

# Welcome

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# Troubleshooting Audio

Audio from  
computer speakers  
breaking up?

Audio suddenly  
stop?

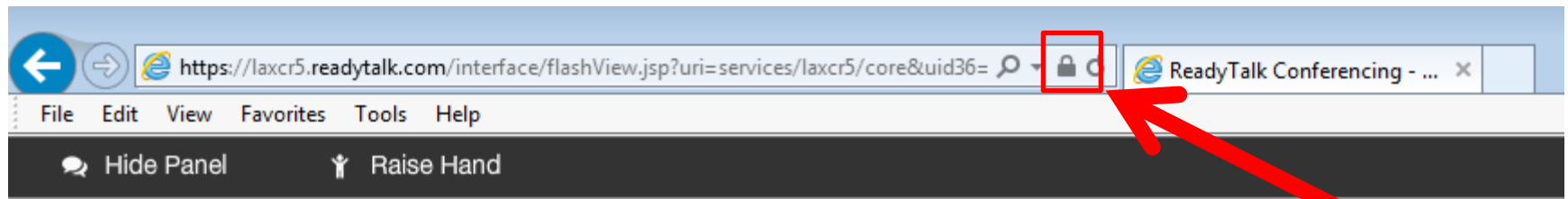
Click Refresh icon

-or-

Click F5



F5 Key  
Top row of keyboard

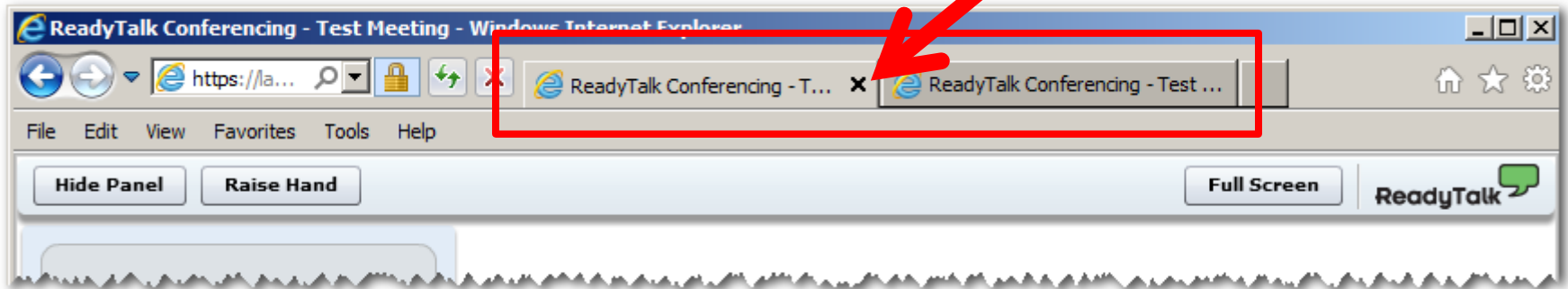


Location of Buttons

Refresh

# Troubleshooting Echo

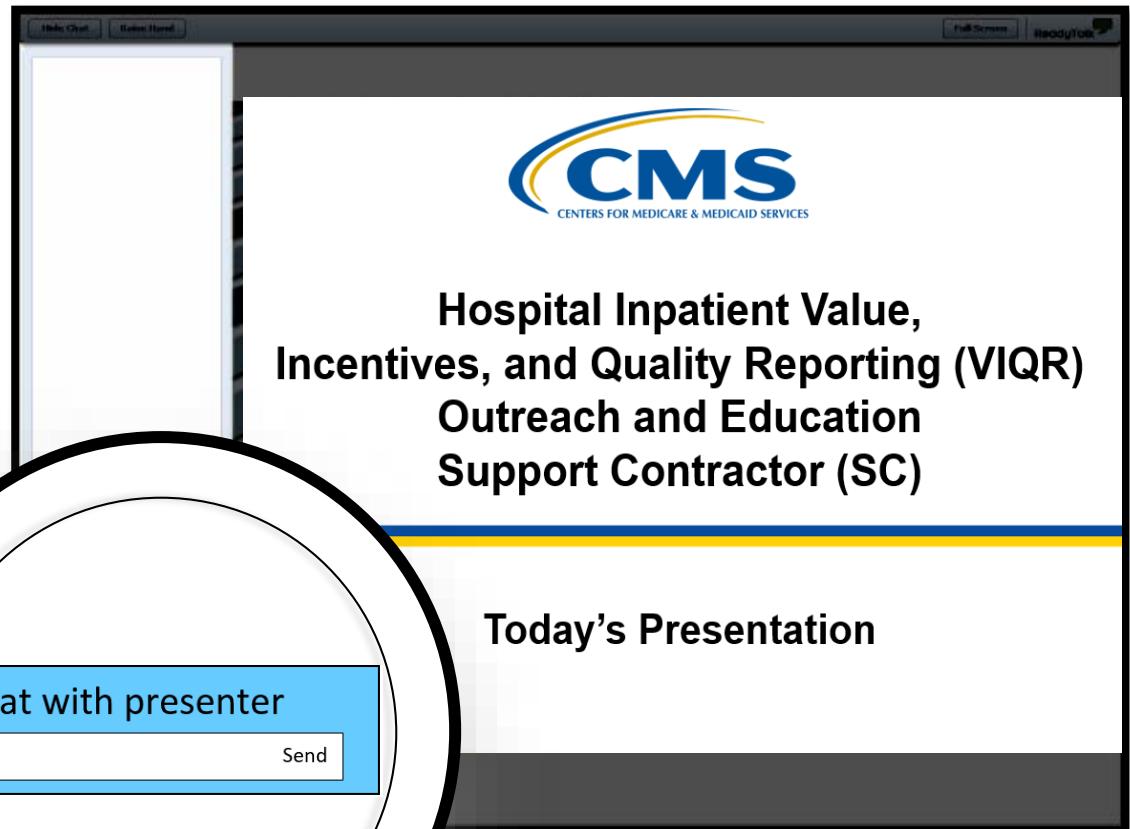
- Hear a bad echo on the call?
- Echo is caused by multiple browsers/tabs open to a single event (multiple audio feeds).
- Close all but one browser/tab and the echo will clear.



*Example of two browser tabs open to same event*

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





# **CY 2017 eCQM Reporting Tips and Tools for the Hospital IQR and Medicare EHR Incentive Programs**

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Incentive Program Alignment

Hospital Inpatient Value, Incentives, and Quality Reporting (VIQR)

Outreach and Education Support Contractor (SC)

**February 6, 2018**

# Purpose

This presentation will provide an overview of helpful tips and available tools for successful electronic submission of clinical quality measure (CQM) data for the Hospital IQR and Medicare EHR Incentive Programs.

# Objectives

Participants will be able to perform the following:

- Utilize the information presented in a question-and-answer format to address the most commonly asked questions regarding calendar year (CY) 2017 electronic clinical quality measure (eCQM) reporting
- Implement the guidance provided for Quality Reporting Document Architecture (QRDA) Category I file submissions and use tips to troubleshoot error messages
- Locate self-directed tools and resources to ensure successful eCQM reporting

CY 2017 eCQM Reporting Tips and Tools for the  
Hospital IQR and Medicare EHR Incentive Programs

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## **Hospital IQR and Medicare EHR Incentive Programs Tips**



# Q: Locating CY 2017 CQM Measure Information

**Q:** Where can I locate the clinical quality measures (CQMs) available for electronic reporting for the Hospital IQR and EHR Incentive Programs for CY 2017?

**A:** The [QualityNet](#) and [QualityReportingCenter](#) websites provide a list of the available CQMs. Greater technical information regarding the CQMs (definition of initial patient population [IPP], denominator exclusions, addenda, etc.) can be obtained from the [Electronic Clinical Quality Improvement \(eCQI\) Resource Center](#).

# Posted List of CQMs

List of CQMs available on the [QualityNet](#) and [Quality Reporting Center](#) websites

Hospital Inpatient Quality Reporting (IQR) Program

**CY 2017 (FY 2019)**  
**Available Electronic Clinical Quality Measures (eCQMs)**

For calendar year (CY) 2017 reporting (fiscal year [FY] 2019 payment determination), hospitals participating in the Hospital IQR Program are required to successfully submit data for at least four of the 15 eCQMs available, as shown below, using any combination of Quality Reporting Document Architecture (QRDA) Category I files, zero denominator declarations, and/or case threshold exemptions that reflect the hospital's total inpatient population. These data must be reported using health information technology (IT) certified by the Office of the National Coordinator for Health IT (ONC) to the 2014 and/or 2015 edition. The CY 2017 reporting deadline is February 28, 2018, by 11:59 p.m. PT. For additional information, please visit the [QualityNet eCQMs Overview](#) page.

ED-1 CMS55v5 <i>Median Time from ED Arrival to ED Departure for Admitted ED Patients</i>	ED-2 CMS111v5 <i>Median Admit Decision Time to ED Departure Time for Admitted Patients</i>	ED-3* CMS32v5 <i>Median Time from ED Arrival to ED Departure for Discharged ED Patients</i>	STK-2 CMS104v5 <i>Discharged on Antithrombotic Therapy</i>	STK-3 CMS71v6 <i>Anticoagulation Therapy for Atrial Fibrillation/Flutter</i>	STK-5 CMS72v5 <i>Antithrombotic Therapy By End of Hospital Day 2</i>
STK-6 CMS105v5 <i>Discharged on Statin Medication</i>	STK-8 CMS107v5 <i>Stroke Education</i>	STK-10 CMS102v5 <i>Assessed for Rehabilitation</i>	AMI-8a CMS53v5 <i>Primary PCI Received Within 90 Minutes of Hospital Arrival</i>	VTE-1 CMS108v5 <i>Venous Thromboembolism Prophylaxis</i>	VTE-2 CMS190v5 <i>Intensive Care Unit Venous Thromboembolism Prophylaxis</i>
PC-01 CMS113v5 <i>Elective Delivery</i>	PC-05 CMS9v5 <i>Exclusive Breast Milk Feeding</i>	CAC-3 CMS26v4 <i>Home Management Plan of Care Document Given to Patient/Caregiver</i>	EHDI-1a CMS531v5 <i>Hearing Screening Prior to Hospital Discharge</i>	*ED-3 is an Outpatient measure and is not applicable for IQR aligned credit	

Updated August 2017

# eCQM Specifications

eCQM specification details on [eCQI Resource Center](#)

The screenshot shows the eCQI Resource Center website. The header includes the eCQI Resource Center logo and the CMS logo (The Office of the National Coordinator for Health Information Technology). Below the header is a navigation bar with links for About, FAQ, Glossary of eCQI Terms, eCQI Events, and eCQI Resource Center Contact Information. A search bar and a Login button are also present. The main content area features a blue navigation bar with links for Topic Areas, eCQM, EH / CAH Measures, EP / EC Measures, eCQM Tools, eCQI Standards, Kaizen, Education, Implementers, Engage, and CDS. Below this is a red oval highlighting a search filter for '2017 + Addendum' and a table of eCQM Materials. The table has two columns: 'eCQM Update' and 'eCQM Materials'. The 'eCQM Update' column contains the text 'Addendum to eCQMs for eReporting for the 2017 Reporting Period (as of January 2017)'. The 'eCQM Materials' column contains a list of links for eCQM specifications and technical release notes for January 2017 and April 2016, along with a 2017 CMS QRDA Implementation Guide for Hospital Quality Reporting.

**eCQI Resource Center**  
The one-stop shop for the most current resources to support **Electronic Clinical Quality Improvement**.

About FAQ Glossary of eCQI Terms eCQI Events eCQI Resource Center Contact Information

eCQMs Eligible Hospital / Critical Access Hospital eCQMs

Search Login

Topic Areas eCQM EH / CAH Measures EP / EC Measures eCQM Tools eCQI Standards Kaizen Education Implementers Engage CDS

Use the eCQM Materials and follow the eCQM Implementation Checklist to update your electronic health record and processes for eCQM use and reporting.

Select Reporting Year Search

2017 + Addendum Apply

eCQM Update	eCQM Materials
Addendum to eCQMs for eReporting for the 2017 Reporting Period (as of January 2017)	<a href="#">eCQMs for Eligible Hospitals Table January 2017</a> <a href="#">eCQM Specifications for Eligible Hospitals January 2017</a> <a href="#">eCQM Technical Release Notes Update January 2017</a> <a href="#">eCQM Technical Release Notes Update January 2017</a> <a href="#">eCQM Technical Release Notes Update January 2017 (ICD-10 Updates only)</a> <a href="#">eCQM Technical Release Notes Update January 2017 (ICD-10 Updates only)</a> Prior to Addendum: <a href="#">eCQMs for Eligible Hospitals Table April 2016</a> <a href="#">eCQM Specifications for Eligible Hospitals April 2016</a> <a href="#">eCQM Measure Logic Guidance v1.12 Update April 2016</a> <a href="#">eCQM Technical Release Notes Update April 2016</a> <a href="#">2017 CMS QRDA Implementation Guide for Hospital Quality Reporting</a>

# Q: Difference Between Case Threshold and Zero Denominator

**Q:** We understand that using case threshold exemptions and/or zero denominator declarations will count toward the successful submission of eCQMs for CY 2017 reporting. What is the criteria of what to use if we're not submitting QRDA I files for a measure? If we have a small number of cases, how do we know if we can use case threshold or have to report QRDA I files? And where do we enter the data?

**A:** We have a breakdown for you on the next slide.

# Case Threshold Exemption vs. Zero Denominator Declaration

## Case Threshold Exemption

Applicable to Hospital IQR and EHR Incentive Programs

### Criteria

- A hospital's EHR system is certified to report the eCQM.

### AND

- Five or fewer discharges applicable to an eCQM have occurred during the relevant EHR reporting quarter.

- The eCQM for which there is a valid case threshold exemption will count as submission of one of the required eCQMs for both the Medicare EHR Incentive Program and the Hospital IQR Program.
- Hospitals do not have to utilize the case threshold exemption; they can submit the applicable QRDA Category I files (five or fewer), if they choose.
- Case threshold exemptions are entered on the Denominator Declaration screen within the *QualityNet Secure Portal*.

## Zero Denominator

Applicable to Hospital IQR and EHR Incentive Programs

### Criteria

- A hospital's EHR system is certified to report the eCQM.

### AND

- A hospital does not have any patients that meet the denominator criteria of that CQM.

- The eCQM for which there is a valid zero denominator will count as submission of one of the required eCQMs for both the Medicare EHR Incentive Program and the Hospital IQR Program.
- Zero denominator declarations are entered on the Denominator Declaration screen within the *QualityNet Secure Portal*.

# Denominator Declaration Screen within *QualityNet Secure Portal*

- **Log** in to *QualityNet Secure Portal*
- **Click** on *Quality Programs* and **Select** [Hospital Quality Reporting]
- **Select** [Denominator Declaration/QRDA File Deletion] located in the EHR Incentive Program Hospital eCQM Reporting box on the My Tasks screen
- **Click** [Denominator Declaration]
- **Manually** enter data under the appropriate column(s)
- **Scroll** down on screen and **Click** [Submit]

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

\* Indicates eCQM is not applicable for the Hospital IQR Program.

\*\* Select if there was no denominator patient population for the certified measure for the selected date range. The Case Threshold field will be disabled if Zero Denominator is selected.

\*\*\* Enter 0–5 for quarter selection. Leave blank if eCQM is to be submitted. eCQM data must all be within the same single discharge quarter.

The IQR-EHR submission deadline is **February 28, 2018**.

# Q: Locating QRDA Category I File Format Information

**Q:** Where can I find the QRDA-related information to tell me how the patient files should be formatted? How do I figure out which data elements are required?

**A:** Greater details regarding file format are located on slide 44. Users are encouraged to locate the *2017 CMS Implementation Guide for Quality Reporting Document Architecture Category I Hospital Quality Reporting*, associated schematron, and sample files that are posted on the [eCQI Resource Center](#). The 2017 CMS QRDA I IG identifies mandatory data elements.

The Health Level Seven (HL7) International Base Standard is also available for download from the [HL7](#) website.

- HL7 login required to access
- *HL7 Clinical Document Architecture® (CDA) R2 IG: QRDA I, Release 1, Draft Standard for Trial Use (STU) Release 3.1 – US Realm (April 2016)*

# Locating CY 2017 CMS QRDA I IG, Schematron, and Sample Files

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

The screenshot shows a web browser window with the URL <https://ecqi.healthit.gov/qrda>. The page title is "QRDA | eCQI Resource Cent...". The main heading is "eCQI Resource Center" with the tagline "The one-stop shop for the most current resources to support Electronic Clinical Quality Improvement." The navigation menu includes "About", "FAQ", "Glossary of eCQI Terms", and "eCQI Standards". The "eCQI Standards" dropdown menu is open, showing "QRDA" selected. The "QRDA" dropdown menu is also open, showing "Topic Areas" with sub-items: "eCQM", "EH / CAH Measures", "EP / EC Measures", "eCQM Tools", "eCQI Standards", "Kaizen", "Education", and "Implement". The "eCQI Standards" dropdown menu is open, showing "QRDA" selected. The "QRDA" dropdown menu is also open, showing "Topic Areas" with sub-items: "eCQM", "EH / CAH Measures", "EP / EC Measures", "eCQM Tools", "eCQI Standards", "Kaizen", "Education", and "Implement". The "eCQI Standards" dropdown menu is open, showing "QRDA" selected. The "QRDA" dropdown menu is also open, showing "Topic Areas" with sub-items: "eCQM", "EH / CAH Measures", "EP / EC Measures", "eCQM Tools", "eCQI Standards", "Kaizen", "Education", and "Implement".

- Will further constrain the base HL / QRDA Category III standard by providing CMS-specific requirements for Eligible Clinicians.
- Will incorporate reporting for Advancing Care Information and Improvement Activities using QRDA Category III.

**QRDA Reference and Implementation Guides for eCQM**

**For eReporting for the 2017 Reporting Period:**

- [2017 CMS QRDA III Implementation Guide for Eligible Clinicians Reporting v0.1 \(pdf\)](#)
- [2017 CMS QRDA III Schematrons and Sample Files for Eligible Clinician Reporting v0.1 \(zip\)](#)
- [2017 CMS QRDA Implementation Guide for Hospital Quality Reporting \(pdf\)](#)
- [2017 CMS QRDA I Schematrons, and Sample Files for Hospital Quality Reporting \(zip\)](#)



# Q: Locating CMS Technical Guidance for QRDA Category I File Creation and System Updates

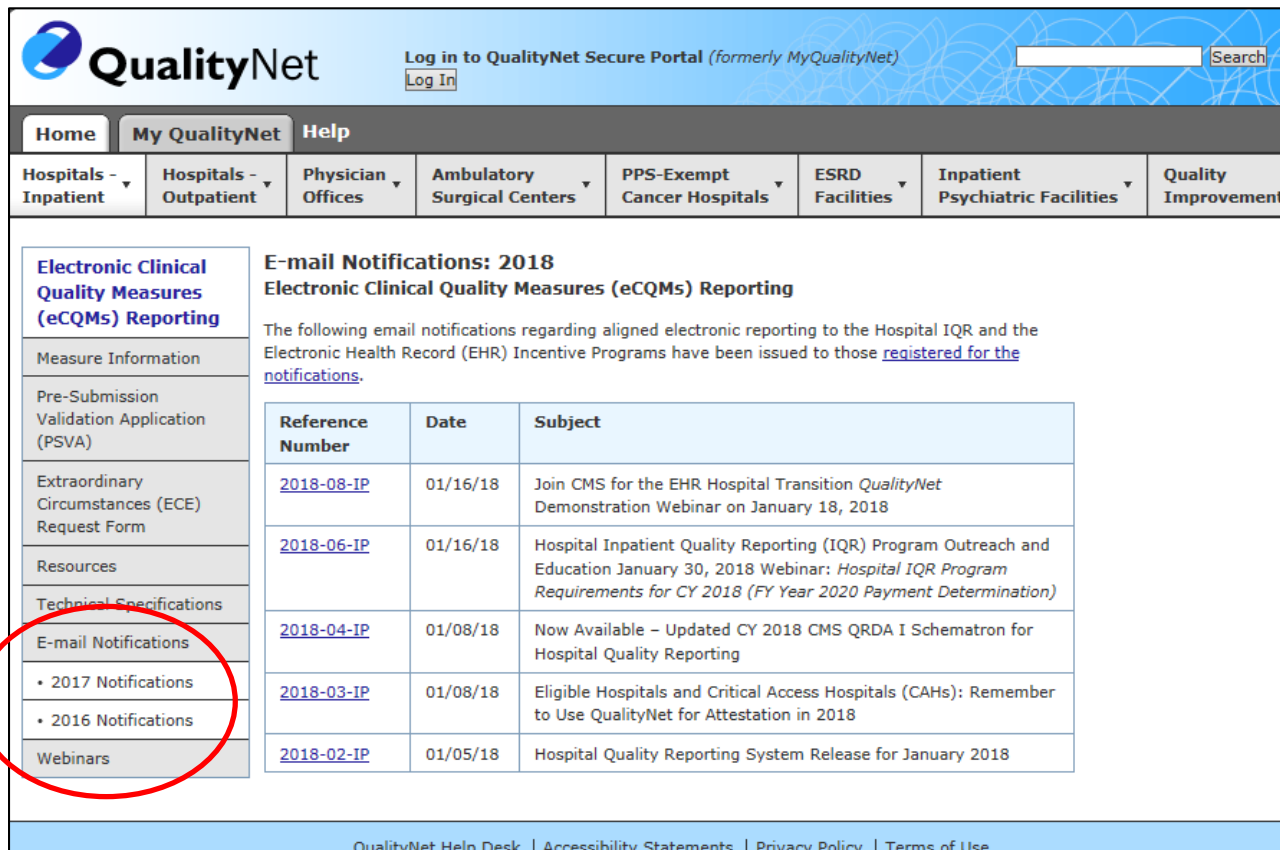
**Q:** What technical guidance has CMS released regarding the development of QRDA Category I files for CY 2017 eCQM Reporting? Where are system updates monitored to update data submitters?

**A:** CMS released three ListServes regarding technical guidance (available on the eCQM E-Mail Notifications web page on [QualityNet.org](http://QualityNet.org)) and one regularly updated Known Issues document is available for download.

ListServe	Date
CMS Issues Technical Instructions for QRDA Category I Submissions for eCQM Reporting to the Hospital IQR and the Medicare EHR Incentive Programs (Act Wrapper Guidance)	June 13, 2017
CMS Issues Technical Guidance for Valid Reporting of Custodian ID Using CMS Certification Numbers in QRDA Category I Files for Hospital Quality Reporting Programs	August 8, 2017
Now Available: Electronic Clinical Quality Measure (eCQM) Value Set Addendum for the 4th Quarter 2017 Reporting Period for Hospital Quality Reporting Programs	September 15, 2017

# Locating eCQM E-mail Notifications Web Page

Available on [QualityNet](#)



**QualityNet** Log in to QualityNet Secure Portal (formerly MyQualityNet)  Search

Home My QualityNet Help

Hospitals - Inpatient Hospitals - Outpatient Physician Offices Ambulatory Surgical Centers PPS-Exempt Cancer Hospitals ESRD Facilities Inpatient Psychiatric Facilities Quality Improvement

**Electronic Clinical Quality Measures (eCQMs) Reporting**

- Measure Information
- Pre-Submission Validation Application (PSVA)
- Extraordinary Circumstances (ECE) Request Form
- Resources
- Technical Specifications
- E-mail Notifications**
  - 2017 Notifications
  - 2016 Notifications
- Webinars

**E-mail Notifications: 2018**  
**Electronic Clinical Quality Measures (eCQMs) Reporting**

The following email notifications regarding aligned electronic reporting to the Hospital IQR and the Electronic Health Record (EHR) Incentive Programs have been issued to those [registered for the notifications](#).

Reference Number	Date	Subject
<a href="#">2018-08-IP</a>	01/16/18	Join CMS for the EHR Hospital Transition <i>QualityNet</i> Demonstration Webinar on January 18, 2018
<a href="#">2018-06-IP</a>	01/16/18	Hospital Inpatient Quality Reporting (IQR) Program Outreach and Education January 30, 2018 Webinar: <i>Hospital IQR Program Requirements for CY 2018 (FY Year 2020 Payment Determination)</i>
<a href="#">2018-04-IP</a>	01/08/18	Now Available – Updated CY 2018 CMS QRDA I Schematron for Hospital Quality Reporting
<a href="#">2018-03-IP</a>	01/08/18	Eligible Hospitals and Critical Access Hospitals (CAHs): Remember to Use QualityNet for Attestation in 2018
<a href="#">2018-02-IP</a>	01/05/18	Hospital Quality Reporting System Release for January 2018

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# Locating EHR Incentive Program Known Issues Document

## Known Issues Document on [QualityNet](#)

<ul style="list-style-type: none"><li>• Password Rules</li><li>• QualityNet System Security Policy, PDF</li></ul>	<ul style="list-style-type: none"><li>• <a href="#">CMS grants exemptions for Quality Program participants in FEMA disaster areas affected by Northern California Wildfires</a></li><li>• <a href="#">CY 2017 eCQM Reporting Updates and Resources for the Hospital IQR and Medicare EHR Incentive Programs Issued</a></li><li>• <a href="#">CMS releases December 2017 Hospital Compare preview reports</a></li><li>• <a href="#">CMS grants exceptions for Quality Program participants in FEMA disaster areas in Puerto Rico and U.S. Virgin Islands affected by Hurricane Maria</a></li><li>• <a href="#">CMS will not update Hospital Compare Star Ratings Data in October 2017</a></li><li>• <a href="#">CMS grants exceptions for Quality Program participants in FEMA disaster areas in Florida, Puerto Rico, and U.S. Virgin Islands affected by Hurricane Irma</a></li><li>• <a href="#">CMS will hold a second Review and Corrections Period for the FY 2018 HAC Reduction Program</a></li><li>• <a href="#">CMS grants exemptions for Quality Program participants in FEMA disaster areas in Texas and Louisiana affected by Hurricane Harvey</a></li></ul>	<ul style="list-style-type: none"><li>• Hospitals - Outpatient</li><li>• Inpatient Psychiatric Facilities</li><li>• PPS-Exempt Cancer Hospitals</li></ul> <p><b>Note:</b> First-time registration required</p>
<p><b>Join Listserves</b> Sign up for Notifications and Discussions.</p>		
<p><b>Known Issues – Hospital Reporting</b></p> <ul style="list-style-type: none"><li>• Inpatient<ul style="list-style-type: none"><li>• EHR Incentive Program</li><li>• Hospital Value-Based Purchasing (VBP)</li></ul></li><li>• Outpatient</li><li>• Ambulatory Surgical Centers (ASCs)</li><li>• PPS-Exempt Cancer Hospitals</li><li>• Inpatient Psychiatric Facilities</li><li>• Secure File Transfer (SFT)</li></ul>	<p><b>About QualityNet</b></p> <p>Established by the Centers for Medicare &amp; Medicaid Services (CMS), QualityNet provides healthcare quality improvement news, resources and data reporting tools and applications used by healthcare providers and others.</p> <p>QualityNet is the only CMS-approved website for secure communications and healthcare quality data exchange between: quality improvement organizations (QIOs), hospitals, physician offices, nursing homes, end stage renal disease (ESRD) networks and facilities, and data vendors.</p> <p><a href="#">More »</a></p>	<p><b>Downloads</b></p> <ul style="list-style-type: none"><li>• CART - Inpatient</li><li>• CART - Outpatient</li><li>• CART Module Designer</li></ul>
<p><b>System Maintenance</b></p> <ul style="list-style-type: none"><li>• QualityNet Scheduled Maintenance</li></ul>		<p><b>Training</b></p> <ul style="list-style-type: none"><li>• QualityNet Training</li><li>• QualityNet Event Center</li><li>• Secure Portal Enrollment Training, WMV</li><li>• Question and Answer Tool Training, MP4</li><li>• Transcript, PDF</li></ul>
		<p><b>Skilled Nursing Facility Programs</b></p> <ul style="list-style-type: none"><li>• SNF Value-Based Purchasing Program</li></ul>

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# Q: How to Utilize the EHR Reports

**Q:** Our CY 2017 eCQM data has been submitted and now I'd like to use the EHR reports to check for errors, view which files have been rejected and accepted, and determine if we've met successful submission. Where do I start?

**A:** CMS has published an EHR Reports Overview document that provides the name, purpose, and availability for test and/or production QRDA Category I file submissions (screenshot on next slide). CMS has also provided an EHR HQR Program Reports online document available for download within the *QualityNet Secure Portal* (screenshots on upcoming slides).

Questions? Contact the *QualityNet* Help Desk at [qnetsupport@hcqis.org](mailto:qnetsupport@hcqis.org); (866) 288-8912.

# EHR Hospital Reports Overview Document

Full version of document available on [QualityNet.org](http://QualityNet.org) and [QualityReportingCenter.com](http://QualityReportingCenter.com)

## EHR Hospital Reports Available in the *QualityNet* Secure Portal Calendar Year 2017 eCQM Reporting

Frequently Asked Questions	Report Name	Report Purpose	Report File Type
Which report displays how the Quality Reporting Document Architecture (QRDA) Category I files were processed at the file level?	<b>EHR Hospital Reporting – Submission Detail Report (R529)</b>	File-level validation shows the conformance or error statements within rejected files.	Generate for test and production QRDA Category I files through the feedback and submission report categories.
Which report provides a summary of the total individual files submitted within a batch file that were accepted, deleted, or rejected?	<b>EHR Hospital Reporting – Submission Summary Report (R528)</b>	Summary validation report, including the number of files accepted, deleted, or rejected within a batch submission. <b>NOTE:</b> This report only evaluates if the measure template is in the file and should not be utilized to determine reporting success.	Generate for test and production QRDA Category I files through the feedback and submission report categories.
Which report can provide a summary level of measure performance calculations?	<b>EHR Hospital Reporting – eCQM Performance Summary Report (R547)</b>	Performance calculations, such as denominator and numerator populations, continuous variables, etc.	Generate for production QRDA Category I files only through the feedback or submission report categories.
Which report tells me if our hospital's production file submissions are meeting the CMS definition of successful	<b>EHR Hospital Reporting – eCQM Submission Status Report (R530)</b>	The following fields in this report indicate successful submission of eCQM reporting: Successful Meaningful Use (MU) Submission and Successful IQR-EHR	Generate for production QRDA Category I files only through the feedback and submission report categories.

# Locating the Reports Online Help

The screenshot displays the CMS QualityNet website interface. At the top left, the logo reads "CMS.gov QualityNet". A navigation bar contains links for "Home", "Quality Programs", "My Reports", and "Help". Below this, a breadcrumb trail shows "Home>Help>Hospital Quality Reporting>HQR Reports Online Help". On the left side, a "Contents" menu lists various topics, including "Title Page", "Overview", "User Account Setup", "Setup Considerations", "Authorizations", "Accessing Reports in the QualityNet", "Using the HQR Reports System", "General Parameter Display and Selection", "Hospital Reporting: Ambulatory Surgery", "ASC Reports - Feedback Category", "ASC Reports - Submission Category", "Hospital Reporting: Inpatient Psychiatry", "Hospital Reporting: Submission: IPFC", "Hospital Reporting Inpatient Psychi", "Hospital Reporting Vendors Authori", "Hospital Reporting Submission IPFQI", "Hospital Reporting: Feedback: IPFQF", "Hospital Reporting Inpatient Psychi", "Hospital Reporting Inpatient Psychi", "Hospital Reporting Vendors Authori", "Inpatient Psychiatric Facility (IPF) F", "Hospital Reporting Feedback - IPFQF", and "Hospital Reporting: PPS-Exempt Canc".

In the main content area, the CMS logo is displayed above the text "Centers for Medicare & Medicaid Services" and "CMS eXpedited Life Cycle (XLC)". A link for "Home > Title Page" is visible in the top right. A red rectangular box highlights the text "Hospital Quality Reporting (HQR) Release 11.1.0 Reports Online Help", with a blue arrow pointing to it from the left. The version number "Version 1.0" is located in the bottom right corner.

# Locating the Reports Online Help

## EHR HQR Program Reports



The screenshot shows the CMS QualityNet website interface. The top navigation bar includes 'Home', 'Quality Programs', 'My Reports', and 'Help'. The breadcrumb trail reads 'Home > Help > Hospital Quality Reporting > HQR Reports Online Help'. The main content area is titled 'Electronic Health Record (EHR) HQR Program Reports' and contains the following text:

The Electronic Health Record (EHR) Hospital Quality Reporting reports provide information on the data submitted to the Hospital electronic Clinical Quality Measures (eCQMs) System by the hospitals and vendors. Also included in the set of EHR reports is the Vendor Authorization report, which displays vendors that have been authorized to view EHR Reports.

When running reports based on recently submitted data, users should wait until they have received the email notification confirming that their submitted data has been processed.

The EHR Reports can be accessed under the following report categories:

- EHR Hospital Reporting – Submission Reports
- EHR Hospital Reporting – Feedback Reports

The reports can be run with the EHR Data Upload and EHR Feedback Reports Roles.

Please see [Table 1](#) and [Table 2](#) in the Appendix for additional roles and categories under which the EHR reports may be run.

When EHR data is uploaded and the Quality Reporting Data Architecture (QRDA) Category I files have been processed, the submitter of the data will receive an email notification within 24 hours after the submission. The email will contain the assigned Batch ID, Upload Date, number of files submitted, number of files accepted and number of files rejected. The email also directs the submitter to sign in to the QualityNet Secure Portal and navigate to the applicable program's report module to access the EHR Submission Reports category to run the individual reports. Any files that have been rejected must be corrected and resubmitted.

To obtain a comprehensive set of submission results, it is strongly recommended that the QRDA Submission Summary and the Submission Detail reports be run by selecting only the "Upload Start and End Date" and the "Batch ID" parameters to limit the results.

# Q: Resources for Troubleshooting Conformance Errors in QRDA Category I Files

**Q:** I have submitted the QRDA Category I files for our patient population. I generated the Submission Detail Report from the *QualityNet Secure Portal* and see we have errors. What resources are available to help interpret the errors in order to be able to fix them?

**A:** Two resources are available:

- CY 2017 QRDA I Conformance Statement Resource
  - Displays most common conformance errors
  - Download from [eCQI Resource Center](#)
- CY 2017 Receiving System Edits Document
  - Includes all program edits (1,000+) and HQR validation checks
  - Download from [QualityNet.org](#) and [eCQI Resource Center](#)

Questions? Contact the *QualityNet* Help Desk at [qnetsupport@hcqis.org](mailto:qnetsupport@hcqis.org); (866) 288-8912.



# Q: Resources for Deleting a Batch of QRDA Category I Files from *QualityNet*

**Q:** What if our hospital submitted a file in error and wants to delete a batch of QRDA Category I files?

**A:** Instructions regarding the EHR Batch/File deletion process are located in the HQR Online Help Manual and are available when logging into the *QualityNet Secure Portal*. Hospitals can also reference the succession management details (p. 5) within the 2017 CMS QRDA I IG to resubmit a batch of QRDA Category I files.

Questions? Contact the *QualityNet* Help Desk for additional guidance at [qnetsupport@hcqis.org](mailto:qnetsupport@hcqis.org); (866) 288-8912.

# Q: Educational Materials for EHR Incentive Program Attestation Activities via *QualityNet Secure Portal*

**Q:** We're preparing to attest for the EHR Incentive Program before the February 28, 2018 deadline. Were there any changes for CY 2017 and where can I find information?

**A:** CMS began communicating October 30, 2017, that beginning January 2, 2018, eligible hospitals (EHs) and critical access hospital (CAHs) attesting to CMS are required to submit 2017 meaningful use (MU) attestations through the *QualityNet Secure Portal*.

- Several documents are posted on the [CMS EHR Incentive Program Eligible Hospital Information](#) web page to assist with attestation activities, which include:
  - *QualityNet Secure Portal Enrollment and Login User Guide*
  - *QualityNet Secure Portal User Role Management Guide*
- Visit the CMS [EHR Incentive Programs](#) web page at CMS.gov for more details, webinar materials, etc.
- Submit questions to the *QualityNet* Help Desk at [qnetsupport@hcqis.org](mailto:qnetsupport@hcqis.org); (866) 288-8912

**NOTE:** Medicaid EHs should contact their [state Medicaid agencies](#) for specific information on how to attest.

# Q: Attestation Requirements – Objectives

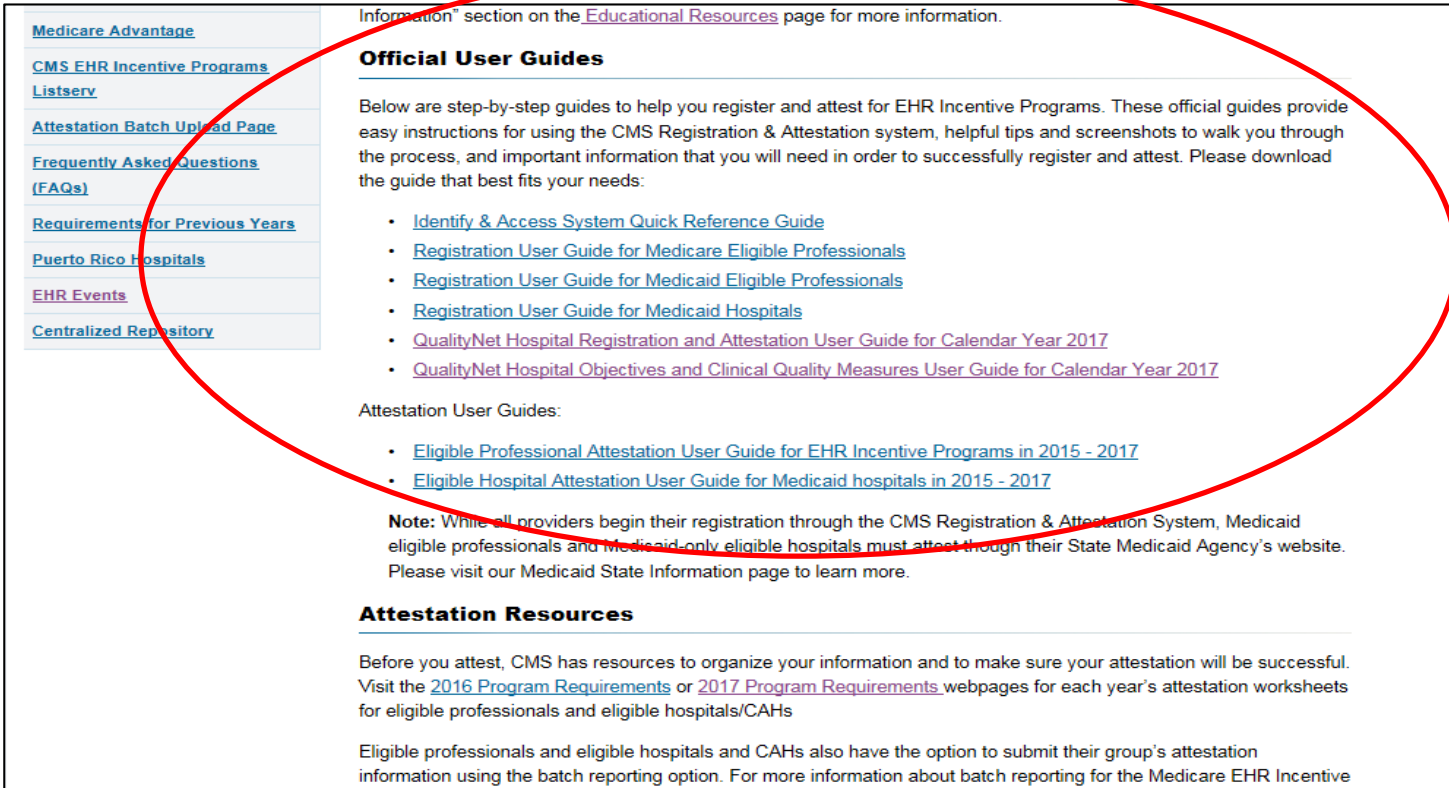
**Q:** Where can I locate information on the objectives and measures that have to be reported for attestation to the Medicare EHR Incentive Programs?

**A:** The CMS.gov EHR Incentive Program [Eligible Hospital Information](#) web page provides a user guide, [QualityNet Hospital Objectives and Clinical Quality Measures](#).

Questions? Contact the *QualityNet* Help Desk at [qnetsupport@hcqis.org](mailto:qnetsupport@hcqis.org); (866) 288-8912.

# EHR Incentive Program Attestation User Guides

User guides available on [CMS.gov](https://www.cms.gov)



Information<sup>1</sup> section on the [Educational Resources](#) page for more information.

**Official User Guides**

Below are step-by-step guides to help you register and attest for EHR Incentive Programs. These official guides provide easy instructions for using the CMS Registration & Attestation system, helpful tips and screenshots to walk you through the process, and important information that you will need in order to successfully register and attest. Please download the guide that best fits your needs:

- [Identify & Access System Quick Reference Guide](#)
- [Registration User Guide for Medicare Eligible Professionals](#)
- [Registration User Guide for Medicaid Eligible Professionals](#)
- [Registration User Guide for Medicaid Hospitals](#)
- [QualityNet Hospital Registration and Attestation User Guide for Calendar Year 2017](#)
- [QualityNet Hospital Objectives and Clinical Quality Measures User Guide for Calendar Year 2017](#)

Attestation User Guides:

- [Eligible Professional Attestation User Guide for EHR Incentive Programs in 2015 - 2017](#)
- [Eligible Hospital Attestation User Guide for Medicaid hospitals in 2015 - 2017](#)

**Note:** While all providers begin their registration through the CMS Registration & Attestation System, Medicaid eligible professionals and Medicaid-only eligible hospitals must attest through their State Medicaid Agency's website. Please visit our Medicaid State Information page to learn more.

**Attestation Resources**

Before you attest, CMS has resources to organize your information and to make sure your attestation will be successful. Visit the [2016 Program Requirements](#) or [2017 Program Requirements](#) webpages for each year's attestation worksheets for eligible professionals and eligible hospitals/CAHs

Eligible professionals and eligible hospitals and CAHs also have the option to submit their group's attestation information using the batch reporting option. For more information about batch reporting for the Medicare EHR Incentive

[Medicare Advantage](#)

[CMS EHR Incentive Programs Listserv](#)

[Attestation Batch Upload Page](#)

[Frequently Asked Questions \(FAQs\)](#)

[Requirements for Previous Years](#)

[Puerto Rico Hospitals](#)

[EHR Events](#)

[Centralized Repository](#)

# Q: Hospital Has Not Successfully Met eCQM Requirement

**Q:** Our Quality Director received a phone call and a targeted email that our hospital has not successfully submitted at least four eCQMs for one quarter of 2017 data. If all of our submitted files were accepted and none were rejected, why are we being contacted?

**A:** Even though the CMS data receiving system accepted the files with no rejections, when the measures were calculated, the files may have not met the IPP because the required diagnosis was not present in the QRDA Category I file. Once all files have been submitted, hospitals must run their eCQM Submission Status Report within the *QualityNet Secure Portal* to confirm eCQM requirements have been met.

Questions? Contact the *QualityNet* Help Desk at [qnetsupport@hcqis.org](mailto:qnetsupport@hcqis.org); (866) 288-8912.

# Q: Validation of CY 2017 eCQM Reporting for the FY 2020 Payment Determination

**Q:** We know CY 2017 eCQM data will be validated in spring 2018 for the fiscal year (FY) 2020 payment determination. What are the exclusion criteria?

**A:** Exclusion criteria are as follows:

- Hospitals chosen for chart-abstracted data validation  
CY 2017 **will not** be chosen for eCQM data validation.
- Any hospital that does not have at least five discharges for at least one reported eCQM
- Episodes of care that are longer than 120 days
- Cases with a zero denominator for each measure
- Hospitals with an **approved** eCQM Extraordinary Circumstances Exception (ECE) for the CY 2017 reporting period

**NOTE:** Criteria will be applied **before** the random selection of 200 hospitals for eCQM data validation, meaning the hospitals meeting any one of the aforementioned criteria are not eligible for selection.

# Q: Where to Find eCQM Data Validation Information

**Q:** Where can I locate more details regarding eCQM data validation of CY 2017 (FY 2020) data?

**A:** The [QualityNet.org](http://QualityNet.org) website has a page specific to eCQM data validation updates and information.

- A webinar on eCQM data validation is tentatively scheduled for June 2018.
- Questions regarding eCQM validation will be addressed by the Validation SC at [validation@hcqis.org](mailto:validation@hcqis.org) or via the *QualityNet* Hospital Inpatient Questions and Answers tool at <https://cms-ip.custhelp.com>.

CY 2017 eCQM Reporting Tips and Tools for the  
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## **Self-Directed Tools and Resources**



# Pre-Submission Validation Application (PSVA) Tool

- Allows submitters to locate and correct QRDA Category I file formatting errors prior to data submission to CMS

**NOTE:** The CMS data receiving system performs additional checks, including the Clinical Document Architecture (CDA) schema, submission-period dates, and authorization for a vendor to submit on a hospital's behalf.

- Serves as a voluntary tool (CMS recommends hospitals and vendors to test early and often)
- Installs on your system – PSVA downloadable from the Secure File Transfer in the *QualityNet Secure Portal*

Please contact the *QualityNet* Help Desk for additional information at [qnetsupport@hcqis.org](mailto:qnetsupport@hcqis.org); (866) 288-8912, 7 a.m. to 7 p.m. CT, Monday through Friday.

# eCQM Implementation Checklist

To review the pre-check and checklist activities:

<https://ecqi.healthit.gov/ecqm-implementation-checklist>

The screenshot shows a web browser window displaying the eCQI Resource Center website. The page title is "eCQM Implementation Checklist". The header includes the eCQI Resource Center logo and the CMS logo. The main content area contains the following text:

**eCQM Implementation Checklist**

The Centers for Medicare & Medicaid Services (CMS) requires an Eligible Professional (EP), Eligible Clinician, Eligible Hospital (EH) or Critical Access Hospital (CAH) to use the most current version of the eCQMs for quality reporting programs.

This checklist assumes that a health care practice/organization has determined which measures to report on. It provides the necessary technical steps health information technology (IT) developers, implementers and health care organizations must take to update their systems and processes with the eCQM Annual Update for the upcoming reporting and performance periods. The most recent eCQM Annual Update should be applied to your system for use in electronic quality reporting.

For a pdf of the Pre-Check and Checklist below, click [here](#).

**Pre-Check**

- › 1) Signup for a Unified Medical Language System (UMLS) account
- › 2) Signup for a JIRA account

There is a "Subscribe to space" button on the right side of the page.

# Test and Production QRDA Category I File Submission Checklists

Available on [QualityNet.org](http://QualityNet.org) and [QualityReportingCenter.com](http://QualityReportingCenter.com)

## CY 2017 Hospital Inpatient Quality Reporting (IQR) – Medicare Electronic Health Record (EHR) Alignment Preparation Checklist for eCQM Reporting – QRDA Category I Test File(s) Instructions

Due	Task	✓
NOW	<ul style="list-style-type: none"> <li><input type="checkbox"/> Select at least four (4) of the 15 available electronic clinical quality measures (eCQMs) for one self-selected quarter of CY 2017 data (Q1, Q2, Q3, or Q4).</li> <li><input type="checkbox"/> Confirm Health Information Technology (Health IT) is certified to the Office of the National Coordinator of Health IT (ONC) 2014 and/or 2015 Edition. Visit the <a href="#">CHPL Website</a> to ensure the Edition is certified to report the chosen eCQMs.</li> <li><input type="checkbox"/> Contact the <a href="#">QualityNet Help Desk</a> to obtain a QualityNet Secure Portal account and the EHR Data Upload Role.</li> <li><input type="checkbox"/> Confirm the Quality Reporting Document Architecture (QRDA) Category I file(s) are constructed per the <a href="#">2017 Centers for Medicare &amp; Medicaid Services (CMS) Implementation Guide (IG) (July 2016)</a> and the <a href="#">2017 CMS QRDA Category I Schematrons and Sample Files for Hospital Quality Reporting</a>. Use the most current <a href="#">eCQM specifications for CY 2017</a> located on the <a href="#">eCQI Resource Center</a>.</li> <li><input type="checkbox"/> Download the most recent version of the Pre-Submission Validation Application (PSVA) tool and the User Manual from the <a href="#">Secure File Transfer of the QualityNet Secure Portal</a> to validate the QRDA Category I file(s) for submission.</li> </ul> <p>NOTE: CMS is expecting one QRDA Category I file per patient, per quarter, which includes all episodes of care and applicable measure(s) associated with that reporting period. Maximum individual file size is 5 MB. A maximum of 15,000 files can be submitted per ZIP file.</p>	<input type="checkbox"/>
NOW Through 2/28/18 11:59 p.m. Pacific Time	<p>Submit Test File(s) either via the PSVA tool or directly to the <a href="#">QualityNet Secure Portal</a>. For questions, contact the <a href="#">QualityNet Help Desk</a>.</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> A. Use the PSVA tool (to validate the file structure only).               <ol style="list-style-type: none"> <li>1. Log into the PSVA tool using your QualityNet User ID and password.</li> <li>2. Select the Program [HQR_EHR_IQR] for dual program submission.</li> </ol> </li> </ul>	<input type="checkbox"/>

## CY 2017 Hospital Inpatient Quality Reporting (IQR) – Medicare Electronic Health Record (EHR) Alignment Preparation Checklist for eCQM Reporting – QRDA Category I Production File(s) Instructions

Due	Task	✓
NOW	<ul style="list-style-type: none"> <li><input type="checkbox"/> Select at least four (4) of the 15 available electronic clinical quality measures (eCQMs) for one self-selected quarter of 2017 data (Q1, Q2, Q3, or Q4).</li> <li><input type="checkbox"/> Confirm Health Information Technology (Health IT) is certified to the Office of the National Coordinator Health IT (ONC) 2014 and/or 2015 Edition. Visit the <a href="#">CHPL Website</a> to ensure the Edition is certified to report the chosen eCQMs.</li> <li><input type="checkbox"/> Contact the <a href="#">QualityNet Help Desk</a> to obtain a QualityNet Secure Portal account and the EHR Data Upload Role.</li> <li><input type="checkbox"/> Confirm Quality Reporting Document Architecture (QRDA) Category I file(s) are constructed per the <a href="#">2017 Centers for Medicare &amp; Medicaid Services (CMS) Implementation Guide (IG) (July 2016)</a> and the <a href="#">2017 CMS QRDA Category I Schematrons and Sample Files for Hospital Quality Reporting</a>. Use the most current <a href="#">eCQM specifications for CY 2017</a> located on the <a href="#">eCQI Resource Center</a>.</li> <li><input type="checkbox"/> Download the most recent version of the Pre-Submission Validation Application (PSVA) tool and the User Manual from the <a href="#">Secure File Transfer of the QualityNet Secure Portal</a> to validate the QRDA Category I file(s) for submission.</li> </ul> <p>NOTE: CMS is expecting one QRDA Category I file per patient, per quarter, which includes all episodes of care and applicable measure(s) associated with that reporting period. Maximum individual file size is 5 MB. A maximum of 15,000 files can be submitted per ZIP file.</p>	<input type="checkbox"/>
NOW Through 2/28/18 11:59 p.m. Pacific	<p>Submit Production File(s) either via the PSVA tool or directly to the <a href="#">QualityNet Secure Portal</a>. For questions, contact the <a href="#">QualityNet Help Desk</a>.</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> A. Use the PSVA tool (to validate the file structure only).               <ol style="list-style-type: none"> <li>1. Log into the PSVA tool using your QualityNet User ID and password.</li> <li>2. Select the Program [HQR_EHR_IQR] for dual program submission.</li> </ol> </li> </ul>	<input type="checkbox"/>

# JIRA: QRDA and eCQM Issue Trackers

<https://oncprojecttracking.healthit.gov/support/secure/Dashboard.jspa>

## QRDA Issue Tracker

The QRDA Issue Tracker is a tool for:

- Tracking and providing feedback on the CMS QRDA IIGs, sample files, and schematrons
- Users to enter issues/questions related to the CMS QRDA to be answered by an expert

## eCQM Issue Tracker

The eCQM Issue Tracker is a tool for:

- Tracking and providing feedback on eCQMs
- Users to enter issues/questions related to eCQMs to be answered by an expert

**NOTE:** Users can search all previously entered issues for responses within each JIRA Issue Tracker.

CY 2017 eCQM Reporting Tips and Tools for the  
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## **Appendix**

# Hospital IQR Program – CY 2017 eCQM Reporting Requirements

Hospitals participating in the Hospital IQR Program:

- Report on **four** of the 15 available eCQMs
- Report **one** self-selected calendar quarter in CY 2017 (Q1, Q2, Q3, or Q4)
- Submission deadline: February 28, 2018

**NOTE:** Meeting the Hospital IQR Program eCQM requirement also satisfies the CQM electronic reporting requirement for the Medicare EHR Incentive Program for EHs and CAHs.

# EHR Incentive Programs – CY 2017

## CQM Electronic Reporting Requirements

EHRs and CAHs reporting **electronically** and either:

- Only participating in the EHR Incentive Program
- **OR** -
- Participating in both the Hospital IQR Program and the EHR Incentive Program
  - Report on **at least four** (self-selected) of the available CQMs
  - Report **one** self-selected quarter of CQM data in CY 2017
  - Medicare EHR Incentive Program: submission deadline remains **February 28, 2018**

**NOTE:** CQM requirement fulfillment for the EHR Incentive Program also satisfies the eCQM reporting requirement for the Hospital IQR Program for all measures **except outpatient measure ED-3, National Quality Forum (NQF) #0496.**

# EHR Incentive Programs – CY 2017

## CQM Reporting via Attestation

Attestation option for EHRs and CAHs participating in the Medicare EHR Incentive Program only:

- Any continuous **90-day period** within CY 2017 if demonstrating MU for the first time in 2017
- Full CY 2017, consisting of **four quarterly** data reporting periods, if demonstrated MU in any year prior to 2017
- Report on all **16** available CQMs via the *QualityNet Secure Portal*
- Submission deadline: **February 28, 2018**



# CY 2017 Certification and Specification Policies

## Technical Requirements

- Use EHR technology certified to the 2014 Edition, 2015 Edition, or combination (Office of the National Coordinator for Health Information Technology [ONC] standards)
- Use eCQM specifications published in the 2016 eCQM annual update for CY 2017 reporting and applicable addenda, available on the eCQI Resource Center website at <https://ecqi.healthit.gov/eh>
- Use the 2017 CMS QRDA I IG, available at <https://ecqi.healthit.gov/qrda>

# Defining Successful eCQM Submission for CY 2017 eCQM Reporting

To successfully submit the required eCQMs based on program year for the Hospital IQR and the Medicare EHR Incentive Programs, report them as any combination of the following:

- Accepted QRDA Category I files with patients meeting the IPP of the applicable measures
- Zero denominator declarations
- Case threshold exemptions

# Defining Successful eCQM Submission for CY 2017 eCQM Reporting – Additional Details

Submission of eCQMs does **not** meet the complete program requirements for the Hospital IQR or the EHR Incentive Programs.

- **Hospital IQR Program:** Hospitals are still responsible for data submission for all required chart-abstracted, web-based, structural, and claims-based measures. For questions regarding the Hospital IQR Program, please contact the IQR SC at (844) 472-4477, (866) 800-8765, or <https://cms-ip.custhelp.com>.
- **EHR Incentive Programs:** For questions regarding the complete program requirements for the EHR Incentive Program, contact the *QualityNet* Help Desk at [qnetsupport@hcqis.org](mailto:qnetsupport@hcqis.org); (866) 288-8912 or submit questions to [ehrinquiries@cms.hhs.gov](mailto:ehrinquiries@cms.hhs.gov).

# CY 2017 QRDA Category I File Format Expectations

- One file, per patient, per quarter
- Should include all the episodes of care and the measures associated with the patient file in that reporting period
- Maximum individual file size of 5 MB
- Files uploaded by ZIP file (.zip)
- Maximum submission of 15,000 files per ZIP file (If a hospital has more than 15,000 patient files per quarter, hospitals can submit additional ZIP files.)

CY 2017 eCQM Reporting Tips and Tools for the  
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## **Questions**

CY 2017 eCQM Reporting Tips and Tools for the  
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## **Continuing Education**

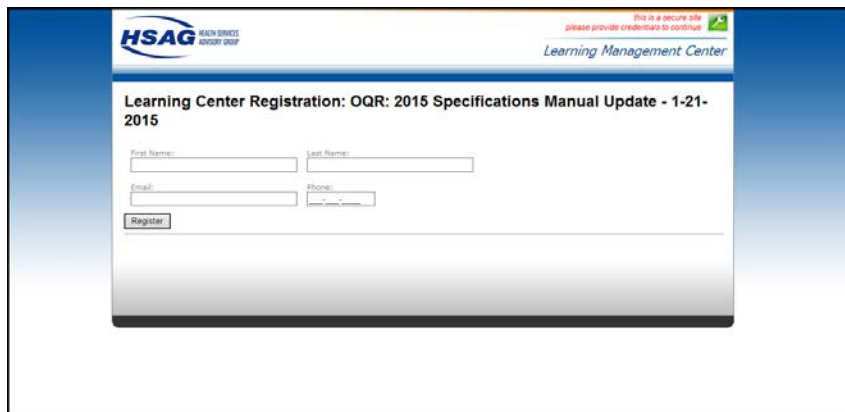
# Continuing Education

- This event has been approved for 1.0 continuing education (CE) unit by the California Board of Registered Nursing (Provider #16578).
- Report your credit to your own board.
- Complete the survey and register for credit.
- Registration is automatic and instantaneous.

# Register for Credit

## New User

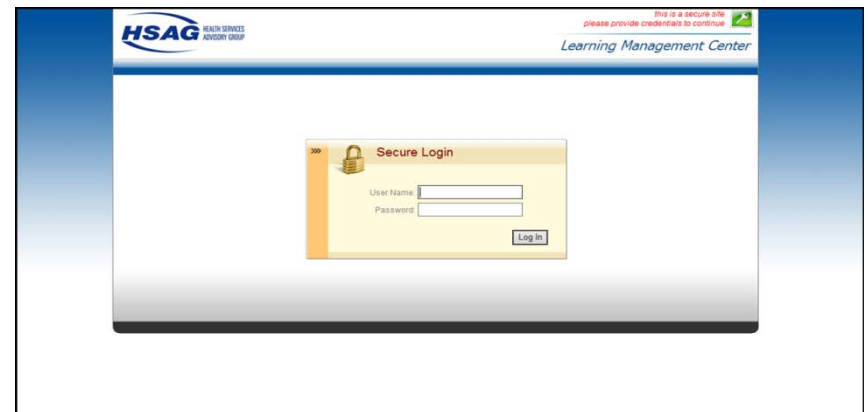
Use personal email and phone.  
Go to email address; finish  
process.



The screenshot shows the registration page for a new user. The page header includes the HSAG logo (Health Services Advisory Group) and the text "Learning Management Center". A security notice at the top right reads "This is a secure site please provide credentials to continue". The main content area is titled "Learning Center Registration: OQR: 2015 Specifications Manual Update - 1-21-2015". Below the title, there are four input fields: "First Name:", "Last Name:", "Email:", and "Phone:". A "Register" button is located at the bottom left of the form area.

## Existing User

Entire email is your user name.  
You can reset your password.



The screenshot shows the secure login page for an existing user. The page header includes the HSAG logo and the text "Learning Management Center". A security notice at the top right reads "This is a secure site please provide credentials to continue". The main content area features a "Secure Login" box with a lock icon. Inside the box, there are two input fields: "User Name:" and "Password:". A "Log In" button is located at the bottom right of the login box.



# 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.

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