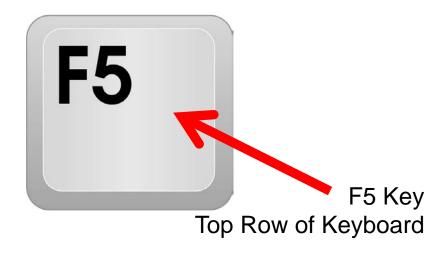
Welcome

- Audio for this event is available via ReadyTalk[®] Internet streaming.
- No telephone line is required.
- Computer speakers or headphones are necessary to listen to streaming audio.
- Limited dial-in lines are available.
 Please send a chat message if needed.
- This event is being recorded.



Troubleshooting Audio

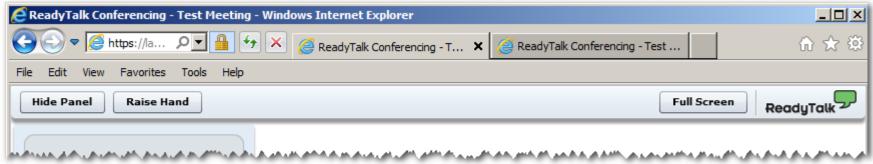
Audio from computer speakers breaking up? Audio suddenly stop? Click Refresh icon – or – Press F5 key





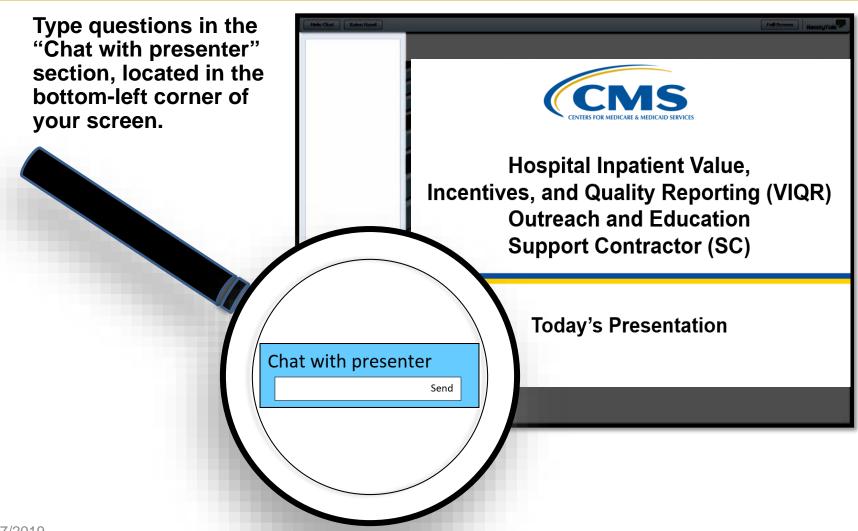
Troubleshooting Echo

- Hear a bad echo on the call?
- Echo is caused by multiple browsers/tabs open to a single event—multiple audio feeds.
- Close all but one browser/tab and the echo will clear.



Example of Two Browsers/Tabs Open in Same Event

Submitting Questions





CMS QRDA Category I Implementation Guide Changes for CY 2019 Hospital Quality Reporting

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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.

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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.

CMS QRDA Category I Implementation Guide Changes for CY 2019 Hospital Quality Reporting

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.
 - Available at the <u>eCQI Resource Center</u> and this direct link: https://ecqi.healthit.gov/system/files/QRDA_HQR_2019_C
 MS_IG_final_508.pdf
- The updated 2019 CMS QRDA Category I Schematrons for HQR was published in February 2019.
 - https://ecqi.healthit.gov/system/files/eCQM_2019SchematronSampleFileHQR_0_1.zip

Background

- 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

	2019	2018
Reporting Period	2019 reporting period	2018 reporting period
eCQM Specifications	To be used with eCQM specifications for EHs/CAHs published May 2018 and any applicable addenda	Used with eCQM specifications for EHs/CAHs for the 2018 reporting period
	 https://ecqi.healthit.gov/system/files/EH_C AH_eCQM_2018-05.zip eCQMs are specified based on the Clinical Quality Language (CQL)-based Health Quality Measure Format (HQMF) Implementation Guide 	eCQMs were specified based on the Quality Data Model (QDM)-based HQMF Implementation Guide
Value Sets	eCQM Value Sets for EHs/CAHs published September 17, 2018 and any applicable addenda • https://vsac.nlm.nih.gov/download/ecqm?rel=20180917	eCQM Value Sets for EHs/CAHs for the 2018 reporting period

Comparison of 2019 to 2018 IGs

(continued)

	2019	2018
Base HL7 Standard	 HL7 IG for Clinical Document Architecture (CDA) Release 2: QRDA Category I, Release 1, Standard for Trial Use (STU) Release 5, US Realm, December 2017 http://www.hl7.org/dstucomments/showdetail.cfm? dstuid=246 (HL7 login required to access standard) 	HL7 IG for CDA R2: QRDA Category I, Release 1, STU Release 4, US Realm January 2017
Quality Data Model (QDM)	 Supports QDM Version 5.3, Annotated Version https://ecqi.healthit.gov/system/files/QDM_5_3_A <a a="" ecqi.healthit.gov="" files="" href="https://ecqi.healthit.gov/system/files/QDM_5_3_A <a href=" https:="" qdm_5_3_a<="" system=""> <a a="" ecqi.healthit.gov="" files="" href="https://ecqi.healthit.gov/system/files/QDM_5_3_A <a href=" https:="" qdm_5_3_a<="" system=""> <a a="" ecqi.healthit.gov="" files="" href="https://ecqi.healthit.gov/system/files/QDM_5_3_A <a href=" https:="" qdm_5_3_a<="" system=""> <a a="" ecqi.healthit.gov="" files="" href="https://ecqi.healthit.gov/system/files/QDM_5_3_A <a href=" https:="" qdm_5_3_a<="" system=""> <a a="" ecqi.healthit.gov="" files="" href="https://ecqi.healthit.gov/system/files/QDM_5_3_A <a href=" https:="" qdm_5_3_a<="" system=""> <a a="" ecqi.healthit.gov="" files="" href="https://ecqi.healthit.gov/system/files/QDM_5_3_A <a href=" https:="" qdm_5_3_a<="" system=""> <a a="" ecqi.healthit.gov="" files="" href="https://ecqi.healthit.gov/system/files/QDM_5_3_A <a href=" https:="" qdm_5_3_a<="" system=""> <a a="" ecqi.healthit.gov="" files="" href="https://ecqi.healthit.gov/system/files/QDM_5_3_A <a href=" https:="" qdm_5_3_a<="" system=""> <a a="" ecqi.healthit.gov="" files="" href="https://ecqi.healthit.gov/system/files/QDM_5_3_A <a href=" https:="" qdm_5_3_a<="" system=""> <a a="" ecqi.healthit.gov="" files="" href="https://ecqi.healthit.gov/system/files/QDM_5_3_A <a href=" https:="" qdm_5_3_a<="" system=""> <a a="" ecqi.healthit.gov="" files="" href="https://ecqi.healthit.gov/system/files/QDM_5_3_A <a href=" https:="" qdm_5_3_a<="" system=""> <a a="" ecqi.healthit.gov="" files="" href="https://ecqi.healthit.gov/system/files/QDM_5_3_A <a href=" https:="" qdm_5_3_a<="" system=""> 	

Comparison of 2019 to 2018 IGs

(continued)

	2019	2018
Key Elements for Succession Management	4.3.1 QRDA Category I Report Document Succession Management for HQR	4.3.1 QRDA Category I Report Document Succession Management for HQR
	The most recently submitted and accepted production QRDA Category I file will overwrite the original file based on the exact match of five key elements identifying the file: CCN, CMS Program Name, EHR Patient ID, EHR Submitter ID, and the reporting period specified in the Reporting Parameters Section.	The most recently submitted and accepted Production QRDA Category I file will overwrite the original file based on the exact match of four key elements identifying the file: CCN, CMS Program Name, EHR Patient ID, and the reporting period specified in the Reporting Parameters Section.

Comparison of CMS Program Names from 2019 to 2018 IG

2019	Program Names	2018
HQR_ PI	Hospital Quality Reporting for the Promoting Interoperability Program	HQR_EHR
HQR_IQR	Hospital Quality Reporting for the Inpatient Quality Reporting (IQR) Program	HQR_IQR
HQR_ PI _IQR	Hospital Quality Reporting for the Promoting Interoperability Program and the IQR Program	HQR_EHR_IQR
HQR_IQR_VOL	Hospital Quality Reporting for IQR Program voluntary submissions	HQR_IQR_VOL
CDAC_HQR_EHR	(for Clinical Data Abstraction Center [CDAC] users)	CDAC_HQR_EHR
(removed)		HQR_EPM_VOL (Hospital Quality Reporting for Episode Payment Model voluntary submissions)

CMS program names are specified in ClinicalDocument/informationRecipient.

2019 IG Updates: Patient Identifiers

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.

2019	2018	
QRDA Category I Report – CMS (V5)	QRDA Category I Report – CMS (V4)	
urn:hl7ii:2.16.840.1.113883.10.20.24.1.3: 2018-02-01	urn:hl7ii:2.16.840.1.113883.10.20.24.1.3:2017-07-01	
Conforms to QDM-Based QRDA (V5) template (identifier: urn:hl7ii:2.16.840.1.113883.10.20.24.1.2: 2017-08-01).	Conforms to QDM-Based QRDA (V4) template (identifier: urn:hl7ii:2.16.840.1.113883.10.20.24.1.2:2016-08-01).	

2019 IG Updates: Header: documentationOf

2019	2018
MAY contain zero or one [01]	SHALL contain exactly one [11]
documentationOf (CONF:3343-16579) such	documentationOf (CONF:3265-16579_C01)
that it	such that it
SHALL contain exactly one [11] serviceEvent	SHALL contain exactly one [11] serviceEvent
(CONF:3343-16580).	(CONF:3265-16580).
This serviceEvent SHALL contain at least	This serviceEvent SHALL contain at least
one [1*] performer (CONF:3343-16583).	one [1*] performer (CONF:3265-16583).

- 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

2019 IG Updates: Section Templates

2019	2018
Measure Section QDM	Measure Section QDM
• Same as 2018	
Reporting Parameters Section – CMS	Reporting Parameters Section – CMS
• Same as 2018	
 Must be one of the CY 2019 allowable discharge quarters 	
Patient Data Section QDM (V5) – CMS	Patient Data Section QDM (V4) - CMS
(2.16.840.1.113883.10.20.24.2.1.1: 2018-02-01)	(2.16.840.1.113883.10.20.24.2.1.1:2017-07-01)
 Conforms to Patient Data Section QDM (V5) template (identifier: urn:hl7ii:2.16.840.1.113883.10.20.24.2.1:2 017-08-01) 	 Conforms to Patient Data Section QDM (V4) template (identifier: urn:hl7ii:2.16.840.1.113883.10.20.24.2.1:2 016-08-01)
 Supports QDM v5.3 Annotated 	 Supports QDM v4.3

2019 IG Updates: Not Done with a Reason



■ No Rehabilitation Assessment or Therapy ["Procedure, Not Performed": "Rehabilitation Assessment"] union ["Procedure, Not Performed": "Rehabilitation Therapy"]) NoRehabProcedure where NoRehabProcedure.negationRationale in "Medical Reason" or NoRehabProcedure.negationRationale in "Patient Refusal" | ORDINGREPART | Procedure | Patient Refusal |

Not Done in eCQMs specified using CQL-based HQMF	Not Done in eCQMs specified using QDM-based HQMF
Procedure, Not Performed Medication, Not Ordered	Procedure, Performed not done Medication, Ordered not done
•••	

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

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

CMS_0074

 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

	2019	2018
<encounter> <effectivetime> <low>(Admission Date) <high>(Discharge Date)</high></low></effectivetime></encounter>	Valid Date/Time Format: YYYYMMDDHHMM YYYYMMDDHHMMSS YYYYMMDDHHMMSSxUUUU	Valid Date/Time Format: YYYYMMDDHHMMSSxUUUU
BirthTime	Valid Date/Time Format: YYYYMMDD YYYYMMDDHHMM	Valid Date/Time Format: YYYYMMDD
Reporting Period <effectivetime> <low>(Start Date) <high>(End Date)</high></low></effectivetime>	Valid Date/Time Format: YYYYMMDD	n/a

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 submissions2 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

CMS QRDA Category I Implementation Guide Changes for CY 2019 Hospital Quality Reporting

High-Level Changes to the HL7 Base Standard QRDA Category I IG

Base HL7 QRDA Category I IG for CY 2019

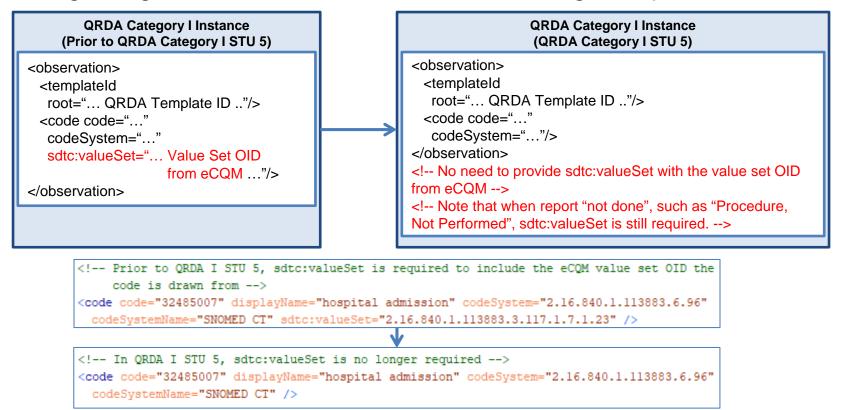
HL7 IG for CDA Release 2: QRDA Category I, Release 1, STU Release 5, US Realm, December 2017

- Direct link:
 - o http://www.hl7.org/dstucomments/showdetail.cfm?dstuid=246
- HL7 QRDA Category I Product Page:
 - http://www.hl7.org/implement/standards/product_brief.cfm?product_id=35
- Main updates include:
 - Remove the sdtc:valueSet requirement in Patient Data Section entry templates for QDM data types
 - o 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
 - http://www.hl7.org/dstucomments/ex_showdetail.cfm?dstuid=186
 - http://www.hl7.org/dstucomments/showdetail.cfm?dstuid=198
- Updated the HQMF QDM Datatype to QRDA template mapping tables

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sdtc:valueSet Requirement Removed

- 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.
 - B.1 Changes in QDM 5.3 Annotated
 - B.2 Changes in QDM 5.3
 - B.3 Changes in QDM 5.02 Proposed DRAFT
 - B.4 Changes in QDM 5.01 Proposed DRAFT
 - 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

- o admission source and discharge disposition to Encounter, Performed
- o 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
- o relevant period attribute to Medication, Order and Medication, Dispensed

Removed

- o 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.

CMS QRDA Category I Implementation Guide Changes for CY 2019 Hospital Quality Reporting

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 <u>2019 CMS QRDA Category I</u> 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"
 - Removal of a duplicate check for conformance statement 3343-16591 in the QRDA Category I Report CMS V5 template
- This updated version replaces previous versions of the Schematrons posted to the eCQl Resource Center.

Updated 2019 CMS QRDA Category I Voc.xml file

- CMS has released an <u>updated 2019 CMS QRDA Category I voc.xml file</u>. 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:
 - o 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."

- 2019 CMS QRDA Category I IG for HQR (published May 2018 and any applicable addenda)
 - Direct link:
 https://ecqi.healthit.gov/system/files/QRDA_HQR_2019_CM
 S_IG_final_508.pdf
- Accompanying Schematrons and sample files and any applicable updates
 - Direct link to download from eCQI Resource Center: https://ecqi.healthit.gov/system/files/eCQM_2019SchematronSam_pleFileHQR_0_1.zip

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

- Current and past IGs https://ecqi.healthit.gov/qrda
- CMS QRDA Pre-Submission Validation Tools Guide -<u>https://ecqi.healthit.gov/ecqi-tools-key-resources/cms-qrda-pre-submission-validation-tools-guide</u>
- QRDA educational resources https://ecqi.healthit.gov/qrda/qrda-educational-resources
- CMS QRDA Category I Conformance Statement Resource
 - https://ecqi.healthit.gov/system/files/2018_CMS_QRDA_I_Conforma
 nce_Statement_Resource_v3_508.pdf (for the 2018 reporting period)
 - The Conformance Statement Resource for the 2019 reporting period will be posted when available.

- CMS QualityNet Data Receiving Systems Edits Document for the 2018 reporting period - https://www.qualityreportingcenter.com/wp-content/uploads/2018/12/eCQM-2018-CMS-Receiving-System-Edits-12-12-18508.pdf
- 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

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

^{*}Previously known as the EHR Incentive Program

CMS QRDA Category I Implementation Guide Changes for CY 2019 Hospital Quality Reporting

Question & Answer Session

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

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 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

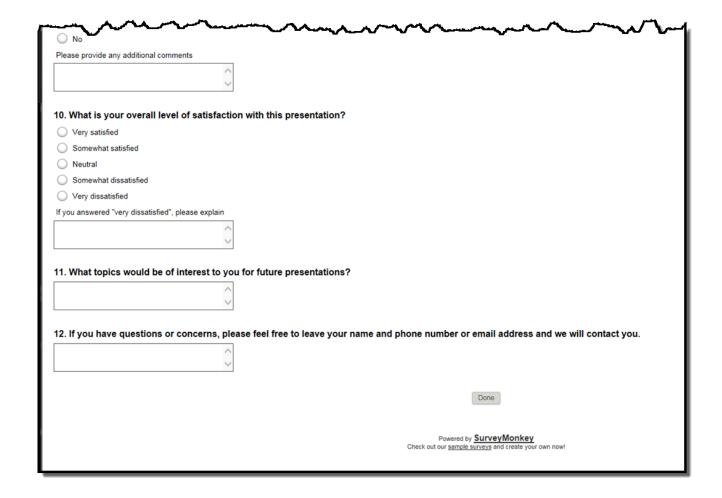
Center for the certificate.

3. Print out your certificate.

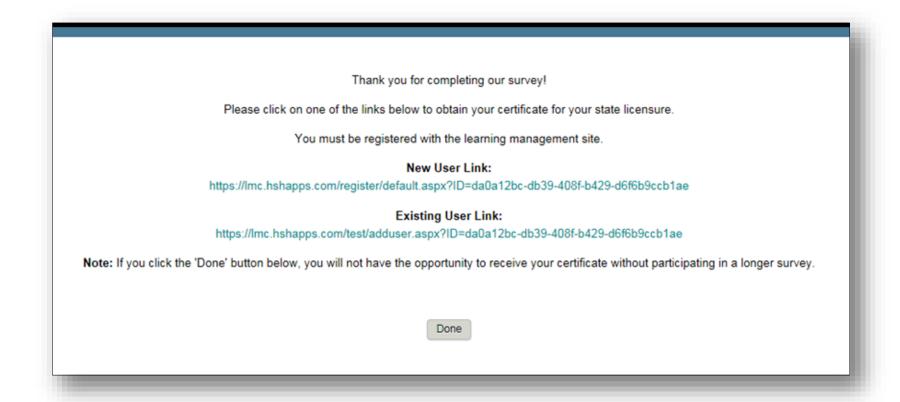


Note: An additional survey will be sent to all registrants within the next 48 hours.

CE Credit Process: Survey



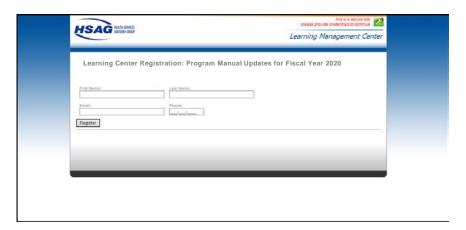
CE Credit Process: Certificate



Register for Credit

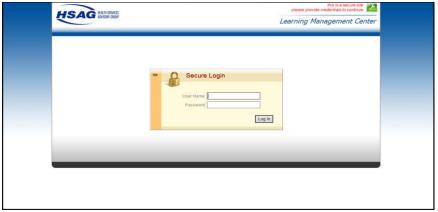
New User

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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