



CY 2021 (FY 2023) Available Electronic Clinical Quality Measures (eCQMs)

For calendar year (CY) 2021 reporting (fiscal year [FY] 2023 payment determination), hospitals participating in the Hospital Inpatient Quality Reporting (IQR) Program and the Medicare Promoting Interoperability Program are required to successfully submit data for at least **four (4) of the nine (9) eCQMs available**, as shown below, for two self-selected quarters. The self-selected 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 existing 2015 Edition certification criteria, the 2015 Edition Cures Update criteria, or a combination of both.

The CY 2021 reporting deadline is Monday, February 28, 2022, 11:59 p.m. Pacific Time.

For additional information, please visit the *QualityNet* [eCQMs Overview](#) page.

ED-2 CMS111v9 Median Admit Decision Time to ED Departure Time for Admitted Patients	PC-05 CMS9v9 Exclusive Breast Milk Feeding	STK-02 CMS104v9 Discharged on Antithrombotic Therapy	STK-03 CMS71v10 Anticoagulation Therapy for Atrial Fibrillation/Flutter	STK-05 CMS72v9 Antithrombotic Therapy By End of Hospital Day 2
STK-06 CMS105v9 Discharged on Statin Medication	VTE-1 CMS108v9 Venous Thromboembolis m Prophylaxis	VTE-2 CMS190v9 Intensive Care Unit Venous Thromboembolism Prophylaxis	Safe Use of Opioids* CMS506v3 Safe Use of Opioids– Concurrent Prescribing <i>*All hospitals are required to report beginning with the CY 2022 reporting period (FY 2024 payment determination).</i>	

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