



## **Overview**

**Electronic Clinical Quality Measure (eCQM) Strategy Project**

**Electronic Clinical Quality Improvement (eCQI) Resource Center**

**Measure Collaboration (MC) Workspace**



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# eCQM Strategy Project

# eCQM Strategy Background

## Electronic Clinical Quality Measure (eCQM) Strategy Project Goals

- Reduce Burden
- Increase Value
- Increase Stakeholder Involvement

## Problem Statement

- Providers participating in CMS quality and value-based purchasing programs have shared challenges they experience related to the **complexity and high burden of eCQM implementation, data capture, and reporting.**

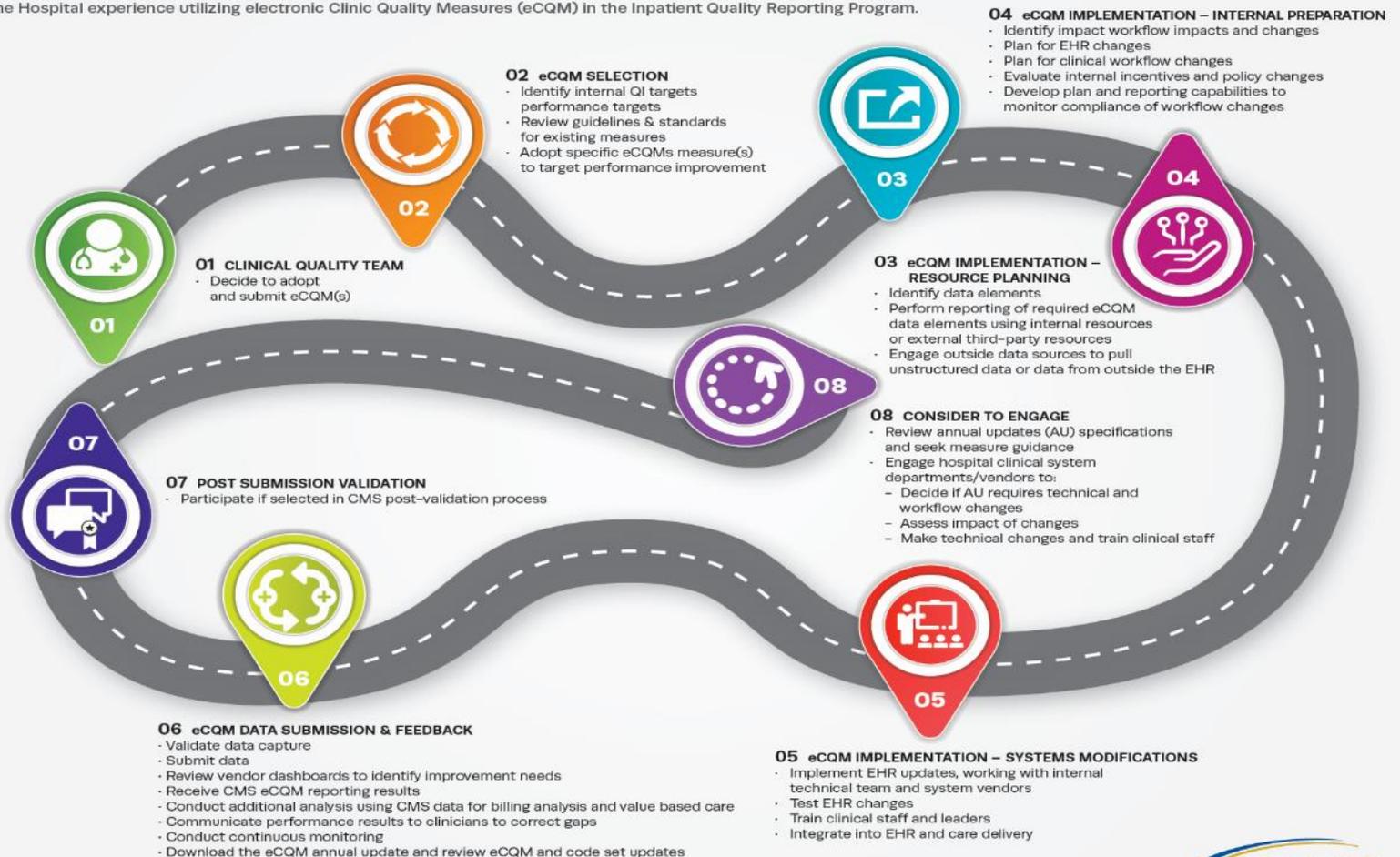
## Project Scope

- **Measure Development** process from concept to the Measures Under Consideration (MUC) list
- **Electronic Clinical Quality Reporting** requirements and processes from eCQM implementation to submission
- **Tools for Development and Reporting**

# eCQM Strategy Journey Map

## Hospital eCQM Inpatient Quality Reporting Journey

The Hospital experience utilizing electronic Clinic Quality Measures (eCQM) in the Inpatient Quality Reporting Program.



# eCQM Strategy Recommendations

## eCQM STRATEGY RECOMMENDATIONS

### ALIGNMENT

- eCQM reporting requirements across CMS program care settings
- eCQM specifications, value sets, and data collection

### COMMUNICATION, EDUCATION, AND OUTREACH

- Coordinated education and outreach campaigns to learn from stakeholders and share CMS program information
- Measure-level webinars
- Clear eCQM guidance, plain language, and improved website usability

### EHR CERTIFICATION PROCESS

- eCQM certification aligned with CMS reporting requirements



### VALUE

- Quality dashboard best practice collaboration between providers and CMS
- Data element definitions

### DEVELOPMENT PROCESS

- Collaborative Measure Development Workspace
- Data element repository
- Clinically feasible workflow for data capture
- Feasibility testing for new data elements

### IMPLEMENTATION AND REPORTING PROCESSES

- Clear eCQM specifications, tools, and resources
- Feasible data elements
- Submission of data elements and eCQMs with FHIR and APIs
- Use of eCQM standards to support interoperability
- Consolidated pre-submission validation testing tools
- eCQM attribution research and pilots

06/2018

# eCQM Strategy Feedback

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To share feedback or get involved, please email:

[eCQMStrategy@groups.mitre.org](mailto:eCQMStrategy@groups.mitre.org)

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# eCQI Resource Center

# eCQI Resource Center

- The electronic clinical quality improvement (eCQI) Resource Center serves as a one-stop shop for the most current information to support eCQI.
- This website has the most current news, events, and resources related to eCQM tools and standards.
- The website is a place to coordinate people and activities around eCQI.
- [www.ecqi.healthit.gov](http://www.ecqi.healthit.gov)

# eCQI Resource Center

The eCQI Resource Center provides the most current resources for electronic clinical quality improvement, such as:

- eCQMs and Supporting Materials
- Tools and Resources
  - eCQM Annual Timeline
  - Education
  - Implementation Resources
  - Tools Library
- eCQI Standards
  - Clinical Quality Language (CQL)
  - Quality Data Model (QDM)
  - Quality Reporting Document Architecture (QRDA)
  - Fast Healthcare Interoperability Resources (FHIR®)
- Measure Collaboration (MC) Workspace
  - eCQM Data Element Repository
  - eCQM Concepts
  - New eCQM Clinical Workflow
  - eCQM Test Results

# eCQI Resource Center

<https://ecqi.healthit.gov>

The screenshot shows the eCQI Resource Center website. At the top, there is a navigation bar with the following links: eCQMs - Electronic Clinical Quality Measures, Resources - Standards, Tools, & Resources, About - eCO, CDS, FAQs, Engage, and Sign In - Manage Your Account. A search bar is located on the right side of the navigation bar.

The main content area features a large blue banner with the text: "Updated eCQM Data Element Repository for 2020 Reporting Now Available". Below this text is a button labeled "eCQM Data Element Repository (DERep)". A sub-header reads: "Electronic Clinical Quality Improvement (eCQI) Resource Center - The one-stop shop for the most current resources to support electronic clinical quality improvement."

Below the banner is a section titled "Featured Resources" with three icons and corresponding text:

- Icon of a person with a stethoscope: Eligible Professional / Eligible Clinician eCQMs
- Icon of a hospital building with a plus sign: Eligible Hospitals / Critical Access Hospital eCQMs
- Icon of a graduation cap: Educational Resources

Below the featured resources is a call to action: "Connect with the Community of Professionals Who are Dedicated to Clinical Quality Improvement for Better Health".

At the bottom, there are two sections: "Latest News" and "Upcoming Events".

**Latest News:** New Fast Healthcare Interoperability Resources (FHIR®) Content Page on the eCQI Resource Center. Oct 21, 2019.

**Upcoming Events:** October Cooking with CQL or How to Express eCQMs using CQL, QDM and FHIR® Webinar. 4:00pm EDT. Oct 24.

# eCQM Annual Timeline

The screenshot shows the eCQM Annual Timeline website. The header includes the eCQI Resource Center logo, navigation links for eCQMs, Resources, About, and Sign In, and a search bar. The main content area features the title "eCQM Annual Timeline" and a brief description. Below this is a section titled "eCQM Annual Timeline by Calendar Quarter" with a horizontal timeline showing quarters P, 1, 2, 3, and 4. Quarter 3 is highlighted with a red dashed box. To the right of the timeline is a box labeled "Select a Quarter". Below the timeline is a list of updates under the heading "eCQM".

eCQI  
RESOURCE CENTER

eCQMs -  
Electronic Clinical  
Quality Measures

Resources -  
Standards, Tools, &  
Resources

About -  
eCQI, CDS, FAQs  
Engage

Sign In  
Manage Your  
Account

Enter keywords

## eCQM Annual Timeline

The eCQM<sup>®</sup> Annual Timeline is a general guide provided for referencing scheduled updates for eCQMs<sup>®</sup>, tools, reporting, rules, public comments<sup>®</sup> and more. The timelines listed may by subject to change. [Interactive pdf](#), (PDF)

### eCQM Annual Timeline by Calendar Quarter

P 1 2 3 4

Periodic

#### eCQM

- [CMS Measures Management System Blueprint Updated](#)
- [Electronic Clinical Quality Measure Technical Expert Panels](#)
- Expert Work Groups
- [Individual Electronic Clinical Quality Measure Public Comment](#)
- [Quality Data Model Updated](#)

Select a Quarter

# eCQM Tools and Key Resources

The screenshot shows the eCQI Resource Center website. At the top, there is a navigation bar with the eCQI logo and menu items: eCQMs - Electronic Clinical Quality Measures, Resources - Standards, Tools, & Resources (which is underlined), About - eCQI, CDS, FAQs, Engage, and Sign In - Manage Your Account. A search bar is located on the right. Below the navigation bar, the main heading is "eCQI Tools & Key Resources". Underneath, there is a link to "Receive updates on this topic". A horizontal menu contains three tabs: "About", "eCQM Standards and Tools Versions", and "eCQI Tools & Resources Library". The "Tools & Resources" section follows, with a paragraph explaining that the eCQM Informational Tools, Resources and Collaboration (InfoTRAC) are openly available for stakeholder use. Below this text is a dark blue box containing a process flow diagram titled "eCQM Informational Tools, Resources, & Collaboration". The diagram shows four stages: Development (represented by a pencil and ruler icon), Implementation (represented by a gear and checkmark icon), Reporting (represented by a bar chart icon), and Help & Feedback (represented by a clipboard with a checkmark icon). Arrows connect these stages in a sequence, with a feedback loop arrow returning from the Help & Feedback stage to the Development stage.

# eCQM Standards – FHIR Example

The screenshot shows the eCQI Resource Center website. The browser address bar displays <https://ecqi.healthit.gov/fhir>. The page header includes the eCQI Resource Center logo, navigation links for eCQMs, Resources, About, and Sign In, and a search bar. The main content area features a large heading for "Fast Healthcare Interoperability (FHIR®)" and a sub-heading "Receive updates on this topic". A navigation menu is open, highlighting "Fast Healthcare Interoperability Resources (FHIR®)" under the "ECQI STANDARDS" section. A callout box labeled "Select a Standard" points to this menu item. The main text describes FHIR as an open-source standard for exchanging healthcare information and mentions its focus on implementation and use of latest web technologies.

**Fast Healthcare Interoperability (FHIR®)**

Receive updates on this topic

About Tools & Resources

FHIR is an open-source Health Level Seven International (HL7) standard for exchanging healthcare information electronically. FHIR is the next generation exchange framework being adopted by the healthcare community to address the challenges of interoperability. FHIR resources represent patient data in different ways (e.g., medications, encounters). FHIR provides a means for representing and sharing information among clinicians and organizations in a standard way regardless of the ways local EHRs represent or store the data. FHIR combines the best features of previous standards into a common specification, while being flexible enough to meet needs of a wide variety of use cases within the healthcare ecosystem. FHIR has a heavy focus on implementation and uses the latest web technologies to aid rapid adoption.

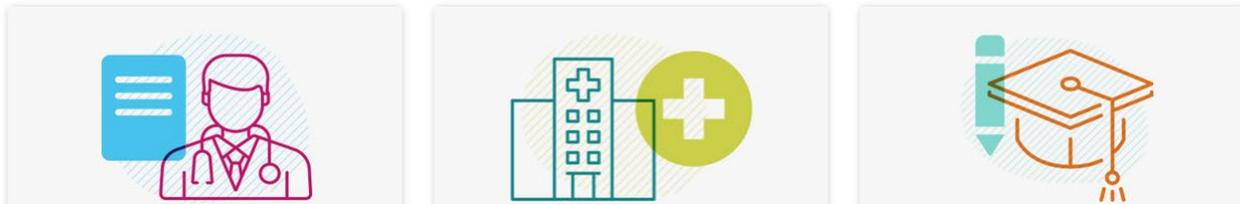
**FHIR Quality Measurement**

The healthcare community and CMS are exploring a potential transition to FHIR-based quality measurement beginning with research and testing. Currently used quality standards, Quality Data Model (QDM), Clinical Quality Language (CQL), Health Quality Measure Format (HQMF), and Quality Reporting Document Architecture (QRDA), remain the backbone of electronic clinical quality measure (eCQM) development and reporting. However, the FHIR standard has potential to better align with the EHR's ability to share data in clinical settings and to improve alignment with clinical decision support initiatives and to reduce overall burden on measure developers and implementers.

# How to Access the eCQMs

The screenshot shows the eCQI Resource Center website. The browser address bar displays <https://ecqi.healthit.gov/>. The page header includes the eCQI Resource Center logo, navigation menus for eCQMs, Resources, and About, a Sign In button, and a search bar. A dropdown menu for eCQMs is open, listing categories: Eligible Professional / Eligible Clinician eCQMs, Eligible Hospital / Critical Access Hospital eCQMs, and Measure Collaboration (MC) Workspace. An 'ABOUT' section lists: About eCQMs, eCQM Annual Timeline, eCQM Lifecycle, and Certification. A blue banner on the left promotes 'New Measure Collaboration Workspace Modules Now Available' with a 'Measure Collaboration (MC) Workspace' button. Below the banner, text describes the eCQI Resource Center as a one-stop shop for electronic clinical quality improvement resources. A central box highlights 'Select EP/EC or EH/CAH eCQMs'. The background features a photograph of a healthcare professional at a laptop.

## Featured Resources



# eCQMs: Eligible Hospital/Critical Access Hospital – Example (1 of 2)

← → ↻ 🏠 🔒 https://ecqi.healthit.gov/eh-cah-ecqms

eCQI  
RESOURCE CENTER

eCQMs -  
Electronic Clinical  
Quality Measures

Resources -  
Standards, Tools, &  
Resources

About -  
eCQI, CDS, FAQs  
Engage

## Eligible Hospital / Critical Access Hospital eCQMs

[Receive updates on this topic](#)

The electronic clinical [quality measures](#) (eCQMs) are updated for calendar year 2020 reporting for the Hospital Inpatient Quality Reporting (IQR) Program and the Medicare and Medicaid Promoting Interoperability programs for [Eligible Hospitals](#) and [Critical Access Hospitals](#). Measures will not be eligible for 2020 reporting unless and until they are proposed and finalized through notice-and-comment rulemaking for each applicable program.

Each year, CMS makes updates to the eCQMs adopted for submission in CMS programs. CMS requires the use of updated eCQMs for all its quality programs because they include updated codes, logic corrections, and clarifications. Reporting [eCQM](#) data to the Hospital IQR Program and for aligned credit for reporting of eCQMs to the Promoting Interoperability programs requires that hospitals use the most current version of the eCQMs identified below for the applicable reporting period.

CMS may publish addenda to the eCQM updates. The addenda provide updates to the codes used in [value sets](#) based on [code system](#) changes.

CMS has updated eCQMs for potential inclusion in these programs

- [Hospital Inpatient Quality Reporting \(IQR\) Program](#)
- [Medicaid Promoting Interoperability Program for Eligible Hospitals and Critical Access Hospitals](#)
- [Medicare Promoting Interoperability Electronic Health Record \(EHR\) Incentive Programs for Eligible Hospitals and Critical Access Hospitals](#)

Use the eCOM Materials and follow the [eCOM Implementation Checklist](#) to update your electronic health record and processes for eCOM use and reporting.

Select Reporting Period Search

2019  Apply

2019 Reporting Period Eligible Hospital / Critical Access Hospital eCQMs

Pre-Rulemaking eCQMs

For Use	eCQM Materials	Published
2019 01-04	<a href="#">Implementation Checklist eCOM Annual Update</a>	
2019 01-04	<a href="#">Implementation Checklist eCOM Addendum</a>	
2019 01-04	<a href="#">Guide for Reading eCQMs (PDF)</a>	May 2018

Select the  
Reporting  
Period

# eCQMs: Eligible Hospital/Critical Access Hospital – Example (2 of 2)

https://ecqi.healthit.gov/eh-cah-ecqms

2019 01-04	<a href="#">CMS ORDA I Implementation Guide for Hospital Quality Reporting (PDF)</a>	Nov 2019
2019 01-04	<a href="#">CMS ORDA I Schematrons and Sample Files for Hospital Quality Reporting (ZIP)</a>	Sep 2019
2019 01-04	<a href="#">eCQM Annual Update Pre-Publication Document (PDF)</a>	Feb 2016
2019 01-04	<a href="#">ORDA Category I Conformance Statement Resource (PDF)</a>	Dec 2019

2019 Reporting Period Eligible Hospital / Critical Access Hospital eCQMs

(US-HIK @ Links are not updated for this Reporting Period)

**Total number of EH/CAH eCQMs: 16**

Measure Name	Short Name	CMS eCQM ID	NOF ID	Meaningful Measure Area
<a href="#">Anticoagulation Therapy for Atrial Fibrillation/Flutter</a>	STK-03	CMS71v6	None	Preventive Care
<a href="#">Antithrombotic Therapy By End of Hospital Day 2</a>	STK-05	CMS72v7	None	Preventive Care
<a href="#">Assessed for Rehabilitation</a>	STK-10	CMS102v7	None	Preventive Care
<a href="#">Discharged on Antithrombotic Therapy</a>	STK-2	CMS104v7	None	Preventive Care
<a href="#">Discharged on Statin Medication</a>	STK-06	CMS105v7	None	Preventive Care
<a href="#">Elective Delivery</a>	PC-01	CMS113v7	0469	Preventive Care
<a href="#">Exclusive Breast Milk Feeding</a>	PC-05	CMS9v7	0480	Preventive Care
<a href="#">Hearing Screening Prior To Hospital Discharge</a>	EHDI-1a	CMS31v7	1354	Preventive Care
<a href="#">Home Management Plan of Care (H MPC) Document Given to Patient/Caregiver</a>	CAC-3	CMS26v6	None	Preventive Care
<a href="#">Intensive Care Unit Venous Thromboembolism Prophylaxis</a>	VTE-2	CMS190v7	0372	Preventive Care
<a href="#">Median Admit Decision Time to ED Departure Time for Admitted Patients</a>	ED-2	CMS111v7	0497	Patient's Experience of Care
<a href="#">Median Time from ED Arrival to ED Departure for Admitted ED Patients</a>	ED-1	CMS55v7	0495	Patient's Experience of Care
<a href="#">Median Time from ED Arrival to ED Departure for Discharged ED Patients</a>	ED-3	CMS32v8	0496	Patient's Experience of Care
<a href="#">Primary PCI Received Within 90 Minutes of Hospital Arrival</a>	AMI-8a	CMS53v7	None	Preventive Care
<a href="#">Stroke Education</a>	STK-08	CMS107v7	None	Preventive Care
<a href="#">Venous Thromboembolism Prophylaxis</a>	VTE-1	CMS108v7	0371	Preventive Care

Select a Measure

# MC Workspace Landing Page

## (2 of 2)

## Measure Collaboration (MC) Workspace

[Receive updates on this topic](#)

144 views

[About](#)

[eCQM Concepts](#)

[eCQM Clinical Workflow](#)

[eCQM Test Results](#)

[eCQM Data Element Repository](#)

### MC Workspace

The MC Workspace brings together a set of interconnected resources, tools, and processes to promote transparency and better interaction across stakeholder communities that develop, implement, and report electronic clinical [quality measures® \(eCQM®\)](#).

#### Links to Measure Concept Resources

Meaningful Measures Areas  
CMS Measures Inventory Tool (CMIT)  
Measures Under Consideration (MUC) List

#### Propose new measure concepts

Assess alignment with Meaningful Measures Areas  
Check the CMS Measures Inventory for similar measures

Access eCQM data elements  
Find value sets  
Access use cases related to a data element(s)  
See data element test results  
Comment on a data element(s) for measures under development



Access the shared development workspace  
Search measure workflow documentation  
Provide comments on evolving eCQMs

Access test results

# Sample Individual eCQM Page

## Venous Thromboembolism Prophylaxis

[Receive updates on this topic](#)

### eCQMs for 2019 Reporting Period

[CMS9v7 - PC-05](#)  
[CMS26v6 - CAC-3](#)  
[CMS31v7 - EHD1-1a](#)  
[CMS32v8 - ED-3](#)  
[CMS53v7 - AMI-8a](#)  
[CMS55v7 - ED-1](#)  
[CMS71v8 - STK-03](#)  
[CMS72v7 - STK-05](#)  
[CMS102v7 - STK-10](#)  
[CMS104v7 - STK-2](#)  
[CMS105v7 - STK-06](#)  
[CMS107v7 - STK-08](#)  
**[CMS108v7 - VTE-1](#)**  
[CMS111v7 - ED-2](#)  
[CMS113v7 - PC-01](#)  
[CMS190v7 - VTE-2](#)

**CMS Measure ID:** CMS108v7

**Version:** 7

**NQF Number:** 0371

**Measure Description:** This measure assesses prophylaxis or have done the day of or the day after surgeries that start the

**Initial Population:** Patients age 18 and older without a diagnosis of with a length of stay le measurement period

**Denominator Statement:** All patients in the initial

**Denominator Exclusions:** \* Patients who have a l  
\* Patients with comfort and the day after hosp  
\* Patients with comfort end date for surgeries t admission

**Measure Scoring:** [Proportion](#)

**Measure Type:** [Process](#)

**Improvement Notation:** Improvement noted as an increase in rate

**Guidance:** When low dose unfractionated heparin is administered for VTE Prophylaxis, the intended administration route for low dose unfractionated heparin is subcutaneous.

Reasons for no pharmacological and no mechanical VTE prophylaxis must be explicitly documented by the MD/APN/PA or pharmacist and linked with VTE prophylaxis. Ambulation alone is not a sufficient reason for not administering VTE prophylaxis. In order for ambulation/patient ambulating to be considered as an acceptable reason, there needs to be explicit documentation, e.g., "patient out of bed and ambulating in halls - no VTE prophylaxis needed."

**Meaningful Measure:** [Preventive Care](#)

### Specifications

Attachment	Size
<a href="#">CMS108v7.html</a>	109.63 KB
<a href="#">CMS108v7.zip (ZIP)</a>	109.33 KB
<a href="#">CMS108v7_TRN.xlsx</a>	22.13 KB

### Data Element Repository

[Data Elements contained within CMS108v7](#)

### Release Notes

Header

- Updated Version Number.

**Measure Section:** eMeasure Version number

**Source of Change:** Measure Lead

# eCQM and eCQI Educational Resources

The screenshot displays the eCQI Resource Center website. The header includes the eCQI Resource Center logo, navigation links for eCQMs, Resources, About, and Sign In, and a search bar. The main content area features a blue banner with the text "eCQM and eCQI Educational Resources" and an image of a woman presenting to a group. Below the banner is a link to "Receive updates on this topic" and a grid of six resource cards:

- General eCQM and eCQI Education**: General resources from a variety of sources and presentations
- eCQM Tools Education**: Resources available on eCQM tools such as Bonnie, Cypress, and PSVA
- eCQI Resource Center Live Demonstrations**: Resources from live demonstrations of the eCQI Resource Center
- CQL Education**: Resources available on the Clinical Quality Language (CQL) Standard
- FHIR Education**: Resources available on the Fast Healthcare Interoperability Resource Standard
- QDM Education**: Resources available on the Quality Data Model (QDM) Standard

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# Measure Collaboration (MC) Workspace

# How to Access the MC Workspace

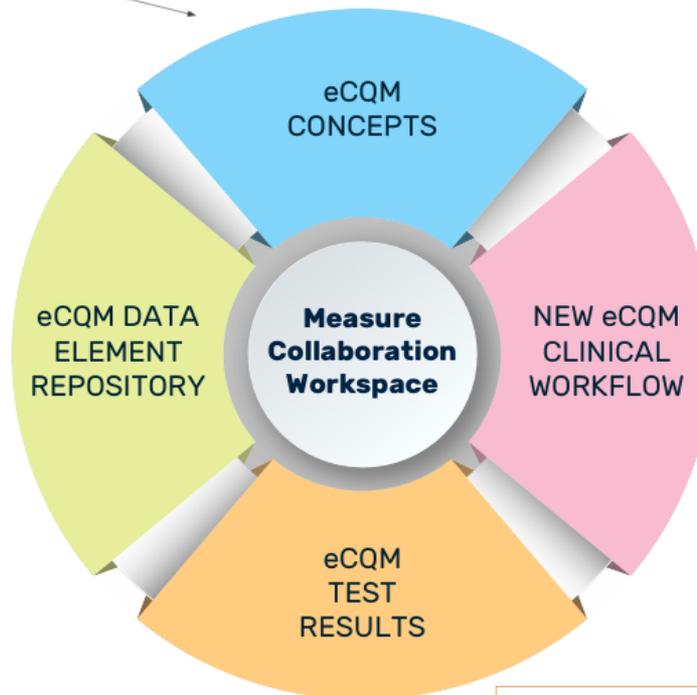
The screenshot shows the eCQI Resource Center website. The browser address bar displays "ecqi.healthit.gov". The page header includes the "eCQI RESOURCE CENTER" logo, a search bar with the text "Enter keywords", and a "Sign In" button. The main navigation menu is open, showing "eCQMs - Electronic Clinical Quality Measures" (highlighted with a red box), "Resources - Standards, Tools, & Resources", and "About - eCQI, CDS, FAQs Engage". The "eCQMs" dropdown menu is also open, listing "ECQMS" and "ABOUT" sections. Under "ECQMS", the "Measure Collaboration (MC) Workspace" is highlighted with a red box. A callout box with a white background and black border points to this option with the text "Select the MC Workspace". On the left side of the page, there is a blue banner with the text "New Measure Collaboration Workspace Modules Now Available" and an orange button labeled "Measure Collaboration (MC) Workspace >". Below the banner, there is a paragraph: "Electronic Clinical Quality Improvement (eCQI) Resource Center - The one-stop shop for the most current resources to support electronic clinical quality improvement." The "Featured Resources" section at the bottom contains three icons: a person with a stethoscope, a hospital building with a cross, and a graduation cap.

# Overview of the MC Workspace

**Links to Measure Concept Resources**  
Meaningful Measures Areas  
CMS Measures Inventory Tool (CMIT)  
Measures Under Consideration (MUC) List

- Propose new measure concepts
- Assess alignment with Meaningful Measures Areas
- Check the CMS Measures Inventory for similar measures

- Access eCQM data elements
- Find value sets
- Access use cases related to a data element(s)
- See data element test results
- Comment on a data element(s) for measures under development



- Access the shared development workspace
- Search measure workflow documentation
- Provide comments on evolving eCQMs

- Access test results
- See all important test attributes
- Participate in measure testing activities

11/2019

# MC Workspace Landing Page (1 of 2)

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Link to MC Workspace:

<https://ecqi.healthit.gov/mc-workspace>

# Measure Collaboration Workspace

[Receive updates on this topic](#)

[About](#)

[eCQM Concepts](#)

[eCQM Clinical Workflow](#)

[eCQM Test Results](#)

[eCQM Data Element Repository](#)

[Propose an eCQM Concept](#) >

## Electronic Clinical Quality Measure (eCQM) Concepts

The Electronic Clinical Quality Measures (eCQM) Concept module will give users the ability to submit new measure concepts, align new measures with Meaningful Measures criteria, and identify whether similar measures exist. Feedback can help guide the [measure developer](#) to refine the concept and purpose behind a new measure to better suit the needs of the quality measurement reporting community. Feel free to browse eCQM Concepts that have been submitted and share comments to help inform the measure development process.

### How to Propose an eCQM Concept

If you have a measure concept in mind, follow these simple steps to propose your idea:

1. Search the [CMS Measures Inventory Tool](#), to see if your proposed measure concept is in progress.
2. Search the [CMD Workspace Proposed Concepts Library](#) for your measure concept. If it exists, submit your comments supporting the concept for consideration by the measure developer.
3. If your proposed measure concept does not exist, click on [Propose an eCQM Concept](#), to submit basic information about your concept. This information will be routed to CMS measure developers for consideration.

### Proposed eCQM Concepts Library

Search

Select a Filter Option

### Featured Research Resources

Browse these featured external sites to identify whether a similar measure concept exists or to get more information about CMS measures.

 CMS CMIT Measures Inventory Tool	 CMS MUC Measures Under Consideration	 CMS MMU Meaningful Measures Hub
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# eCQM Concepts (1 of 2)

- Allows users to submit measure concepts to CMS for review
- Users can search submitted concepts and comment on them
- Links to existing resources are available for users to research measures in progress

# eCQM Concepts (2 of 2)

## Create eCQM Concept

Title \*

**Description \***

**Concept Population**

**Rationale \***

**Meaningful Measure Area**

**Measure Files**

**Keywords**

Description \*

[About text formats ?](#)

- No HTML tags allowed.
- Web page addresses and email addresses turn into links automatically.
- Global and entity tokens are replaced with their values. [Browse available tokens.](#)

Care Setting \*

- Select a value -

- Allows users to submit measure concepts to CMS for review
- Users can search submitted concepts and comment on them
- Links to existing resources are available for users to research measures in progress

## New Electronic Clinical Quality Measure (eCQM) Clinical Workflow

The New eCQM Clinical Workflow module allows users to review measure flow and clinical context for CMS measures under development. This allows for stakeholders interested in a measure to provide comments, clinical workflow concerns, and guidance early in the measure development lifecycle. Browse the measures under development for areas of interest for your organization, review the supporting documentation, and share comments to help achieve feasible clinical workflows.

### How to review clinical workflows for measures and submit feedback

1. Search the eCQMs to find your eCQM of interest.
2. Click the title of the eCQM to view the measure details for relevance to your patient population.
3. Scroll to the review workflow descriptions and workflow files based on your organization's processes.
4. Enter feedback on proposed data flow and/or workflow in the comment field for measure developer consideration. Comments will be publicly visible.

[Post eCQM Clinical Workflow](#) >

### Measures Under Development

Search	Measure Type	Sort by	Order	
<input type="text"/>	- Any -	Sort by	Asc	<a href="#">Apply</a>

#### Hospital Harm – Pressure Injury

IMPAO International, LLC • maggielohnes • Last Updated: 12/13/2019  
105 Views | 0 Comments | 2 Subscribers | Published

#### Hospital Harm – Acute Kidney Injury

IMPAO International, LLC • maggielohnes • Last Updated: 12/13/2019  
62 Views | 0 Comments | 1 Subscriber | Published

# New eCQM Clinical Workflow

- Allows users to review clinical intent and think about clinical workflow implications
- Users can share comments on clinical workflow challenges for measure developer consideration

## Electronic Clinical Quality Measure (eCQM) Test Results

The eCQM Test Results module allows users to participate in eCQM testing by providing proposed eCQMs for testing, submitting test results using a template, and viewing test results. Measure developers use testing to assess measure feasibility and determine the extent to which the required data elements are available and retrievable in the electronic health record and the extent to which they can be implemented without undue burden for performance measurement. The draft test results offer transparency into the feasibility.

### How to review data elements for measures and submit feedback

1. Search the eCQMs to find your eCQM of interest.
2. Click the title of the eCQM to view the measure details for relevance to your patient population.
3. Scroll to the Data Element Feasibility Testing template to download and complete it based on data element feasibility assessment for your organization.
4. Upload the completed template and click submit to send those results to the measure developer. The submitted test results will be accessible by the respective measure developer. They will not be publicly available.
5. Enter additional comments in the comment field. Comments will be publicly visible.

[Post eCQM Testing Template](#) >

### Measures Under Development

Search	Measure Type	Sort by	Order	
<input type="text"/>	- Any -	Sort by	Asc	<a href="#">Apply</a>

#### Hospital Harm - Acute Kidney Injury

IMPAQ International, LLC • maggielohnes • Last Updated: 12/13/2019  
62 Views | 0 Comments | 1 Subscriber | Published

#### Hospital Harm - Pressure Injury

IMPAQ International, LLC • maggielohnes • Last Updated: 12/13/2019  
105 Views | 0 Comments | 2 Subscribers | Published

# eCQM Test Results

- Allows users to review data elements proposed for a measure and provide feasibility information for their organization
- Users can share comments on data element feasibility for measure developer consideration

# eCQM Data Element Repository (1 of 2)

MC Workspace

Notifications 0

## Measure Collaboration (MC) Workspace

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[eCQM Concepts](#)

[New eCQM Clinical Workflow](#)

[eCQM Test Results](#)

[eCQM Data Element Repository](#)

Select the Data Element Repository Tab

## Electronic Clinical Quality Measure (eCQM) Data Element Repository (DERep)

The [eCQM](#) Data Element Repository ([DERep](#)) provides additional clarification for all the data elements associated with published and tested [eCQMs](#) used in CMS quality reporting programs as well as the definitions and clinical focus for each data element. An end user can filter information by data element, eCQM, union, [QDM attribute](#), or [QDM category](#) and datatype data element.

The data elements provided are for use in eCQMs for 2019 and 2020 Performance and Reporting periods. Information contained within the DERep is derived from the eCQM [specifications](#), [Quality Data Model \(QDM\)](#), and the [Value Set](#) Authority Center ([VSAC](#)). Each eCQM data element includes information about the value set or, the direct reference code ([DRC](#)), along with the [QDM datatype](#), and the [QDM attributes](#) used by that data element. In the eCQMs for the 2019 Performance and Reporting period, QDM Version 5.3 information is displayed. In the eCQMs for the 2020 Performance and Reporting period, QDM Version 5.4 information is displayed.

Year	Select a Filter Option	Search	Sort by	Order	
2019	- All Data Elements -		Title	Asc	Apply

Select a filter or search by term and click Apply to see results. Filter definitions are below:

### eCQM Data Element

The [eCQM](#) data elements provide a listing of all data elements used in [eCQMs](#) for the selected CMS quality reporting and performance periods. Each eCQM data element includes information about the [value set](#) or the direct reference code, along with the [QDM datatype](#) and [QDM attributes](#) used by that data element.

# eCQM Data Element Repository (2 of 2)

MC Workspace

Notifications 0

## Measure Collaboration (MC) Workspace

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Year: 2019, 2020, 2019  
Select a Filter Option: - All Data Elements -  
Search:   
Sort by: Title  
Order: Asc  
Apply

Select a filter or search by term and click Apply to see results. Filter definitions are below:

A "Year" filter is now available to select between the 2019 or 2020 Performance / Reporting Period Measures.

#### eCQM Data Element

The [eCQM](#) data elements provide a listing of all data elements used in [eCQMs](#) for the selected CMS quality reporting and performance periods. Each eCQM data element includes information about the [value set](#) or the direct reference code, along with the [QDM datatype](#) and [QDM attributes](#) used by that data element.

# Sample eCQM Page

[DERep Home Page](#)

## [CMS108v8 - Venous Thromboembolism Prophylaxis \(VTE-1\)](#)

**Performance/Reporting Period**  
2020

**Description:**  
This measure assesses the number of patients who received VTE prophylaxis or have documentation why no VTE prophylaxis was given the day of or the day after hospital admission or surgery end date for surgeries that start the day of or the day after hospital admission

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### Data Elements contained within the eCQM

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[Assessment, Performed: Risk for venous thromboembolism](#)

**Direct Reference Code**  
Constrained to 'Risk for venous thromboembolism' [LOINC code](#)

**ODM Datatype and Definition (ODM Version 5.4)**  
[Assessment, Performed](#)  
Data elements that meet criteria using this datatype should document completion of the assessment indicated by the ODM category and its corresponding value set.

Timing: The time the assessment is completed; Author dateTime.

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[Device, Applied: Graduated compression stockings \(GCS\)](#)

**Value Set Description from VSAC**

**CLINICAL FOCUS:** This value set contains concepts that represent graduated compression stocking devices that are used to prevent VTEs in patients.

**DATA ELEMENT SCOPE:** This value set may use the Quality Data Model (QDM) category related to Device. The intent of this data element is to identify patients who have a graduated compression stocking device applied. It may also be used to identify patients who did not have a graduated compression stocking device applied for VTE prophylaxis for an allowable reason when used with a negation rationale attribute.

**INCLUSION CRITERIA:** Includes only relevant concepts associated with graduated compression stockings.

**EXCLUSION CRITERIA:** No exclusions.

Constrained to codes in the Device, Applied: Graduated compression stockings (GCS) value set [\(2,16,840,1,113883,3,117,1,7,1,256\)](#)

**ODM Datatype and Definition (ODM Version 5.4)**  
[Device, Applied](#)  
Data elements that meet criteria using this datatype should document that the device indicated by the ODM category and its corresponding value set is in use, or impacts or alters the treatment, care plan, or encounter (e.g., an antithrombotic device has been placed on the patient's legs to prevent thromboembolism, or a cardiac pacemaker is in place).

Timing: The Relevant Period addresses:

- The measure title and description are displayed based on the measure specification
- A listing of data elements used in the measure follows
- A sample element using a Direct Reference Code is displayed
- A sample element using a value set is also displayed

# MC Workspace Link & Feedback

Access the MC Workspace via the  
eCQI Resource Center:

<https://ecqi.healthit.gov/mc-workspace>

Provide questions, suggestions, and  
feedback to:

[ecqi-resource-center@hhs.gov](mailto:ecqi-resource-center@hhs.gov)

# Disclaimer

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