

# Welcome!

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# Troubleshooting Audio

Audio from computer speakers breaking up?

Audio suddenly stop?

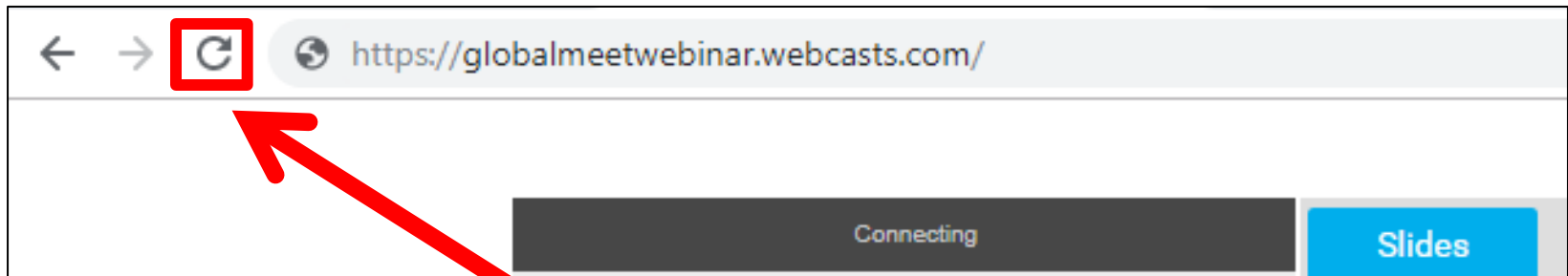
Click Refresh

– or –

Press F5



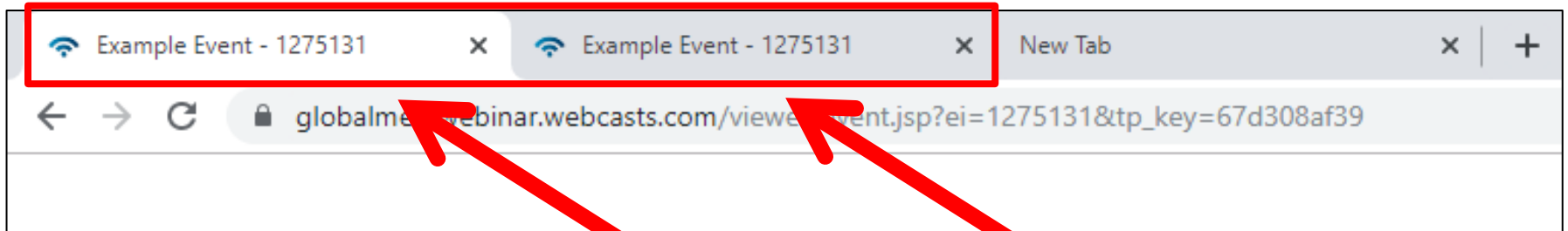
F5 Key  
Top Row of Keyboard



Refresh

# Troubleshooting Echo

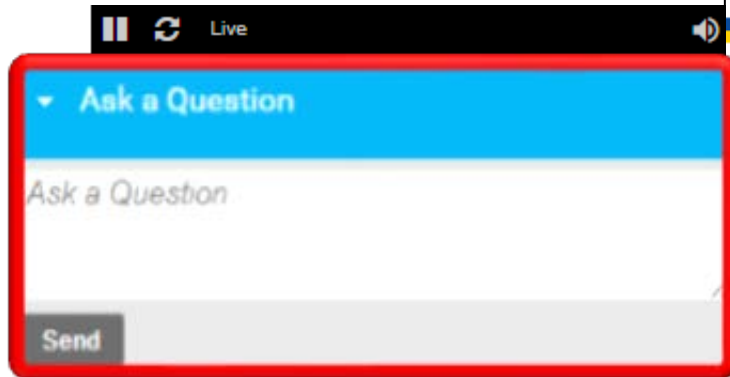
- Hear a bad echo on the call?
- The echo is caused by multiple browsers/tabs open to a single event (multiple audio feeds).
- Close all but one browser/tab, and the echo will clear.



Example of Two Browsers/Tabs Open in Same Event

# Submitting Questions

Type questions in the Ask a Question section, on the left-hand side of your screen.



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

**Today's Presentation**



# **Navigating the Voluntary Hybrid HWR Measure Data Submission Process**

**August 5, 2022**

# Speakers

**Tamara Mohammed, MHA, PMP**

Project Lead

Yale New Haven Health Services Corporation/  
Center for Outcomes Research and Evaluation (CORE)

**Veronica Dunlap, BSN, RN, CCM**

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

# Purpose

This presentation provides the reporting requirements and *Hospital Quality Reporting (HQR) Secure Portal* submission processes for the 2023 voluntary reporting of Hybrid Hospital-Wide Readmission (HWR) measure data.

# Objectives

Participants will be able to:

- Summarize the 2023 voluntary reporting requirements for the Hybrid HWR measure for the Hospital Inpatient Quality Reporting (IQR) Program.
- Navigate to the HQR User Interfaces (UIs) for Hybrid HWR measure data submission.
- Understand the steps to upload and review Hybrid HWR measure data accuracy in the *HQR Secure Portal*.
- Understand the answers to some commonly asked questions.



# Acronyms

<b>CAH</b>	critical access hospital	<b>HQR</b>	Hospital Quality Reporting
<b>CCDE</b>	core clinical data elements	<b>HSR</b>	Hospital-Specific Report
<b>CCN</b>	CMS Certification Number	<b>HWM</b>	Hospital-Wide Mortality
<b>CCSQ</b>	Center for Clinical Standards and Quality	<b>HWR</b>	Hospital-Wide Readmission
<b>CEHRT</b>	Certified EHR Technology	<b>IG</b>	implementation guide
<b>CMS</b>	Centers for Medicare & Medicaid Services	<b>IPPS</b>	inpatient prospective payment system
<b>CORE</b>	Center for Outcomes Research and Evaluation	<b>IQR</b>	Inpatient Quality Reporting
<b>CSV</b>	Comma-Separated Value	<b>K/MCL</b>	thousands of cells per microliter
<b>CY</b>	calendar year	<b>KG</b>	kilogram
<b>DOB</b>	date of birth	<b>L</b>	liter
<b>ECE</b>	Extraordinary Circumstances Exception	<b>MBI</b>	Medicare Beneficiary Identifier
<b>eCQI</b>	electronic clinical quality improvement	<b>MCL</b>	Prospective Payment System
<b>eCQM</b>	electronic clinical quality measure	<b>MEQ/L</b>	milliequivalents per liter
<b>ED</b>	emergency department	<b>MG/DL</b>	milligrams per deciliter
<b>EHR</b>	electronic health record	<b>mmHG</b>	milligram of mercury
<b>F</b>	Fahrenheit	<b>MMOL/L</b>	millimole per liter
<b>FFS</b>	Fee for Service	<b>ONC</b>	Office of the National Coordinator for Health Information Technology
<b>FY</b>	fiscal year	<b>QRDA</b>	Quality Reporting Document Architecture
<b>HARP</b>	HCQIS Access Roles and Profile	<b>SO</b>	Security Official
<b>HCQIS</b>	Healthcare Quality Information System	<b>UI</b>	User Interface
<b>HICN</b>	Health Insurance Claim Number	<b>VIQR</b>	Value, Incentives, and Quality Reporting

Navigating the Voluntary Hybrid HWR Measure Data Submission Process

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## **Hybrid HWR Measure Overview**

# What is the Hybrid HWR Measure?

- A hybrid measure uses claims data and core clinical data elements (CCDEs) from the electronic health records (EHR) for measure calculation.
- 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 (FFS) 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 IQR Program, but the hybrid measure uses CCDEs as part of the risk adjustment.
- To calculate the Hybrid HWR measure, administrative data from the EHR (linking variables) are needed to link the CCDE to the claims data.

# Implementation Timeline

In the Fiscal Year (FY) 2020 Inpatient Prospective Payment System (IPPS) Final Rule, CMS finalized two voluntary reporting periods for the Hybrid HWR measure, followed by mandatory reporting of the measure.

Implementation Timeline for the Hybrid HWR Measure 2023–2025 Reporting Periods				
Reporting Period	Performance Period	Data Submission Deadline	Hospital-Specific Report (HSR) Distribution	Public Reporting
2023 Voluntary Reporting	<b>Hospitalizations</b> 7/1/21–6/30/2022	September 30, 2022	Spring 2023	N/A
2024 Voluntary Reporting*	<b>Hospitalizations</b> 7/1/22–6/30/2023	October 2, 2023	Spring 2024	N/A
2025 <b>Mandatory</b> Reporting*	<b>Hospitalizations</b> 7/1/23–6/30/2024	September 30, 2024	Spring 2025	Summer 2025

\*Also includes reporting for the Hybrid Hospital-Wide Mortality (HWM) measure

# Hospital IQR Program Participation Requirements

The FY 2020 IPPS Final Rule also stated that a hospital will only successfully meet the Hospital IQR Program participation requirements for the Hybrid HWR measure if they:

1. Submit **linking variables on 95% or more of discharges** with a Medicare FFS claim for the same hospitalization during the measurement period.
2. Report **vital signs for 90% or more of the hospital discharges** for Medicare FFS patients, 65 years or older in the measurement period (as determined from the claims submitted to CMS for admissions that ended during the same reporting period).
3. Submit the **laboratory test results for 90% or more of discharges** for non-surgical patients, meaning those not included in the surgical specialty cohort of the Hybrid HWR measure.

# Hybrid HWR Measure Overview

<b>CMS Program</b>	Hospital IQR Program
<b>Reporting Period</b>	2023 <b>Voluntary</b> Reporting
<b>Payment Determination</b>	FY 2024 (will not affect annual payment update)
<b>Measurement Period</b>	7/1/2021– 6/30/2022
<b>Data Submission Deadline</b>	September 30, 2022
<b>HSR Distribution</b>	Anticipate Spring 2023
<b>Public Reporting</b>	No
<b>Certified Electronic Health Record Technology (CEHRT)</b>	2015 Edition Certification Criteria, 2015 Edition Cures Update Criteria, or a combination of both
<b>Specifications (CMS529v1)</b>	<a href="#">Core Clinical Data Elements for the Hybrid Hospital-Wide Readmission (HWR) Measure with Claims and Electronic Health Record Data</a>
<b>Resources</b>	<ul style="list-style-type: none"> <li>• eCQI Resource Center: <a href="#">Hybrid Measures tab under Eligible Hospital/CAH eCQMs 2021 Reporting Period</a></li> <li>• QualityNet.CMS.gov: <a href="#">Hospitals-Inpatient/Measures (Hybrid)</a></li> </ul>


# Voluntary Reporting of the Hybrid HWR Measure

Hospitals participate by submitting 13 CCDEs (6 vital signs + 7 laboratory test results) and 6 linking variables by **September 30, 2022**.

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	

# Capturing CCDE Data

- Begin by looking for CCDE results associated with the admission that were captured in the 24 hours that *immediately preceded* the admission.
  - Select the first result associated with the stay within that 24-hour window, such as data captured during an emergency department (ED) encounter that preceded the admission.
- ***If no results are available***, then look for the first CCDE results *after* the admission:
  - Within 0–2 hours *after* admission for the vitals.
  - Within 0–24 hours *after* admission for the laboratory test results.



6 Vital Signs	7 Laboratory Test Results
First vitals collected 0–24 hours <i>prior</i> to admission	First lab results 0–24 hours <i>prior</i> to admission
<b><i>If not available, then</i></b> first vitals collected 0–2 hours <i>after</i> admission	<b><i>If not available, then</i></b> first lab results 0–24 hours <i>after</i> admission



# Accepted Units of Measurement

Data Elements	Units of Measurement	Additional Accepted Units of Measurement
Heart Rate	Beats per minute	--
Systolic Blood Pressure	Millimeter of mercury (mmHG)	--
Respiratory Rate	Breath per minute	--
Temperature	Degrees Fahrenheit (F)	Degrees Celsius
Oxygen saturation	Percent (%)	--
Weight	Kilogram (KG)	Pounds (LB)
Hematocrit	Percent (%)	--
White Blood Cell Count	10 <sup>9</sup> per liter (X10E+09/L)	Thousands of cells per microliter (K/MCL)
Potassium	Millimole per liter (MMOL/L)	Milliequivalents per liter (MEQ/L)
Sodium	Millimole per liter (MMOL/L)	MEQ/L
Bicarbonate	Millimole per liter (MMOL/L)	MEQ/L
Creatinine	Milligrams per deciliter (MG/DL)	--
Glucose	Milligrams per deciliter (MG/DL)	--

# Use 2021 IG: Hybrid Measure/ CCDE Voluntary Submission

- The 2021 Implementation Guide (IG) must be used for hybrid measure/CCDE voluntary submission for 2023 voluntary reporting.
- Refer to Section 6: Hybrid Measure/CCDE Voluntary Submission

Table 17: Hybrid Measure for Voluntary Submission

eCQM CMS#	eCQM Title	Measurement Period
CMS529v1	Core Clinical Data Elements for the Hybrid Hospital-Wide Readmission (HWR) Measure with Claims and Electronic Health Record Data.	July 1, 2021 through June 30, 2022

# QRDA Category I File Format Expectations

- Submit one file, per patient, per quarter.
- Each patient-level file should include 13 CCDEs and 6 linking variables for each eligible hospital discharge.
- Maximum individual file size is 10 MB.
- Upload files by zip file (.zip).
  - Verify the zip file does not contain other zip files.
  - Hospitals may submit more than one zip file.
- Maximum number of Quality Reporting Document Architecture (QRDA) Category I files within zip file is 14,999.

# Five Key Elements for QRDA Category I File Identification

Five key elements:

- CCN
- CMS Program Name: **HQR\_IQR\_VOL**
- EHR Patient ID
- Reporting Period specified in Reporting Parameters section
- EHR Submitter ID

The *HQR Secure Portal* assigns the EHR Submitter ID to submitters registering for system access to upload QRDA Category I files.

- Vendor EHR Submitter ID = Vendor ID
- Hospitals EHR Submitter ID = CCN

Navigating the Voluntary Hybrid HWR Measure Data Submission Process

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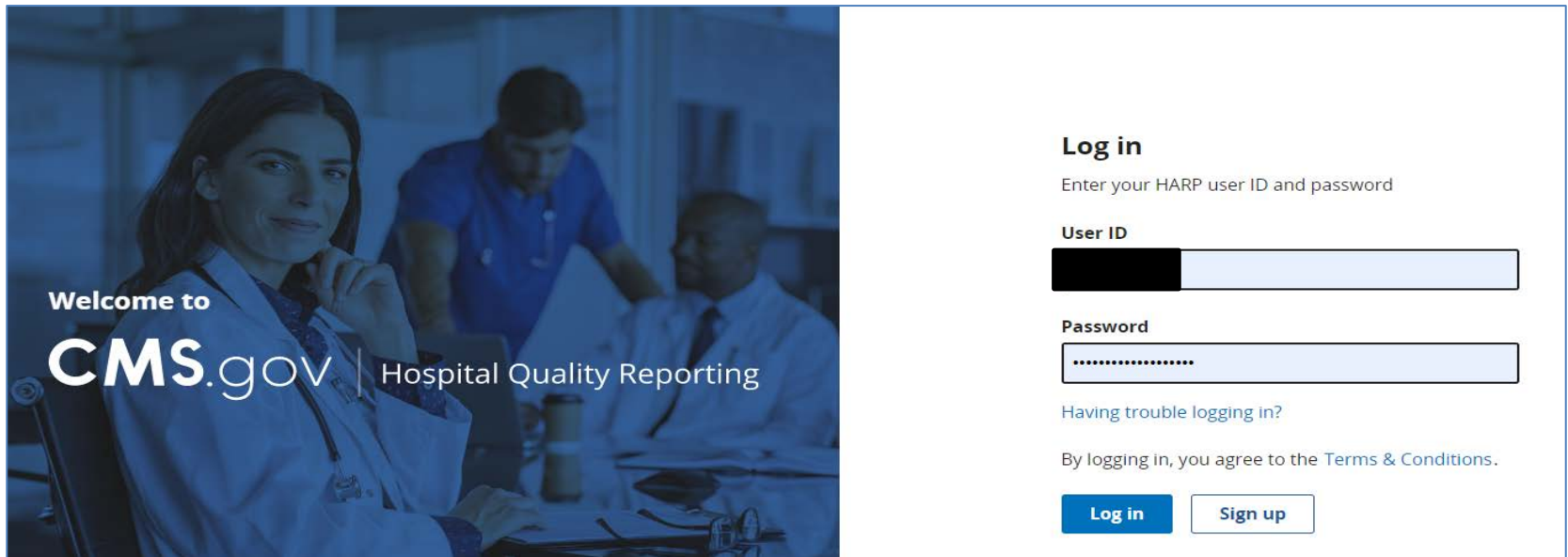
## **Hybrid HWR Measure Data Submission Process**

# Steps to Submit Hybrid HWR Measure Data

- Log Into the HQR System via the HCQIS Access Roles and Profile (HARP) at <https://hqr.cms.gov>.
- Access the HQR Landing Page.
- Assign/Edit User Permission.
  - Users will require the eCQM permission
- Complete Vendor Authorization process.
- Upload QRDA Category I Files.
- Review File Upload History UI and export.
- Review Submission Accuracy UI and export.

# Log Into HQR System via HARP

HQR Secure Portal login page: <https://hqr.cms.gov>



Welcome to  
**CMS.gov** | Hospital Quality Reporting

**Log in**  
Enter your HARP user ID and password

User ID

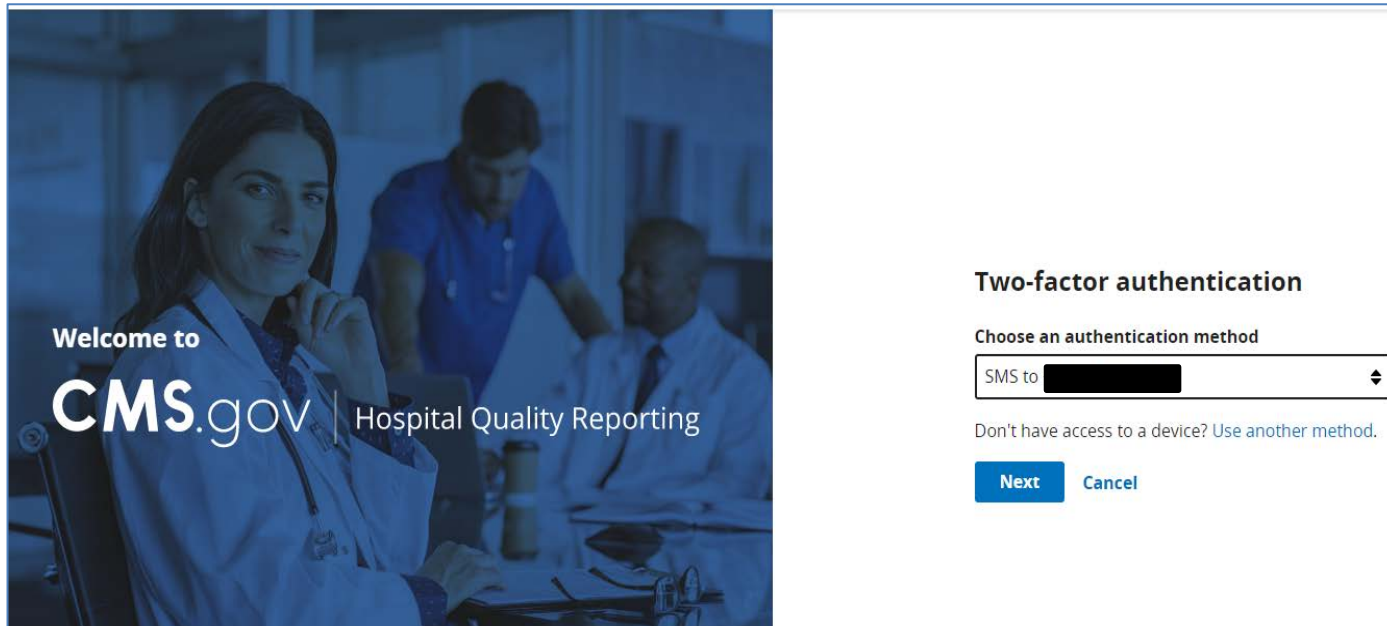
Password

[Having trouble logging in?](#)

By logging in, you agree to the [Terms & Conditions](#).

# Request Two-Factor Authentication Security Code

Select the two-factor authentication device option to receive a security code. Select **Next**.

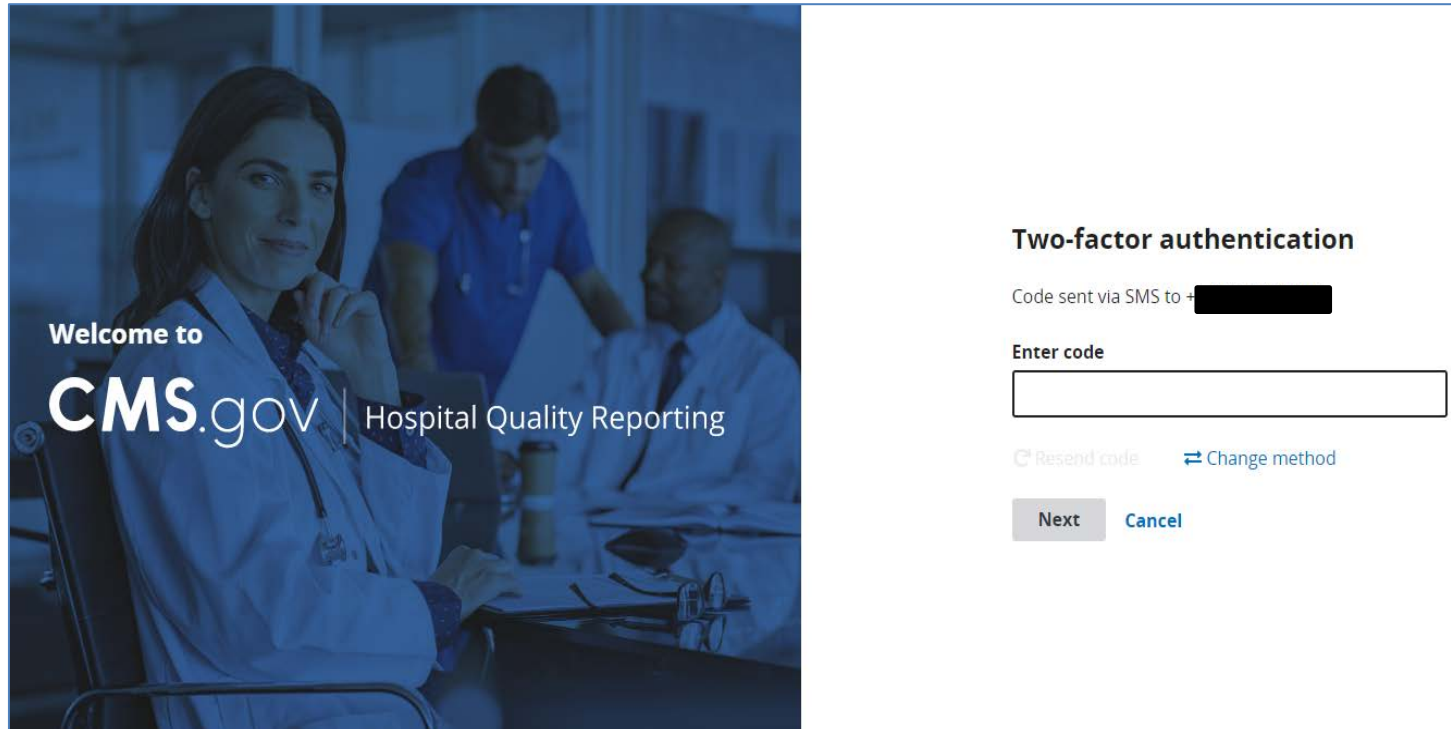


The screenshot shows a user interface for two-factor authentication. On the left, there is a blue-tinted image of a doctor in a white coat with a stethoscope, sitting at a desk. Overlaid on this image is the text "Welcome to CMS.gov Hospital Quality Reporting". On the right, the interface is white with the heading "Two-factor authentication". Below this, it says "Choose an authentication method" followed by a dropdown menu currently showing "SMS to [redacted]". Below the dropdown is the text "Don't have access to a device? Use another method." At the bottom of the form are two buttons: "Next" and "Cancel".



# Enter Two-Factor Authentication

Enter the security code you received via text or phone call. Select **Next**.



Welcome to  
**CMS.gov** | Hospital Quality Reporting

**Two-factor authentication**

Code sent via SMS to + [REDACTED]

Enter code

[Resend code](#) [Change method](#)

**Next** [Cancel](#)

# Access the HQR Landing Page

Click the symbol at the bottom left of the screen to **unlock** the menu to read the options.

The image shows a screenshot of the CMS.gov QualityNet HQR landing page. A red-bordered box on the left contains a navigation menu with the following items:

- Dashboard
- Data Submissions
- Data Results
- Program Reporting
- Administration

The main page content includes a header with the CMS.gov logo and QualityNet text. A notification banner states: "My Tasks page is being retired. Thank you for your patience as we make changes to HQR. Quality Net Secure Portal Reports & PRS are still on the My Tasks page." Below this is a section titled "The New HQR is Coming" with a sub-section "New! Check out the navigation on the left:" and two bullet points: "All features and functions are now available in the navigation" and "Tasks are clearly divided - move from one to another with ease".

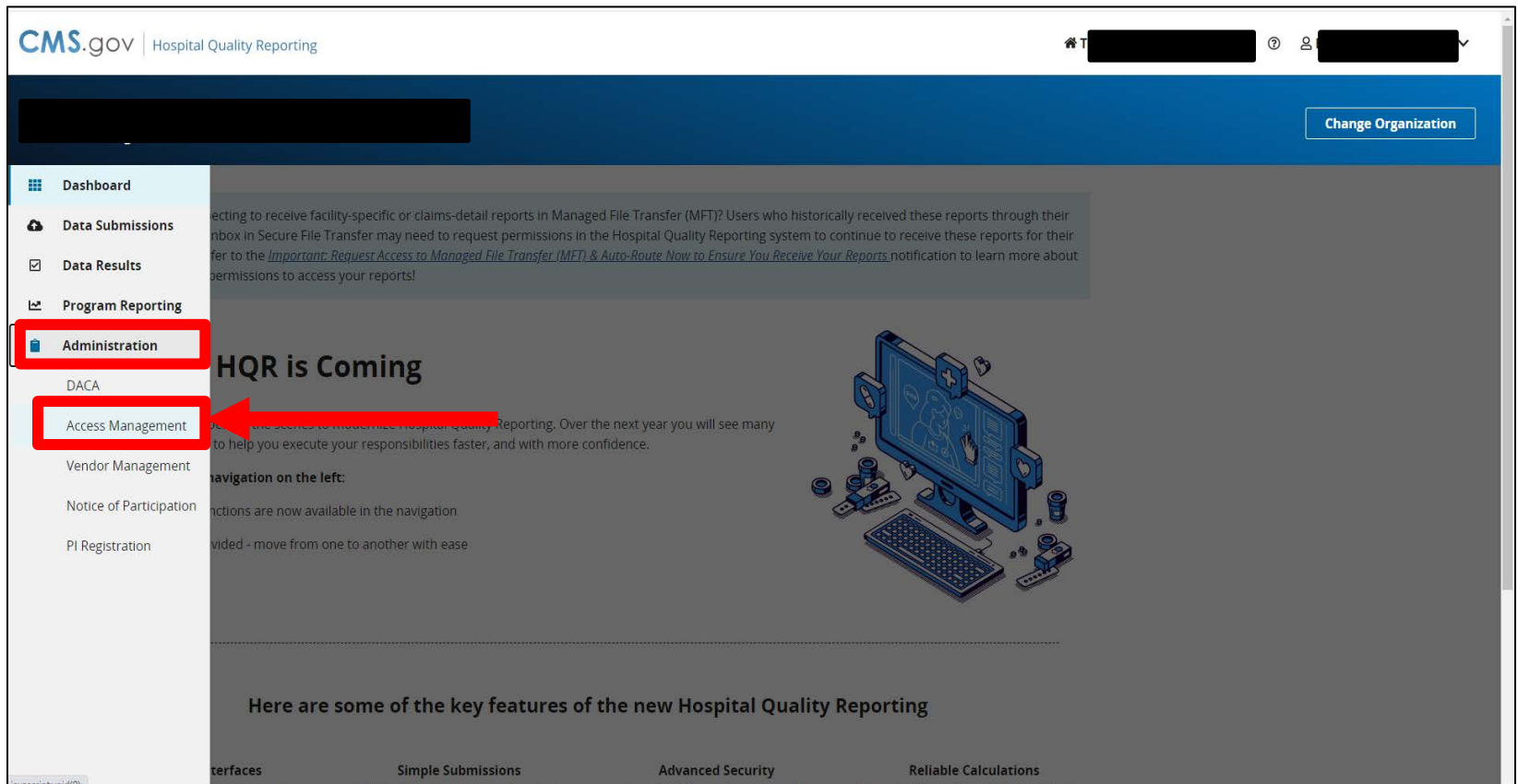
Further down, a section titled "Here are some of the key features of the new Hospital Quality Reporting" lists four features:

- Intuitive Interfaces:** Intuitive interfaces means you always know where you are within the system.
- Simple Submissions:** We've taken the guess work out of submitting data, via a file or a form. All from one central location.
- Advanced Security:** Security & Access is now easy to manage with our new suite of Access tools. Effortlessly add or modify anyone's permissions.
- Reliable Calculations:** Accurate data, with real-time validation. No second guessing. No more waiting.

At the bottom left of the page, there is a button labeled "Unlock Menu" with a red arrow pointing to it from the right. The footer contains links for CMS.gov, QualityNet.org, QualityNet Help Desk, Help, Accessibility, Privacy Policy, and Terms of Use.

# Assign User Permission

**Click Administration and Select Access Management.**



Additional information on how to request access is available on the [HQR YouTube playlist](#)

# Assign User Permission

Under Data Submissions, **Click** Add next to the eCQM permission for the user to submit hybrid measure data.

The screenshot shows the 'Assign Access' interface. On the left, there is a sidebar with 'Assign Access', 'Users', and 'You are assigning access to'. Below this, 'User Type' is set to 'Basic'. The main area is titled 'Permissions' and contains a table with two columns: 'Data Submissions' and 'Program Access'. The table lists several permissions, each with an 'Add' button. The 'eCQM' permission is highlighted with a red box, and a red arrow points from it to the 'Add' button, which is also highlighted with a red box.

Data Submissions	Program Access
Chart Abstracted	None <a href="#">Add</a>
DACA	None <a href="#">Add</a>
<b>eCQM</b>	None <b><a href="#">Add</a></b>
HCAHPS (Data Form)	None <a href="#">Add</a>
HCAHPS (File Upload)	None <a href="#">Add</a>

Additional information on how to add a new user is available on the [HQR YouTube playlist](#).

# Assign User Permission

**Select** the permission level: *View* or *Upload/Edit* under the Inpatient Quality Reporting Program.  
**Click** Apply & Close.

The screenshot shows a modal window titled "eCQM" with a "Close" button in the top right. Below the title, it says "Choose the programs and permission level that you need access to." There is a table with three columns: "Program", "No Access", "View", and "Upload / Edit". The "View" and "Upload / Edit" columns have red boxes around them. The "Inpatient Quality Reporting (IQR)" row has radio buttons under "No Access" and "View", and a checked radio button under "Upload / Edit". Below the table, there is a red box around the "Apply & Close" button, with a red arrow pointing to it from the right. At the bottom of the modal, there are several "None" labels and "Add" buttons.

Program	No Access	View	Upload / Edit
Inpatient Quality Reporting (IQR)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>

Apply & Close

# Assign User Permission

IQR (Upload/Edit) will appear next to the eCQM permission. **Click Review** at bottom of the page.

The screenshot shows the 'Assign Access' interface in the CMS.gov system. The page is titled '< Access Management' and 'Assign Access'. Under 'Users', it states 'You are assigning access to'. The 'User Type' is set to 'Basic'. The 'Permissions' section is expanded to show 'Data Submissions' and 'Program Access'.

Data Submissions	Program Access
Chart Abstracted	None <a href="#">Add</a>
DACA	None <a href="#">Add</a>
eCQM	IQR (Upload / Edit) <a href="#">Edit</a>
HCAHPS (Data Form)	None <a href="#">Add</a>
HCAHPS (File Upload)	None <a href="#">Add</a>
Population & Sampling	None <a href="#">Add</a>
Web-Based Measures	None <a href="#">Add</a>

At the bottom of the page, there is a 'Review' button highlighted with a red box and a red arrow pointing to it from the right. The footer of the page includes the CMS.gov logo and the text 'Hospital Quality Reporting'.

# Assign User Permission

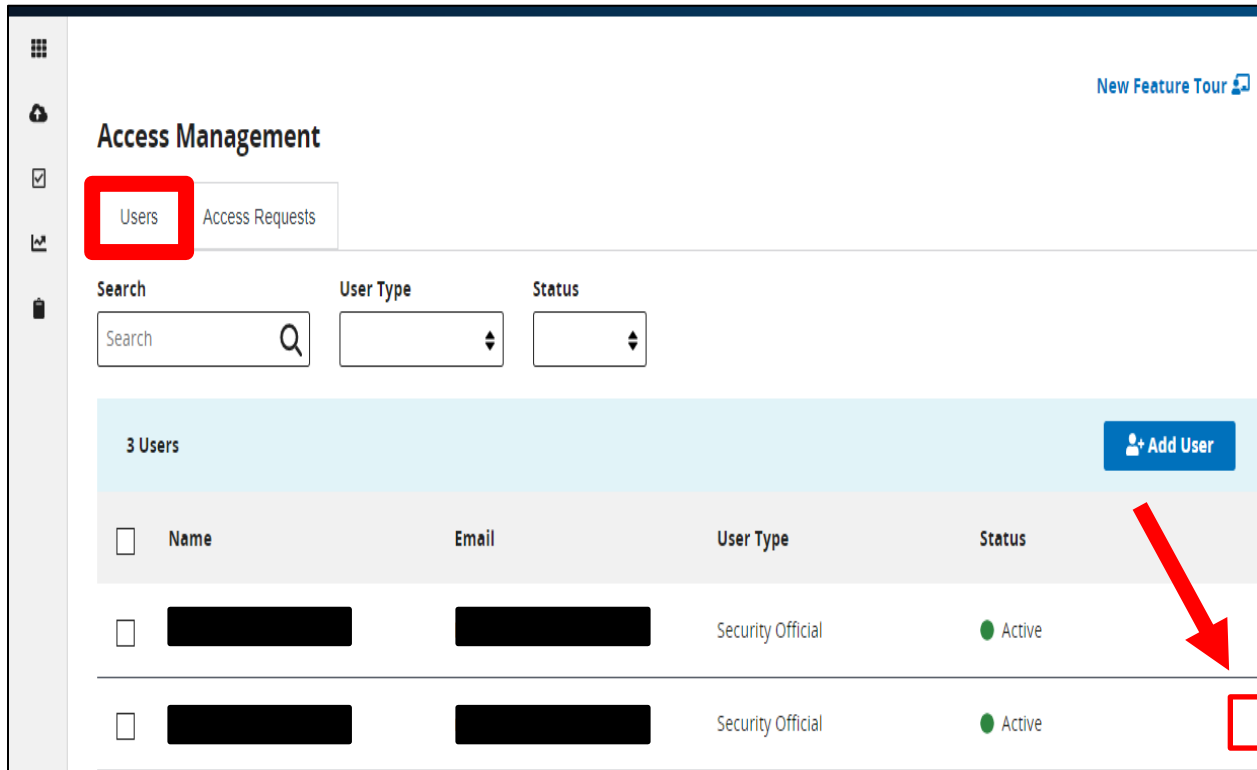
Click Save & Close at bottom of the page.

The screenshot displays the 'Assign Access' interface in the CMS.gov system. The page is titled 'Assign Access' and shows the user type 'Basic'. Under the 'Permissions' section, there are two columns: 'Data Submissions' and 'Program Access'. The 'Data Submissions' column lists various categories, with 'eCQM' highlighted by a red box. The 'Program Access' column shows the current access level for each category, with 'IQR (Upload / Edit)' highlighted by a red box. At the bottom of the page, the 'Save & Close' button is highlighted with a red box and a red arrow pointing to it.

Data Submissions	Program Access
Chart Abstracted	None <a href="#">Add</a>
DACA	None <a href="#">Add</a>
eCQM	IQR (Upload / Edit) <a href="#">Edit</a>
HCAHPS (Data Form)	None <a href="#">Add</a>
HCAHPS (File Upload)	None <a href="#">Add</a>
Population & Sampling	None <a href="#">Add</a>
Web-Based Measures	None <a href="#">Add</a>

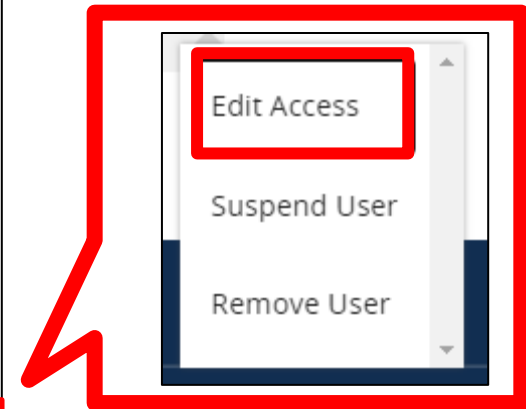
# Assign User Permission

To edit the user's access, **click** the three vertical dots menu.  
**Select Edit Access.**



The screenshot displays the 'Access Management' interface. At the top, there are two tabs: 'Users' (highlighted with a red box) and 'Access Requests'. Below the tabs, there are search and filter controls for 'Search', 'User Type', and 'Status'. A table lists 3 users, with columns for Name, Email, User Type, and Status. A red arrow points to the three vertical dots menu icon at the end of the first user row. A second red arrow points from this menu icon to a zoomed-in view of the context menu on the right.

Name	Email	User Type	Status
[Redacted]	[Redacted]	Security Official	Active
[Redacted]	[Redacted]	Security Official	Active



This is a zoomed-in view of the context menu for a user. The menu is enclosed in a red border. It contains three options: 'Edit Access' (highlighted with a red box), 'Suspend User', and 'Remove User'. A red arrow points from the menu icon in the user list to this menu.



# Assign User Permission

After confirming the user type, **Click** Edit to change permissions.  
**Click** Apply & Close.

**Assign Access**

Users

You are assigning access to

User Type

Basic

Permissions

Data Submissions	Program Access
Chart Abstracted	None <a href="#">Add</a>
DACA	None <a href="#">Add</a>
<b>eCQM</b>	<i>IQR (Upload / Edit), PI (Upload / Edit)</i> <b><a href="#">Edit</a></b>
HCAHPS (Data Form)	None <a href="#">Add</a>

**eCQM** [Close](#)

Choose the programs and permission level that you need access to.

Program	No Access	View	Upload / Edit
Inpatient Quality Reporting (IQR)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>

**Apply & Close**

# Assign User Permission

Click Review at bottom of the page.

< Access Management

### Assign Access

Users

You are assigning access to

User Type

Basic

### Permissions

Data Submissions	Program Access
Chart Abstracted	None <a href="#">Add</a>
DACA	None <a href="#">Add</a>
<b>eCQM</b>	<b>IQR (Upload / Edit)</b> <a href="#">Edit</a>
HCAHPS (Data Form)	None <a href="#">Add</a>
HCAHPS (File Upload)	None <a href="#">Add</a>
Population & Sampling	None <a href="#">Add</a>
Web-Based Measures	None <a href="#">Add</a>

[Review](#)



# Assign User Permission

Click Save & Close at bottom of the page.

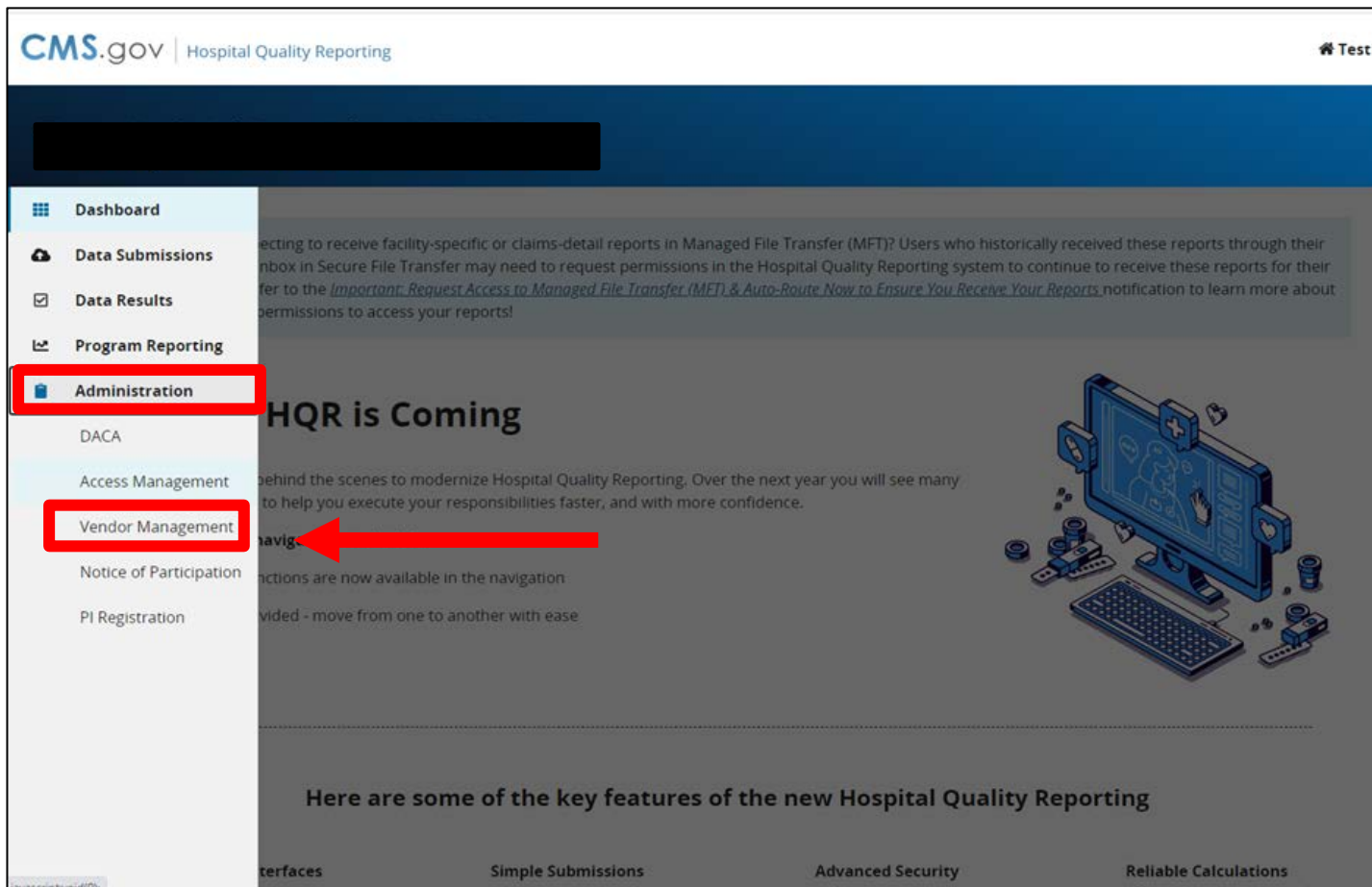
The screenshot shows the 'Assign Access' page in the CMS.gov interface. The page is titled '< Access Management' and 'Assign Access'. It shows the user is assigning access to a 'User Type' of 'Basic'. The 'Permissions' section contains a table with the following data:

Data Submissions	Program Access
Chart Abstracted	None <a href="#">Add</a>
DACA	None <a href="#">Add</a>
eCQM	IQR (Upload / Edit), [Redacted] <a href="#">Edit</a>
HCAHPS (Data Form)	None <a href="#">Add</a>
HCAHPS (File Upload)	None <a href="#">Add</a>
Population & Sampling	None <a href="#">Add</a>
Web-Based Measures	None <a href="#">Add</a>

At the bottom of the page, there is a 'Back' link and a 'Save & Close' button. The 'Save & Close' button is highlighted with a red box, and a red arrow points to it from the right.

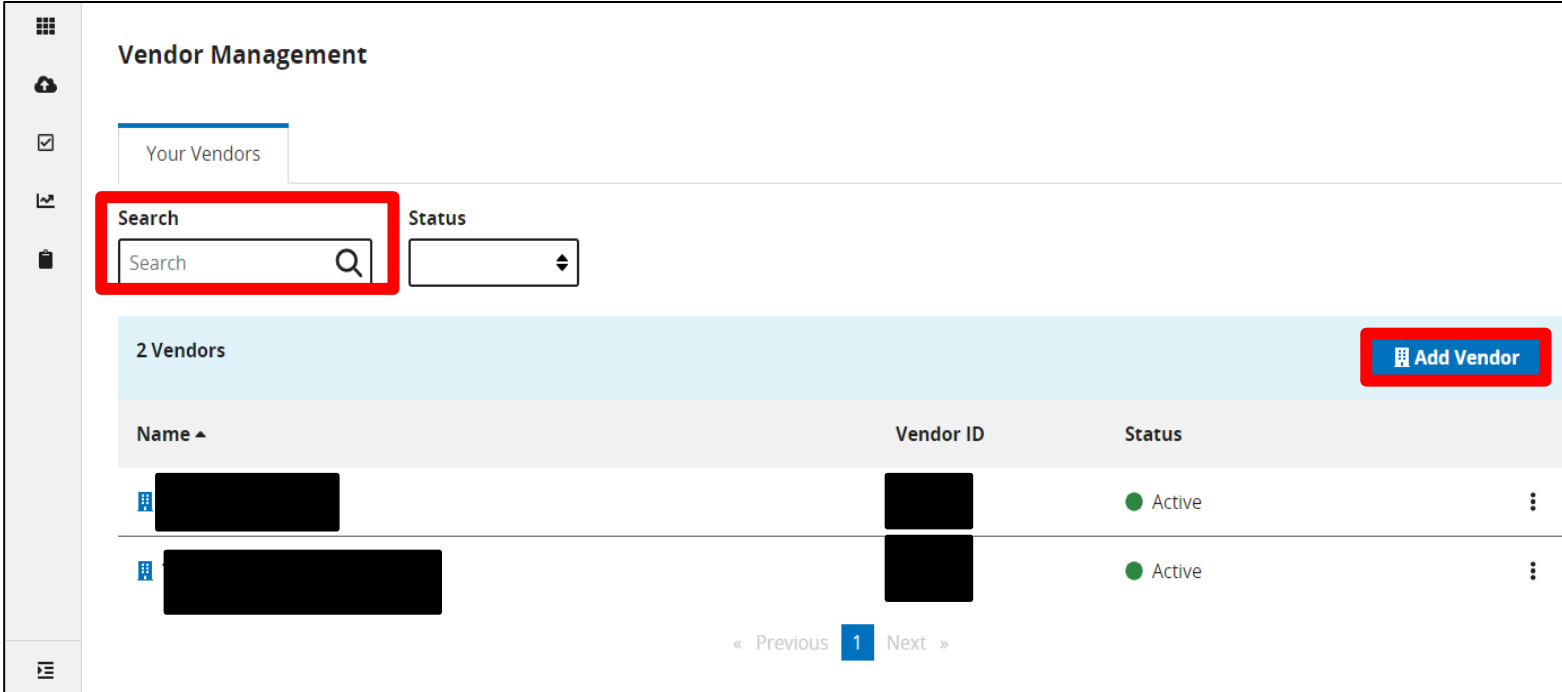
# Complete Vendor Authorization

Click Administration and **Select** Vendor Management.



# Complete Vendor Authorization

**Search** for a new vendor and **Click Add Vendor**.



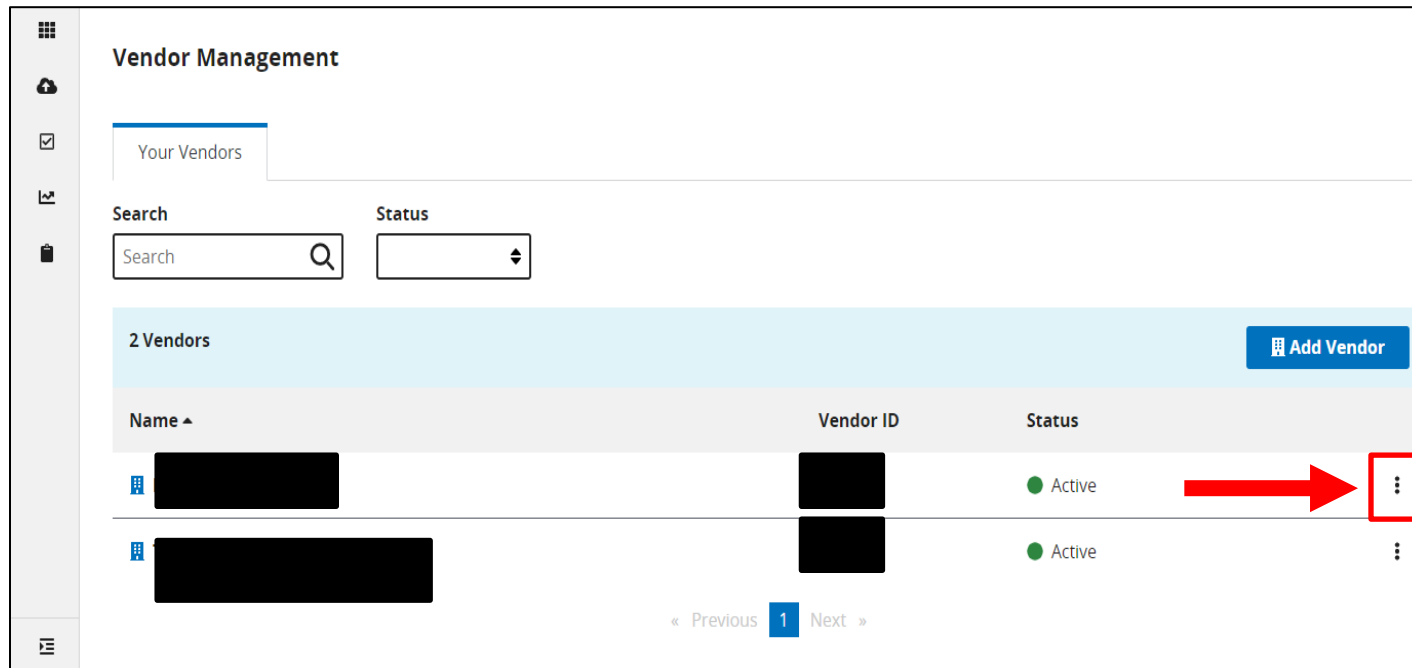
The screenshot displays the Vendor Management interface. At the top, there is a 'Vendor Management' header and a 'Your Vendors' tab. Below the tab, there is a search bar labeled 'Search' and a status dropdown menu. The search bar is highlighted with a red box. Below the search bar, there is a table with 2 vendors. The table has columns for Name, Vendor ID, and Status. The 'Add Vendor' button is highlighted with a red box. The table contains two rows of vendor information, both with a status of 'Active'.

Name	Vendor ID	Status
[REDACTED]	[REDACTED]	Active
[REDACTED]	[REDACTED]	Active

Visit the [HQR YouTube playlist](#) for additional assistance on adding a new vendor.

# Complete Vendor Authorization

**Click** the three vertical dots menu to allow the vendor to submit hybrid measure data on the hospital's behalf. Then, **select** Edit Access.



The screenshot shows the 'Vendor Management' interface. At the top, there is a 'Your Vendors' tab. Below it are search and status filters. A table lists two vendors, both with 'Active' status. A red arrow points to the three-dot menu icon at the end of the first vendor's row.

Name	Vendor ID	Status	
[REDACTED]	[REDACTED]	Active	⋮
[REDACTED]	[REDACTED]	Active	⋮



A callout menu is shown, listing three options: 'Edit Access', 'Suspend User', and 'Remove User'. The 'Edit Access' option is highlighted with a red box.

- Edit Access
- Suspend User
- Remove User

# Complete Vendor Authorization

**Click Add** under eCQM data submissions for Inpatient Quality Reporting (IQR).

The screenshot shows a web interface for Vendor Management. The breadcrumb trail is "< Vendor Management". The section is titled "Assign Access". Below this, there is a header for "Permissions" with a sub-header "Data Submissions". A table lists the following items:

Item	Access	Action
Inpatient Psychiatric Facility Quality Reporting (IPFQR)	None	Add
Inpatient Quality Reporting (IQR)	None	Add
<b>eCQM</b>		
Inpatient Quality Reporting (IQR)	None	Add

The "Add" button for the "Inpatient Quality Reporting (IQR)" row under the "eCQM" section is highlighted with a red box. A red arrow points from this button to the "Add" button in the "Measure Access" section.

# Complete Vendor Authorization

A pop-up box will display two different measure sets: eCQM and Hybrid Measures. **Click** Add for the Hybrid Measures.

**Data Submissions - eCQM** ✕ Close

**Inpatient Quality Reporting (IQR)**

By assigning IQR permissions, you are also assigning permission for File Accuracy (for the specified measure set only).

Measure Sets	Discharge Quarter	Submission Date	Permission Level	Actions
eCQM	-	-	-	<a href="#">Add</a>
Hybrid Measures	-	-	-	<a href="#">Add</a>

[Apply & Close](#) [Cancel](#)



# Complete Vendor Authorization

Select a permission level of *View* or *Upload/Edit*.  
Complete the Discharge Quarters and Submission Date fields.  
Click Confirm.

The screenshot shows a form titled "Permissions" with the following elements:

- Three radio buttons for permission levels: "No Access", "Upload / Edit" (selected and highlighted with a red box), and "View".
- A red box highlights the "Discharge Quarters" section, which includes:
  - Fields for "\* Start Quarter" (dropdown), "\* Start Year" (Year dropdown), "End Quarter" (Quarter dropdown), and "End Year" (Year dropdown), separated by a "to" label.
  - A checkbox labeled "Do not include an end date".
- A red box highlights the "Submission Date" section, which includes:
  - Fields for "\* Start Date" (MM/DD/YYYY with a calendar icon) and "\* End Date" (MM/DD/YYYY with a calendar icon), separated by a "to" label.
  - A checkbox labeled "Do not include an end date".
- A red box highlights the "Confirm" button, with a red arrow pointing to it from the right.
- At the bottom, there are two buttons: "Apply & Close" and "Cancel".

# Complete Vendor Authorization

**Click Apply & Close.** For additional changes, **Click Edit** and then **Click Apply & Close.**

**Data Submissions - eCQM** ✕ Close

**Inpatient Quality Reporting (IQR)**

By assigning IQR permissions, you are also assigning permission for File Accuracy (for the specified measure set only).

Measure Sets	Discharge Quarter	Submission Date	Permission Level	Actions
eCQM	-	-	-	<a href="#">Add</a>
Hybrid Measures	Q1:01-01-2020 - Ongoing	06-27-2022 - Ongoing	Upload / Edit	<a href="#">Edit</a>

[Apply & Close](#) ←

# Complete Vendor Authorization

The Hybrid Measure permissions will now appear next to eCQM for Inpatient Quality Reporting (IQR).

**Click Review** at the bottom of the page.

The screenshot displays a user interface for vendor authorization. It is divided into two main sections: 'eCQM' and 'Web-Based Measures'. The 'eCQM' section includes a table with one row for 'Inpatient Quality Reporting (IQR)'. The 'Web-Based Measures' section includes a table with three rows for 'Inpatient Psychiatric Facility Quality Reporting (IPFQR)', 'Inpatient Quality Reporting (IQR)', and 'Outpatient Quality Reporting (OQR)'. At the bottom of the page, there are two buttons: 'Cancel' and 'Review'. The 'Review' button is highlighted with a red underline.

eCQM		Measure Access
Inpatient Quality Reporting (IQR)	<a href="#">Hybrid Measures</a>	<a href="#">(Edit/Upload)</a> ⓘ

Web-Based Measures		Measure Access
Inpatient Psychiatric Facility Quality Reporting (IPFQR)	None	<a href="#">Add</a>
Inpatient Quality Reporting (IQR)	None	<a href="#">Add</a>
Outpatient Quality Reporting (OQR)	None	<a href="#">Add</a>

[Cancel](#) [Review](#)

# Complete Vendor Authorization

Click Save & Close.

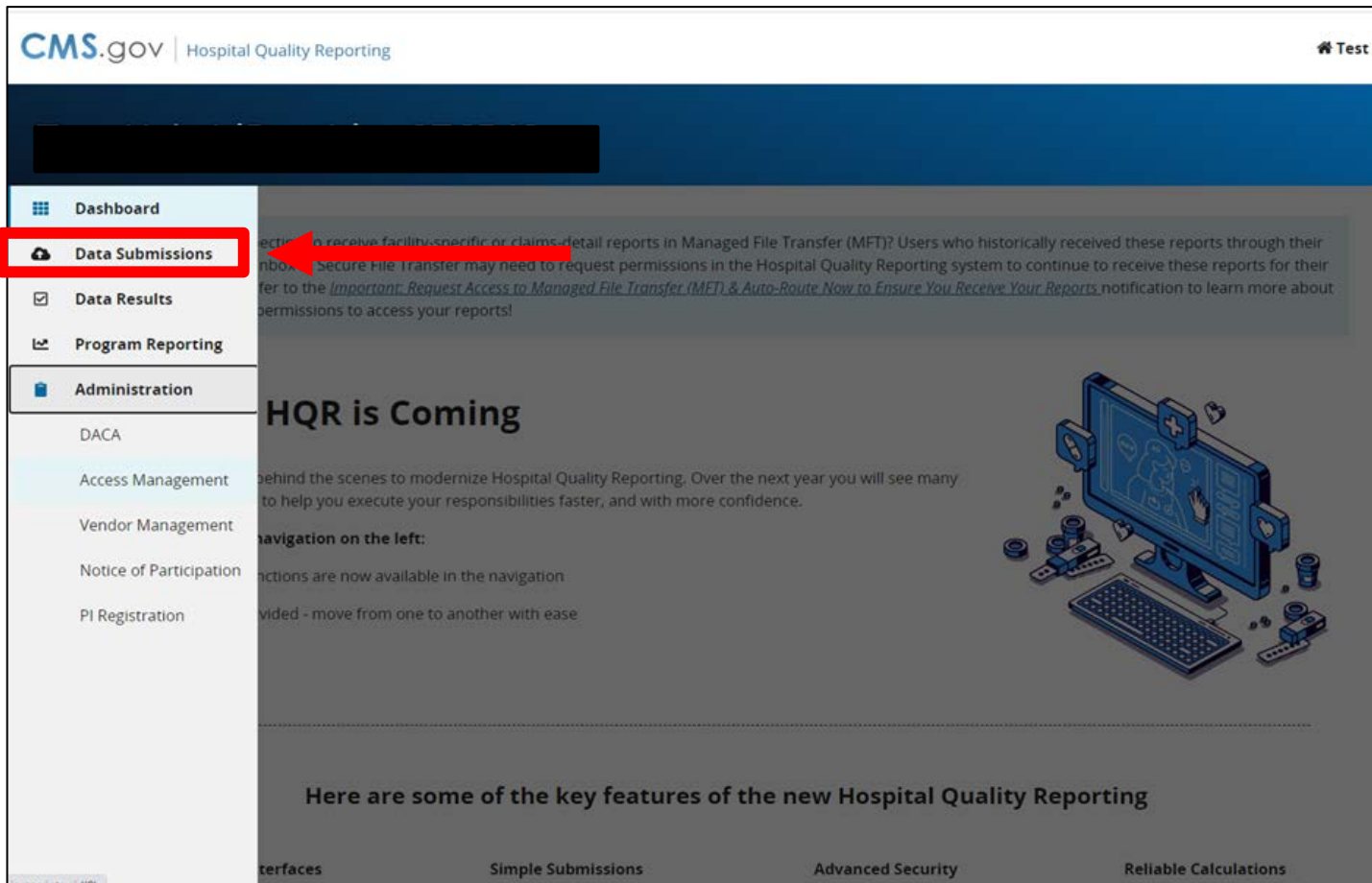
The screenshot displays a web interface for vendor authorization. It features a top navigation bar with a tab labeled 'eCQM' and a 'Measure Access' header. Below this, a table lists various measures. The first row, 'Inpatient Quality Reporting (IQR)', is highlighted with a red box, and its 'Measure Access' column contains 'Hybrid Measures' (also highlighted with a red box) and '(Edit/Upload) i'. Below this is a section titled 'Web-Based Measures' with a 'Measure Access' header. It lists three measures: 'Inpatient Psychiatric Facility Quality Reporting (IPFQR)', 'Inpatient Quality Reporting (IQR)', and 'Outpatient Quality Reporting (OQR)', all with 'None' in the 'Measure Access' column. At the bottom left, there are two buttons: 'Back' and 'Save & Close'. The 'Save & Close' button is highlighted with a red box, and a red arrow points to it from the right.

	Measure Access
<b>eCQM</b>	
Inpatient Quality Reporting (IQR)	Hybrid Measures (Edit/Upload) i
<b>Web-Based Measures</b>	
Inpatient Psychiatric Facility Quality Reporting (IPFQR)	None
Inpatient Quality Reporting (IQR)	None
Outpatient Quality Reporting (OQR)	None

Back **Save & Close**

# Uploading QRDA Category I Files

From the main menu, **Select Data Submissions**



The screenshot displays the CMS.gov Hospital Quality Reporting interface. The top navigation bar includes the CMS.gov logo and the text 'Hospital Quality Reporting'. A dark blue header bar is visible below the navigation. The main content area is partially obscured by a sidebar menu on the left. The sidebar menu is open, showing several options: 'Dashboard', 'Data Submissions', 'Data Results', 'Program Reporting', and 'Administration'. The 'Data Submissions' option is highlighted with a red box, and a red arrow points to it from the right. The main content area shows a notification about Managed File Transfer (MFT) and a section titled 'HQR is Coming' with an illustration of a computer monitor and keyboard.

CMS.gov | Hospital Quality Reporting

Test

Dashboard

**Data Submissions**

Data Results

Program Reporting

Administration

DACA

Access Management

Vendor Management

Notice of Participation

PI Registration

HQR is Coming

behind the scenes to modernize Hospital Quality Reporting. Over the next year you will see many to help you execute your responsibilities faster, and with more confidence.

navigation on the left:

actions are now available in the navigation

vided - move from one to another with ease

Here are some of the key features of the new Hospital Quality Reporting

Interfaces

Simple Submissions

Advanced Security

Reliable Calculations

# Uploading QRDA Category I Files

From Data Submissions, **Select** the Hybrid Measures tab. It is important to select either Test or Production.

The screenshot shows a web application interface for data submissions. At the top right, there is a "Change Organization" button. On the left, a navigation menu includes "Dashboard", "Data Submissions" (highlighted with a red box), "Data Results", "Program Reporting", "Administration", and "Unlock Menu". The main content area features a row of tabs: "eCQM", "Program Management", "Web-based Measures", "Population & Sampling", "Chart Abstracted", "Public Reporting", "HCAHPS", and "Hybrid Measures" (highlighted with a red box). Below the tabs, there is a text instruction: "Choose *Select Files* to browse your computer or *Drag and Drop* the files into the highlighted area." Underneath, a section titled "Select a Submission Type" contains two buttons: "Test" and "Production", both with right-pointing chevrons.

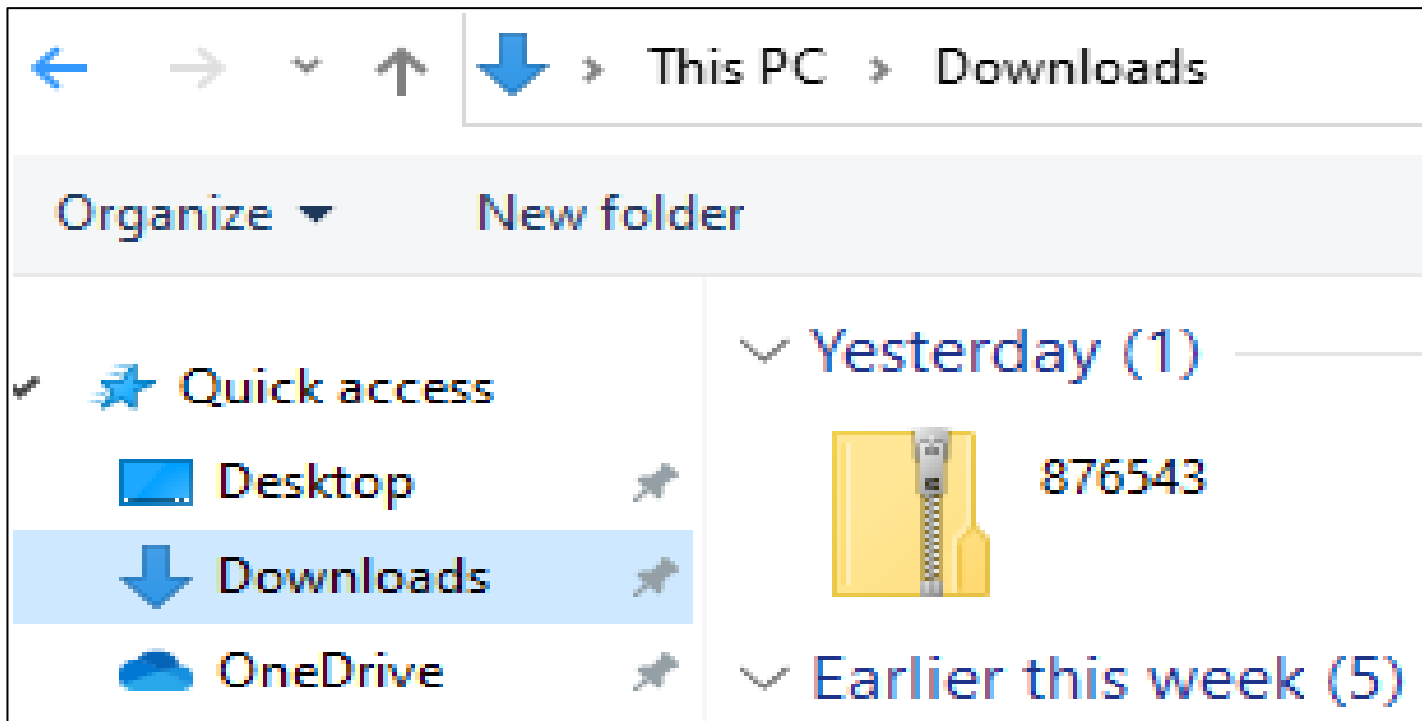
# Uploading QRDA Category I Files

To search for files on your computer, **click** the blue **Select Files** button. (You can also drag and drop.)

The screenshot displays a web application interface for uploading QRDA Category I files. The interface includes a navigation menu on the left with a 'Select Files' icon highlighted. A top navigation bar contains tabs for 'eCQM', 'Web-based Measures', 'Population & Sampling', 'Chart Abstracted', 'HCAHPS', and 'Hybrid Measures', with 'Hybrid Measures' highlighted. Below the tabs, there is a 'Change Selection' button and a 'Test' button. At the bottom, there is a search bar with a 'Reset' button and a 'Select Files' button, which is highlighted with a red box and an arrow pointing to it from the search bar area.

# Uploading QRDA Category I Files

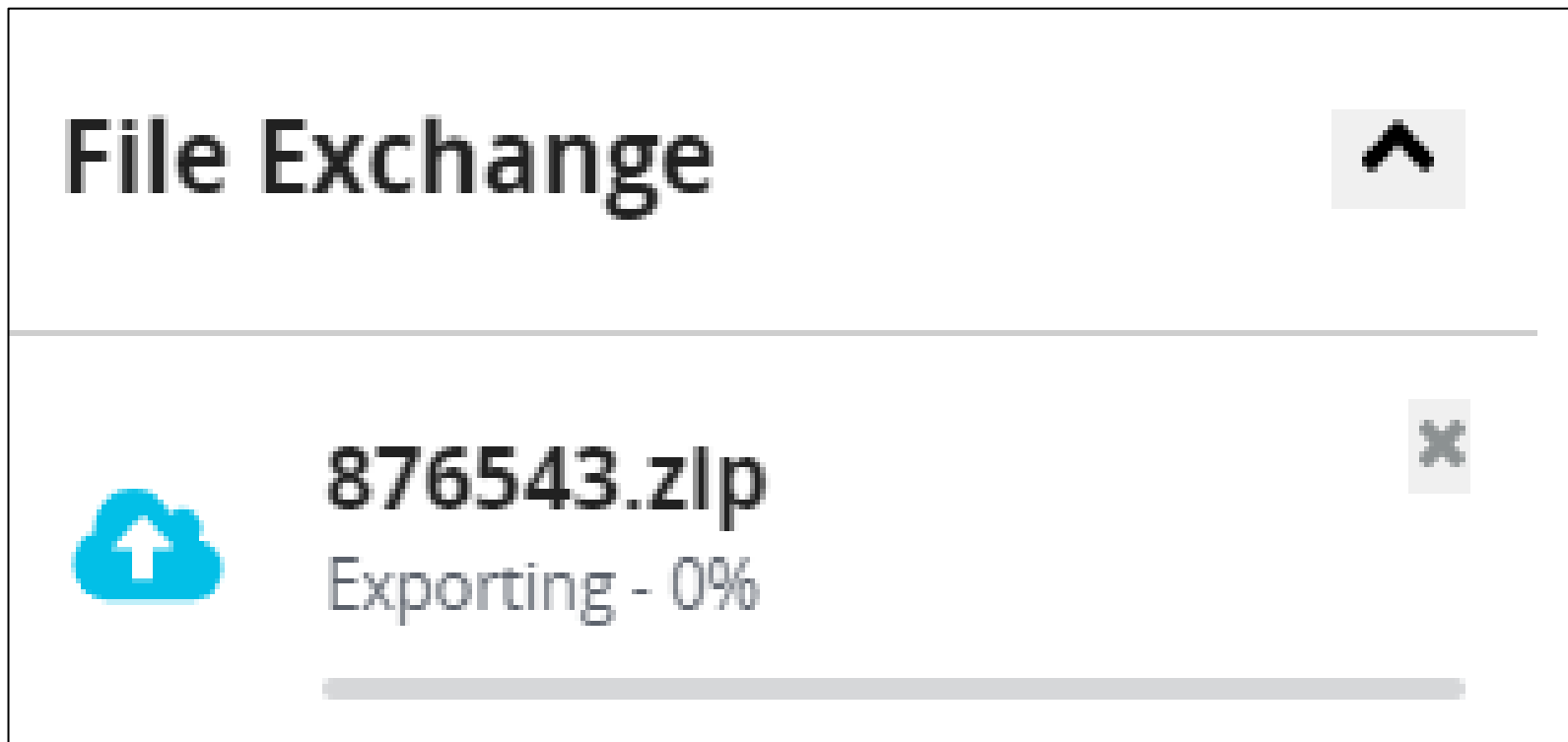
**Verify** your zip file does not contain other zip files.  
**Select** files to upload.





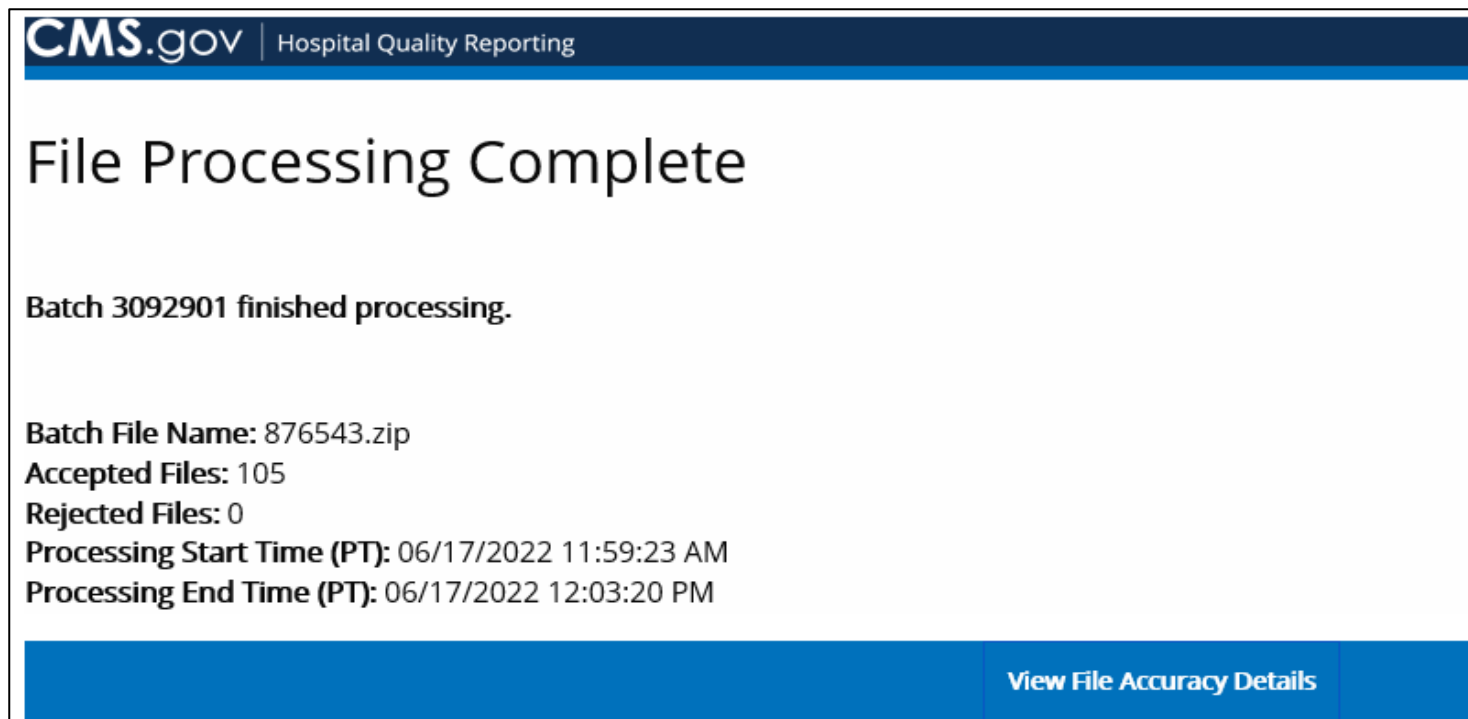
# Uploading QRDA Category I Files

A file processing message will appear on your screen.



# Uploading QRDA Category I Files

The user will receive an email on the file processing status.



**CMS.gov** | Hospital Quality Reporting

## File Processing Complete

Batch 3092901 finished processing.

Batch File Name: 876543.zip  
Accepted Files: 105  
Rejected Files: 0  
Processing Start Time (PT): 06/17/2022 11:59:23 AM  
Processing End Time (PT): 06/17/2022 12:03:20 PM

[View File Accuracy Details](#)

# Uploading QRDA Category I Files

Users can view their uploaded file(s) by clicking on the column header to filter.  
A status of Accepted or Rejected will display.

The screenshot shows a web application interface for uploading QRDA Category I files. The interface includes a sidebar with a 'Select Files' button, a top navigation bar with category tabs (eCQM, Web-based Measures, Population & Sampling, Chart Abstracted, HCAHPS, Hybrid Measures), a file selection area, a search bar, and a table of uploaded files with columns for Batch File Name, Batch ID, File Size, Upload Date, Uploaded By, and Status. The 'Status' column shows 'Accepted' and 'Rejected' with corresponding icons.

Batch File Name	Batch ID	File Size	Upload Date	Uploaded By	Status
CMS529QRDA105.....	3092311	61 kB	6/16/2022	Test HybridProvi...	Accepted
Failures.zip	3093903	16 kB	6/27/2022	Test HybridProvi...	Rejected

# Reviewing Data Results

From the main menu, **Select Data Results**

The screenshot displays the CMS.gov Hospital Quality Reporting interface. The top navigation bar includes the CMS.gov logo and the text 'Hospital Quality Reporting'. A dark blue header bar contains a redacted user profile. A left-hand navigation menu is open, listing several options: Dashboard, Data Submissions, Data Results (highlighted with a red box and a red arrow), Program Reporting, and Administration. Under Administration, there are sub-items: DACA, Access Management, Vendor Management, Notice of Participation, and PI Registration. The main content area features a section titled 'HQR is Coming' with an illustration of a computer monitor and keyboard. Below this, there is a heading 'Here are some of the key features of the new Hospital Quality Reporting' followed by four categories: Interfaces, Simple Submissions, Advanced Security, and Reliable Calculations.

# Reviewing Data Results

Click on the Files tab to review the processing status.

**Files** Accuracy

## Hybrid Measures Upload History

Submission: Test

[Change Selection](#)

The table below displays all batch uploads. You can view batches for either test or production submissions (A batch can either be one file or contain a number of files). Here, you can search batches or sort the results to view the batch status and download results. Only batches applicable to the current reporting period can be deleted.

**Search**

Search  [Reset](#)

Batch File Name	Batch ID	File Size	Upload Date	Uploaded By	Status	Errors	Actions
876543.zip	3092901	476 kB	06/17/2022	Test Hybrid...	Ready	<a href="#">Download</a>	⋮
CMS529QRD...	3092885	18 kB	06/17/2022	TRUVEN HE...	Ready	<a href="#">Download</a>	Delete Batch
CMS529QRD...	3092311	61 kB	06/16/2022	Test Hybrid...	Ready	<a href="#">Download</a>	⋮

# Reviewing Data Results

After you click on Download under the Errors column, a CSV file will display the errors for each batch.

1	FileName	CCN	BatchID	UploadDate	UploadedBy	Status	ErrorDetails			
2	CMS529QRDA15.xml	876543	3092901	6/17/2022	Test HybridProvider 876543	ACCEPTED	INFO: File Accepted			
3	CMS529QRDA74.xml	876543	3092901	6/17/2022	Test HybridProvider 876543	ACCEPTED	INFO: File Accepted			
4	CMS529QRDA97.xml	876543	3092901	6/17/2022	Test HybridProvider 876543	ACCEPTED	INFO: File Accepted			
5	CMS529QRDA32.xml	876543	3092901	6/17/2022	Test HybridProvider 876543	ACCEPTED	INFO: File Accepted			
6	CMS529QRDA83.xml	876543	3092901	6/17/2022	Test HybridProvider 876543	ACCEPTED	INFO: File Accepted			

# Reviewing Data Results

**Click** the Accuracy tab. **Select** the submission type and quarter.

The screenshot shows a software interface with a sidebar on the left containing icons for a grid, a lock, a checkmark, a list, and a trash can. The main content area has two tabs: 'Files' and 'Accuracy', with 'Accuracy' highlighted by a red box. Below the tabs is the section 'Hybrid Measures Submission', with its checkmark icon also highlighted by a red box. A descriptive paragraph explains that the table below displays all file uploads for test or production submissions and that files applicable to the current reporting period can be deleted. To the right of the text are four summary cards: 'Total Files' (0), 'Accepted Files' (0), 'Rejected Files' (0), and 'Deleted Files' (0). At the bottom left, there are two dropdown menus: 'Submission' (set to 'Test') and 'Quarter' (set to 'Q2 2022'), both highlighted by red boxes. The 'Quarter' dropdown is open, showing options for Q1 2022, Q2 2022 (highlighted), Q3 2021, and Q4 2021. A 'Change Selection' button is visible below the dropdowns.

# Reviewing Data Results

Under the Accuracy tab, the user can locate rejected files for revision and resubmission.

The screenshot displays a web application interface for reviewing data results. The 'Accuracy' tab is selected, and a sidebar icon is highlighted with a red box. A red arrow points to a box showing '108 Total Files'. Summary statistics show 106 Accepted Files, 2 Rejected Files, and 0 Deleted Files. A table below shows submission details for two files.

Patient File Name	Batch ID	Batch File Name	Upload Date	Uploaded By	Status	Errors	Actions
CMS529QR...	3092901	876543.zip	06/17/2022	Test HybridP...	Accepted	0*	⋮
CMS529QR...	3092901	876543.zip	06/17/2022	Test HybridP...	Accepted	0*	⋮



# Reviewing Data Results

Click on a card for a closer review of the submitted files that will display below.

**Files** Accuracy

## Hybrid Measures Submission

The table below displays all file uploads for test or production submissions. Here, you can delete an individual file(s), search or sort results to view the file status and download results. Only files applicable to the current reporting period can be deleted.

**Submission** Test **Quarter** Q4 2021

Change Selection

108 Total Files

106 Accepted Files

2 Rejected Files

0 Deleted Files

Search

Search [Reset] Export Results

Patient File Name	Batch ID	Batch File Name	Upload Date	Uploaded By	Status	Errors	Actions
CMS529QR...	3092885	CMS529QRD...	06/17/2022	[REDACTED]	Rejected	1*	⋮
CMS529QR...	3092310	CMS529QRD...	06/16/2022	[REDACTED]	Rejected	1*	⋮

# Reviewing Data Results

After you click on the Export Results button, a CSV file will display the error details.

	A	B	C	D	E	F	G
1	FileName	CCN	BatchID	UploadDate	UploadedBy	Status	ErrorDetails
2	VendorNotAllowedProviderGoodProvider.xml	490020	3024034	11/13/2020	TRUVEN HEALTH ANALYTICS	REJECTED	Submitter ( %s ) is not authorized to submit for this provider ( %s ) (CONF:CMS_0067).
3							
4							
5							
6							
7							
8							
9							
10							
11							
12							
13							
14							
15							
16							
17							
18							
19							
20							
21							
22							
23							

# Troubleshooting QRDA Category I Files

- Work with your vendor by identifying and resolving error messages.
- Visit the [QRDA Resource page](#) of the eCQI Resource Center.
- Visit the [ONC QRDA Known Issues Dashboard](#) on the Office of the National Coordinator for Health Information Technology (ONC) Project Tracking System.
- Contact the Center for Clinical Standards and Quality (CCSQ) Service Center.

# Best Practices for Hybrid Measure Reporting

- Designate at least two QualityNet Security Officials (SOs).
- Update the [Hospital Contact Change Form](#) to inform the Inpatient VIQR Support Contractor for the Hospital IQR Program about key personnel changes (e.g., quality reporting contact).
- Confirm your HQR User Roles and vendor permissions to submit data.
- Submit QRDA Category I files to the HQR System, early and often.
- [Join the Listserve group](#) to receive Email Notifications on hybrid measure reporting for the Hospital IQR Program.

Navigating the Voluntary Hybrid HWR Measure Data Submission Process

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## **Frequently Asked Questions**

# Frequently Asked Question #1

Q: If vital signs/lab results are collected within the specified time frame, should they be reported even if the data are captured at a clinic location?

A: Yes. Vital signs/lab results can be reported regardless of where these data were captured, if they were collected during the appropriate time frame.

# Frequently Asked Question #2

Q: Are only Medicare FFS patients included in the Hybrid HWR measure? Does it matter if Medicare is the primary or secondary payer?

A: The Hybrid HWR measure only includes Medicare FFS patients regardless of whether Medicare was the primary, secondary, or tertiary payer.

# Frequently Asked Question #3

Q: How can hospitals participate in the 2023 voluntary reporting? Has the sign-up deadline passed?

A: To participate in 2023 voluntary reporting, hospitals only need to submit their data to CMS by September 30, 2022. No sign-up is necessary.



# Frequently Asked Question #4

Q: How can my hospital assess whether it is on track to meet the IQR participation requirements?

A: Hospitals that participate in 2023 voluntary reporting are expected to receive HSRs that note whether it met participation requirements. While this information will not impact hospital payments during voluntary reporting, it may help hospitals assess whether they are on track to meet these reporting requirements.












Navigating the Voluntary Hybrid HWR Measure Data Submission Process

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## **Resources/Contacts**

# Resources for Voluntary Reporting

Electronic specifications of the measure are on the eCQI Resource Center: [https://ecqi.healthit.gov/eh-cah?qt-tabs\\_eh=3&globalyearfilter=2301](https://ecqi.healthit.gov/eh-cah?qt-tabs_eh=3&globalyearfilter=2301)

2021 Reporting Period Eligible Hospital / Critical Access Hospital Resources		
For Use 	eCQM Implementation Resources	Published 
2021 Q1-Q4	<a href="#">Implementation Checklist eCQM Annual Update</a> 	
2021 Q1-Q4	<a href="#">eCQM Specifications for CMS529v1 (ZIP)</a> 	May 2020
2021 Q1-Q4	<a href="#">eCQM Value Sets Hybrid</a>  	May 2020
2021 Q1-Q4	<a href="#">2023 Voluntary Reporting Key Dates and Resources (PDF)</a> 	Aug 2020
2021 Q1-Q4	<a href="#">Binding Parameter Specification (BPS)</a>  	May 2020
2021 Q1-Q4	<a href="#">Technical Release Notes Hybrid for CMS529v1 (Excel)</a> 	May 2020
2021 Q1-Q4	<a href="#">eCQM Annual Update Pre-Publication Document (PDF)</a> 	Oct 2020

# Resources for Voluntary Reporting

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

<https://qualitynet.cms.gov> >  
[Hospitals - Inpatient > Measures > Hybrid Measure > Methodology](#)

<https://qualitynet.cms.gov> >  
[Hospitals - Inpatient > Measures > Readmission Measures > Methodology](#)

**Hybrid Measure Methodology**

The measure methodology for the Hybrid HWR Measure contains claims-based specifications and electronic specifications. This is because the Hybrid HWR measure merges electronic health record (EHR) data elements with claims data to calculate the risk-standardized readmission rate.

The measure specifications report contains all the specifications for the Hybrid HWR measure. Additionally, the electronic measure specifications documents describe how the electronic core clinical data elements (CCDE) should be extracted from the EHR for the risk model for the Hybrid HWR measure.

**Measure Specifications Report for 2018 Voluntary Hybrid HWR Data Collection (January 1, 2018 through June 30, 2018)**

File Name	File Type	File Size	
Hybrid HWR Measure with Electronic Health Record Extracted Risk Factors (12/05/17)	PDF	1.4 MB	<a href="#">Download</a>

File Name	File Type	File Size	
2021 Condition-Specific Readmission Measure Updates and Specifications Report: Acute Myocardial Infarction (AMI), Heart Failure (HF), Pneumonia, and Chronic Obstructive Pulmonary Disease (COPD)	PDF	5.4 MB	<a href="#">Download</a>
2021 AMI Readmission Measure Code Specifications supplemental file	XLSX	10 MB	<a href="#">Download</a>
2021 COPD Readmission Measure Code Specifications supplemental file	XLSX	10 MB	<a href="#">Download</a>
2021 HF Readmission Measure Code Specifications supplemental file	XLSX	10 MB	<a href="#">Download</a>
2021 Pneumonia Readmission Measure Code Specifications supplemental file	XLSX	10 MB	<a href="#">Download</a>
2021 Procedure-Specific Readmission Measure Updates and Specifications Report: Total Hip Arthroplasty and/or Total Knee Arthroplasty (THA/TKA) and Coronary Artery Bypass Graft (CABG)	PDF	872 KB	<a href="#">Download</a>
2021 CABG Readmission Measure Code Specifications supplemental file	XLSX	859 KB	<a href="#">Download</a>
2021 THA/TKA Readmission Measure Code Specifications supplemental file	XLSX	1 MB	<a href="#">Download</a>
2021 All-Cause Hospital-Wide Measure Updates and Specifications Report: Hospital-Wide Readmission	PDF	1 MB	<a href="#">Download</a>
2021 Hospital-Wide Readmission Measure Code Specifications supplemental file	XLSX	10 MB	<a href="#">Download</a>

Reports for 2023 voluntary reporting are not yet posted.

# Voluntary Reporting Key Dates and Resources Document

## 2023 Voluntary Reporting Key Dates and Resources: Hybrid Hospital-Wide Readmission (HWR) Measure

### Introduction

This document summarizes key dates and resources for hospitals participating in the 2023 voluntary reporting of the Hybrid HWR Measure.

### Key Dates

For the 2023 Voluntary Reporting of the Hybrid HWR measure, participating hospitals:

- Should submit information on 13 core clinical data elements (6 vital signs and 7 laboratory test results) along with 6 linking variables:
  - For discharges occurring between **July 1, 2021 – June 30, 2022**
  - **By September 30, 2022**
- Will receive Hospital-Specific Reports (HSRs) in **Spring 2023**

### Questions?

If you have any questions about the hybrid measures, please email [cmsybridmeasures@vale.edu](mailto:cmsybridmeasures@vale.edu) or submit your question via JIRA <https://oncprojecttracking.healthit.gov/support/browse/CHM>.

### eCQI Resource Center – Hybrid Page

[https://ecqi.healthit.gov/eh-cah?qt-tabs\\_eh=3&year=2021](https://ecqi.healthit.gov/eh-cah?qt-tabs_eh=3&year=2021)

### 2021 Reporting Period [Published May 2020]

- eCQM Specifications for CMS529v1 (Hybrid HWR) (version 1.3.000)
- Hybrid HWR Value Sets and Direct Reference Codes
- Hybrid HWR Binding Parameter Specification
- Hybrid HWR Technical Release Notes
- eCQM Annual Update Implementation Checklist and Pre-Publication Document

### eCQI Resource Center – Quality Reporting Data Architecture (QRDA)

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

- 2021 CMS QRDA I Schematrons and Sample Files for Hospital Quality Reporting
- 2021 CMS QRDA Category I Implementation Guide for Hospital Quality Reporting

### Resources on QualityNet

<https://www.qualitynet.org/inpatient/measures/hybrid>

- 2023 Claims-based HWR Measure Updates and Specifications Report (to be posted in spring 2023)
- 2023 Hybrid HWR Mock HSR (to be posted in spring 2023)
- 2023 Hybrid HWR HSR User Guide (to be posted in spring 2023)
- 2023 Hybrid HWR Frequently Asked Questions (to be posted in spring 2023)
- 2023 Hybrid HWR Fact Sheet (to be posted in spring 2023)
- Hybrid Measure Tutorial Video and Introductory Webinar

## 2021 Reporting Period Eligible Hospital / Critical Access Hospital Resources

For Use	eCQM Implementation Resources
2021 Q1-Q4	<a href="#">Implementation Checklist eCQM Annual Update</a> ⓘ
2021 Q1-Q4	<a href="#">eCQM Specifications for CMS529v1 (ZIP)</a> ⓘ
2021 Q1-Q4	<a href="#">eCQM Value Sets Hybrid</a> ⓘ
2021 Q1-Q4	<a href="#">2023 Voluntary Reporting Key Dates and Resources (PDF)</a> ⓘ
2021 Q1-Q4	<a href="#">Binding Parameter Specification (BPS)</a> ⓘ
2021 Q1-Q4	<a href="#">Technical Release Notes Hybrid for CMS529v1 (Excel)</a> ⓘ
2021 Q1-Q4	<a href="#">eCQM Annual Update Pre-Publication Document (PDF)</a> ⓘ

# 2023 Voluntary Hybrid HWR Measure Reporting Resources

- 2021 CMS QRDA Category I IG for HQR (Published May 2020)
  - QRDA page of the [eCQI Resource Center](#)
  - Direct link: <https://ecqi.healthit.gov/sites/default/files/QRDA-HQR-2021-CMS-IG-508.pdf>
- Accompanying Schematrons and sample files and any applicable updates (Updated December 2020)
  - QRDA page of the [eCQI Resource Center](#)
  - Direct link: <https://ecqi.healthit.gov/sites/default/files/2021-CMS-QRDA-I-Support-Files.zip>
- QRDA Known Issues Project
  - [ONC QRDA Known Issues Project](#)

# Hybrid Measure Q&A Resources

Stakeholders may submit questions about the Hybrid HWR measure to CMS in two ways:

- [JIRA tool](https://oncprojectracking.healthit.gov/support/projects/CHM/summary): For questions about the measure's electronic specifications:  
<https://oncprojectracking.healthit.gov/support/projects/CHM/summary>
- [Quality Question and Answer Tool](https://cmsqualitysupport.servicenowservices.com/qnet_qa?id=ask_a_question): For questions about the measure's implementation or claims-based specifications:  
[https://cmsqualitysupport.servicenowservices.com/qnet\\_qa?id=ask\\_a\\_question](https://cmsqualitysupport.servicenowservices.com/qnet_qa?id=ask_a_question)
  - Select Inpatient Quality Reporting for the Program.
  - Select Hybrid Measures for the Topic.

Please submit feedback about the resources you would like to see to support Hybrid HWR measure reporting.

Navigating the Voluntary Hybrid HWR Measure Data Submission Process

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## **Question and Answer (Q&A) Session**



# Continuing Education 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 approval for any other state, license, or certification, please check with your licensing or certification board.

Navigating the Voluntary Hybrid HWR Measure Data Submission Process

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**Thank You**

# Disclaimer

This presentation was current at the time of publication and/or upload onto the Quality Reporting Center and QualityNet websites. Medicare policy changes frequently. Any links to Medicare online source documents are for reference use only. In the case that Medicare policy, requirements, or guidance related to this presentation change following the date of posting, this presentation will not necessarily reflect those changes; given that it will remain as an archived copy, it will not be updated.

This presentation was prepared as a service to the public and is not intended to grant rights or impose obligations. Any references or links to statutes, regulations, and/or other policy materials included in the presentation are provided as summary information. No material contained therein is intended to take the place of either written laws or regulations. In the event of any conflict between the information provided by the presentation and any information included in any Medicare rules and/or regulations, the rules and regulations shall govern. The specific statutes, regulations, and other interpretive materials should be reviewed independently for a full and accurate statement of their contents.