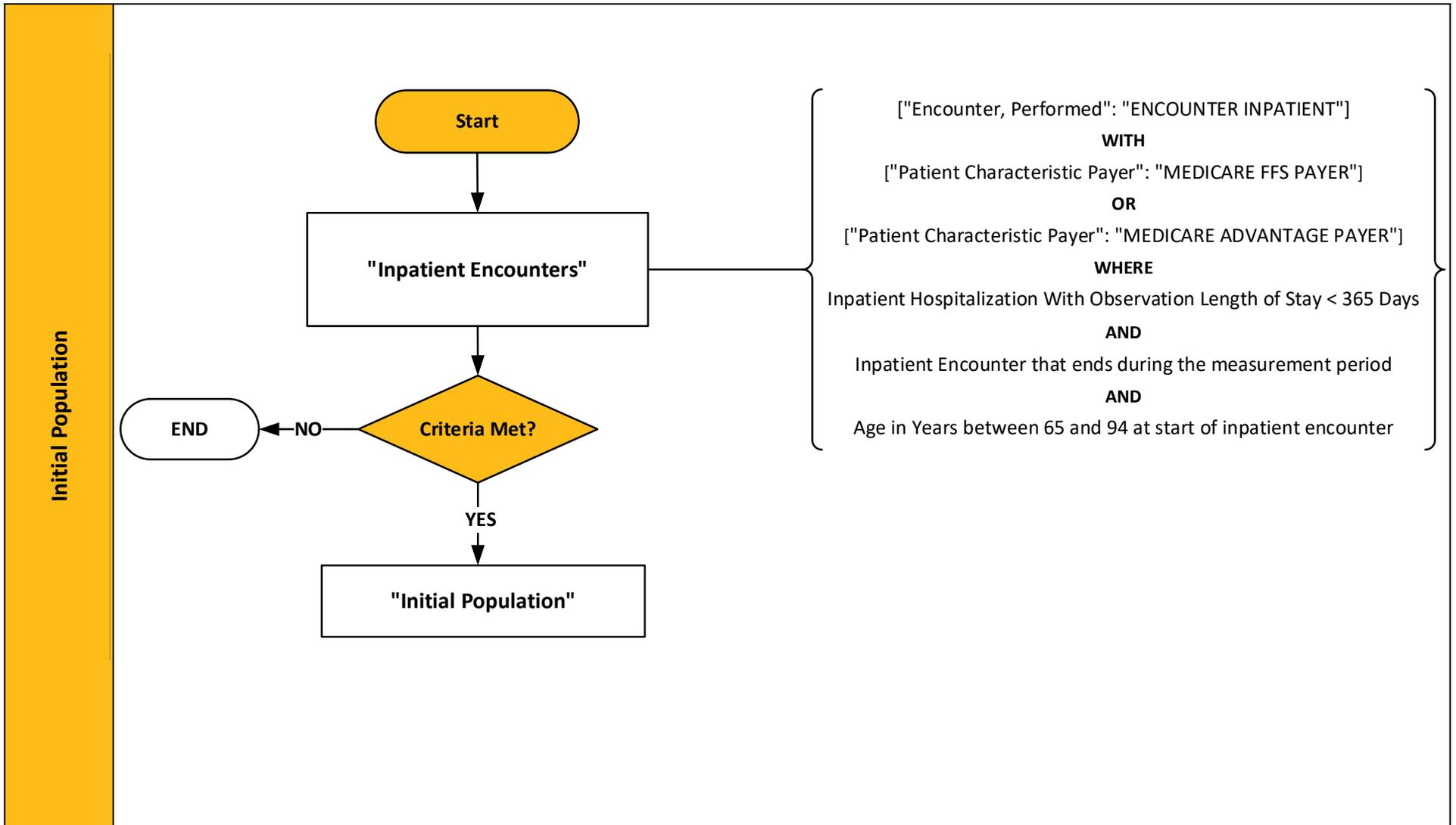# 2024 eCQM Flow – CMS844v4: Core Clinical Data Elements for the Hybrid Hospital-Wide (All-Condition, All-Procedure) Risk-Standardized Mortality Measure (HWM)*

This flow diagram represents an overview of population criteria requirements. Please refer to the eCQM measure specification for a complete list of definitions, direct reference codes, data or timing elements included in this measure and required for submission.

Measure Flow Diagram

Initial Population

Start

"Inpatient Encounters"

Criteria Met? — NO → END

YES

"Initial Population"

["Encounter, Performed": "ENCOUNTER INPATIENT"]
WITH
["Patient Characteristic Payer": "MEDICARE FFS PAYER"]
OR
["Patient Characteristic Payer": "MEDICARE ADVANTAGE PAYER"]
WHERE
Inpatient Hospitalization With Observation Length of Stay < 365 Days
AND
Inpatient Encounter that ends during the measurement period
AND
Age in Years between 65 and 94 at start of inpatient encounter

2024 eCQM Flow – CMS844v4: Core Clinical Data Elements for the Hybrid Hospital-Wide (All-Condition, All-Procedure) Risk-Standardized Mortality Measure (HWM)*

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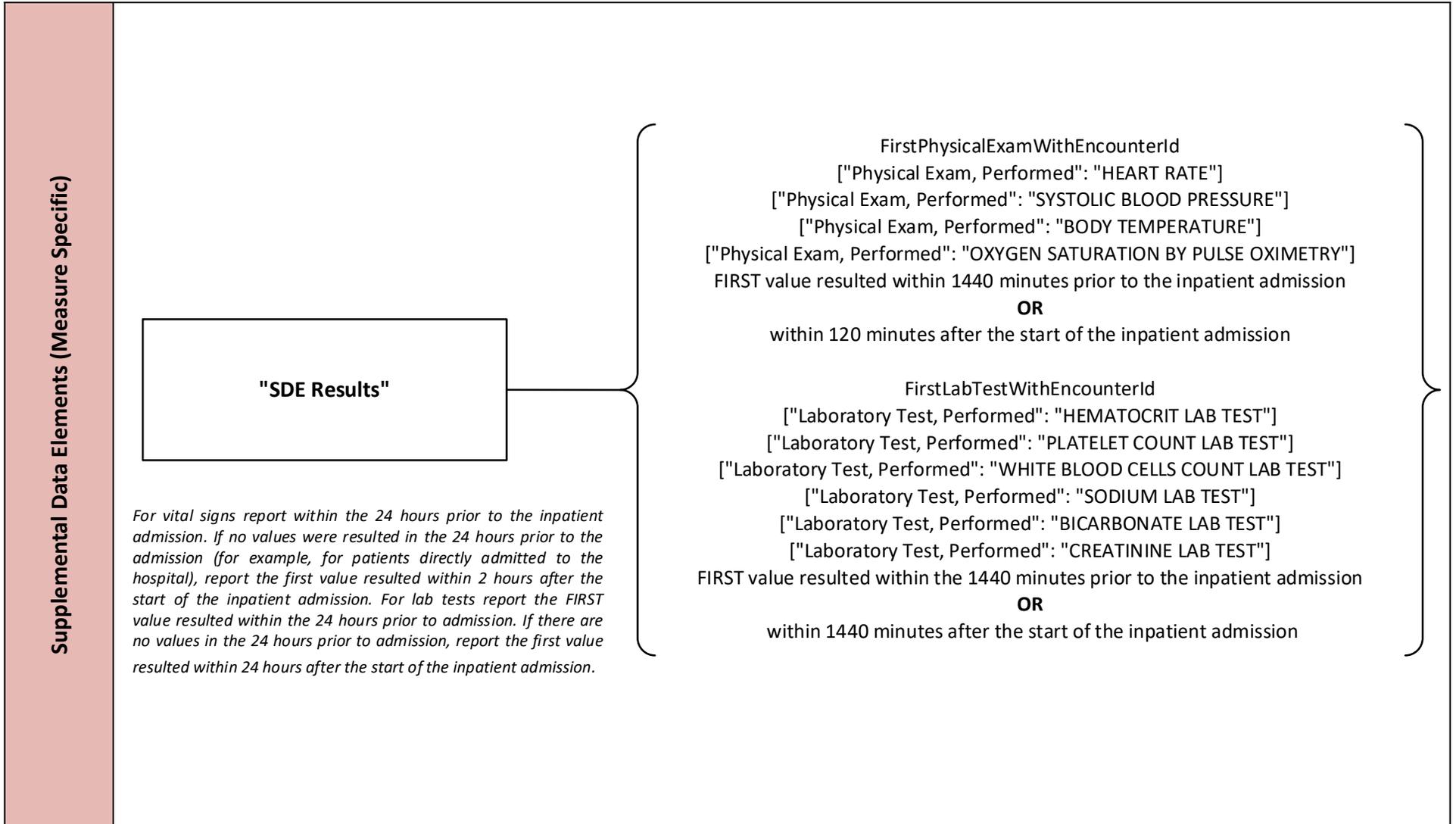
Measure Flow Diagram (Continued)

Supplemental Data Elements (Measure Specific)

"SDE Results"

For vital signs report within the 24 hours prior to the inpatient admission. If no values were resulted in the 24 hours prior to the admission (for example, for patients directly admitted to the hospital), report the first value resulted within 2 hours after the start of the inpatient admission. For lab tests report the FIRST value resulted within the 24 hours prior to admission. If there are no values in the 24 hours prior to admission, report the first value resulted within 24 hours after the start of the inpatient admission.

FirstPhysicalExamWithEncounterId
["Physical Exam, Performed": "HEART RATE"]
["Physical Exam, Performed": "SYSTOLIC BLOOD PRESSURE"]
["Physical Exam, Performed": "BODY TEMPERATURE"]
["Physical Exam, Performed": "OXYGEN SATURATION BY PULSE OXIMETRY"]
FIRST value resulted within 1440 minutes prior to the inpatient admission
OR
within 120 minutes after the start of the inpatient admission

FirstLabTestWithEncounterId
["Laboratory Test, Performed": "HEMATOCRIT LAB TEST"]
["Laboratory Test, Performed": "PLATELET COUNT LAB TEST"]
["Laboratory Test, Performed": "WHITE BLOOD CELLS COUNT LAB TEST"]
["Laboratory Test, Performed": "SODIUM LAB TEST"]
["Laboratory Test, Performed": "BICARBONATE LAB TEST"]
["Laboratory Test, Performed": "CREATININE LAB TEST"]
FIRST value resulted within the 1440 minutes prior to the inpatient admission
OR
within 1440 minutes after the start of the inpatient admission

2024 eCQM Flow – **CMS844v4: Core Clinical Data Elements for the Hybrid Hospital-Wide (All-Condition, All-Procedure) Risk-Standardized Mortality Measure (HWM)***

*This flow diagram represents an overview of population criteria requirements. Please refer to the eCQM measure specification for a complete list of definitions, direct reference codes, data or timing elements included in this measure and required for submission.

Measure Flow Narrative

The measure flow diagram on the preceding pages illustrates the steps to determine the population criteria for this measure.

Measure Description	This logic is intended to extract electronic clinical data. This is not an electronic clinical quality measure and this logic will not produce measure results. Instead, it will produce a file containing the data that CMS will link with administrative claims to risk adjust the Hybrid HWM outcome measure. It is designed to extract the first resulted set of vital signs and basic laboratory results obtained from encounters for adult Medicare Fee-For-Service and Medicare Advantage patients admitted to acute care short stay hospitals.
Initial Population	All Medicare Fee-For-Service and Medicare Advantage encounters for patients aged 65 to 94 years at the start of an inpatient admission, who are discharged during the measurement period (length of stay < 365 days). NOTE: All Medicare Fee-For-Service and Medicare Advantage encounters meeting the above criteria should be included, regardless of whether Medicare Fee-For-Service/Medicare Advantage is the primary, secondary, or tertiary payer.

This flow diagram represents an overview of population criteria requirements. Please refer to the eCQM measure specification for a complete list of definitions, direct reference codes, data or timing elements included in this measure and required for submission.

Measure Flow Narrative (Continued)

The measure flow diagram on the preceding pages illustrates the steps to determine the population criteria for this measure.

Supplemental Data Elements	For encounters in the Initial Population, report the FIRST value for vital signs resulted within the 24 hours prior to the inpatient admission. If no values were resulted in the 24 hours prior to the admission (for example, for patients directly admitted to the hospital) report the first value resulted within 2 hours after the start of the inpatient admission. For laboratory test results, report the FIRST value resulted within the 24 hours prior to admission. If there are no values in the 24 hours prior to admission, report the first value resulted within 24 hours after the start of the inpatient admission. First values for the core clinical data elements may be resulted in the emergency department or other hospital outpatient locations within the hospital facility before a patient is subsequently admitted to the same hospital. First values for these data elements may also be resulted in an inpatient location for directly admitted patients who do not receive care in the emergency department or other hospital outpatient locations before admission. The HWM-specific core clinical data elements are as follows: • Bicarbonate (or carbon dioxide, see Bicarbonate Lab Test value set) • Creatinine • Heart Rate • Hematocrit • Oxygen saturation (by pulse oximetry) • Platelet • Sodium • Systolic blood pressure • Temperature • White blood cell count Note: Do not report ALL values on an encounter during their entire admission. Only report the FIRST resulted value for EACH core clinical data element collected in the appropriate timeframe, if available. For every patient in the Initial Population, also identify payer, race, ethnicity and sex.