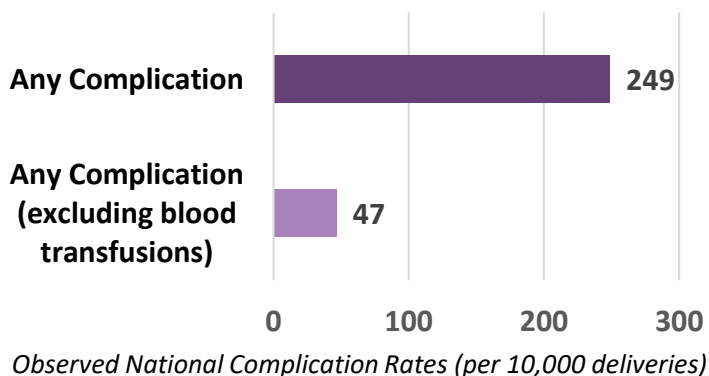


# CY 2024 Severe Obstetric Complications Electronic Clinical Quality (eCQM) Measure Factsheet for 2025 Public Reporting

## 2025 Complication Measure Results

Risk-Standardized Complication Rate (RSCR)



## Where can I find my hospital's results?



- CMS publicly reports measure results through the **data catalog** on [Data.CMS.gov](https://data.cms.gov) for hospital-level results.
- **Public reporting preview reports** display info about your results on all reported measures.
- **Hospital-Specific Reports (HSRs)** show detailed, discharge-level data on your results.

Please note that HSRs are shared with hospitals through the [User Interface in the HQR system](#). To access your results, please contact your Hospital Quality Reporting (HQR) Security Administrator/Official (SA/SO).

## How are the measures calculated?



### Cohort

Includes deliveries from hospitalizations:

- Between 8 years to under 65 years
- Hospitalized due to delivery for live births and stillbirths with  $\geq 20$  weeks 0 days gestation completed at delivery
- Who did not have COVID-19 with a respiratory complication



### Outcome

The measure has 2 outcomes:

- 1) Any complications:** Severe medical (i.e., sepsis, eclampsia, respiratory, cardiac, etc.) and procedural (i.e., hysterectomy) complications, including death.
- 2) Any Complications excluding blood transfusion only cases:** Any complications (above) but excludes cases where blood transfusion was the only complication.



### Risk Adjusted

The measures are adjusted for differences in **34 risk variables** such as:

- Maternal age
- Preexisting conditions and pregnancy characteristics
- Laboratory tests and vital signs upon hospital arrival
- Long-term anticoagulant use
- Housing instability



### Data

Includes **deliveries** that were discharged between:

**January 1, 2024, to December 31, 2024**

*Did you know...*

For FY 2026, the Severe Obstetric complications measure (PC-07) is **mandatory for hospitals in the IQR Program** to report using CY 2024 deliveries.

Present on admission (POA) codes need to be submitted for some variables on the QRDA files – see the **eCQI Resource Center** for details.

## Want more information?

- For **additional methodology information**, please see the **Methodology Report and Measure Updates Report** on the [eCQI Resource Center](#)
- Additional information, including an FAQ, can be found on [QualityNet](#) > Hospitals – Inpatient > Measures > eCQMs > Resources
- Send your technical measure questions on [JIRA](#) > create an issue ticket or [General Questions](#) > Program > IQR - Inpatient Quality Reporting > **Topic:** eCQMs

