

OUTPATIENT QUALITY REPORTING ELECTRONIC CLINICAL QUALITY MEASURE

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MEASURE ADDED TO THE OPPTS RULE

- The ST-Segment Elevation Myocardial Infarction (STEMI) eCQM (OP-40) been finalized for use in the Outpatient Quality Reporting (OQR) program
 - First eCQM in the OQR program
- Finalized for:
 - Voluntary Reporting: CY 2023 data for CY 2025 payment determination
 - Mandatory Reporting: beginning with CY 2024 data for CY 2026 payment determination
- Replaces 2 chart-abstracted measures:
 - OP-2 (Fibrinolytic Therapy Received Within 30 Minutes of Emergency Department (ED) Arrival), and
 - OP-3 (Median Time to Transfer to Another Facility for Acute Coronary Intervention)
- OP-2 and OP-3 were finalized for removal from the OQR program beginning with CY 2023 reporting period/CY 2025 payment determination



MEASURE SPECIFICATIONS

- Electronic process measure that includes the populations of OP-2 and OP-3
- Measures the percentage of ED patients (aged 18 or older) diagnosed with STEMI that received timely fibrinolytic therapy (within 30 minutes) or timely transfer to a percutaneous coronary intervention (PCI)-capable facility (within 45 minutes).
- Has been submitted to the National Quality Forum (NQF) for endorsement.

MEASURE SPECIFICATIONS (CONT'D)

- Denominator includes all emergency department (ED) encounters for patients 18 years and older with a diagnosis of ST-segment elevation myocardial infarction (STEMI)
- Numerator includes ED-based STEMI patients:
 - Patients whose time from ED arrival to fibrinolytic therapy is 30 minutes or fewer
 - Who arrive at a PCI-capable facility (without being transferred) and received PCI within 90 minutes of arrival
 - Who arrive at a non-PCI-capable facility and were transferred to a PCI-capable facility with 45 minutes of arrival

STEMI ECQM REPORTING

- Hospitals need to report:

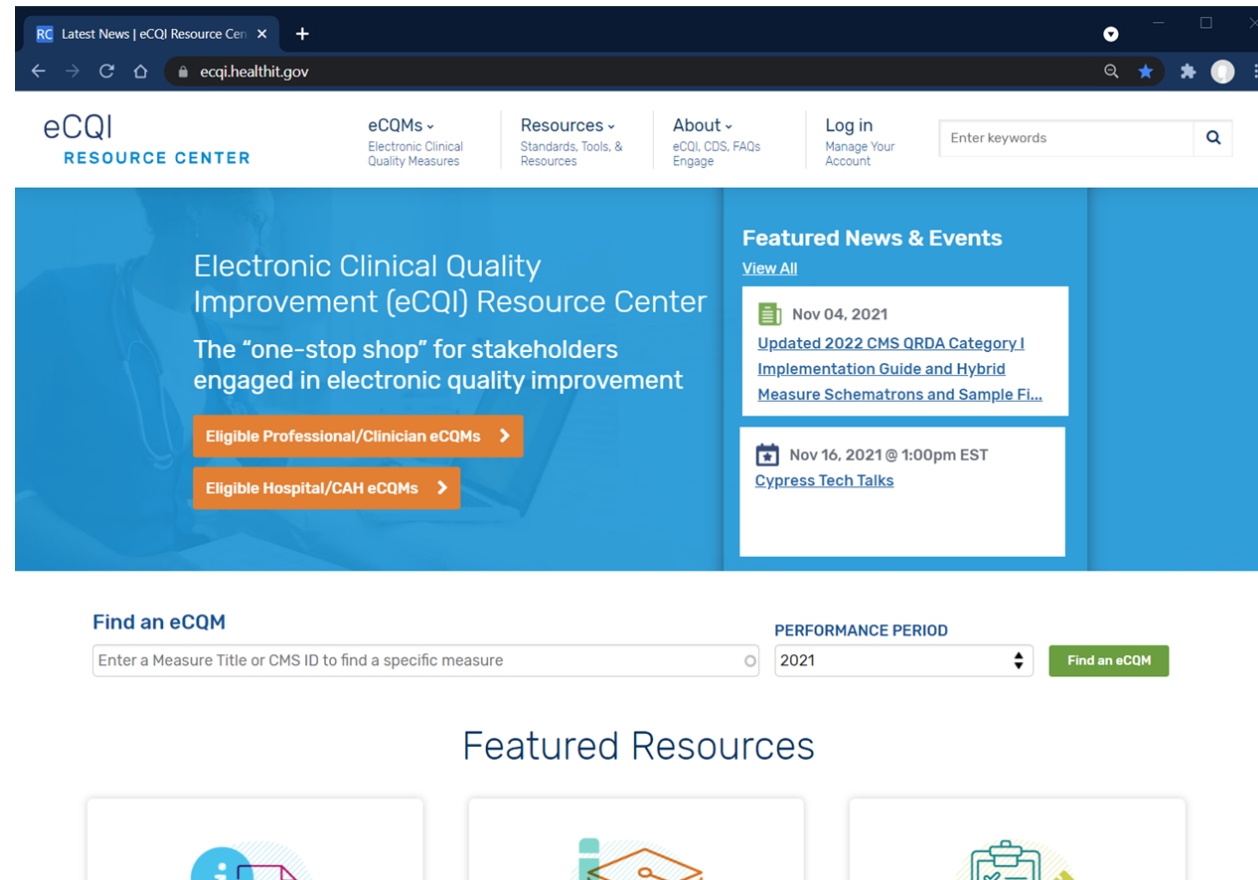
Reporting Period	Data Period	Payment Determination
Voluntary Reporting	At least 1 quarter from CY 2023	N/A
Mandatory Reporting	At least 1 quarter from CY 2024	CY 2026
	At least 2 quarters from CY 2025	CY 2027
	At least 3 quarters from CY 2026	CY 2028
	All 4 quarters from CY 2027	CY 2029+

RESOURCES

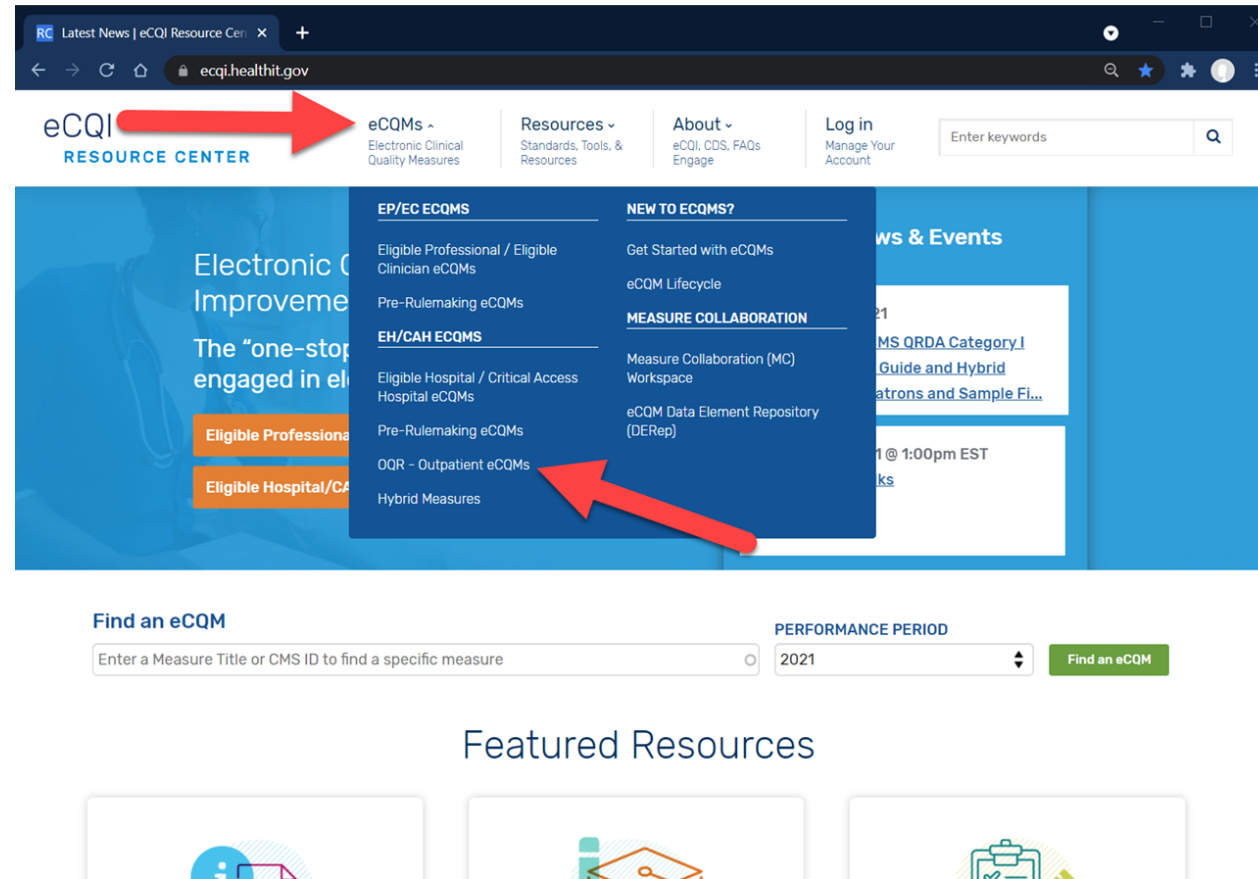
- For information on the STEMI measure see:
 - Final [Calendar Year 2023 Rule for the Outpatient Quality Reporting Program](#)
 - eCQI Resource Center for information and resources related to the electronic specifications of the STEMI eCQM measure
- Submit technical and implementation questions in the ONC Project Tracking System (Jira) [eCQM Tracker](#)



NAVIGATING THE ECQI RESOURCE CENTER - [HTTPS://ECQI.HEALTHIT.GOV](https://ecqi.healthit.gov)



NAVIGATING TO THE OQR OUTPATIENT ECQM PAGE



From the homepage select “Outpatient Quality Reporting eCQMs”

OQR OUTPATIENT ECQM PAGE - [HTTPS://ECQI.HEALTHIT.GOV/EH-OQR-ECQMS](https://ecqi.healthit.gov/eh-oqr-ecqms)

Outpatient Quality Reporting eCQMs

[Receive updates on this topic](#)

CMS outpatient quality reporting [electronic clinical quality measure](#) (eCQM) is developed and [specifications](#) are finalized for use in the [CMS Outpatient Quality Reporting program](#) beginning with the calendar year 2023 reporting period. The measure will be used for voluntary reporting for calendar year 2023 and mandatory reporting beginning with the calendar year 2024 reporting period.

Questions about the use of this eCQM in the CMS Outpatient Quality Reporting (OQR) program can be submitted to the [QualityNet Question Answer Site](#)

Questions related to the OQR eCQM specifications, logic, [data elements](#), standards, or resources can be submitted in the eCQM Tracker - [ONC Project Tracking System \(Jira\)](#)

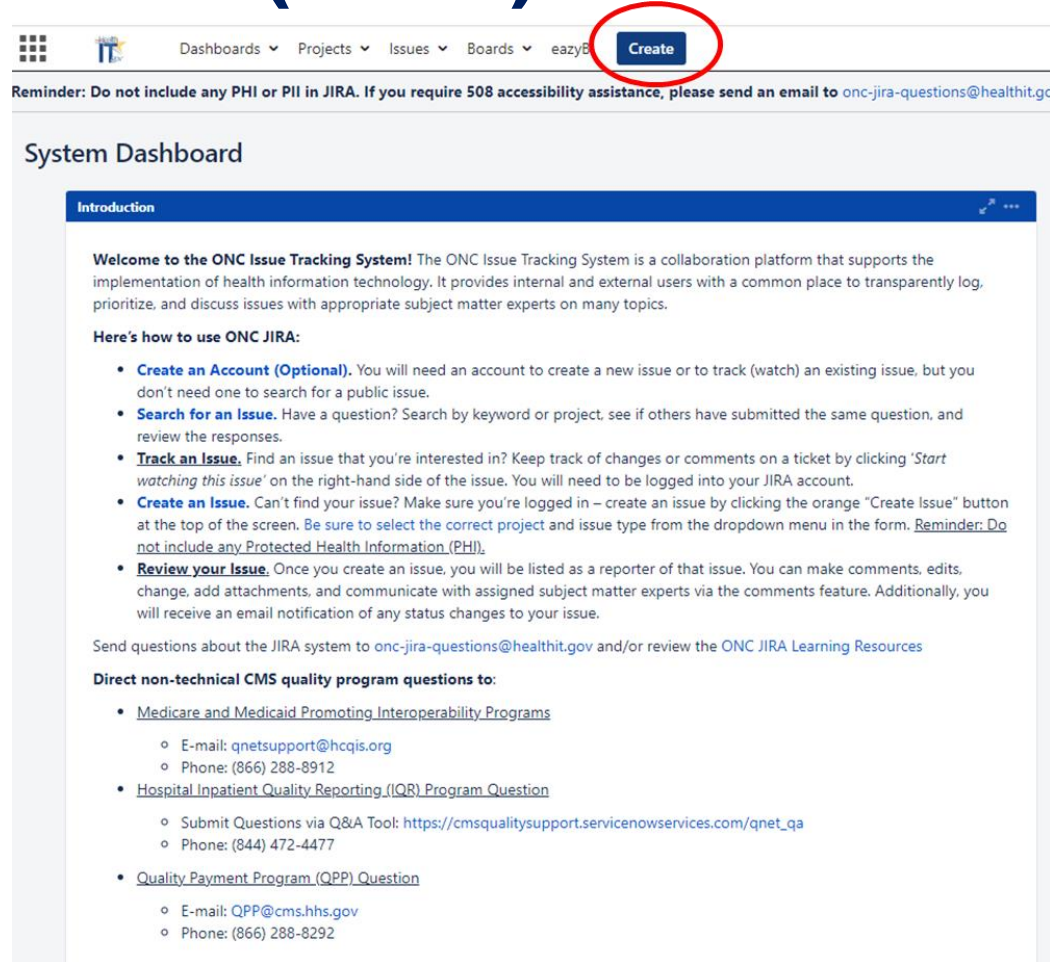
Measure Name ▼	Short Name ▼	CMS eCQM ID ▼	NQF ID	Meaningful Measure Area ▼
Appropriate Treatment for ST-Segment Elevation Myocardial Infarction (STEMI) Patients in the Emergency Department (ED)	STEMI	CMS996v2	03613e	Management of Chronic Conditions

eCQM Implementation Resources	Published ▼
STEMI OQR eCQM Value Sets (Excel) ⓘ	Jul 2021

Last Updated: Nov 03, 2021

Contains information on the measure specifications and value sets

ECQM TRACKER (JIRA)



Dashboards ▾ Projects ▾ Issues ▾ Boards ▾ easyB **Create**

Reminder: Do not include any PHI or PII in JIRA. If you require 508 accessibility assistance, please send an email to onc-jira-questions@healthit.gov

System Dashboard

Introduction

Welcome to the ONC Issue Tracking System! The ONC Issue Tracking System is a collaboration platform that supports the implementation of health information technology. It provides internal and external users with a common place to transparently log, prioritize, and discuss issues with appropriate subject matter experts on many topics.

Here's how to use ONC JIRA:

- **Create an Account (Optional).** You will need an account to create a new issue or to track (watch) an existing issue, but you don't need one to search for a public issue.
- **Search for an Issue.** Have a question? Search by keyword or project; see if others have submitted the same question, and review the responses.
- **Track an Issue.** Find an issue that you're interested in? Keep track of changes or comments on a ticket by clicking 'Start watching this issue' on the right-hand side of the issue. You will need to be logged into your JIRA account.
- **Create an Issue.** Can't find your issue? Make sure you're logged in – create an issue by clicking the orange "Create Issue" button at the top of the screen. Be sure to select the correct project and issue type from the dropdown menu in the form. **Reminder: Do not include any Protected Health Information (PHI).**
- **Review your Issue.** Once you create an issue, you will be listed as a reporter of that issue. You can make comments, edits, change, add attachments, and communicate with assigned subject matter experts via the comments feature. Additionally, you will receive an email notification of any status changes to your issue.

Send questions about the JIRA system to onc-jira-questions@healthit.gov and/or review the ONC JIRA Learning Resources

Direct non-technical CMS quality program questions to:

- [Medicare and Medicaid Promoting Interoperability Programs](#)
 - E-mail: qnetsupport@hcqis.org
 - Phone: (866) 288-8912
- [Hospital Inpatient Quality Reporting \(IQR\) Program Question](#)
 - Submit Questions via Q&A Tool: https://cmsqualitysupport.servicenow.com/qnet_qa
 - Phone: (844) 472-4477
- [Quality Payment Program \(QPP\) Question](#)
 - E-mail: QPP@cms.hhs.gov
 - Phone: (866) 288-8292

From homepage –
select “Create” to
create a new issue

<https://oncprojecttracking.healthit.gov>

<https://oncprojecttracking.healthit.gov/support/secure/CreateIssue!default.jspa>

LOGGING A TICKET FOR OQR ECQM IMPLEMENTATION/TECHNICAL ISSUES

Create Issue Configure Fields

All fields marked with an asterisk (*) are required

Project* eCQM Issue Tracker (CQM)

Issue Type* Value Sets

This issue type has been used in an active issue type.

issues of this type cannot be created. Please choose Governance effecting more than 1 eCQM, Other, and Value Sets

☐ None

☐ Annual Update

☐ EH/CAH eCQMs

☐ EP/EC eCQMs

☐ HQMF Standards

☐ Implementation Problem

☐ Intent/Governance affecting more than 1 eCQM

☒ OQR eCQMs

☐ Other

☐ Terminology

☐ Create another Create Cancel

- Under Project select “eCQM Issue Tracker”
- Under Issue Type select “OQR eCQMs”