Hospital Inpatient Quality Reporting (IQR) and Medicare Promoting Interoperability Programs



CY 2023 Available eCQMs

For calendar year (CY) 2023 eCQM reporting, hospitals participating in the Hospital IQR Program* and the Medicare Promoting Interoperability Program** are required to successfully submit data for the mandatory Safe Use of Opioids – Concurrent Prescribing electronic clinical quality measure (eCQM) and three (3) other available eCQMs from the table below, for four quarters, every quarter of the calendar year. Each quarter must contain at least three self-selected eCQMs, plus the mandatory Safe Use of Opioids-Concurrent Prescribing eCQM. The eCQMs must be the same eCQMs across quarters in a given reporting year.

Hospitals can use any combination of Quality Reporting Document Architecture (QRDA) Category I files, zero denominator declarations, and/or case threshold exemptions to reflect its total inpatient population. The data must be reported using Health Information Technology (Health IT) certified by the Office of the National Coordinator for Health IT (ONC) to the 2015 Edition Cures Update criteria. To learn more about the update, visit ONC's 21st Century Cures Act final rule.

The eCQM reporting deadline is **Thursday**, **February 29**, **2024**, **11:59** p.m. **Pacific Time**. For additional information, visit the QualityNet eCQMs Overview page and the eCQI Resource Center eCQM page.

Mandatory Safe Use of Opioids – Concurrent Prescribing*** (CMS506v5)	
ePC-02*** (CMS334v4) Cesarean Birth	ePC-07*** (CMS1028v11) Severe Obstetric Complications
HH-01 (<i>CMS816v2</i>) Hospital Harm -Severe Hypoglycemia	HH-02 <i>(CMS871v2)</i> Hospital Harm – Severe Hyperglycemia
ED-2**** (CMS111v11) Admit Decision Time to ED Departure Time for Admitted Patients	PC-05**** (CMS9v11) Exclusive Breast Milk Feeding
STK-02 (CMS104v11) Discharged on Antithrombotic Therapy	STK-03 (CMS71v12) Anticoagulation Therapy for Atrial Fibrillation/Flutter
STK-05 (CMS72v11) Antithrombotic Therapy By the End of Hospital Day 2	STK-06**** (CMS105v11) Discharged on Statin Medication
VTE-1 (CMS108v11) Venous Thromboembolism Prophylaxis	VTE-2 (CMS190v11) Intensive Care Unit Venous Thromboembolism Prophylaxis

^{*}The submission of CY 2023 eCQM data will affect the FY 2025 payment determination.

HH = Hospital Harm ED = Emergency Department PC = Perinatal Care STK = Stroke VTE = Venous Thromboembolism

^{**}The submission of CY 2023 eCQM data will affect the FY 2025 payment determination for eligible hospitals and the FY 2023 payment determination for CAHs.

^{***}This eCQM is mandatory for CY 2024 reporting.

^{****}This eCQM will not be part of the measure set for CY 2024 reporting.