Centers for Medicare & Medicaid Services (CMS) Quality Improvement Program Measures for Acute Care Hospitals - Fiscal Year (FY) 2022 Payment Update														
Measure ID	Measure Name	NQF#	Public Reporting Release*	Public Reporting Measurement Period	Hospital Inpatient Quality Reporting (IQR) Program Included	Hospital IQR Program Measurement Period	Hospital Value- Based Purchasing (VBP) Program Included	Hespital VPD Dragger Massurement Deviced	Promoting Interoperability Program Included	Promoting Interoperability Program Measurement Period	Hospital- Acquired Condition (HAC) Reduction Program Included	HAC Reduction Program Measurement Period	Hospital Readmissions Reduction Program Included	Hospital Readmissions Reduction Program Measurement Period
Clinical Process of Care Measures (via Chart-Abstraction)														
PC-01	Elective Delivery	0469	October 2021 January 2022 April 2022 July 2022	Jan 1, 2020-Dec 31, 2020 April 1, 2020-March 31, 2021 June 1, 2020-May 30, 2021 Oct 1, 2020-Sep 30, 2021	Yes	January 1, 2020- December 31, 2020	No	N/A	No	N/A	No	N/A	No	N/A
Sepsis	Severe Sepsis and Septic Shock: Management Bundle (Composite Measure)	0500	October 2020 January 2021 April 2021 July 2021	Jan 1, 2020-Dec 31, 2020 April 1, 2020-March 31, 2021 June 1, 2020-May 30, 2021 Oct 1, 2020-Sep 30, 2021	Yes	January 1, 2020- December 31, 2020	No	N/A	No	N/A	No	N/A	No	N/A
EHR-Based Clinic	EHR-Based Clinical Process of Care Measures (Electronic Clinical Quality Measures - eCQMs)													
ED-2	Admit Decision Time to ED Departure Time for Admitted Patients	0497	TBD	TBD	Yes**	Report one self-selected quarter of data (Q1, Q2, Q3 or Q4) January 1, 2020 - December 31, 2020	No	N/A	Yes***	QRDA and Attestation****: January 1, 2020 - December 31, 2020	No	N/A	No	N/A
PC-05	Exclusive Breast Milk Feeding	0480	TBD	TBD	Yes**	Report one self-selected quarter of data (Q1, Q2, Q3 or Q4) January 1, 2020 - December 31, 2020	No	N/A	Yes***	QRDA and Attestation****: January 1, 2020 - December 31, 2020	No	N/A	No	N/A
STK-02	Discharged on Antithrombotic Therapy	0435	TBD	TBD	Yes**	Report one self-selected quarter of data (Q1, Q2, Q3 or Q4) January 1, 2020 - December 31, 2020	No	N/A	Yes***	QRDA and Attestation****: January 1, 2020 - December 31, 2020	No	N/A	No	N/A
STK-03	Anticoagulation Therapy for Atrial Fibrillation/Flutter	0436	TBD	TBD	Yes**	Report one self-selected quarter of data (Q1, Q2, Q3 or Q4) January 1, 2020 - December 31, 2020	No	N/A	Yes***	QRDA and Attestation****: January 1, 2020 - December 31, 2020	No	N/A	No	N/A
STK-05	Antithrombotic Therapy by the End of Hospital Day Two	0438	TBD	TBD	Yes**	Report one self-selected quarter of data (Q1, Q2, Q3 or Q4) January 1, 2020 - December 31, 2020	No	N/A	Yes***	QRDA and Attestation****: January 1, 2020 - December 31, 2020	No	N/A	No	N/A
STK-06	Discharged on Statin Medication	0439	TBD	TBD	Yes**	Report one self-selected quarter of data (Q1, Q2, Q3 or Q4) January 1, 2020 - December 31, 2020	No	N/A	Yes***	QRDA and Attestation****: January 1, 2020 - December 31, 2020	No	N/A	No	N/A
VTE-1	Venous Thromboembolism Prophylaxis	0371	TBD	TBD	Yes**	Report one self-selected quarter of data (Q1, Q2, Q3 or Q4) January 1, 2020 - December 31, 2020	No	N/A	Yes***	QRDA and Attestation****: January 1, 2020 - December 31, 2020	No	N/A	No	N/A
VTE-2	Intensive Care Unit Venous Thromboembolism Prophylaxis	0372	TBD	TBD	Yes**	Report one self-selected quarter of data (Q1, Q2, Q3 or Q4) January 1, 2019 - December 31, 2019	No	N/A	Yes***	QRDA and Attestation****: January 1, 2020 - December 31, 2020	No	N/A	No	N/A
Healthcare-Assoc	ciated Infection Measures													

1

Measure ID	Measure Name	NQF#	Public Reporting Release*	Public Reporting Measurement Period	Hospital Inpatient Quality Reporting (IQR) Program Included	Hospital IQR Program ) Measurement Period	Hospital Value- Based Purchasin (VBP) Program Included	g Hospital VBP Program Measurement Period	Promoting Interoperability Program Included	Promoting Interoperability Program Measurement Period	Hospital- Acquired Condition (HAC) Reduction Program Included	HAC Reduction Program Measurement Period	Hospital Readmissions Reduction Program Included	Hospital Readmissions Reduction Program Measurement Period
CLABSI	National Healthcare Safety Network (NHSN) Central Line-Associated Bloodstream Infection (CLABSI) Outcome Measure	0139	October 2021 January 2022 April 2022 July 2022	Jan 1, 2020-Dec 31, 2020 April 1, 2020-March 31, 2021 June 1, 2020-May 30, 2021 Oct 1, 2020-Sep 30, 2021	No	N/A	Yes	Baseline: January 1, 2018 - December 31, 2018 Performance: January 1, 2020 - December 31, 2020	No	N/A	Yes	January 1, 2019- December 31, 2020	No	N/A
CAUTI	National Healthcare Safety Network (NHSN) Catheter-associated Urinary Tract Infection (CAUTI) Outcome Measure	0138	October 2021 January 2022 April 2022 July 2022	Jan 1, 2020-Dec 31, 2020 April 1, 2020-March 31, 2021 June 1, 2020-May 30, 2021 Oct 1, 2020-Sep 30, 2021	No	N/A	Yes	Baseline: January 1, 2018 - December 31, 2018 Performance: January 1, 2020 - December 31, 2020	No	N/A	Yes	January 1, 2019- December 31, 2020	No	N/A
Colon and Abdominal Hysterectomy SSI	American College of Surgeons – Centers for Disease Control and Prevention (ACS-CDC) Harmonized Procedure Specific Surgical Site Infection (SSI) Outcome Measure  Colon Procedures Hysterectomy Procedures	0753	October 2021 January 2022 April 2022 July 2022	Jan 1, 2020-Dec 31, 2020 April 1, 2020-March 31, 2021 June 1, 2020-May 30, 2021 Oct 1, 2020-Sep 30, 2021	No	N/A	Yes	Baseline: January 1, 2018 - December 31, 2018 Performance: January 1, 2020 - December 31, 2020	No	N/A	Yes	January 1, 2019- December 31, 2020	No	N/A
MRSA Bacteremia	National Healthcare Safety Network (NHSN) Facility-wide Inpatient Hospital-onset Methicillin-resistant Staphylococcus aureus (MRSA) Bacteremia Outcome Measure	1716	October 2021 January 2022 April 2022 July 2022	Jan 1, 2020-Dec 31, 2020 April 1, 2020-March 31, 2021 June 1, 2020-May 30, 2021 Oct 1, 2020-Sep 30, 2021	No	N/A	Yes	Baseline: January 1, 2018 - December 31, 2018 Performance: January 1, 2020 - December 31, 2020	No	N/A	Yes	January 1, 2019- December 31, 2020	No	N/A
CDI	National Healthcare Safety Network (NHSN) Facility-wide Inpatient Hospital-onset Clostridium difficile Infection (CDI) Outcome Measure	1717	October 2021 January 2022 April 2022 July 2022	Jan 1, 2020-Dec 31, 2020 April 1, 2020-March 31, 2021 June 1, 2020-May 30, 2021 Oct 1, 2020-Sep 30, 2021	No	N/A	Yes	Baseline: January 1, 2018 - December 31, 2018 Performance: January 1, 2020 - December 31, 2020	No	N/A	Yes	January 1, 2019- December 31, 2020	No	N/A
НСР	Influenza Vaccination Coverage Among Healthcare Personnel	0431	October 2020	October 1, 2019- March 31, 2020	Yes	October 1, 2019- March 31, 2020	No	N/A	No	N/A	No	N/A	No	N/A
Claims-Based Pat	tient Safety Measures													
COMP-HIP-KNEE	Hospital-Level Risk-Standardized Complication Rate Following Elective Primary Total Hip Arthroplasty (THA) and/or Total Knee Arthroplasty (TKA)	1550	July 2021	April 1, 2017- March 31, 2020	Yes	April 1, 2017- March 31, 2020	Yes	Baseline: April 1, 2012 - March 31, 2015 Performance: April 1, 2017- March 31, 2020	No	N/A	No	N/A	No	N/A
CMS PSI 04	CMS Death Rate among Surgical Inpatients with Serious Treatable Complications	NA	July 2021	July 1, 2018-June 30, 2020	Yes	July 1, 2018 - June 30, 2020	No	N/A	No	N/A	No	N/A	No	N/A
PSI 90	Patient Safety for Selected Indicators Composite Measure, Modified PSI 90 (Updated Title: Patient Safety and Adverse Events Composite)	0531	July 2021	July 1, 2018-June 30, 2020	No	N/A	No	N/A	No	N/A	Yes	July 1, 2018- June 30, 2020	No	N/A
Claims-Based Mo	ortality Outcome Measures				•									
MORT-30-AMI	Hospital 30-Day, All-Cause, Risk-Standardized Mortality Rate (RSMR) Following Acute Myocardial Infarction (AMI) Hospitalization	0230	July 2021	July 1, 2017- June 30, 2020	No	N/A	Yes	Baseline: July 1, 2012 - June 30, 2015 Performance: July 1, 2017 - June 30, 2020	No	N/A	No	N/A	No	N/A
MORT-30-HF	Hospital 30-Day, All-Cause, Risk-Standardized Mortality Rate (RSMR) Following Heart Failure (HF) Hospitalization	0229	July 2021	July 1, 2017- June 30, 2020	No	N/A	Yes	Baseline: July 1, 2012 - June 30, 2015 Performance: July 1, 2017 - June 30, 2020	No	N/A	No	N/A	No	N/A
MORT-30-PN	Hospital 30-Day, All-Cause, Risk-Standardized Mortality Rate Following Pneumonia Hospitalization	0468	July 2021	July 1, 2017- June 30, 2020	No	N/A	Yes	Baseline: July 1, 2012 - June 30, 2015 Performance: September 1, 2017 - June 30, 2020	No	N/A	No	N/A	No	N/A
MORT-30-COPD	Hospital 30-Day, All-Cause, Risk-Standardized Mortality Rate (RSMR) Following Chronic Obstructive Pulmonary Disease (COPD) Hospitalization	1893	July 2021	July 1, 2017- June 30, 2020	No	N/A	Yes	Baseline: July 1, 2012 - June 30, 2015 Performance: July 1, 2017 - June 30, 2020	No	N/A	No	N/A	No	N/A

2

Measure ID	Measure Name	NQF#	Public Reporting Release*	Public Reporting Measurement Period	Hospital Inpatient Quality Reporting (IQR) Program Included	Hospital IQR Program Measurement Period	Hospital Value- Based Purchasing (VBP) Program Included	Hospital VBP Program Measurement Period	Promoting Interoperability Program Included	Promoting Interoperability Program Measurement Period	Hospital- Acquired Condition (HAC) Reduction Program Included	HAC Reduction Program Measurement Period	Hospital Readmissions Reduction Program Included	Hospital Readmissions Reduction Program Measurement Period
MORT-30-STK	Hospital 30-Day , All-Cause, Risk-Standardized Mortality Rate Following Acute Ischemic Stroke	N/A	July 2021	July 1, 2017- June 30, 2020	Yes	July 1, 2017- June 30, 2020	No	N/A	No	N/A	No	N/A	No	N/A
MORT-30-CABG	Hospital 30-Day, All-Cause, Risk-Standardized Mortality Rate (RSMR) Following Coronary Artery Bypass Graft (CABG) Surgery	2558	July 2021	July 1, 2017- June 30, 2020	No	N/A	Yes	Baseline: July 1, 2012 - June 30, 2015 Performance: July 1, 2017 - June 30, 2020	No	N/A	No	N/A	No	N/A
Claims-Based Co	ordination of Care Measures													
READM-30-AMI	Hospital 30-Day All-Cause Risk-Standardized Readmission Rate (RSRR) Following Acute Myocardial Infarction (AMI) Hospitalization	0505	July 2021	July 1, 2017- June 30, 2020	No	N/A	No	N/A	No	N/A	No	N/A	Yes	July 1, 2017- June 30, 2020
READM-30-PN	Hospital 30-Day, All-Cause, Risk-Standardized Readmission Rate (RSRR) Following Pneumonia Hospitalization	0506	July 2021	July 1, 2017- June 30, 2020	No	N/A	No	N/A	No	N/A	No	N/A	Yes	July 1, 2017- June 30, 2020
READM-30-THA/TKA	Hospital-Level 30-Day, All-Cause Risk- Standardized Readmission Rate Following Elective Primary Total Hip Arthroplasty (THA) and/or Total Knee Arthroplasty (TKA)	1551	July 2021	July 1, 2017- June 30, 2020	No	N/A	No	N/A	No	N/A	No	N/A	Yes	July 1, 2017- June 30, 2020
READM-30-HWR	Hospital-Wide All-Cause Unplanned Readmission Measure (HWR)	1789	July 2021	July 1, 2019- June 30, 2020	Yes	July 1, 2019- June 30, 2020	No	N/A	No	N/A	No	N/A	No	N/A
READM-30-COPD	Hospital 30-Day, All-Cause, Risk-Standardized Readmission Rate Following Chronic Obstructive Pulmonary Disease (COPD) Hospitalization	1891	July 2021	July 1, 2017- June 30, 2020	No	N/A	No	N/A	No	N/A	No	N/A	Yes	July 1, 2017- June 30, 2020
READM-30-CABG	Hospital 30-Day, All-Cause, Unplanned, Risk- Standardized Readmission Rate Following Coronary Artery Bypass Graft (CABG) Surgery	2515	July 2021	July 1, 2017- June 30, 2020	No	N/A	No	N/A	No	N/A	No	N/A	Yes	July 1, 2017- June 30, 2020
READM-30-HF	Hospital 30-Day, All-Cause, Risk-Standardized Readmission Rate Following Heart Failure (HF) Hospitalization	0330	July 2021	July 1, 2017- June 30, 2020	No	N/A	No	N/A	No	N/A	No	N/A	Yes	July 1, 2017- June 30, 2020
AMI Excess Days	Excess Days in Acute Care after Hospitalization for Acute Myocardial Infarction	2881	July 2021	July 1, 2017- June 30, 2020	Yes	July 1, 2017- June 30, 2020	No	N/A	No	N/A	No	N/A	No	N/A
HF Excess Days	Excess Days in Acute Care after Hospitalization for Heart Failure	2880	July 2021	July 1, 2017- June 30, 2020	Yes	July 1, 2017- June 30, 2020	No	N/A	No	N/A	No	N/A	No	N/A
PN Excess Days	Excess Days in Acute Care after Hospitalization for Pneumonia	2882	July 2021	July 1, 2017- June 30, 2020	Yes	July 1, 2017- June 30, 2020	No	N/A	No	N/A	No	N/A	No	N/A
Claims-Based Pa	yment Measures													
MSPB	Medicare Spending Per Beneficiary (MSPB)	2158	January 2022	January 1, 2020- December 31, 2020	No	N/A	Yes	Baseline: January 1, 2018 - December 31, 2018 Performance: January 1, 2020 - December 31, 2020	No	N/A	No	N/A	No	N/A
AMI Payment	Hospital-Level, Risk-Standardized Payment Associated with a 30-Day Episode-of-Care for Acute Myocardial Infarction (AMI)	2431	July 2021	July 1, 2017- June 30, 2020	Yes	July 1, 2016- June 30, 2019	No	N/A	No	N/A	No	N/A	No	N/A
HF Payment	Hospital-Level, Risk-Standardized Payment Associated with a 30-Day Episode-of-Care for Heart Failure (HF)	2436	July 2021	July 1, 2017- June 30, 2020	Yes	July 1, 2016- June 30, 2019	No	N/A	No	N/A	No	N/A	No	N/A
PN Payment	Hospital-Level, Risk-Standardized Payment Associated with a 30-Day Episode-of-Care for Pneumonia	2579	July 2021	July 1, 2017- June 30, 2020	Yes	July 1, 2016- June 30, 2019	No	N/A	No	N/A	No	N/A	No	N/A

3

Measure ID	Measure Name	NQF#	Public Reporting Release*	Public Reporting Measurement Period	Hospital Inpatient Quality Reporting (IQR) Program Included	Hospital IQR Program Measurement Period	Hospital Value- Based Purchasing (VBP) Program Included	Hospital VBP Program Measurement Period	Promoting Interoperability Program Included	Promoting Interoperability Program Measurement Period	Hospital- Acquired Condition (HAC) Reduction Program Included	HAC Reduction Program Measurement Period	Hospital Readmissions Reduction Program Included	Hospital Readmissions Reduction Program Measurement Period
THA/TKA Payment	Hospital-Level, Risk-Standardized Payment Associated with an Episode-of-Care for Primary Elective Total Hip Arthroplasty and/or Total Knee Arthroplasty	N/A	July 2021	April 1, 2017- March 31, 2020	Yes	April 1, 2017- March 31, 2020	No	N/A	No	N/A	No	N/A	No	N/A
Patient Experience of Care Survey Measures														
HCAHPS	Hospital Consumer Assessment of Healthcare Providers and Systems	0166 0228	October 2021 January 2022 April 2022 July 2022	Jan 1, 2020-Dec 31, 2020 April 1, 2020-March 31, 2021 June 1, 2020-May 30, 2021 Oct 1, 2020-Sep 30, 2021	Yes	January 1, 2020-December 31, 2020	Yes	Baseline: January 1, 2018 - December 31, 2018 Performance: January 1, 2020 - December 31, 2020	No	N/A	No	N/A	No	N/A

### **Footnotes**

<sup>\*</sup>CMS anticipates reporting the results of the FY 2022 Hospital VBP Program, HAC Reduction Program, and Hospital Readmissions Reduction Program in January 2022.

<sup>\*\*</sup>A hospital may choose to submit this measure as one of the four self-selected eCQMs for one quarter of 2020 data (Q1, Q2, Q3 or Q4) required for the Hospital IQR and the Promoting Interoperability Programs reporting requirements.

<sup>\*\*\*</sup>A hospital may choose to submit this measure as either one of the eight (8) eCQMs required for the Promoting Interoperability Program for attestation (if permissible) or as one of the four (4) self-selected eCQMs required for the Promoting Interoperability Program for submission. Either reporting method is completed via the QualityNet Secure Portal.

<sup>\*\*\*\*</sup>Attestation is an option only available for EHs and CAHs in specific circumstances when electronic reporting is not feasible under the Promoting Interoperability Program. Contact the Promoting Interoperability Program for further assistance: qnetsupport@hcqis.org.