Resources for Reporting FY 2025 eCQM and Hybrid Measure Data

April 17, 2023

Speakers

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Acronyms   2

Purpose

This presentation will provide an overview of the eCQM, Hybrid Hospital-Wide Readmission (HWR) measure, and Hybrid Hospital-Wide Mortality (HWM) measure data reporting requirements, focusing on resources to report data for the fiscal year (FY) 2025 payment determination.

Acronyms   3

Objectives

Participants will be able to:

- Understand 2024 voluntary reporting of the Hybrid HWR and Hybrid HWM measures for the Hospital Inpatient Quality Reporting (IQR) Program.

- Identify aligned calendar year (CY) 2023 eCQM reporting requirements for the Hospital IQR and Medicare Promoting Interoperability Programs.

- Locate implementation resources to help ensure successful submission of eCQM and Hybrid HWR and Hybrid HWM measure data.

Acronyms and Abbreviations

CAH	critical access hospital	**HQMF**	Health Quality Measure Format
CCDE	core clinical data element	**HQR**	Hospital Quality Reporting
CCN	CMS Certification Number	**HWM**	Hospital-Wide Mortality
CCSQ	Center for Clinical Standards and Quality	**HWR**	Hospital-Wide Readmission
CDA	Clinical Document Architecture	**IG**	Implementation Guide
CEHRT	Certified EHR Technology	**IQR**	Inpatient Quality Reporting
CMS	Centers for Medicare & Medicaid Services	**MBI**	Medicare Beneficiary Identifier
CQL	Clinical Quality Language	**ONC**	Office of the National Coordinator
CY	Calendar Year	**OQR**	Outpatient Quality Reporting
ECQI	Electronic Clinical Quality Improvement	**PC**	perinatal care
ECQM	electronic clinical quality measure	**Q**	quarter
ED	emergency department	**QDM**	Quality Data Model
EHR	electronic health record	**QRDA**	Quality Reporting Document Architecture
FFS	Fee for Service	**STK**	stroke
FY	fiscal year	**STU**	Standard for Trial Use
HARP	HCQIS Access Roles and Profile	**UCUM**	Unified Code for Units of Measure
HH	Hospital Harm	**V**	version
HICN	Health Insurance Claim Number	**VSAC**	Value Set Authority Center
HL7	Health Level 7	**VTE**	venous thromboembolism

Before We Begin . . .

Talking Points

- An eCQM is different than a hybrid measure.
- It is important to understand the timeline for each type of measure and to use the correct tool for the applicable reporting period.

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Background

- Since CY 2016, eCQM reporting is an aligned mandatory requirement for the Hospital IQR and Promoting Interoperability Programs.

- Hybrid measures were developed to increase the use of electronic health record data in quality measurement for the Hospital IQR Program.

- The Hybrid HWR and Hybrid HWM measures were adopted for use in the Hospital IQR Program as outlined in the FY 2020 and FY 2022 Inpatient Prospective Payment System /Long-Term Care Hospital Prospective Payment System Final Rules, respectively.
  - 2023 voluntary reporting of the Hybrid HWR measure
  - 2024 voluntary reporting of the Hybrid HWR and/or Hybrid HWM measure
  - Mandatory reporting of the Hybrid HWR and Hybrid HWM measures beginning with 2025 public reporting

Reminder on Reporting and Submission Requirements

Hospitals are required to:

- Submit data on each specified measure in accordance with the measure specifications for a certain time period.

- Use technical specifications in the CMS Annual Update for the Hospital Quality Reporting (HQR) Programs.

- Reference the most current version documents and implementation guidance.

- Report using the Quality Reporting Document Architecture (QRDA) Category I File Format.

eCQM vs Hybrid Measures: FY 2025 General Overview

Topic	eCQM	Hybrid HWR/Hybrid HWM Measures
Program(s)	• Hospital IQR Program* • Medicare Promoting Interoperability Program**	Hospital IQR Program
Requirement	Mandatory	Voluntary*** (This will not impact FY 2025 payment determination.)
Public Reporting	Yes [Provider Data Catalog](#)	No****
Validation (This applies to hospitals participating in the Hospital IQR Program.)	Yes	No

*The submission of CY 2023 eCQM data will affect the FY 2025 payment determination.
**The submission of CY 2023 eCQM data will affect the FY 2025 payment determination for eligible hospitals and affect the FY 2023 payment determination for critical access hospitals (CAHs).
***Mandatory reporting starts with the 7/1/2023–6/30/2024 reporting period, impacting FY 2026 payment determination.
****Public Reporting will begin with data collected from the 7/1/2023–6/30/2024 reporting period, impacting the FY 2026 payment determination. CMS anticipates inclusion in the July 2025 Care Compare refresh.

eCQM vs Hybrid Measures: FY 2025 Submission Overview

Topic	eCQM	Hybrid HWR and Hybrid HWM Measures
Measurement/ Performance Period	January 1, 2023 – December 31, 2023	July 1, 2022 – June 30, 2023
Reporting Period	CY 2023	2024 Voluntary Reporting
Payment Determination	FY 2025*	FY 2025 (This will not impact FY 2025 payment determination.)
Submission Deadline	February 29, 2024	October 2, 2023
Submission Requirements	• Report three self-selected eCQMs plus Safe Use of Opioids-Concurrent Prescribing eCQM • Report all four calendar quarters in CY 2023 (Q1, Q2, Q3 and Q4)	• Submit **linking variables on 95% or more of discharges** with a Medicare Fee for Service (FFS) claim for the same hospitalization during the measurement period. • Report **vital signs for 90% or more of hospital discharges** for Medicare FFS patients, 65 years or older (65–94 years for Hybrid HWM) in the measurement period (as determined from CMS claims for admissions that ended during the same reporting period). • Submit **laboratory test results for 90% or more of discharges** for non-surgical patients (those not included in the surgical specialty cohort of Hybrid HWR or the surgical divisions of Hybrid HWM).
Submission Method (test and production files via HQR System)	QRDA Category I Files, zero denominator declarations, case threshold exemptions	QRDA Category I File(s)

*Submission of CY 2023 eCQM data will affect FY 2025 payment determination for eligible hospitals and affect FY 2023 payment determination for CAHs.

eCQM vs Hybrid Measures: FY 2025 Policy Requirements

Policy Requirement	eCQM	Hybrid HWR/Hybrid HWM Measures
Certified Electronic Health Record Technology (CEHRT)	2015 Edition Cures Update Criteria	2015 Edition Cures Update Criteria
CMS QRDA Category I HQR Implementation Guide (IG)	2023 IG	2022 IG
Technical Electronic Specifications	2022 CMS Annual Update for the CY 2023 reporting period (published in 2022) https://ecqi.healthit.gov/eh-cah?qt-tabs_eh=0	2021 CMS Annual Update for the CY 2022 reporting period (published in 2021) https://ecqi.healthit.gov/eh-cah?qt-tabs_eh=3&globalyearfilter=2022
File Format: • 1 QRDA file, per patient, per quarter • Contain five key elements	QRDA Category I File	QRDA Category I File

Voluntary Reporting of Hybrid HWR and Hybrid HWM Measure Data

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FY 2025 Hybrid HWR and Hybrid HWM Measures

CMS Program	Hospital IQR Program
Reporting Period	2024 **Voluntary** Reporting
Measurement Period	7/1/2022–6/30/2023
Data Submission Deadline	October 2, 2023
Hospital-Specific Report Distribution	Anticipate Spring 2024
Public Reporting/Annual Payment Update	N/A
CEHRT	2015 Edition Cures Update Criteria

Specifications
- Hybrid HWR (CMS529v2): [Core Clinical Data Elements (CCDEs) for the Hybrid HWR Measure with Claims and Electronic Health Record Data](#)
- Hybrid HWM (CMS844v2): [CCDEs for the Hybrid HWM Measure](#)

Reporting Resources
- eCQI Resource Center: Eligible Hospital/Critical Access Hospital eCQMs [page](#), Hybrid Measures tab, 2022 reporting period
- QualityNet.CMS.gov: [Hospitals-Inpatient/Measures (Hybrid)](#)

Hybrid Measure Overview

➡ The Hybrid HWR measure was adopted for use in the FY 2020 final rule. The Hybrid HWM measure was adopted for use in the FY 2022 final rule.

➡ Hybrid measures contain claim-based specifications and electronic specifications.

➡ Hybrid measures differ from the claims-only measures as they merge electronic health record (EHR) data elements with claims data to calculate the risk-standardized readmission and mortality rates.

➡ To calculate hybrid measures, administrative data from the EHR (linking variables) are needed to link CCDEs to claims data.

Voluntary Reporting of the Hybrid HWR Measure

Hospitals participate by submitting 13 CCDEs (6 vital signs + 7 laboratory test results) and 6 linking variables by October 2, 2023.

6 Vital Signs	7 Laboratory Test Results	6 Linking Variables
Heart rate	Hematocrit	CMS Certification Number (CCN)
Respiratory rate	White blood cell count	Health Insurance Claim Number (HICN) or Medicare Beneficiary Identifier (MBI)
Temperature	Sodium	Date of Birth
Systolic blood pressure	Potassium	Sex
Oxygen saturation	Bicarbonate	Admission Date
Weight	Creatinine	Discharge Date
	Glucose	

https://ecqi.healthit.gov/ecqm/hybrid/2022/cms529v2

Voluntary Reporting of the Hybrid HWM Measure

Hospitals participate by submitting 10 CCDEs (4 vital signs + 6 laboratory test results) and 6 linking variables by October 2, 2023.

4 Vital Signs	6 Laboratory Test Results	6 Linking Variables
Heart rate	Hematocrit	CCN
Temperature	White blood cell count	HICN or MBI
Systolic blood pressure	Sodium	Date of Birth
Oxygen saturation	Bicarbonate	Sex
	Creatinine	Admission Date
	Platelet	Discharge Date

https://ecqi.healthit.gov/ecqm/hybrid/2022/cms844v2

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Hybrid HWR & Hybrid HWM Measure Data Submission Requirements

Hybrid HWR Measure	Hybrid HWM Measure
Submit 13 CCDEs (6 vital signs + 7 laboratory test results) **+** six linking variables via QRDA Category I files	Submit 10 CCDEs (4 vital signs + 6 laboratory test results) **+** six linking variables via QRDA Category I files

To successfully meet Hospital IQR Program participation requirements for the hybrid measures, hospitals will need to:

✓ Submit **linking variables on 95% or more of discharges** with a Medicare FFS claims for the same hospitalization during the measurement period.

✓ Report **vital signs for 90% or more of the hospital discharges** for Medicare FFS patients, 65 years or older (between 65 and 94 years for the Hybrid HWM measure) in the measurement period (as determined from the claims submitted to CMS for admissions that ended during the same reporting period).

✓ Submit the **laboratory test results for 90% or more of discharges** for non-surgical patients, meaning those not included in the surgical specialty cohort of the Hybrid HWR measure (or the surgical divisions of the Hybrid HWM measure).

Resources for Voluntary Reporting

The eCQI Resource Center contains the electronic specifications of the hybrid measures: https://ecqi.healthit.gov/eh-cah?qt-tabs_eh=3&globalyearfilter=2022

2022 Reporting Period Eligible Hospital / Critical Access Hospitals
Voluntary hybrid measures do not count toward eCQM submission.

Title	Short Name	CMS eCQM ID	NQF Number	Meaningful Measure	Notes
Core Clinical Data Elements for the Hybrid Hospital-Wide (All-Condition, All-Procedure) Risk-Standardized Mortality Measure (HWM)	Hybrid HWM	CMS844v2	Not Applicable	Risk Adjusted Mortality	• This measure is not in the Data Element Repository ⓘ at this time and is expected to be included in the Spring of 2022.
Core Clinical Data Elements for the Hybrid Hospital-Wide Readmission (HWR) Measure with Claims and Electronic Health Record Data	Hybrid HWR	CMS529v2	Not Applicable	Admissions and Readmissions to Hospitals	

2022 Reporting Period Eligible Hospital / Critical Access Hospital Resources

For Use ⬍	eCQM Resources	Short Description	Published ⬍
2022 Q3–2023 Q2	Implementation Checklist eCQM Annual Update	Implementation checklist ⓘ	--
2022 Q3–2023 Q2	eCQM Specifications for Hybrid CMS529v2 (ZIP)	Hybrid measure technical specifications ⓘ	May 2021
2022 Q3–2023 Q2	eCQM Specifications for CMS844v2 (ZIP)	Hybrid measure technical specifications ⓘ	May 2021
2022 Q3–2023 Q2	eCQM and Hybrid Measure Value Sets ⧉	Value sets used with eCQMs and Hybrid Measures ⓘ	May 2021
2022 Q3–2023 Q2	Binding Parameter Specification (BPS) (ZIP) ⧉	Value set metadata ⓘ	May 2021
2022 Q3–2023 Q2	Technical Release Notes Hybrid for CMS529v2 (Excel)	Year over year changes to eCQM logic and terminology ⓘ	May 2021

Resources for Voluntary Reporting

Claims-based specifications of the hybrid measure are/will be located on the QualityNet website at these pages.

https://qualitynet.cms.gov > Hospitals - Inpatient > Measures > Hybrid Measure > Methodology

https://qualitynet.cms.gov > Hospitals - Inpatient > Measures > Readmission Measures > Methodology

Hybrid Measure Methodology

The measure methodology for the Hybrid Hospital-Wide Readmission (HWR) and Hybrid Hospital-Wide Mortality (HWM) measures contains claims-based specifications and electronic specifications. This is because the Hybrid measures merge electronic health record (EHR) data elements with claims data to calculate the risk-standardized rates.

The measure specifications reports contain all the specifications for the Hybrid measures. Additionally, the electronic measure specifications documents describe how the electronic core clinical data elements (CCDEs) should be extracted from the EHR for the risk model for the Hybrid measures.

2023 Voluntary Reporting - Measure Specifications for the Hybrid HWR Measure

- Hybrid HWR Measure with Electronic Health Record Extracted Risk Factors
- For the electronic specifications of the measure, please refer to the 2021 Reporting Period for the Hybrid Measures on the eCQI Resource Center

Additional resources for the 2023 Voluntary Reporting period will be posted at a later date.

2024 Voluntary Reporting - Measure Specifications for the Hybrid HWR and Hybrid HWM Measures

- Hybrid HWR Measure with Electronic Health Record Extracted Risk Factors
- Hybrid HWM development methodology report
- For the electronic specifications of the measures, please refer to 2022 Reporting Period for the Hybrid Measures on the eCQI Resource Center

Additional resources for the 2024 Voluntary Reporting period will be posted at a later date.

Reports for 2024 voluntary reporting are not yet posted.

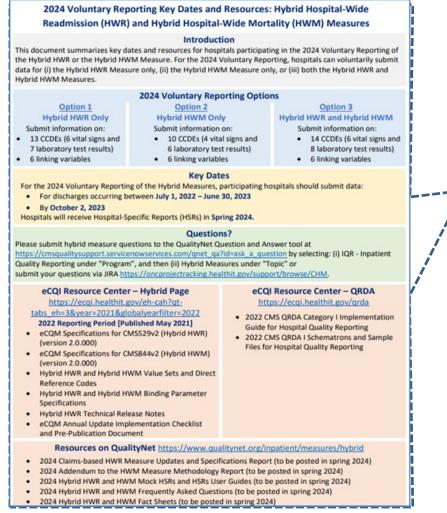| File Name	File Type	File Size	
2022 Condition-Specific Readmission Measure Updates and Specifications Report: Acute Myocardial Infarction (AMI), Heart Failure (HF), and Chronic Obstructive Pulmonary Disease (COPD), and Pneumonia	PDF	1.3 MB	Download
2022 AMI Readmission Measure Code Specifications Supplemental File	XLSX	719 KB	Download
2022 COPD Readmission Measure Code Specifications Supplemental File	XLSX	690 KB	Download
2022 HF Readmission Measure Code Specifications Supplemental File	XLSX	705 KB	Download
2022 Pneumonia Readmission Measure Code Specifications Supplemental File	XLSX	711 KB	Download
2022 Procedure-Specific Readmission Measure Updates and Specifications Report: Total Hip Arthroplasty and/or Total Knee Arthroplasty (THA/TKA) and Coronary Artery Bypass Graft (CABG)	PDF	991 KB	Download
2022 CABG Readmission Measure Code Specifications Supplemental File	XLSX	923 KB	Download
2022 THA/TKA Readmission Measure Code Specifications Supplemental File	XLSX	1.1 MB	Download
2022 All-Cause Hospital-Wide Measure Updates and Specifications Report: Hospital-Wide Readmission	PDF	1.8 MB	Download
2022 Hospital-Wide Readmission Measure Code Specifications Supplemental File	XLSX	770 KB	Download

Acronyms

Use 2022 IG: Hybrid Measure/ CCDE Voluntary Submission

- The 2022 IG must be used for hybrid measure/CCDE voluntary submission for reporting 2022–2023 data.

  - Measurement period: July 1, 2022–June 30, 2023

  - Submission deadline: October 2, 2023

- Refer to Section 6: Hybrid Measure/CCDE Voluntary Submission

https://ecqi.healthit.gov/eh-cah?qt-tabs_eh=3

Voluntary Reporting Key Dates and Resources Document

2024 Voluntary Reporting Key Dates and Resources: Hybrid Hospital-Wide Readmission (HWR) and Hybrid Hospital-Wide Mortality (HWM) Measures

Introduction
This document summarizes key dates and resources for hospitals participating in the 2024 Voluntary Reporting of the Hybrid HWR or the Hybrid HWM Measure. For the 2024 Voluntary Reporting, hospitals can voluntarily submit data for (i) the Hybrid HWR Measure only, (ii) the Hybrid HWM Measure only, or (iii) both the Hybrid HWR and Hybrid HWM Measures.

2024 Voluntary Reporting Options

Option 1 Hybrid HWR Only	Option 2 Hybrid HWM Only	Option 3 Hybrid HWR and Hybrid HWM
Submit information on: • 13 CCDEs (6 vital signs and 7 laboratory test results) • 6 linking variables	Submit information on: • 10 CCDEs (4 vital signs and 6 laboratory test results) • 6 linking variables	Submit information on: • 14 CCDEs (6 vital signs and 8 laboratory test results) • 6 linking variables

Key Dates
For the 2024 Voluntary Reporting of the Hybrid Measures, participating hospitals should submit data:
- For discharges occurring between July 1, 2022 – June 30, 2023
- By October 2, 2023
Hospitals will receive Hospital-Specific Reports (HSRs) in Spring 2024.

Questions?
Please submit hybrid measure questions to the QualityNet Question and Answer tool at https://cmsqualitysupport.servicenowservices.com/qnet_qa?id=ask_a_question by selecting: (i) IQR - Inpatient Quality Reporting under "Program", and then (ii) Hybrid Measures under "Topic" or submit your questions via JIRA https://oncprojecttracking.healthit.gov/support/browse/CHM.

eCQI Resource Center – Hybrid Page
https://ecqi.healthit.gov/eh-cah?qt-tabs_eh=3&year=2021&globalyearfilter=2022
2022 Reporting Period [Published May 2021]
- eCQM Specifications for CMS529v2 (Hybrid HWR) (version 2.0.000)
- eCQM Specifications for CMS844v2 (Hybrid HWM) (version 2.0.000)
- Hybrid HWR and Hybrid HWM Value Sets and Direct Reference Codes
- Hybrid HWR and Hybrid HWM Binding Parameter Specifications
- Hybrid HWR Technical Release Notes
- eCQM Annual Update Implementation Checklist and Pre-Publication Document

eCQI Resource Center – QRDA
https://ecqi.healthit.gov/qrda
- 2022 CMS QRDA Category I Implementation Guide for Hospital Quality Reporting
- 2022 CMS QRDA I Schematrons and Sample Files for Hospital Quality Reporting

Resources on QualityNet https://www.qualitynet.org/inpatient/measures/hybrid
- 2024 Claims-based HWR Measure Updates and Specifications Report (to be posted in spring 2024)
- 2024 Addendum to the HWM Measure Methodology Report (to be posted in spring 2024)
- 2024 Hybrid HWR and HWM Mock HSRs and HSRs User Guides (to be posted in spring 2024)
- 2024 Hybrid HWR and HWM Frequently Asked Questions (to be posted in spring 2024)
- 2024 Hybrid HWR and HWM Fact Sheets (to be posted in spring 2024)

2022 Reporting Period Eligible Hospital / Critical Access Hospital Resources

For Use	eCQM Resources	Short Description	Published
2022 Q3-2023 Q2	Implementation Checklist eCQM Annual Update	Implementation checklist	--
2022 Q3-2023 Q2	eCQM Specifications for Hybrid CMS529v2 (ZIP)	Hybrid measure technical specifications	May 2021
2022 Q3-2023 Q2	eCQM Specifications for CMS844v2 (ZIP)	Hybrid measure technical specifications	May 2021
2022 Q3-2023 Q2	eCQM and Hybrid Measure Value Sets	Value sets used with eCQMs and Hybrid Measures	May 2021
2022 Q3-2023 Q2	Binding Parameter Specification (BPS) (ZIP)	Value set metadata	May 2021
2022 Q3-2023 Q2	Technical Release Notes Hybrid for CMS529v2 (Excel)	Year over year changes to eCQM logic and terminology	May 2021
2022 Q3-2023 Q2	2022 CMS QRDA I Implementation Guide for Hospital Quality Reporting (PDF)	Format for reporting eCQMs to CMS	Nov 2021
2022 Q3-2023 Q2	2022 CMS QRDA I Schematrons and Sample Files (ZIP)	Rules to validate eCQM reports with samples	Nov 2021
2022 Q3-2023 Q2	2024 Voluntary Reporting Key Dates and Resources: Hybrid HWR and Hybrid HWM Measures (PDF)	Key dates and resources for hybrid measure reporting	Jan 2022
2022 Q3-2023 Q2	eCQM Annual Update Pre-Publication Document (PDF)	Standards and code system versions for the eCQM Annual Update	Feb 2021

2024 Voluntary Hybrid Measure Reporting Resources

- 2022 CMS QRDA Category I IG for HQR (Updated November 2021)
  - QRDA page of the [eCQI Resource Center](#)
  - Direct link: https://ecqi.healthit.gov/sites/default/files/QRDA-HQR-2022-CMS-IG-v1.1-508.pdf
- Accompanying Schematrons and sample files and any applicable updates (Updated November 2021)
  - QRDA page of the [eCQI Resource Center](#)
  - Direct link: https://ecqi.healthit.gov/sites/default/files/2022-CMS-QRDA-I-v1.0.1-Support-Files.zip
- QRDA Known Issues Project
  - [Office of the National Coordinator (ONC) QRDA Known Issues Project](#)

Hybrid Measure Q&A Resources

Stakeholders may submit questions about the Hybrid measures:

✓ Use the ONC JIRA Tool CMS Hybrid Measure Issue Tracker for technical questions on implementation (e.g., specifications, logic, value sets, QRDA): https://oncprojectracking.healthit.gov/support/projects/CHM/summary

✓ Use the QualityNet Question & Answer Tool for questions about the measure's implementation or claims-based specifications: https://cmsqualitysupport.servicenowservices.com/qnet_qa?id=ask_a_question,

➢ Under Program, select Inpatient Quality Reporting (IQR).

➢ Under Topic, select Hybrid Measures.

Please send us your feedback about resources that support hybrid measure reporting.

CY 2023 eCQM Reporting Overview

April 17, 2023

CY 2023 eCQM Reporting Requirements

Program	Hospital IQR Program* Medicare Promoting Interoperability Program**
Reporting Period	January 1, 2023 – December 31, 2023
Annual Submission Deadline	February 29, 2024, 11:59 p.m. Pacific Time
eCQM Measure Set	13 available eCQMs: ED-2, PC-05, STK-2, STK-3, STK-5, STK-6, VTE-1, VTE-2, ePC-02, ePC-07, HH-01, HH-02, and Safe Use of Opioids–Concurrent Prescribing***
Total number of eCQMs <u>per quarter</u>	3 self-selected eCQMs plus Safe Use of Opioids–Concurrent Prescribing eCQM***
Total number of quarters to report per calendar year	4 quarters (Q1, Q2, Q3 and Q4 of 2023) (eCQMs must be the same across quarters)
CEHRT	2015 Edition Cures Update

*The submission of CY 2023 eCQM data will affect the FY 2025 payment determination.
**The submission of CY 2023 eCQM data will affect the FY 2025 payment determination for eligible hospitals and affect the FY 2023 payment determination for CAHs.
***Mandatory for the CY 2023 reporting period and subsequent years

CY 2023 eCQM Measure Set

Mandatory	
Safe Use of Opioids – Concurrent Prescribing* *(CMS506v5)*	
ePC-02* *(CMS334v4)* Cesarean Birth	**ePC-07*** *(CMS1028v11)* Severe Obstetric Complications
HH-01 *(CMS816v2)* Hospital Harm -Severe Hypoglycemia	**HH-02** *(CMS871v2)* 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

*This eCQM is mandatory for the CY 2024 reporting period.
**This eCQM will be removed from the measure set beginning with the CY 2024 reporting period.

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Acronyms

CY 2023 eCQM Reporting Resources

- [QRDA page](#) of the [eCQI Resource Center](#)
  - Located under the 2023 Reporting and Performance Period
    - 2023 CMS QRDA Category I IG for HQR
    - 2023 CMS QRDA I Schematrons and Sample Files for HQR
- QRDA Known Issues Project
  - [ONC QRDA Known Issues Project](#)

Reviewing the 2023 CMS QRDA Category I IG for HQR

April 17, 2023

Background

- CMS published the 2023 CMS QRDA Category I IG, Schematron, and Sample File for HQR.
  - https://ecqi.healthit.gov/qrda
- The 2023 CMS QRDA Category I IG outlines requirements for Eligible Hospitals and CAHs to report eCQMs for the CY 2023 reporting period for the following programs:
  - Hospital IQR Program
  - Medicare Promoting Interoperability Program
  - Hospital Outpatient Quality Reporting (OQR) Program (voluntary)
- The 2023 CMS QRDA Category I Schematron is a companion to the 2023 CMS QRDA Category I IG and allows for computerized validation of QRDA documents against the IG requirements.

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Comparing 2022 and 2023 IGs

	2022	2023
Reporting Period	**2022** reporting period	**2023** reporting period
eCQM Specifications	• For eCQM specifications for Eligible Hospitals/CAHs • Published May 2021 • Based on Clinical Quality Language (CQL)-based Health Quality Measure Format (HQMF) IG Release 1 Standard for Trial Use (STU) 4	• For eCQM specifications for Eligible Hospitals/CAHs • Published May 2022 (applicable addenda) • Visit the eCQI Resource Center Eligible Hospital/CAH eCQMs page and select 2023 reporting period • Based on the CQL-based HQMF IG Release 1 STU 4.1
Value Sets	eCQM Value Sets for Eligible Hospitals/CAHs for the 2022 reporting period	• Select 2023 reporting period on the eCQI Resource Center's Eligible Hospital/CAH eCQMs page • eCQM and Hybrid Measure Value Sets • eCQM Direct Reference Codes List

Comparing 2022 and 2023 IGs

	2022	2023
Reporting Period	**2022** reporting period	**2023** reporting period
Base Health Level Seven International (HL7) Standard	HL7 IG for Clinical Document Architecture (CDA) Release 2: QRDA Category I, Release 1, STU Release 5.2 with errata	HL7 IG for CDA Release 2: **QRDA Category I,** Release 1, **STU Release 5.3 with errata** • HL7 QRDA Category I product page • December 2022 errata • Free HL7 account required to access the standard
Quality Data Model (QDM)	Supports QDM V5.5	Supports QDM V5.6

2023 IG Updates: Document-level Templates

Two document-level templates have a new version.

2022 CMS QRDA Category I IG for HQR	2023 CMS QRDA Category I IG for HQR
QRDA Category I Report – CMS (V7) urn:hl7ii:2.16.840.1.113883.10.20.24.1.3:2020-02-01	QRDA Category I Report – CMS (V8) urn:hl7ii:2.16.840.1.113883.10.20.24.1.3:**2022-02-01**
Conforms to QDM-Based QRDA (V7) template (identifier:urn:hl7ii:2.16.840.1.113883.10.20.24.1.2:2019-12-01)	Conforms to QDM-Based QRDA (V8) template (identifier:urn:hl7ii:2.16.840.1.113883.10.20.24.1.2:**2021-08-01**)

The correct template versions for the four required document-level templates must be used.

```
<!-- US Realm Header (V3) -->
<templateId root="2.16.840.1.113883.10.20.22.1.1" extension="2015-08-01"/>
<!-- QRDA Category I Framework (V4) -->
<templateId root="2.16.840.1.113883.10.20.24.1.1" extension="2017-08-01"/>
<!-- QDM-based QRDA (V8) -->
<templateId root="2.16.840.1.113883.10.20.24.1.2" extension="2021-08-01"/>
<!-- QRDA Category I Report - CMS (V8) -->
<templateId root="2.16.840.1.113883.10.20.24.1.3" extension="2022-02-01"/>
```

2023 IG Updates:
CMS Program Name

CMS program names are specified in ClinicalDocument/informationRecipient.
- Removed HQR_IQR_VOL
- Added HQR_OQR

	2022	2023
Reporting Period	**2022** reporting period	**2023** reporting period
CMS Program Names		

2023 IG Updates: Telecom

- ClinicalDocument/recordTarget

2022 CMS QRDA Category I IG for HQR	2023 CMS QRDA Category I IG for HQR
Base HL7 QRDA I IG: SHALL contain at least one [1..*] telecom	Base HL7 QRDA I IG: SHALL contain at least one [1..*] telecom
n/a	Added a SHOULD requirement for sending both telephone and email address for a patient in the document header

2023 IG Updates: Section-level Templates

2022 CMS QRDA Category I IG for HQR	2023 CMS QRDA Category I IG for HQR
Measure Section QDM	Measure Section QDM • Same as 2022
Reporting Parameters Section – CMS	Reporting Parameters Section – CMS • Same as 2022 • Must be one of the CY 2023 allowable discharge quarters
Patient Data Section QDM (V7) – CMS (2.16.840.1.113883.10.20.24.2.1.1:2020-02-01) • Conforms to Patient Data Section QDM (V7) template (identifier:urn:hl7ii:2.16.840.1.113883.10.20.24.2.1:2019-12-01) • Supports QDM V5.5	**Patient Data Section QDM (V8) – CMS** (2.16.840.1.113883.10.20.24.2.1.1:**2022-02-01**) • Conforms to **Patient Data Section QDM (V8)** template (identifier:urn:hl7ii:2.16.840.1.113883.10.20.24.2.1:**2021-08-01**) • Supports **QDM V5.6**

2023 IG Updates: HQR Validations

Conformance #	**2022 CMS QRDA Category I IG for HQR**	**2023 CMS QRDA Category I IG for HQR**
CMS_0082	The EHR system needs to be certified to 2015 Edition for CY 2022/PY 2024.	The EHR system needs to be certified to 2015 Edition Cures Update for CY 2023/PY 2025.
CMS_0085	CMS program name for hybrid measure/CCDE submissions must be HQR_IQR_VOL	CMS program name for hybrid measure/CCDE submissions must be HQR_IQR.
CMS_0084	Either the Patient HICN or MBI is required for hybrid measure/CCDE submissions.	Removed CMS_0084

2023 IG Updates: Reporting "result as *type*"

New section 5.2.3.3 Reporting "result as *type*" follows:

- CQL supports Choice type, which is defined by a list of component types. In cases where result values are cast as a specific type in measure specification, such as "result as Integer", "result as Quantity", and "result as DateTime", result values shall also be cast to their corresponding HL7 V3 data types when reporting in QRDA to ensure appropriate evaluation.

- For example, the following definition specified in CMS334v4 has result cast as Integer:

      Last(["Assessment, Performed": "[#] Births.preterm"] PretermBirth
          where PretermBirth.relevantDatetime 42 weeks or less before
      PCMaternal."LastTimeOfDelivery"(Encounter)
            and PretermBirth.result is not null
          sort by relevantDatetime
).result as Integer

  In this case, when report Assessment Performed result in QRDA, observation/value shall be cast to the INT data type. When report result as Quantity and as DateTime, they shall be submitted using the PQ and TS data types respectively.

2023 IG Updates:
Hybrid Measure/CCDE Submission

- The 2023 IG must be used for hybrid measure/CCDE mandatory submission for reporting 2023–2024 data.
  - o Measurement period: July 1, 2023, through June 30, 2024
  - o Submission deadline: September 30, 2024
- The 2023 reporting period hybrid measure specification must be used.
  - o Visit the eCQI Resource Center Eligible Hospital/CAH eCQMs web page, and select the Hybrid Measures tab. Then, select the 2023 Reporting Period.

2023 IG Updates:
Hybrid Measure/CCDE Submission

Language revised

	2022 CMS QRDA Category I IG for HQR	**2023 CMS QRDA Category I IG for HQR**
Language	n/a	Added "Hybrid Measures/CCDE submissions SHALL use the CMS Program Name HQR_IQR."
Language	For hybrid measure voluntary submissions, it is recommended for the submitters to submit "unit" of the laboratory test result or physical exam result for each of the CCDEs using appropriate Unified Code for Units of Measure (UCUM) codes, but submitters may submit units in the forms used in their EHRs for the 2022 reporting period.	Added Table 19: Hybrid HWM and HWR UCUM Codes Revised the language to: "For each core clinical data element specified in the Hybrid HWM and Hybrid HWR measures, it is recommended to report values using one of the appropriate UCUM units of measurement listed in Table 19."

2023 IG Key Elements for Succession Management

There were no changes to the five key elements used for succession management from the 2022 IG:

- CCN
- CMS Program Name
- EHR Patient ID
- EHR Submitter ID
- Reporting period specified in the Reporting Parameters Section

High-Level Changes to the HL7 Base Standard QRDA Category I IG for 2023 CMS QRDA Category I IG for HQR

April 17, 2023

Base HL7 QRDA Category I IG for CY 2023

HL7 IG for CDA Release 2: QRDA Category I, Release 1, STU Release 5.3 with December 2022 Errata

- Direct link: https://www.hl7.org/documentcenter/public/standards/dstu/CDAR2_IG_QRDA_I_R1_STU5.3_2021NOV_2022DEC_with_errata.zip

- HL7 QRDA Category I Product Page: http://www.hl7.org/implement/standards/product_brief.cfm?product_id=35

Publication Date	Version	Description
December 2022 Current Version	STU 5.3 with errata	QRDA I Release 1, STU Release 5.3, Supports QDM 5.6 CDAR2_IG_QRDA-I_R1_STU5.3_2021NOV_2022DEC_with_errata Note: for the 2023 reporting period (CMS and The Joint Commission)

Base HL7 QRDA Category I IG for CY 2023

- Main updates support QDM V5.6 changes.

- December 2022 Errata updates include the following:

  - o Addressed approved [HL7 Jira](#) trackers for the IG

  - o Incorporated September 2022 (Errata #7) errata changes to the HL7 CDA R2 Implementation Guide: Consolidated CDA Templates for Clinical Notes - US Realm, Release 2.1 that are applicable to QRDA I STU5.3.

  - o Detailed errata changes in the Errata List spreadsheet: 2022DEC_QRDA_I_R1_STU5.3_Errata_List.xlsx

Quality Data Model Changes QDM V5.6

- For detailed QDM changes, review the [QDM V5.6](#) Change Log.
- High-level summary of the QDM datatypes changes are below.
  - Retired "Device, Applied"
  - Retired "Encounter, Performed" negation rationale
  - Retried "Procedure, Performed" priority attribute
  - Added "Encounter, Performed" class attribute
  - Added existing relatedTo attribute to Procedure, Performed", "Medication, Order", "Medication, Dispensed", "Encounter, Performed", "Intervention, Performed", "Laboratory Test, Performed", "Diagnostic Study, Performed", "Physical Exam, Performed"
  - Added Location Entity

Acronyms

HL7 QRDA Category I IG STU R5.3 Changes

- Changes include the removal of these templates:
  - Device Applied
  - Encounter Performed Act
    - "Encounter, Performed" now uses the Encounter Performed template (urn:hl7ii:2.16.840.1.113883.10.20.24.3.133:2021-08-01) directly.
- Most QDM data type corresponding QRDA entry templates have a new version (with extension 2021-08-01) because Entity Location was added to many QDM data types.

HL7 QRDA Category I IG STU R5.3 Errata Changes

- See the 2022DEC_QRDA_I_R1_STU5.3_Errata_List.xlsx spreadsheet for the detailed list of errata changes.

- Highlights include the following:

  - Result (V4) Template
    - Updated the result dateTime conformance statement to allow either a @value or a nullFlavor instead of requiring @value

  - Medication Dispensed (V7)
    - Added the missing supply attribute (an entryRelationship to "Medication Supply Request" template)

  - Added clarification on how to represent refill using supply.repeatNumber
    - supply.repeatNumber = initial fill + refills, therefore to calculate the number of refills using supply.repeatNumber, refills = repeatNumber – 1

ONC QRDA JIRA
Issue Tracker and VSAC

- For questions related to this guidance, the QRDA Category I IGs, or Schematrons, visit the ONC QRDA JIRA Issue Tracker: https://oncprojectracking.healthit.gov/support/projects/QRDA

- Value Set Authority Center (VSAC): https://vsac.nlm.nih.gov

Additional Resources

April 17, 2023

eCQI Resource Center: Home Page

Visit the home page to find an eCQM by reporting period.
Enter a measure title or enter a CMS ID. Then, click Find an eCQM

eCQI Resource Center: Tools and Resources

Visit the eCQI Tools and Key Resources page for information on development, implementation, and reporting tools and resources (Data Element Repository, VSAC and ONC JIRA).

ONC QRDA
Known Issues Project

Visit the ONC QRDA Known Issues Project on the ONC Project Tracking System

QRDA Known Issues Summary

The Quality Reporting Document Architecture (QRDA) Known Issues dashboard provides implementation information for QRDA Implementation Guides (IGs) or supporting documents with known technical issues for which a solution is under development but may not be published. This includes issues such as: discrepancies between conformance assertions and message text, non-critical conformance assertion errors and typographical errors.

Acronyms

eCQM and Hybrid Measure Support Resources

Topic	Contact
• HQR System (HCQIS Access Roles and Profile [HARP], vendor roles, uploading files, reports, troubleshooting file errors) • Medicare Promoting Interoperability Program (attestation, objectives, policy)	Center for Clinical Standards and Quality (CCSQ) Service Center (866) 288-8912 qnetsupport@hcqis.org
Hospital IQR Program and Policy	Hospital Inpatient Support Team (844) 472-4477 https://cmsqualitysupport.servicenowservices.com/qnet_qa
• eCQM Specifications (code sets, measure logic, measure intent) • QRDA-related Questions (CMS Implementation Guide, Sample Files and Schematrons) • Hybrid Measures – Technical (specifications, logic, value sets, QRDA)	ONC JIRA eCQM Issue Tracker https://oncprojectracking.healthit.gov/support/projects/CQM/summary ONC JIRA QRDA Issue Tracker https://oncprojectracking.healthit.gov/support/projects/QRDA/summary ONC JIRA CMS Hybrid Measure Issue Tracker https://oncprojectracking.healthit.gov/support/browse/CHM
Hybrid Measures – Non-Technical (policy, measure methodology)	Yale New Haven Health Services Corporation/ Center for Outcomes Research & Evaluation https://cmsqualitysupport.servicenowservices.com/qnet_qa
eCQM Data Validation	Validation Support Team (validation@telligen.com)

Question & Answer Session

Continuing Education Approval

This program has been approved for [continuing education credit](#) for the following boards:

- **National credit**
  - Board of Registered Nursing (Provider #16578)
- **Florida-only credit**
  - Board of Clinical Social Work, Marriage & Family Therapy and Mental Health Counseling
  - Board of Registered Nursing
  - Board of Nursing Home Administrators
  - Board of Dietetics and Nutrition Practice Council
  - Board of Pharmacy

Note: To verify approval for any other state, license, or certification, please check with your licensing or certification board.

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Acronyms