of this table with a summary of the updates located in a version history table at the end of the document.

Please note measure stewards updated the titles and descriptions for the eCQMs included in this table and therefore they may not match the information provided on NQF's website. Measures that do not have an NQF number are measures that are not currently endorsed.

ELECTRONIC CLINICAL QUALITY MEASURES FOR ELIGIBLE HOSPITALS AND CRITICAL ACCESS HOSPITALS

CMS eCQM ID	NQF #	Measure Title	Measure Description	Numerator Statement	Denominator Statement	Meaningful Measure Area	Measure Set Identifier
CMS9v11	0480e	Exclusive Breast Milk Feeding	Exclusive breast milk feeding during the newborn's entire hospitalization. The measure is reported as an overall rate which includes all newborns that were exclusively fed breast milk during the entire hospitalization.	Inpatient hospitalizations for newborns who were fed breast milk only since birth	Equals Initial Population: Inpatient hospitalizations for single newborns who were born in the hospital that ends during the measurement period, and with either of the following conditions: − An estimated gestational age at birth of >= 37 weeks − Birth weight >= 3000 grams without an estimated gestational age at birth	Care is Personalized and Aligned with Patient's Goals	PC-05
CMS71v12	Not Applicable	Anticoagulation Therapy for Atrial Fibrillation/Flutter	Ischemic stroke patients with atrial fibrillation/flutter who are prescribed or continuing to take anticoagulation therapy at hospital discharge	Inpatient hospitalizations for patients prescribed or continuing to take anticoagulation therapy at hospital discharge	Inpatient hospitalizations for patients with a principal diagnosis of ischemic stroke, and a history of atrial ablation, or current or history of atrial fibrillation/flutter	Preventive Care	STK-3
CMS72v11	Not Applicable	Antithrombotic Therapy By End of Hospital Day 2	Ischemic stroke patients administered antithrombotic therapy by the end of hospital day 2	Inpatient hospitalization for patients who had antithrombotic therapy administered the day of or day after hospital arrival	Inpatient hospitalizations for patients with a principal diagnosis of ischemic stroke	Preventive Care	STK-5
CMS104v11	Not Applicable	Discharged on Antithrombotic Therapy	Ischemic stroke patients prescribed or continuing to take antithrombotic therapy at hospital discharge	Inpatient hospitalizations for patients prescribed or continuing to take antithrombotic therapy at hospital discharge	Inpatient hospitalizations for patients with a principal diagnosis of Ischemic stroke	Preventive Care	STK-2
CMS105v11	Not Applicable	Discharged on Statin Medication	Ischemic stroke patients who are prescribed or continuing to take statin medication at hospital discharge	Inpatient hospitalizations for patients prescribed or continuing to take statin medication at hospital discharge	Inpatient hospitalizations for patients with a principal diagnosis of ischemic stroke	Preventive Care	STK-6

CMS eCQM ID	NQF #	Measure Title	Measure Description	Numerator Statement	Denominator Statement	Meaningful Measure Area	Measure Set Identifier
CMS108v11	Not Applicable	Venous Thromboembolism Prophylaxis	This measure assesses the number of patients who received Venous Thromboembolism (VTE) prophylaxis or have documentation why no VTE prophylaxis was given between the day of arrival to the day after hospital admission or surgery end date for surgeries that start the day of or the day after hospital admission	Inpatient hospitalizations for patients who received VTE prophylaxis: − between the day of arrival and the day after hospital admission − the day of or the day after surgery end date (for surgeries that end the day of or the day after hospital admission) Inpatient hospitalizations for patients who have documentation of a reason why no VTE prophylaxis was given: − between the day of arrival and the day after hospital admission − the day of or the day after surgery end date (for surgeries that end the day of or the day after hospital admission)	Equals Initial population: Inpatient hospitalizations for patients age 18 and older, discharged from hospital inpatient acute care without a diagnosis of venous thromboembolism (VTE) or obstetrics with a length of stay less than or equal to 120 days that ends during the measurement period	Preventive Care	VTE-1
CMS111v11	Not Applicable	Median Admit Decision Time to ED Departure Time for Admitted Patients	Median time (in minutes) from admit decision time to time of departure from the emergency department (ED) for emergency department patients admitted to inpatient status	Measure Observation: Median time (in minutes) from the Decision to Admit to inpatient to the time the patient physically departs the ED to inpatient hospitalization	Measure/Initial Population: Inpatient hospitalizations ending during the measurement period with length of stay less than or equal to 120 days, where the patient received services during the preceding emergency department (ED) visit at the facility when a decision to admit inpatient was made prior to departing the ED	Admission and Readmissions to Hospitals	ED-2

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CMS eCQM ID	NQF #	Measure Title	Measure Description	Numerator Statement	Denominator Statement	Meaningful Measure Area	Measure Set Identifier
CMS190v11	Not Applicable	Intensive Care Unit Venous Thromboembolism Prophylaxis	This measure assesses the number of patients who received Venous Thromboembolism (VTE) prophylaxis or have documentation why no VTE prophylaxis was given the day of or the day after the initial admission (or transfer) to the Intensive Care Unit (ICU) or surgery end date for surgeries that start the day of or the day after ICU admission (or transfer)	Inpatient hospitalizations for patients who received VTE prophylaxis: − the day of or the day after ICU admission (or transfer) − the day of or the day after surgery end date (for surgeries that end the day of or the day after ICU admission or transfer) Inpatient hospitalizations for patients who have documentation of a reason why no VTE prophylaxis was given: − between the day of arrival and the day after ICU admission (for patients directly admitted as inpatients to the ICU) − the day of or the day after surgery end date (for surgeries that end the day of or the day after ICU admission or transfer)	Inpatient hospitalizations for patients directly admitted or transferred to ICU during the hospitalization	Preventive Care	VTE-2
CMS506v5	3316e	Safe Use of Opioids - Concurrent Prescribing	Proportion of inpatient hospitalizations for patients 18 years of age and older prescribed, or continued on, two or more opioids or an opioid and benzodiazepine concurrently at discharge	Inpatient hospitalizations where the patient is prescribed or continuing to take two or more opioids or an opioid and benzodiazepine at discharge	Equals Initial Population: Inpatient hospitalizations (inpatient stay less than or equal to 120 days) that end during the measurement period, where the patient is 18 years of age and older at the start of the encounter and prescribed one or more new or continuing opioid or benzodiazepine at discharge	Prevention and Treatment of Opioid and Substance Use and Disorders	N/A

CMS eCQM ID	NQF #	Measure Title	Measure Description	Numerator Statement	Denominator Statement	Meaningful Measure Area	Measure Set Identifier
CMS816v2	3503e	Hospital Harm - Severe Hypoglycemia	Inpatient hospitalizations for patients 18 years of age or older at admission, who were administered at least one hypoglycemic medication during the encounter, who suffer the harm of a severe hypoglycemic event during the encounter	Inpatient hospitalizations where a severe hypoglycemic event occurred during the encounter, which is: 1. A blood glucose result less than 40 mg/dL AND 2. A hypoglycemic medication administered within 24 hours prior to the start of the severe hypoglycemic event (i.e., the glucose result less than 40 mg/dL) AND 3. No subsequent repeat test for blood glucose with a result greater than 80 mg/dL within five minutes of the start of the initial blood glucose test with result less than 40mg/dL Only the first qualifying severe hypoglycemic event is counted in the numerator, and only one severe hypoglycemic event is counted per encounter. The 24-hour and 5-minute timeframes are based on the time the blood glucose was drawn, as this reflects the time the patient was experiencing that specific blood glucose level	Equals Initial Population: Inpatient hospitalizations where the patient is 18 years of age or older at the start of the encounter, and at least one hypoglycemic medication was administered during the encounter. The measure includes instances of administration of hypoglycemic medications in the emergency department or in observation status at the start of an inpatient hospitalization when assessing inclusion of encounters in the measure denominator.	Preventable Healthcare Harm	HH-01

CMS eCQM ID	NQF #	Measure Title	Measure Description	Numerator Statement	Denominator Statement	Meaningful Measure Area	Measure Set Identifier
CMS871v2	3533e	Hospital Harm - Severe Hyperglycemia	This measure assesses the number of inpatient hospital days with a hyperglycemic event (harm) per the total qualifying inpatient hospital days for that encounter for patients 18 years of age or older at admission	Inpatient hospitalizations with a hyperglycemic event within the first 10 days of the encounter minus the first 24 hours, and minus the last period before discharge if less than 24 hours A hyperglycemic event is defined as: 1. A day with at least one blood glucose value >300 mg/dL; OR 2. A day where a blood glucose test was not done, and it was preceded by two consecutive days where at least one glucose value during each of the two days was >=200 mg/dL	Equals Initial Population: Inpatient hospitalizations where the patient is 18 years or older at the start of the admission with a discharge during the measurement period, as well as either: 1. a diagnosis of diabetes that starts before or during the encounter; or 2. administration of at least one dose of insulin or any hypoglycemic medication during the encounter; or 3. presence of at least one blood glucose value >=200 mg/dL at any time during the encounter The measure includes inpatient hospitalizations that began in the emergency department or in observation	Preventable Healthcare Harm	HH-02

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