## ADDITIONAL INFORMATION REGARDING ELECTRONIC CLINICAL 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 2021 clinical quality measure data for the Centers for Medicare & Medicaid Services (CMS) quality reporting programs. Measures will not be eligible for 2021 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<br>ID | NQF#           | Measure Title   | Measure Description  | Numerator Statement   | Denominator Statement   | Meaningful<br>Measure Area                                  | Measure Set<br>Identifier |
|----------------|----------------|---|--|---|---|---|---------------------------|
| CMS9v9         | 0480e          | Exclusive Breast Milk<br>Feeding                              | PC-05 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<br>newborns who were fed breast milk<br>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<br>and Aligned with<br>Patient's Goals | PC-05                     |
| CMS71v10       | Not Applicable | Anticoagulation<br>Therapy for Atrial<br>Fibrillation/Flutter | Ischemic stroke patients<br>with atrial<br>fibrillation/flutter who are<br>prescribed or continuing to<br>take anticoagulation<br>therapy at hospital<br>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                     |
| CMS72v9        | Not Applicable | Antithrombotic Therapy<br>By End of Hospital Day<br>2         | Ischemic stroke patients<br>administered<br>antithrombotic therapy by<br>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                     |
| CMS104v9       | Not Applicable | Discharged on<br>Antithrombotic Therapy                       | Ischemic stroke patients<br>prescribed or continuing to<br>take antithrombotic<br>therapy at hospital<br>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                     |
| CMS105v9       | Not Applicable | Discharged on Statin<br>Medication                            | Ischemic stroke patients<br>who are prescribed or<br>continuing to take statin<br>medication at hospital<br>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 | NQF#           | Measure Title  | Measure Description   | Numerator Statement  | Denominator Statement   | Meaningful<br>Measure Area                     | Measure Set<br>Identifier |
|----------|----------------|--|---|--|---|--|---------------------------|
| CMS108v9 | Not Applicable | Venous<br>Thromboembolism<br>Prophylaxis                                       | 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 | 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) | Inpatient hospitalizations for all patients in the initial population   | Preventive Care                                | VTE-1                     |
| CMS111v9 | Not Applicable | Median Admit Decision<br>Time to ED Departure<br>Time for Admitted<br>Patients | Median time (in minutes) from admit decision time to time of departure from the emergency department for emergency department patients admitted to inpatient status   | Measure Observations Statement: Median time (in minutes) from the Decision to Admit to inpatient to the time the patient physically departs the ED to inpatient hospitalization  | Measure Population is equal to the 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 | Admissions and<br>Readmissions<br>to Hospitals | ED-2                      |

| CMS eCQM<br>ID | NQF#           | Measure Title   | Measure Description  | Numerator Statement   | Denominator Statement   | Meaningful<br>Measure Area  | Measure Set<br>Identifier |
|----------------|----------------|---|--|---|---|---|---------------------------|
| CMS190v9       | Not Applicable | Intensive Care Unit<br>Venous<br>Thromboembolism<br>Prophylaxis | 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 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                     |
| CMS506v3       | 3316e          | Safe Use of Opioids –<br>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 a new or continuing opioid or benzodiazepine at discharge | Prevention and<br>Treatment of Opioid<br>and Substance Use<br>Disorders | Not Applicable            |