

2017 Electronic Clinical Quality Measures (eCQM) Annual Update Pre-Publication Document

March 2017

This document describes important standards, terminology, and measure changes slated for the 2017 eCQM Annual Update. This update corresponds to the 2018 reporting/performance period for the Centers for Medicare & Medicaid Services (CMS) programs that use eCQMs. It is designed to help electronic health record (EHR) developers, Eligible Professionals (EP)/Eligible Clinicians, and Eligible Hospitals (EH) prepare for the 2018 reporting through transparent pre-release of expected changes and requirements.

Where and when to obtain the 2017 eCQM Annual Update for 2018 CMS quality programs:

The 2017 eCQM Annual Update is expected to be available late Spring 2017. Please follow the electronic Clinical Quality Improvement (eCQI) Resource Center, CMS, and the Office of the National Coordinator for Health Information Technology (ONC) listservs to receive live updates and announcements on the measure specification publication and related content. The 2017 eCQMs will be posted on the [Eligible Professional/Eligible Clinician](#) and [Eligible Hospital](#) pages of the [eCQI Resource Center](#).

Standards used in the 2017 eCQM specifications:

- [CDA R2](#) – Clinical Document Architecture Release 2
- [HQMF R2.1](#) – Health Quality Measures Format Release 2.1
- [QDM-based HQMF Implementation Guide R1.4](#) – Quality Data Model-based Health Quality Measures Format Implementation Guide Release 1.4
- [QRDA-I R1 STU R4](#) – Quality Reporting Document Architecture - Category I Standard for Trial Use Release 4 (January 2017)
- [QRDA-III R1 STU R2](#) – Quality Reporting Document Architecture - Category III Standard for Trial Use Release 2 (December 2017 tentative)
- [QDM v4.3](#) – Quality Data Model Version 4.3
- [CMS QRDA IG](#) – CMS Quality Reporting Document Architecture Implementation Guide (publication expected July 2017)

Code system versions used in the 2017 eCQM specifications:

The following have been updated:

- [RxNorm 2017-01](#)
- [SNOMED CT 2016-09](#) – Systematized Nomenclature of Medicine -- Clinical Terms
- [LOINC 2.56](#) – Logical Observation Identifiers Names and Codes 2.56
- [CPT 2016](#) – Current Procedural Terminology 2016
- [CDT 2017](#) – Current Dental Terminology 2017
- [CVX 2016-09](#) – Clinical Vaccine Formulation 2016-09
- [HCPCS 2016](#) – Healthcare Common Procedure Coding System 2016
- [ICD-10-CM 2017](#) – International Classification of Diseases, Tenth Revision, Clinical Modification, 2017
- [ICD-10-PCS 2017](#) – International Classification of Diseases, Tenth Revision, Procedure Coding System, 2017
- [AdministrativeGender HL7V3.0_2015-07](#) – Administrative Gender Value Set Version 3.0
- [CDCREC 1.1](#) – Centers for Disease Control and Prevention Race and Ethnicity Code Set Version 1.1
- [SOP 6.0](#) – Source of Payment 6.0

The following remains the same:

- [ICD-9-CM 2013](#) – International Classification of Diseases, Ninth Revision, Clinical Modification, 2013 (in use due to look-back periods of some eQMs)

Guidance on the use of ICD-9 and ICD-10 in the 2017 eCQM updated specifications:

In October 2015, CMS formally retired the use of International Classification of Diseases, Ninth Revision (ICD-9) code systems for billing and reporting purposes. CMS designated a one-year period of transition to complete the phasing out of the ICD-9 content, which ended on October 1, 2016. The eQMs, however, use ICD-9 codes in multiple ways, including look-back periods or to reference historical data. Therefore, CMS and ONC provided the following guidance to eCQM developers for the 2017 eCQM Annual Update:

- Developers should review all ICD-9 codes in measure value sets as with any measure update. For ICD-9 codes in value sets, the expectation is they will be removed unless the timing of the measure would include a look-back period that starts prior to the completion of CMS's transition period to ICD-10. Therefore, it is expected that many

ICD-9 value sets will remain to represent historical data as approved per a consensus of eCQM stakeholder federal agencies and partners. Since new value sets use ICD-10, the gradual phasing out of ICD-9 codes in the value sets is expected.

Binding Parameter Specification and the Data Element Catalog:

Beginning with the 2017 eCQM Annual Update, the National Library of Medicine (NLM) will provide a file that contains a complete listing of all the information necessary to determine the value set expansions to be used for each value set referenced by the measures included in the Annual Update—the Binding Parameter Specification (BPS) document. The parameters necessary to determine this are the value set definition version used and the code system version used. This new BPS document will contain all of the information currently in the Data Element Catalogue (DEC) but significantly expand upon the specificity and detail of that document. The new BPS document contains all of the value sets plus identifiers used for each eCQM. Each value set version and code system version used to define the value set expansion is noted. The Value Set Authority Center (VSAC) Expansion Profile used will also be included.

Given that the content of the BPS includes but supersedes the content of the current DEC, the current DEC will no longer be produced after the 2017 Annual Update, and only the new BPS will be produced.