

# ECQI RESOURCE CENTER USER GROUP

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*Presenters:*

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# ECQI RESOURCE CENTER USER GROUP AGENDA

- Welcome - [Provided by Vidya Sellappan, CMS](#)
- Who are we today?
- Review of New Enhancements and Key Content
- 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?

- Total attendees 62
- Select the user type you most identify with:
  - 40 Responses
  - Academic/Researcher 2%
  - CDS Developer/Steward/Implementer
  - eCQM Implementer or quality professional working with Eligible Hospital/Critical Access Hospital 45%
  - eCQM Implementer or quality professional working with Eligible Clinician 17%
  - eCQM Implementer or quality professional working with Eligible Hospital/CAH and Eligible Clinician 17%
  - Health IT Developer/Vendor 2%
  - Measure Developer/Measure Steward 11%
  - Other 6%



# NEW CONTENT HIGHLIGHTS

- Teach Me CQL Videos
  - [https://ecqi.healthit.gov/cql?qt-tabs\\_cql=education](https://ecqi.healthit.gov/cql?qt-tabs_cql=education)
- 2025 eCQM Flows
  - [https://ecqi.healthit.gov/ep-ec?qt-tabs\\_ep=ecqm-resources&globalyearfilter=2025&global\\_measure\\_group=3716](https://ecqi.healthit.gov/ep-ec?qt-tabs_ep=ecqm-resources&globalyearfilter=2025&global_measure_group=3716)
  - [https://ecqi.healthit.gov/eh-cah?qt-tabs\\_eh=ecqm-resources&globalyearfilter=2025&global\\_measure\\_group=3716](https://ecqi.healthit.gov/eh-cah?qt-tabs_eh=ecqm-resources&globalyearfilter=2025&global_measure_group=3716)
- 2026 EH changes due to final IPPS rule
  - [https://ecqi.healthit.gov/eh-cah?qt-tabs\\_eh=eh-cah-ecqms&global\\_measure\\_group=3716&globalyearfilter=2026](https://ecqi.healthit.gov/eh-cah?qt-tabs_eh=eh-cah-ecqms&global_measure_group=3716&globalyearfilter=2026) - moved from Program Candidate to eCQMs for use in 2026 reporting
- 2025 QRDA III IG
  - [https://ecqi.healthit.gov/ep-ec?qt-tabs\\_ep=ecqm-resources&global\\_measure\\_group=eCQMs](https://ecqi.healthit.gov/ep-ec?qt-tabs_ep=ecqm-resources&global_measure_group=eCQMs)
- MAT to MADiE
  - CMS moved from the Measure Authoring Tool (MAT) to the Measure Authoring Development Integrated Environment (MADiE) for developing eCQMs for use in 2026 reporting. The eCQI Resource Center has updated references to reflect this change.



# DEMONSTRATIONS OF NEW ENHANCEMENTS

- QPP (MIPS ID) and CBE ID Links
  - [https://ecqi.healthit.gov/ep-ec?qt-tabs\\_ep=ec-ecqms&globalyearfilter=2024&global\\_measure\\_group=eCQMs](https://ecqi.healthit.gov/ep-ec?qt-tabs_ep=ec-ecqms&globalyearfilter=2024&global_measure_group=eCQMs)
  - QPP available for 2024 Performance Period and prior
  - CBE links available for all possible

Title ▼	CMS eCQM ID ↕	CBE ID*	MIPS Quality ID	Telehealth Eligible ↕	Download Specifications	Notes ↕
<a href="#">Anti-depressant Medication Management</a>	CMS128v12	Not Applicable	<a href="#">009</a>	Yes		
<a href="#">Appropriate Testing for Pharyngitis</a>	CMS146v12	Not Applicable	<a href="#">066</a>	Yes		
<a href="#">Appropriate Treatment for Upper Respiratory Infection (URI)</a>	CMS154v12	Not Applicable	<a href="#">065</a>	Yes		
<a href="#">Appropriate Use of DXA Scans in Women Under 65 Years Who Do Not Meet the Risk Factor Profile for Osteoporotic Fracture</a>	CMS249v6	<a href="#">3475e</a>	<a href="#">472</a>	Yes		
<a href="#">Bone density evaluation for patients with prostate cancer and receiving androgen deprivation therapy.</a>	CMS645v7	Not Applicable	<a href="#">462</a>	Yes		
<a href="#">Breast Cancer Screening</a>	CMS125v12	Not Applicable	<a href="#">112</a>	Yes		Only used as part of the MVP reporting and not for traditional MIPS
<a href="#">Cataracts: 20 over 40 or Better Visual Acuity within 90 Days Following Cataract Surgery</a>	CMS133v12	<a href="#">0565e</a>	<a href="#">191</a>	No		

Received two thumbs up.



# REDESIGN SPECIFICATIONS AND DATA ELEMENTS TAB

- Example:  
[https://ecqi.healthit.gov/ecqm/ec/2025/cms0146v13?qt-tabs\\_measure=specifications-and-data-elements](https://ecqi.healthit.gov/ecqm/ec/2025/cms0146v13?qt-tabs_measure=specifications-and-data-elements)

Measure Information    Specifications and Data Elements    Release Notes

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## Specifications

- [CMS146v13.html](#)
- [CMS146v13.zip \(ZIP\)](#)

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## Additional Resources for CMS146v13

- [Value Sets](#)
- [Data Elements](#)
- [eCQM Flow](#) (PDF)
- [Technical Release Notes](#) (Excel)
- [Jira Issue Tracker tickets](#)

\*Note there may be more tickets for CMS146v13 in the [eCQM Tracker - ONC Project Tracking System \(Jira\)](#). Only tickets tagged with their associated CMS measure ID appear.

Use the eCQM Tracker to [open new issues](#) regarding eCQM implementation. [Log in](#) required.



# TARGETED DISCUSSION





# RENAMING SPECIFICATIONS AND DATA ELEMENTS TAB

Poll 2 - Preferred Spec Tab Name:

- 30 Responses
- Specifications and Resources 20%
- Specifications and Measure Resources 56%
- Specifications and Additional Resources 7%
- Specifications and Data Elements (current) 13%
- Or create new tab to separate specifications from other resources? 4%

Breast Cancer Screening

Measure Information

Specifications and Data Elements

Release Notes



# STANDARDS – GENERIC MEASUREMENT PERIOD

- Switch the generic measurement period in the QDM measure specifications to a specified date range: January 1, 2026 through December 31, 2026 with this year’s eCQM Annual Update.
- What are implementer impacts/ implications?

<b>eCQM Title</b>	<b>Anti-depressant Medication Management</b>	
<b>eCQM Identifier (Measure Authoring Tool)</b>	128	eC
<b>NQF Number</b>	Not Applicable	GU
<b>Measurement Period</b>	January 1, 20XX through December 31, 20XX	

No concerns x7



# ECQM FLOWS – NAMING DISCUSSION

- eCQM Flows are flowcharts designed to assist in the interpretation of eCQM logic and provide the calculation methodology used to determine measure scores.
  - Example: <https://ecqi.healthit.gov/sites/default/files/ecqm/measures/CMS128v13-eCQM-Flow.pdf>
- We have heard several end users refer to these as algorithms. In searching CMS.gov we have only been able to find one reference to using algorithms to define flows.
- Are you comfortable with keeping with the name ‘eCQM Flows’? If not, what name would you suggest? eCQM Flows – Algorithms?



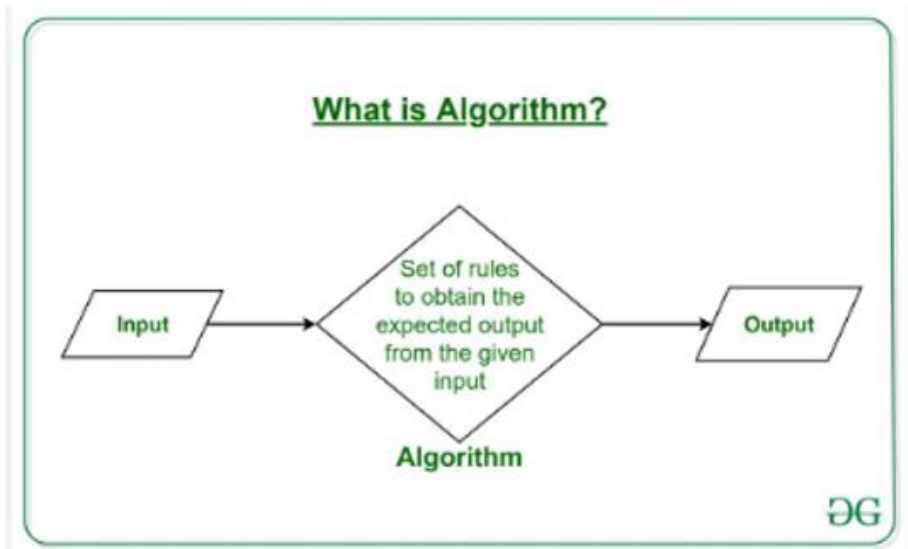
# ECQM FLOWS – NAMING DISCUSSION (CONT'D)

- Comments:
  - Flows is an abbreviation for measure workflow... and it always seemed to assumed understanding
  - Just how I use it - a walk thru of the measure aka algorithm
  - Flow charts may be a good solution
  - Logic workflow
  - Flow narrative is specification
  - We found the Hyperglycemia EH measure flow confusing when compared to the specification. Not so much the flow but the Observation calculation.
  - Label it workflow algorithm
  - Flow diagram
  - Measure Logic Flow Diagram
  - I like flow, I am ok with either and actually already mix the two. I like the idea of a definition page.
  - It seems to me that eCQM should still be in the name so how about eCQM
  - No preference
  - Algorithms is used with the chart-abstracted measures
  - Caution that logic flow is not to be confused with algorithm
  - Looking at the flow it has the calculation of a measure
  - Some are step by step instructions and some do not have to have a calculation



# ECQM FLOWS – NAMING DISCUSSION (CONT'D)

- Comments continued
- Use definition from math and science:



## Poll for Name:

33 Reponses

Flow 35%

Algorithm 26%

Logic Flow 31%

Workflow 8%

Recommendation is to define flows and algorithm and educate end users on what the flows are and how they are used.

# TECHNICAL RELEASE NOTES PAGE DISPLAY

**by Type of TRN (current-ish):  
Header, Logic, Value Sets**

Header		
TRN	Measure Section	Source of Change
Updated Copyright	Copyright	Annual Update
Updated the rationale based upon more recent literature and evidence to support the measure.	Rationale	Measure Lead
Updated references	Reference	Measure Lead
Logic		
TRN	Measure Section	Source of Change
Updated the version number of the Cumulative Medication Duration Library to v2.0.000	Definitions	Annual Update
Updated the version number of the Hospice Library to v5.0.000	Definitions	Annual Update
Updated the version number of the Cumulative Medication Duration Library to v2.0.000	Functions	Annual Update
Updated the version number of the Hospice Library to v5.0.000	Functions	Annual Update
Value Sets		
TRN	Measure Section	Source of Change
Value set Hospice Care Ambulatory (2.16.840.1.113883.3.526.3.1584): Deleted 3 SNOMED CT codes (170935008, 170936009, 305911006) based on review by technical experts, SMEs, and/or public feedback	Terminology	Measure Lead
Added value set Hospice Diagnosis (2.16.840.1.113883.3.464.1003.1165) based on review by technical experts, SMEs, and/or public feedback	Terminology	Measure Lead

**by Source of Change:  
Annual Update, Measure Lead,  
Standards/Technical Update, Jira**

Annual Update Source of change		
Type of TRN	TRN	Measure Section
Header	Updated Copyright	Copyright
Logic	Updated the version number of the Cumulative Medication Duration Library to v2.0.000	Definitions
Logic	Updated the version number of the Hospice Library to v5.0.000	Definitions
Measure Lead Source of Change		
Type of TRN	TRN	Measure Section
Header	Updated the rationale based upon more recent literature and evidence to support the measure.	Rationale
Header	Updated references	Reference
Logic	Updated the 'CodeToDaily' function so that highest dose is calculated consistently	Functions
Logic	Updated the 'CumulativeDuration' function to account for null instances	Functions
Value Set	Value set Payer (2.16.840.1.114222.4.11.3591): Added 5 SOP codes (1111, 1112, 142, 344, 141) based on review by technical experts, SMEs, and/or public feedback	Terminology
Standards/Technical Update Source of Change		
Type of TRN	TRN	Measure Section
Logic	Updated the names of CQL definitions, functions, and/or aliases for clarification and to align with the CQL Style Guide	Definitions

# TECHNICAL RELEASE NOTES POLL

- Poll 3 – I would prefer the Release Notes tab display on the Resource Center to aggregate by:
  - 19 Responses:
    - Type of TRN (current) 26%
    - Source of Change 0%
    - Measure Section 36%
    - It doesn't matter; I don't ever view them on the Resource Center. I either don't use them or I download them when needed. 36%
- TRNs -Continuing with the definition page, spelling out TRN would be helpful for end users. Should the tab be called Technical Release Notes?
- It seems like Annual Update is being used for updates that happen every year and are not big changes (version #, slight grammar changes) while Standard/Tech doesn't happen every year - like the name change for the value set for the example that was displayed.





# OPEN DISCUSSION





# USER SUGGESTIONS

- What would be great would be a list of the value set changes (removals and additions) within the excel sheet or directly on the tab. Would save tons of time flipping back and forth with the VSAC site.
- Some measures (specifically the OQR) have progressive additions of quarters until a full year of reporting is achieved, would it be possible to indicate the number of quarters to be reported for the specific year on the Measure Information tab? Suggestion: Possibly add a new row that indicates the reporting requirement for the year. This could also be used to indicate when a measure is mandatory (the EH Hospitals already have mandatory measures). Possibly name the new row "PI/IQR (or OQR) Reporting Requirements".



# 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: **January 21, 2025**
- Add meeting series to your calendar: <https://ecqi.healthit.gov/events/4521>
- Review past meeting notes on the [eCQI Resource Center User Group](#) page

Applause  
Applause  
Thank you  
Thank you



# 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*

