



Hospital IQR Program: Summary of Changes for FY 2022 Payment Determination/CY 2020 Reporting Period

Clinical Process of Care and HAI Measures

Removal of Chart-Abstracted and HAI Measures

The following table shows the chart-abstracted measure that CMS is removing from the Hospital IQR Program, along with the CY reporting period and FY payment determination in which the removal is effective. **NOTE:** The HAI measures will remain in the HAC Reduction Program.

Table 1: Chart-Abstracted and HAI Measures Removed from Hospital IQR Program

Measure Name	CY Reporting Period	FY Payment Determination
ED-2: Admit Decision Time to ED Departure Time for Admitted Patients	2020	2022
CLABSI: NHSN Central Line-Associated Bloodstream Infection Outcome Measure	2020	2022
CAUTI: NHSN Catheter-associated Urinary Tract Infection Outcome Measure	2020	2022
Colon and Abdominal Hysterectomy SSI: ACS-CDC Harmonized Procedure Specific Surgical Site Infection Outcome Measures	2020	2022
MRSA Bacteremia: NHSN Facility-wide Hospital-onset Methicillin-resistant <i>Staphylococcus aureus</i> Bacteremia Outcome Measure	2020	2022
CDI: NHSN Facility-wide Inpatient Hospital-onset <i>Clostridium difficile</i> Infection Outcome Measure	2020	2022

EHR-Based Clinical Process of Care Measures (eCQMs)

Removal of eCQM Measures

The following table shows the eCQM measures that CMS is removing from the Hospital IQR Program, along with the CY reporting period and FY payment determination in which the removal is effective.

Table 2: eCQM Measures Removed from Hospital IQR Program

Measure Name	CY Reporting Period	FY Payment Determination
AMI-8a: Primary PCI Received Within 90 Minutes of Hospital Arrival	2020	2022
CAC-3: Home Management Plan of Care Document Given to Patient/Caregiver	2020	2022
ED-1: Median Time from ED Arrival to ED Departure for Admitted ED Patients	2020	2022
ED-3: Median Time from ED Arrival to ED Departure for Discharged ED Patients*	2020	2022

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Measure Name	CY Reporting Period	FY Payment Determination
EHDI-1a: Hearing Screening Prior to Hospital Discharge	2020	2022
PC-01: Elective Delivery	2020	2022
STK-08: Stroke Education	2020	2022
STK-10: Assessed for Rehabilitation	2020	2022
* The ED-3 measure is being removed from the Promoting Interoperability Program.		

Adoption of the Hybrid HWR Measure with Claims and EHR Data (NQF #2879)

CMS has adopted the Hybrid HWR measure as follows:

- Hospitals would submit the following data from their certified EHRs for at least 90 percent of their Medicare FFS patients aged 65 and older, using QRDA Category I files for reporting to CMS:
 - **13** core clinical data elements:
 - **Six** vital signs (heart rate, respiratory rate, temperature, systolic blood pressure, oxygen saturation, weight)
 - **Seven** laboratory test results (hematocrit, white blood cell count, sodium, potassium, bicarbonate, creatinine, glucose)
 - **Six** linking variables to match the EHR data to the CMS claims data (CMS Certification Number, Health Insurance Claim Number or Medicare Beneficiary Identifier, date of birth, sex, admission date, discharge date)
- CMS merges the EHR data elements with the claims data and calculates the 30-day risk-standardized readmission rate.
 - The rule finalized the following Implementation Steps:
 1. Two voluntary reporting periods (Reporting periods include four quarters of data)
 - July 1, 2021 through June 30, 2022
 - The submission deadline is the first business day three months following the end of the applicable reporting period (e.g., submit data by September 30, 2022).
 - July 1, 2022 through June 30, 2023
 - Submit data by October 2, 2023
 2. Mandatory reporting
 - Starting with the July 1, 2023 through June 30, 2024 reporting period
 - Impacting FY 2026 payment determination, and for subsequent years

Mandatory eCQM Reporting Requirements

For the FY 2022 payment determination/CY 2020 reporting period, the Hospital IQR Program eCQM reporting requirements are as follows:

- Report on at least four of the available eCQMs for one self-selected quarter (i.e., Q1, Q2, Q3, or Q4 2020) using:
 - The 2015 edition of ONC certification standards
 - EHRs certified to all available eCQMs
 - eCQM specifications published in CMS' eCQM Annual Update and related addenda for the applicable reporting year, available on the eCQI Resource Center at <https://ecqi.healthit.gov/eh>

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- QRDA Category I file format, using the CMS QRDA Category I Implementation Guide for the applicable year, available at: <https://ecqi.healthit.gov/qrda>
- Submit through the *QualityNet Secure Portal* by March 1, 2021, at 11:59 p.m. Pacific Time.

PLEASE NOTE: Meeting the Hospital IQR Program eCQM requirement also satisfies the clinical quality measure reporting requirement for the Promoting Interoperability Program.

Claims-Based Measures

Accounting for Social Risk Factors: Confidential Reporting of Stratified Data

In the spring of 2020, CMS plans to include disparity results (or differences) by patients' dual eligible status in HSRs for five additional claims-based readmission measures for the following conditions:

- AMI
- CABG
- COPD
- HF
- THA/TKA

This will include two disparity methodologies designed to clarify potential differences within individual hospitals and across hospitals nationally and will supplement the measure data currently publicly reported on the public reporting website. The first methodology, the Within-Hospital Disparity Method highlights differences in outcomes for dual eligible versus non-dual eligible patients within an individual hospital, while the second methodology, the Dual Eligible Outcome Method, allows for a comparison of performance in care for dual-eligible patients across hospitals.

Acronyms

ACS	American College of Surgeons	HAC	Hospital-Acquired Condition
AMI	acute myocardial infarction	HAI	healthcare-associated infection
CABG	coronary artery bypass graft	HF	heart failure
CAC	Children's Asthma Care	HSR	Hospital-Specific Reports
CAUTI	Catheter-associated Urinary Tract Infection	HWR	Hospital-Wide Readmission
CDC	Centers for Disease Control and Prevention	IQR	Inpatient Quality Reporting
CDI	<i>Clostridium difficile</i> Infection	MRSA	Methicillin-resistant <i>Staphylococcus aureus</i>
CLABSI	Central Line-associated Bloodstream Infection	NHSN	National Healthcare Safety Network
CMS	Centers for Medicare & Medicaid Services	NQF	National Quality Forum
COPD	Chronic Obstructive Pulmonary Disease	ONC	Office of the National Coordinator for Health Information Technology
CY	calendar year	PC	Perinatal Care
eCQI	electronic clinical quality improvement	PCI	Percutaneous Coronary Intervention

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eCQM	electronic clinical quality measure	Q	quarter
ED	emergency department	QRDA	Quality Reporting Document Architecture
EHDI	Early Hearing Detection and Intervention	SSI	Surgical Site Infection
EHR	electronic health record	STK	stroke
FFS	Fee-for-Service	THA	Total Hip Arthroplasty
FY	fiscal year	TKA	Total Knee Arthroplasty