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– or –
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F5 Key
Top Row of Keyboard

Location of Buttons
Refresh
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Hospital Inpatient Value, Incentives, and Quality Reporting (VIQR) Outreach and Education Support Contractor (SC)

Today’s Presentation
CMS QRDA Category I Implementation Guide Changes for CY 2019 Hospital Quality Reporting

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Alignment of Electronic Clinical Quality Measures (eCQMs) Lead Hospital Inpatient Value, Incentives, and Quality Reporting Outreach and Education Support Contractor

March 27, 2019
Purpose

This presentation will provide:

• An overview of the changes to the 2019 CMS Quality Reporting Document Architecture (QRDA) Category I Implementation Guide (IG) for Hospital Quality Reporting (HQR), including changes made from Calendar Year (CY) 2018 to CY 2019.

• A high-level overview of updates to the Health Level Seven International (HL7) base standard QRDA Category I IG.

• A review of available resources.
Objectives

At the conclusion of this presentation, participants will be able to:

- Identify changes and updates to the 2019 CMS QRDA Category I IG for HQR.
- Recognize high level changes to the HL7 base standard QRDA Category I IG.
- Locate resources related to the CMS and HL7 IGs.
Changes and Updates to the 2019 CMS QRDA Category I IG for HQR
Background

• The 2019 CMS QRDA Category I IG for HQR was published in May 2018.
  o Available at the eCQI Resource Center and this direct link:

• The updated 2019 CMS QRDA Category I Schematrons for HQR was published in February 2019.
  o https://ecqi.healthit.gov/system/files/eCQM_2019SchematronSampleFileHQR_0_1.zip
The 2019 CMS QRDA Category I IG for HQR provides technical instructions for QRDA Category I reporting for eligible hospitals (EHs) and critical access hospitals (CAHs) reporting eCQMs for the CY 2019 reporting period for the following programs:

- Hospital Inpatient Quality Reporting (IQR) Program
- Medicare and Medicaid Promoting Interoperability (PI) Programs (formerly known as the Medicare and Medicaid EHR Incentive Programs)

The 2019 CMS QRDA Category I Schematron is a companion to the 2019 CMS QRDA Category I IG for HQR and allows for computerized validation of QRDA Category I documents against the IG requirements.
## Comparison of 2019 to 2018 IGs

<table>
<thead>
<tr>
<th></th>
<th>2019</th>
<th>2018</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Reporting Period</strong></td>
<td>2019 reporting period</td>
<td>2018 reporting period</td>
</tr>
<tr>
<td><strong>eCQM Specifications</strong></td>
<td>To be used with eCQM specifications for EHs/CAHs published <strong>May 2018 and any applicable addenda</strong>&lt;br&gt;• <a href="https://ecqi.healthit.gov/system/files/EH_CAH_eCQM_2018-05.zip">https://ecqi.healthit.gov/system/files/EH_CAH_eCQM_2018-05.zip</a>&lt;br&gt;eCQMs are specified based on the Clinical Quality Language (CQL)-based Health Quality Measure Format (HQMF) Implementation Guide</td>
<td>Used with eCQM specifications for EHs/CAHs for the 2018 reporting period&lt;br&gt;eCQMs were specified based on the Quality Data Model (QDM)-based HQMF Implementation Guide</td>
</tr>
<tr>
<td><strong>Value Sets</strong></td>
<td>eCQM Value Sets for EHs/CAHs published September 17, 2018 and any applicable addenda&lt;br&gt;• <a href="https://vsac.nlm.nih.gov/download/ecqm?rel=20180917">https://vsac.nlm.nih.gov/download/ecqm?rel=20180917</a></td>
<td>eCQM Value Sets for EHs/CAHs for the 2018 reporting period</td>
</tr>
<tr>
<td>Base HL7 Standard</td>
<td>2019</td>
<td>2018</td>
</tr>
<tr>
<td>-------------------</td>
<td>------</td>
<td>------</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Quality Data Model (QDM)</th>
<th>2019</th>
<th>2018</th>
</tr>
</thead>
</table>
Comparison of 2019 to 2018 IGs
(continued)

<table>
<thead>
<tr>
<th>Key Elements for Succession Management</th>
<th>2019</th>
<th>2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>4.3.1 QRDA Category I Report Document Succession Management for HQR</td>
<td>The most recently submitted and accepted production QRDA Category I file will overwrite the original file based on the exact match of <strong>five</strong> key elements identifying the file: CCN, CMS Program Name, EHR Patient ID, <strong>EHR Submitter ID</strong>, and the reporting period specified in the Reporting Parameters Section.</td>
<td>The most recently submitted and accepted Production QRDA Category I file will overwrite the original file based on the exact match of <strong>four</strong> key elements identifying the file: CCN, CMS Program Name, EHR Patient ID, and the reporting period specified in the Reporting Parameters Section.</td>
</tr>
</tbody>
</table>
### Comparison of CMS Program Names from 2019 to 2018 IG

<table>
<thead>
<tr>
<th>2019</th>
<th>Program Names</th>
<th>2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>HQR_PI</td>
<td>Hospital Quality Reporting for the Promoting Interoperability Program</td>
<td>HQR_EHR</td>
</tr>
<tr>
<td>HQR_IQR</td>
<td>Hospital Quality Reporting for the Inpatient Quality Reporting (IQR) Program</td>
<td>HQR_IQR</td>
</tr>
<tr>
<td>HQR_PI_IQR</td>
<td>Hospital Quality Reporting for the Promoting Interoperability Program and the IQR Program</td>
<td>HQR_EHR_IQR</td>
</tr>
<tr>
<td>HQR_IQR_VOL</td>
<td>Hospital Quality Reporting for IQR Program voluntary submissions</td>
<td>HQR_IQR_VOL</td>
</tr>
<tr>
<td>CDAC_HQR_EHR</td>
<td>(for Clinical Data Abstraction Center [CDAC] users)</td>
<td>CDAC_HQR_EHR</td>
</tr>
<tr>
<td>(removed)</td>
<td></td>
<td>HQR_EPM_VOL</td>
</tr>
<tr>
<td></td>
<td></td>
<td>(Hospital Quality Reporting for Episode Payment Model voluntary submissions)</td>
</tr>
</tbody>
</table>

CMS program names are specified in ClinicalDocument/informationRecipient.
No changes were made to the patient identifier requirements from the 2018 IG.

- Patient Identification Number is required.
- Medicare Beneficiary Identifier (MBI) is not required, but should be submitted if the payer is Medicare and the patient has an MBI number assigned.
- Medicare Health Insurance Claim (HIC) Number is not required, but should be submitted if the payer is Medicare and the patient has an HICN assigned.

Patient identifiers are specified in ClinicalDocument/recordTarget.
# 2019 IG Updates: Document-Level Template

The document-level template has a new version. The correct template versions must be used.

<table>
<thead>
<tr>
<th>2019</th>
<th>2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>QRDA Category I Report – CMS</td>
<td>QRDA Category I Report – CMS</td>
</tr>
<tr>
<td>(V5)</td>
<td>(V4)</td>
</tr>
<tr>
<td>Conforms to QDM-Based QRDA</td>
<td>Conforms to QDM-Based QRDA</td>
</tr>
<tr>
<td>(V5) template (identifier:</td>
<td>(V4) template (identifier:</td>
</tr>
</tbody>
</table>

```xml
<realmCode code="US"/>
<typeId root="2.16.840.1.113883.1.3" extension="POCD_HD000040"/>
<!-- 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 (V5) -->
<templateId root="2.16.840.1.113883.10.20.24.1.2" extension="2017-08-01" />  
<!-- QRDA Category I Report - CMS (V5) -->
<templateId root="2.16.840.1.113883.10.20.24.1.3" extension="2018-02-01" />
```
# 2019 IG Updates: Header: documentationOf

<table>
<thead>
<tr>
<th>2019</th>
<th>2018</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>MAY</strong> contain <strong>zero or one</strong> [0..1] documentationOf (CONF:3343-16579) such that it <strong>SHALL</strong> contain exactly one [1..1] serviceEvent (CONF:3343-16580). This serviceEvent <strong>SHALL</strong> contain at least one [1..*] performer (CONF:3343-16583).</td>
<td><strong>SHALL</strong> contain exactly one [1..1] documentationOf (CONF:3265-16579_C01) such that it <strong>SHALL</strong> contain exactly one [1..1] serviceEvent (CONF:3265-16580). This serviceEvent <strong>SHALL</strong> contain at least one [1..*] performer (CONF:3265-16583).</td>
</tr>
</tbody>
</table>

- documentationOf is no longer required
- No need to include XML snippet for documentationOf if National Provider Identification number (NPI) and Tax Identification Number (TIN) are not applicable

```xml
<documentationOf typeCode="DOC">
  <serviceEvent classCode="PCPR">
    ...
    <performer typeCode="PRF">
      <assignedEntity>
        <!-- NPI may not be applicable, hospitals may submit nullFlavor -->
        <id root="2.16.840.1.113883.4.6" nullFlavor="NA" />
        <!-- TIN may not be applicable, hospitals may submit nullFlavor -->
        <representedOrganization>
          <id root="2.16.840.1.113883.4.2" nullFlavor="NA" />
        </representedOrganization>
      </assignedEntity>
      </performer>
    </serviceEvent>
  </documentationOf>
```
## 2019 IG Updates: Section Templates

<table>
<thead>
<tr>
<th>2019</th>
<th>2018</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Measure Section QDM</strong></td>
<td><strong>Measure Section QDM</strong></td>
</tr>
<tr>
<td>• Same as 2018</td>
<td></td>
</tr>
<tr>
<td><strong>Reporting Parameters Section – CMS</strong></td>
<td><strong>Reporting Parameters Section – CMS</strong></td>
</tr>
<tr>
<td>• Same as 2018</td>
<td></td>
</tr>
<tr>
<td>• Must be one of the CY 2019 allowable discharge quarters</td>
<td></td>
</tr>
<tr>
<td><strong>Patient Data Section QDM (V5) – CMS</strong></td>
<td><strong>Patient Data Section QDM (V4) – CMS</strong></td>
</tr>
<tr>
<td>(2.16.840.1.113883.10.20.24.2.1.1:2018-02-01)</td>
<td>(2.16.840.1.113883.10.20.24.2.1.1:2017-07-01)</td>
</tr>
<tr>
<td>• Conforms to Patient Data Section QDM (V5) template (identifier: urn:hl7ii:2.16.840.1.113883.10.20.24.2.1:2017-08-01)</td>
<td>• Conforms to Patient Data Section QDM (V4) template (identifier: urn:hl7ii:2.16.840.1.113883.10.20.24.2.1:2016-08-01)</td>
</tr>
<tr>
<td>• Supports QDM v5.3 Annotated</td>
<td>• Supports QDM v4.3</td>
</tr>
</tbody>
</table>
2019 IG Updates: Not Done with a Reason

<table>
<thead>
<tr>
<th>Not Done in eCQMs specified using CQL-based HQMF</th>
<th>Not Done in eCQMs specified using QDM-based HQMF</th>
</tr>
</thead>
<tbody>
<tr>
<td>Procedure, Not Performed</td>
<td>Procedure, Performed not done</td>
</tr>
<tr>
<td>Medication, Not Ordered</td>
<td>Medication, Ordered not done</td>
</tr>
<tr>
<td>…</td>
<td>…</td>
</tr>
</tbody>
</table>

Similar to reporting “Procedure, Performed not done” in the 2018 reporting period, “Procedure, Not Performed” is reported in QRDA Category I for the 2019 reporting period by:

- Setting the Procedure Performed template’s negationInd attribute to “true”
- Use code[@nullFlavor="NA"]
- Set code attribute code/sdtc:valueset="[VSAC value set OID]"
- or code="[The Direct Referenced Code]"
2019 IG Updates:
HQR Validations

• CMS_0073
  o The error description was updated to validate that submitted QRDA Category I files must conform to the 2019 CMS QRDA Category I IG.

```xml
<realmCode code="US"/>
<typeId root="2.16.840.1.113883.1.3" extension="POCD_HD000040"/>
<!-- 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 (V5) -->
<templateId root="2.16.840.1.113883.10.20.24.1.2" extension="2017-08-01" />
<!-- QRDA Category I Report - CMS (V5) -->
<templateId root="2.16.840.1.113883.10.20.24.1.3" extension="2018-02-01" />
```

• CMS_0074
  o The error description was updated to validate that each measure must reference the eCQM Version Specific Measure Identifier and that only the eCQM Specifications for EHs/CAHs for 2019 reporting period will be accepted.
2019 IG Updates: Date and Time Validation

Table 15: Valid Date/Time Format for HQR

<table>
<thead>
<tr>
<th>Description</th>
<th>2019</th>
<th>2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>&lt;Encounter&gt; &lt;EffectiveTime&gt; &lt;low&gt;(Admission Date) &lt;high&gt;(Discharge Date)</td>
<td>Valid Date/Time Format: YYYYMMDDHHMM YYYYMMDDHHMMSS YYYYMMDDHHMMSSxUUUU</td>
<td>Valid Date/Time Format: YYYYMMDDHHMMSSxUUUU</td>
</tr>
<tr>
<td>BirthTime</td>
<td>Valid Date/Time Format: YYYYMMDD YYYYMMDDHHMM</td>
<td>Valid Date/Time Format: YYYYMMDD</td>
</tr>
<tr>
<td>Reporting Period &lt;EffectiveTime&gt; &lt;low&gt;(Start Date) &lt;high&gt;(End Date)</td>
<td>Valid Date/Time Format: YYYYMMDD</td>
<td>n/a</td>
</tr>
</tbody>
</table>
2019 IG Updates: Removed HQR Validations

These HQR Validations for hybrid measure/Core Clinical Data Elements (CCDE) submissions are removed from the 2019 IG.

- **CMS_0084**
  - Either the Patient HICN or MBI is required for hybrid measure/CCDE submissions -- QRDA files for hybrid measure/CCDE submissions must contain a HICN or MBI

- **CMS_0085**
  - CMS Program name and Measure ID are not compatible -- CMS Program name for hybrid measure/CCDE submissions must be HQR_IQR_VOL

- **CMS_0086**
  - Measure type is not consistent across QRDA files within the batch -- Files containing hybrid measure/CCDE submissions and eCQM cannot be submitted within the same batch
High-Level Changes to the HL7 Base Standard QRDA Category I IG
Base HL7 QRDA Category I IG for CY 2019

HL7 IG for CDA Release 2: QRDA Category I, Release 1, STU Release 5, US Realm, December 2017

- Direct link:

- HL7 QRDA Category I Product Page:

- Main updates include:
  - Remove the sdtc:valueSet requirement in Patient Data Section entry templates for QDM data types
  - Align with QDM Version 5.3 Annotated (including changes made since QDM Version 4.3)

- Addressed approved STU comments with “New Feature Requests,” “Errata Report,” and “Clarification” as the disposition

- Updated the HQMF QDM Datatype to QRDA template mapping tables
Prior to QRDA Category I STU 5, `sdtc:valueSet` was used to include the value set OID that holds the code.

Beginning with STU 5, `sdtc:valueSet` is no longer required.
Quality Data Model
Changes Since QDM 4.3

• The QRDA Category I STU 5 was updated to support accumulated changes made since QDM 4.3.

• For detailed QDM changes, review QDM 5.3 Annotated Version (August, 2017), Appendix B: Change Log.
  o B.1 Changes in QDM 5.3 Annotated
  o B.2 Changes in QDM 5.3
  o B.3 Changes in QDM 5.02 Proposed DRAFT
  o B.4 Changes in QDM 5.01 Proposed DRAFT
  o B.5 Changes in QDM 5.0 DRAFT
Quality Data Model
Changes Since QDM 4.3

High level summary of the QDM datatypes changes since QDM 4.3:

• Added Allergy/Intolerance datatype
• Added Adverse Event datatype
• Added Participation datatype
  (and a new attribute: participation period)
• Removed all previous datatypes referencing Allergy, Intolerance and Adverse Reaction
• Removed Encounter, Active datatype
• Removed Transfer to datatype
• Removed Transfer from datatype
Quality Data Model
Changes Since QDM 4.3

High level summary of the QDM attributes changes since QDM 4.3:

- **Added**
  - `admission source` and `discharge disposition` to Encounter, Performed
  - `code` and `id` attributes to all datatypes
  - `components` attribute to Assessment, Performed; Diagnostic, Performed; Laboratory Test, Performed. The `components` attribute includes a code and result and, for laboratory test, performed includes optional reference range high and reference range low
  - `authorTime` to 12 QDM datatypes that include the negation rationale attribute
  - `relevant period` attribute to Medication, Order and Medication, Dispensed

- **Removed**
  - `active dateTime` attribute from Medication, Order
  - `radiation dose` and `radiation duration` attributes
  - `reason` attribute from Encounter, Performed
HL7 QRDA Category I IG
STU R5 Changes

New templates for QDM datatypes
- Adverse Event (urn:hl7ii:2.16.840.1.113883.10.20.24.3.146:2017-08-01)
- Allergy Intolerance (urn:hl7ii:2.16.840.1.113883.10.20.24.3.147:2017-08-01)
- Program Participation (urn:hl7ii:2.16.840.1.113883.10.20.24.3.154:2017-08-01)

New templates for QDM attributes
- Component (urn:hl7ii:2.16.840.1.113883.10.20.24.3.149:2017-08-01)
- Admission Source (urn:hl7ii:2.16.840.1.113883.10.20.24.3.151:2017-08-01)

New templates for improvement or to support new datatype
- Principal Diagnosis (urn:hl7ii:2.16.840.1.113883.10.20.24.3.152:2017-08-01)
- Related To (urn:hl7ii:2.16.840.1.113883.10.20.24.3.150:2017-08-01)
- Author (urn:hl7ii:2.16.840.1.113883.10.20.24.3.155:2017-08-01)
- Adverse Event Cause Observation Assertion (urn:hl7ii:2.16.840.1.113883.10.20.24.3.148:2017-08-01)
Removed templates

- Encounter Active (V3) (urn:hl7ii:2.16.840.1.113883.10.20.24.3.21:2016-02-01)
- Device Adverse Event (V3) (urn:hl7ii:2.16.840.1.113883.10.20.24.3.5:2016-02-01)
- Device Allergy (V3) (urn:hl7ii:2.16.840.1.113883.10.20.24.3.6:2016-02-01)
- Device Intolerance (V3) (urn:hl7ii:2.16.840.1.113883.10.20.24.3.8:2016-02-01)
- Diagnostic Study Adverse Event (V3) (urn:hl7ii:2.16.840.1.113883.10.20.24.3.15:2016-02-01)
- Diagnostic Study Intolerance (V3) (urn:hl7ii:2.16.840.1.113883.10.20.24.3.16:2016-02-01)
- Intervention Adverse Event (V3) (urn:hl7ii:2.16.840.1.113883.10.20.24.3.29:2016-02-01)
- Intervention Intolerance (V3) (urn:hl7ii:2.16.840.1.113883.10.20.24.3.30:2016-02-01)
- Laboratory Test Adverse Event (V3) (urn:hl7ii:2.16.840.1.113883.10.20.24.3.35:2016-02-01)
- Laboratory Test Intolerance (V3) (urn:hl7ii:2.16.840.1.113883.10.20.24.3.36:2016-02-01)
- Medication Adverse Effect (V3) (urn:hl7ii:2.16.840.1.113883.10.20.24.3.43:2016-02-01)
- Medication Allergy (V3) (urn:hl7ii:2.16.840.1.113883.10.20.24.3.44:2016-02-01)
- Medication Intolerance (V3) (urn:hl7ii:2.16.840.1.113883.10.20.24.3.46:2016-02-01)
Removed templates (continued)

- Procedure Adverse Event (V3) (urn:hl7ii:2.16.840.1.113883.10.20.24.3.61:2016-02-01)
- Procedure Intolerance (V3) (urn:hl7ii:2.16.840.1.113883.10.20.24.3.62:2016-02-01)
- Radiation Dosage and Duration (V2) (urn:hl7ii:2.16.840.1.113883.10.20.24.3.91:2014-12-01)
- Transfer From (V3) (urn:hl7ii:2.16.840.1.113883.10.20.24.3.81:2016-02-01)
- Transfer From Act (urn:oid:2.16.840.1.113883.10.20.24.3.141)
- Transfer To (V3) (urn:hl7ii:2.16.840.1.113883.10.20.24.3.82:2016-02-01)
- Transfer To Act (urn:oid:2.16.840.1.113883.10.20.24.3.142)
- Act Intolerance or Adverse Event Observation (V3) (urn:hl7ii:2.16.840.1.113883.10.20.24.3.104:2016-02-01)
- Result (V3) (urn:hl7ii:2.16.840.1.113883.10.20.24.3.87:2016-02-01)
- Reaction (V2) (urn:hl7ii:2.16.840.1.113883.10.20.24.3.85:2014-12-01)
- Fulfills (V2) (urn:hl7ii:2.16.840.1.113883.10.20.24.3.126:2016-08-01)
Document template

- No change to US Realm Header (V3) template
- QRDA Category I Framework template updated from (V3) to (V4)
  - Removed the “SHALL contain exactly one [1..1] legalAuthenticator” constraint
  - `legalAuthenticator` in the header is now optional in QRDA Category I STU 5
- QDM-Based QRDA template is updated from (V4) to (V5)
  - Now references the updated Patient Data Section
    QDM (V5) template, which supports QDM Version 5.3 Annotated
Section templates

- No change to Measure Section QDM template
- No change to Reporting Parameter Section template
- Patient Data Section QDM (V5) (urn:hl7ii:2.16.840.1.113883.10.20.24.2.1:2017-08-01)
  - Updated to support QDM 5.3 Annotated Version changes
    - Added references to new templates for the new QDM data types
    - Removed references to templates for the removed QDM data type templates
Change logs

• Volume 1, Appendix B – High Level Change Log summarizes changes in both Volume 1 and Volume 2.

• Volume 2, Chapter 9 contains changes from previous version.
2019 CMS QRDA Category I Schematrons, Sample Files, Updates, and Resources
2019 CMS QRDA Category I Schematrons and Sample Files Background

• The 2019 CMS QRDA Category I Schematron is a companion to the 2019 CMS QRDA Category I IG for HQR and allows for computerized validation of QRDA Category I documents against the IG requirements.

• The Schematron helps EH and CAH submitters check QRDA Category I files for eCQMs starting with the CY 2019 reporting period.

• The Schematron is incorporated into the CMS Pre-Submission Validation Application (PSVA) tool and the QualityNet system in order to ensure QRDA Category I files comply with the IG.
Updated 2019 CMS QRDA Category I Schematrons

- CMS has published an updated [2019 CMS QRDA Category I Schematron for HQR](#).
- Changes to the Schematron include:
  - Correction in the QDM-Based QRDA V5 Document template - the logic for conformance statement 3343-17081 has been updated from `test="count(count(cda:structuredBody))=1"` to `test="count(cda:structuredBody)=1"`.
- This updated version replaces previous versions of the Schematrons posted to the [eCQI Resource Center](#).
Updated 2019 CMS QRDA Category I Voc.xml file

- CMS has released an updated 2019 CMS QRDA Category I voc.xml file. The updated voc.xml file is a supporting vocabulary xml file for the Schematron that provides technical instructions for reporting eCQMs for the calendar year 2019 reporting period for the:
  - IQR Program
  - Medicare and Medicaid PI Programs for EHs and CAHs

- The 2019 CMS QRDA Category I voc.xml file provides technical corrections to the QRDA Category I CMS Program Name value set that the 2019 QRDA Category I Schematron enforces. The program names have been updated to match the CMS program name codes listed in the table in the 2019 CMS QRDA Category I IG for HQR titled “Table 6: QRDA I CMS Program Name.”
Resources

• 2019 CMS QRDA Category I IG for HQR (published May 2018 and any applicable addenda)
  o Direct link:

• Accompanying Schematrons and sample files and any applicable updates
  o Direct link to download from eCQI Resource Center:
    https://ecqi.healthit.gov/system/files/eCQM_2019SchematronSam pleFileHQR_0_1.zip
Resources

Additional QRDA-related resources can be found on the eCQI Resource Center:

- Current and past IGs - [https://ecqi.healthit.gov/qrda](https://ecqi.healthit.gov/qrda)
- QRDA educational resources - [https://ecqi.healthit.gov/qrda/qrda-educational-resources](https://ecqi.healthit.gov/qrda/qrda-educational-resources)
- CMS QRDA Category I Conformance Statement Resource
  - The Conformance Statement Resource for the 2019 reporting period will be posted when available.
Resources

- The Edits Document for the 2019 reporting period will be posted when available.
- For questions related to this guidance, the QRDA Category I IGs, or Schematrons, visit the ONC QRDA JIRA Issue Tracker - https://ecqi.healthit.gov/qrda
- Value Set Authority Center (VSAC) - https://vsac.nlm.nih.gov
## Resources

<table>
<thead>
<tr>
<th>Topic</th>
<th>Who to Contact</th>
<th>How to Contact</th>
</tr>
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<tbody>
<tr>
<td>Hospital IQR Program and Policy</td>
<td>Hospital Inpatient Support Team</td>
<td>(844) 472-4477</td>
</tr>
<tr>
<td></td>
<td></td>
<td><a href="https://cms-ip.custhelp.com">https://cms-ip.custhelp.com</a></td>
</tr>
<tr>
<td>Promoting Interoperability Program*</td>
<td>QualityNet Help Desk</td>
<td>(866) 288-8912</td>
</tr>
<tr>
<td>(objectives, attestation, and policy)</td>
<td></td>
<td><a href="mailto:qnetsupport@hcqis.org">qnetsupport@hcqis.org</a></td>
</tr>
<tr>
<td>eCQM specifications</td>
<td>ONC JIRA Issue Trackers</td>
<td>eCQM Issue Tracker</td>
</tr>
<tr>
<td>(code sets, measure logic, and measure intent)</td>
<td></td>
<td><a href="https://oncprojecttracking.healthit.gov/support/projects/CQM/summary">https://oncprojecttracking.healthit.gov/support/projects/CQM/summary</a></td>
</tr>
<tr>
<td>QRDA-related questions</td>
<td></td>
<td>QRDA Issue Tracker</td>
</tr>
<tr>
<td>(CMS IG, Schematrons and Sample Files)</td>
<td></td>
<td><a href="https://oncprojecttracking.healthit.gov/support/projects/QRDA/summary">https://oncprojecttracking.healthit.gov/support/projects/QRDA/summary</a></td>
</tr>
<tr>
<td>QualityNet Secure Portal</td>
<td>QualityNet Help Desk</td>
<td>(866) 288-8912</td>
</tr>
<tr>
<td>(reports, PSVA tool, data upload, and troubleshooting file errors)</td>
<td></td>
<td><a href="mailto:qnetsupport@hcqis.org">qnetsupport@hcqis.org</a></td>
</tr>
<tr>
<td>eCQM data validation</td>
<td>Validation Support Team</td>
<td><a href="mailto:validation@hcqis.org">validation@hcqis.org</a></td>
</tr>
<tr>
<td></td>
<td></td>
<td><a href="https://cms-ip.custhelp.com">https://cms-ip.custhelp.com</a></td>
</tr>
</tbody>
</table>

*Previously known as the EHR Incentive Program*
CMS QRDA Category I Implementation Guide
Changes for CY 2019 Hospital Quality Reporting

Continuing Education
Continuing Education (CE) Approval

This program has been approved for CE credit for the following boards:

• **National credit**
  o Board of Registered Nursing (Provider #16578)

• **Florida-only credit**
  o Board of Clinical Social Work, Marriage & Family Therapy and Mental Health Counseling
  o Board of Registered Nursing
  o Board of Nursing Home Administrators
  o Board of Dietetics and Nutrition Practice Council
  o Board of Pharmacy

**NOTE:** To verify CE approval for any other state, license, or certification, please check with your licensing or certification board.
CE Credit Process: Three Steps

1. Complete the ReadyTalk® survey that will pop up after the webinar.

2. Register on the HSAG Learning Management Center for the certificate.

3. Print out your certificate.

**NOTE:** An additional survey will be sent to all registrants within the next 48 hours.
CE Credit Process: Survey

10. What is your overall level of satisfaction with this presentation?
- Very satisfied
- Somewhat satisfied
- Neutral
- Somewhat dissatisfied
- Very dissatisfied

If you answered "very dissatisfied", please explain

11. What topics would be of interest to you for future presentations?

12. If you have questions or concerns, please feel free to leave your name and phone number or email address and we will contact you.

Powered by SurveyMonkey
Check out our sample surveys and create your own now!
CE Credit Process: Certificate

Thank you for completing our survey!

Please click on one of the links below to obtain your certificate for your state licensure.

You must be registered with the learning management site.

**New User Link:**
https://lmc.hshapps.com/register/default.aspx?ID=da0a12bc-db39-408f-b429-d6f6b9ccb1ae

**Existing User Link:**
https://lmc.hshapps.com/test/adduser.aspx?ID=da0a12bc-db39-408f-b429-d6f6b9ccb1ae

**Note:** If you click the 'Done' button below, you will not have the opportunity to receive your certificate without participating in a longer survey.

Done
Register for Credit

New User
Use personal email and phone.
Go to email address and finish process.

Existing User
Entire email is your user name.
You can reset your password.
Thank You for Attending
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