Centers for Medicare & Medicaid Services

Addendum to 2018 CMS QRDA Category I Implementation Guide for Hospital Quality Reporting

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1 Introduction

The Centers for Medicare & Medicaid Services (CMS) published the [CMS Implementation Guide for Quality Reporting Document Architecture (QRDA) Category I Hospital Quality Reporting Implementation Guide for 2018](#) (referred to as the 2018 CMS QRDA Category I IG) on July 14, 2017. The IG provides technical instructions for QRDA Category I reporting for eligible hospitals and critical access hospitals (CAHs) reporting electronic clinical quality measures for the calendar year 2018 reporting period for the following programs:

- Hospital Inpatient Quality Reporting (IQR) Program
- Medicare and Medicaid Promoting Interoperability (PI) Programs[1] for eligible hospitals and CAHs

This addendum lists the updates and clarifications to the 2018 CMS QRDA Category I IG, which include:

- Added six new conformance statements specific to CMS programs
- Updated description of CONF: CMS_0074

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[1] CMS renamed the EHR Incentive Program to Promoting Interoperability Program

2 Conformance Statements Updates

The six new conformance statements and the description of CMS_0074 are updates to the *Table 13: Other Validation Rules for HQR Programs* in the 2018 CMS QRDA Category I IG, Version 1.0.

Table 1: New Additional HQR Validation Rules lists the six new conformance statements and their descriptions.

Table 1: New Additional HQR Validation Rules

CONF. #	Validation Performed (Version1.0 7/14/2017)	Validation Performed (Addendum 12/05/2018)	Description of Error Message and File Rejection (Addendum 12/05/2018)
CMS_0078	NA	QRDA file size exceeds (10) MB.	QRDA file size exceeds 10 MB.
CMS_0082	NA	CMS EHR Certification ID does not meet year/version criteria	The EHR system needs to be certified to 2014 or 2015 Edition or a combination of 2014 and 2015 for CY18/PY20.
CMS_0083	NA	CMS EHR Certification ID format is not valid	CMS EHR Certification ID must be 15 alpha numeric characters in length.
CMS_0084	NA	Either the Patient HICN or MBI is required for hybrid measure/Core Clinical Data Elements (CCDE) submissions	QRDA files for hybrid measure/CCDE submissions[2] must contain a HICN or MBI.
CMS_0085	NA	CMS Program name and Measure ID are not compatible	CMS Program name for hybrid measure/CCDE submissions must be HQR_IQR_VOL.
CMS_0086	NA	Measure type is not consistent across QRDA files within the batch	Files containing hybrid measure/CCDE submissions and eCQM cannot be submitted within the same batch.

Table 2: CMS_0074 Error Desription Update shows the updated "Description of Error Message and File Rejection" of CMS_0074 and rationale for the update.

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[2] Overview Voluntary Hybrid Hospital-Wide Readmission (HWR) Measure, Quality Net. https://www.qualitynet.org/dcs/ContentServer?c=Page&pagename=QnetPublic%2FPage%2FQnetTier3&cid=1228776337082

Table 2: CMS_0074 Error Desription Update

CONF. #	Validation Performed	Description of Error Message and File Rejection (Version 1.0 7/14/2017)	Description of Error Message and File Rejection (Addendum 12/05/2018)	Rationale
CMS_0074	The Version Specific Measure Identifier is not valid for the current program year.	Each measure in the QRDA must reference the Version Specific Measure Identifier and only the eCQM Specifications for Eligible Hospitals May 2017 will be accepted for the 2018 reporting period.	The Version Specific Measure Identifier for an eCQM being reported is a required element in the QRDA file (i.e., XPath is QualityMeasureDocument/id/@root). The HQR eCQM receiving system will only accept the "2017 version" of eCQMs for the CY 2018 reporting period. The eCQM Specifications for Eligible Hospitals Update September 2017 is located under the heading "eCQMs for 2018 Reporting Period" on the eCQI Resource Center.[3] Each eCQM has an associated Version Specific Measure Identifier corresponding to the 2018 eCQM specifications. Only those Version Specific Measure Identifiers for the current reporting year will be accepted. If any submitted version specific identifier does not match one of the defined set of the Version Specific Measure Identifier for the current reporting year, the file will be rejected. For example, if AMI-8a -- Primary PCI Received Within 90 Minutes of Hospital Arrival -- is being reported for the 2018 reporting period, then the eCQM Version Specific Measure Identifier extension must be 40280382-5a66-eab9-015a-b414ba212d89.	No changes to the validation performed. Updated the error description to provide further clarification. The eCQM Specifications for the CY2018 reporting period was subsequently updated in September 2017 with Value Sets content updates after the original publication of the 2018 CMS QRDA I IG Version 1.0. Value Sets content updates are specified in the eCQM Value Sets Addendum for the 2018 Reporting Period.

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[3] 2018 Reporting Period Eligible Hospital/Critial Access Hospital eCQMs. https://ecqi.healthit.gov/eligible-hospital-critical-access-hospital-ecqms?field_year_value=2

3 Acronyms

Acronym	Literal Translation
CAH	Critical Access Hospital
CCDE	Core Clinical Data Element
CMS	Centers for Medicare & Medicaid Services
CONF	conformance
CY	Calendar Year
eCQI	electronic Clinical Quality Improvement
eCQM	electronic Clinical Quality Measure
EH	Eligible Hospital
EHR	Electronic Health Record
HICN	Health Insurance Claim Number
HQR	Hospital Quality Reporting
MBI	Medicare Beneficiary Identification Number
NA	Not applicable
PY	Payment Year
QRDA	Quality Reporting Document Architecture