

Welcome!

- **Audio for this event is available via ReadyTalk® Internet streaming.**
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- **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 or F5



F5 Key
Top Row of Keyboard

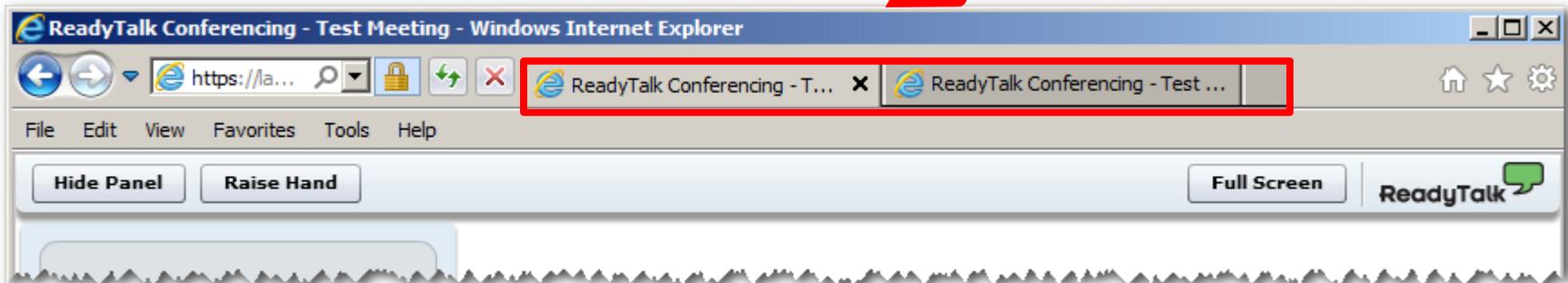


Location of Buttons

Refresh

Troubleshooting Echo

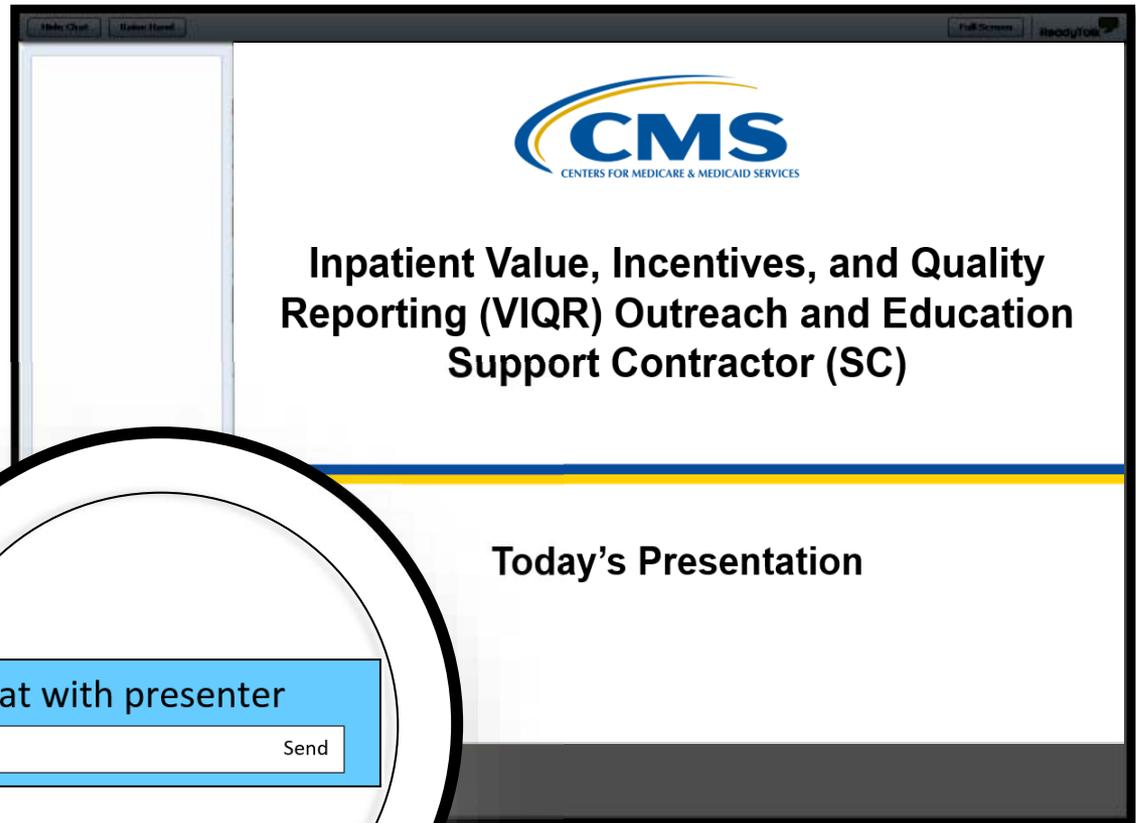
- Hear a bad echo on the call?
- Echo is caused by multiple browsers/tabs open to a single event (multiple audio feeds).
- Close all but one browser/tab and the echo will clear.



Example of Two Browsers/Tabs Open in Same Event

Submitting Questions

Type questions in the “Chat with presenter” section, located in the bottom-left corner of your screen.





Submitting CY 2019 eCQM Data Using CMS' Next Generation Hospital Quality Reporting System

Artrina Sturges, EdD

**Alignment of eCQM Reporting Lead
Inpatient Value, Incentives, and Quality Reporting
Outreach and Education Support Contractor**

November 20, 2019

Purpose

The purpose of this presentation is to provide a high-level overview of the reporting process, navigational changes, and new features for reporting and receiving feedback on calendar year (CY) 2019 electronic clinical quality measures (eCQMs) using CMS' *QualityNet Secure Portal* Next Generation Hospital Quality Reporting (HQR) System.

Objectives

By the end of the presentation, participants will:

- Understand the Next Generation HQR System to successfully report eCQMs for the CY 2019 reporting period.
- Identify new navigation and features designed to improve usability for hospitals and vendors within CMS' HQR systems.
- Understand Next Generation HQR System feedback to improve data quality and verify the eCQM reporting requirement is met.

Agenda

- Background
- New My Tasks and HQR Home Pages
- New QRDA Category I File Upload Process – Simple File Submission
- New User Interfaces for Reviewing eCQM Submission Status and Reviewing Feedback
- Entering Case Threshold Exemptions and Zero Denominator Declarations from the New My Tasks Page
- Additional Tips and Information
- Question and Answer Session
- Appendix - Information for Generating Electronic Health Record (EHR) Hospital Reports in the Legacy HQR System

Submitting CY 2019 eCQM Data
Using CMS' Next Generation of Hospital Quality Reporting System

Background

CY 2019 eCQM Reporting Requirements

For hospitals participating in the Hospital IQR Program:

- Report on **four** of the 15 available eCQMs.
- Report **one** self-selected calendar quarter in CY 2019 (Q1, Q2, Q3, or Q4).
- Submission deadline is March 2, 2020.
 - Deadline extended due to the original deadline (February 29, 2020) falling on a weekend.

NOTE: Meeting the Hospital IQR Program eCQM requirement also satisfies the CQM electronic reporting requirement for the Medicare Promoting Interoperability Program for Eligible Hospitals (EHs) and critical access hospitals (CAHs) **except outpatient measure ED-3, National Quality Forum (NQF) #0496.**

Webinar: CY 2019 eCQM Reporting Requirements

Hospital IQR Program Requirements for CY 2019 Reporting (FY 2021 Payment Determination)

April 29, 2019

Slide deck and webinar materials are posted on the [QualityReportingCenter.com](https://www.qualityreportingcenter.com) under [Archived Events](#).

CMS' Next Generation HQR System

- In fall 2018, CMS began implementing updates to *QualityNet*, starting with Public Reporting, to improve the user experience.
- New and enhanced features are available for eCQM reporting. Incremental updates began September 2019.

Submitting CY 2019 eCQM Data
Using CMS' Next Generation of Hospital Quality Reporting System

New My Tasks and HQR Home Pages

QualityNet Secure Portal

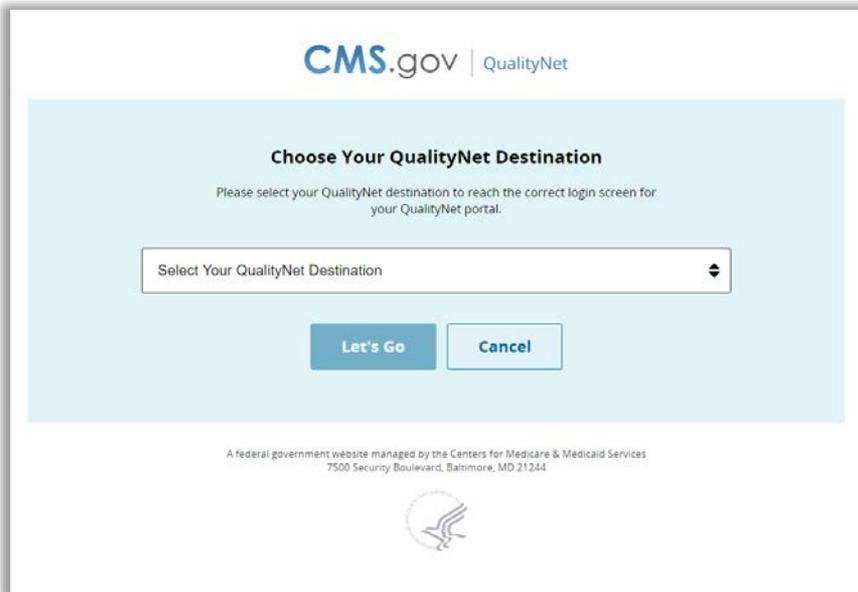
<https://www.qualitynet.org/>

The screenshot shows the QualityNet website homepage. At the top left is the CMS.gov logo. A search bar is located in the top center. In the top right, there are links for 'Quality Programs', 'Help', 'Log into Secure Portal' (circled in red), and 'Register'. The main content area features a blue header with the text 'Welcome to QualityNet! Your one-stop shop for CMS Quality Programs.' Below this, there is a 'Subscribe to Email Updates' button and a 'Log into QualityNet Secure Portal' button (circled in red). To the right, there is a 'Recent News' section with two news items: 'Launch of redesigned QualityNet website set for Sept. 25' and 'Coming Soon! Updated QualityNet Question and Answer Tool'. Below the header, there is a section titled 'I am looking for quality information associated with...' with six category tiles: 'Hospitals - Inpatient', 'Hospitals - Outpatient', 'Ambulatory Surgical Centers', 'PPS-Exempt Cancer Hospitals', 'ESRD Facilities', and 'Inpatient Psychiatric Facilities'.

Accessing the HQR System Application

On landing page after login, click on arrows for drop-down menu.

Select **Hospital Quality Reporting**.



CMS.gov | QualityNet

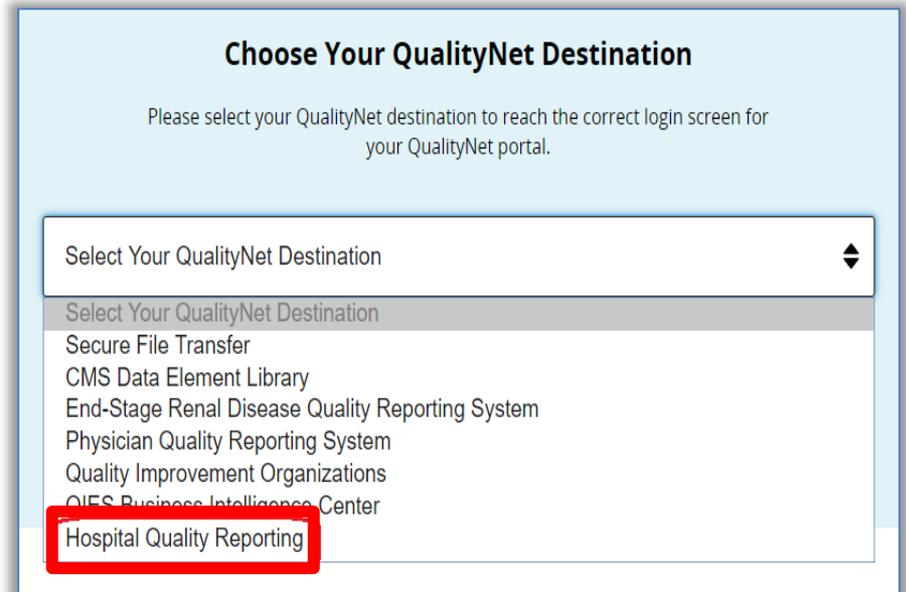
Choose Your QualityNet Destination

Please select your QualityNet destination to reach the correct login screen for your QualityNet portal.

Select Your QualityNet Destination

Let's Go Cancel

A federal government website managed by the Centers for Medicare & Medicaid Services
7500 Security Boulevard, Baltimore, MD 21244



Choose Your QualityNet Destination

Please select your QualityNet destination to reach the correct login screen for your QualityNet portal.

Select Your QualityNet Destination

Select Your QualityNet Destination

- Secure File Transfer
- CMS Data Element Library
- End-Stage Renal Disease Quality Reporting System
- Physician Quality Reporting System
- Quality Improvement Organizations
- QIES Business Intelligence Center
- Hospital Quality Reporting**

A brand new QualityNet Destination is in the dropdown menu. Now, go to **Hospital Quality Reporting** (previously accessed **Secure File Transfer**).

QualityNet Login

The log in page appears.

CMS.gov | QualityNet
Centers for Medicare & Medicaid Services

Log In to QualityNet *Required Field
Please enter your CMS User ID and password, followed by your Symantec VIP Security Code, then click Submit.

*User ID

*Password

*Security Code

Help
Start/Complete New User Enrollment
Forgot your password?
Trouble with your Security Code?
Need to register for a QualityNet account?

[QualityNet Home](#) **CMS.gov | QualityNet**
A federal government website managed by the Centers for Medicare & Medicaid Services, 7500 Security Boulevard, Baltimore, MD 21244

Accept the Terms and Conditions.
The page will refresh.

******WARNING* *WARNING* *WARNING******

This warning banner provides privacy and security notices consistent with applicable federal laws, directives, and other federal guidance for accessing this Government system, which includes (1) this computer network, (2) all computers connected to this network, and (3) all devices and storage media attached to this network or to a computer on this network.

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By using this system, you understand and consent to the following: The Government may monitor, record, and audit your system usage, including usage of personal devices and email systems for official duties or to conduct HHS business. Therefore, you have no reasonable expectation of privacy regarding any communication or data transiting or stored on this system. At any time, and for any lawful Government purpose, the government may monitor, intercept, and search and seize any communication or data transiting or stored on this system.

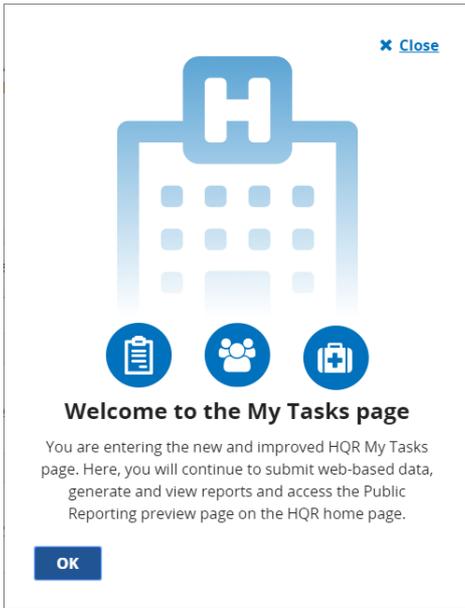
Any communication or data transiting or stored on this system may be disclosed or used for any lawful Government purpose.

******WARNING* *WARNING* *WARNING******

I accept the above Terms and Conditions.

New My Tasks Page

Click the **View the new Hospital Quality Reporting** link to access the new HQR System home page. The page will refresh.

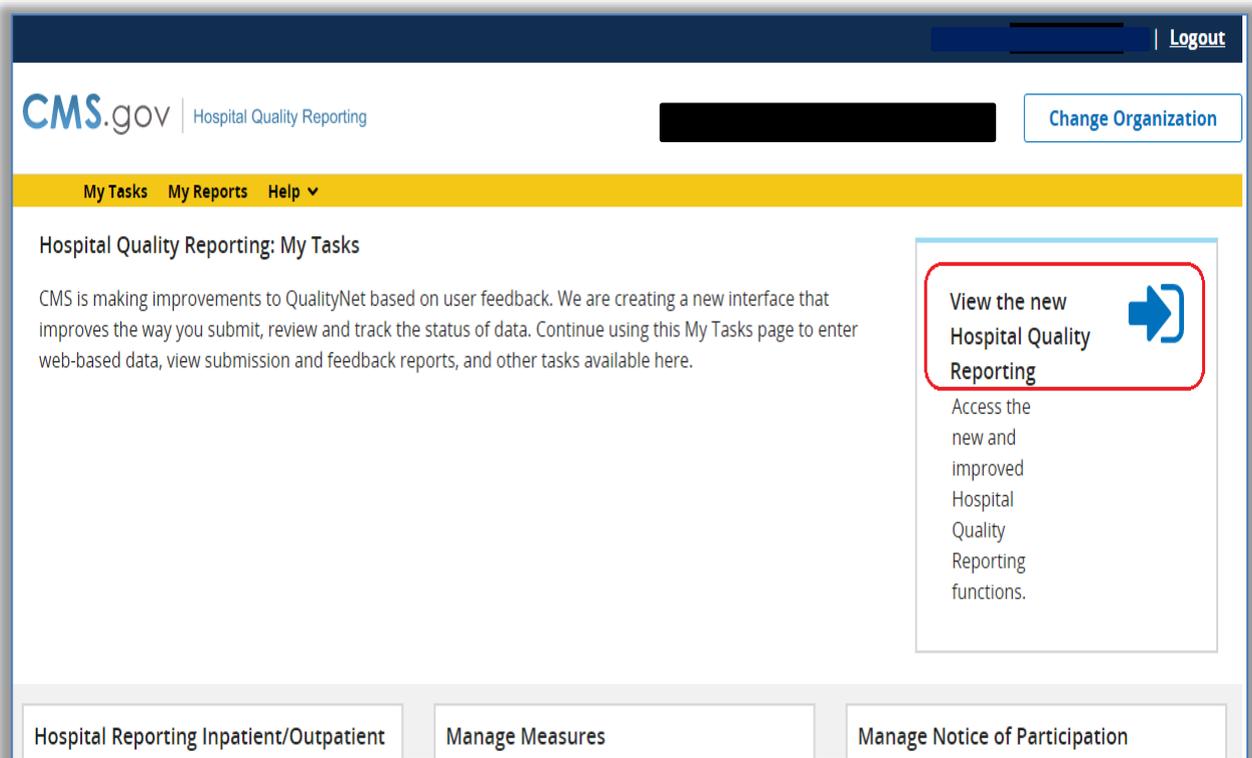


Welcome to the My Tasks page

You are entering the new and improved HQR My Tasks page. Here, you will continue to submit web-based data, generate and view reports and access the Public Reporting preview page on the HQR home page.

OK

This notification box features a large blue 'H' icon representing a hospital, with three smaller circular icons below it: a clipboard, a group of people, and a medical cross. A 'Close' button is located in the top right corner.



CMS.gov | Hospital Quality Reporting

My Tasks My Reports Help

Hospital Quality Reporting: My Tasks

CMS is making improvements to QualityNet based on user feedback. We are creating a new interface that improves the way you submit, review and track the status of data. Continue using this My Tasks page to enter web-based data, view submission and feedback reports, and other tasks available here.

View the new Hospital Quality Reporting 

Access the new and improved Hospital Quality Reporting functions.

Hospital Reporting Inpatient/Outpatient | Manage Measures | Manage Notice of Participation

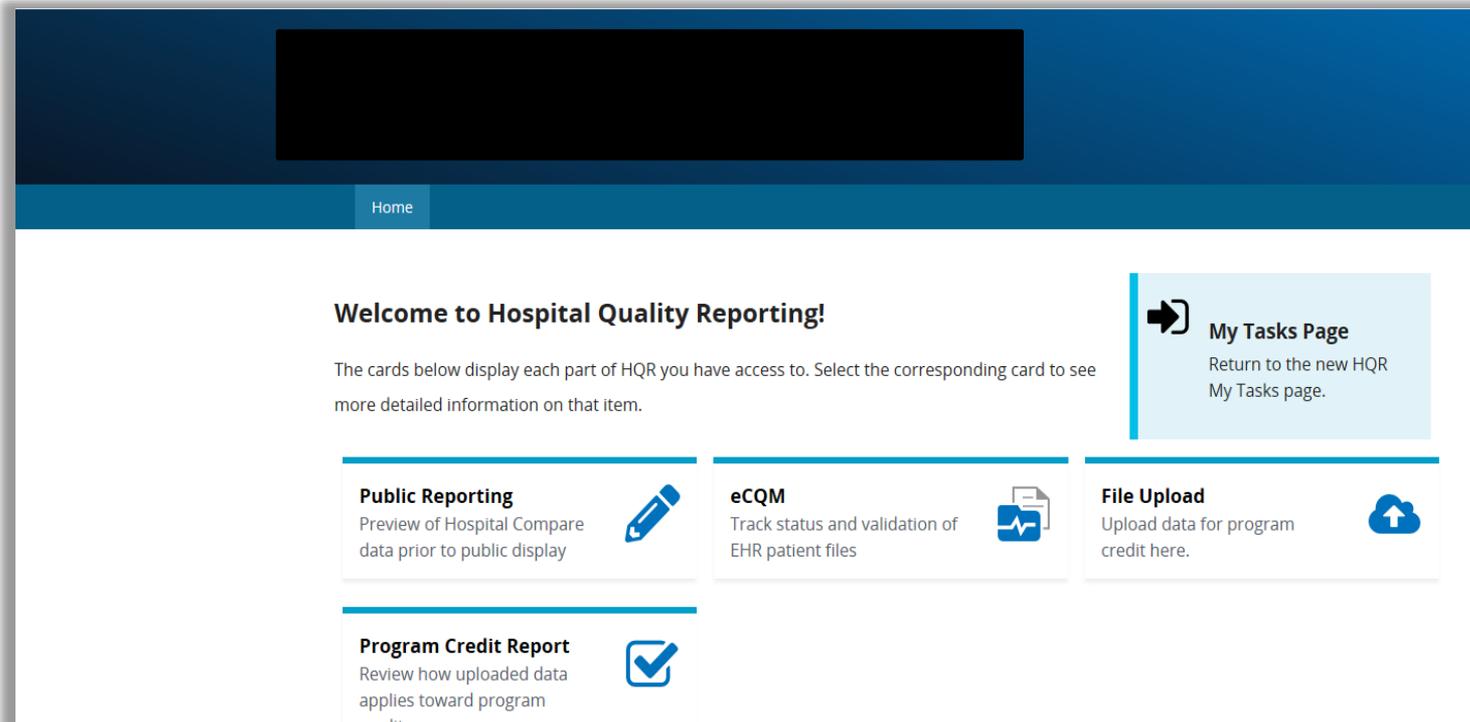
This screenshot shows the CMS.gov Hospital Quality Reporting interface. At the top, there is a navigation bar with 'CMS.gov | Hospital Quality Reporting' and a 'Logout' link. Below this is a yellow navigation bar with 'My Tasks', 'My Reports', and 'Help'. The main content area is titled 'Hospital Quality Reporting: My Tasks' and contains a paragraph of text. On the right side, there is a red-bordered box with the text 'View the new Hospital Quality Reporting' and a blue arrow icon. Below this box, there is a description: 'Access the new and improved Hospital Quality Reporting functions.' At the bottom of the page, there are three buttons: 'Hospital Reporting Inpatient/Outpatient', 'Manage Measures', and 'Manage Notice of Participation'.

Next Generation HQR System

New My Tasks Page

- **What changed?**
 - New and improved navigation from the new My Tasks Page to the HQR System home page.
 - Can access a number of HQR tasks, including the following:
 - Locate Notice of Participation
 - Manage measures
 - Enter web-based data
- **What didn't change?**
 - Level of access for authorized vendors and users

New HQR System Home Page



The screenshot shows the home page of the New HQR System. At the top, there is a dark blue header with a black redaction box. Below the header is a navigation bar with a "Home" button. The main content area features a "Welcome to Hospital Quality Reporting!" message, followed by a paragraph explaining the cards below. To the right, there is a "My Tasks Page" link with a right-pointing arrow icon. Below these are four cards: "Public Reporting" (with a pencil icon), "eCQM" (with a document and pulse icon), "File Upload" (with a cloud and up arrow icon), and "Program Credit Report" (with a checkmark icon).

Home

Welcome to Hospital Quality Reporting!

The cards below display each part of HQR you have access to. Select the corresponding card to see more detailed information on that item.

 **My Tasks Page**
Return to the new HQR My Tasks page.

Public Reporting 

Preview of Hospital Compare data prior to public display

eCQM 

Track status and validation of EHR patient files

File Upload 

Upload data for program credit here.

Program Credit Report 

Review how uploaded data applies toward program credit

11/20/2019

19

New HQR System Home Page – eCQM Reporting Changes

What changed?

- Users no longer need to access the **Secure File Transfer** to perform the Quality Reporting Document Architecture (QRDA) Category I file upload process.
- Selecting the **File Upload** card will assist the data submitter with the steps to upload test and/or production QRDA Category I files.
- Once the data is uploaded for test and/or production QRDA Category I files, click the **eCQM** button to track the status and validation of EHR patient files.
- Once the uploaded data is validated, the user can select the **Program Credit Report** button from the HQR System home page.

Submitting CY 2019 eCQM Data
Using CMS' Next Generation of Hospital Quality Reporting System

New QRDA Category I File Upload Process – Simple File Submission

Simple File Submission (SFS) of eCQM Data

What Changed?

- QRDA Category I file upload process is streamlined and simplified.
 - **No need** to access the Secure File Transfer and perform the following actions:
 - Access the Data Upload page within the Secure File Transfer.
 - Select the folder where the user is uploading production files (**proddata**) or test files (**testdata**) or identifying the CMS program for file submission (**ehrqrda**).
 - Users will receive **one** email that provides the file(s) processing status **within 24 hours**.
- SFS is available now for CY 2019 eCQM submission period and beyond.
- This will eventually replace the Secure File Transfer process.

NOTE: The **Secure File Transfer** process is currently available for file uploads, secure email, and auto route functionality, but it will eventually be replaced. Today's webinar focuses on eCQM reporting. New submission processes for the remaining data types will be developed and released incrementally. Visit [QualityNet](#) and the [Quality Reporting Center](#) for future educational offerings.

File Upload From New HQR System Home Page – One Hospital

This assumes the user has already logged into the *QualityNet Secure Portal* and selected **Hospital Quality Reporting** as the *QualityNet* destination. Hospitals and vendors reporting on behalf of **one** hospital will be presented with this screen. Select **File Upload** to navigate to SFS.

Home

Welcome to Hospital Quality Reporting!

The cards below display each part of HQR you have access to. Select the corresponding card to see more detailed information on that item.

My Tasks Page
Return to the new HQR My Tasks page.

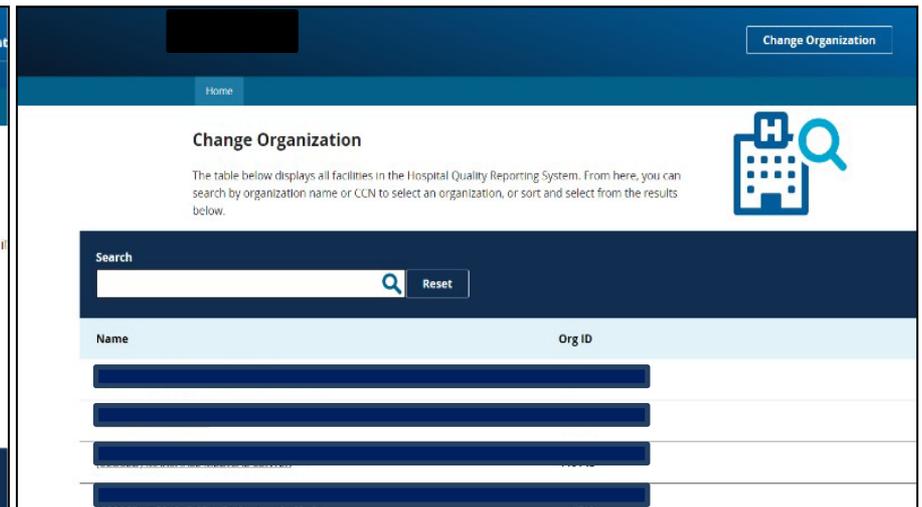
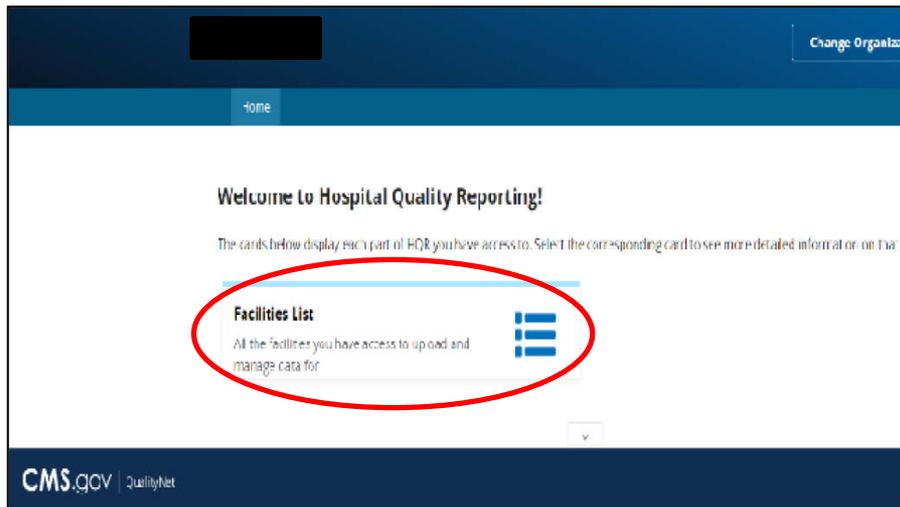
Public Reporting Preview of Hospital Compare data prior to public display		eCQM Track status and validation of EHR patient files		File Upload Upload data for program credit here.	
Program Credit Report Review how uploaded data applies toward program credit					

File Upload From New HQR System

Home Page – Multiple Hospitals

Vendors and other users who have access and permission to submit on behalf of multiple hospitals must select **Facilities List**.

After selecting **Facilities List**, a new page opens that allows users to specify the facility for which they will be submitting data.



Benefit: Users can access the facilities list and change the organization under one login rather than logging back in to the *QualityNet Secure Portal* to review data for a different facility.

Upload Files to Test or Production

The user determines to submit a batch or batches of test or production QRDA Category I files in the drop-down menu. NOTE: The system automatically defaults to test; if you would like to select **production**, select this from the drop-down menu and click **Change Selection**. Click the **Upload** button to upload a batch or batches of QRDA Category I files from your computer.

eCQM

eCQM

Upload your QRDA files for eCQM here. Select your submission type from the drop-down menu. Drag and drop your files or select the Upload button to select your files from your computer.

Submission

Test

Change Selection

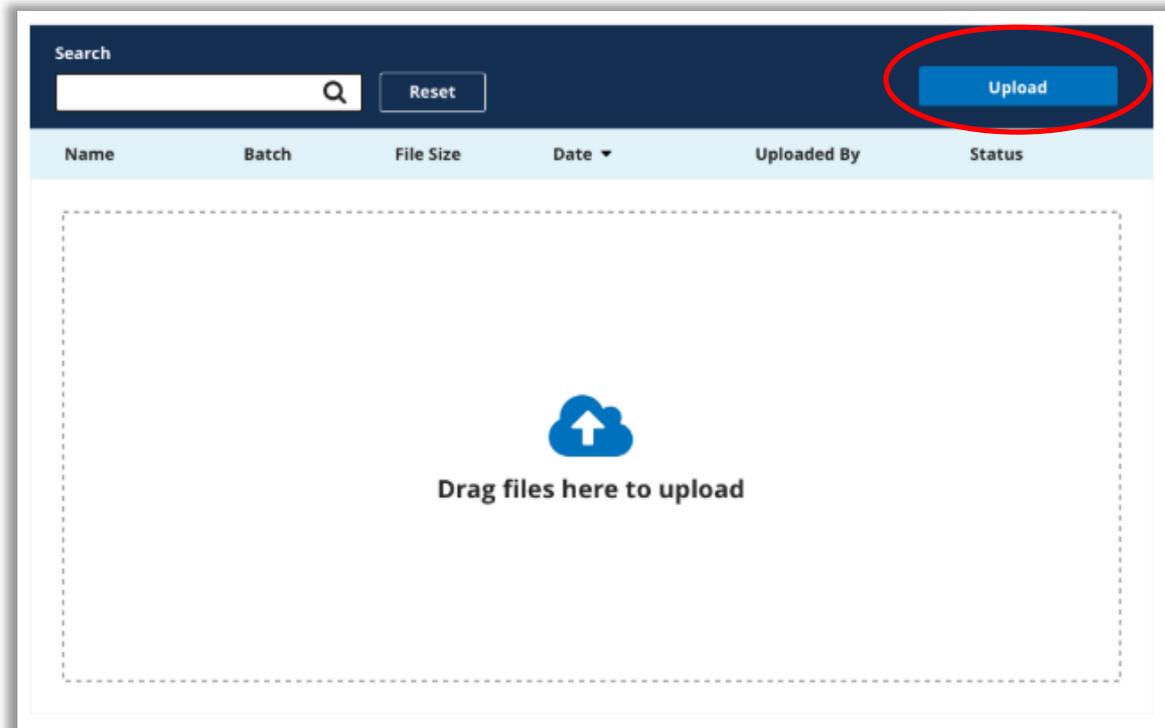
Search

Search

Batch File Name	Batch ID	File Size	Upload Date	Status
IPP_1_DENO...	445825	0.02 MB	10/3/2019	Received

QRDA Category I File Upload Screen

Select **Upload** or drag and drop files in the area that contains the text “Drag files here to upload.” Once the table contains files, the user can then only upload files through the **Upload** button.



Successful File Upload

Once the files are successfully uploaded, the status field will show “Received” along with other details as pictured below. Other statuses available are “Processing” and “Deleted.”

The screenshot displays the eCQM interface. At the top, there is a search bar and a 'Reset' button. Below that is a 'Submission' dropdown menu set to 'Test' and a 'Change Selection' button. The main area features a table with columns: Batch File Name, Batch ID, File Size, Upload Date, Uploaded By, and Status. The table lists ten files, all with a status of 'Received'. A large black redaction box covers the 'Uploaded By' column for all entries. At the bottom, there is a pagination control showing '1' as the active page.

Batch File Name	Batch ID	File Size	Upload Date	Uploaded By	Status
450007_CAC3_...		0.02 MB	10/1/2019	[Redacted]	Received
AM18a_2019_...		0.62 MB	10/1/2019	[Redacted]	Received
AM18a_2019_...		0.62 MB	10/1/2019	[Redacted]	Received
450007_VTE1_...		0.02 MB	10/1/2019	[Redacted]	Received
QRDA_2019.zip		0.02 MB	10/1/2019	[Redacted]	Received
330196_AM18...		0.02 MB	10/1/2019	[Redacted]	Received
330194_PC05_...		0.02 MB	10/1/2019	[Redacted]	Received
330194_PC01_...		0.02 MB	10/1/2019	[Redacted]	Received
ED3_2019.xml		0.02 MB	10/1/2019	[Redacted]	Received
PC01_2019.xml		0.02 MB	10/1/2019	[Redacted]	Received

QRDA Category I File(s) Processing Status Notification

Hospital eCQM Reporting QRDA files have been processed

 [Redacted]

[Reply](#) [Reply All](#) [Forward](#) [More](#)

Fri 9/6/2019 9:51 AM

[Action Items](#) [Get more add-ins](#)

CAUTION: This email originated from outside of the organization. Do not click links or open attachments unless you recognize the sender and know the content is safe.

EHR Submission Summary

The QRDA file(s) you uploaded for Hospital eCQM Reporting have finished processing. A summary of the rejected files for the Batch ID and CCN(s) is below.

To view details of the uploaded files, please sign in to your QualityNet Secure Portal account to run the individual reports. Specific reasons for file rejection and eCQM submission status are in the reports.

[Redacted]

File Name: 2019 Full ME Test Files.zip
Uploaded: 09/06/19 @ 9:44AM

Total Uploaded: **415** | Total Accepted: **311** | Total Rejected: **104**

CCN	Facility	Rejected / Submitted
Error*	Unable to Verify	100 / 100
[Redacted]	[Redacted]	4 / 315

*This error can return when a file(s) fails to pass file format validation or when one or more CCN(s) are invalid or not contractually affiliated. Please check your error reports, correct your QRDA files, and resubmit.

Need Help?

If you have any questions, please contact the QualityNet Help Desk:

Phone: (866) 288-8912
Email: qnetsupport@hcqis.org

Benefit: When submitting data through the Next Generation HQR system, the submitter will receive **one** email detailing the QRDA Category I file processing status **within** 24 hours.

Submitting CY 2019 eCQM Data
Using CMS' Next Generation of Hospital Quality Reporting System

New User Interfaces for Reviewing eCQM Submission Status and Feedback

New eCQM User Interfaces

- File Upload History & Exporting Comma Separated Values (CSV) File
- Submission Accuracy & CSV File
- Measure Results Outcomes & CSV File
- Program Credit Report Interface & Export

Users no longer need to generate the EHR Hospital Reports; the CSV reports streamline the data validation and feedback process in a number of ways:

- The CSV file results are available for export *in less* than 24 hours.
- The CSV file layout avoids the need to print out or download thousands of pages.
- More timely access to the status and validation of patient files is intended to reduce provider burden and streamline the troubleshooting and resubmission process for rejected patient files.

Accessing the Upgraded eCQM User Interface

Home

Welcome to Hospital Quality Reporting!

The cards below display each part of HQR you have access to. Select the corresponding card to see more detailed information on that item.

Public Reporting
Preview of Hospital Compare data prior to public display

eCQM
Track status and validation of EHR patient files

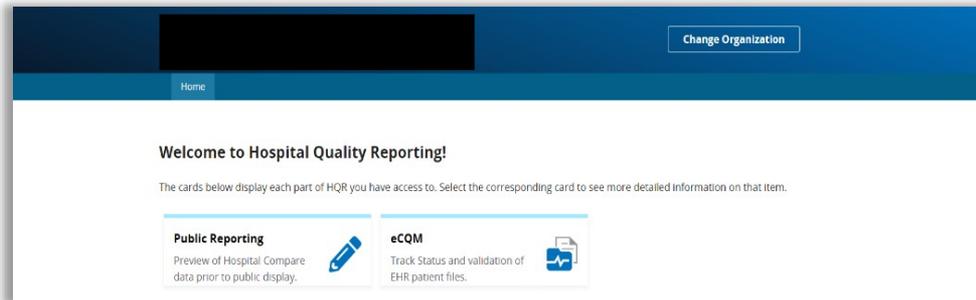
File Upload
Upload data for program credit here.

Program Credit Report
Review how uploaded data applies toward program credit

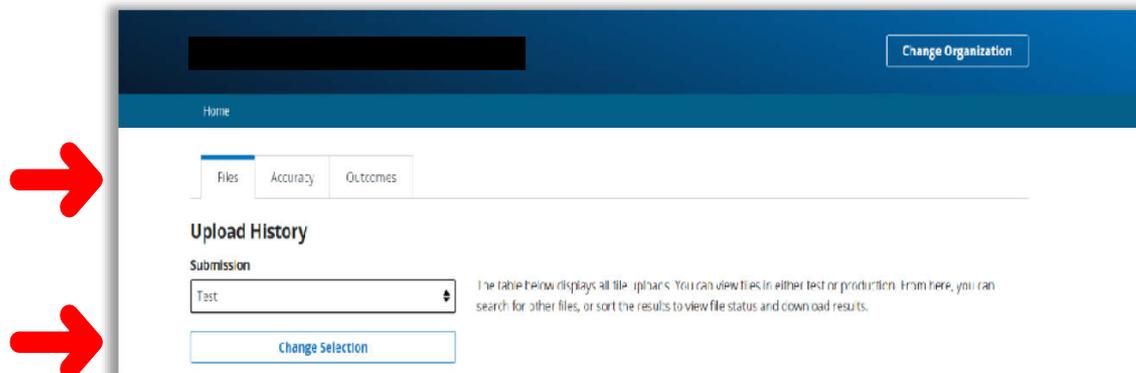
My Tasks Page
Return to the new HQR My Tasks page.

File Upload History

From the Welcome to Hospital Quality Reporting screen, select the **eCQM** button; the page will refresh.



Upon selection of **eCQM**, the upgraded User Interface (UI) defaults to the Files tab where a user can view QRDA Category I file uploads for test and production submissions. The Upload History defaults to test; the user has the option to view test or production batch QRDA Category I file submissions from the drop-down menu. To view production submissions, select **Production** from the drop-down menu and click the **Change Selection** button. The page will refresh.



File Upload History User Display



Files Accuracy Outcomes

Upload History

Submission
Production

The table below displays all file uploads. You can view files in either test or production. From here, you can search for other files, or sort the results to view file status and download results.

Search

Batch File Name	Batch ID	File Size	Upload Date ▾	Uploaded By	Status	Errors
001_421301_Provider...	443462	26.1 KB	06/24/2019	[REDACTED]	✓ Ready	Download
AMI8a_CMS53_NFQ0...	422557	22.9 KB	11/01/2017	[REDACTED]	✓ Ready	Download
VTE1_CMS108_NQF3...	421097	18.1 KB	02/16/2017	[REDACTED]	✓ Ready	Download
STK10_CMS102_NQF...	421099	19.5 KB	02/16/2017	[REDACTED]	✓ Ready	Download
AMI8a_CMS53_NFQ0...	421096	22.9 KB	02/16/2017	[REDACTED]	✓ Ready	Download
VTE2_CMS190_NQF0...	421098	17.6 KB	02/16/2017	[REDACTED]	✓ Ready	Download

Exporting File Upload History

1	FileName	CCN	BatchID	UploadDate	Uploaded	Status	ErrorDetails
2	IPP_0_DENOM_0_NUMER_0_DENEX_0_DENEXCEP_0_STK3_PatientLessThan18.xml	████████	444635	8/23/2019	████████	ACCEPTED	INFO: File Accepted
3	IPP_0_DFNOM_0_NUMFR_0_DFNFX_0_DFNFXCFP_0_STK3_StayGreaterThen120Days.xml	████████	444635	8/23/2019	████████	ACCEPTED	INFO: File Accepted
4	IPP_1_DENOM_0_NUMER_0_DENEX_0_DENEXCEP_0_STK3_IleorrhagicStroke.xml	████████	444635	8/23/2019	████████	ACCEPTED	INFO: File Accepted
5	IPP_1_DENOM_0_NUMER_0_DENEX_0_DENEXCEP_0_STK3_IschcmicStroke.xml	████████	444635	8/23/2019	████████	ACCEPTED	INFO: File Accepted
6	IPP_1_DENOM_0_NUMER_0_DENEX_0_DENEXCEP_0_STK3_StayEquals120Days.xml	████████	444635	8/23/2019	████████	ACCEPTED	INFO: File Accepted
7	IPP_1_DENOM_1_NUMER_0_DENEX_0_DENEXCEP_0_STK3_AnticoagulantTherapyAtDischargeWOAuthorDT.xml	████████	444635	8/23/2019	████████	REJECTED	ERROR: SHALL contain exactly one [1..1] effectiveTime
8	IPP_1_DFNOM_1_NUMFR_0_DFNFX_0_DFNFXCFP_0_STK3_HistoryAtrialFibrillation.xml	████████	444635	8/23/2019	████████	ACCEPTED	INFO: File Accepted
9	IPP_1_DENOM_1_NUMER_0_DENEX_0_DENEXCEP_0_STK3_WithAtrialAblationProcedure.xml	████████	444635	8/23/2019	████████	ACCEPTED	INFO: File Accepted
10	IPP_1_DENOM_1_NUMER_0_DENEX_0_DENEXCEP_0_STK3_WithCurrentDiagnosisAtrialAblation.xml	████████	444635	8/23/2019	████████	ACCEPTED	INFO: File Accepted
11	IPP_1_DENOM_1_NUMER_1_DENEX_0_DENEXCEP_0_STK3_AnticoagulantTherapyAtDischarge.xml	████████	444635	8/23/2019	████████	ACCEPTED	INFO: File Accepted
12	IPP_1_DENOM_1_NUMER_1_DENEX_0_DENEXCEP_1_STK3_AnticoagulantTherapyMedialReason.xml	████████	444635	8/23/2019	████████	ACCEPTED	INFO: File Accepted
13	IPP_1_DFNOM_1_NUMFR_1_DFNFX_0_DFNFXCFP_1_STK3_AnticoagulantTherapyPatientRefusal.xml	████████	444635	8/23/2019	████████	ACCEPTED	INFO: File Accepted
14	IPP_1_DENOM_1_NUMER_1_DENEX_1_DENEXCEP_0_STK3_DischargedToHealthCareFacOrHospice.xml	████████	444635	8/23/2019	████████	ACCEPTED	INFO: File Accepted
15	IPP_1_DENOM_1_NUMER_1_DENEX_1_DENEXCEP_0_STK3_DischargedToHomeOrHospice.xml	████████	444635	8/23/2019	████████	ACCEPTED	INFO: File Accepted
16	IPP_1_DENOM_1_NUMER_1_DENEX_1_DENEXCEP_0_STK3_DischargeToAcuteCareFac.xml	████████	444635	8/23/2019	████████	ACCEPTED	INFO: File Accepted
17	IPP_1_DENOM_1_NUMER_1_DENEX_1_DENEXCEP_0_STK3_LeftAgainstMedAdvice.xml	████████	444635	8/23/2019	████████	ACCEPTED	INFO: File Accepted
18	IPP_1_DENOM_1_NUMER_1_DENEX_1_DENEXCEP_0_STK3_PatientConsent.xml	████████	444635	8/23/2019	████████	ACCEPTED	INFO: File Accepted

eCQM Submission Accuracy Tab

The screenshot displays the 'Accuracy' tab of the eCQM Submission interface. At the top, there are three tabs: 'Files', 'Accuracy', and 'Outcomes'. The 'Accuracy' tab is selected. Below the tabs, the heading 'eCQM Submission' is followed by a descriptive paragraph: 'The table below displays all file uploads. You can view files in either test or production. From here, you can search for other files, or sort the results to view file status and download results.'

Below the text, there are two dropdown menus: 'Submission' (set to 'Test') and 'Quarter' (set to 'Q3 2019'). A 'Change Selection' button is positioned below these filters. To the right, a summary card shows '0 Total Files'. Further right, two more summary cards show '0 Accepted Files' and '0 Rejected Files'.

At the bottom, there is a dark blue search bar with a 'Search' input field, a magnifying glass icon, and a 'Reset' button. An 'Export Results' button is located to the right of the search bar. Below the search bar, a light blue banner contains an information icon and the text: 'No data is currently available. Data for your selection is not ready at this time. Once files are uploaded and processed, this area will be updated and the data will be available for viewing.'

eCQM Submission Type and Reporting Quarter Selections

After selecting the **Submission** type and reporting **quarter**, click the **Change Selection** button. The UI will refresh providing a status of all QRDA Category I patient-level files submitted for that quarter. Users are able to perform a further search for a specific patient file. For example, if a user would like to review the rejected files, select the **Rejected Files** button to display the QRDA Category I patient files with a status of “Rejected.”

The screenshot displays the eCQM Submission interface. At the top, there are tabs for 'Files', 'Accuracy', and 'Outcomes'. Below the tabs, the 'eCQM Submission' section includes a descriptive paragraph and two dropdown menus for 'Submission' (set to 'Test') and 'Quarter' (set to 'Q1 2019'). A 'Change Selection' button is positioned below these filters. To the right, summary statistics show '9 Total Files', '0 Accepted Files', and '9 Rejected Files'. A search bar with a 'Reset' button and an 'Export Results' button is located above a table of file details. The table lists three rejected files with their respective batch IDs, file names, upload dates, and error counts.

Patient File Name	Batch ID	Batch File Name	Upload Date	Uploaded By	Status	Errors
ED1_2019_upd...	443981	ED1_2019_upda...	07/31/2019	[REDACTED]	Rejected	1*
AM18a_ED_201...	443842	AM18a_ED_2019...	07/09/2019	[REDACTED]	Rejected	1*
ED1_2019_upd...	443519	ED1_2019_upda...	06/27/2019	[REDACTED]	Rejected	1*

Exporting File Accuracy Results

If a user would like to export the file processing results for further review, click the **Export Results** button to produce a CSV file. The Accuracy Page export supports the user's efforts to review accepted patient files and review the errors for rejected files for revision and resubmission to the *QualityNet Secure Portal* to achieve acceptance status.

Discharge CD	Provider Name	Uploaded By	Submitted	CMS Certification Num	Patient File Name	BatchID	Each File Name	Upload Status	Error Details	Submit
2	C_220E			409E0CFE99EAB	PP_1_DENOM_0_NUMER_0_DENEX_0_DENEXCFP_0	444635	ex_03_670023.zip	32322E	ACCEPTINFO: File Accepted	PROC
3	C_220E			409E0CFE99EAB	PP_1_DENOM_0_NUMER_0_DENEX_0_DENEXCFP_0	444635	ex_03_670023.zip	32322E	ACCEPTINFO: File Accepted	PROC
4	C_220E			409E0CFE99EAB	PP_1_DENOM_0_NUMER_0_DENEX_0_DENEXCFP_0	444635	ex_03_670023.zip	32322E	ACCEPTINFO: File Accepted	PROC
5	C_220E			409E0CFE99EAB	PP_1_DENOM_0_NUMER_0_DENEX_0_DENEXCFP_0	444635	ex_03_670023.zip	32322E	ACCEPTINFO: File Accepted	PROC
6	C_220E			409E0CFE99EAB	PP_1_DENOM_0_NUMER_0_DENEX_0_DENEXCFP_0	444635	ex_03_670023.zip	32322E	ACCEPTINFO: File Accepted	PROC
7	L_220E			409E0CFE99EAB	PP_1_DENOM_0_NUMER_0_DENEX_0_DENEXCFP_0	444635	ex_03_670023.zip	32322E	ACCEPTINFO: File Accepted	PROC
8	C_220E			409E0CFE99EAB	PP_1_DENOM_0_NUMER_0_DENEX_0_DENEXCFP_0	444635	ex_03_670023.zip	32322E	ACCEPTINFO: File Accepted	PROC
9	C_220E			409E0CFE99EAB	PP_1_DENOM_0_NUMER_0_DENEX_0_DENEXCFP_0	444635	ex_03_670023.zip	32322E	ACCEPTINFO: File Accepted	PROC
10	C_220E			409E0CFE99EAB	PP_1_DENOM_0_NUMER_0_DENEX_0_DENEXCFP_0	444635	ex_03_670023.zip	32322E	ACCEPTINFO: File Accepted	PROC
11	C_220E			409E0CFE99EAB	PP_1_DENOM_0_NUMER_0_DENEX_0_DENEXCFP_0	444635	ex_03_670023.zip	32322E	ACCEPTINFO: File Accepted	PROC
12	C_220E			409E0CFE99EAB	PP_1_DENOM_0_NUMER_0_DENEX_0_DENEXCFP_0	444635	ex_03_670023.zip	32322E	ACCEPTINFO: File Accepted	PROC
13	C_220E			409E0CFE99EAB	PP_1_DENOM_0_NUMER_0_DENEX_0_DENEXCFP_0	444635	ex_03_670023.zip	32322E	ACCEPTINFO: File Accepted	PROC
14	C_220E			409E0CFE99EAB	PP_1_DENOM_0_NUMER_0_DENEX_0_DENEXCFP_0	444635	ex_03_670023.zip	32322E	ACCEPTINFO: File Accepted	PROC

eCQM Measure Results

Outcomes Tab

Selecting the **Outcomes** tab allows the user to view measure results for accepted QRDA Category I patient files. NOTE: The page defaults to the test submission type and the most current CY quarter; the user has the option to view test or production submissions in the drop-down box. If data are not currently available for the selected submission type and quarter, a message will display to indicate no data are currently available (as shown below on the right).

The screenshot shows the 'Outcomes' tab selected. The 'Submission' dropdown is set to 'Production' and the 'Quarter' dropdown is set to 'Q1 2019'. The 'Select Measures' dropdown is set to 'All'. A table displays the following data:

Patient File Name	Measure(s)	Evaluated Episodes	Upload Date	Batch ID
IHP_1_DENOM_0_NUMBER	PC-05	1	07/31/2019	444025
IHP_1_DENOM_1_NUMBER	PC-06	1	07/31/2019	444025
IHP_1_DENOM_0_NUMBER	PC-06	1	07/31/2019	444025



The screenshot shows the 'Outcomes' tab selected. The 'Submission' dropdown is set to 'Test' and the 'Quarter' dropdown is set to 'Q1 2019'. The 'Select Measures' dropdown is set to 'All'. A message at the bottom of the page states: "No data is currently available. Data for your selection is not ready or, this time, since files are uploaded or processed, this area will be updated and the data will be available for viewing."

Select Measures Drop-Down Menu

Choosing the **Select Measures** drop-down menu to select a specific eCQM will allow the user to sort and filter the measure outcomes even further. After a selection is made, click the **Change Selection** button. The page will refresh.

Measure Results

Below are your submitted files. You can review how episodes of care are evaluated by measure logic or download reports.

Submission: Production
Quarter: Q1 2019

Select Measures: ED-1

[Change Selection](#)

Summary Cards:

- ED-1: 44 Episodes
- 8 IPP Not Met
- 0 IPP Met
- 20 Meas. Pop.
- 16 Meas. Pop. Excl.
- 28 Strat. 1
- 8 Strat. 2

Search: [Search] [Reset] [Export Results](#)

Patient File Name	Measure(s)	Evaluated Episodes	Upload Date	Batch ID
IPP_1_MOBS_0_MSRPOP...	ED-1*	1	07/12/2019	443876
IPP_1_MOBS_0_MSRPOP...	ED-1*	1	07/12/2019	443876
IPP_1_MOBS_0_MSRPOP...	ED-1*	1	07/12/2019	443876
IPP_1_MOBS_0_MSRPOP...	ED-1*	1	07/12/2019	443876

Program Credit Report

Home

Welcome to Hospital Quality Reporting!

The cards below display each part of HQR you have access to. Select the corresponding card to see more detailed information on that item.

My Tasks Page
Return to the new HQR My Tasks page.

Public Reporting
Preview of Hospital Compare data prior to public display

eCQM
Track status and validation of EHR patient files

File Upload
Upload data for program credit here.

Program Credit Report
Review how uploaded data applies toward program

Program Credit Report Interface – Promoting Interoperability Program Example

Program Credit Report
Review how the data you have uploaded applies toward program credit.

Discharge Quarter: Q1 2019
Reporting Period Due: 3/2/2020
Last Updated: 10/17/2019 2:06 PM

Change Selection

Promoting Interoperability (PI) Export Report

eCQM

You have met eCQM Submission Credit for PI this Quarter.
You have uploaded enough data to get credit for eCQM within the PI program.

The measures below are the measures that have been submitted for eCQM in the PI program. Sufficient data for at least 4 measures out of a possible 16 are required for program credit. If a measure does not appear on this report it indicates that the measure is "Not Submitted". To see all possible measures, refer to the [program credit requirements](#).

Measure	Submission Status	Last Updated
AMI-6a*	Submitted*	09/09/2019 4:37 PM
ED-3*	Submitted*	09/06/2019 4:19 PM
STK-3*	Submitted*	10/17/2019 2:06 PM
STK-5*	Submitted*	09/09/2019 4:37 PM
STK-10*	Submitted*	09/09/2019 4:17 PM

NOTE: Meeting the Hospital IQR Program eCQM requirement also satisfies the CQM electronic requirement for the Promoting Interoperability Program for EHs and Critical Access Hospitals *except* the outpatient measure ED-3, National Quality Form (NQF) #0496.

In this example, the PI Program requirement has been fulfilled, but *the Hospital IQR program requirements remain unfulfilled if an additional measure was not successfully reported.*

Program Credit Report Export – IQR Example

Program Credit Report Page 1 of 1
Exported 10/17/2019 2:04 PM

[REDACTED]

Inpatient Quality Reporting (IQR) Discharge Quarter: Q1 2019
Reporting Period Due: 3/2/2020
Last Updated: 10/3/2019 5:58 PM

eCQM

You have met eCQM Submission Credit for IQR this Quarter.
You have uploaded enough data to get credit for eCQM within the IQR program.

The measures below are the measures that have been submitted for eCQM in the IQR program. Sufficient data for at least 4 measures out of a possible 15 are required for program credit. To see all possible measures, refer to the program credit requirements¹.

Measure ²	Submission Status ³	Last Updated
AMI-8a	Submitted	09/09/2019 8:37 PM
CAC-3	Submitted	10/03/2019 5:58 PM
STK-5	Submitted	09/09/2019 8:37 PM
STK-10		09/09/2019 8:17 PM
VTE-2		09/09/2019 8:17 PM

The Program Credit Report interface has the same functionality whether the user selects the **PI** button or the **IQR** button to review the status of their eCQM submission credit. Be sure to review the Program Credit Report Export in totality to ensure at least four eCQMs were reported based on specified program requirements.

Submitting CY 2019 eCQM Data
Using CMS' Next Generation of Hospital Quality Reporting System

Entering Case Threshold Exemptions and Zero Denominator Declarations from the New My Tasks Page

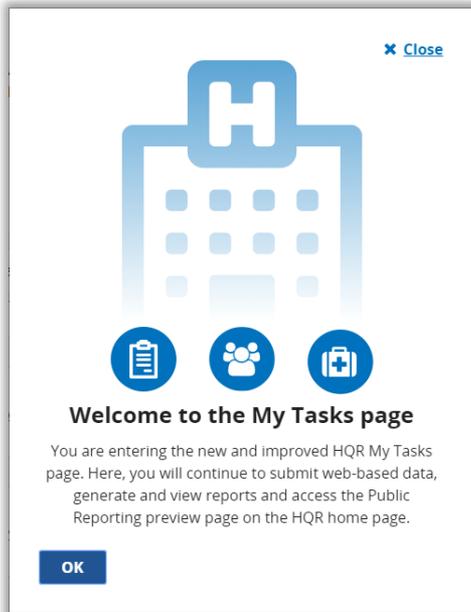
High Level Overview of eCQM Denominator Declaration Policies

	Case Threshold Exemption	Zero Denominator Declaration
Program	<ul style="list-style-type: none"> Hospital IQR Program Promoting Interoperability Program 	<ul style="list-style-type: none"> Hospital IQR Program Promoting Interoperability Program
Criteria	<ul style="list-style-type: none"> A hospital's EHR system is certified to report the eCQM. <p style="text-align: center;">AND</p> <ul style="list-style-type: none"> Five or fewer discharges applicable to an eCQM have occurred during the relevant EHR reporting quarter. 	<ul style="list-style-type: none"> A hospital's EHR system is certified to report the eCQM. <p style="text-align: center;">AND</p> <ul style="list-style-type: none"> A hospital does not have any patients that meet the denominator criteria of that CQM.
Other	<ul style="list-style-type: none"> The eCQM for which there is a valid case threshold exemption will count as submission of one of the required eCQMs for both the Medicare Promoting Interoperability Program and the Hospital IQR Program. Hospitals do not have to utilize the case threshold exemption; they can submit the applicable QRDA Category I files (five or fewer), if they choose. Case threshold exemptions are entered on the Denominator Declaration screen within the <i>QualityNet Secure Portal</i>. 	<ul style="list-style-type: none"> The eCQM for which there is a valid zero denominator will count as submission of one of the required eCQMs for both the Medicare Promoting Interoperability Program and the Hospital IQR Program. Zero denominator declarations are entered on the Denominator Declaration screen within the <i>QualityNet Secure Portal</i>.

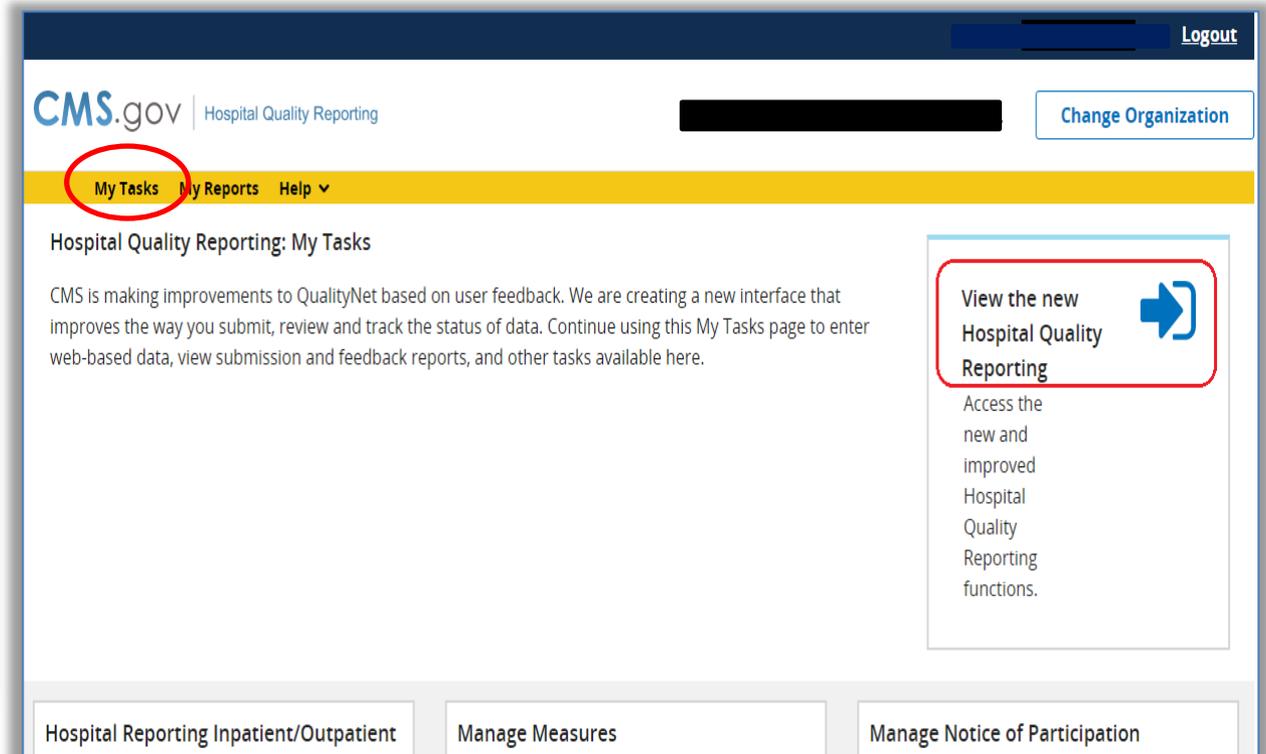
Next Generation HQR System

My Tasks Page

This assumes the user has already logged into the *QualityNet Secure Portal* and selected **Hospital Quality Reporting** as the *QualityNet* destination. Click the **My Tasks** link to access the My Tasks Page. The page will refresh. NOTE: Users can also access the **My Tasks** tab from the **Welcome to Hospital Quality Reporting!** page.



A modal window with a blue header and a close button (x Close). It features a large blue icon of a hospital building with a grid of windows. Below the icon are three smaller blue circular icons: a clipboard, a group of people, and a medical bag. The text reads: "Welcome to the My Tasks page", "You are entering the new and improved HQR My Tasks page. Here, you will continue to submit web-based data, generate and view reports and access the Public Reporting preview page on the HQR home page.", and an "OK" button at the bottom.



A screenshot of the CMS.gov Hospital Quality Reporting My Tasks page. The page has a dark blue header with a "Logout" link. Below the header is a white navigation bar with the CMS.gov logo and "Hospital Quality Reporting" text. A yellow navigation bar contains "My Tasks" (circled in red), "My Reports", and "Help" with a dropdown arrow. The main content area is titled "Hospital Quality Reporting: My Tasks" and contains a paragraph: "CMS is making improvements to QualityNet based on user feedback. We are creating a new interface that improves the way you submit, review and track the status of data. Continue using this My Tasks page to enter web-based data, view submission and feedback reports, and other tasks available here." To the right of this text is a red-bordered box with the text "View the new Hospital Quality Reporting" and a blue arrow icon. Below this box is the text "Access the new and improved Hospital Quality Reporting functions." At the bottom of the page are three white buttons: "Hospital Reporting Inpatient/Outpatient", "Manage Measures", and "Manage Notice of Participation".

Next Generation HQR System

My Tasks Screen

The screenshot shows the CMS.gov Hospital Quality Reporting interface. At the top, there is a navigation bar with 'My Tasks', 'My Reports', and 'Help'. Below this, a header section contains the text: 'Hospital Quality Reporting: My Tasks' and a paragraph stating: 'CMS is making improvements to QualityNet based on user feedback. We are creating a new interface that improves the way you submit, review and track the status of data. Continue using this My Tasks page to enter web-based data, view submission and feedback reports, and other tasks available here.' A callout box on the right says: 'View the new Hospital Quality Reporting' with a right-pointing arrow and the text: 'Access the new and improved Hospital Quality Reporting functions.' The main content area is a grid of task cards. The card for 'EHR Incentive Program Hospital eCQM Reporting' is circled in red. Other cards include 'User Role Management', 'Hospital Reporting Inpatient/Outpatient', 'Manage Measures', 'Manage Notice of Participation', 'Patient Satisfaction Data Entry', 'Vendor Authorization', 'Hospital Reporting Inpatient', and 'Hospital Reporting External Files'. A 'Logout' button is visible in the top right corner.

My Tasks | My Reports | Help ▾

Hospital Quality Reporting: My Tasks

CMS is making improvements to QualityNet based on user feedback. We are creating a new interface that improves the way you submit, review and track the status of data. Continue using this My Tasks page to enter web-based data, view submission and feedback reports, and other tasks available here.

View the new Hospital Quality Reporting
Access the new and improved Hospital Quality Reporting functions.

- User Role Management
[Approve User](#)
- Hospital Reporting Inpatient/Outpatient
[View / Edit Population and Sampling](#)
- Manage Measures
[View/Edit Structural/Web-Based Measures/Data Acknowledgement \(DACA\)](#)
- Manage Notice of Participation
[View/Edit Notice of Participation_Contacts_Campuses](#)
- Patient Satisfaction Data Entry
[Online Survey Entry](#)
- Vendor Authorization
[Authorize Vendors to Submit Data](#)
- Hospital Reporting Inpatient
[View / Edit Measure Designation](#)
- EHR Incentive Program Hospital eCQM Reporting**
[eCQM Intention/Denominator Declaration/ORDA File Deletion](#)
- Manage Security
[In-Person Proofing](#)
[My Account](#)
[Manage Multifactor Credentials](#)
- Hospital Reporting External Files
[External Files Online Tool](#)

Selection Screen

CMS.gov | Hospital Quality Reporting

My Tasks My Reports Help

Hospital eCQM Reporting

[Denominator Declaration](#)

[EHR Batch/File Deletion](#)

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DEPARTMENT OF HEALTH & HUMAN SERVICES

Denominator Declaration Screen – Provider ID and Date Range

CMS.gov | Hospital Quality Reporting

My Tasks My Reports Help

Hospital eCQM Reporting - Denominator Declaration

Denominator Declaration for eQMs

Select Provider ID (CCI) Select Date Range

eCQM	Domain	Zero Denominator **	Case Threshold Exemption ***
No Data Found			

Submit Cancel

CMS.gov | QualityNet

CMS.gov QualityNet.org QualityNet Help Desk Help

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DEPARTMENT OF HEALTH & HUMAN SERVICES

Denominator Declaration Data Entry Screen

The screenshot displays the 'Denominator Declaration for eCQMs' data entry screen. At the top, there are navigation links for 'My Tasks', 'My Reports', and 'Help'. Below this, the page title is 'Hospital eCQH Reporting > Denominator Declaration'. A 'Logout' button is visible in the top right corner. The main content area features a form with a 'Select Provider ID (CCN)' field and a 'Select Date Range' dropdown menu, which is circled in red. Below the form is a table of eCQMs with columns for 'eCQM', 'Domain', 'Zero Denominator **', and 'Case Threshold Exemption ***'. The table lists various eCQMs such as AMI-8a, CAC-3, ED-1, ED-2, ED-3*, EMDI-1a, PC-01, PC-05, STK-2, STK-3, STK-5, STK-6, STK-8, STK-10, VTE-1, and VTE-2. The 'Zero Denominator' column contains checkboxes, and the 'Case Threshold Exemption' column contains a '2' for STK-10, which is circled in red. The footer of the page includes the CMS.gov logo, 'QualityNet', and links to 'QualityNet.org', 'QualityNet Help Desk', and 'Help'. There are also links for 'Accessibility', 'Privacy Policy', and 'Terms of Use'. The Department of Health & Human Services logo is visible in the bottom right corner.

eCQM	Domain	Zero Denominator **	Case Threshold Exemption ***
AMI-8a	Clinical Process/Effectiveness	<input type="checkbox"/>	
CAC-3	Patient and Family Engagement	<input type="checkbox"/>	
ED-1	Patient and Family Engagement	<input type="checkbox"/>	
ED-2	Patient and Family Engagement	<input type="checkbox"/>	
ED-3*	Care Coordination	<input type="checkbox"/>	
EMDI-1a	Clinical Process/Effectiveness	<input type="checkbox"/>	
PC-01	Clinical Process/Effectiveness	<input type="checkbox"/>	
PC-05	Clinical Process/Effectiveness	<input type="checkbox"/>	
STK-2	Clinical Process/Effectiveness	<input type="checkbox"/>	
STK-3	Clinical Process/Effectiveness	<input type="checkbox"/>	
STK-5	Clinical Process/Effectiveness	<input type="checkbox"/>	
STK-6	Clinical Process/Effectiveness	<input type="checkbox"/>	
STK-8	Patient and Family Engagement	<input type="checkbox"/>	
STK-10	Care Coordination	<input type="checkbox"/>	2
VTE-1	Patient Safety	<input type="checkbox"/>	
VTE-2	Patient Safety	<input checked="" type="checkbox"/>	

Submitting CY 2019 eCQM Data
Using CMS' Next Generation of Hospital Quality Reporting System

Additional Tips and Information

Extraordinary Circumstances Exception (ECE) Policy

Visit [QualityNet.org](https://www.qualitynet.org)

<https://www.qualitynet.org/inpatient/asures/ecqm/participation#tab3>

Requirements

Pre-Submission Validation

Extraordinary Circumstances

Extraordinary Circumstances Exceptions (ECE) Policy

The Centers for Medicare & Medicaid Services (CMS) offers a process for hospitals to request and for CMS to grant exceptions with respect to the reporting of required quality data—including eCQM data when there are extraordinary circumstances beyond the control of the hospital.

eCQM Related ECEs

Hospitals may use the Extraordinary Circumstances Exceptions (ECE) form to request an exception from the Hospital Inpatient Quality Reporting (IQR) Program's eCQM reporting requirement for the applicable program year, based on hardships preventing hospitals from electronically reporting. Such circumstances could include, but are not limited to, infrastructure challenges (e.g., a hospital is in an area without sufficient Internet access) or unforeseen circumstances (e.g., a hospital has health information technology [IT] vendor issues outside of the hospital's control, including a vendor product losing certification) that impact the hospital's ability to report eCQM data. For further information, reference this ECE Policy Clarification Questions and Answers.

File Name	File Type	File Size	
ECE Policy Clarification Questions and Answers	PDF	56 KB	Download

Non-eCQM Related ECEs

Hospitals may request an exception from various quality reporting requirements due to extraordinary circumstances beyond the control of the facility. Such circumstances may include, but are not limited to, natural disasters (such as a severe hurricane or flood) or systemic problems with CMS data collection systems that directly affected the ability of facilities to submit data. Hospitals may request consideration for an exception of the requirement to submit quality data for one or more quarters. For non-eCQM related ECEs, an ECE request form must be submitted **within 90 calendar days of the extraordinary circumstance.**

ECE Request Form Submission Instructions

In the event of such circumstances, hospitals must submit an Extraordinary Circumstances Exceptions (ECE) Request Form with **all** required questions completed. For eCQM-related ECEs, an ECE request form must be submitted by **April 1 following the end of the eCQM reporting period calendar year (CY)***. As an example, for data collection for the CY 2018 reporting period (through December 31, 2018), hospitals would have until April 1, 2019, to submit an ECE request.

File Name	File Type	File Size	
Extraordinary Circumstances Exceptions (ECE) Request Form	PDF	71 KB	Download

Promoting Interoperability Program Information

Visit [CMS.gov](https://www.cms.gov)

<https://www.cms.gov/Regulations-and-Guidance/Legislation/EHRIncentivePrograms/index.html>

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Home > Regulations and Guidance > Promoting Interoperability (PI) Programs > Promoting Interoperability (PI)

Promoting Interoperability (PI) Programs

[2019 Program Requirements Medicare](#)

[2019 Program Requirements Medicare](#)

[2018 Program Requirements Medicare](#)

[2018 Program Requirements Medicare](#)

[Educational Resources](#)

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[Medicare and Medicaid Promoting Interoperability Program Basics](#)

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[Certified EHR Technology](#)

[Eligible Hospital Information](#)

[Medicaid State Information](#)

[Medicare Advantage](#)

[CMS Promoting Interoperability \(PI\) Listserv](#)

Promoting Interoperability (PI)

Latest News

- On August 2, 2019 CMS published the *Fiscal Year (FY) 2020 Medicare Hospital Inpatient Prospective Payment System for Acute Care Hospitals and Long-term Care Hospital Prospective Payment System Final Rule*. For more information on the upcoming changes for the 2020 program year, visit the [Federal Register](#) and view this [fact sheet](#).
- [FY2020 IPPS/LTCH PPS Correction Notice \(Published June 18, 2019\)](#).
- The Medicare Promoting Interoperability Program Hardship Exception Application for CAHs for the PY 2018 payment adjustment is open from May 1, 2019 - December 2, 2019. Applications can now be electronically submitted [here](#). For more information on the scoring, payment adjustment, and hardship process for the Medicare and Medicaid Promoting Interoperability Programs, click [here](#).

Dates to Remember

January 1 - December 31, 2019
<ul style="list-style-type: none">2019 Promoting Interoperability Programs Reporting Year.
December 2, 2019
<ul style="list-style-type: none">CAH hardship exception application deadline
January 1, 2020
<ul style="list-style-type: none">Data submission for 2019 reporting begins

Promoting Interoperability Programs Milestones

In 2011, CMS established the Medicare and Medicaid EHR Incentive Programs (now known as the Promoting Interoperability programs) to encourage clinicians, eligible hospitals, and CAHs to adopt, implement, upgrade (AIU), and demonstrate meaningful use of CEHRT.

Historically, the Promoting Interoperability Programs consisted of [three stages](#):

- Stage 1** set the foundation for the Promoting Interoperability Programs by establishing requirements for the electronic capture of clinical data, including providing patients with electronic copies of health information.

CMS Listserves Announcing CMS' Next Generation HQR System

Visit *QualityNet* eCQM Notifications

<https://www.qualitynet.org/inpatient/asures/ecqm/notifications>

- **9/4/19** - *Coming Soon in September: CMS Hospital Quality Reporting System Will Open for Calendar Year 2019 Electronic Clinical Quality Measure (eCQM) Data*
- **9/25/19** - *CMS Hospital Quality Reporting System Now Accepting CY 2019 eCQM Data*
- **10/11/19** – *The Next Generation of the QualityNet Secure Portal*
- **10/11/19** – *The Next Generation of the QualityNet Secure Portal New File Submission Tool Available*

Resources

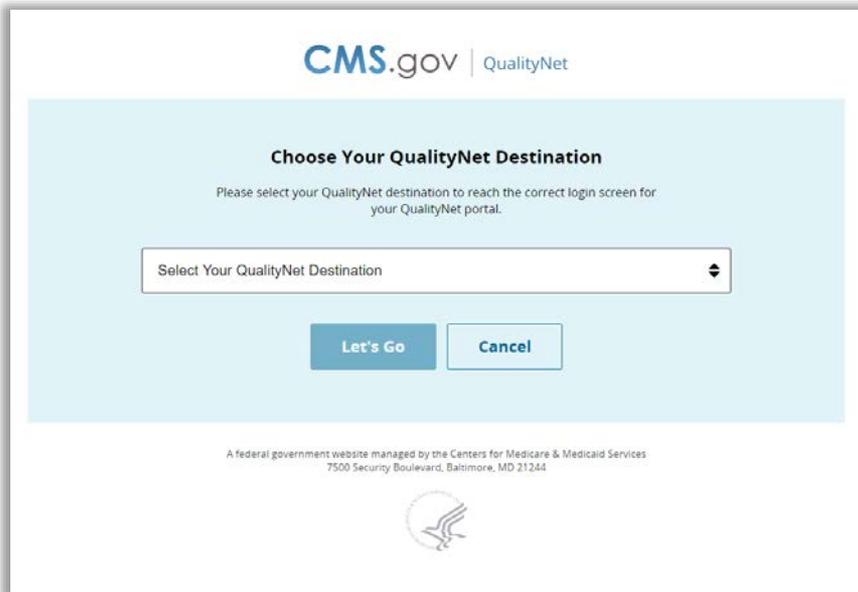
Topic	Who to Contact?	How to Contact?
<ul style="list-style-type: none"> • <i>QualityNet Secure Portal</i> (reports, PSVA tool, uploading data, and troubleshooting file errors) • Promoting Interoperability Program and Policy (previously known as the EHR Incentive Program) (objectives, attestation and policy) 	<p><i>QualityNet</i> Help Desk</p>	<p>(866) 288-2912 qnetsupport@hcqis.org</p>
<p>Hospital IQR Program and Policy</p>	<p>Hospital Inpatient Support Team</p>	<p>(844) 472-4477 https://cmsqualitysupport.service-now.com/qnet_qa</p>
<ul style="list-style-type: none"> • eCQM Specifications (code sets, measure logic and measure intent) • QRDA-related Questions (CMS Implementation Guide, Sample Files and Schematrons) 	<p>ONC Jira Issue Trackers</p>	<p>eCQM Issue Tracker https://oncprojecttracking.healthit.gov/support/projects/CQM/summary QRDA Issue Tracker https://oncprojecttracking.healthit.gov/support/projects/QRDA/summary</p>
<p>eCQM Data Validation</p>	<p>Validation Support Team</p>	<p>Validation@hcqis.org or https://cms-ip.custhelp.com/</p>

Submitting CY 2019 eCQM Data
Using CMS' Next Generation of Hospital Quality Reporting System

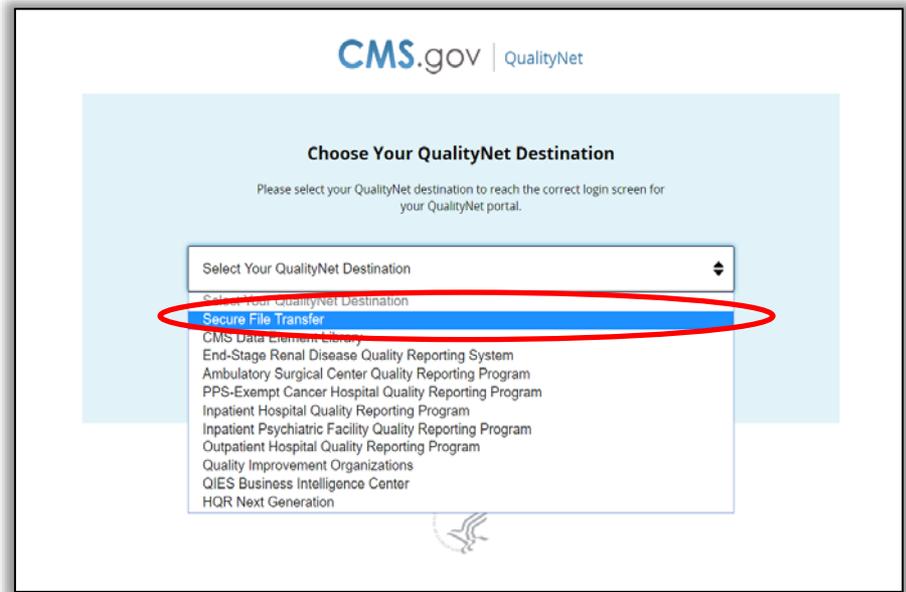
Appendix - Information for Generating EHR Hospital Reports in the Legacy HQR System

Selecting Secure File Transfer

On landing page after *QualityNet Secure Portal* Log In, click on arrows to see drop-down menu.



Select **Secure File Transfer**.
Select **Let's Go**.



QualityNet Login

The log in page appears.

CMS.gov | QualityNet
Centers for Medicare & Medicaid Services

Log In to QualityNet *Required Field
Please enter your CMS User ID and password, followed by your Symantec VIP Security Code, then click Submit.

*User ID

*Password

*Security Code

Help
Start/Complete New User Enrollment
Forgot your password?
Trouble with your Security Code?
Need to register for a QualityNet account?

[QualityNet Home](#) **CMS.gov** **QualityNet**

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7500 Security Boulevard, Baltimore, MD 21244

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QualityNet Secure Portal Home Page

After the page loads, select **My Reports**.

The screenshot shows the QualityNet Secure Portal Home Page. At the top, there are navigation links for Alerts (0), Notifications (0), Secure File Transfer, User Profile, and Log Out. The main navigation bar includes Home, Quality Programs, My Reports (circled in red), and Help. Below the navigation bar, there is a Welcome message and a section titled "QualityNet Secure Portal" with a description of the site's purpose. A "To Request Access" section provides instructions for accessing reports. A "Quality Programs" section lists various reporting systems. On the right side, there are three sections: "QualityNet News" (No items to display), "Announcements from QualityNet Team" (No items to display), and "QualityNet Events" (The QualityNet Event Center provides a schedule of upcoming training sessions). The footer contains a "Home" button, the CMS.gov QualityNet logo, and a list of helpful links, help resources, and CMS sites. A small Acrobat Reader logo is also present in the footer.

Start Reports Menu

Alerts (0) | Notifications (49) | Secure File Transfer | User Profile | Log Out

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Home - Quality Programs - My Reports - Help -

Home>My Reports>Run Reports

Start | Run Report(s) | Search Report(s) | Favorites

Start Reports

This reporting portlet allows you to run and access reports on quality program data to which you are granted access.

I'd Like To...
Run Report(s)
Search Report(s)
View Favorite Reports

Select Run Reports.

Alerts (0) | Notifications (49) |

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Home - Quality Programs - My Reports - Help -

Home>My Reports>Run Reports

Start | Run Report(s) | Search Report(s) | Favorites

Select Program, Category and Report | Report Parameters | Confirmation

Select Program, Category and Report

The available reports are grouped by program and category combination. If you have access to a single program, your program is pre-selected, and if the category related to the selected program has a single value, the table below by clicking on its name.

Report Program: IQR

Report Category: EHR Hospital Reporting - Feedback Reports

VIEW REPORTS

Report Category is required. Use the arrow keys to select one value from the dropdown list.

REPORT NAME: No Reports are available.

REPORT DESCRIPTION:

Select EHR Hospital Reporting - Feedback Reports or EHR Hospital Submission Reports

Differences Between Report Categories

Feedback Category	Submission Category
Primarily used by hospitals	Primarily used by vendors, but can be accessed by hospitals
Data should be the same in the feedback or the submission categories	Hospitals authorize vendors to access these reports
	Able to pull up numerous hospitals at once and analyze data <ul style="list-style-type: none">• Additional data fields not available for the feedback category (upload start/end date, batch ID)

EHR Hospital Reports Document

Visit [Qualitynet.org](https://www.qualitynet.org) Download the EHR hospital reports document

<https://www.qualitynet.org/inpatient/asures/ecqm/resources>

EHR Hospital Reports Available in *QualityNet Secure Portal* Calendar Year (CY) 2019/Fiscal Year (FY) 2021 eCQM Reporting



Frequently Asked Questions	Report Name	Report Purpose	Report File Type
Which report displays how the Quality Reporting Document Architecture (QRDA) Category I files were processed at the file level for electronic health record (EHR) reporting?	EHR Hospital Reporting – Submission Detail Report (R529)	File-level validation shows the conformance or error statements within rejected files.	Generate for test and production QRDA Category I files through the feedback and submission report categories.
Which report provides a summary of the total individual files (submitted within a batch file) that were accepted, deleted, or rejected?	EHR Hospital Reporting – Submission Summary Report (R528)	This is a summary report; therefore, the counts display every accepted, rejected, and deleted file submitted for the selected quarter. This count includes files that have been submitted more than once. NOTE: This report only evaluates if the measure template is in the file and should not be utilized to determine reporting success.	Generate for test and production QRDA Category I files through the feedback and submission report categories.
Which report can provide a summary level of measure performance calculations?	EHR Hospital Reporting – eCQM Performance Summary Report (R547)	This report provides performance calculations (such as denominator and numerator populations), continuous variable observations, etc.	Generate for production QRDA Category I files through the feedback and submission report categories.
Which report shows if our hospital's production file submissions are meeting the CMS definition of successful electronic clinical quality measure (eCQM) reporting for the Hospital Inpatient Quality Reporting (IQR) Program and Promoting Interoperability (PI) Program for eligible hospitals and critical access hospitals (CAHs)?	EHR Hospital Reporting – eCQM Submission Status Report (R530)	The PI Program for Hospitals and Successful IQR-EHR Submission fields in this report indicate successful submission of eCQM data when a Y, for Yes, is displayed for each field. NOTE: The definition of successful submission is a combination of QRDA Category I files, zero denominator declarations, and/or case threshold exemptions reported via the <i>QualityNet Secure Portal</i> by the reporting deadline.	Generate for production QRDA Category I files through the feedback and submission report categories. NOTE: This is a snapshot in time. If the reporting changes in any way, regenerate the report for the most current status of the PI Program for eligible hospitals and CAHs and IQR-EHR submission categories.
Which report is available to review measure calculations at the patient level, measure level, and for each episode of care?	EHR Hospital Reporting – eCQM Submission and Performance Feedback Report (R546)	The aforementioned measure calculations are available on accepted files and can be tracked by discharge quarter.	Generate for test and production QRDA Category I files (only available through the submission report category).

Report Parameters

Select the parameters that define the selected report.
Select **RUN REPORT**.

* Indicates required fields.

EHR Hospital Reporting - eCQM Performance Summary Report - IQR

* **State:**
TX

* **Submitter:**
[REDACTED]

* **Discharge Quarter:**
Please select

Provider:
[REDACTED]

Measure Set:
[REDACTED]

* **Report Format:**
PDF

CANCEL RESET **RUN REPORT**

Report Confirmation Screen

Reports should be available for download within 24 hours of the request. If the reports are not available after 24 hours, contact the *QualityNet* Help Desk at qnetsupport@hcqis.org or (866) 288-8912.

Alerts (0) | Notifications (49)

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Home ▾ Quality Programs ▾ My Reports ▾ Help ▾

Home > My Reports > Run Reports

Start Run Report(s) Search Report(s) Favorites

✔ Select Program, Category and Report ✔ Report Parameters Confirmation

Report Submitted

Thank you. Your report request has been submitted for processing.
Processing time may vary due to the number of current requested reports.
To run the same report with different parameters, click RUN SAME REPORT.
To run a new report, click RUN NEW REPORT.
To search and view submitted reports, click SEARCH REPORTS.
To make this report a Favorite, click SEARCH REPORTS.
To manage your Favorites, click the Favorites tab.

CANCEL RUN SAME REPORT RUN NEW REPORT SEARCH REPORTS

Submitting CY 2019 eCQM Data
Using CMS' Next Generation of Hospital Quality Reporting System

Question and Answer Session

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.

Submitting CY 2019 eCQM Data
Using CMS' Next Generation of Hospital Quality Reporting System

Thank You

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