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Troubleshooting Audio

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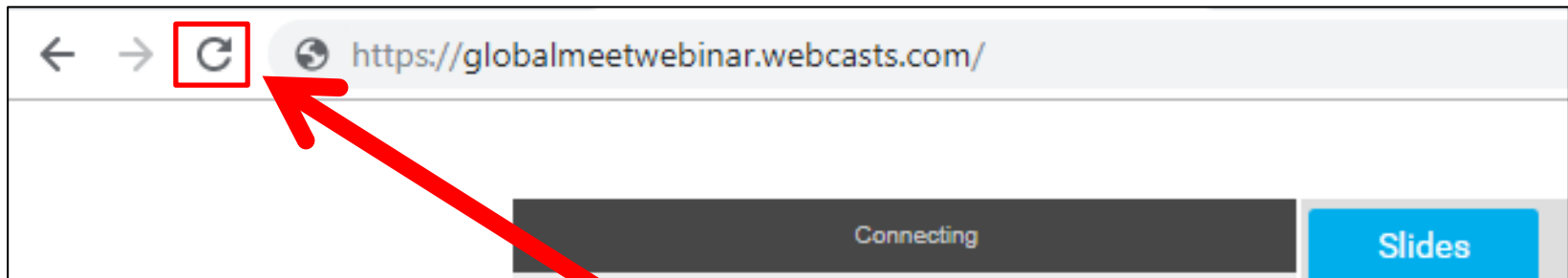
Click Refresh

– or –

Press F5



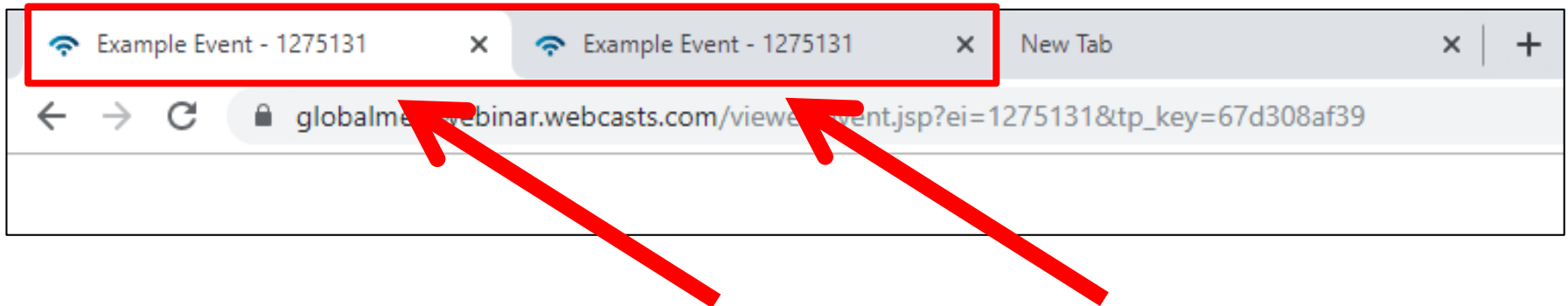
F5 Key
Top Row of Keyboard



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 “Ask a Question” section, located on the left-hand side of your screen.



Inpatient Value, Incentives, and Quality Reporting (VIQR) Outreach and Education Support Contractor

A screenshot of a web interface for asking questions. At the top, there is a black bar with a pause icon, a refresh icon, the word "Live", and a speaker icon. Below this is a blue header with a downward arrow and the text "Ask a Question". Under the header is a text input field with the placeholder text "Ask a Question". At the bottom left of the input area is a grey button with the text "Send". The entire interface is enclosed in a red rectangular border.

Today's Presentation



Measure Collaboration Workspace Webinar Series: eCQI Resource Center, Hybrid Measure, Measure Collaboration Workspace, and the CMS Measures Inventory Tool

Artrina Sturges, EdD

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

July 15, 2020

Purpose

This presentation, the first of three Measure Collaboration Workspace Series sessions, highlights the tools supporting the electronic clinical quality improvement activities for Eligible Hospitals, Critical Access Hospitals, Eligible Professionals, and Eligible Clinicians reporting eCQMs for CMS quality programs.

Objectives

Participants will be able to:

- Describe Electronic Clinical Quality Improvement (eCQI) Resource Center resources available for the 2021 performance and reporting period, hybrid measure, and pre-rulemaking measures.
- Understand and use the Measure Collaboration Workspace electronic clinical quality measure (eCQM) Concepts module.
- Use the CMS Measures Inventory Tool (CMIT) to search for measure concepts and conduct environmental scans.

Webinar Chat Questions

Please submit any questions that are pertinent to the webinar topic via the Chat tool. As time permits, we will answer these questions at the end of the webinar. Pertinent questions not answered will be addressed in a questions-and-answers document, to be published at a later date.

Note: As a reminder, we do not use the raised-hand feature in the Chat tool during webinars.

If you have an additional question after this event, submit your question through the [QualityNet](#) Inpatient Questions and Answers tool, at [QualityNet Q&A Tool](#). Include the webinar name, slide number, and speaker name.

If you have a question unrelated to the current webinar topic, we recommend that you first search for it in the [QualityNet](#) Inpatient Questions and Answers tool, at [QualityNet Q&A Tool](#). If you do not find an answer, then submit your question to us via the same tool.

We will respond to questions as soon as possible.

Presenters

- Debbie Krauss, MS, RN, Nurse, Center for Clinical Standards and Quality (CCSQ), CMS
- Edna Boone, MS, eCQI Resource Center Coordinator, Battelle
- Katrina Hoadley, MS, RN, Nurse, CCSQ, CMS
- Bridget Blake, BS, Principal Systems Engineer, MITRE
- Rose Almonte, MS, RN, Principal Clinical Informatics, MITRE
- Mary Sheehan, MPH, MMS Inventory Lead, Battelle
- Marissa White, MPH, MMS Inventory Team, Battelle
- Nina Heggs, CMS Inventory Lead

Debbie Krauss, MS, RN, Nurse, CCSQ, CMS

eCQM Strategy Project Background

eCQM Strategy Project Background

eCQM Strategy Project Goals

- Reduce Burden
- Increase Value
- Increase Stakeholder Involvement

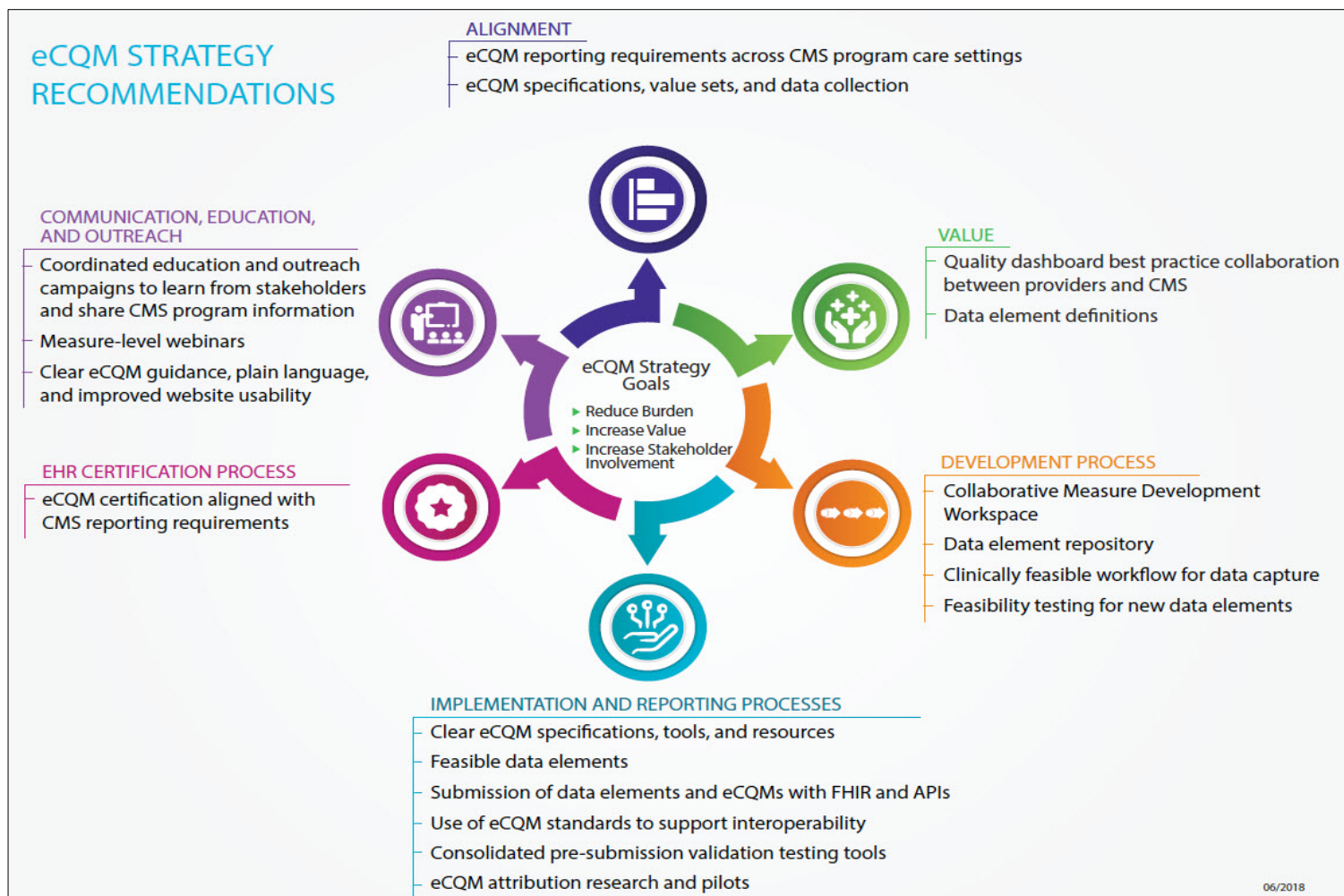
Problem Statement

- Providers participating in CMS quality and value-based purchasing programs have shared challenges they experience related to the **complexity and high burden of eCQM implementation, data capture, and reporting.**

Project Scope

- **Measure Development** process from concept to the Measures Under Consideration (MUC) list
- **Electronic Clinical Quality Reporting** requirements and processes from eCQM implementation to submission
- **Tools for Development and Reporting**

eCQM Strategy Recommendations



Edna Boone, MS, eCQI Resource Center Coordinator, Battelle

eCQI Resource Center

eCQI Resource Center

- The Electronic Clinical Quality Improvement (eCQI) Resource Center serves as a one-stop shop for the most current information to support eCQI.
- This website has the most current news, events, and resources related to eCQM tools and standards.
- The center is a place to coordinate people and activities around eCQI.

eCQI Resource Center

<https://ecqi.healthit.gov>

eCQI
RESOURCE CENTER

eCOMs -
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Quality Measures

Resources -
Standards, Tools, &
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Updated eCOMs and
Implementation Resources for
2021 Reporting Now Available


Eligible Professional/Clinician >

Eligible Hospital/CAH >


Electronic Clinical Quality Improvement (eCQI)
Resource Center - The one-stop shop for the most
current resources to support electronic clinical quality
improvement.




Featured Resources



Eligible Professional / Eligible
Clinician eCOMs



Eligible Hospitals / Critical Access
Hospital eCOMs



Educational Resources

**Connect with the Community of Professionals Who are Dedicated to Clinical Quality
Improvement for Better Health**

Latest News

[Updated eCOM Specifications and eCOM Materials for 2021 Reporting
Now Available](#)

Upcoming Events

May 17	HL7 FHIR Connection 24 - Virtual Connection Wed, May 13, 2020 Kick off
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New Resources

- eCQM Telehealth Guidance for Eligible Professionals and Eligible Clinicians
 - [2020](#) reporting/performance
 - [2021](#) reporting/performance
- The eCQI Resource Center [Hybrid Measures page](#) houses the most current hybrid measures and key resources for their implementation.

eCQI Resource Center

Demonstration:

- Updated format of the eCQM pages
- eCQM Annual Update for 2021
Reporting/Performance Periods
- Telehealth Guidance for 2020 and 2021
Reporting/Performance Periods
- Hybrid measure page
- Contact Us

Katrina Hoadley, MS, RN, Nurse, CCSQ, CMS

Hybrid Measures

Introduction to Hybrid Measures

- A hybrid measure uses both claims data and core clinical data elements (CCDE) from the electronic health records (EHR) for measure calculation.
- Core clinical data elements:
 - Are intended to reflect a patient's clinical status when the patient first presents to an acute care hospital for treatment.
 - Are routinely and consistently captured in most adult inpatient records and can be electronically extracted from hospital EHRs.
- To calculate the hybrid measure, administrative data from the EHR (linking variables) are needed to link the CCDE to the claims data.

Overview of the Hybrid Hospital-Wide Readmission (HWR) Measure

- The Hybrid HWR measure is an all-cause, risk-standardized readmission measure that focuses on unplanned readmissions 30 days of discharge from an acute hospitalization.
- The measure includes the following:
 - Medicare fee-for-service beneficiaries
 - Patients ages 65 years or older
 - Patients discharged alive from non-federal acute care hospitals
 - Patients not transferred to another acute care facility.
- Measure methodology aligns with the claims-based HWR measure currently used in the Hospital Inpatient Quality Reporting (IQR) Program, with the difference that the hybrid measure uses CCDE as part of the risk adjustment.

List of CCDE and Linking Variables

For the Hybrid HWR measure, hospitals need to submit 13 CCDE and six linking variables.

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

Overview of the Hybrid HWR Measure

The Fiscal Year (FY) 2020 inpatient prospective payment system (IPPS) rule finalized the following:

- Voluntary reporting in CY 2023
 - Hospitalizations between July 2021 and June 2022
- Voluntary reporting in CY 2024
 - Hospitalizations between July 2022 and June 2023
- Subsequent mandatory reporting under the Hospital IQR Program starting in 2025 (FY 2026 payment determination)
 - Beginning with hospitalizations between July 2023 and June 2024
- Removal of the claims-based HWR measure from the Hospital IQR Program beginning with CY 2024/FY 2026 payment determination to align with the start of mandatory reporting of the Hybrid HWR measure

Bridget Blake, Principal Systems Engineer, MITRE

Measure Collaboration Workspace

Measure Collaboration (MC) Workspace

- Hosted on the eCQI Resource Center (<https://ecqi.healthit.gov/>)
- Contains a set of interconnected resources, tools, and processes for eCQMs
- Promotes transparency and better interaction across stakeholder communities interested in developing and implementing more harmonized, accurate, and meaningful eCQMs
- Provides access to the eCQM Data Element Repository, an online, searchable tool that provides all the data elements associated with eCQMs used in CMS Quality Reporting Programs

How to Access the MC Workspace

The screenshot shows the eCQI Resource Center website. The header includes the eCQI logo, navigation links for eCQMs, Resources, About, and My account, and a search bar. The main content area features a blue banner for updated eCQMs and implementation resources for 2021 reporting, with buttons for eligible professionals/clinicians and hospitals/CAHs. A sidebar menu lists various eCQMs and a 'MEASURE COLLABORATION' section, which is highlighted with a red box. Below the main content, there is a 'Featured Resources' section with three icons: a clinician, a hospital, and a graduation cap.

← → ↻ 🏠 ecqi.healthit.gov 🔍 ⭐

eCQI
RESOURCE CENTER

eCQMs ▾
Electronic Clinical Quality Measures

Resources ▾
Standards, Tools, & Resources

About ▾
eCQI, CDS, FAQs Engage

My account ▾
Manage Your Account

Enter keywords

Updated eCQMs and Implementation Resources for 2021 Reporting Now Available

Eligible Professional/Clinician ➔

Eligible Hospital/CAH ➔

Electronic Clinical Quality Improvement (eCQI) Resource Center - The one-stop shop for the most current resources to support electronic clinical quality improvement.

EP/EC ECQMS

- Eligible Professional / Eligible Clinician eCQMs
- Pre-Rulemaking eCQMs

EH/CAH ECQMS

- Eligible Hospital / Critical Access Hospital eCQMs
- Pre-Rulemaking eCQMs
- Hybrid Measures

ABOUT

- About eCQMs
- eCQM Annual Timeline
- eCQM Lifecycle
- Certification

MEASURE COLLABORATION

- Measure Collaboration (MC) Workspace

Featured Resources

-
-
-

Overview of the MC Workspace

Links to Measure Concept Resources
Meaningful Measures Areas
CMS Measures Inventory Tool (CMIT)
Measures Under Consideration (MUC) List

- Propose new measure concepts
- Assess alignment with Meaningful Measures Areas
- Check the CMS Measures Inventory for similar measures

- Access eCQM data elements
- Find value sets
- Access use cases related to a data element(s)
- See data element test results
- Comment on a data element(s) for measures under development



- Access the shared development workspace
- Search measure workflow documentation
- Provide comments on evolving eCQMs

- Access test results
- See all important test attributes
- Participate in measure testing activities

11/2019

<https://ecqi.healthit.gov/mcworkspace>

Rose Almonte, MS, RN, Principal Clinical Informatics, MITRE

MC Workspace eCQM Concepts Module

eCQM Concepts

- Submit measure concept ideas for feedback from the eCQI Resource Center user community
- Submit measure concept ideas to CMS for review
- Search submitted concepts and share your feedback
- Access resources to research existing measures in progress

eCQM Concepts Landing Page

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MC Workspace

Measure Collaboration (MC) Workspace

AbouteCQM ConceptseCQM Clinical WorkflowseCQM Test ResultseCQM Data Element Repository

Electronic Clinical Quality Measure (eCQM) Concepts

The Electronic Clinical Quality Measures (eCQM) Concept module gives users the ability to comment on concepts under development or submit new measure concepts, align new measures with Meaningful Measures criteria, and identify whether similar measures exist. Feedback can help guide the measure developer to refine the concept and purpose behind a new measure to better suit the needs of the quality measurement reporting community. Browse eCQM Concepts that have been submitted and share comments to help inform the measure development process.

How to Comment on or Propose an eCQM Concept

If you have a measure concept in mind or want to comment on an existing concept, follow these simple steps to propose your idea:

1. Search the [CMS Measures Inventory Tool](#), to see if your proposed measure concept is in progress.
2. Search the [Measure Collaboration Workspace Proposed Concepts Library](#) for your measure concept. If it exists, submit your comments supporting the concept for consideration by the measure developer.
3. If your proposed measure concept does not exist, click on [Propose an eCQM Concept](#), to submit basic information about your concept. This information will be routed to CMS measure developers for consideration.

Propose an eCQM Concept

Create an eCQI Resource Center account to Propose an eCQM Concept.

Create new account >

Already have an eCQI RC account? [Sign in](#)

eCQM Concepts Demo

<https://ecqi.healthit.gov/mc-workspace-2/ecqm-concepts>

- Access eCQM Concepts module
- Search existing eCQM Concepts
- Comment on an existing eCQM Concept
- Submit a new eCQM Concept

We Welcome Feedback

- The eCQI Resource Center and Measure Collaboration Workspace are constantly improving to better meet the needs of users.
- Please send any news, events, content, questions or suggestions to ecqi-resource-center@hhs.gov or visit the Contact Us page at <https://ecqi.healthit.gov/contact>.

Mary Sheehan, MMS Inventory Lead, Battelle
Marissa White, MMS Inventory Team, Battelle
Nina Heggs, CMS Inventory Lead

CMS Measures Inventory Tool (CMIT)

CMS Measures Inventory Tool (CMIT)

- Host site for the CMS Quality Measures Inventory
- Agency-level repository of record for information about the measures CMS uses to promote healthcare quality and quality improvement



Purpose of CMIT

- Provide stakeholders access to information about quality measures
- Promote transparency
- Coordinate quality improvement efforts
- Enable public participation in quality measurement
- Assist in management of the CMS Quality Measure Portfolio
 - Foster measure harmonization and alignment
 - Identify redundancies
 - Identify measurement gaps

CMIT Data


- The CMS Quality Measures Inventory consists of the following:
 - Measures in CMS programs that are subject to the federal rulemaking process and have been proposed, finalized, implemented, or removed
 - Measures under Development (MUDs) and Measures under Consideration (MUCs) for the above programs
 - Measures used in programs and initiatives that are not subject to the federal rulemaking process, including measures that may be a part of CMS models or initiatives
- Data sources include Federal Rules, measure specification manuals, CMS Program and Measure Leads
- All measure information is validated by CMS Program and Measure Leads
- Data are updated three times a year and the system is moving toward more real-time updates

CMIT Features


- Measure results and measure program results
- Search, filter, and sort measures inventory
- Measure information, including measure specifications, Meaningful Measure Area, Healthcare Priority, National Quality Forum (NQF) ID, endorsement status, etc.
- Export and print results
- Summary of measures by program and status
- Measure comparison
- Environmental scan

CMIT Demo

<https://cmit.cms.gov>

 Centers for Medicare & Medicaid Services

Measures Inventory Tool

External Resources ▾ About ▾  0

MEASURE INVENTORY MEASURE SUMMARY 0 MEASURE COMPARISON ENVIRONMENTAL SCAN





How do I search? Enter keywords or ID to search the measures inventory  

TABLE CONTROLS Show/Hide Columns  Export Excel File 

786 MEASURE RESULTS | View Results by Measure Program Show 10 rows ▾ << < 1 2 3 4 5 ... 79 > >>

FILTERS ?

+ Programs

+ Current Status

+ Measure Type

+ NQF Endorsement Status

+ Development Stage

+ Meaningful Measure Area

+ Measure Groups

Measure Content Last Updated: 2020-01-13 ? What are the Status Definitions?

Clear All x Implemented x Finalized x

Add to Measure Comparison	CMIT Ref No	Measure Title ?	NQF Endorsement Status	NQF ID	Programs	Measure Type
<div>Add +</div>	1700	3-Item Care Transitions Measure (CTM-3)	Endorsement Removed	0228	<ul style="list-style-type: none">Hospital Compare (Implemented)Hospital Inpatient Quality Reporting (Implemented)Hospital Value-Based Purchasing (Implemented)	Outcome

Measures Management System (MMS)

- Standardized system for developing and maintaining the quality measures used in CMS programs and initiatives
- Includes resources for measure developers and opportunities for stakeholders
- Highlights:
 - MMS Newsletter
 - Information Sessions
 - *CMS Measures Management System Blueprint (Blueprint v15.0)*
 - <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/MMS/MMS-Content-Page>

Questions or Comments?



Engage and Get Help

- Use the eCQI Resource Center
 - <https://ecqi.healthit.gov>
- Share feedback on the Measure Collaboration Workspace
 - <https://ecqi.healthit.gov/mc-workspace>
- Explore the CMS Measures Inventory Tool
 - <https://cmit.cms.gov>
- Engage with the eCQI community
 - <https://ecqi.healthit.gov/engage-ecqi>
- Learn about eCQM communication resources
 - <https://ecqi.healthit.gov/sites/default/files/eCQMCommunication%20Resources-2020-508.pdf>
- Reach out for help
 - <https://ecqi.healthit.gov/contact>
- ONC Project Issue Tracking System (Jira)
 - <https://oncprojecttracking.healthit.gov>

Contact Information

**Electronic Clinical Quality Improvement
(eCQI) Resource Center and
Measure Collaboration (MC) Workspace**
ecqi-resource-center@hhs.gov

CMS Measures Inventory Tool (CMIT)
MMSSupport@battelle.org

Measure Collaboration Workspace Webinar Series:
eCQI Resource Center, Hybrid Measure, Measure Collaboration
Workspace, and the CMS Measures Inventory Tool

Question & 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.

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Measure Collaboration Workspace Webinar Series:
eCQI Resource Center, Hybrid Measure, Measure Collaboration
Workspace, and the CMS Measures Inventory Tool

Appendix – eCQI Resource Center Demonstration Screen Shots

eCQI Resource Center

<https://ecqi.healthit.gov>

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Updated eCQMs and Implementation Resources for 2021 Reporting Now Available

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[Eligible Hospital/CAH >](#)

Electronic Clinical Quality Improvement (eCQI) Resource Center - The one-stop shop for the most current resources to support electronic clinical quality improvement.

EP/EC ECQMS

- Eligible Professional / Eligible Clinician eCQMs
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ABOUT


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- Certification


MEASURE COLLABORATION


- Measure Collaboration (MC) Workspace



Featured Resources







eCQM page

<https://ecqi.healthit.gov/eCQM>

eCQMs

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About

Development

Tools & Resources

Education

Connect

Electronic clinical quality measures[?] (eCQMs[?]) use data electronically extracted from electronic health records (EHRs[?]) and/or health information technology[?] systems to measure the quality of health care provided. The Centers for Medicare & Medicaid Services (CMS) use eCQMs in a variety of quality reporting and value-based purchasing programs. Review [eCQM Basics](#) (PDF) and visit the Education tab.

There are several benefits of using eCQMs

- eCQMs use detailed clinical data to assess the outcomes of treatment by healthcare providers and organizations
- eCQMs reduce the burden of manual abstraction and reporting for provider organizations and clinicians
- eCQMs foster the goal of access to real-time data for bedside quality improvement and clinical decision support

Hospitals, professionals, and clinicians use eCQMs to provide feedback on their care systems and to help them identify opportunities for clinical quality improvement. eCQMs are also used in reporting to CMS, The Joint Commission, and commercial insurance payers in programs that reimburse providers based on quality reporting.

Find eCQMs:


Eligible hospital[?] (EH) and critical access hospital[?] (CAH) eCQMs and supporting materials are on the [eligible hospital/critical access hospital](#) page of this website.

Eligible professional[?] (EP) and eligible clinician[?] eCQMs and supporting materials are on the [eligible professional/eligible clinician](#) page of this website.

Explore Measure Collaboration (MC) Workspace[?]:

Eligible Professional/Eligible Clinician eCQM Page - Implementation Resources

<https://ecqi.healthit.gov/ep-ec>



Eligible Professional / Eligible Clinician eCQMs

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Select Performance Period: 2020 ▾

eCQM Resources EP/EC eCQMs About


Search Resources

2020 Performance Period Eligible Professional / Eligible Clinician Resources

For Use ▾	eCQM Implementation Resources	Published ▾
Jan 1 - Dec 31 2020	Implementation Checklist eCQM Annual Update ⓘ	
Jan 1 - Dec 31 2020	*NEW* Telehealth Guidance for eCQMs for Eligible Professional/Eligible Clinician 2020 Quality Reporting (PDF) ⓘ	Jun 2020
Jan 1 - Dec 31 2020	Guide for Reading eCQMs v5.0 (PDF) ⓘ	May 2019
Jan 1 - Dec 31 2020	Eligible Clinicians and Eligible Professionals Table of eCQMs v3 (PDF) ⓘ	Jun 2020
Jan 1 - Dec 31 2020	eCQM Specifications for Eligible Clinicians and Eligible Professionals v2 (ZIP) ⓘ	Nov 2019
Jan 1 - Dec 31 2020	eCQM Value Sets ⓘ	May 2019

Eligible Professional/Eligible Clinician eCQM page - eCQM Table

<https://ecqi.healthit.gov/ep-ec>



Eligible Professional / Eligible Clinician eCQMs

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Select Performance Period: 2020

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Search eCQMs


[Apply](#)

2020 Performance Period Eligible Professional / Eligible Clinician eCQMs
Total number of EP/EC eCQMs: 47

Measure Name ▼	CMS eCQM ID ▼	Quality Domain ▼	NQF ID	MIPS Quality ID ▼	Meaningful Measure Area ▼	Telehealth Eligible ▼
Adult Major Depressive Disorder (MDD): Suicide Risk Assessment	CMS161v8	Effective Clinical Care	0104e	107	Prevention, Treatment, and Management of Mental Health	Yes
Anti-depressant Medication Management	CMS128v8	Effective Clinical Care	Not Applicable	009	Prevention, Treatment, and Management of Mental Health	Yes

Eligible Professional/Eligible Clinician eCQM Page - About

<https://ecqi.healthit.gov/ep-ec>



Eligible Professional / Eligible Clinician eCQMs

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Select Performance Period: 2021


[eCQM Resources](#)[EP/EC eCQMs](#)[About](#)

Each year, CMS updates the eCQMs[®] for potential use in CMS quality reporting programs and publishes them on the eCQI Resource Center[®]. CMS updates the specifications[®] to align with current clinical guidelines and code systems[®] so they remain relevant and actionable within the clinical care setting. CMS requires the use of most current version of the eCQMs for the applicable performance/reporting periods for all quality reporting programs.

Performance period for [eligible clinicians](#)[®] is defined as the measure data capture period of the calendar year between January 1 and December 31. The updated eCQMs are to be used by eligible clinicians and [eligible professionals](#)[®] to electronically report 2021 clinical quality measure[®] data for CMS quality reporting programs. Measures will not be eligible for 2021 reporting unless and until they are proposed and finalized through notice-and-comment rulemaking for each applicable program.

CMS has updated eCQMs for potential inclusion in these programs

- [Quality Payment Program: The Merit-based Incentive Payment System \(MIPS\) and Advanced Alternative Payment Models \(Advanced APMs\)](#) [↗](#)
- [APM: Comprehensive Primary Care Plus \(CPC+\)](#) [↗](#)
- [APM: Primary Care First \(PCF\)](#) [↗](#)
- [Medicaid Promoting Interoperability Program for Eligible Professionals](#) [↗](#)



eCQM Implementation Checklist

Use the eCQM[®] Resources and follow the [eCQM Implementation Checklist](#)[®] to update your electronic health record and processes for eCQM use and reporting.

Pre-rulemaking Eligible Professional/ Eligible Clinician eCQMs

<https://ecqi.healthit.gov/pre-rulemaking-ep-ec-ecqms>

Pre-rulemaking Eligible Professional/Eligible Clinician eCQMs

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CMS pre-rulemaking electronic clinical quality measures (eCQMs) are developed, but specifications are not finalized for use in a CMS quality reporting program. These measures will not be eligible for CMS quality reporting until they are proposed and finalized through notice-and-comment rulemaking for each applicable program.

Feedback on technical aspects of these eCQMs should be submitted to the ONC Project Tracking System ([Jira](#)) [eCOM Issue Tracker](#).

Feedback on the potential use of these eCQMs in CMS quality programs is to be submitted during formal CMS public comment periods associated with the relevant proposed rules.

Measure Name ▼	CMS eCOM ID ◆	NQF ID	Meaningful Measure Area ◆
Intravesical Bacillus-Calmette-Guerin for nonmuscle invasive bladder cancer	CMS646v1	Not Applicable	Appropriate Use of Healthcare
Potential Opioid Overuse	CMS460v2	Not Applicable	Prevention and Treatment of Opioid and Substance Use Disorders

eCOM Implementation Resources	Published ◆
eCOM Value Sets Pre-Rulemaking	May 2020
Technical Release Notes Pre-Rulemaking for CMS460v2 (Excel)	May 2020

Eligible Hospital/ Critical Access Hospital eCQMs

<https://ecqi.healthit.gov/eh-cah>



Eligible Hospital / Critical Access Hospital eCQMs

[Receive updates on this topic](#)

Select Reporting Period: 2021 ▾

eCQM Resources

EH/CAH eCQMs

About

Hybrid Measures

Hybrid measures are quality measures that merge electronic health record data elements with claims data to calculate measure results. Currently, the Hybrid Hospital Wide Readmission (HWR) measure is the only hybrid measure adopted for use in a program.

The electronic specifications for the Hybrid Hospital Wide Readmission (HWR) measure are updated for the voluntary reporting period from July 1, 2021 through June 30, 2022 for the [Hospital Inpatient Quality Reporting \(IQR\) Program](#). Hospitals that submit data for this measure during the voluntary reporting period would receive confidential hospital-specific reports that detail submission results from the reporting period, as well as the Hybrid HWR measure results. Data will not be publicly reported during the voluntary reporting period. CMS will begin the public reporting of the Hybrid HWR measure results beginning with data collected from the July 1, 2023 through the June 30, 2024 reporting period.

Each year, CMS makes updates to the Hybrid HWR measure adopted for reporting in the Hospital Inpatient Quality Reporting (IQR) program. Hybrid measures require updates to the electronic specifications, posted below, and to claims-based specifications, available on [QualityNet](#). CMS requires the use of updated electronic specifications for all its quality programs because they include updated codes, logic corrections, and clarifications. Reporting data for the Hybrid HWR measure to the Hospital IQR program requires that a hospital or electronic health record vendor use the most current version of the electronic measure specifications (identified below) for the applicable reporting period.

Use the Hybrid HWR Measure Materials and follow the [eCQM Implementation Checklist](#) to update your electronic health record and processes for Hybrid measure use and reporting.

2021 Reporting Period Eligible Hospital / Critical Access Hospitals

This is a voluntary hybrid measure and does not count toward eCQM submission.

Measure Name ▾	CMS eCQM ID ▾	NQF ID	Meaningful Measure Area ▾
Core Clinical Data Elements for the Hybrid Hospital-Wide Readmission (HWR) Measure with Claims and Electronic Health Record Data	CMS529v1	2879e	Admissions and Readmissions to Hospitals

2021 Reporting Period Eligible Hospitals / Critical Access Hospitals

For Use ▾	Implementation Resources	Published ▾
2021 01-04	Implementation Checklist eCQM Annual Update	

Measure Collaboration Workspace Webinar Series:
eCQI Resource Center, Hybrid Measure, Measure Collaboration
Workspace, and the CMS Measures Inventory Tool

Appendix – eCQM Concepts Module Screen Shots

eCQM Concepts Search and Featured Research Resources

Proposed eCQM Concepts[®] Library

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Select a Clinical Setting

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HH-01 Hospital Harm - Severe Hypoglycemia

maggielohnes • Last Updated: 4/21/2020

41 Views | 0 Comments | 0 Subscribers | Published


HH-02 Hospital Harm - Severe Hyperglycemia

maggielohnes • Last Updated: 4/21/2020


22 Views | 0 Comments | 0 Subscribers | Published

Featured Research Resources


Browse these featured external sites to identify whether a similar measure concept exists or to get more information about CMS measures.



CMS CMIT
Measure Inventory Tool




CMS MUC
Measures Under
Consideration



CMS MMU
Meaningful Measures Hub

[See more eCQI Tools & Key Resources](#)

eCQM Concept Page

 MC Workspace

HH-01 Hospital Harm – Severe Hypoglycemia

Not in a Group • maggielohnes • Published • Last Updated: 4/21/2020



41 Views



0 Comments



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Description

This measure assesses the proportion of encounters of patients 18 years of age or older at admission, who were administered at least one hypoglycemic medication during the encounter, who suffer the harm of a severe hypoglycemic event during the encounter. Harm (numerator) is defined as a laboratory or point-of-care (POC) test for blood glucose with a result less than 40 mg/dL, where the hypoglycemic medication was given within the 24 hours prior to the start of the low blood glucose event (and administered during the encounter). Only one severe hypoglycemic event is counted per encounter.

Initial Population

All encounters when the patient is 18 years of age or older at the start of the encounter, and at least one hypoglycemic medication was administered during the encounter. Measure includes instances of administration of hypoglycemic medications in the emergency department or in observation status at the start of an inpatient admission when assessing inclusion of encounters in the measure denominator.

Measure Population

Denominator: Equals Initial Population

Numerator:

eCQM Concept – Add New Comment

Meaningful Measure Areas
[Preventable Healthcare Harm](#)

Keywords
harm, hypoglycemia

Measure Documents
[eSpecifications for HH01-Severe Hypoglycemia \(ZIP\)](#)

Add new comment

Comment *

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[About text formats](#)

Save Preview

Create eCQM Concept

Create eCQM Concept

Title *

Description *

Rationale *

Concept Population

Meaningful Measure Area

Keywords

Description *

B I | ∞ | | | | |

About text formats ?

Provide a brief description of the clinical focus area, target population, and relevant background information.

Care Setting * - Select a value -

Select the care setting that is most relevant to this clinical focus area.

Save and Continue Later

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Workspace, and the CMS Measures Inventory Tool

Appendix – Acronyms

Acronyms

AUS	Annual Updates and Specifications	HSR	Hospital-Specific Report
CCDE	core clinical data element	HWR	Hospital-Wide Readmission
CCN	CMS Certification Number	IPPS	inpatient prospective payment system
CCSQ	Center for Clinical Standards and Quality	IQR	Inpatient Quality Reporting
CE	continuing education	MAT	Measure Authoring Tool
CMIT	CMS Measures Inventory Tool	MBI	Medicare Beneficiary Identifier
CMS	Centers for Medicare & Medicaid Services	MC	Measure Collaboration
DOB	date of birth	MMS	Measures Management System
eCQI	Electronic Clinical Quality Improvement	MUC	Measures under Consideration
eCQM	electronic clinical quality measures	MUD	Measures under Development
EHR	electronic health record	NQF	National Quality Forum
FAQ	frequently asked question	Q&A	question and answer
FY	fiscal year	QRDA	Quality Reporting Document Architecture
HICN	Health Insurance Claim Number	VIQR	Value, Incentives, and Quality Reporting