Electronic Clinical Quality Measure (eCQM) Value Set Addendum for the 2019 Reporting/Performance Period for Eligible Clinician, Eligible Professional, and Hospital Quality Reporting Programs

Frequently Asked Questions

1) What is updated in the addendum?

The addendum will provide updates to the eCQM value sets for the 2019 reporting/performance period for Eligible Hospitals (EHs), Critical Access Hospitals (CAHs), Eligible Professionals (EPs), and Eligible Clinicians (ECs).

The Health Quality Measure Format (HQMF) specifications, the value set object identifiers (OIDs), and the measure version numbers for 2019 eCQM reporting have not changed. There are no measure logic changes in the addendum.

2) Why is The Centers for Medicare & Medicaid Services (CMS) updating eCQM value sets?

CMS is issuing an addendum to the eCQM value sets because several terminologies have been updated since the eCQM value sets were published in May 2018. The addendum to the eCQM value sets will allow eligible hospitals, eligible clinicians, and eligible professionals to use the updated codes for 2019 reporting/performance.

3) Are addendum updates required?

Yes – All updates provided in the addendum are required to be implemented by any organization using the eCQM value sets for 2019 reporting/performance.

4) Will CMS issue a 4th Quarter addendum this year?

No – In the past, CMS has issued an addendum to the eCQM value sets, technical release notes, and the binding parameter specification for the 4th Quarter reporting period for Eligible Hospitals (EHs) and Critical Access Hospitals (CAHs). Due to feedback from the public regarding the difficulty of integrating the 4th quarter addendum into EHR products, CMS has decided not to pursue a 4th Quarter addendum in 2018.

5) What programs will the addendum affect?

The changes will affect electronic reporting of eCQMs for the following programs:

- The Quality Payment Program: Merit-based Incentive Payment System (MIPS) and Advanced Alternative Payment Models (Advanced APMs)
- Comprehensive Primary Care Plus (CPC+)
- CMS Hospital Inpatient Quality Reporting (IQR)
- Medicare and Medicaid Promoting Interoperability (PI) programs

6) Which value sets will be updated in the addendum?

Value sets containing the following terminologies will be updated in the addendum for the 2019 reporting/performance period:

- **ICD-10-CM/PCS:** International Classification of Diseases, 10th Revision – Clinical Modification and Procedure Coding System (ICD-10-CM/PCS)
- **LOINC:** Logical Observation Identifiers Names and Codes
- **RxNorm**
- **SNOMEDCT:** Systematized Nomenclature of Medicine-Clinical Terms
- **CPT:** Current Procedural Terminology
- **CVX**: Vaccine Administered
- **HCPCS**: Healthcare Common Procedure Coding System

7) Are direct reference codes (DRCs) also updated as part of the addendum?

DRCs will not be updated as part of the addendum, but the version of the terminology used will change. For example, if a measure references LOINC version 2.63 code (8462-4), the LOINC version will be updated to version 2.64.

8) When will the value set addendum be available for use?

The addendum will be published and available to the public in September 2018.

9) Where can the updated value sets be found?

All updated values sets for the 2019 eCQM Reporting or Performance Period will be available through the National Library of Medicine's Value Set Authority Center (VSAC). The value sets will be available as a complete set, as well as per individual measure.

10) Where can the updated technical release notes be found?

For information about eCQM specifications, technical release notes, and supplemental materials, visit the eCQI Resource Center (https://ecqi.healthit.gov/).