

# ECQI RESOURCE CENTER USER GROUP

*January 20, 2026*

*Presenters:*

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# ECQI RESOURCE CENTER USER GROUP AGENDA

- Welcome
- Who are we today?
- Review of New Enhancements, Key Content, and Upcoming Events
- Targeted Discussion
- Open Discussion
- Next Steps

# SUBMITTING FEEDBACK DURING THE USER GROUP

- Recording for note taking purposes only
- Polling Feature:
  - Open the Chat feature  on the Teams menu
  - Look for the LIVE Poll the chat box (you will need to scroll down for the second poll)
  - Select your responses on the radio buttons
- General feedback:
  - Use the chat feature at anytime to provide input

# POLL 1 – WHO ARE WE TODAY?

- Select the user type you most identify with:
  - 69 attendees
  - Academic/Researcher 2%
  - CDS Developer/Steward/Implementer 0
  - eCQM Implementer or quality professional working with Hospital Inpatient and Hospital Outpatient 36%
  - eCQM Implementer or quality professional working with Eligible Clinician 22%
  - eCQM Implementer or quality professional working with Hospital Inpatient, Hospital Outpatient, and Eligible Clinician 21%
  - Health IT Developer/Vendor 5%
  - Measure Developer/Measure Steward 6%
  - Other 8%

# NEW CONTENT HIGHLIGHTS

- QPP [Reporting Options](#) and MVP ID Data for EC Measures
- Hospital Flows and Read Me posted [separately](#) as pdfs on the individual measure pages
- 2026 EKI - [Documentation of Current Medications in the Medical Record | eCQI Resource Center](#)
- 2026 QRDA III IG - <https://ecqi.healthit.gov/qrda/versions>
- 2026 eCQM Data Element Repository ([DERep](#))
- 2027 Hospital Outpatient [eCQMs](#)
- Expand All / Collapse All [Feature](#)
- Image [Expansion](#)
- Coming Soon placeholder for Resources – [2026 EC Benchmarks](#)

## Review under targeted discussion:

- New [dQM tab](#) Under Standards Summary
- Updated dQM [pages](#)



# KEY EVENTS

- Digital Quality Measure (dQM) Public Comment Period Webinar January 21, 2026
- ASTP/ONC Annual Meeting February 11-12, 2026 – Washington, DC
  - <https://www.healthit.gov/news/events/2026-annual-meeting>
- CMS Quality Conference March 16-18, 2026 – Baltimore, MD
  - <https://www.cmsqualcon.com/>
- Cooking with CQL – Fourth Thursday of each Month
- Cypress Tech Talks – 1/20, 2/17, 3/17, 4/14, 5/12...
- MADIe User Group – Third Thursday of each Month
- QDI User Group – Third Wednesday of each Month

# QDI USER GROUP

- The Quality Data Implementation User Group is reconvening this month on January 21<sup>st</sup> at 3PM ET.
  - Meeting details available [QDI User Group | eCQI Resource Center](#)
- We are seeking EHR vendors and implementers, reporting clinicians and organizations, data aggregators, payers, and professional societies to engage and collaborate to inform the development and use of standards for CMS quality measures.
- Regularly scheduled for the third Wednesday of each month at 3pm ET.
  - Future meetings can be found on the [eCQI RC Calendar](#).
- Topics for discussion can be submitted to [ecqi@lantanagroup.com](mailto:ecqi@lantanagroup.com)

# TARGETED DISCUSSION

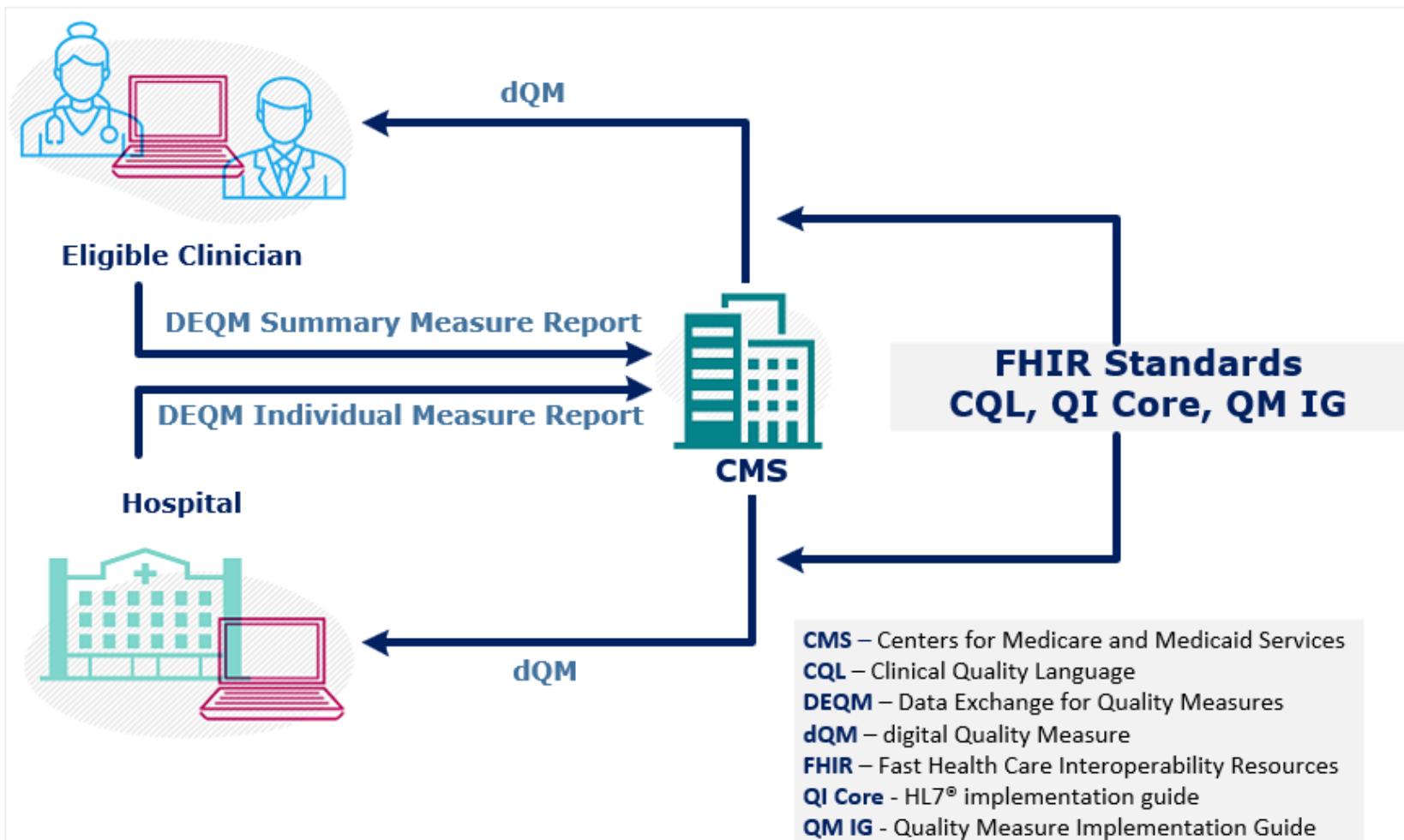
# DQM DEFINITION

- CMS defines digital quality measures (dQMs) as quality measures that use standardized, digital data from one or more sources of health information that are captured and exchanged via interoperable systems; apply quality measure specifications that are standards-based and use code packages; and are computable in an integrated environment

# NEW DQM UPDATES

- Review dQM pages
  - <https://ecqi.healthit.gov/dqm/about-dqms>
- Review new dQM tab on Standards Summary
  - <https://ecqi.healthit.gov/standards-summary/dqm>

# DQM – FLOW OF DQM FHIR TRANSMISSION STANDARDS



# FHIR DQM PUBLIC COMMENT

- CMS is seeking public comment for dQMs that will be considered for future use in quality programs.
- Digital Quality Measure (dQM) Public Comment Period Webinar
  - January 21, 2026 – 2pm - [CMS Digital Quality Measure \(dQM\) Public Comment](#)
  - The pre-recorded content will be posted on the [FHIR Education page](#)
  - Review content of dQM packages
  - Highlight key changes related to measure translations to FHIR
  - Review resources to support the public comment process
- **Public comment will be open from 1/21/26 through 2/23/26 in the ASTP/ONC Jira Tracker.**

# FHIR DQM PUBLIC COMMENT PREVIEW

- MADiE dQM exports include:
  - **Measure HyperText Markup Language (HTML)**: This is the human readable representation of the measure in a web page.
  - **Measure JavaScript Object Notation (JSON)**: The JSON representation of the measure.
  - **Measure Extensible Markup Language (XML)**: The XML representation of the measure.
  - **CQL Folder**
    - **Measure CQL**: The CQL the user entered for the measure.
    - **CQL for all Included Libraries**: The CQL for any library that was included in the measure.
  - **Resource Folder**
    - **JSON File for All Included Libraries**: The JSON representation of any included library.
    - **XML File for All Included Libraries**: The XML representation of any included library.

# FHIR DQM PUBLIC COMMENT PREVIEW

- **MADiE Test case export contains:**
  - Test case packages will be provided for selected measures
  - Each test case bundle is in a sub-folder named by the PatientID
  - The “README” file provides mapping of test case information to the UUID (PatientID)

CMS22FHIR-v1.0.000-FHIR-TestCases collection bundle >	
 Sort View Extract all ...	
Name	Type
8b62d275-3bc3-4d2a-b307-4b5287e86687	File folder
8fe101e0-1bbc-43d4-8c98-fe62f0589027	File folder
435d23cc-57ef-4f7f-aec3-c7ef524d5cd1	File folder
631fbecb-2bdc-4e1e-a9e1-52357222474a	File folder
6924b5e5-412b-4135-b74e-7f400676c8bd	File folder
30561eea-67f0-487c-aff4-a2dea36cb0f9	File folder
a55c6265-a05c-4fad-beb4-c5338420d1b1	File folder
e3a05b61-470f-4787-ba31-c94aeeadeed6	File folder
README	Text Document

# FHIR DQM PUBLIC COMMENT PREVIEW

- dQM Human Readable Header

Metadata	
<b>Title</b>	Preventive Care and Screening: Screening for High Blood Pressure and Follow-Up DocumentedFHIR
<b>Version</b>	1.0.000
<b>Short Name</b>	CMS22FHIR
<b>GUID (Version Independent)</b>	urn:uuid:1b17d846-cbe0-49fa-b503-518addf19fb0
<b>GUID (Version Specific)</b>	urn:uuid:54d53d09-d587-47b9-858f-2c6738fba7e7
<b>CMS Identifier</b>	22FHIR
<b>Effective Period</b>	2026-01-01 through 2026-12-31
<b>Steward (Publisher)</b>	Centers for Medicare & Medicaid Services (CMS)
<b>Developer</b>	American Institutes for Research (AIR)
<b>Description</b>	Percentage of patient visits for patients aged 18 years and older seen during the measurement period who were screened for high blood pressure AND a recommended follow-up plan is documented, as indicated, if blood pressure is elevated or hypertensive
<b>Copyright</b>	This electronic clinical quality measure (Measure) and related data specifications are owned and stewarded by the Centers for Medicare & Medicaid Services (CMS). CMS contracted (Contract # 75FCMC18D0027/ Task Order #: 75FCMC24F0144) with the American Institutes for Research (AIR) to develop this electronic measure. AIR is not responsible for any use of the Measure. AIR makes no representations, warranties, or endorsement about the quality of any organization or physician that uses or reports performance measures and AIR has no liability to anyone who relies on such measures or specifications.  Limited proprietary coding is contained in the Measure specifications for user convenience. Users of proprietary code sets should obtain all necessary licenses from the owners of the code sets. AIR disclaims all liability for use or accuracy of any third-party codes contained in the specifications.  CPT(R) contained in the Measure specifications is copyright 2004-2024 American Medical Association. LOINC(R) is copyright 2004-2024 Regenstrief Institute, Inc. This material contains SNOMED Clinical Terms(R) (SNOMED CT[R]) copyright 2004-2024 International Health Terminology Standards Development Organisation. ICD-10 is copyright 2024 World Health Organization. All Rights Reserved.
<b>Disclaimer</b>	These performance measures are not clinical guidelines and do not establish a standard of medical care, and have not been tested for all potential applications. THE MEASURES AND SPECIFICATIONS ARE PROVIDED "AS IS" WITHOUT WARRANTY OF ANY KIND. Due to technical limitations, registered trademarks are indicated by (R) or [R] and unregistered trademarks are indicated by (TM) or [TM].

# FHIR DQM PUBLIC COMMENT PREVIEW

- dQM Human Readable Body

Population Criteria	
Measure Group (Rate) (ID: Group_1)	
<b>Initial Population</b>	define "Initial Population": "Qualifying Encounter during Measurement Period" QualifyingEncounter where AgeInYearsAt(date from start of "Measurement Period") >= 18
<b>Denominator</b>	define "Denominator": "Initial Population"
<b>Denominator Exclusion</b>	define "Denominator Exclusions": "Qualifying Encounter during Measurement Period" QualifyingEncounter with [ConditionProblemsHealthConcerns: "Diagnosis of Hypertension"] Hypertension such that Hypertension.prevalenceInterval ( ) starts before or on day of QualifyingEncounter.period and Hypertension.isVerified ( )
<b>Numerator</b>	define "Numerator": "Encounter with Normal Blood Pressure Reading" union ( "Encounter with Elevated Blood Pressure Reading SBP 120 to 129 AND DBP less than 80 and Interventions" ) union ( "Encounter with First Hypertensive Reading SBP Greater than or Equal to 130 OR DBP Greater than or Equal to 80 and Interventions" ) union ( "Encounter with Second Hypertensive Reading SBP 130 to 139 OR DBP 80 to 89 and Interventions" ) union ( "Encounter with Second Hypertensive Reading SBP Greater than or Equal to 140 OR DBP Greater than or Equal to 90 and Interventions" )
<b>Denominator Exception</b>	define "Denominator Exceptions": "Encounter with Medical Reason for Not Obtaining or Patient Declined Blood Pressure Measurement" union "Encounter with Order for Hypertension Follow Up Declined by Patient"



# OPEN DISCUSSION

- Is it possible to have mandatory measures noted (may be in Notes) - inpatient has new mandatory measures for next few year.
  - *It is not possible to automate this option as has been done with QPP. We will consider if this could be added to the notes field.*
- OP - new measures have mandatory quarter reporting (adds additional quarters over years) - can the number of mandatory quarters be noted somewhere in the measure.
  - *It is not possible to automate this option as has been done with QPP. We will consider if this could be added to the notes field.*
- Do you know if there are any developments or considerations in the works for limiting diagnosis codes to not include the problem list, but rather the ICD10 billed codes only?
  - *We are not aware of considerations to limit diagnosis codes.*



- The Excessive Radiation and STEMI measures are missing on the Hospital-Outpatient 2027 reporting section.
  - *Updated versions of the Excessive Radiation and STEMI measures for 2027 reporting will be published during the eCQM Annual Update in May of 2026. The new Emergency Care measures were proposed and finalized for 2027 reporting in the 2025 final rule.*
- Maybe this message can go to the CBE, is it possible to note which measures on the MUC List are eCQMs?
  - *We will pass this request on to MUC list authors. Note: the MUC list excel file does include a reference to eCQMs within the Description field.*



# ECQI RESOURCE CENTER USER GROUP NEXT STEPS

- Send feedback and suggestions for site improvement to:
  - [ecqi-resource-center@hhs.gov](mailto:ecqi-resource-center@hhs.gov)
- Attend the next eCQI Resource Center User Group Meeting: **Tuesday, April 21, 2026**
- Review past meeting notes on the [eCQI Resource Center User Group](#) page

# ECQI RESOURCE CENTER USER GROUP APPENDIX

# ECQI RESOURCE CENTER USER GROUP MEMBERSHIP

- *Volunteer forum of interested parties who use the electronic clinical quality improvement (eCQI) Resource Center to obtain key resources necessary for electronic clinical quality measure (eCQM) development, implementation, and reporting and education about eCQM and eCQI concepts and standards.*

# ECQI RESOURCE CENTER USER GROUP GOAL

- *Provide broad interested parties' input in the development and maintenance of the eCQI Resource Center's functionality and content to support the eCQI community.*
  - *Identify, discuss, and review the needs of the eCQI implementer community.*
  - *The outcome of discussions will result in suggested enhancements to the Centers for Medicare and Medicaid Services (CMS) eCQI Resource Center COR for approval.*
  - *Approved suggestions for enhancements will result in implementation on the eCQI Resource Center, deeper investigation at eCQI Resource Center focus groups, and/or be placed on the eCQI Resource Center backlog suggestion list.*

# ECQI RESOURCE CENTER USER GROUP OBJECTIVES

- *Focus on the implementer community including the usability of and gaps in resources provided*
- *Inform users of new functionality and content*
- *Gather real-world feasibility and community feedback on proposed eCQI Resource Center enhancements and features*
- *Provide eCQI Resource Center focus group opportunities*
- *Prioritize items for in depth discussion during eCQI Resource Center focus groups*
- *Advance CMS's understanding of implementer needs for Fast Healthcare Interoperability Resources® eCQMs*
- *Understand the needs of the eCQI community*