

Implementation Workflow Workgroup

Focus:

The Implementation Workflow Workgroup was comprised of CMS personnel, contractors and stakeholders who implement electronic clinical quality measures (eCQMs). The Workgroup was established to improve the quality, timing, and implementation tools for stakeholders such as health IT vendors, eligible professionals, and eligible hospitals.

History and Background:

The Implementation Workflows Workgroup came out of the December 8-12, 2014 eCQM Kaizen Event. The discussion at this meeting led to identification of challenges, aha moments, and the desired future state. A summary of the Kaizen Event is provided at this link <https://ecqi.healthit.gov/file/12536> on the eCQI Resource Center.

Goals and Objectives:

Challenges/Aha's:

- The released eCQMs are not optimally designed to allow for quick and efficient implementation by providers or health IT developers. Furthermore, the short timeframe between posting final measure specifications and the start of reporting—as well as delays in getting answers to questions about eCQM specifications—require providers and health IT vendors to institute workarounds that introduce defects in order to have something to report by the deadline.
- Successful implementation depends not only on the quality of EHR templates and code, but also on communication with providers about the purpose of eCQMs as well as the necessary changes in documentation practice and workflow. Such communication should begin before the new or revised EHR code is released by the vendor.
- The biggest opportunity for reducing waste involves upstream involvement of providers and vendors earlier in the measure development process to ensure that eCQMs have the right level of specificity (enough to give clear guidance on implementation, but not so specific as to remove flexibility for providers) and are clearly defined at the time of the final rule. If those goals become reality, many of the implementation workflow steps can be minimized or removed.
- Although similar, the implementation workflows for new measures are different than that of updated measures. Updates to existing measures must account for the workflow changes that have already been implemented in order to report the measure. The selection and development of new measure concepts, on the other hand, should take implementation considerations into account well before the final measure specifications are posted.

Desired Future State:

- Providers and vendors are included in the measure development and update process earlier and in more meaningful ways to ensure that measures that are proposed for programs are aligned with real-world implementation needs.
- Create and disseminate resources to support the development and implementation of eCQMs, including a data element catalog, information about direct observation, and guidance about implementation testing.

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Open Questions/Senior Leadership Asks:

- Reboot the development of a data catalog and develop a governance structure that will ensure that measures under development use existing data elements whenever possible.
- Provide better opportunities for providers and vendors to provide feedback on measures under development earlier in the development process and ensure that all measures included in programs are based on input from providers and vendors.
- Support the sharing of best practices in implementation workflow processes.

Workgroup Metrics:

- 1) Proportion of activities and resources dedicated to the implementation of ambulatory and inpatient eQMs.
- 2) Number and percentage of duplicate or similar data elements/value sets in the data elements catalog after revisions.

Results – December 2014 to Date:

The workgroup was instrumental in the development of Key Implementer resources such as the [eCQM 101 – Getting Started with eQMs for Quality Reporting Programs](#) and [eCQM 102 – Taking the Next Step with eQMs for Quality Reporting Programs](#). Additionally, there is now a public space on the eCQI Resource Center devoted to implementation, the [eCQI Implementers' Corner](#). The group has contributed helpful resources to this site and will continue to do so.

In the response to the educational webinars, the broader community described a need for improved documentation of best practices for implementers in the clinical quality domain to ensure successful implementation, change management, data mapping, data validation, and quality reporting. The Workgroup determined that a working meeting of innovators, clinicians, implementers and their related stakeholders (federal quality program officers, HIT developers, specialty organizations, and measure/CDS authors) could potentially document and establish best practices and tools that would be made available to the larger implementer community to avoid prior pitfalls and maximize efficiency and effectiveness. A team of clinician implementers has worked for the past year to design a meeting to achieve these aims and is expecting to launch an initial meeting in December 2016.

For more information on the Implementation Workflows Workgroup, contact Dr. Julia Skapik, ONC Medical Officer, julia.skapik@hhs.gov.

For information on current opportunities to engage with the eCQI Community visit the eCQI Resource Center at <https://ecqi.healthit.gov/ecqi/engage-ecqi>.