

Pioneers in Quality™ Expert to Expert Series: STK-2, -3, & -6

9-10 am (PT)

10-11 am (MT)

11 am-12 pm (CT)

12-1 pm (ET)

December 11, 2018

For those participating that would like to use the Closed Captioning Service:

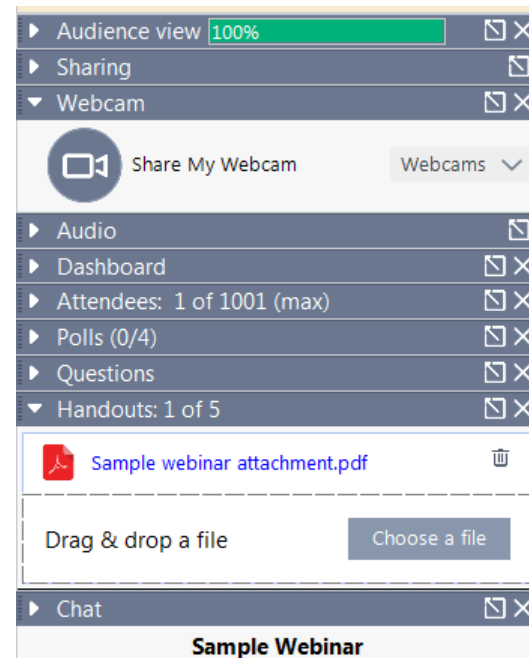
- <http://www.captionedtext.com/client/event.aspx?CustomerID=1519&EventID=3845192>
- 3845192
- We will also include the information in the Chat box when we open the session.

At the end of this session, participants will be able to:

- Apply concepts learned about the new Clinical Quality Language (CQL) expression language for the STK-2, -3, & -6 eCQMs
- Identify common issues and questions regarding STK-2, -3, & -6 eCQMs and
- Prepare to implement the CQL expression language for the 2019 eCQM reporting year (2020 data submission)

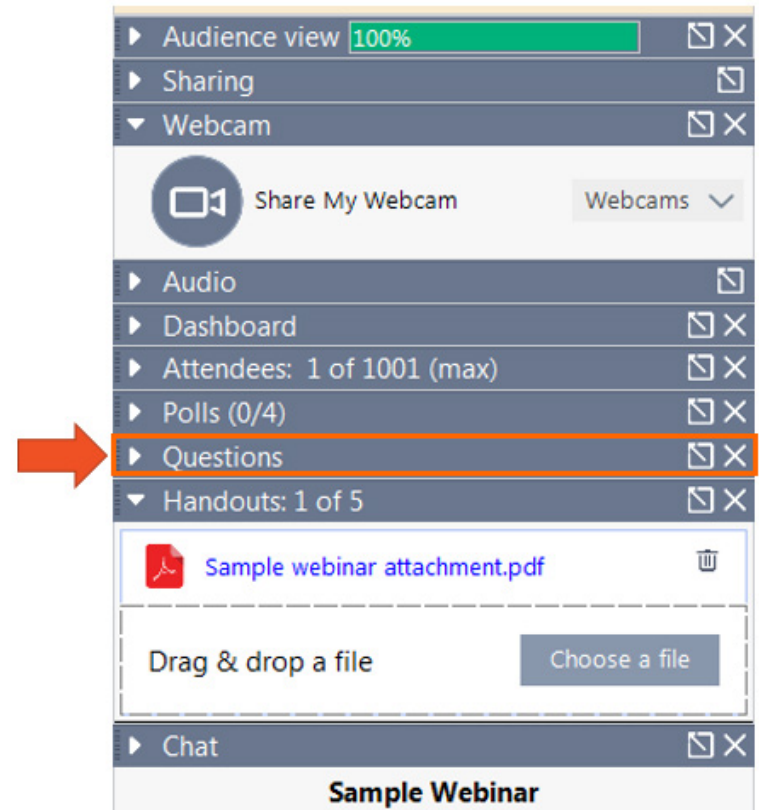
Slides are available for download now!

- See the GoToWebinar “Handouts” Section
- Click the arrow to open the Handouts list, select the slides for today’s session, and download.



This program is designed to be interactive.

- All participants are connected in listen-only mode; we are not recognizing the raised hands feature
- Ask questions through the Questions function in the Dashboard
- Visit any links or resources noted in the slides
- Download the slides and share the recording



Pioneers in Quality™

Expert to Expert Series: STK -2, -3, & -6



The screenshot shows the The Joint Commission website. The top navigation bar includes links for Log In, Request Guest Access, Contact Us, Careers, JCR Web Store, and Press Room. Below this is a search bar and a secondary navigation bar with links for Accreditation, Certification, Standards, Measurement (highlighted), Topics, About Us, and Daily Update. The main content area is titled 'Pioneers in Quality' and features a sidebar with links to 'Pioneers in Quality - Home', 'Proven Practices Webinar Series', and 'Pioneers in Quality™ Recognition'. The main text area is titled '2018 Proven Practices Collection and Webinar Series' and contains a paragraph about four hospitals and/or health systems recognized as 2018 Pioneers in Quality™ Expert Contributors. A video player is embedded on the right side of the page, titled 'Pioneers in Quality: eCQM Expert to Expert Series' with a link to 'Series Information/Session Replays'. An orange arrow points to this video player.

In January, the webinar recording and slide deck will be accessible on The Joint Commission website via the Expert to Expert landing page

(https://www.jointcommission.org/piq_expert_to_expert_series/).

When follow-up items are posted, an email will be sent to all individuals that registered.

We are providing CE credits for the Expert to Expert Series Webinars.

This webinar is approved for 1.0 Continuing Education Credit from:

- Accreditation Council for Continuing Medical Education (ACCME)
- American Nurses Credentialing Center (ANCC)
- American College of Healthcare Executives (ACHE)
- California Board of Registered Nursing
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* If you are listening with colleagues and did not use your own link/phone line to join, you can still claim CE credit if you meet these criteria. An automated email after this session will provide information how to access the survey.

** The program evaluation/attestation survey link will be sent to your email after the webinar. For those completing the evaluation - printable certificates will be sent via email 2 weeks after the session; all participant CE certificates will be sent at the same time.

Disclosure Statement

These staff and speakers have disclosed that neither they nor their spouses/partners have any financial arrangements or affiliations with corporate organizations that either provide educational grants to this program or may be referenced in this activity:

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Mia Nievera, MSN

Karen Kolbusz, MBA, BSN

STK-2 Discharged on Antithrombotic Therapy (CMS104v7)

December 11, 2018

Introduction

Discharged on Antithrombotic Therapy

- Long-term antithrombotic therapy is recommended for secondary stroke prevention in patients with ischemic stroke.
- Four antiplatelet drugs have been approved by the FDA for prevention of vascular events among patients with a stroke or TIA (i.e., aspirin, combination aspirin/dipyridamole, clopidogrel, and ticlopidine).
- On average, these agents reduce the relative risk of stroke, MI, or death by $\approx 22\%$ (Kernan WN, et. al., 2014).
- Data suggest that antithrombotic therapy should be prescribed at discharge following acute ischemic stroke to reduce stroke mortality and morbidity as long as no contraindications exist.

	Metadata	Data Model	Logic
Current Specifications (through CY2018)	HQMF (Metadata, Population Structure)	Quality Data Model	
New Specifications (Effective CY2019)	HQMF (Metadata, Population Structure)	Quality Data Model	Clinical Quality Language

Building Blocks

Population Criteria

▲ Initial Population

TJC."Encounter with Principal Diagnosis and Age"

▲ Denominator

TJC."Ischemic Stroke Encounter"

▲ Denominator Exclusions

TJC."Ischemic Stroke Encounters with Discharge Status"
union TJC."Comfort Measures during Hospitalization"

▲ Numerator

TJC."Ischemic Stroke Encounter" IschemicStrokeEncounter
with "Antithrombotic Therapy at Discharge" DischargeAntithrombotic
such that DischargeAntithrombotic.authorDatetime during IschemicStrokeEncounter.relevantPeriod

Definitions

▲ Antithrombotic Not Given at Discharge

["Medication, Not Discharged": "Antithrombotic Therapy"] NoAntithromboticDischarge
where NoAntithromboticDischarge.negationRationale in "Medical Reason"
or NoAntithromboticDischarge.negationRationale in "Patient Refusal"

▲ Antithrombotic Therapy at Discharge

["Medication, Discharge": "Antithrombotic Therapy"]

▲ Denominator

TJC."Ischemic Stroke Encounter"

▲ Denominator Exceptions

TJC."Ischemic Stroke Encounter" IschemicStrokeEncounter
with "Antithrombotic Not Given at Discharge" NoDischargeAntithrombotic
such that NoDischargeAntithrombotic.authorDatetime during IschemicStrokeEncounter.relevantPeriod

Functions

▲ Global.CalendarAgeInYearsAt(BirthDateTime DateTime, AsOf DateTime)

years between ToDate(BirthDateTime)and ToDate(AsOf)

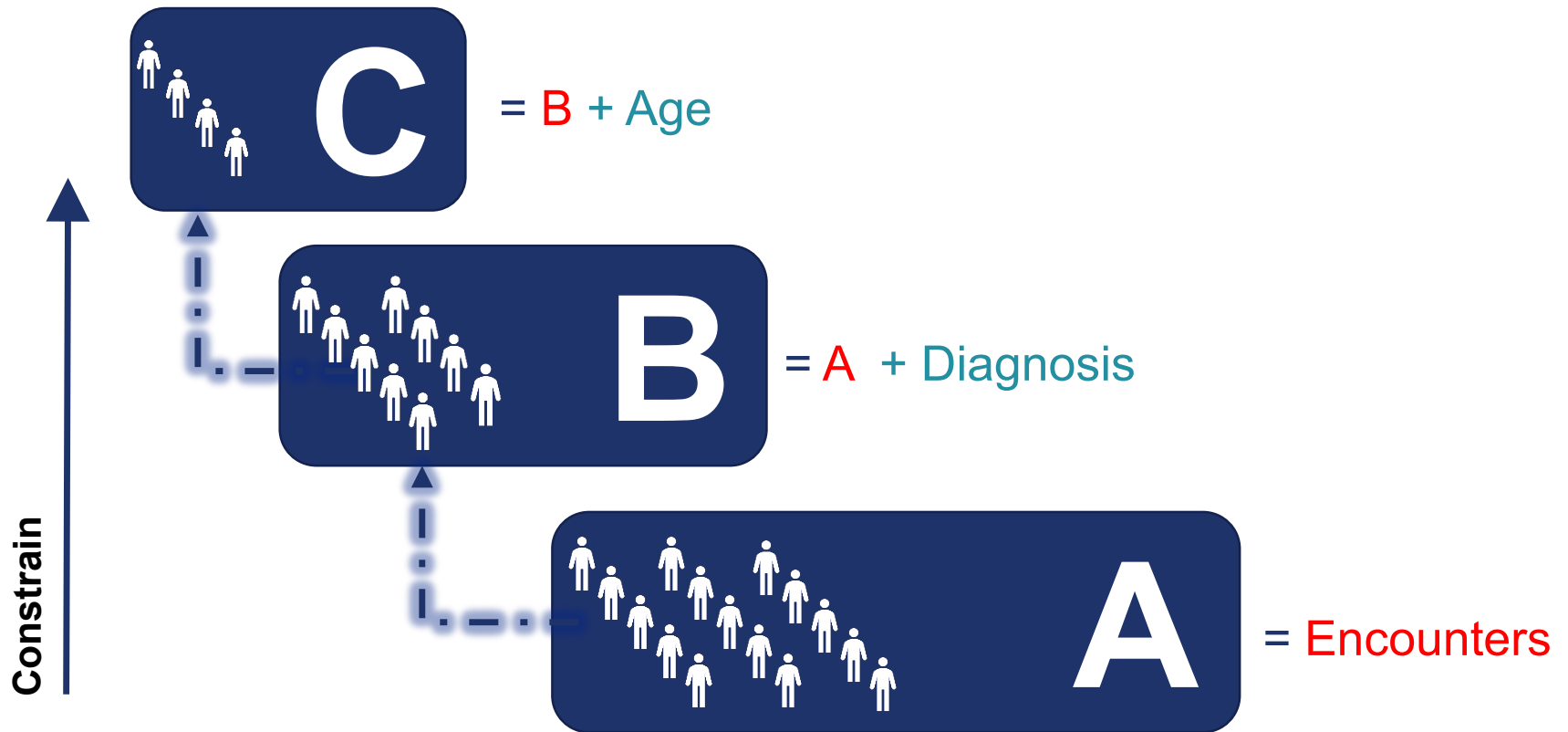
▲ Global.Hospitalization(Encounter "Encounter, Performed")

```
( singleton from ( ["Encounter, Performed": "Emergency Department Visit"] EDVisit
  where EDVisit.relevantPeriod ends 1 hour or less on or before start of Encounter.relevantPeriod
) ) X
  return if X is null then Encounter.relevantPeriod else Interval[start of X.relevantPeriod, end of Encounter.relevantPeriod]
```

CQL Definition

Example of Generic Population Criteria

Initial Population = C



Initial Population:

TJC.Encounter with Principal Diagnosis and Age

▲ TJC.Encounter with Principal Diagnosis and Age

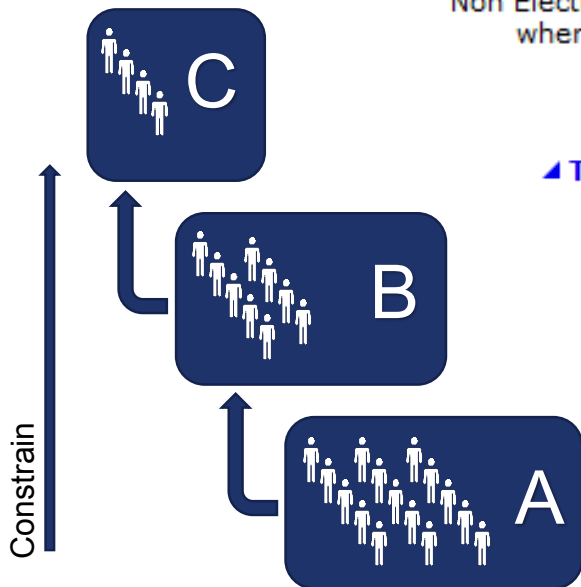
"All Stroke Encounter" AllStrokeEncounter
with ["Patient Characteristic Birthdate"] BirthDate
such that Global."CalendarAgeInYearsAt"(BirthDate.birthDatetime, start of AllStrokeEncounter.relevantPeriod) >= 18

▲ TJC.All Stroke Encounter

"Non Elective Inpatient Encounter" NonElectiveEncounter
where NonElectiveEncounter.principalDiagnosis in "Hemorrhagic Stroke"
or NonElectiveEncounter.principalDiagnosis in "Ischemic Stroke"

▲ TJC.Non Elective Inpatient Encounter

["Encounter, Performed": "Non-Elective Inpatient Encounter"] NonElectiveEncounter
where Global."LengthInDays"(NonElectiveEncounter.relevantPeriod) <= 120
and NonElectiveEncounter.relevantPeriod ends during "Measurement Period"



Definitions are made up of:

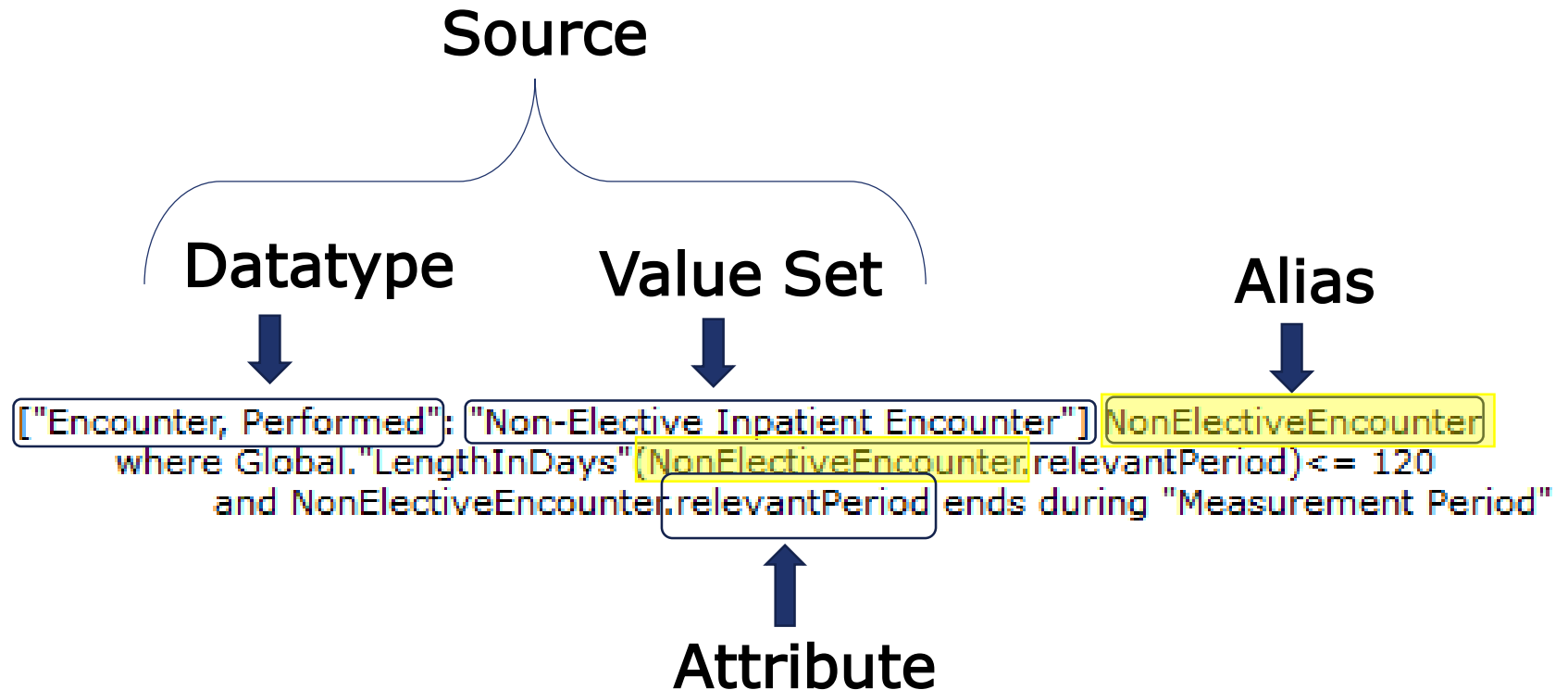
Library Alias

Name

▲ **TJC.Non Elective Inpatient Encounter**

```
["Encounter, Performed": "Non-Elective Inpatient Encounter"] NonElectiveEncounter  
where Global."LengthInDays"(NonElectiveEncounter.relevantPeriod) <= 120  
and NonElectiveEncounter.relevantPeriod ends during "Measurement Period"
```

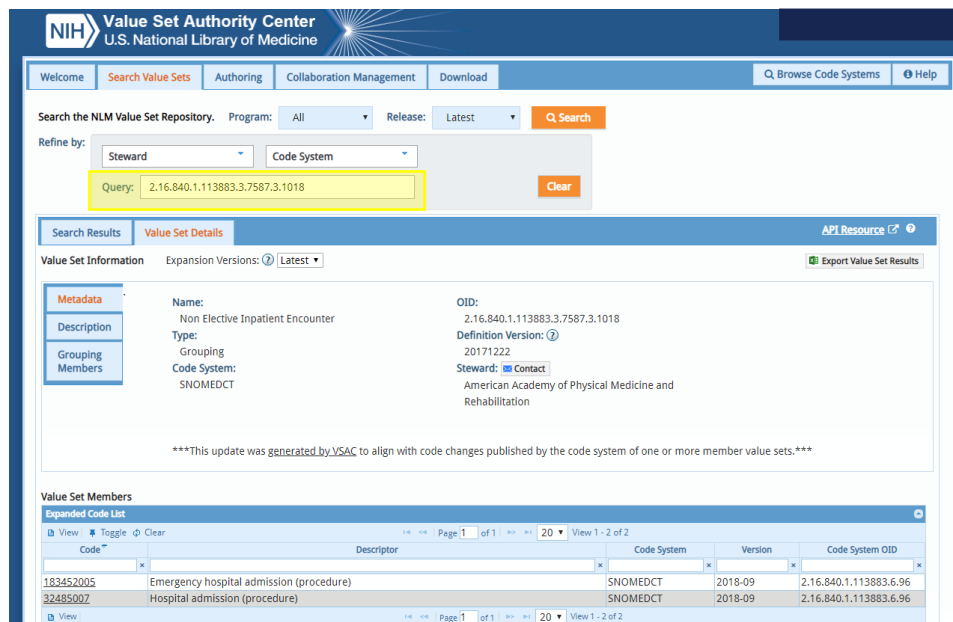
Expression



Definition Anatomy- Value Sets

Terminology

- valueset "Antithrombotic Therapy" using "2.16.840.1.113883.3.117.1.7.1.201"
- valueset "Comfort Measures" using "1.3.6.1.4.1.33895.1.3.0.45"
- valueset "Discharge To Acute Care Facility" using "2.16.840.1.113883.3.117.1.7.1.87"
- valueset "Discharged to Health Care Facility for Hospice Care" using "2.16.840.1.113883.3.117.1.7.1.207"
- valueset "Discharged to Home for Hospice Care" using "2.16.840.1.113883.3.117.1.7.1.209"
- valueset "Emergency Department Visit" using "2.16.840.1.113883.3.117.1.7.1.292"
- valueset "Ethnicity" using "2.16.840.1.114222.4.11.837"
- valueset "Hemorrhagic Stroke" using "2.16.840.1.113883.3.117.1.7.1.212"
- valueset "Ischemic Stroke" using "2.16.840.1.113883.3.117.1.7.1.247"
- valueset "Left Against Medical Advice" using "2.16.840.1.113883.3.117.1.7.1.308"
- valueset "Medical Reason" using "2.16.840.1.113883.3.117.1.7.1.473"
- valueset "Non-Elective Inpatient Encounter" using "2.16.840.1.113883.3.117.1.7.1.424"
- valueset "ONC Administrative Sex" using "2.16.840.1.113762.1.4.1"
- valueset "Patient Expired" using "2.16.840.1.113883.3.117.1.7.1.309"
- valueset "Patient Refusal" using "2.16.840.1.113883.3.117.1.7.1.93"
- valueset "Payer" using "2.16.840.1.114222.4.11.3591"
- valueset "Race" using "2.16.840.1.114222.4.11.835"



Value Set Authority Center
U.S. National Library of Medicine

Welcome | **Search Value Sets** | Authoring | Collaboration Management | Download | [Browse Code Systems](#) | [Help](#)

Search the NLM Value Set Repository. Program: **All** Release: **Latest** [Q Search](#)

Refine by: Steward **Code System**

Query: 2.16.840.1.113883.3.7587.3.1018 [Clear](#)

Search Results | **Value Set Details** | [API Resource](#)

Value Set Information Expansion Versions: **Latest** [Export Value Set Results](#)

Metadata | Description | Grouping | Members

Name: Non Elective Inpatient Encounter
Type: Grouping
Code System: SNOMEDCT

OID: 2.16.840.1.113883.3.7587.3.1018
Definition Version: 20171222
Steward: [Contact](#) American Academy of Physical Medicine and Rehabilitation

This update was generated by VSAC to align with code changes published by the code system of one or more member value sets.

Value Set Members

Expanded Code List

View | Toggle | Clear | Page 1 of 1 | 20 | View 1 - 2 of 2

Code	Descriptor	Code System	Version	Code System OID
183452005	Emergency hospital admission (procedure)	SNOMEDCT	2018-09	2.16.840.1.113883.6.96
32485007	Hospital admission (procedure)	SNOMEDCT	2018-09	2.16.840.1.113883.6.96

View | Page 1 of 1 | 20 | View 1 - 2 of 2

Initial Population- STK-2 (CMS104v7)

Patients age 18 and older discharged from inpatient care (non-elective admissions) with a principal diagnosis of Ischemic or Hemorrhagic Stroke and a length of stay less than or equal to 120 days that ends during the measurement period

Initial Population:

TJC Encounter with Principal Diagnosis and Age

TJC.Encounter with Principal Diagnosis and Age:

- "All Stroke Encounter" AllStrokeEncounter with ["Patient Characteristic Birthdate"] BirthDate such that Global."CalendarAgeInYearsAt"(BirthDate.birthDatetime, start of AllStrokeEncounter.relevantPeriod)>= 18

TJC.All Stroke Encounter:

- "Non Elective Inpatient Encounter" NonElectiveEncounter where NonElectiveEncounter.principalDiagnosis in "Hemorrhagic Stroke" or NonElectiveEncounter.principalDiagnosis in "Ischemic Stroke"

TJC.Non Elective Inpatient Encounter:

- ["Encounter, Performed": "Non-Elective Inpatient Encounter"] NonElectiveEncounter where Global."LengthInDays"(NonElectiveEncounter.relevantPeriod)<= 120 and NonElectiveEncounter.relevantPeriod ends during "Measurement Period"

Initial Population

Patients age 18 and older discharged from inpatient care (non-elective admissions) with a principal diagnosis of Ischemic or Hemorrhagic Stroke and a length of stay less than or equal to 120 days that ends during the measurement period

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TJC Encounter with Principal Diagnosis and Age

TJC.Non Elective Inpatient Encounter:

- *["Encounter, Performed": "Non-Elective Inpatient Encounter"]* NonElectiveEncounter where Global."LengthInDays"(NonElectiveEncounter.*relevantPeriod*)<= *120* and NonElectiveEncounter.relevantPeriod ends during "Measurement Period"

Initial Population

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TJC.All Stroke Encounter:

- *"Non Elective Inpatient Encounter"* NonElectiveEncounter where NonElectiveEncounter.principalDiagnosis in "Hemorrhagic Stroke" or NonElectiveEncounter.principalDiagnosis in "Ischemic Stroke"

TJC.Non Elective Inpatient Encounter:

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TJC.All Stroke Encounter:

- "Non Elective Inpatient Encounter" *NonElectiveEncounter* where *NonElectiveEncounter.principalDiagnosis* in "Hemorrhagic Stroke" or *NonElectiveEncounter.principalDiagnosis* in "Ischemic Stroke"

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*NonElectiveEncounter.principalDiagnosis in "Hemorrhagic Stroke" or
NonElectiveEncounter.principalDiagnosis in "Ischemic Stroke"*

TJC.Non Elective Inpatient Encounter:

- *["Encounter, Performed": "Non-Elective Inpatient Encounter"] NonElectiveEncounter where Global."LengthInDays"(NonElectiveEncounter.relevantPeriod)<= 120 and NonElectiveEncounter.relevantPeriod ends during "Measurement Period"*

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Patients age 18 and older discharged from inpatient care (non-elective admissions) with a principal diagnosis of Ischemic or Hemorrhagic Stroke and a length of stay less than or equal to 120 days that ends during the measurement period

Initial Population:

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TJC.Encounter with Principal Diagnosis and Age:

- *"All Stroke Encounter"* AllStrokeEncounter with ["Patient Characteristic Birthdate"] BirthDate such that `Global."CalendarAgeInYearsAt"(BirthDate.birthDatetime, start of AllStrokeEncounter.relevantPeriod) >= 18`

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TJC.All Stroke Encounter:

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TJC.Non Elective Inpatient Encounter:

- ["Encounter, Performed": "Non-Elective Inpatient Encounter"] NonElectiveEncounter where Global."*LengthInDays*"(NonElectiveEncounter.relevantPeriod)<= 120 and NonElectiveEncounter.relevantPeriod ends during "Measurement Period"

Denominator

Patients with a principal diagnosis of Ischemic Stroke

Denominator:

TJC."Ischemic Stroke Encounter"

TJC.Ischemic Stroke Encounter:

- *"Encounter with Principal Diagnosis and Age"* EncounterWithAge
where EncounterWithAge.principalDiagnosis in "Ischemic Stroke"

Denominator

Patients with a principal diagnosis of Ischemic Stroke

Denominator:

TJC."Ischemic Stroke Encounter"

TJC.Ischemic Stroke Encounter:

- "Encounter with Principal Diagnosis and Age" EncounterWithAge where EncounterWithAge.principalDiagnosis in "Ischemic Stroke"

TJC.Encounter with Principal Diagnosis and Age:

- "All Stroke Encounter" AllStrokeEncounter with ["Patient Characteristic Birthdate"] BirthDate such that Global."CalendarAgeInYearsAt"(BirthDate.birthDatetime, start of AllStrokeEncounter.relevantPeriod)>= 18

TJC.All Stroke Encounter:

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Denominator

Patients with a principal diagnosis of Ischemic Stroke

Denominator:

TJC."Ischemic Stroke Encounter"

TJC.Ischemic Stroke Encounter:

- "Encounter with Principal Diagnosis and Age" EncounterWithAge where *EncounterWithAge.principalDiagnosis in "Ischemic Stroke"*

Denominator Exclusions

Patients admitted for elective carotid intervention (Implicitly modeled by only including non-elective hospitalizations)
Patients discharged to another hospital
Patients who left against medical advice
Patients who expired
Patients discharged to home for hospice care
Patients discharged to a health care facility for hospice care
Patients with comfort measures documented

Denominator Exclusions: TJC."Ischemic Stroke Encounters with Discharge Status"
union TJC."Comfort Measures during Hospitalization"

TJC.Ischemic Stroke Encounters with Discharge Status:

- (("Ischemic Stroke Encounter" IschemicStrokeEncounter
where IschemicStrokeEncounter.dischargeDisposition in "Discharge To Acute Care Facility"
or IschemicStrokeEncounter.dischargeDisposition in "Left Against Medical Advice"
or IschemicStrokeEncounter.dischargeDisposition in "Patient Expired"
or IschemicStrokeEncounter.dischargeDisposition in "Discharged to Home for Hospice Care"
or IschemicStrokeEncounter.dischargeDisposition in "Discharged to Health Care Facility for Hospice Care"))

TJC.Comfort Measures during Hospitalization:

- "Ischemic Stroke Encounter" IschemicStrokeEncounter
with "Intervention Comfort Measures" ComfortMeasure
such that Coalesce(start of ComfortMeasure.relevantPeriod,
ComfortMeasure.authorDatetime)during Global."Hospitalization"(IschemicStrokeEncounter)

TJC.Intervention Comfort Measures:

- ["Intervention, Order": "Comfort Measures"]
union ["Intervention, Performed": "Comfort Measures"]

Denominator Exclusions

Patients admitted for elective carotid intervention (Implicitly modeled by only including non-elective hospitalizations)

Patients discharged to another hospital

Patients who left against medical advice

Patients who expired

Patients discharged to home for hospice care

Patients discharged to a health care facility for hospice care

Patients with comfort measures documented

Denominator Exclusions: TJC."Ischemic Stroke Encounters with Discharge Status"
union TJC."Comfort Measures during Hospitalization"

TJC.Ischemic Stroke Encounters with Discharge Status:

- (("Ischemic Stroke Encounter" IschemicStrokeEncounter
where IschemicStrokeEncounter.*dischargeDisposition* in "*Discharge To Acute Care Facility*"
or IschemicStrokeEncounter.dischargeDisposition in "Left Against Medical Advice"
or IschemicStrokeEncounter.dischargeDisposition in "Patient Expired"
or IschemicStrokeEncounter.dischargeDisposition in "Discharged to Home for Hospice Care"
or IschemicStrokeEncounter.dischargeDisposition in "Discharged to Health Care Facility for Hospice Care"))

Denominator Exclusions

Patients admitted for elective carotid intervention (Implicitly modeled by only including non-elective hospitalizations)
Patients discharged to another hospital
Patients who left against medical advice
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Patients discharged to home for hospice care
Patients discharged to a health care facility for hospice care
Patients with comfort measures documented

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union TJC."Comfort Measures during Hospitalization"

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or IschemicStrokeEncounter.dischargeDisposition in "Discharged to Home for Hospice Care"
or IschemicStrokeEncounter.dischargeDisposition in "Discharged to Health Care Facility for Hospice Care"))

TJC.Comfort Measures during Hospitalization:

- "Ischemic Stroke Encounter" IschemicStrokeEncounter
with "Intervention Comfort Measures" ComfortMeasure
such that *Coalesce*(start of ComfortMeasure.relevantPeriod,
ComfortMeasure.authorDatetime)during Global."Hospitalization"(IschemicStrokeEncounter)

TJC.Intervention Comfort Measures:

- ["Intervention, Order": "Comfort Measures"]
union ["Intervention, Performed": "Comfort Measures"]

Denominator Exclusions

Patients admitted for elective carotid intervention (Implicitly modeled by only including non-elective hospitalizations)

Patients discharged to another hospital

Patients who left against medical advice

Patients who expired

Patients discharged to home for hospice care

Patients discharged to a health care facility for hospice care

Patients with comfort measures documented

Denominator Exclusions: TJC."Ischemic Stroke Encounters with Discharge Status"
union TJC."Comfort Measures during Hospitalization"

TJC.Ischemic Stroke Encounters with Discharge Status:

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or IschemicStrokeEncounter.dischargeDisposition in "Discharged to Home for Hospice Care"
or IschemicStrokeEncounter.dischargeDisposition in "Discharged to Health Care Facility for Hospice Care"))

TJC.Comfort Measures during Hospitalization:

- "Ischemic Stroke Encounter" IschemicStrokeEncounter
with "Intervention Comfort Measures" ComfortMeasure
such that *Coalesce*(start of ComfortMeasure.relevantPeriod,
ComfortMeasure.authorDatetime)during Global."Hospitalization"(IschemicStrokeEncounter)

TJC.Intervention Comfort Measures:

- [*Intervention, Order*": "Comfort Measures"]
union [*Intervention, Performed*": "Comfort Measures"]

Denominator Exclusions

Patients admitted for elective carotid intervention (Implicitly modeled by only including non-elective hospitalizations)
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or IschemicStrokeEncounter.dischargeDisposition in "Discharged to Health Care Facility for Hospice Care"))

TJC.Comfort Measures during Hospitalization:

- "Ischemic Stroke Encounter" IschemicStrokeEncounter
with "Intervention Comfort Measures" ComfortMeasure
such that Coalesce(start of ComfortMeasure.relevantPeriod,
ComfortMeasure.*authorDatetime*)during Global."Hospitalization"(IschemicStrokeEncounter)

TJC.Intervention Comfort Measures:

- [*"Intervention, Order"*: "Comfort Measures"]
union [*"Intervention, Performed"*: "Comfort Measures"]

Denominator Exclusions

Patients admitted for elective carotid intervention (Implicitly modeled by only including non-elective hospitalizations)
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where IschemicStrokeEncounter.dischargeDisposition in "Discharge To Acute Care Facility"
or IschemicStrokeEncounter.dischargeDisposition in "Left Against Medical Advice"
or IschemicStrokeEncounter.dischargeDisposition in "Patient Expired"
or IschemicStrokeEncounter.dischargeDisposition in "Discharged to Home for Hospice Care"
or IschemicStrokeEncounter.dischargeDisposition in "Discharged to Health Care Facility for Hospice Care"))

TJC.Comfort Measures during Hospitalization:

- "Ischemic Stroke Encounter" IschemicStrokeEncounter
with "Intervention Comfort Measures" ComfortMeasure
such that Coalesce(start of ComfortMeasure.*relevantPeriod*,
ComfortMeasure.authorDatetime) during Global."Hospitalization"(IschemicStrokeEncounter)

TJC.Intervention Comfort Measures:

- ["Intervention, Order": "Comfort Measures"]
union ["*Intervention, Performed*": "Comfort Measures"]

Denominator Exclusions

Patients admitted for elective carotid intervention (Implicitly modeled by only including non-elective hospitalizations)
Patients discharged to another hospital
Patients who left against medical advice
Patients who expired
Patients discharged to home for hospice care
Patients discharged to a health care facility for hospice care
Patients with comfort measures documented

Denominator Exclusions: TJC."Ischemic Stroke Encounters with Discharge Status"
union TJC."Comfort Measures during Hospitalization"

TJC.Ischemic Stroke Encounters with Discharge Status:

- (("Ischemic Stroke Encounter" IschemicStrokeEncounter
where IschemicStrokeEncounter.dischargeDisposition in "Discharge To Acute Care Facility"
or IschemicStrokeEncounter.dischargeDisposition in "Left Against Medical Advice"
or IschemicStrokeEncounter.dischargeDisposition in "Patient Expired"
or IschemicStrokeEncounter.dischargeDisposition in "Discharged to Home for Hospice Care"
or IschemicStrokeEncounter.dischargeDisposition in "Discharged to Health Care Facility for Hospice Care"))

TJC.Comfort Measures during Hospitalization:

- "Ischemic Stroke Encounter" IschemicStrokeEncounter
with "Intervention Comfort Measures" ComfortMeasure
such that *Coalesce*(start of ComfortMeasure.*relevantPeriod*,
ComfortMeasure.*authorDatetime*)during Global."Hospitalization"(IschemicStrokeEncounter)

TJC.Intervention Comfort Measures:

- ["Intervention, Order": "Comfort Measures"]
union ["Intervention, Performed": "Comfort Measures"]

Patients prescribed or continuing to take antithrombotic therapy at hospital discharge

Numerator: TJC."Ischemic Stroke Encounter" IschemicStrokeEncounter
with "Antithrombotic Therapy at Discharge" DischargeAntithrombotic
such that DischargeAntithrombotic.authorDatetime during
IschemicStrokeEncounter.relevantPeriod

Numerator

- TJC."Ischemic Stroke Encounter" IschemicStrokeEncounter
with "Antithrombotic Therapy at Discharge" DischargeAntithrombotic
such that *DischargeAntithrombotic.authorDatetime during
IschemicStrokeEncounter.relevantPeriod*

Antithrombotic Therapy at Discharge:

- *["Medication, Discharge": "Antithrombotic Therapy"]*

Denominator Exceptions

Patients with a documented reason for not prescribing antithrombotic therapy at discharge

Denominator Exceptions: TJC."Ischemic Stroke Encounter" IschemicStrokeEncounter with "Antithrombotic Not Given at Discharge" NoDischargeAntithrombotic such that NoDischargeAntithrombotic.authorDatetime during IschemicStrokeEncounter.relevantPeriod

Antithrombotic Not Given at Discharge:

- ["Medication, Not Discharged": "Antithrombotic Therapy"] NoAntithromboticDischarge where NoAntithromboticDischarge.*negationRationale* in "Medical Reason" or NoAntithromboticDischarge.negationRationale in "Patient Refusal"

Pioneers in Quality™ Expert to Expert Series: STK-2, -3, & -6

Mia Nievera, MSN

Karen Kolbusz, MBA, BSN

STK-3 Anticoagulation Therapy for Atrial Fibrillation (CMS71v8)

December 11, 2018

Introduction

Anticoagulation Therapy for Atrial Fibrillation/Flutter

- Atrial fibrillation / flutter (AF/AFF) increases an individual's risk for stroke five-fold. Nearly 20% of all strokes are attributed to this arrhythmia (CDC, 2017).
- Multiple clinical trials have demonstrated that relative risk of thromboembolic stroke was reduced by 68% for atrial fibrillation patients treated with warfarin. Recent studies indicate that newer direct oral anticoagulant medications may be administered to select patients for secondary prevention of cardioembolic stroke. (Kernan WN, et. al., 2014)
- For most patients with acute ischemic stroke in the setting of atrial fibrillation, it is reasonable to initiate oral anticoagulation within 4 to 14 days after the onset of neurological symptoms (Class IIa; Level of Evidence B-NR) (Powers WJ, et. al., 2018).

Initial Population- STK-3 (CMS71v8)

Patients age 18 and older discharged from inpatient care (non-elective admissions) with a principal diagnosis of Ischemic or Hemorrhagic Stroke and a length of stay less than or equal to 120 days that ends during the measurement period

Initial Population:

TJC.Encounter with Principal Diagnosis and Age

TJC.Encounter with Principal Diagnosis and Age:

- "All Stroke Encounter" AllStrokeEncounter with ["Patient Characteristic Birthdate"] BirthDate such that `Global."CalendarAgeInYearsAt"(BirthDate.birthDatetime, start of AllStrokeEncounter.relevantPeriod) >= 18`

TJC.All Stroke Encounter:

- "Non Elective Inpatient Encounter" NonElectiveEncounter where `NonElectiveEncounter.principalDiagnosis` in "Hemorrhagic Stroke" or `NonElectiveEncounter.principalDiagnosis` in "Ischemic Stroke"

TJC.Non Elective Inpatient Encounter:

- ["Encounter, Performed": "Non-Elective Inpatient Encounter"] NonElectiveEncounter where `Global."LengthInDays"(NonElectiveEncounter.relevantPeriod) <= 120` and `NonElectiveEncounter.relevantPeriod` ends during "Measurement Period"

Patients with a principal diagnosis of Ischemic Stroke, and a history of Atrial Ablation, or current or history of Atrial Fibrillation/Flutter

Denominator:

"Encounter with Atrial Ablation Procedure"
union "History of Atrial Fibrillation or Flutter"
union "Current Diagnosis Atrial Fibrillation or Flutter"

Encounter with Atrial Ablation Procedure:

- TJC."Ischemic Stroke Encounter" IschemicStrokeEncounter with ["Procedure, Performed": "Atrial Ablation"] AtrialAblation such that *AtrialAblation.relevantPeriod starts before start of IschemicStrokeEncounter.relevantPeriod*

Patients with a principal diagnosis of Ischemic Stroke, and a history of Atrial Ablation, or current or history of Atrial Fibrillation/Flutter

Denominator:

"Encounter with Atrial Ablation Procedure"
union "History of Atrial Fibrillation or Flutter"
union "Current Diagnosis Atrial Fibrillation or Flutter"

Encounter with Atrial Ablation Procedure:

- TJC."Ischemic Stroke Encounter" IschemicStrokeEncounter with ["Procedure, Performed": "Atrial Ablation"] AtrialAblation such that AtrialAblation.relevantPeriod starts before start of IschemicStrokeEncounter.relevantPeriod

History of Atrial Fibrillation or Flutter:

- TJC."Ischemic Stroke Encounter" IschemicStrokeEncounter with ["**Diagnosis**": "Atrial Fibrillation/Flutter"] AtrialFibrillationFlutter such that **AtrialFibrillationFlutter.prevalencePeriod** starts on or before end of IschemicStrokeEncounter.relevantPeriod

Patients with a principal diagnosis of Ischemic Stroke, and a history of Atrial Ablation, or current or history of Atrial Fibrillation/Flutter

Denominator:

"Encounter with Atrial Ablation Procedure"
union "History of Atrial Fibrillation or Flutter"
union "Current Diagnosis Atrial Fibrillation or Flutter"

Encounter with Atrial Ablation Procedure:

- TJC."Ischemic Stroke Encounter" IschemicStrokeEncounter with ["Procedure, Performed": "Atrial Ablation"] AtrialAblation such that AtrialAblation.relevantPeriod starts before start of IschemicStrokeEncounter.relevantPeriod

History of Atrial Fibrillation or Flutter:

- TJC."Ischemic Stroke Encounter" IschemicStrokeEncounter with ["Diagnosis": "Atrial Fibrillation/Flutter"] AtrialFibrillationFlutter such that AtrialFibrillationFlutter.prevalencePeriod starts on or before end of IschemicStrokeEncounter.relevantPeriod

Current Diagnosis Atrial Fibrillation or Flutter

- TJC."Ischemic Stroke Encounter" IschemicStrokeEncounter where exists (IschemicStrokeEncounter.*diagnoses* Diagnosis where Diagnosis in "Atrial Fibrillation/Flutter")

Denominator Exclusions

Patients admitted for elective carotid intervention (Implicitly modeled by only including non-elective hospitalizations)
Patients discharged to another hospital
Patients who left against medical advice
Patients who expired
Patients discharged to home for hospice care
Patients discharged to a health care facility for hospice care
Patients with comfort measures documented

Denominator Exclusions: ("Denominator" Encounter where
Encounter.dischargeDisposition in "Discharge To Acute Care Facility"
or Encounter.dischargeDisposition in "Left Against Medical Advice"
or Encounter.dischargeDisposition in "Patient Expired"
or Encounter.dischargeDisposition in "Discharged to Home for Hospice Care"
or Encounter.dischargeDisposition in "Discharged to Health Care Facility for Hospice Care")
union "Comfort Measures during Hospitalization"

Denominator:

- ("Denominator" Encounter where Encounter.dischargeDisposition in "Discharge To Acute Care Facility"
or Encounter.dischargeDisposition in "Left Against Medical Advice"
or Encounter.dischargeDisposition in "Patient Expired"
or Encounter.dischargeDisposition in "Discharged to Home for Hospice Care"
or Encounter.dischargeDisposition in "Discharged to Health Care Facility for Hospice Care")

TJC.Intervention Comfort Measures:

- "Denominator" Encounter with TJC."Intervention Comfort Measures" ComfortMeasure
such that Coalesce(start of ComfortMeasure.relevantPeriod,
ComfortMeasure.authorDatetime)during Global."Hospitalization"(Encounter)

TJC.Intervention Comfort Measures:

- ["Intervention, Order": "Comfort Measures"]
union ["Intervention, Performed": "Comfort Measures"]

Patients prescribed or continuing to take anticoagulation therapy at hospital discharge

Numerator: "Denominator" Encounter with "Anticoagulant Therapy at Discharge" DischargeAnticoagulant such that DischargeAnticoagulant.authorDatetime during Encounter.relevantPeriod

Denominator:

- "Encounter with Atrial Ablation Procedure"
union "History of Atrial Fibrillation or Flutter"
union "Current Diagnosis Atrial Fibrillation or Flutter"

Anticoagulant Therapy at Discharge:

- ["Medication, Discharge": "Anticoagulant Therapy"]

Denominator Exceptions

Patients with a documented reason for not prescribing anticoagulant therapy at discharge

Denominator Exceptions: "Denominator" Encounter
with "Reason for Not Giving Anticoagulant at Discharge"
NoDischargeAnticoagulant
such that NoDischargeAnticoagulant.authorDatetime during
Encounter.relevantPeriod

Reason for Not Giving Anticoagulant at Discharge:

- ["Medication, Not Discharged": "Anticoagulant Therapy"] NoAnticoagulant
where NoAnticoagulant.negationRationale in "Medical Reason"
or NoAnticoagulant.negationRationale in "Patient Refusal"

Mia Nievera, MSN

Karen Kolbusz, MBA, BSN

STK-6 Discharged on Statin Medication (CMS105v7)

December 11, 2018

Introduction

Discharged on Statin Medication

- There is an extensive and consistent body of evidence supporting the use of statins for secondary prevention in patients with clinically evident atherosclerotic cardiovascular disease (ASCVD), which includes individuals with ischemic stroke due to large artery atherosclerosis, individuals with ischemic stroke due to intrinsic small vessel disease, and individuals with ischemic stroke not directly due to atherosclerosis but with clinically evident atherosclerotic disease in an uninvolved cerebral or noncerebral bed.
- High-intensity statin therapy should be initiated or continued as first-line therapy in women and men ≤ 75 years of age who have clinical ASCVD, unless contraindicated (Class I; Level of Evidence A) (Powers WJ, et. al., 2018).
- Moderate-intensity statin therapy is a second option for patients unable to tolerate high-intensity statin therapy.

Initial Population- STK-6 (CMS105v7)

Patients age 18 and older discharged from inpatient care (non-elective admissions) with a principal diagnosis of Ischemic or Hemorrhagic Stroke and a length of stay less than or equal to 120 days that ends during the measurement period

Initial Population:

TJC.Encounter with Principal Diagnosis and Age

TJC.Encounter with Principal Diagnosis and Age:

- "All Stroke Encounter" AllStrokeEncounter with ["Patient Characteristic Birthdate"] BirthDate such that `Global."CalendarAgeInYearsAt"(BirthDate.birthDatetime, start of AllStrokeEncounter.relevantPeriod) >= 18`

TJC.All Stroke Encounter:

- "Non Elective Inpatient Encounter" NonElectiveEncounter where `NonElectiveEncounter.principalDiagnosis` in "Hemorrhagic Stroke" or `NonElectiveEncounter.principalDiagnosis` in "Ischemic Stroke"

TJC.Non Elective Inpatient Encounter:

- ["Encounter, Performed": "Non-Elective Inpatient Encounter"] NonElectiveEncounter where `Global."LengthInDays"(NonElectiveEncounter.relevantPeriod) <= 120` and `NonElectiveEncounter.relevantPeriod` ends during "Measurement Period"

Patients with a principal diagnosis of Ischemic stroke

Denominator:

TJC."Ischemic Stroke Encounter"

TJC.Ischemic Stroke Encounter:

- "Encounter with Principal Diagnosis and Age" EncounterWithAge where EncounterWithAge.principalDiagnosis in "Ischemic Stroke"

TJC.Encounter with Principal Diagnosis and Age:

- "All Stroke Encounter" AllStrokeEncounter with ["Patient Characteristic Birthdate"] BirthDate such that Global."CalendarAgeInYearsAt"(BirthDate.birthDatetime, start of AllStrokeEncounter.relevantPeriod)>= 18

TJC.All Stroke Encounter:

- "Non Elective Inpatient Encounter" NonElectiveEncounter where NonElectiveEncounter.principalDiagnosis in "Hemorrhagic Stroke" or NonElectiveEncounter.principalDiagnosis in "Ischemic Stroke"

TJC.Non Elective Inpatient Encounter:

- ["Encounter, Performed": "Non-Elective Inpatient Encounter"] NonElectiveEncounter where Global."LengthInDays"(NonElectiveEncounter.relevantPeriod)<= 120 and NonElectiveEncounter.relevantPeriod ends during "Measurement Period"

Denominator Exclusions

Patients admitted for elective carotid intervention (Implicitly modeled by only including non-elective hospitalizations)

Patients discharged to another hospital

Patients who left against medical advice

Patients who expired

Patients discharged to home for hospice care

Patients discharged to a health care facility for hospice care

Patients with comfort measures documented

Denominator Exclusions: TJC."Ischemic Stroke Encounters with Discharge Status"
union TJC."Comfort Measures during Hospitalization"

TJC.Ischemic Stroke Encounters with Discharge Status:

- (("Ischemic Stroke Encounter" IschemicStrokeEncounter
where IschemicStrokeEncounter.dischargeDisposition in "Discharge To Acute Care Facility"
or IschemicStrokeEncounter.dischargeDisposition in "Left Against Medical Advice"
or IschemicStrokeEncounter.dischargeDisposition in "Patient Expired"
or IschemicStrokeEncounter.dischargeDisposition in "Discharged to Home for Hospice Care"
or IschemicStrokeEncounter.dischargeDisposition in "Discharged to Health Care Facility for Hospice Care"))

TJC.Comfort Measures during Hospitalization:

- "Ischemic Stroke Encounter" IschemicStrokeEncounter
with "Intervention Comfort Measures" ComfortMeasure
such that Coalesce(start of ComfortMeasure.relevantPeriod,
ComfortMeasure.authorDatetime)during Global."Hospitalization"(IschemicStrokeEncounter)

TJC.Intervention Comfort Measures:

- ["Intervention, Order": "Comfort Measures"]
union ["Intervention, Performed": "Comfort Measures"]

Numerator

Patients prescribed or continuing to take statin medication at hospital discharge

Numerator: TJC."Ischemic Stroke Encounter" IschemicStrokeEncounter
with "Statin at Discharge" DischargeStatin
such that DischargeStatin.authorDatetime during IschemicStrokeEncounter.relevantPeriod

Statin at Discharge:

- ["Medication, Discharge": "Statin Grouper"]

Denominator Exceptions

Patients with a reason for not prescribing statin medication at discharge

Patients with a maximum LDL-c result of less than 70 mg/dL \leq 30 days prior to arrival or any time during the hospital stay.

Denominator Exceptions: (TJC."Ischemic Stroke Encounter" IschemicStrokeEncounter with "Statin Not Given at Discharge" NoDischargeStatin such that NoDischargeStatin.authorDatetime during IschemicStrokeEncounter.relevantPeriod) union (TJC."Ischemic Stroke Encounter" IschemicStrokeEncounter with "Statin Allergy" StatinAllergy such that StatinAllergy.prevalencePeriod starts on or before end of IschemicStrokeEncounter.relevantPeriod) union "Encounter with Max LDL less than 70 mg per dL"

Statin Not Given at Discharge:

- ["Medication, Not Discharged": "Statin Grouper"] NoStatinDischarge where NoStatinDischarge.negationRationale in "Medical Reason" or NoStatinDischarge.negationRationale in "Patient Refusal"

Statin Allergy:

- ["Allergy/Intolerance": "Statin Allergen"]

Encounter with Max LDL less than 70 mg per dL

- TJC."Ischemic Stroke Encounter" IschemicStrokeEncounter where Max(["Laboratory Test, Performed": "LDL-c"] Ldl where Ldl.resultDatetime during Interval[Global."ToDate"(start of IschemicStrokeEncounter.relevantPeriod - 30 days), end of IschemicStrokeEncounter.relevantPeriod] return Ldl.result as Quantity)< 70 'mg/dL'

Denominator Exceptions

Patients with a reason for not prescribing statin medication at discharge

Patients with a maximum LDL-c result of less than 70 mg/dL <= 30 days prior to arrival or any time during the hospital stay.

Denominator Exceptions: (TJC."Ischemic Stroke Encounter" IschemicStrokeEncounter with "Statin Not Given at Discharge" NoDischargeStatin such that NoDischargeStatin.authorDatetime during IschemicStrokeEncounter.relevantPeriod) union (TJC."Ischemic Stroke Encounter" IschemicStrokeEncounter with "Statin Allergy" StatinAllergy such that StatinAllergy.prevalencePeriod starts on or before end of IschemicStrokeEncounter.relevantPeriod) union "Encounter with Max LDL less than 70 mg per dL"

Statin Not Given at Discharge:

- *["Medication, Not Discharged": "Statin Grouper"] NoStatinDischarge where NoStatinDischarge.negationRationale in "Medical Reason" or NoStatinDischarge.negationRationale in "Patient Refusal"*

Statin Allergy:

- *["Allergy/Intolerance": "Statin Allergen"]*

Encounter with Max LDL less than 70 mg per dL

- *TJC."Ischemic Stroke Encounter" IschemicStrokeEncounter where Max(["Laboratory Test, Performed": "LDL-c"] Ldl where Ldl.resultDatetime during Interval[Global."ToDate"(start of IschemicStrokeEncounter.relevantPeriod - 30 days), end of IschemicStrokeEncounter.relevantPeriod] return Ldl.result as Quantity)< 70 'mg/dL'*

Denominator Exceptions

Patients with a reason for not prescribing statin medication at discharge

Patients with a maximum LDL-c result of less than 70 mg/dL <= 30 days prior to arrival or any time during the hospital stay.

Denominator Exceptions: (TJC."Ischemic Stroke Encounter" IschemicStrokeEncounter with "Statin Not Given at Discharge" NoDischargeStatin such that NoDischargeStatin.authorDatetime during IschemicStrokeEncounter.relevantPeriod) union (TJC."Ischemic Stroke Encounter" IschemicStrokeEncounter with "Statin Allergy" StatinAllergy such that StatinAllergy.prevalencePeriod starts on or before end of IschemicStrokeEncounter.relevantPeriod) union "Encounter with Max LDL less than 70 mg per dL"

Statin Not Given at Discharge:

- *["Medication, Not Discharged": "Statin Grouper"] NoStatinDischarge where NoStatinDischarge.negationRationale in "Medical Reason" or NoStatinDischarge.negationRationale in "Patient Refusal"*

Statin Allergy:

- *["Allergy/Intolerance": "Statin Allergen"]*

Encounter with Max LDL less than 70 mg per dL

- TJC."Ischemic Stroke Encounter" IschemicStrokeEncounter where *Max(["Laboratory Test, Performed": "LDL-c")* Ldl where Ldl.resultDatetime during Interval[Global."ToDate"(start of IschemicStrokeEncounter.relevantPeriod - 30 days), end of IschemicStrokeEncounter.relevantPeriod] return Ldl.result as Quantity)< 70 'mg/dL'

Denominator Exceptions

Patients with a reason for not prescribing statin medication at discharge

Patients with a maximum LDL-c result of less than 70 mg/dL <= 30 days prior to arrival or any time during the hospital stay.

Denominator Exceptions: (TJC."Ischemic Stroke Encounter" IschemicStrokeEncounter with "Statin Not Given at Discharge" NoDischargeStatin such that NoDischargeStatin.authorDatetime during IschemicStrokeEncounter.relevantPeriod) union (TJC."Ischemic Stroke Encounter" IschemicStrokeEncounter with "Statin Allergy" StatinAllergy such that StatinAllergy.prevalencePeriod starts on or before end of IschemicStrokeEncounter.relevantPeriod) union "Encounter with Max LDL less than 70 mg per dL"

Statin Not Given at Discharge:

- *["Medication, Not Discharged": "Statin Grouper"] NoStatinDischarge where NoStatinDischarge.negationRationale in "Medical Reason" or NoStatinDischarge.negationRationale in "Patient Refusal"*

Statin Allergy:

- *["Allergy/Intolerance": "Statin Allergen"]*

Encounter with Max LDL less than 70 mg per dL

- TJC."Ischemic Stroke Encounter" IschemicStrokeEncounter where Max(["Laboratory Test, Performed": "LDL-c"] Ldl where Ldl.resultDatetime during Interval[Global."ToDate"(start of IschemicStrokeEncounter.relevantPeriod - 30 days), end of IschemicStrokeEncounter.relevantPeriod] *return Ldl.result as Quantity*)< 70 'mg/dL'

Denominator Exceptions

Patients with a reason for not prescribing statin medication at discharge

Patients with a maximum LDL-c result of less than 70 mg/dL ≤ 30 days prior to arrival or any time during the hospital stay.

Denominator Exceptions: (TJC."Ischemic Stroke Encounter" IschemicStrokeEncounter with "Statin Not Given at Discharge" NoDischargeStatin such that NoDischargeStatin.authorDatetime during IschemicStrokeEncounter.relevantPeriod) union (TJC."Ischemic Stroke Encounter" IschemicStrokeEncounter with "Statin Allergy" StatinAllergy such that StatinAllergy.prevalencePeriod starts on or before end of IschemicStrokeEncounter.relevantPeriod) union "Encounter with Max LDL less than 70 mg per dL"

Statin Not Given at Discharge:

- *["Medication, Not Discharged": "Statin Grouper"] NoStatinDischarge where NoStatinDischarge.negationRationale in "Medical Reason" or NoStatinDischarge.negationRationale in "Patient Refusal"*

Statin Allergy:

- *["Allergy/Intolerance": "Statin Allergen"]*

Encounter with Max LDL less than 70 mg per dL

- TJC."Ischemic Stroke Encounter" IschemicStrokeEncounter where Max(["Laboratory Test, Performed": "LDL-c"] Ldl where Ldl.resultDatetime during *Interval[Global."ToDate"(start of IschemicStrokeEncounter.relevantPeriod - 30 days), end of IschemicStrokeEncounter.relevantPeriod]* return Ldl.result as Quantity)< 70 'mg/dL'

Denominator Exceptions

Patients with a reason for not prescribing statin medication at discharge

Patients with a maximum LDL-c result of less than 70 mg/dL <= 30 days prior to arrival or any time during the hospital stay.

Denominator Exceptions: (TJC."Ischemic Stroke Encounter" IschemicStrokeEncounter with "Statin Not Given at Discharge" NoDischargeStatin such that NoDischargeStatin.authorDatetime during IschemicStrokeEncounter.relevantPeriod) union (TJC."Ischemic Stroke Encounter" IschemicStrokeEncounter with "Statin Allergy" StatinAllergy such that StatinAllergy.prevalencePeriod starts on or before end of IschemicStrokeEncounter.relevantPeriod) union "Encounter with Max LDL less than 70 mg per dL"

Statin Not Given at Discharge:

- *["Medication, Not Discharged": "Statin Grouper"] NoStatinDischarge where NoStatinDischarge.negationRationale in "Medical Reason" or NoStatinDischarge.negationRationale in "Patient Refusal"*

Statin Allergy:

- *["Allergy/Intolerance": "Statin Allergen"]*

Encounter with Max LDL less than 70 mg per dL

- TJC."Ischemic Stroke Encounter" IschemicStrokeEncounter where Max(["Laboratory Test, Performed": "LDL-c"] Ldl where *Ldl.resultDatetime during* Interval[Global."ToDate"(start of IschemicStrokeEncounter.relevantPeriod - 30 days), end of IschemicStrokeEncounter.relevantPeriod] return Ldl.result as Quantity)< 70 'mg/dL'

Resources

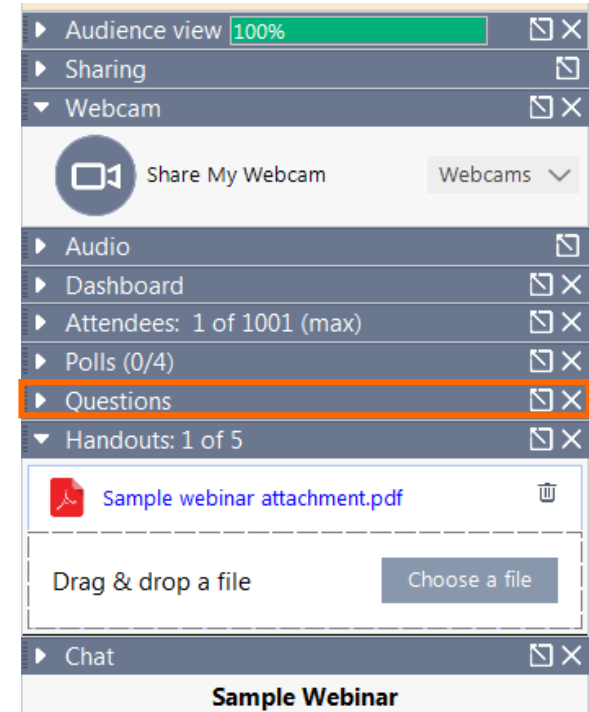
- CQL Specification - CQL Release 1, Standard for Trial Use (STU) 2
 - http://www.hl7.org/implement/standards/product_brief.cfm?product_id=400
 - <http://cql.hl7.org/STU2/index.html>
- CQL-Based HQMF IG – Release 1, STU 2.1
 - http://www.hl7.org/implement/standards/product_brief.cfm?product_id=405
- eCQI Resource Center
 - CQL Space, including the QDM v5.3 and v5.3 Annotated
 - <https://ecqi.healthit.gov/cql>
 - Check the eCQI Resource Center Events page and CQL Educational Resources page for more information
 - <https://ecqi.healthit.gov/ecqi/ecqi-events>
 - <https://ecqi.healthit.gov/cql/cql-educational-resources>
- Value Set Authority Center (VSAC)
 - <https://vsac.nlm.nih.gov/>
- CQL Formatting and Usage Wiki
 - <https://github.com/esacinc/CQL-Formatting-and-Usage-Wiki/wiki>
- CQL GitHub Tools Repository
 - https://github.com/cqframework/clinical_quality_language
- To submit an issue ticket for CQL, please visit the ONC JIRA site
 - <https://oncprojecttracking.healthit.gov/support/projects/CQLIT>
- To submit an issue ticket for CQM, please visit the
 - <https://oncprojecttracking.healthit.gov/support/projects/CQM/issues>

Pioneers in Quality™

Expert to Expert Series: STK -2, -3, & -6

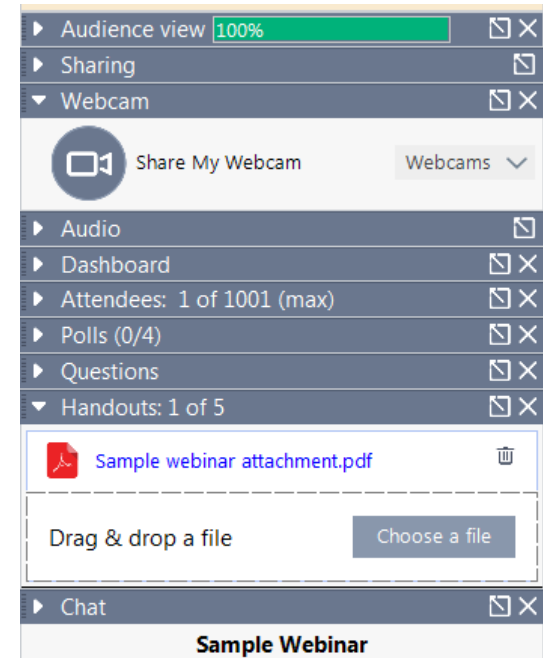


- Please submit questions now. Click the arrow next to “Questions” in the right hand navigation to expand the Questions pane.
- Include your name and organization with your question.



Reminder – Slides are available for download now!

- See the “Handouts” Section
- Click the arrow to open the Handouts list, select the slides for today’s session, and download.



Pioneers in Quality™

Expert to Expert Series: STK -2, -3, & -6



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Friday 11:30 CST, November 30, 2018



Topic Library Item

Pioneers in Quality: Expert to Expert Series

November 30, 2018

The Joint Commission and the Centers for Medicare & Medicaid Services (CMS) are committed to supporting hospitals on their journey towards electronic clinical quality measure (eCQM) adoption and transition to the new Clinical Quality Language (CQL) logic expression language for the 2019 eCQM reporting period.....and we heard you are ready for a "deep dive" into the new Clinical Quality Language (CQL) expression language.

The Joint Commission's Pioneers in Quality: Expert to Expert series supports your progression to eCQM expertise by connecting you with eCQM developers in an "office hours" format. Each one-hour session is dedicated to specific measures and specifically the new CQL expression language. Sessions will begin with a comprehensive review of the measure logic, followed by a discussion of common questions and issues. Participants are encouraged to submit questions in advance to be addressed during the webinar. Webinars will conclude with a live Q & A session.

The Expert to Expert Series will feature the following sessions. Registration is now open for all sessions. Click on the below links to register for each session.

Session	Date	Registration Link	Slides	Recording	Q&A
EE#1: STK-2, -3, & -6	11-Dec-18	https://attendee.gotowebinar.com/register/5421084200868329987	To be posted following session	To be posted following session	To be posted following session
EE#2: STK-5 and AMI-8a	29-Jan-18	https://attendee.gotowebinar.com/register/3913740621068329729	To be posted following session	To be posted following session	To be posted following session
EE#3: ED-1 and -2	12-Feb-19	https://attendee.gotowebinar.com/register/053319436273286145	To be posted following session	To be posted following session	To be posted following session
EE#4: VTE-1 and -2	26-Feb-19	https://attendee.gotowebinar.com/register/129573441984732417	To be posted following session	To be posted following session	To be posted following session
EE#5: CAC-3 and EDHI-1a	5-Mar-19	https://attendee.gotowebinar.com/register/7092534290085603329	To be posted following session	To be posted following session	To be posted following session
EE#6: PC-01 and 05	26-Mar-19	https://attendee.gotowebinar.com/register/1876921718893015041	To be posted following session	To be posted following session	To be posted following session

Visit https://www.jointcommission.org/piq_expert_to_expert_series/ to register for future sessions and access slides, webinar recordings, and Q&A documents when available.

Pioneers in Quality™

Expert to Expert Series: STK -2, -3, & -6



Friday 11:46 CST, November 30, 2018

Pioneers in Quality

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Proven Practices Webinar Series

Pioneers in Quality™ Recognition

- [2018 Pioneers in Quality Expert and Solution Contributors List](#)
- [Pioneers in Quality Proven Practices Collection](#)
- [2017 Pioneers in Quality™ Hospital eCQM Contributor Recognition Lists](#)

2017 Annual Report on Quality and Safety

- [America's Hospitals: Improving Quality and Safety – The Joint Commission's Annual Report 2017](#)

Press Releases



2018 Proven Practices Collection and Webinar Series

Four hospitals and/or health systems [were recognized](#) as 2018 Pioneers in Quality™ Expert Contributors for their efforts to advance the evolution and utilization of electronic clinical quality measures (eCQMs). These organizations presented during the Joint Commission's Pioneers in Quality™ 2018 eCQM Proven Practices webinar series and are featured within the 2018 Proven Practice Collection along with the five Experts Contributors recognized in 2017. You can access the 2018 [Proven Practices Collection here](#).

- **August 23, 11 a.m. CT:** "Electronic health record (EHR) refinement and system EHR transition," presented by Expert Contributors Medstar St. Mary's Hospital and BJC Healthcare. For more information, including the session recording, slides, and Q&A visit the [webinar landing page](#).
- **September 18, 1 p.m. CT:** "An evolutionary approach and a model of collaboration," presented by Expert Contributors Vail Health Hospital and Texas Health Resources. For more information, including the session recording, slides, and Q&A visit the [webinar landing page](#).
- **Proven Practices Webinar Series.** For more information, including links to all 2017 and 2018 session's recordings, slides, and Q&A, see the [Proven Practices landing page](#).

About the Program

Pioneers in Quality (PIQ) is a Joint Commission program to assist hospitals on their journey towards electronic clinical quality measure adoption that includes educational programs (e.g., webinars for CEUs), a resource portal, recognition



Pioneers in Quality: eCQM "Expert to Expert" Series
[Series Information/Session Replays](#)

Promotional Video



Webinar Replays / Related Documentation

- [Pioneers in Quality™ 2019 Joint Commission ORYX Reporting Requirements: Your Questions Answered](#)
- [Pioneers in Quality™ 2018 eCQM Proven Practices: An evolutionary approach and a model of collaboration](#)

Visit https://www.jointcommission.org/topics/pioneers_in_quality.aspx for additional information about Pioneers in Quality and the Proven Practices Program.

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We use your feedback to inform future content and assess the quality of our sessions.

The evaluation closes in 2 weeks.

After the evaluation period closes, a printable certificate will be emailed to all participants that complete the survey.



Thank you for attending this session.

