

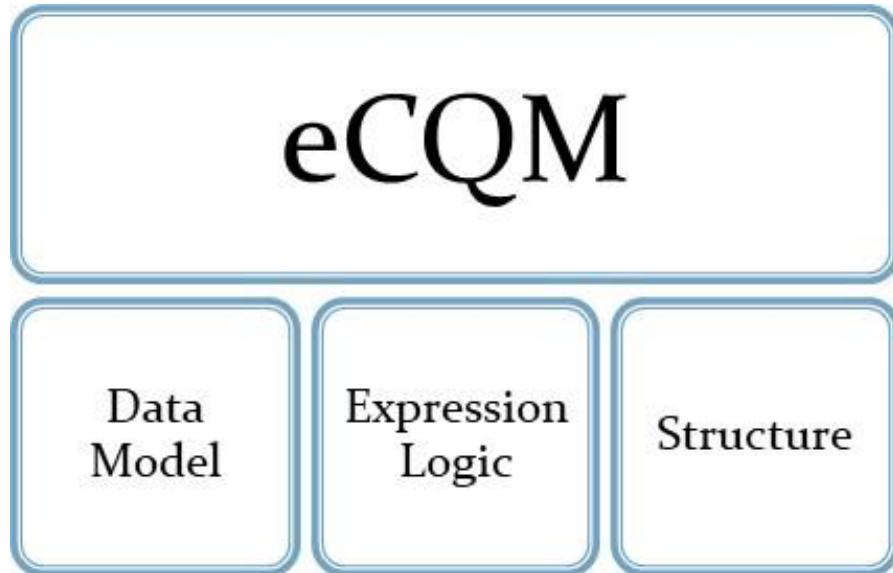
CMS Presents Quality Measurement using HL7® FHIR® 101

Updated December 2025

Topics

- Components of quality measures
- Health Level 7 (HL7®) Fast Healthcare Interoperability Resources (FHIR®) specification introduction and walkthrough
- Use of profiles and implementation guides (IGs)
- Quality Improvement (QI)-Core and mappings from Quality Data Model (QDM)
- Quality Measure (QM) IG
- Data Exchange for Quality Measures (DEQM)
- Introduction to FHIR operations
- Current activities update

Components of an eCQM

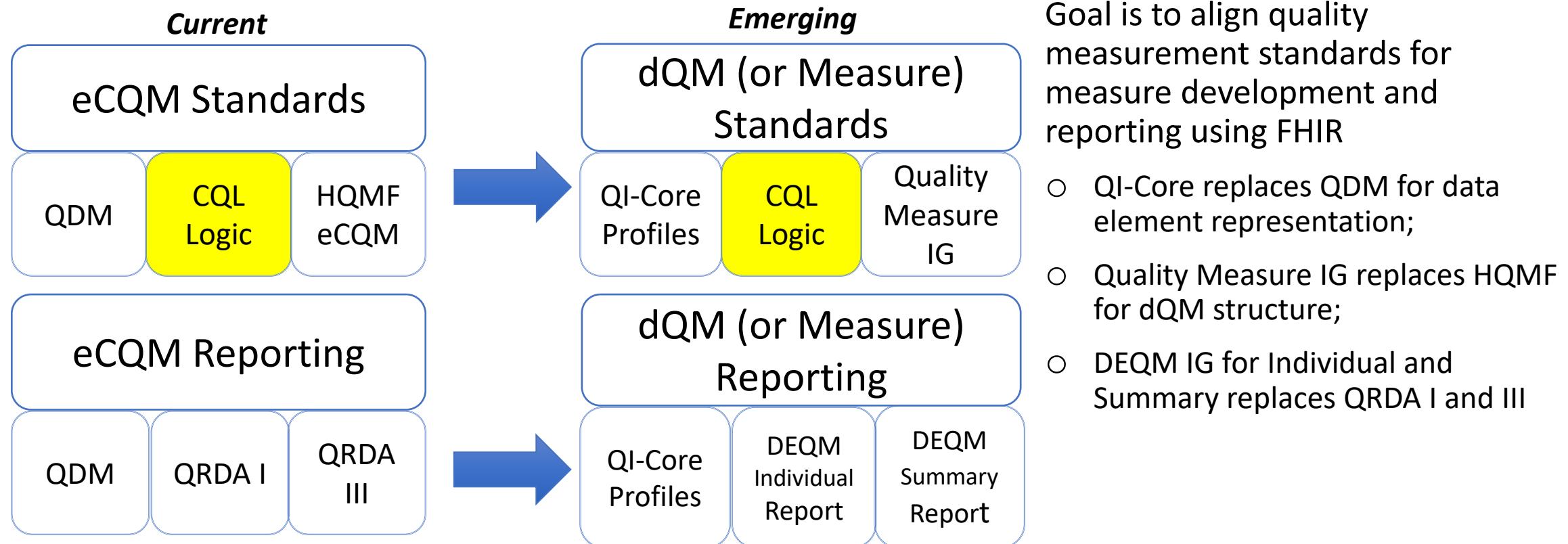


Data Model: What data to look for in the patient's medical record

Expression Logic: How to calculate the result, evaluate the "right" care was provided

Structure: Metadata, numerator, denominator, exclusions, and exceptions

FHIR Standards for Quality Measurement



CQL – Clinical Quality Language | eCQM – electronic Clinical Quality Measure | HQMF- Health Quality Measure Format | QDM – Quality Data Model |
QI-Core – Quality Improvement Core | QRDA- Quality Reporting Document Architecture | DEQM – Data Exchange for Quality Measures

What is FHIR?

- FHIR – <http://hl7.org/fhir>
- FHIR is a next-generation standards framework created by HL7
- Provides an interoperable platform for healthcare
 - Defines a common way to structure health data known as 'Resources'
 - Enables automated data exchange through application programming interfaces (APIs)
- FHIR uses latest technologies to be developer friendly

How is FHIR Used?

- FHIR is organized into 5 levels for easy navigation
- Levels I and II give implementers a basis for exchanging data
- Levels III and IV are used to represent data in dQMs
- Level V provides structure for dQMs and reporting



Systems Development
Basis for data exchange

Clinical Data Model
eCQM data representation

eCQMs & Reporting
eCQM Reporting



Why use FHIR for Quality Measurement?

- Align with other clinical data sharing efforts by supporting a broad range of use cases
- Standardize approaches and specifications to promote sharing between systems and applications.
- Enable flexibility and extensibility through FHIR profiles such as QI-Core, to meet multiple use cases without compromising the base FHIR specification
- Expand data source to devices, systems or applications outside of traditional EHRs

Why use FHIR for Quality Measurement? (Cont'd)

- **Better Data Consistency & Standardization** - FHIR provides a uniform data model, so quality measures reference the same structured data types (e.g., Condition, Observation, Encounter). This reduces variation between EHR systems and improves accuracy when calculating dQMs.
- **Streamlined Data Exchange** - FHIR is API-based, meaning systems can exchange data in smaller, structured pieces rather than entire documents. This enables:
 - Real-time or near-real-time quality reporting
 - More precise extraction of needed data
 - Less manual abstraction
- **Improved Interoperability** - FHIR is now widely adopted across EHR vendors and national interoperability frameworks (Trusted Exchange Framework and Common Agreement (TEFCA), United States Core Data for Interoperability (USCDI), Qualified Health Information Network (QHINs)). Using the same standard for quality measurement means:
 - Easier implementation across vendors
 - Less custom mapping
 - Better cross-system comparability

Why use FHIR for Quality Measurement? (Cont'd)

- **Supports Modern Calculation Logic FHIR Quality Measures (using CQL + FHIR):**
 - Are machine-readable
 - Are computable in a standardized way
 - Reduce ambiguity that previously existed in older measure formats
- **Alignment with National Strategy CMS, ONC, and HL7 are modernizing quality measurement to be:**
 - FHIR-native
 - Less burdensome
 - More interoperable
 - Reusable across programs (Merit-based Incentive Payment System (MIPS), Hospital Inpatient Quality Reporting Program (IQR), Promoting Interoperability, etc.) This is part of the ongoing CMS Quality Measurement & Value-Based Care Modernization initiative.

In summary, FHIR is used for quality measurement because it improves interoperability, standardizes data, supports automation, and aligns with national healthcare IT modernization efforts.

Walkthrough of FHIR

- Provide a basic navigation of the specification -
<https://build.fhir.org/summary.html>
- Show build vs production sites and FHIR versions
 - <http://build.fhir.org> - Latest build version which changes often
 - <http://hl7.org/fhir> - Latest published version
 - IGs also have build and production sites
- Review a basic Resource 'Encounter'

FHIR Versions



FHIR® FHIR Specification

History

Publication (Version) History

This table provides a list of all the versions of FHIR (Fast Health Interoperability Resources) that are available. See also the directory of [FHIR Implementation Guides](#).

The following versions have been published:

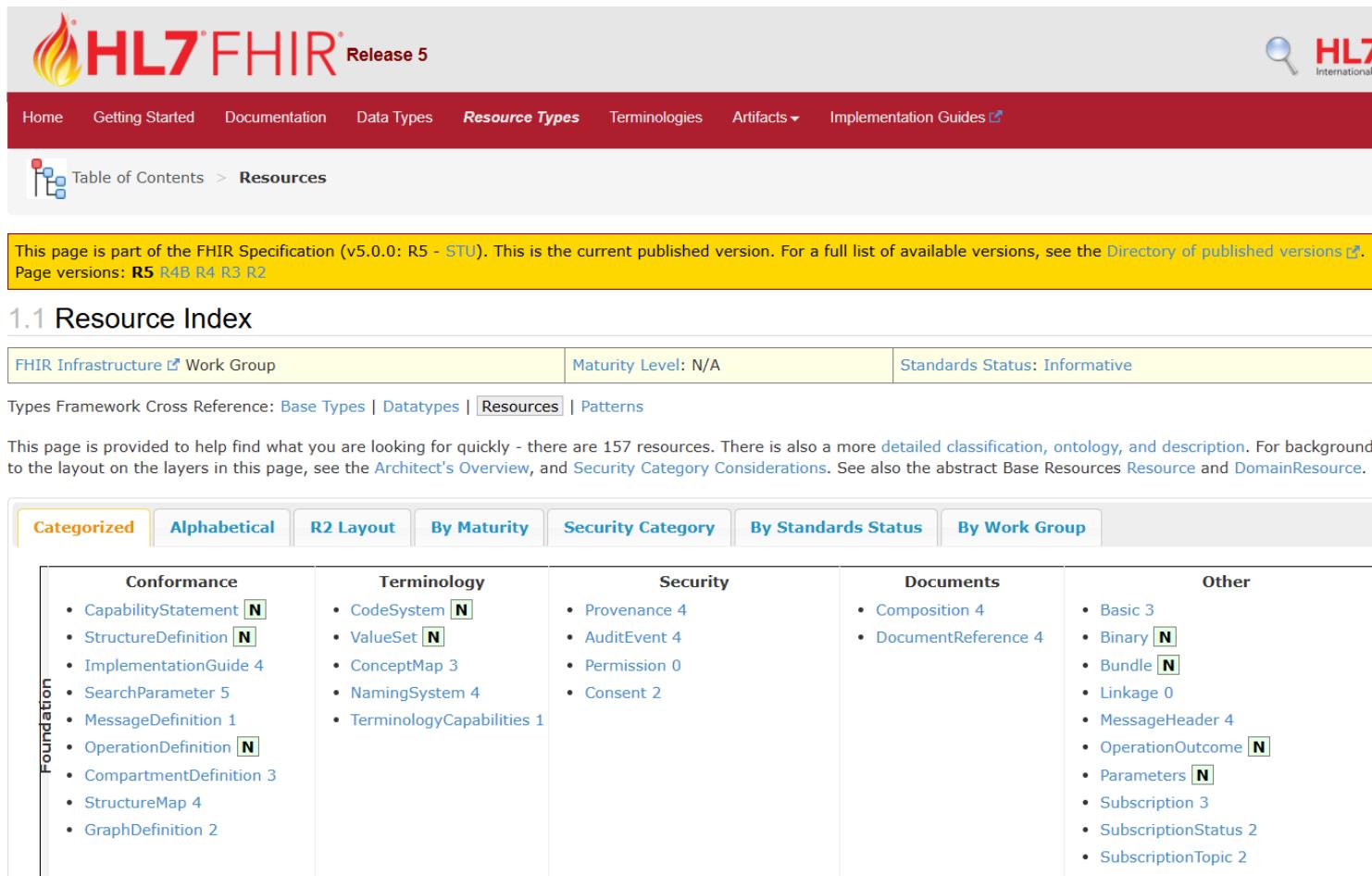
Date	Version	Description	Links
Current Versions			
2023-03-26	T 5.0.0	FHIR Release #5	      
(current)	(last commit - if in the last 3 months)	Current Development build (about 30min behind version control, may be incoherent and change rapidly)	   
R6 Sequence (Work in Progress)			
2025-04-03	D 6.0.0-ballot3	FHIR R6 Ballot (3rd Draft)	      
2024-08-13	D 6.0.0-ballot2	FHIR R6 Ballot (2nd Draft)	      
2023-12-19	D 6.0.0-ballot1	FHIR R6 Ballot (1st Draft)	      
R5 Sequence (Current)			
2023-03-26	T 5.0.0	FHIR Release #5 (<i>Permanent Home</i>)	      
2023-03-01	D 5.0.0-draft-final	FHIR Release #5 Final QA	      
2022-12-14	D 5.0.0-snapshot3	FHIR Release #5 Connectathon 32 Base	      
2022-09-10	B 5.0.0-ballot	FHIR Release #5: Ballot	      

- Ribbon included at top for ‘directory of published versions’
- Version History page shows previous version sequences
 - Options for download and helpful links
 - (Current): Link to the ‘build’ site which is unpublished draft, changes often

<http://hl7.org/fhir/directory.html>



Navigating Resources



The screenshot shows the HL7 FHIR Resource Types page. At the top, there is a navigation bar with links for Home, Getting Started, Documentation, Data Types, Resource Types (which is the active tab), Terminologies, Artifacts, and Implementation Guides. The page title is "HL7 FHIR® Release 5". A search icon and the HL7 International logo are also present. Below the navigation, a breadcrumb trail shows "Table of Contents > Resources". A yellow banner at the top of the content area states: "This page is part of the FHIR Specification (v5.0.0: R5 - STU). This is the current published version. For a full list of available versions, see the [Directory of published versions](#). Page versions: R5 R4B R4 R3 R2". The main content is titled "1.1 Resource Index". Below this, there are three tabs: "FHIR Infrastructure Work Group", "Maturity Level: N/A", and "Standards Status: Informative". A link to "Types Framework Cross Reference" is also present. The page then lists 157 resources in a grid format. The categories for the grid are: Conformance, Terminology, Security, Documents, and Other. The "Categorized" tab is highlighted in orange. The "Conformance" category contains: CapabilityStatement (1), StructureDefinition (1), ImplementationGuide (4), SearchParameter (5), MessageDefinition (1), OperationDefinition (1), CompartmentDefinition (3), StructureMap (4), and GraphDefinition (2). The "Terminology" category contains: CodeSystem (1), ValueSet (1), ConceptMap (3), NamingSystem (4), and TerminologyCapabilities (1). The "Security" category contains: Provenance (4), AuditEvent (4), Permission (0), and Consent (2). The "Documents" category contains: Composition (4), DocumentReference (4), and other document types. The "Other" category contains: Basic (3), Binary (1), Bundle (1), Linkage (0), MessageHeader (4), OperationOutcome (1), Parameters (1), Subscription (3), SubscriptionStatus (2), and SubscriptionTopic (2).

- Multiple views of resources are available
 - Categorized
 - Alphabetical
 - By Maturity
 - Security Category, etc.

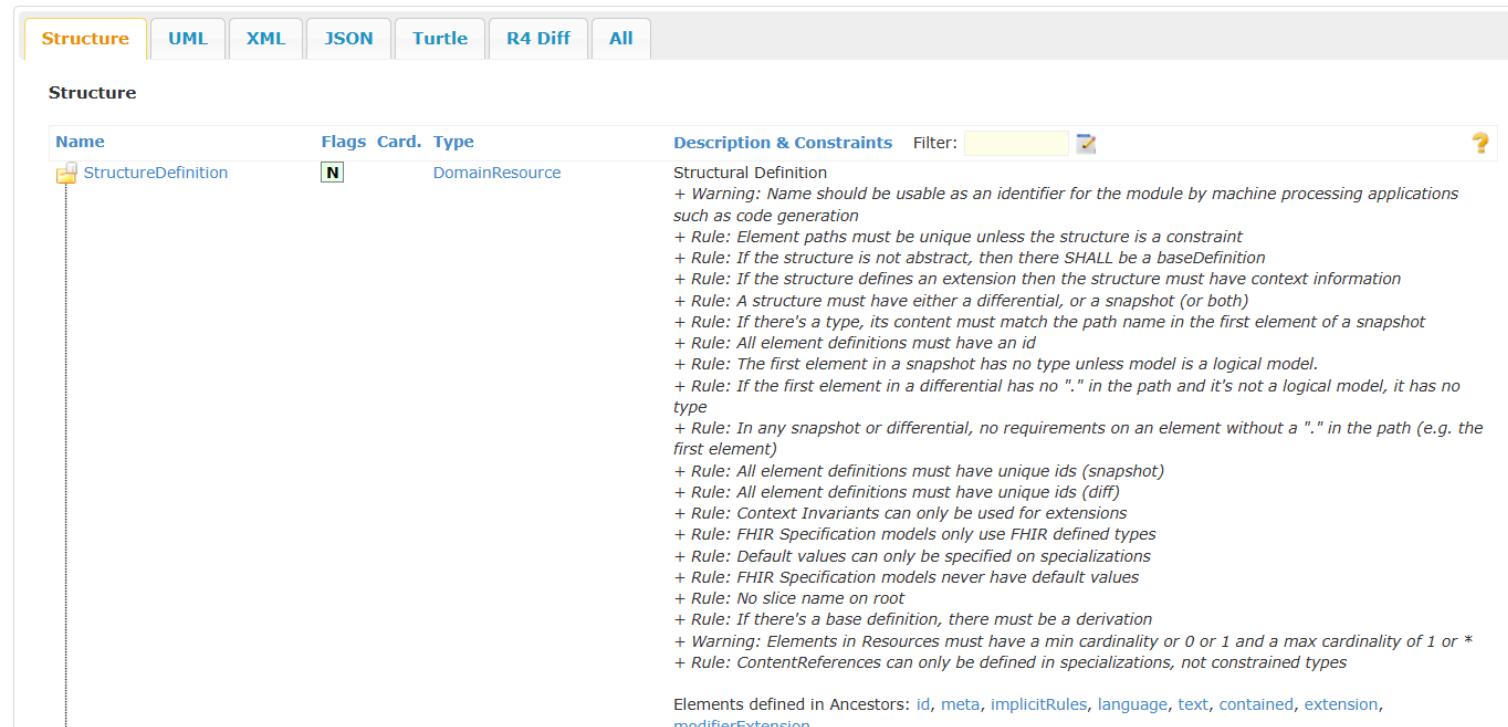
<https://hl7.org/fhir/resourcelist.html>

Resource Structure

5.4.4 References to this Resource

- Resource References: [ActivityDefinition](#), [CapabilityStatement](#), [DataRequirement](#), [ElementDefinition](#), [ImplementationGuide](#), [MessageDefinition](#), [Meta](#), [OperationDefinition](#), [ParameterDefinition](#), [PlanDefinition](#), [RequestOrchestration](#), [itself](#) and [StructureMap](#)
- Extension References: [CapabilityStatement Declared Profile](#), [Coding Conformance](#), [Default Type](#), [Dependent Profiles](#), [Inherit Obligations](#), [Obligations Profile](#), [Pattern](#), [Preferred Value Alternatives](#), [Profile Mapping Extension](#), [Questionnaire Reference Profile](#), [StructureDefinition Complies With Profile](#), [StructureDefinition Implements](#) and [StructureDefinition Imposes Profile](#)

5.4.5 Resource Content



Name	Flags	Card.	Type	Description & Constraints
StructureDefinition	N		DomainResource	<p>Structural Definition</p> <p>+ Warning: Name should be usable as an identifier for the module by machine processing applications such as code generation</p> <p>+ Rule: Element paths must be unique unless the structure is a constraint</p> <p>+ Rule: If the structure is not abstract, then there SHALL be a baseDefinition</p> <p>+ Rule: If the structure defines an extension then the structure must have context information</p> <p>+ Rule: A structure must have either a differential, or a snapshot (or both)</p> <p>+ Rule: If there's a type, its content must match the path name in the first element of a snapshot</p> <p>+ Rule: All element definitions must have an id</p> <p>+ Rule: The first element in a snapshot has no type unless model is a logical model.</p> <p>+ Rule: If the first element in a differential has no "." in the path and it's not a logical model, it has no type</p> <p>+ Rule: In any snapshot or differential, no requirements on an element without a "." in the path (e.g. the first element)</p> <p>+ Rule: All element definitions must have unique ids (snapshot)</p> <p>+ Rule: All element definitions must have unique ids (diff)</p> <p>+ Rule: Context Invariants can only be used for extensions</p> <p>+ Rule: FHIR Specification models only use FHIR defined types</p> <p>+ Rule: Default values can only be specified on specializations</p> <p>+ Rule: FHIR Specification models never have default values</p> <p>+ Rule: No slice name on root</p> <p>+ Rule: If there's a base definition, there must be a derivation</p> <p>+ Warning: Elements in Resources must have a min cardinality of 0 or 1 and a max cardinality of 1 or *</p> <p>+ Rule: ContentReferences can only be defined in specializations, not constrained types</p> <p>Elements defined in Ancestors: id, meta, implicitRules, language, text, contained, extension, modifierExtension</p>

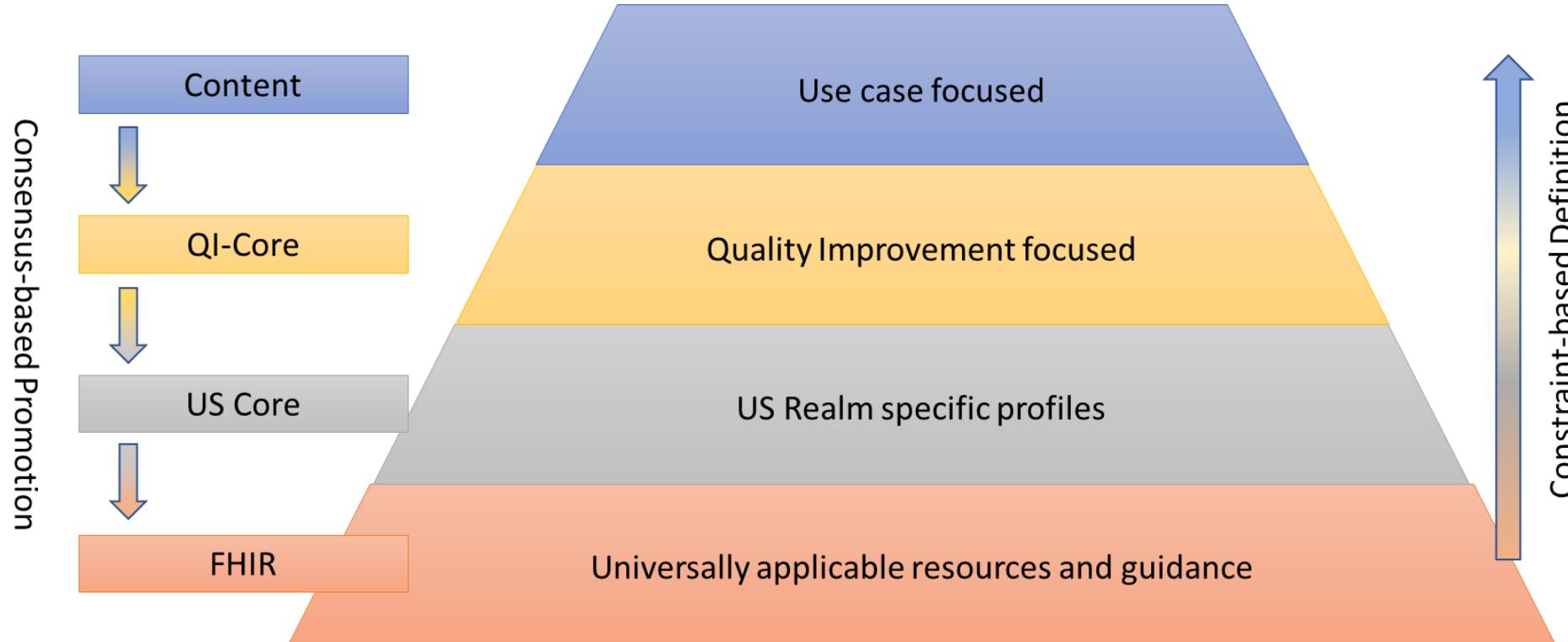
- Selecting a resource brings up its content
- Provides detail around structure for use
- Hyperlinks to descriptions, types, value sets, etc.

<https://build.fhir.org/structuredefinition.html>

Resources vs Profiles

- **Resources** are the basic building block of the FHIR Specification
 - Defines how data are to be structured and exchanged
 - Intended to be generic to fit a wide range of use cases
- **Profiles** are Resources that have been modified to meet the needs of a specific use case
 - Restrict or extend APIs (e.g., add new required extensions), Resources, Terminology,
 - Indicate required elements (cardinality) and designate elements as ‘Must Support’
 - Specify a value set
 - Be Published- profiles are typically published in an IG

HL7 FHIR Standards for Quality



FHIR Clinical Reasoning Module

- **FHIR Measure Resource**
 - Defines dQM metadata and structure
 - Further defined in Quality Measure IG
- **FHIR MeasureReport Resource**
 - Supports Individual, Subject List, Summary, and Data Collection report types
 - Further defined by Data Exchange for Quality Measure IG

Implementation Guides for Quality Measurement

- QI-Core: <http://hl7.org/fhir/us/qicore/>
 - QI-Core is a model IG using profiles based on US Core and base FHIR resources
 - Used for dQMs, Quality Reporting, and clinical decision support (CDS)
- FHIR Quality Measure: <http://hl7.org/fhir/us/cqfmeasures/>
 - Specification IG detailing how dQMs are structured
 - Based on FHIR Measure Resource
- DEQM: <http://hl7.org/fhir/us/davinci-deqm/>
 - How quality data is to be exchanged
 - Based on FHIR Measure Report Resource

Using QI-Core

- QI-Core (STU6 (v6.0.0) published March 2024):
<https://hl7.org/fhir/us/qicore/STU6/>
- This version updates the QI-Core Framework IG STU6 (v6.0.0) and aligns with the US Core Implementation Guide STU6 (v6.1.0)
- QI-Core provides standardized FHIR profiles that simplify data representation, making it easier for authors to write CQL expressions for quality measures and decision support

Using QI-Core (Cont'd)



Home QI-Core Profiles QI-Core Negation Patterns Model Info Extensions Terminology Examples Downloads QDM to QI-Core Changes

Table of Contents > Quality Improvement Core (QI-Core) Implementation Guide

This page is part of the Quality Improvement Core Framework (v6.0.0: STU6 (v6.0.0)) based on FHIR (HL7® FHIR® Standard) R4. The current version which supersedes this version is 7.0.1. For a full list of available versions, see the [Directory of published versions](#).

Plain Language Description [Show](#)

1 Quality Improvement Core (QI-Core) Implementation Guide

Official URL: <http://hl7.org/fhir/us/qicore/ImplementationGuide/hl7.fhir.us.qicore>

Version: 6.0.0

Active as of 2024-03-01

Computable Name: QICore

STU Note

This STU 6.0 update to the QI-Core profiles updates to US-Core STU v6.1.0. See the version history for a complete listing of changes to this version.

1.1 Summary

The QI-Core Implementation Guide defines a set of FHIR profiles with extensions and bindings needed to create interoperable, quality-focused applications. The profiles in this implementation guide derive from and extend the [US Core](#) profiles to provide a common foundation for building, sharing, and evaluating knowledge artifacts across quality improvement efforts in the US Realm.

As an HL7 FHIR Implementation Guide, changes to this specification are managed by the sponsoring workgroup, [Clinical Quality Information](#), and incorporated as part of the standard balloting process. The current roadmap follows closely behind the base FHIR roadmap, and the US Core Implementation Guide.

- Summary
- Contents
- Background
- Relevance of QI-Core Profiles to Authors
- Scope
- Privacy, Security, and Consent
- Provenance
- Relationship to Other Initiatives
- Naming Conventions
- Extensions and Mappings
- MustSupport Flag
- Modifying Attributes

Contents show QI-Core Profile, US Core Profile, and FHIR Resource:
<https://hl7.org/fhir/us/qicore/STU6/profiles.html>

QI-Core Profile Example: Adverse Event

13.2.1.1 Examples

Mild Rash Example

Usages:

- Examples for this Profile: [AdverseEvent/example](#)

You can also check for usages in the FHIR IG Statistics [↗](#)

13.2.1.2 Formal Views of Profile Content

Description of Profiles, Differentials, Snapshots and how the different presentations work [↗](#).

Key Elements Table	Differential Table	Snapshot Table	Statistics/References	All
Name	Flags	Card.	Type	Description & Constraints
AdverseEvent		0..*	AdverseEvent	Medical care, research study or other healthcare event causing physical injury
implicitRules	?!	Σ	0..1	uri
modifierExtension	?!		0..*	Extension
actuality	?!	Σ	1..1	code
category	Σ		0..*	CodeableConcept
event	Σ	1..1	CodeableConcept	(QI) Type of the event itself in relation to the subject Binding: SNOMEDCTClinicalFindings (preferred) : Detailed type of event.
subject	Σ	1..1	Reference(QICore Patient)	(QI) Subject impacted by event
encounter	Σ	0..1	Reference(QICore Encounter)	(QI) Encounter created as part of
date	Σ	0..1	dateTime	(QI) When the event occurred
recordedDate	Σ	0..1	dateTime	(QI) When the event was recorded
resultingCondition	Σ		0..*	Reference(QICore Condition Problems Health Concerns QICore Condition Encounter Diagnosis)

<https://build.fhir.org/ig/HL7/fhir-qicore/StructureDefinition-qicore-adverseevent.html>

QDM to QI-Core Mapping Example for Adverse Event

QDM Context	QI-Core STU8	Comments
Adverse Event	AdverseEvent	
	AdverseEvent.actuality	Although not specified in QDM, QI-Core provides the ability to differentiate between potential versus actual events
QDM Attributes		
code	AdverseEvent.event	Type of the event itself in relation to the subject; reference SNOMED-CT event hierarchy to represent the event in an eCQM. Note: QDM does not include an attribute to address additional elements available in QI-Core: AdverseEvent.suspectEntity (the suspected cause), or the AdverseEvent.resultingCondition.
type	AdverseEvent.category	
severity	AdverseEvent.severity	
relevantdateTime	AdverseEvent.date	
facilityLocations	AdverseEvent.location	
authorDatetime	AdverseEvent.recordedDate	
id	AdverseEvent.id	
recorder	AdverseEvent.recorder	
	AdverseEvent.suspectEntity.instance	The actual instance of what caused the adverse event. May be a substance, medication, medication administration, medication statement or a device.

Shows QDM datatypes, mapping to QI-Core profile, and comments:

<https://build.fhir.org/ig/HL7/fhir-qicore/qdm-to-qicore.html>

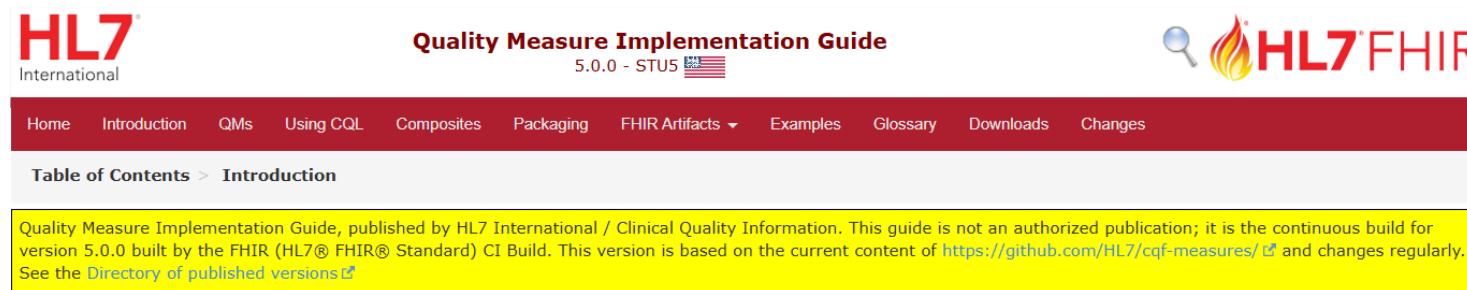
Quality Measure IG Overview

QI-Core provides standardized FHIR profiles for quality measurement and decision support, simplify data representation and ensuring consistency across implementations.

Quality Measure IG

- The Quality Measure IG builds on this foundation by:
 - Defining a standard approach for representing dQM content in FHIR.
 - Specifying required metadata and terminology bindings.
 - Providing guidance on using CQL with FHIR-based measures.
 - Detailing parameters and measure population descriptions.
 - Including profiles for different scoring types (e.g., proportion, continuous variable, ratio).
 - Offering examples of dQMs, libraries, and value sets to support implementation.

Quality Measure IG (Cont'd)



Quality Measure Implementation Guide
5.0.0 - STUS

Table of Contents > Introduction

Quality Measure Implementation Guide, published by HL7 International / Clinical Quality Information. This guide is not an authorized publication; it is the continuous build for version 5.0.0 built by the FHIR (HL7® FHIR® Standard) CI Build. This version is based on the current content of <https://github.com/HL7/cqf-measures/> and changes regularly. See the [Directory of published versions](#).

2 Introduction

2.1 Purpose

The National Academy of Medicine, formerly called the Institute of Medicine (IOM),² defines quality as: "The degree to which health services for individuals and populations increase the likelihood of desired health outcomes and are consistent with current professional knowledge." For care quality to be evaluated, standard quality metrics need to be developed and communicated to the appropriate organizations. To that end, the FHIR Quality Measure Implementation Guide (this IG) has been written to provide guidance for authoring electronic clinical quality measures (eCQMs³) which are clinical quality measures specified in a standard electronic format and designed to use structured, encoded data present in the electronic health record. This implementation guide references the following standards for creating QMs:

- Fast Healthcare Interoperability Resources (FHIR) R4⁴
- Clinical Quality Language (CQL) R1.5.2⁵
- QI-Core Implementation Guide (QI-Core) STU6⁶

- Purpose
- Audience
- Approach
- Scope
- Conventions
- Previous Non-FHIR quality measurement standards [Example: HL7 v3 Based Standards]

To avoid variation in the use of FHIR Resources and metadata across QMs and clinical decision support (CDS), a quality-related implementation guide based on a logical data model is essential. In the US Realm, QMs should use [FHIR Quality Improvement Core \(QICore\)](#)⁷ profiles as the data model to maintain consistency. Other FHIR based data models are also acceptable for use.

Profiles describe several measure types and structure of measure library -
<https://build.fhir.org/ig/HL7/cqf-measures/introduction.html>

DEQM IG

- Specifies a framework for exchanging quality measure data
 - Data Exchange
 - Individual Measure Report
 - Summary Measure Report
- Specifies profiles and extensions necessary for data exchange and reporting
- Defines operations for exchanging and evaluating measures

DEQM IG (Cont'd)

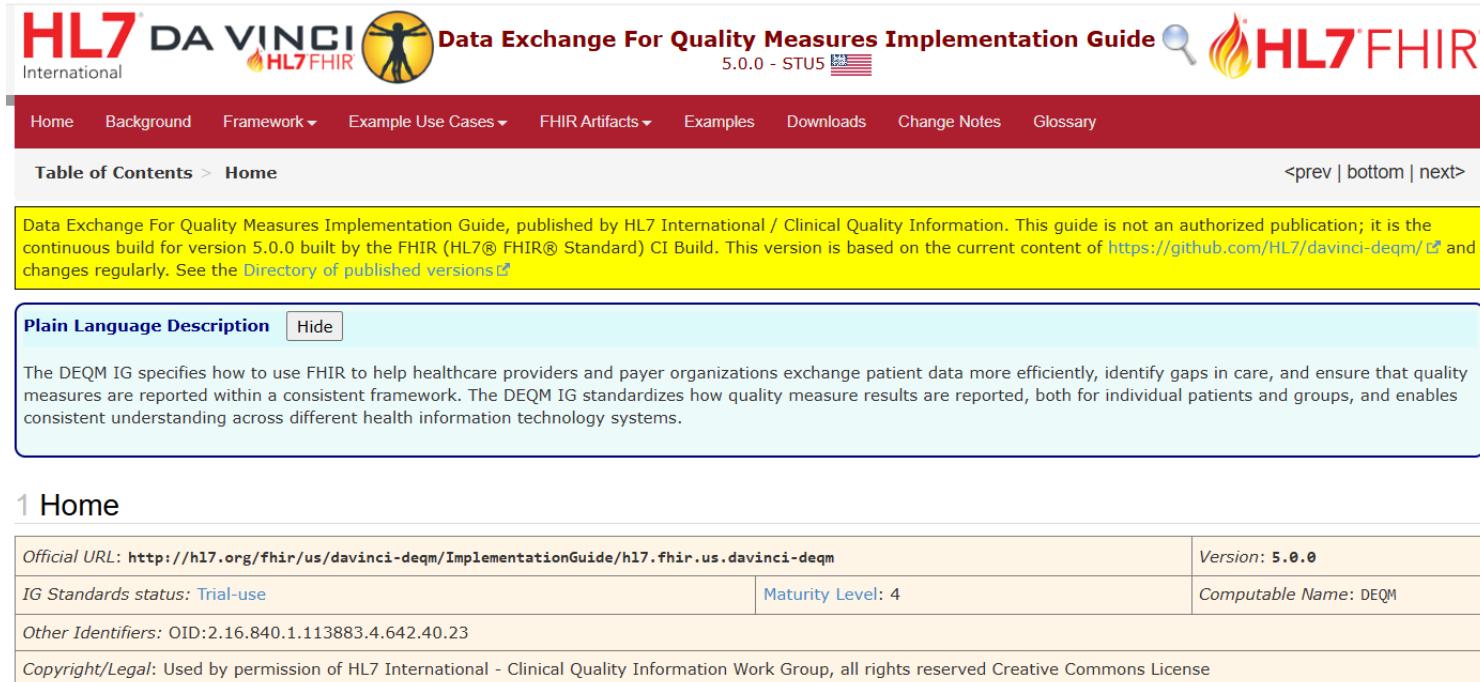


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Plain Language Description Hide

The DEQM IG specifies how to use FHIR to help healthcare providers and payer organizations exchange patient data more efficiently, identify gaps in care, and ensure that quality measures are reported within a consistent framework. The DEQM IG standardizes how quality measure results are reported, both for individual patients and groups, and enables consistent understanding across different health information technology systems.

1 Home

Official URL: http://hl7.org/fhir/us/davinci-deqm/ImplementationGuide/hl7.fhir.us.davinci-deqm	Version: 5.0.0
IG Standards status: Trial-use	Maturity Level: 4
Other Identifiers: OID:2.16.840.1.113883.4.642.40.23	
Copyright/Legal: Used by permission of HL7 International - Clinical Quality Information Work Group, all rights reserved Creative Commons License	

1.1 Introduction

This implementation guide defines a framework to support quality measurement, reporting, and related use cases by enabling the following capabilities:

1. The reporting of quality measurement results, with or without the data involved in calculating those results
2. The definition and exchange of the *data of interest* for a measure or set of measures

- [Introduction](#)
- [How to read this Guide](#)
- [Scenarios](#)
- [Acknowledgements](#)

<https://build.fhir.org/ig/HL7/davinci-deqm/>

Converting eCQMs to dQMs

- CMS has begun converting QDM-based eCQMs to FHIR-based dQMs
- CMS program measures are tested at HL7 Connectathons
- dQM logic behavior is tested in the Measure Authoring Development Integrated Environment (MADiE): <https://www.emesuretool.cms.gov/>
- A measure repository exists for dQMs in progress and example expressions, found here:
 - <https://github.com/cqframework/ecqm-content-r4>

FHIR Operations

- FHIR specifications describe how health data should be structured for exchange
- Operations in FHIR describe the interactions used to exchange that data
- Basic operations include CRUD (Create, Read, Update, Delete)
 - Enables storage, search, and retrieval
- Allow systems to describe general operations
 - Displays as an action preceded by a dollar sign (e.g., \$evaluate-measure)

FHIR Operations (Cont'd)

- Clinical Reasoning defines \$evaluate-measure
 - Allows a client system to request a particular quality measure be evaluated
 - Uses input parameters (e.g., periodStart, periodEnd, measure)
 - Output is a MeasureReport Resource
- Other operations used in Quality Reporting
 - \$collect-data- a request to collect data for a measure
 - \$submit-data- submission of data of interest for a measure
 - \$data-requirements- returns parameters and required data for a measure

dQM Reference Implementation

- FHIR reference implementations are used to test specifications
- Allows implementers to test systems against known results
- Provides an environment for use in Connectathons
- Reference implementation evaluates measures and creates measure reports

CQF Ruler

- CQF Ruler is a reference implementation of the FHIR Clinical Reasoning module
 - Reference implementations are used to test an IG
 - CQF Ruler includes CQL-to-Expression Logical Model (ELM) Translation and Measure Evaluation service
 - Open source Java implementation
 - <https://github.com/DBCG/cqf-ruler>
- Quick Start Guide has been developed to aid set-up
<https://github.com/DBCG/connectathon/wiki/Quickstart>

Current Activities

- CMS program eCQMs have been converted to dQMs using FHIR QI-Core version 6.0.0 reviewed and tested in Connectathons
- Planning for ballots and updates
 - DEQM June 2026
 - QM IG June 2026 ballot
 - QI Core September 2026
- Connectathons are held four times per year
 - HL7 January
 - HL7 May
 - CMS July
 - HL7 September

Resources

- Implementers can access links to IGs, training, and other resources on the Electronic Clinical Quality Improvement (eCQI) Resource Center
 - FHIR page: <https://ecqi.healthit.gov/fhir>
 - dQMs page - <https://ecqi.healthit.gov/dqm/about-dqms>
- Direct comments or questions to ecqi@lantanagroup.com

Resources (Cont'd)

- Current FHIR Measures
 - <https://github.com/cqframework>
- FHIR IGs currently used in dQMs
 - FHIR R4 <https://hl7.org/fhir/R4B/index.html>
 - QI-Core <https://hl7.org/fhir/us/qicore/STU6/>
 - [DEQM](#) (Current version published May 2025)
 - [QM IG](#) (Current version published November 2024)

Resources (Cont'd) - Tools for Implementers

- CQL-to-ELM Translator
 - https://github.com/cqframework/clinical_quality_language/blob/master/Src/java/cql-to-elm/OVERVIEW.md
- JavaScript CQL Execution
 - <https://github.com/cqframework/cql-execution>
- Clinical Quality Language Repository
 - https://github.com/cqframework/clinical_quality_language