2018 CMS QRDA I Conformance Statement
Resource
2019 CMS QRDA III Implementation Guide, Schematron, and Sample Files

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2018 CMS QRDA I Conformance Statement Resource

» CMS has updated the CMS QRDA I Conformance Statement Resource for Hospital Submissions for Calendar Year (CY) 2018 electronic clinical quality measure (eCQM) reporting for the Hospital Inpatient Quality Reporting (IQR) and the Promoting Interoperability programs

» Conformance Statement Resource assists data submitters to troubleshoot the most common conformance errors by providing detailed information to resolve the errors causing the file to be rejected

» The updated Conformance Statement Resource is found on the eCQI Resource Center [2018 EH/CAH eCQM Materials table](#) and the [QRDA page](#) under 2018 Reporting and Performance Period
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» Background

- The 2019 CMS QRDA III IG provides technical instructions for QRDA III reporting for
  • Merit-based Incentive Payment System (MIPS) and Advanced Alternative Payment Models (APMs)
  • Promoting Interoperability (PI)
  • Comprehensive Primary Care Plus (CPC+)
The high-level changes from the 2018 QRDA III IG Version 2 (last updated July 27, 2018) to 2019 CMS QRDA III IG

- Increased alignment with its base standard, the HL7 QRDA III STU R2.1 IG
- Now shows the template changes from the base HL7 QRDA III STU R2.1 IG only
- Updated eCQM Universally Unique Identifiers (UUIDs) for the 2019 performance period eCQMs* that were released on May 4, 2018.

The Improvement Activities identifiers and Promoting Interoperability measure identifiers to be published in subsequent addendum with publication of the 2019 Physician Fee Schedule Rule.

*Please note, measures will not be eligible for 2019 reporting unless and until they are proposed and finalized through notice-and-comment rulemaking for the applicable program.
The changes made in the 2018 CMS QRDA III IG V2 last updated July 27, 2018 that are also in the 2019 CMS QRDA III IG:

- The templates have been updated to report the performance period at the individual measure/activity level. The performance period under MIPS can be reported at the individual measure level for the MIPS quality measures and at the individual activity level for the MIPS improvement activities (IA), as defined by CMS, or the performance category level for Quality and IA performance categories.

- Performance period reporting for Promoting Interoperability (formerly Advancing Care Information) and CPC+ remains at the category level.

- Addition of a new CMS program name code “MIPS_VIRTUALGROUP” to support MIPS virtual group reporting.
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» Schematron and Sample File includes:
  - Schematron file for the 2019 CMS QRDA III IG that contains a list of assertion rules used to validate QRDA reports and conform to the requirements specified in the IG.
  - Sample QRDA III files for the CPC+ program and the MIPS group reporting
    • Updated for the 2019 Performance Period
    • Validates against the 2019 CMS QRDA III IG Schematron file
Additional QRDA Resources

» 2019 CMS QRDA III IG
» 2019 CMS QRDA Schematron and Sample Files
» You can find additional QRDA-related resources, as well as current and past IGs, on the ecQI Resource Center QRDA page at ecqi.healthit.gov/qrda
» For questions related to the QRDA Implementation Guides and/or Schematrons, visit the ONC QRDA JIRA Issue Tracker
» For questions related to Quality Payment Program/Merit-based Incentive Payment System data submissions, visit the Quality Payment Program website or contact by phone 1-866-288-8292, TTY: 1-877-715-6222 or email QPP@cms.hhs.gov