



HIMSS[®] 16

Conference & Exhibition

FEB 29 – MAR 4, 2016 | LAS VEGAS

TRANSFORMING
HEALTH THROUGH IT



Electronic Clinical Quality Measure (eCQM) Submissions: Ready, Set, Go → and Looking into the Crystal Ball March 2, 2016

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Center for Clinical Standards and Quality
Centers for Medicare & Medicaid Services (CMS)

DISCLAIMER: The views and opinions expressed in this presentation are those of the author and do not necessarily represent official policy or position of HIMSS.

 #HIMSS16

www.himssconference.org

Conflict of Interest

Debbie Krauss, MS, BSN, RN and
Minet Javellana, RN

Have no real or apparent conflicts of interest to report.

Agenda

- Welcome
- **Ready** –Background current eCQM CMS programs
- **Set** - Where to find eCQM submission information
- **Go** – **E**lectronic **C**linical **Q**uality **I**mprovement (eCQI)
Resource Center demonstration
- Crystal Ball – CMS future eCQM considerations
- Questions

Learning Objectives

1. Review CMS Programs' eCQMs
2. View a virtual tour of the CMS eCQI Resource Center
3. Provide an overview & update on CMS Lean activities for eCQMs
4. Present an eCQM standards update and proposed implementation timeline
5. Provide a background & overview on the National Testing Collaborative
6. Recruit potential participants for National Test Collaborative

eCQMs - Not just for the EHR Incentive Program anymore

eCQMs are now part of multiple CMS Programs – and growing, for example:

- ✓ EHR Incentive Program for Eligible Professionals
- ✓ EHR Incentive Program for Eligible Hospitals and Critical Access Hospitals
- ✓ Hospital Inpatient Quality Reporting (HIQR)
- ✓ Physician Quality Reporting System (PQRS)
- ✓ Comprehensive Primary Care (CPC) Initiative

eCQMs in CMS Programs

- Initially part of CMS EHR Incentive Program rulemaking process
- Specific eCQM reporting requirements now in other rules, e.g.,
 - Hospital Inpatient Prospective Payment Systems for Acute Care Hospitals and the Long-Term Care Hospital Prospective Payment System (IPPS)
 - Physician Fee Schedule
- Pre-Rulemaking Process
 - Measures Under Consideration
 - Measure Applications Partnership

Hospital eCQM eReporting in CY 2016

- Hospitals must submit a **minimum of four eCQMs for one quarter (Q3 or Q4) of CY 2016**
- No National Quality Strategy (NQS) Domain distribution is required
- Submission deadline is **February 28, 2017** through CMS Secure Portal
- Visit the HIQR and EHR Incentive Programs websites for individual program requirements for reporting specifics

Eligible Professional eCQM eReporting in CY 2016

- Eligible Professionals must submit a **minimum of nine eCQMs** covering **at least three National Quality Strategy domains**
- Submission deadline is **February 28, 2017**
- Eligible Professionals have multiple ways (e.g., qualified clinical data registry, group, individual) and formats (e.g., QRDA I and QRDA III) to submit eCQMs
- Visit the PQRS and EHR Incentive Programs websites for individual program requirements for reporting specifics

eCQM Submissions Current Status

Common HQR QRDA I Errors

- Non-conformance to QRDA format
- Discharge date is before the admission date
- Discharge date is not within the Program's discharge quarters

Common EP QRDA I Errors

- Incorrect value set
- Incorrect format or template
- Missing values

Common EP QRDA III Errors

- Incorrect GUID
- Numerator greater than denominator
- Invalid templates

Resource for eCQMs

- A one stop shop for all things eCQM
- Spring 2015 CMS launched the *eCQI Resource Center*
- Since then, the Resource Center has grown and will continue to evolve
- Recently hosted over 1300 participants over two live demonstrations

eCQI Resource Center - Live Tour

<https://ecqi.healthit.gov/>

Looking into the CMS Crystal Ball

- Looking to harmonize standards for eQMs and clinical decision support (CDS)
- CDS and electronic clinical quality measurement are closely related, share many common requirements, and both support improving health care quality.
 - CDS guides a clinician to follow a standard plan of care
 - eQMs assess the quality of care provided to patients, and may focus on processes of care, structural components of care, or outcomes
- Shared needs:
 - Define patient cohorts (sub-populations)
 - Standard ways to reference patient data in EHR



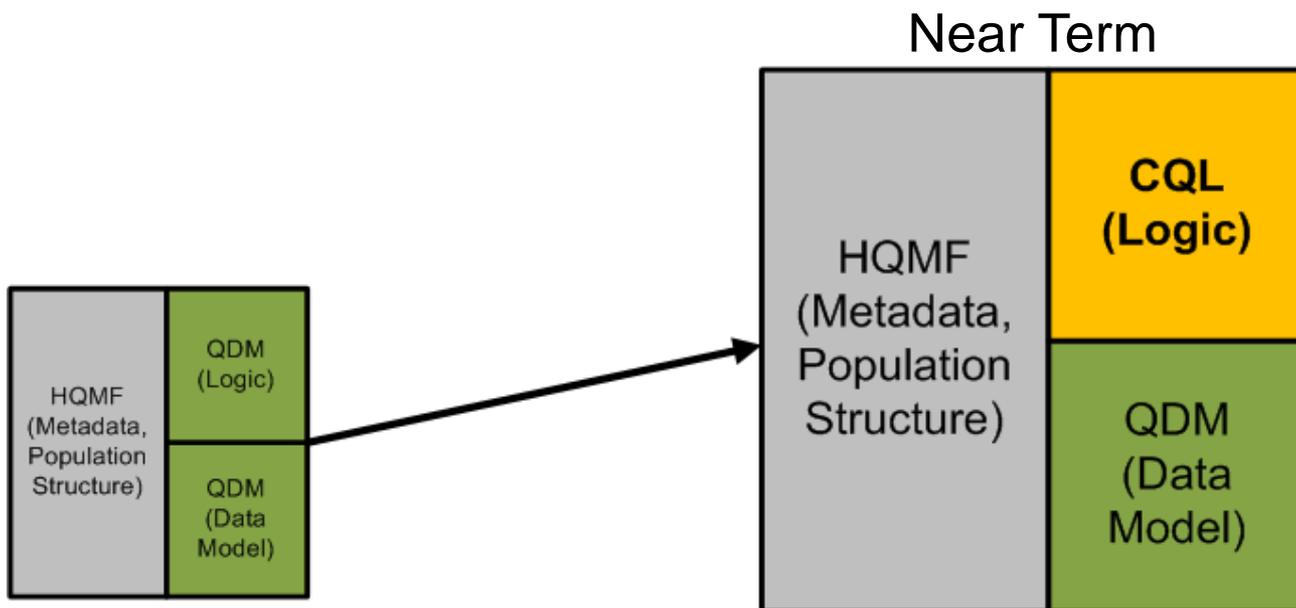
Lean Methodology for eCQM Development

- Overview of Lean for eCQM development
 - Continuous process improvement methodology; goal is to be more effective and efficient by identifying and eliminating waste in processes and operations
 - Started in 2012
 - Business case: 100% defect rate on eCQM for MU2
 - Engaged internal and external stakeholders
- Kaizen (meaning “improvement”) events
 - Held Kaizen events February, 2013 February, 2014 and December, 2014
 - Attendees: CMS, ONC, measure developer contractors, providers, vendors, trade associations
 - Identified waste and inefficiencies through value stream mapping
 - Led to major changes in eCQM development

Lean Methodology for eCQM Development

- Outcomes of Kaizens
 - Integrate tools to facilitate the measure authoring process: Measure Authoring Tool with the Value Set Authority Center
 - Enhanced tools for test driven development: Bonnie
 - Combine implementation guide for data submission to CMS: EP and EH/CAH eCQMs to be program specific
 - Aligned program years for EP and EH/CAH to start Calendar Year
 - One source of information for everything electronic clinical quality improvement: Resource Center
 - Multi-stakeholder engagement for Annual Update: Change Review Process
 - Rigorous testing: National Testing Collaborative
- <https://ecqi.healthit.gov/ecqi/kaizen>

Evolving eCQM Standards



Definitions:

- HQMF** – Healthcare Quality Measures Format
- CQL** – Clinical Quality Language
- QDM** – Quality Data Model

Differences Between the Quality Data Model (QDM) and Clinical Quality Language (CQL)

QDM

- Logic and Data Model in one
- Tightly Coupled Conceptual, Logical and Physical Layers
- Verbose and Data points required to intermingle with logic
- Rigid Expression Language

CQL

- Logical Expression Language
- Separation of Conceptual, Logical, and Physical Layers
- Clear, Concise, and logically expressive language
- Flexible Expression Language

Benefits of CQL

| | QDM Logic | CQL Logic |
|---|-----------|-----------|
| Modularity and Computability | Low | High |
| Data Model Flexibility | None | High |
| Expressive and Robust Logic Expression | Low | High |
| Duplicative work for Implementers, Vendors, and Developers | Yes | Lower |

Proposed Timeline For Updating Standards

Work Effort: 2016 through Fall 2017 | Fall 2017 +

Measures using QDM v4.2 & HQMF 2.1

Measure Development

- 2015
- 2016

Testing CQL – QDM – HQMF 2.1

- Testing and Development
- Measure Developers
 - Implementers & Vendors
 - CQL Training/Education
 - Measure Authoring Tool
 - Bonnie & Cypress
 - Quality Data Model
 - Integration Testing
 - Feedback Loops

Testing eCQM using CQL - – QDM – HQMF 2.1

- Measure Development and Testing in a simulated environment
- Starts 2017

National Testing Collaborative

- Mission:
 - Accelerating **transformational change** through a **multi-disciplinary** collaborative that promotes and fosters the **early engagement** of stakeholders throughout the clinical quality measure development and testing process on a **sustained** basis.
- Public-private partnership eCQM stakeholders committed to improving the quality of eCQMs through robust and efficient testing activities
 - Federal sponsors
 - Measure developers
 - Providers
 - EHR vendors

National Testing Collaborative

Why does CMS need an NTC?

Stakeholders need feasible, valid, reliable and implementable eCQMs

- The next generation of eCQMs require novel data elements yet stakeholders need measures that
 - Reflect existing workflows
 - Can be implemented broadly in CMS programs
- eCQM testing processes are time and labor intensive
- eCQM standards are evolving: need to be current, relevant, and agile

National Testing Collaborative

What are the benefits to providers who participate in the NTC?

- Opportunity for quality improvement of the eCQM through feedback on clinical processes and outcomes for measures in development
 - Pilot and prepare for measure implementation
- Opportunity to provide input on and refine measures
- Opportunity to use testing results for improvement on performance or future measure selection

National Testing Collaborative

What is the 'ask' of providers and vendors?

- Desire and willingness to be on the forefront of eCQM development
- Interest in CMS measurement priorities

| Measure developer access to | Purpose for eCQM testing |
|---|---|
| Providers | Assess workflow feasibility, face validity and usability |
| EHR extract of de-identified patient data | Assess feasibility of data elements; reliability and validity of provider score |
| Full patient 'chart' | Assess validity of data elements through comparison between extract and full patient record |
| EHR vendor staging environment | Assess implementability through automated consumption of eCQM specifications |

National Testing Collaborative

What have we done so far?

- Accomplished
 - Paper Reduction Act (PRA) Exemption
- Work in Progress
 - Started onboarding calls for potential test sites
 - Templates for Business Associate Agreement (BAA) Template and Memorandum of Understanding (MOU)
 - Rolodex – tool for recruiting potential test sites
 - Onboarding potential test sites

Additional HIMSS16 Activities

- CMS Booth #10309: Office Hours – Quality Measurement and Reporting
 - March 2, 2016 – 2:00 – 3:00
 - March 3, 2016 – 1:00 – 2:00
- Interoperability Showcase Booth #11954
 - March 3, 2016 – 10:00: eCQM Submission Errors and Cypress Validation Utility Tool
- ESAC Booth #12028
- MITRE Room Zeno 4607-4608
 - Bonnie Demo
 - March 2, 2016: 3:00 – 3:30
 - Cypress Demo
 - March 2, 2016: 3:30 – 4:00

Questions?

Thank you for your attention!

- **QualityNet Help Desk:** 866-288-8912 (TTY 877-715-6222) or qnetsupport@hcqis.org
- **EHR Incentive Program Information Center:** 888-734-6433 (TTY 888-734-6563)

Resources

- <https://ecqi.healthit.gov>
- <https://ecqi.healthit.gov/ecqm>
- https://www.cms.gov/regulations-and-guidance/legislation/ehrincentiveprograms/ecqm_library.html
- https://cportal.qualitynet.org/QNet/pgm_select.jsp
- <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/QualityMeasures/Downloads/2015-Measures-Under-Consideration-List.pdf>
- http://www.qualityforum.org/Setting_Priorities/Partnership/Measure_Applications_Partnership.aspx
- https://www.cms.gov/Regulations-and-Guidance/Legislation/EHRIncentivePrograms/Downloads/QRDA_2016_CMS_IG.pdf
- <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/PQRS/index.html>
- <https://www.cms.gov/Regulations-and-Guidance/Legislation/EHRIncentivePrograms/index.html>
- <https://www.qualitynet.org/dcs/ContentServer?c=Page&pagename=QnetPublic%2FPage%2FQnetTier2&cid=1228773849716>
- <https://www.gpo.gov/fdsys/pkg/FR-2015-08-17/pdf/2015-19049.pdf>
- <https://www.gpo.gov/fdsys/pkg/FR-2015-11-16/pdf/2015-28005.pdf>
- http://www.hl7.org/implement/standards/product_brief.cfm?product_id=400
- Prospective Payment System (IPPS) <https://www.gpo.gov/fdsys/pkg/FR-2015-08-17/pdf/2015-19049.pdf>
- Physician Fee Schedule - <https://www.gpo.gov/fdsys/pkg/FR-2015-11-16/pdf/2015-28005.pdf>
- <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/PQRS/index.html>
- <https://www.cms.gov/Regulations-and-Guidance/Legislation/EHRIncentivePrograms/index.html>

Back up screen shots of eCQI Resource Center



Spaces



Jessi Sanford

The one-stop shop for the most current resources to support Electronic Clinical Quality Improvement.

Learn about eCQI resources and connect with the community of professionals who are dedicated to clinical quality improvement for better health

Getting Started



A *gentle* introduction to understanding eCQI and this Resource Center

[More information](#)

eCQMs



The who, what, when, where, and why of eCQMs

[More information](#)

Education



A selection of educational materials and resources to broaden your eCQI knowledge

[More information](#)

Latest News

- Wed 27 Jan **Education Space added to the eCQI Resource Center**
An *education-specific* space has been added to the eCQI Resource Center making it easier for users to find topic-specific educational presentations. The goal is to post or link to eCQI-related education materials as they become available. The space also includes a calendar of eCQI-related education events. Check back frequently for updates.
- Tue 26 Jan **NLM released VSAC update version 2.10.4**
NLM released VSAC update version 2.10.4 on January 19, 2016.
VSAC 2.10.4 includes the following updated code system versions:
CDT 2016, CPT 2016, CVX 2016, HCPCS 2016, ICD10CM 2016, ICD10PCS 2016, LOINC 2.54, RxNorm 2015-01

Upcoming Events

- Jan 27 2016 **eCQI Resource Center Demonstration - Event is Full**
January 27, 2016 Webinar Registration is now closed.
Thank you for your interest in participating in the live demonstration of the eCQI Resource Center. Unfortunately, due to an unexpectedly large level of interest in the eCQI Resource Center webinar planned for January 27th, the registrations quickly exceeded the 1500 spots we had available.
- Jan 28 2016 **eCQI Resource Center Demonstration**
CMS and ONC would like to re-introduce you to the eCQI Resource Center, the one-stop shop for the most current



More information

More information

Latest News

Wed 13 Jan **Inpatient Quality Reporting (IQR) Program Chart-Abstracted and eCQM Measure Submissions Requirements for CY 2016/FY 2018**

The Centers for Medicare & Medicaid Services (CMS) has mandated that Eligible Hospitals (EHs) must submit eight chart-abstracted measures to meet the IQR Program requirement for Calendar Year (CY) 2016/Fiscal Year (FY) 2018, including: ED-1, ED-2, PC-01, STK-4, VTE-5, VTE-6, IMM-2, and SEP-1. In addition to the chart-abstracted measure requirements, an EH is required to submit a minimum of any four of the available 28 eCQMs. Please visit the *QualityNet* website to review the... [Read more](#)

Sat 09 Jan **QRDA eCQM Submission Customer Satisfaction Survey**

The Centers for Medicare and Medicaid (CMS) would like to know more about your experience(s) submitting Quality Reporting Document Architecture (QRDA) electronic Clinical Quality Measures (eCQMs) for your hospital's participation in the Hospital Quality Reporting (HQR) program. Your feedback is very important. Help CMS to improve the submission process.

All survey answers are anonymous and will help CMS to evaluate and improve your data submission experience. The survey will take approximately 5-10 minutes to complete. Your response to the survey is requested no later than close... [Read](#)

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Jan 28 2016 **eCQI Resource Center Demonstration**

CMS and ONC would like to re-introduce you to the eCQI Resource Center, the one-stop shop for the most current resources to support electronic clinical quality improvement. We are presenting a demonstration of website core content, along with an overview of the latest website updates, enhancements, and features. The website provides a centralized location for critical clinical quality measure resources, including the electronic clinical

The one-stop shop for the most current resources to support Electronic Clinical Quality Improvement.

Learn about eCQI resources and connect with the community of professionals who are dedicated to clinical quality improvement for better health

| | | |
|--|--|---|
| <h3>Getting Started</h3>  <p>A gentle introduction to understanding eCQI and this Resource Center</p> <p>More information</p> | <h3>eCQMs</h3>  <p>The who, what, when, where, and why of eCQMs</p> <p>More information</p> | <h3>Education</h3>  <p>A selection of educational materials and resources to broaden your eCQI knowledge</p> <p>More information</p> |
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Putting eCQMs to Work

'The who, what, when, where and why'

Who are the key people that are involved in eCQM development or use?

- Providers
- Patients
- Implementers
- Measure stewards
- Measure developers
- Health IT developers
- Quality improvement organizations
- Insurers/Payers

What are the main components used to implement eCQMs?

- [EH Measures & specifications](#)
- [EP Measures & specifications](#)
- [Guidance documentation](#)
- [Tools](#)

When are key dates associated with eCQMs?

- Comment period(s)
- Measure and measure specification publication
- Measurement period

eCQI Resource Center

The one-stop shop for the most current resources to support electronic clinical quality improvement.



Spaces



Login

Interest Areas

eCQM
Electronic Clinical Quality Measures

[Learn more](#)

QDM
The Quality Data Model Standard

[Learn more](#)

eCQM Tools
Authoring, Testing and Implementation Tools

[Learn more](#)

eCQI Standards
Electronic Clinical Quality Improvement Standards

[Learn more](#)

Helpful Links

- [What are eCQMs?](#)
- [eCQI Resource Center FAQs](#)
- [Glossary of Terminology](#)
- [Getting Started with eCQMs](#)
- [Send Feedback to eCQI Resource Center](#)

Related Information

- [CMS Measures Management System \(Blueprint\)](#)
- [EHR Incentive Programs](#)
- [Health IT Enabled Quality Improvement](#)
- [Reporting Guide for Eligible Hospitals](#)
- [Reporting Guide for Eligible Professionals](#)
- [eCQM Library Page](#)

External Links

- [HL7 QRDA Standard](#)
- [JIRA eCQM Issue Reporting](#)
- [Measure Authoring Tool \(MAT\)](#)
- [National Quality Strategy](#)
- [USHIK Meaningful Use Portal](#)
- [Value Set Authority Center \(VSAC\)](#)

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The one-stop shop for the most current resources to support electronic clinical quality improvement.



[About](#) [FAQ](#) [Glossary of eCQI Terms](#) [eCQI Resource Center Contact Information](#)

- Public Spaces
- CDS/eCQM Harmonization
- eCQI
- eCQI Standards
- eCQM
- eCQM Tools & Key Resources
- EH
- EP
- HQMF
- QDM
- QRDA
- All Spaces...
- Site map

[QDM](#) [HQMF](#) [QRDA](#) [eCQM Tools](#) [Kaizen](#)

17
2016
 QDM Call Information
 NOTE: Participants are not required to register for this meeting.

1 2 next › last »

Interest Areas

eCQM
 Electronic Clinical Quality Measures
[Learn more](#)

QDM
 The Quality Data Model Standard
[Learn more](#)

eCQM Tools
 Authoring, Testing and Implementation Tools
[Learn more](#)

eCQI Standards
 Electronic Clinical Quality Improvement Standards
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Interest Areas

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eCQM

About electronic Clinical Quality Measures

Where can I find the eligible hospital measures?

Eligible Hospital (EH) electronic measure specifications and supporting documentation are on the [EH page](#) of the eCQI Resource Center.

AND

Eligible Hospital (EH) electronic measure specifications and supporting documentation are on the [CMS eCQM Library Page](#).

Where can I find the eligible professional measures?

Eligible Professional (EP) electronic measure specifications and supporting documentation are on the [EP page](#) of the eCQI Resource Center.

AND

Eligible Professional (EP) electronic measure specifications and supporting documentation are on the [CMS eCQM Library Page](#).

What are clinical quality measures (COMs)?

EH
Eligible Hospital Measures



EP
Eligible Professional Measures

Public

Request space membership

eCQI Implementer's Corner
eCQM News
eCQM Events
eCQM Files

Categories

eCQI Topic:
About eCQM
Annual Measure Specification Updates
Reporting Standards
Tools & Resources

EH

- Public
- Request space membership
- 2014 Measures 2014 Update
2014 Measures 2015 Update
- Current Measure Specs
- CMS100v4 - AMI2
- CMS102v4 - Stroke10
- CMS104v4 - Stroke2
- CMS105v4 - Stroke6
- CMS107v4 - Stroke8
- CMS108v4 - VTE1
- CMS109v4 - VTE4
- CMS110v4 - VTE5
- CMS111v4 - ED2
- CMS113v4 - PC01

Each year, CMS makes updates to the electronic specifications of the Clinical Quality Measures approved for submission in CMS programs. CMS encourages the use of the updates because they include new codes, logic corrections and clarifications. Below are Eligible Hospital (EH) electronic measure specifications and linked documentation.

Eligible Hospital (EH) Downloads

June 2015 Update for the 2016 Reporting Year



- [2014 eCQMs for Eligible Hospitals Table Update May 2015 \(pdf\)](#)
- [2014 eCQM Specifications for Eligible Hospitals Update June 2015 \(zip\)](#)
- [2014 eCQM Eligible Hospital Technical Release Notes May 2015 \(zip\)](#)
- [2014 eCQM Eligible Hospital Technical Release Notes Update June 2015 \(zip\)](#)
- [2014 eCQM Measure Logic Guidance v1.11 Update June 2015 \(pdf\)](#)

April 2014 Update

- [2014 eCQM Eligible Hospital Table April 2014 \(pdf\)](#)
- [2014 eCQM Specifications for Eligible Hospitals Update April 2014 \(zip\)](#)

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2014 Measures 2015 Update

Clinical Quality Measures and their electronic specifications as defined in the 2015 update for Eligible Hospitals.

Content Visibility

Public

| Measure Name | CMS ID | NQF ID |
|---|---------|--------|
| Exclusive Breast Milk Feeding | CMS9v4 | 0480 |
| Home Management Plan of Care (HMPC) Document Given to Patient/Caregiver | CMS26v3 | None |
| Statin Prescribed at Discharge | CMS30v5 | 0639 |
| Hearing Screening Prior To Hospital Discharge | CMS31v4 | 1354 |
| Median Time from ED Arrival to ED Departure for Discharged ED Patients | CMS32v5 | 0496 |
| Primary PCI Received Within 90 Minutes of Hospital Arrival | CMS53v4 | 0163 |
| Median Time from ED Arrival to ED Departure for Admitted ED Patients | CMS55v4 | 0495 |
| Fibrinolytic Therapy Received Within 30 Minutes of Hospital Arrival | CMS60v4 | 0164 |
| Anticoagulation Therapy for Atrial Fibrillation/Flutter | CMS71v5 | 0436 |
| Antithrombotic Therapy By End of Hospital Day 2 | CMS72v4 | 0438 |





eCQM

EH



Login

[Topic areas](#) [EH Measures](#) [EP Measures](#) [QDM](#) [HQMF](#) [QRDA](#) [eCQM Tools](#) [Kaizen](#)

Hearing Screening Prior To Hospital Discharge

2014 Measures 2015 Update

Last updated: August 24, 2015

Current Measure Specs

CMS100v4 - AMI2
CMS102v4 - Stroke10
CMS104v4 - Stroke2
CMS105v4 - Stroke6
CMS107v4 - Stroke8
CMS108v4 - VTE1
CMS109v4 - VTE4
CMS110v4 - VTE5
CMS111v4 - ED2
CMS113v4 - PC01
CMS114v4 - VTE6
CMS171v5 - SCIPInf1
CMS172v5 - SCIPInf2
CMS178v5 - SCIPInf9
CMS185v4
CMS188v5 - PN6
CMS190v4 - VTE2
CMS26v3 - HMPC
CMS30v5 - AMI10

CMS Measure ID: CMS31v4**Version:** 4**NQF Number:** 1354**Measure Description:** This measure assesses the proportion of births that have been screened for hearing loss before hospital discharge.**Initial Patient Population:** Live birth encounters at a hospital or birthing facility where the newborn was discharged during the measurement period.**Measure Population:** Not applicable**Measure Observations:** Not applicable**Denominator Statement:** Denominator is equal to the Initial Population.**Denominator Exclusions:** Live birth encounters where the patient expires prior to discharge and has not received hearing screening for the left or right ear

Release Notes



Header

Copyright updated.
Disclaimer updated.
eMeasure version number incremented.
Updated criteria in the Denominator Exclusions representing when a patient expires to harmonize across measures.
Updated the Denominator header statement to be consistent across hospital measures.
Updated the Numerator header statement to better align with measure logic.

Logic

Added 'during Occurrence A of Encounter, Performed: Encounter Inpatient' for each 'AND:' statement in the Denominator Exclusions to clarify the logic in the left-hand side or right-hand side of a timing clause.
Changed data type of 'Result' or 'Finding' to 'Performed'.
For consistency across all measures, Discharge Status: Patient Expired is used as the criteria to determine if a patient expired during an encounter.
Introduced the 'Intersection of' operator to specify the selection of the data sets common to all individual statements underneath the 'Intersection of'.
Introduced variable \$EncounterInpatient to allow re-use of logical expressions and reduce redundancy/complexity.
Replaced 'ORs' with 'Union of' operator to provide a mechanism for specifying that qualifying event(s) must be a member of at least one of the data elements being unioned (if appropriate for measure intent).
The top level logical operator for the Numerator Exclusions, Denominator Exclusions, Denominator Exceptions, and Measure Population Exclusions defaults to 'OR'.

Value Sets

No changes

External Resources

[United States Health Information Knowledgebase \(USHIK\)](#) @

Short Name: EHDI_1a

Previous Version: Hearing Screening Prior To Hospital Discharge

Measure Score: Proportion

Score Type: Process

Improvement Notation: Improvement noted as an increase in rate.

Guidance: The measurement period is one calendar year but the reporting period is jurisdictionally defined.

Specifications



- CMS31v4_1.html
- CMS31v4_1.xml
- CMS31v4_SimpleXML_1.xml
- EH_CMS31v4_NQF1354_EHDI_1a_HearScreen_1.zip
- CMS31v4TRNs05012015_1.xlsx

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eCQM

About electronic Clinical Quality Measures

Where can I find the eligible hospital measures?

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What are clinical quality measures (COMs)?

EH
Eligible Hospital Measures

EP
Eligible Professional Measures



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EP

- Public
- Request space membership
- 2014 Measures 2014 Update
2014 Measures 2015 Update
- Current Measure Specs**
- CMS117v4
- CMS122v4
- CMS123v4
- CMS124v4
- CMS125v4
- CMS126v4
- CMS127v4
- CMS128v4
- CMS129v5
- CMS130v4
- CMS131v4
- CMS132v4
- CMS133v4
- CMS134v4

Each year, CMS makes updates to the electronic specifications of the Clinical Quality Measures approved for submission in CMS programs. CMS encourages the use of the updates because they include new codes, logic corrections and clarifications. Below are Eligible Professional (EP) electronic measure specifications and linked documentation.

Eligible Professional (EP) Downloads

June 2015 Update for the 2016 Reporting Year

- [2014 eCQMs for Eligible Professionals Table Update May 2015](#) (pdf)
- [2014 eCQM Specifications for Eligible Professionals Update June 2015](#) (zip)
- [2014 eCQM Eligible Professionals Technical Release Notes May 2015](#) (zip)
- [2014 eCQM Eligible Professionals Technical Release Notes Update June 2015](#) (zip)
- [2014 eCQM Measure Logic Guidance v1.11 Update June 2015](#) (pdf)
- [2014 eCQM Measure Logic Flows for Eligible Professionals Update June 2015](#) (zip)

July 2014 Update for the 2015 Reporting Year

- [2014 eCQMs for Eligible Professionals Table July 2014](#) (pdf)
- [2014 eCQM Specifications for Eligible Professionals Update July 2014](#) (zip)
- [2014 eCQM Measure Logic Guidance & Release Notes v1.9 Update July 2014](#) (pdf)
- [2014 eCQM Measure Logic Flows for Eligible Professionals July 2014 1 of 2](#) (zip)

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eCQI Implementer's Corner

The eCQI Implementers' Corner provides information and tools to inform the design and execution of eCQI activities.

An "implementer" does many things to prepare processes and systems such as:

- putting measure data components into systems and workflow
- using measures when conducting health care activities
- providing information from measures to inform quality improvement

The success of eCQI activities depends on the tireless efforts of the entire care team and those that support them: practice administrators, quality improvement leadership, information technology staff, providers, and others. These individuals need to work together to execute a plan to improve quality and reduce costs.

Electronic health data can help providers and health care organizations transform the care they deliver through quality improvement activities. However, the existence of data alone does not improve quality. One must use the data with eCQI tools and activities to improve quality such as:

- Electronic Clinical Quality Measures (eCQMs) that help providers know how they compare with other providers on key quality indicators and whether or not they are using evidence-based care
- Clinical Decision Support (CDS) to ensure the **5 CDS Rights**:
 - right information is provided
 - to the right person
 - in the right intervention format
 - through the right channel
 - at the right time in workflow
- Understanding and optimizing daily care activities and workflow to be effective and efficient

Key Implementer Resources:

- [eCQM 101 - Getting Started with eCQM for Quality Reporting Programs - March 25, 2015](#) (pdf)
- [eCQM 101 Webinar](#)

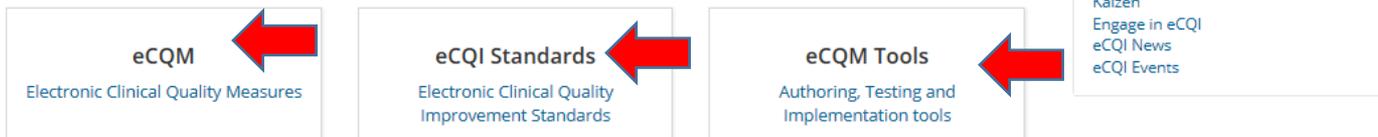
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eCQI

Electronic Clinical Quality Improvement (eCQI)

Electronic Clinical Quality Improvement (eCQI) uses a variety of processes, health IT tools, standards and measurement to help continuously improve the quality of care, support improved health and outcomes. Health IT enables this improvement through the rapid feedback of performance via electronic clinical quality measures (eCQMs) as well as real-time improvement tools such as clinical decision support (CDS).



Specifications for electronic clinical quality measures for use in Medicare and Medicaid programs are created by CMS and certified by ONC. Measures quantify improvement in the quality and safety of care, health outcomes of populations, and provider and patient experience of care. The standards used for the electronic representation of quality data formats in eCQMs are proposed and approved by standards organizations and stakeholders in the eCQI community and approved by CMS for measures used within their quality incentive programs. Tools are that help with the development, testing and certification of eCQMs are highlighted on the eCQM tools page.

eCQM

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eCQI Standards

About electronic Clinical Quality Improvement standards

Standards are critical to data consistency, validity and interoperability. Their use makes it easier to:

- Share information
- Develop software
- Integrate data
- Implement systems

Standards constantly improve so that more sophisticated data can be captured, used and analyzed.

While eCQI is made up of eCQMs and Clinical Decision Support (CDS), you'd think both use the same standards, but they don't. It's important to understand the difference.

Current eCQM standards

| | | |
|----------------------------------|---|--|
| QDM Quality Data Model | HQMF Health Quality Measures Format | QRDA Quality Reporting Document Architecture |
|----------------------------------|---|--|

Current CDS standards:

- Virtual Medical Record (vMR) data model and templates
- Health eDecisions (HeD) CDS Knowledge Artifact Specification (KAS)

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[Standards](#)
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eCQI Author:
[CMS](#)
[ONC](#)

eCQI Function:

QRDA

What's the Quality Reporting Document Architecture (QRDA)?

The Health Level Seven International (HL7) Quality Reporting Document Architecture (QRDA) is a standard document format for the exchange of electronic clinical quality measure (eCQM) data. QRDA reports:

- Contain data extracted from electronic health records (EHRs) and other health information technology systems.
- Can be used to exchange eCQM data between systems.
- Are the data submission standards for a variety of quality measurement and reporting initiatives.
- Were adopted by the Office of the National Coordinator for Health Information Technology (ONC) as the standard to support both QRDA Category I (inpatient) and QRDA Category III (outpatient's aggregate) data submission approaches for Stage 2 of Meaningful Use (MU).

QRDA Category I and III specifications have and will be used as Draft Standards for Trial Use (DSTUs). HL7 issues DSTUs during the standards development life cycle when many, but not all, of the guiding requirements have been clarified. DSTUs are tested and then formalized in the HL7 ballot process into an American National Standards Institute (ANSI)-accredited normative standard. QRDA I was renewed in 2014; QRDA Cat III DSTU will be renewed in November 2015.

CMS has developed and published the [CMS QRDA Category I Implementation Guides for Eligible Professionals and Eligible Hospitals](#) for the 2014 eCQM reporting. These guides:

- Are based on the HL7 QRDA Category I, DSTU Release 2, and its December 2012 errata update.
- Provide CMS-specific requirements for the Eligible Professionals and Eligible Hospitals, such as requiring the CMS Certification Number for hospitals when submitting QRDA Category I reports, by further constraining the base HL7 standard.

For aggregated reporting, CMS has also developed and published the [CMS QRDA Category III Implementation Guide for Eligible Professionals for the 2014 eCQM reporting](#). The guide further constrains the base HL7 QRDA Category III standard to define CMS specific requirements for Eligible Professionals.

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[eCQM Implementation eCQM Reporting](#)

QRDA Reference and Implementation Guides for eCQM



- [2016 CMS QRDA Implementation Guide for Eligible Professional Programs and Hospital Quality Reporting \(pdf\)](#)
- [2016 CMS QRDA-I Schematrons and Sample Files version 2 \(zip\)](#)
- [2016 CMS QRDA-III Schematrons and Sample Files version 3 \(zip\)](#)
- [HL7 QRDA Category I Specifications](#)
- [HL7 QRDA Category III Specifications](#)

- [2015 CMS QRDA Implementation Guide for Eligible Professional Programs and Hospital Quality Reporting \(pdf\)](#)
- [Addendum to 2015 CMS QRDA Implementation Guide for Eligible Professional and Hospital Quality Reporting \(pdf\)](#)
- [2015 CMS/CPC QRDA III Sample File updated October 2015 \(zip\)](#)
- [2014 CMS Performance Rate Calculation Requirement for Eligible Professionals QRDA-III \(pdf\)](#)
- [Guide to the Quality Reporting Data Architecture, QRDA, for 2014 eCQMs \(pdf\)](#)
- [2014 CMS QRDA Implementation Guide for Eligible Hospital Clinical Quality Measures \(pdf\)](#)
- [2014 CMS QRDA Implementation Guide for Eligible Hospital Clinical Quality Measures \(Effective July 1, 2014\) \(pdf\)](#)
- [2014 CMS QRDA I Implementation Guides for Eligible Professionals Clinical Quality Measures \(zip\)](#)
- [2014 CMS QRDA III Implementation Guides for Eligible Professionals Clinical Quality Measures \(zip\)](#)
- [2014 CMS QRDA Cat 1 Eligible Hospital Sample Files April 2014 \(zip\)](#)

eCQI User Level:

Advanced
Intermediate

eCQI User Type:

Health IT
Developer/Vendor
Measure Developer
Standard Development
Organization

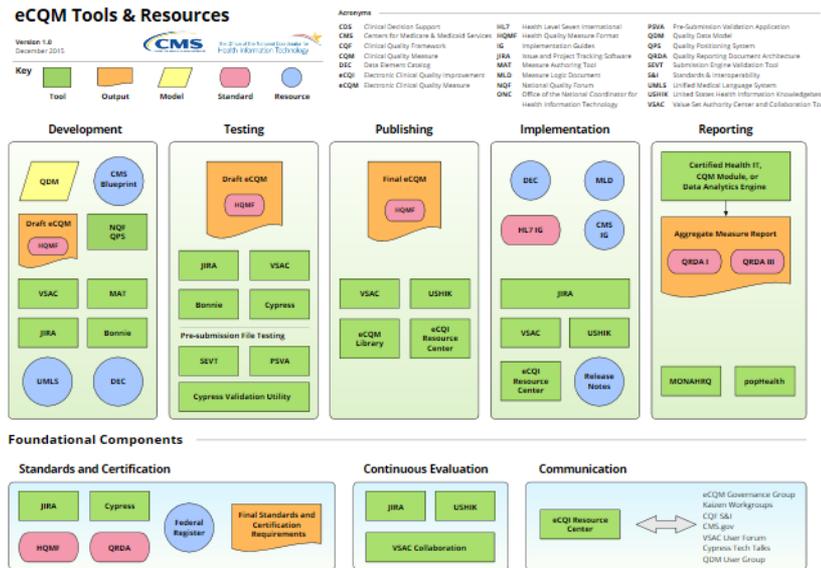
eCQM Tools & Key Resources

Overview of eCQM-related Tools

The eCQM tools and resources referenced in this section are openly available and are provided for stakeholder use. They provide a foundation for the development, testing, certification, implementation, reporting, continuous evaluation of quality measures and their improvement.

Use this interactive graphic to explore current eCQM tools and resources openly available for stakeholder use. The tools and resources provide developers, implementers, and other stakeholders a foundation for the development, testing, implementation, reporting, and continuous evaluation of eCQMs. Each tool and resource icon has a link for more information.

We encourage your feedback on this graphic. Please e-mail us at ecqi-resource-center@hhs.gov.



Download the PDF version of this diagram here: [ecqm_ecosystem.pdf](#).

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eCQM Tool Categories

- Certification
- Communication
- Continuous Evaluation
- Development
- Implementation
- Publication
- Reporting
- Submission
- Testing

Bonnie

[Bonnie website](#)

Category: [Development](#), [Testing](#)

Bonnie is a tool for testing electronic clinical quality measures (eQMs). This tool is designed for use by measure developers as part of their development process and validates that the eCQM logic matches the measure's intent. Bonnie uses patient scenarios to represent each logic component of the measure specification such as the IPP, denominator, numerator, exclusions, etc. Health IT developers and implementers may also use the tool to evaluate measure implementation into their systems. Measure developers use both Bonnie and MAT in concert to promote test driven development.

Bonnie User Forum

[Bonnie User Forum](#)

Category: [Development](#), [Testing](#)

This user forum is a community of Bonnie users that benefit from one another's experience and questions, and allows the development team to easily reach out to the community regarding new releases, proposed features, and focus group opportunities.

To join:

Cypress

[Cypress website](#)

Category: [Certification](#), [Testing](#)

Cypress is an open source certification testing tool for evaluating the accuracy of clinical quality measure calculations in electronic health records (EHRs) systems and EHR modules. Cypress enables testing of an EHR's ability to accurately calculate eQMs. Cypress serves as the official eCQM testing tool for the 2014 EHR Certification program by the Office of the National Coordinator for Health IT (ONC). View slides from [Cypress 101](#) session.

Cypress Tech Talks

[Cypress Tech Talks Signup](#)

Category: [Communication](#), [Continuous Evaluation](#)

Cypress Tech Talks are an open forum for discussing technical implementation and tool issues with the Cypress team.

Data Element Catalog (DEC)

[Data Element Catalog webpage](#)

Category: [Development](#), [Implementation](#)

A data element is a clinical concept such as a diagnosis, lab value or gender that is coded using standardized terminologies and

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Navigation: Home, eCQI, eCQM Tools & Key Resources

Topic areas: EH Measures, EP Measures, QDM, HQMF, QRDA, eCQM Tools, Kaizen, Education

eCQM Tools & Key Resources

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We encourage your feedback on this graphic. Please e-mail us at ecqi-resource-center@hhs.gov.

eCQM Tools & Resources
Version 1.0
December 2015

Key

| | | | | |
|--------------|---------------|---------------|-------------|-------------|
| Green Square | Orange Square | Yellow Square | Pink Circle | Blue Circle |
| Tool | Output | Model | Standard | Resource |

Development **Testing** **Publishing** **Implementation** **Reporting**

Acronyms

| | | |
|---|---|---|
| CDS Clinical Decision Support | HLP Health Level Seven International | PSVA Pre-Submission Validation Application |
| CMS Centers for Medicare & Medicaid Services | HQMF Health Quality Measure Format | QDM Quality Data Model |
| CQF Clinical Quality Framework | IG Implementation Guides | QPS Quality Positioning System |
| CQM Clinical Quality Measure | JIRA Issue and Project Tracking Software | QRDA Quality Reporting Document Architecture |
| DEC Data Element Catalog | MAT Measure Authoring Tool | SEVT Submission Engine Validation Tool |
| eCQI Electronic Clinical Quality Improvement | MLD Measure Logic Document | S&I Standards & Interoperability |
| eCQM Electronic Clinical Quality Measure | NQF National Quality Forum | UMLS Unified Medical Language System |
| | ONC Office of the National Coordinator for Health Information Technology | USHIK United States Health Information Knowledgebase |
| | | VSAC Value Set Authority Center and Collaboration Tool |

eCQM Tool Categories

- Certification
- Communication
- Continuous Evaluation

CMS QRDA Pre-Submission Validation Tools

This interactive tool details the different aspects of multiple QRDA validation tools that are available to submitters. It is intended to give users a single point of reference for these tools and assist them in selecting the most appropriate tool to meet their individual needs.

[Get Started](#)



CMS QRDA Pre-Submission Validation Tool

Click to close X

HOW THIS TOOL WORKS

- 1) Hover over any of the 4 QRDA Validation Tools for Quick Facts.
- 2) Then click one of the tools for more information.

For more information, please view the [QRDA Validation Tool Spreadsheet](#) [.xlsx, 19 KB]



Cypress QRDA Validation Utility

Quick Check

How To Access

Technical Specifications

CMS Supported Programs

Error Reporting & Stored Results

Other Features & Comments

Support Contacts

Hover over a category, and click to learn more about this tool

Cypress QRDA Validation Utility

Pre-Submission Validation Application (PSVA)

CMS Secure Portal

Submission Engine Validation Tool (SEVT)

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- Wed 27 Jan **Education Space added to the eCQI Resource Center**
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VSAC 2.10.4 includes the following updated code system versions:
CDT 2016, CPT 2016, CVX 2016, HCPCS 2016, ICD10CM 2016, ICD10PCS 2016, LOINC 2.54, RxNorm 2015-01

Upcoming Events

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eCQM Education

January 2016

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|-----|-----|-----|-----|-----|-----|-----|
| 27 | 28 | 29 | 30 | 31 | 1 | 2 |
| 3 | 4 | 5 | 6 | 7 | 8 | 9 |
| 10 | 11 | 12 | 13 | 14 | 15 | 16 |

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There is no content in this space.



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Getting in touch with the eCQI Resource Center

The eCQI Resource Center will be constantly improving to better meet the needs of its users, and we are counting on your input to make it as useful as possible. Please send any news, events, content or questions you have about the eCQI Resource Center to ecqi-resource-center@hhs.gov.

A [checklist](#) and [information on 508 requirements](#) for content are found at these links.

Getting help with eCQMs

Direct MU Policy and Program Questions to: The Electronic Health Record (EHR) Information Center

7:30 a.m. — 6:30 p.m. (Central Time) Monday through Friday, except federal holidays

888-734-6433 (press option 1) TTY: 888-734-6563

Direct PQRS and IQR Policy and Program Questions to: The QualityNet Help Desk

E-mail: qnetsupport@hcqis.org

Phone: (866) 288-8912 TTY: (877) 715-6222

Spaces

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 - eCQI
 - eCQM
 - EH
 - EP
 - eCQM Tools & Key Resources
 - eCQI Standards
 - CDS/eCQM Harmonization
 - HQMF
 - QDM
 - QRDA
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CDS/eCQM Harmonization

How are CDS & eCQM different?

Clinical Decision Support (CDS) and electronic Clinical Quality Measurement (eCQM) are closely related, share many common requirements, and support health care quality improvement. It's important to also understand, though, the differences between them and the efforts to help them work together (harmonize).

The standards used for the electronic representation of CDS and eCQM were developed separately and use different data models and computable expression languages. Different standards make:

- Re-using or sharing machine readable logic between eCQMs and CDS rules very difficult.
- A burden for health IT developers and those who give provider technical support.

Why harmonize CDS & eCQM?

When CDS and eCQM standards can work together or "harmonize," it's easier to implement them. Harmonization also makes it easier to integrate and facilitate health IT enabled clinical quality improvement.

Ultimately, same or similar standards will be made and used to:

- Measure if appropriate care was given.
- Suggest care to providers and care teams when there are opportunities to improve care quality.

Instead of developing a new standard that could be used for eCQM and CDA, the focus is on:

- "Modularizing" or organizing the existing standards so they're more flexible.
- Making common components that can be shared by both.

The diagram below shows this approach.

Goal: Shared Standards

Clinical Quality Measurement and Clinical Decision Support

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[About eCQM Standards](#)

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[Other](#)

eCQI Function:
[CDS Development - Concept>>>Specification](#)
[eCQM Development - Concept>>>Specification](#)