



CMS Hospital IQR Program Measures for the FY 2025 Payment Update

Details on measurement periods and Public Reporting Release dates are available on [QualityNet](#) in the [FY 2025 Acute Care Hospital Quality Improvement Program Measures](#) documents.

Measures Required to Meet Hospital IQR Program APU Requirements

Short Name	Measure Name	Data Source	Specifications Link
AMI Excess Days	Excess Days in Acute Care after Hospitalization for Acute Myocardial Infarction	Claims	EDAC Methodology
AMI Payment	Hospital-Level, Risk-Standardized Payment Associated with a 30-Day Episode-of-Care	Claims	Payment Methodology
CMS PSI-04	Death Rate among Surgical Inpatients with Serious Treatable Complications (CMS Recalibrated Death Rate among Surgical Inpatients with Serious CMS PSI 04 Treatable Complications)	Claims	PSI Resources
COMP-HIP-KNEE	Hospital-Level Risk-Standardized Complication Rate Following Primary Elective Total Hip Arthroplasty and/or Total Knee Arthroplasty	Claims	Complications Methodology
HCAHPS	Hospital Consumer Assessment of Healthcare Providers and Systems Survey	Patient Survey	Technical Specifications
HCHE	Hospital Commitment to Health Equity	Web-based Submission	Attestation and Specifications
HCP COVID-19 Vaccination	COVID-19 Vaccination Coverage Among Health Care Personnel	NHSN	HPS Component
HCP Influenza Vaccination	Influenza Vaccination Coverage Among Healthcare Personnel	NHSN	HPS Component
HF Excess Days	Excess Days in Acute Care after Hospitalization for Heart Failure	Claims	EDAC Methodology
HF Payment	Hospital-Level, Risk-Standardized Payment Associated with a 30-Day Episode-of-Care for Heart Failure	Claims	Payment Methodology
Maternal Morbidity	Maternal Morbidity Structural Measure	Web-based Submission	Quick Reference Guide and FAQ
MORT-30-STK	Hospital 30-Day, All-Cause, Risk-Standardized Mortality Rate Following Acute Ischemic Stroke	Claims	Mortality Methodology
MSPB	Medicare Spending Per Beneficiary - Hospital	Claims	IQR MSPB Methodology
PC-01	Elective Delivery	Medical Record	TJC Specifications Manual
PN Excess Days	Excess Days in Acute Care after Hospitalization for Pneumonia	Claims	EDAC Methodology
PN Payment	Hospital-Level, Risk-Standardized Payment Associated with a 30-Day Episode-of-Care for Pneumonia	Claims	Payment Methodology
READM-30-HWR	Hospital-Wide All-Cause Unplanned Readmission Measure	Claims	Readmissions Methodology
SEP-1	Severe Sepsis and Septic Shock: Management Bundle (Composite Measure)	Medical Record	Specification Manual
THA/TKA Payment	Hospital-Level, Risk-Standardized Payment Associated with an Episode-of-Care for Primary Elective Total Hip Arthroplasty and/or Total Knee Arthroplasty	Claims	Payment Methodology

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eCQMs			
	Hospitals must submit a full year of data for the following eCQMs: <ul style="list-style-type: none"> • Three eCQMs of the hospitals choice from the below list of eCQMs. (Verify each quarter contains three self-selected eCQMs. Submit the same eCQMs across all four quarters in a given reporting year). • Plus: Safe Use of Opioids-Concurrent Prescribing eCQM 		For all eCQM specifications eCQM Specification Files eCQM Specifications for Hospital Quality Reporting (ZIP) Select applicable ZIP file from directory
Self-Selected eCQMs (Select Three)			Zip File
ED-2 ¹	Admit Decision Time to ED Departure Time for Admitted Patients	EHR	CMS111v11
ePC-02	Cesarean Birth	EHR	CMS334v4-v2
ePC-07/SMM	Severe Obstetric Complications	EHR	CMS1028v1
HH-01	Hospital Harm – Severe Hypoglycemia	EHR	CMS816v2
HH-02	Hospital Harm – Severe Hyperglycemia	EHR	CMS871v2
PC-05 ¹	Exclusive Breast Milk Feeding	EHR	CMS9v11
STK-02	Discharged on Antithrombotic Therapy	EHR	CMS104v11
STK-03	Anticoagulation Therapy for Atrial Fibrillation/Flutter	EHR	CMS71v12
STK-05	Antithrombotic Therapy by the End of Hospital Day Two	EHR	CMS72v11
STK-06 ¹	Discharged on Statin Medication	EHR	CMS105v11
VTE-1	Venous Thromboembolism Prophylaxis	EHR	CMS108v11
VTE-2	Intensive Care Unit Venous Thromboembolism Prophylaxis	EHR	CMS190v11
eCQM Required Reporting			
Safe Use of Opioids	Safe Use of Opioids – Concurrent Prescribing	EHR	CMS506v5

¹eCQM will be removed beginning with FY 2026.

Voluntary Hospital IQR Program Measures*

Short Name	Measure Name	Data Source	Specifications Link or Overview Documents
Hybrid HWM	Hybrid Hospital-Wide All-Cause Risk Standardized Mortality	EHR and Claims	Hybrid Methodology
Hybrid HWR	Hybrid Hospital-Wide All-Cause Readmission	EHR and Claims	Hybrid Methodology
SDOH-1	Screening for Social Drivers of Health	Web-based Submission	Overview and FAQs
SDOH-2	Screen Positive Rate for Social Drivers of Health	Web-based Submission	Overview and FAQs

*Voluntary measures will not be publicly reported in FY 2025.

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Acronyms			
AMI	acute myocardial infarction	HWM	Hospital-Wide Mortality
APU	Annual Payment Update	HWR	Hospital-Wide Readmission
CMS	Centers for Medicare & Medicaid Services	IQR	Inpatient Quality Reporting
Comp	Complication	MORT	mortality
eCQM	electronic clinical quality measure	MSPB	Medicare Spending per Beneficiary
ED	emergency department	NHSN	National Healthcare Safety Network
EDAC	Excess Days in Acute Care	PC	Perinatal Care
EHR	Electronic Health Record	PN	pneumonia
ePC	Electronic Perinatal Care	PSI	Patient Safety Indicator
FAQ	Frequently Asked Question	READM	Readmission
FY	fiscal year	SDOH	Social Drivers of Health
HCAHPS	Hospital Consumer Assessment of Healthcare Providers and Systems	SEP	sepsis
HCHE	Hospital Commitment to Health Equity	SMM	Severe Maternal Morbidity
HCP	Healthcare Personnel	STK	Stroke
HF	Heart Failure	THA/TKA	Total Hip Arthroplasty/Total Knee Arthroplasty
HH	Hospital Harm	TJC	The Joint Commission
HPS	Healthcare Personnel Safety	VTE	venous thromboembolism