

Welcome!

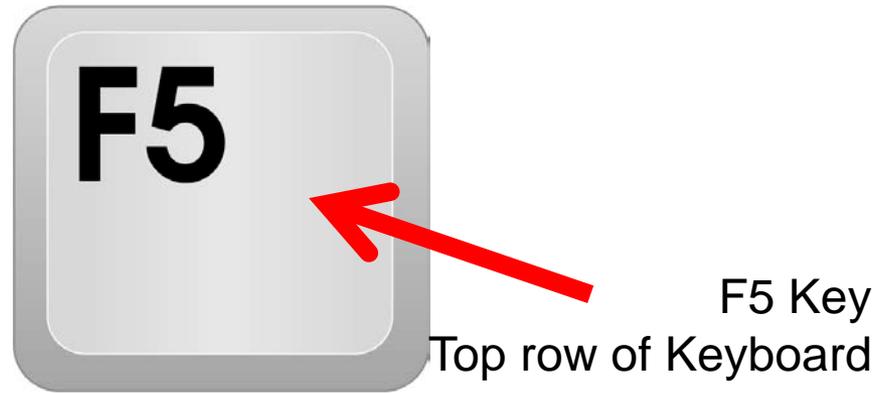
- **Audio for this event is available via ReadyTalk® Internet Streaming.**
- **No telephone line is required.**
- **Computer speakers or headphones are necessary to listen to streaming audio.**
- **Limited dial-in lines are available. Please send a chat message if needed.**
- **This event is being recorded.**



Troubleshooting Audio

Audio from computer speakers breaking up?
Audio suddenly stop?

- Click Refresh icon –
or-
Click F5

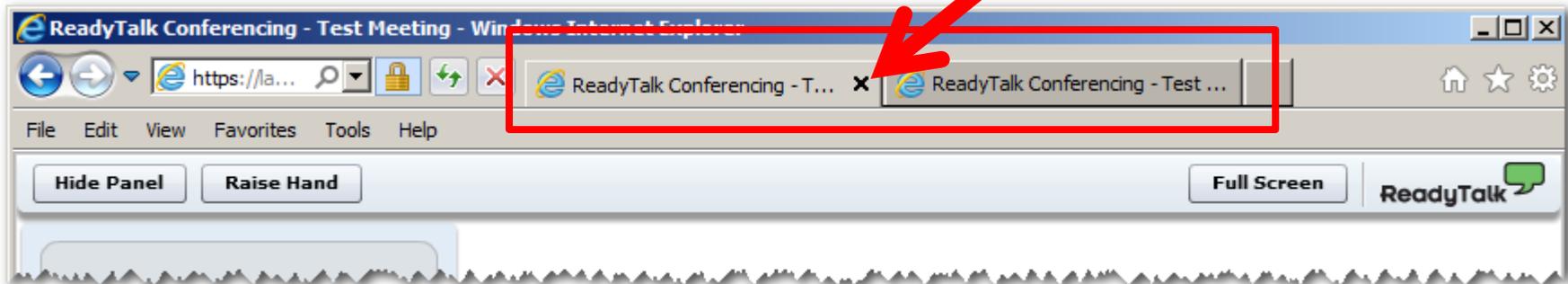


Location of Buttons

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 up.



Example of Two Browsers Tabs open in Same Event

Submitting Questions

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



A screenshot of a web browser window showing a CMS event interface. The window title bar includes "Hide Chat", "Raise Hand", "Full Screen", and "ReadyToGo". The main content area features the CMS logo (CENTERS FOR MEDICARE & MEDICAID SERVICES) and the text "Welcome to Today's Event". Below this, a message reads "Thank you for joining us today! Our event will start shortly." In the bottom-left corner, there is a "Chat with Presenter" section with a text input field containing "Type questions here." and a "Send" button.



Preparation Checklist for CY 2016 eCQM Reporting

Artrina Sturges, EdD

*Team Lead, Inpatient Quality Reporting (IQR) / Electronic Health Record (EHR) Alignment
Hospital Inpatient Value, Incentives, and Quality Reporting (VIQR)
Outreach and Education Support Contractor (SC)*

June 9, 2016

Purpose

This presentation outlines a preparation checklist to assist eligible hospitals (EHs) and their vendors as they institute activities for the Calendar Year (CY) 2016 electronic Clinical Quality Measure (eCQM) Reporting requirements for the IQR Program and the Medicare EHR Incentive Program.

The checklist outlines reporting requirements, identifies required specifications, and suggests activities to perform and resources to review before the submission of Quality Reporting Document Architecture (QRDA) – I test files.

The Receiving System is now open and ready to receive test files.

Objectives

At the close of this presentation, participants will be able to:

- Recognize the CY 2016 eCQM Reporting Requirements
- Perform actions outlined in the preparation checklist
- Locate and utilize resources to support mandatory eCQM reporting activities for CY 2016
- Upload QRDA-I test files to the CMS eCQM Receiving System

Preparation Checklist

CY 2016 Inpatient Quality Reporting (IQR) – Electronic Health Record (EHR) Alignment Preparation Checklist for eCQM Reporting – QRDA-I File Testing Instructions

Due	Task	✓
NOW	<ul style="list-style-type: none"> <li data-bbox="272 554 1161 596"><input type="checkbox"/> Select at least four eCQMs from the available 28 eCQMs List. <li data-bbox="272 611 1702 743"><input type="checkbox"/> Confirm EHR System is certified to either 2014 or 2015 Office of the National Coordinator for Health Information Technology (ONC) Standards on the Certified Health IT Product List – CHPL Website and review which measures the system is certified to report. <li data-bbox="272 758 1702 843"><input type="checkbox"/> Contact the QualityNet Help Desk and obtain a <i>QualityNet Secure Portal (QSP)</i> account and the EHR Data Upload Role. <li data-bbox="272 858 1740 991"><input type="checkbox"/> Confirm QRDA -Category I files are constructed per the 2016 Centers for Medicare & Medicaid Services (CMS) Implementation Guide (IG) and 2016 CMS QRDA IG Appendix and Schematrons, and use the eCQM Specifications for Eligible Hospitals Update June 2015 on the eCQM Library page. <li data-bbox="272 1005 1740 1138"><input type="checkbox"/> Download the Pre-Submission Validation Application (PSVA) version 1.1.2 and the User Guide from the Secure File Transfer (SFT) of the QSP to validate the certified electronic health record technology (CEHRT)-generated QRDA – I files for test submission. 	<input type="checkbox"/>

Preparation Checklist for CY 2016 eCQM Reporting

Brief eCQM Overview and Reporting Requirements

Electronically-Specified Clinical Quality Measure

- Clinical Quality Measures (CQMs) are able to be reported from an EHR due to the development of e-specifications for each CQM.
- E-specifications include data elements, logic, and definitions for that measure in a Health Level Seven (HL7) standard known as the Health Quality Measures Format (HQMF).
- HQMF represents a CQM as an electronic Extensible Markup Language (XML) document that can be captured or stored in the EHR so that the data can be sent or shared electronically.

www.CMS.gov

CY 2016 eCQMs for IQR and Medicare EHR Incentive Program Reporting (1 of 4)

<p>ED-1 CMS55v4 <i>Median Time from ED Arrival to ED Departure for Admitted ED Patients</i></p>	<p>ED-2 CMS111v4 <i>Admit Decision Time to ED Departure Time for Admitted Patients</i></p>
<p>ED-3* CMS32v5 <i>Median Time from ED Arrival to ED Departure for Discharged ED Patients</i></p>	<p>STK-2 CMS104v4 <i>Discharged on Antithrombotic Therapy</i></p>
<p>STK-3 CMS71v5 <i>Anticoagulation Therapy for Atrial Fibrillation/Flutter</i></p>	<p>STK-4 CMS91v5 <i>Thrombolytic Therapy</i></p>
<p>STK-5 CMS72v4 <i>Antithrombotic Therapy by the End of Hospital Day Two</i></p>	<p>STK-6 CMS105v4 <i>Discharged on Statin Medication</i></p>

*ED-3 is an outpatient measure and not applicable for IQR

CY 2016 eCQMs for IQR and Medicare EHR Incentive Program Reporting (2 of 4)

STK-8
CMS107v4
Stroke Education

STK-10
CMS102v4
Assessed for Rehabilitation

AMI-2
CMS100v4
Aspirin Prescribed at Discharge for AMI

AMI-7a
CMS60v4
*Fibrinolytic Therapy Received Within
30 Minutes of Hospital Arrival*

AMI-8a
CMS53v4
*Primary PCI Received Within
90 Minutes of Hospital Arrival*

AMI-10
CMS30v5
Statin Prescribed at Discharge

VTE-1
CMS108v4
Venous Thromboembolism Prophylaxis

VTE-2
CMS190v4
*Intensive Care Unit Venous
Thromboembolism Prophylaxis*

CY 2016 eCQMs for IQR and Medicare EHR Incentive Program Reporting (3 of 4)

<p>VTE-3 CMS73v4 <i>Venous Thromboembolism Patients with Anticoagulation Overlap Therapy</i></p>	<p>VTE-4 CMS109v4 <i>Venous Thromboembolism Patients Receiving Unfractionated Heparin with Dosages/Platelet Count Monitoring by Protocol (or Nomogram)</i></p>
<p>VTE-5 CMS110v4 <i>Venous Thromboembolism Discharge Instructions</i></p>	<p>VTE-6 CMS114v4 <i>Incidence of Potentially Preventable Venous Thromboembolism</i></p>
<p>PC-01 CMS113v4 <i>Elective Delivery</i></p>	<p>PC-05 CMS9v4 <i>Exclusive Breast Milk Feeding</i></p>
<p>CAC-3 CMS26v3 <i>Home Management Plan of Care Document Given to Patient/Caregiver</i></p>	<p>SCIP-INF-1 CMS171v5 <i>Prophylactic Antibiotic Received Within One Hour Prior to Surgical Incision</i></p>

CY 2016 eCQMs for IQR and Medicare EHR Incentive Program Reporting (4 of 4)

SCIP-INF-2

CMS172v5

Prophylactic Antibiotic Selection for Surgical Patients

SCIP-INF-9

CMS178v5

Urinary Catheter Removed on Postoperative Day 1 or Postoperative Day 2 with Day of Surgery Being Day Zero

EHDI_1a

CMS31v4

Hearing Screening Prior to Hospital Discharge

HTN

CMS185v4

Healthy Term Newborn

PN-6

CMS188v5

Initial Antibiotic Selection for Community-Acquired Pneumonia in Immunocompetent Patients

eCQM Reporting Requirements

For CY 2016 IQR Program reporting, a hospital will be required to:

- Report a minimum of four of the 28 available eCQMs
- Report for **at least** one quarter (three or four) of CY 2016
- Submit between October 2016 and February 2017
 - All data must be submitted **February 28, 2017 by 11:59 PM PT**

Important Notes:

- CY 2016 reporting will apply to FY 2018 payment determinations for IPPS hospitals
- National Quality Strategy Domain distribution will not be required
- Critical Access Hospitals (CAHs) are **encouraged, but** not required, to participate in IQR reporting activities
- The Intent to Submit Screen does not need to be completed
- IQR eCQM requirement fulfillment also satisfies the eCQM reporting option requirement for the Medicare EHR Incentive Program

Defining Successful eCQM Submission for CY 2016

To successfully submit the four or more required eCQMs, report them as any combination of:

- Accepted QRDA – I files with patients meeting the Initial Patient Population (IPP) of the applicable measures
- Zero denominator declarations
- Case threshold exemptions

Remember:

- CY 2016 data should be from either quarter three or four
- Submission Deadline is February 28, 2017
- Submission of eCQMs does **not** meet the complete program requirements for the *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 IQR Program, please, contact the IQR Support Contractor at 844.472.4477, 866.800.8765, or <https://cms-ip.custhelp.com>.
- For questions regarding the complete program requirements for the *EHR Incentive Program*, please contact the EHR Information Center at 888.734.6433.

QRDA – I File Format Expectations

CMS is expecting:

- One file, per patient, per quarter
- That the file will include all the episodes of care and the measures associated with the patient file
- Maximum individual file size of 5 MB
- Maximum submission of 15,000 files
- Files uploaded by Zip file (.zip)

Zero Denominator Declaration Clarification

For the EHR Incentive and Hospital IQR Programs:

- A Zero Denominator can be used when both:
 - A hospital's EHR system is certified for an eCQM
 - A hospital does not have patients that meet the denominator criteria of that CQM
- A Zero Denominator submission counts as successful for that eCQM for both the Medicare EHR Incentive Program (Meaningful Use [MU]) and the Hospital IQR program
- Zero Denominator Declarations are entered on the Denominator Declaration screen within the *QualityNet Secure Portal (QSP)*

Case Threshold Exemption Clarification

For the EHR Incentive and Hospital IQR Programs:

- The Case Threshold Exemption can be used when both:
 - A hospital's EHR system is certified to report data
 - Five or fewer discharges have occurred during the relevant EHR reporting quarter
- An eCQM counts toward meeting the program requirement, if the EH or CAH qualifies for an exemption for that eCQM
- Hospitals do **NOT** have to utilize the Case Threshold Exemption; they can submit applicable QRDA - I files, if they choose
- Case Threshold Exemptions are entered on the Denominator Declaration screen within the *QSP*

Submission Methods for the Medicare EHR Incentive Program

Option 1: Electronic data submission of at least four eCQMs through the *QSP* as QRDA-I Files

- Satisfies the CQM Medicare EHR Incentive Program (MU) requirement
- Aligns with IQR Program requirements

Option 2: Aggregate reporting of 16 eCQMs for a full year through the CMS Registration and Attestation System

- Is available for facilities that do not participate in the Hospital IQR Program
- Satisfies the CQM requirement of the Medicare EHR Incentive Program (MU)
- Will not meet Hospital IQR Program requirements

Denominator Declaration Data Entry Screen

eCQM	Domain	Zero Denominator **	Case Threshold Exemption ***
AMI-2	Clinical Process/Effectiveness	<input type="checkbox"/>	
AMI-7a	Clinical Process/Effectiveness	<input type="checkbox"/>	
AMI-8a	Clinical Process/Effectiveness	<input type="checkbox"/>	
AMI-10	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"/>	
HTN	Patient Safety	<input type="checkbox"/>	
PC-01	Clinical Process/Effectiveness	<input type="checkbox"/>	
PC-05	Clinical Process/Effectiveness	<input type="checkbox"/>	
PN-6	Efficient Use of Healthcare Resources	<input type="checkbox"/>	
SCIP-INF-1	Patient Safety	<input type="checkbox"/>	
SCIP-INF-2	Efficient Use of Healthcare Resources	<input type="checkbox"/>	

eCQM	Domain	Zero Denominator **	Case Threshold Exemption ***
SCIP-INF-9	Patient Safety	<input type="checkbox"/>	
STK-2	Clinical Process/Effectiveness	<input type="checkbox"/>	
STK-3	Clinical Process/Effectiveness	<input type="checkbox"/>	
STK-4	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"/>	
VTE-3	Clinical Process/Effectiveness	<input type="checkbox"/>	
VTE-4	Clinical Process/Effectiveness	<input type="checkbox"/>	
VTE-5	Patient and Family Engagement	<input type="checkbox"/>	
VTE-6	Patient Safety	<input type="checkbox"/>	

Submission Methods for the Medicare EHR Incentive Program

NOTE: All other EHR Incentive Program requirements, including core and menu set measures, will need to be reported through attestation for complete program fulfillment.

Refer to the 2016 Program Requirements page of the CMS website at <https://www.cms.gov/Regulations-and-Guidance/Legislation/EHRIncentivePrograms/2016ProgramRequirements.html> for a complete program requirement listing.

Hospitals, who are also eligible to participate in the Medicaid EHR Incentive Program will need to refer to their State Program requirements.

Preparation Checklist for CY 2016 eCQM Reporting

Preparation

IQR and EHR Incentive Program-Related eCQM Presentations

- **September 2, 2015:** *eCQM: FY 2016 IPPS/LTCH Final Rule*
- **December 17, 2015:** *2016 CMS QRDA Implementation Guide Changes for Eligible Hospitals/Critical Access Hospitals*
- **January 20, 2016:** *Pre-Submission Validation Application Overview for eCQM Data Submission in 2016*
- **February 16, 2016:** *eCQM CY 2016: Aligning Hospital IQR and EHR Incentive Programs through eCQMs*
- **March 10, 2016:** *PSVA Demonstration and eCQM Q&A Session*
- **April 14, 2016:** *QRDA-I File Creation for CY 2016 eCQM Reporting*

NOTE: All Archived and Future Presentation notifications are posted on the Quality Reporting Center – Inpatient Tab>Other Programs>eCQM
<http://www.qualityreportingcenter.com/>

Quality Reporting Center

www.qualityreportingcenter.com



HOME

EVENTS CALENDAR

INPATIENT >

OUTPATIENT >

ASC >

EDUCATION >

QIN-QIO >

[Log In](#) to Access QIO Section

Change Text Size: [A](#) [A](#)

Search...

Search

Welcome to the Hospital Inpatient and Outpatient Quality Reporting Outreach and Education Support Programs. Here you will find resources to assist hospitals, inpatient psychiatric facilities, PPS-exempt cancer hospitals, and ambulatory surgical centers with quality data reporting. Through these sites, you can access:

- Reference and training materials
- Educational presentations
- Timelines and calendars
- Data collection tools
- Contact information
- Helpful links to resources
- Question and answer tools

The national Support Contractor for the Hospital Inpatient Value, Incentives, and Quality Reporting (VQR), Outpatient Quality Reporting (OQR) Outreach and Education Support Programs, is dedicated to improving quality care delivery and health outcomes by collaborating with healthcare providers.

Upcoming Events

March 24, 2016
[Development and Selection of Quality Metrics for the PCHQR - 1 C.E.](#)

March 28, 2016
[Annual Requirements: DACA, HCP, Structural Measures, and QualityNet SA](#)

April 20, 2016
[OQR: Hospital OQR Imaging Efficiency Measures - 1 C.E.](#)

[See the full calendar](#)

eCQI Resource Center

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

The screenshot displays the eCQI Resource Center website. At the top left, the logo reads "eCQI Resource Center" with the tagline "The one-stop shop for the most current resources to support electronic clinical quality improvement." To the right is the CMS logo, "The Office of the National Coordinator for Health Information Technology". Navigation links for "About", "FAQ", "Glossary", and "Contact" are visible. A search bar and a "Login" button are also present. The main heading is "About", followed by "About the eCQI Resource Center". The text describes the collaboration between CMS and the ONC to improve healthcare through a patient-centered system. It mentions that the center provides a centralized location for news, information, tools, and standards related to eCQI and eCQMs. A link to "view frequently asked questions" is provided. Below this is a section titled "Interest Areas" with four cards: "eCQM" (Electronic Clinical Quality Measures), "QDM" (The Quality Data Model Standard), "eCQM Tools" (Authoring, Testing and Implementation Tools), and "eCQI Standards" (Electronic Clinical Quality Improvement Standards). Each card has a "Learn more" button.

- Resources for use at various stages of electronic clinical quality improvement (eCQI)
- Information about standards and tools to support eCQI
- Links to external resources related to eCQMs and data reporting:
 - ONC JIRA issue trackers
 - Measure Authoring Tool (MAT)
 - Value Set Authority Center (VSAC)
 - National Quality Strategy resources

Obtain EHR Data Upload Role for eCQM Data Submissions

- Hospitals may submit their own QRDA-I files by:
 - Registering for a *QualityNet* account (new users only)
 - Requesting the EHR Data Upload Role from the *QualityNet* Help Desk
- Certified EHR vendors who have been authorized by a hospital to submit data must:
 - Register for a *QualityNet* account
 - Request the EHR Data Upload role
- Hospitals must authorize a vendor to submit on their behalf by:
 - Logging in to the *QSP*
 - Authorizing by measure set, data transmission start/end date, or discharge quarter start/end date

Note: For assistance, please contact the *QualityNet* Help Desk at qnetsupport@hcqis.org or by calling 1.866.288.8912.

Confirm Using Certified EHR Technology (CEHRT)

- CMS does not provide a list of approved vendors.
- Hospitals must ensure that their EHR technology is certified to the 2014 or 2015 Office of the National Coordinator (ONC) Health Information Technology (HIT) Standards for electronic reporting of CQMs.
- Visit the Certified Health IT Product List (CHPL) website located at: <http://oncchpl.force.com/ehrcert>.

CY 2016 eCQM Reporting Specifications

EHs and CAHs seeking to report eCQMs must use:

- The *June 2015 Update for eReporting for the 2016 Reporting Year* version of the electronic specifications for the CQMs
- The *2016 Centers for Medicare & Medicaid Services (CMS) Quality Reporting Data Architecture (QRDA) Implementation Guide for Eligible Professionals and Hospital Quality Reporting and Appendix*, published in February 2016

NOTE: Participation in the Hospital IQR Program is **voluntary for CAHs**. CAHS are encouraged but are not required to submit eCQMs for the IQR Program.

eCQM Reporting Standards Documentation and QRDA file specifications are on the eCQM Library page at: https://www.cms.gov/regulations-and-guidance/legislation/ehrincentiveprograms/ecqm_library.html

eCQM Library

https://www.cms.gov/regulations-and-guidance/legislation/ehrincentiveprograms/ecqm_library.html

Home | About CMS | Newsroom | FAQs | Archive | Share Help Print

Learn about [your healthcare options](#) Search

Medicare Medicaid/CHIP Medicare-Medicaid Coordination Private Insurance Innovation Center **Regulations & Guidance** Research, Statistics, Data & Systems Outreach & Education

Home > Regulations and Guidance > EHR Incentive Programs > eCQM Library

EHR Incentive Programs

- [2015 Program Requirements](#)
- [2016 Program Requirements](#)
- [2017 Program Requirements](#)
- [Educational Resources](#)
- [Payment Adjustments & Hardship Information](#)
- [Registration & Attestation](#)
- [Data and Program Reports](#)
- [Participating in EHR?](#)
- [Medicare and Medicaid EHR Incentive Program Basics](#)
- [Clinical Quality Measures Basics](#)

eCQM Library

Announcement

CMS & ONC Release Request for Information: Certification Frequency and Requirements for the Reporting of Quality Measures under CMS Programs

The Centers for Medicare and Medicaid Services (CMS), in conjunction with the Office of the National Coordinator (ONC), published the *Request for Information: Certification Frequency and Requirements for the Reporting of Quality Measures under CMS Programs*. It can be found on the [Federal Register](#). The RFI displayed in the Federal Register on December 30, 2015, and will publish on December 31, 2015.

As outlined in the RFI, CMS and ONC seek public comment on several items related to the certification of health information technology (IT), including Electronic health record (EHR) products used for reporting to the:

- EHR Incentive Programs; and
- Certain CMS quality reporting programs such as, but not limited to, the Hospital Inpatient Quality Reporting (IQR) Program and the Physician Quality Reporting System (PQRS).

CMS and ONC request feedback on how often to require recertification, the number of CQMs a certified Health IT Module should be required to certify to and ways to improve testing of certified Health IT Module(s). The feedback will inform CMS and ONC of elements that may need to be considered for future rules relating to the reporting of quality measures under CMS programs. This request for information is part of the effort of CMS to streamline/reduce Eligible Professional (EP), eligible hospital, critical access hospital (CAH), and health IT developer burden around government requirements.

eCQM Library

- [2013 Clinical Quality Measures](#)
- [2014 Clinical Quality Measures](#)
- [2015 CQM Reporting Options](#)
- [Certified FHR Technology](#)

The eCQM Library contains:

- eCQM specifications for Eligible Providers (EPs) and EHs
- CMS QRDA Implementation Guides
- Additional resources, such as a Guide to Reading eCQMs

Use the PSVA to Test QRDA File Structure

The Pre-submission Validation Application (PSVA):

- Is a downloadable tool that operates on a user's system
- Allows submitters to catch and correct QRDA formatting errors prior to data submission to CMS
- Provides validation feedback within the submitter's system
- Is now available as version 1.1.2
- Is recommended, not required

Accessing the PSVA Tool

To access the PSVA Tool:

- Download it from the Secure File Transfer in the QSP
- Install it on your system

NOTE: To submit files, you or your vendor will require a QSP User Account with an EHR Data Upload role

NOTE: For assistance with the PSVA tool, user accounts, or roles, please contact the *QualityNet* Help Desk at qnetsupport@hcqis.org or 866.288.8912, 7 a.m.–7 p.m. Central Time, Monday through Friday

Preparation Checklist: Test File Submission to PSVA

- Checklist outlines steps for downloading the PSVA tool and submitting Test QRDA-I files to the CMS Receiving System
- Users who prefer visuals for this process, please obtain archived presentation materials on PSVA from January 20 and March 10, 2016, available on the *Quality Reporting Center* <http://www.qualityreportingcenter.com/>

NOTE: Test files will not be reviewed by CMS or utilized to determine if program requirements have been met.

Hospital eCQM Receiving System: Submitting Test Files

Submission of test files to the QSP allows users to:

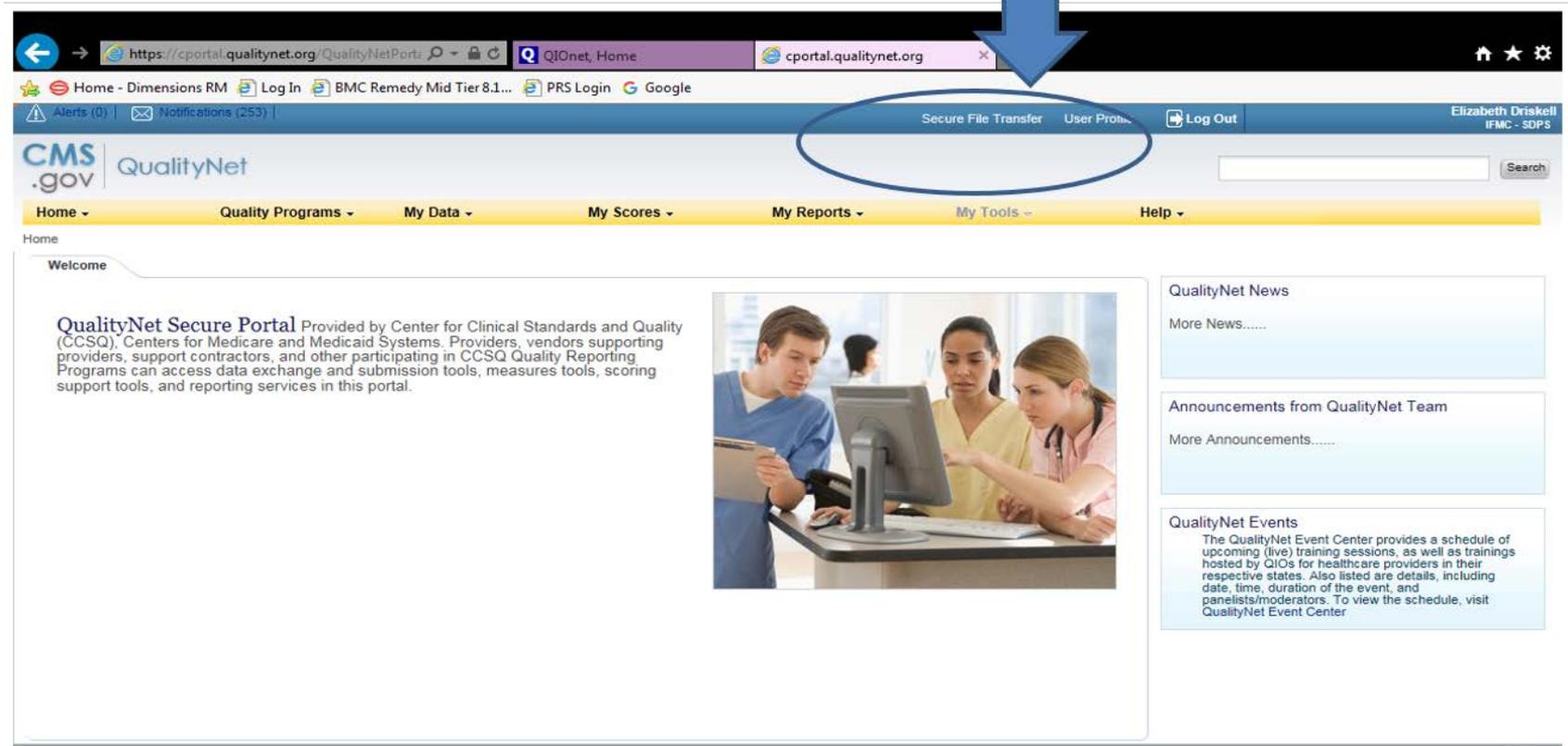
- Test QRDA Category I file submissions and validate against 2016 CMS QRDA constraints
- Validate file structure against the CMS receiving system
- Identify errors, allowing for corrections prior to production data file submission

NOTE:

- Receiving system functionality to accept test files is **available now**
- Test file submissions **do not count** toward program requirements
- In December 2015, CMS hosted a webinar entitled *2016 CMS Implementation Guide Changes for Eligible Hospitals/Critical Access Hospitals*. The presentation provided an overview of the QRDA I standard updates and changes necessary for successful reporting in CY 2016. A recording of this webinar can be found at <http://www.qualityreportingcenter.com/inpatient/ecqm-archived-events/>.

Submitting a Test QRDA File (1 of 6)

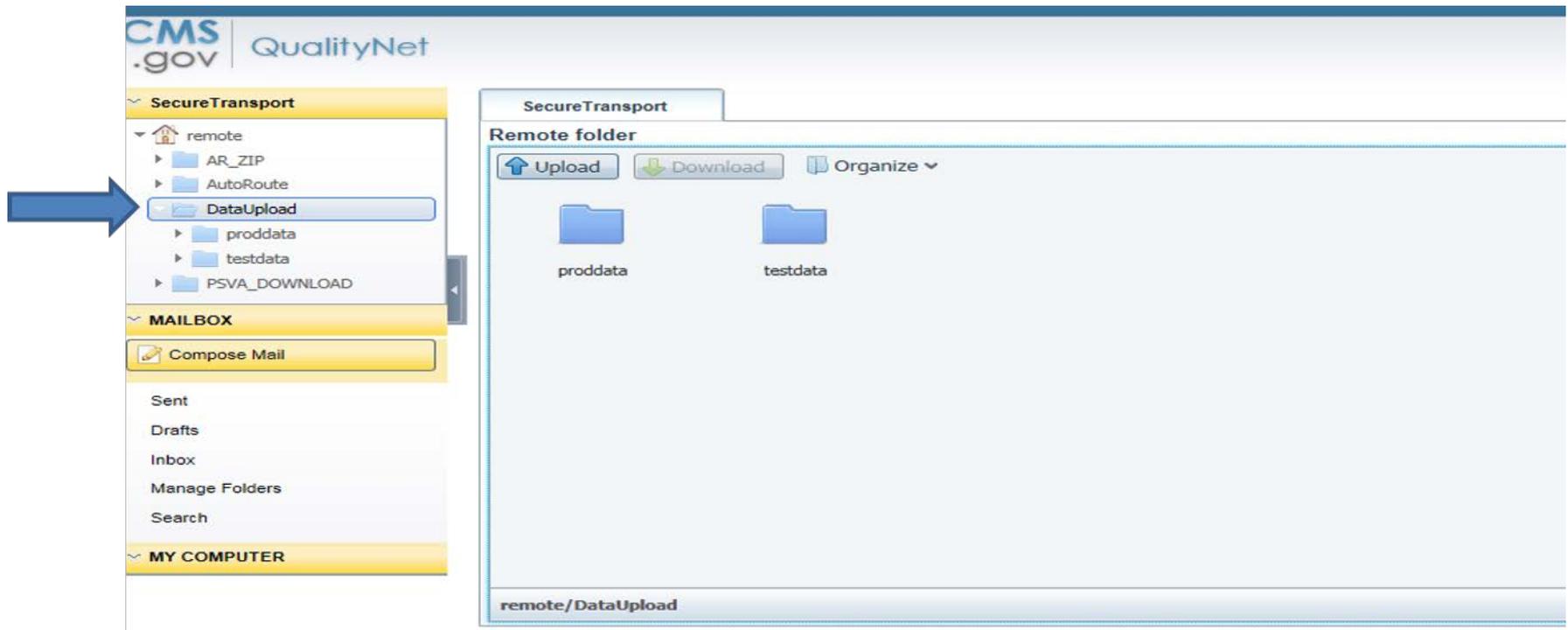
1. Log into **QSP**
2. Select **[Secure File Transfer]**



The screenshot displays the QualityNet Secure Portal interface. At the top, the browser address bar shows the URL <https://cportal.qualitynet.org/QualityNetPortal>. The page header includes the CMS.gov logo and the QualityNet logo. A navigation menu is visible with links for Home, Quality Programs, My Data, My Scores, My Reports, My Tools, and Help. The main content area features a 'Welcome' message and a 'QualityNet Secure Portal' section. A blue arrow points to the 'Secure File Transfer' link in the top navigation bar, which is circled in blue. The right side of the page contains several informational boxes: 'QualityNet News', 'Announcements from QualityNet Team', and 'QualityNet Events'.

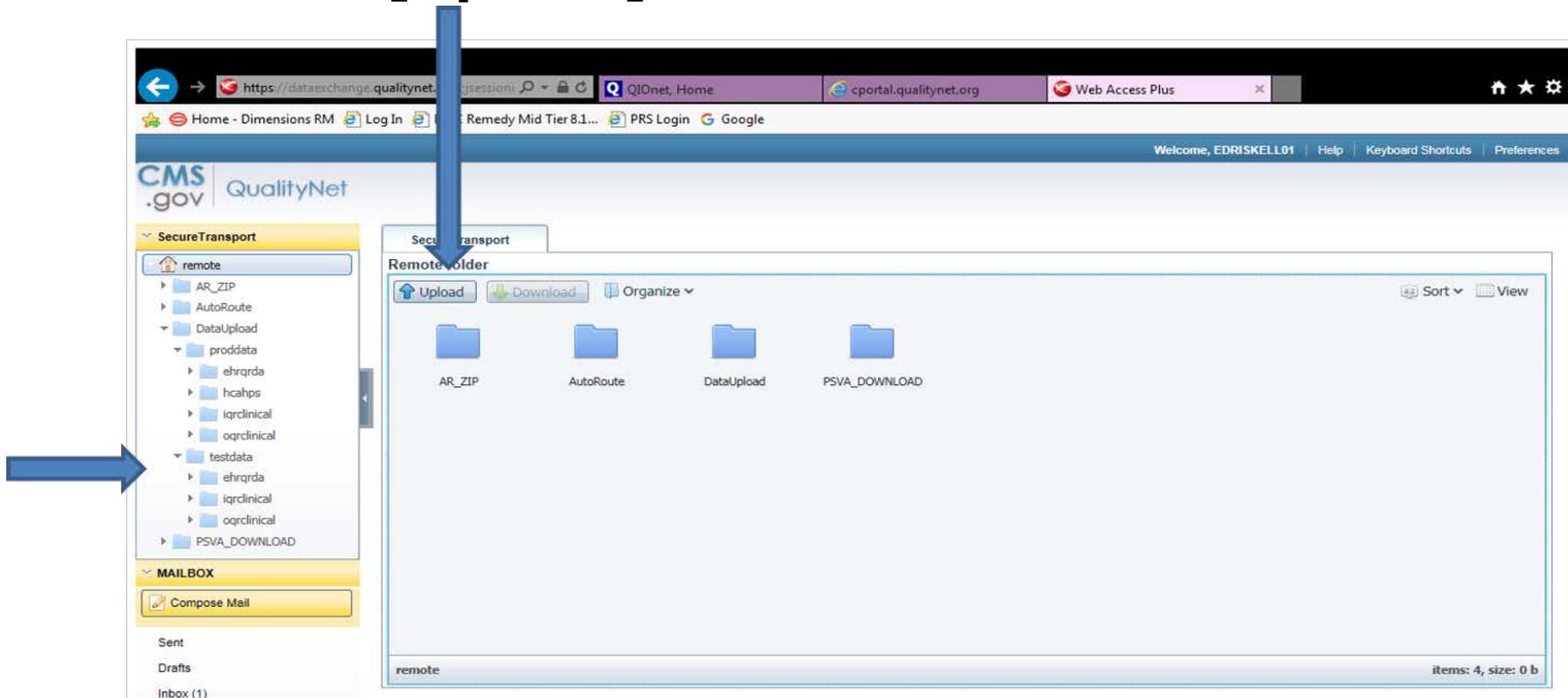
Submitting a Test QRDA File (2 of 6)

3. Once the new page opens, **[Select Data Upload]**



Submitting a Test QRDA File (3 of 6)

4. Select [test data/ehrqrda]
5. Select [Upload]



Submitting a Test QRDA File (4 of 6)

6. Select the QRDA Zip file(s)

Choose File to Upload

Network > Edmdqnp01 > data > USERS > km1997 > Original Desktop

Organize ▾ New folder

Name	Date modified	Type	Size
PSVA TOOLS	1/20/2016 12:46 PM	File folder	
PSVA_IE11	1/20/2016 12:47 PM	File folder	
PSVA20151219	1/20/2016 12:48 PM	File folder	
PSVA20160108	1/20/2016 12:50 PM	File folder	
psva-tool-1.0	7/1/2015 2:37 PM	File folder	
29ValidFiles_DischargeQ1-2016_Provider0...	9/14/2015 10:07 AM	PKZIP File	193 KB
2014_eCQM_Spec_for_EH_Release_April2...	9/18/2015 1:01 PM	PKZIP File	1,020 KB

Submitting a Test QRDA File (5 of 6)

7. The submitter email registered with QSP should receive **two emails**:

- One indicating the file was successfully uploaded
- A second indicating the files have been processed
 - Contact the [QualityNet Help Desk](#) if second email does not arrive

Today

 qnetsupport@hcqis.org	10:43 AM	
Hospital eCQM Reporting QRDA files have been processed		
 noreply@hcqis.org	10:43 AM	
File AMI2_NQF142_v4_DischargeQ1-2016_Prov030088.xml successfully uploaded to Data Uploa...		
 qnetsupport@hcqis.org	10:29 AM	
Hospital eCQM Reporting QRDA files have been processed		
 noreply@hcqis.org	10:28 AM	
File 29ValidFiles_DischargeQ1-2016_Provider030088.zip successfully uploaded to Data Upload ...		

Submitting a Test QRDA File (6 of 6)

8. Successfully Uploaded/Files Processed

From: noreply@hcqis.org Sent: Mon 2/22/2016 10:28 AM
To: Driskell, Elizabeth
Cc:
Subject: File 29ValidFiles_DischargeQ1-2016_Provider030088.zip successfully uploaded to Data Upload folder /DataUpload/proddata/ehrqrda.

Axway Communications

SecureTransport

Data Upload Notification

You have uploaded a new file [29ValidFiles_DischargeQ1-2016_Provider030088.zip](#)

From: qnetsupport@hcqis.org Sent: Mon 2/22/2016 10:29 AM
To: Driskell, Elizabeth
Cc:
Subject: Hospital eCQM Reporting QRDA files have been processed

The QRDA file(s) uploaded for Hospital eCQM Reporting have been processed.

The number of files that have been accepted and/or rejected for the batch ID submitted is identified below:

Batch#	Upload Date and Time	# of Files	#Accepted	#Rejected
543654	02/22/2016 10:28:11	29	0	29

To view details of the uploaded files, including the specific reasons for file rejection and CQM submission status, please sign in to QualityNet at <http://www.qualitynet.org> and navigate to your applicable program's report module to access the EHR Submission Reports category to run the individual reports.

If you have any questions, please contact the QualityNet Help Desk by phone at (866) 288-8912 or via e-mail at qnetsupport@hcqis.org.

Generating Data Submission Reports in QSP (1 of 3)

1. Select **[My Reports]** from the ribbon
2. Select **[Run Reports]** from the drop down box

The screenshot displays the CMS QualityNet portal interface. At the top, there are navigation links for Alerts (0), Notifications (253), Secure File Transfer, User Profile, and Log Out. The main navigation ribbon includes Home, Quality Programs, My Data, My Scores, My Reports, My Tools, and Help. The 'My Reports' dropdown menu is open, showing three options: Run Reports, Search Reports, and Analytics Report. A blue arrow points to the 'Run Reports' option. Below the navigation, there is a 'Welcome' section with a 'QualityNet Secure Portal' description. To the right, there are sections for 'QualityNet News', 'Announcements from', and 'QualityNet Events'.

Generating Data Submission Reports (2 of 3)

3. Under I'd Like to..., select [Run Report(s)]

The screenshot displays the CMS.gov QualityNet user interface. At the top, there are navigation links for Alerts (0), Notifications (253), Secure File Transfer, User Profile, and Log Out. Below this is the CMS.gov QualityNet logo and a search bar. A yellow navigation bar contains links for Home, Quality Programs, My Data, My Scores, My Reports, My Tools, and Help. The breadcrumb trail shows 'My Reports > Run Reports'. The main content area has four tabs: Start, Run Report(s), Search Report(s), and Favorites. The 'Run Report(s)' tab is active. Under the 'Start Reports' heading, there is a text box on the left and a yellow box on the right titled 'I'd Like To...'. The 'Run Report(s)' option in the yellow box is highlighted with a blue arrow pointing to it.

Alerts (0) | Notifications (253) | Secure File Transfer | User Profile | Log Out

CMS.gov | QualityNet

Home | Quality Programs | My Data | My Scores | My Reports | My Tools | Help

My Reports > Run Reports

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

Start Reports

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

I'd Like To...

- Run Report(s)**
- Search Report(s)
- View Favorite Reports

Generating Data Submission Reports (3 of 3)

4. Under **Report Program** select **[IQR]**
5. Under **Report Category** select **[EHR Hospital Reporting]**

Select Program, Category and Report

The available reports are grouped by program and category combination. If you have access to a single program, your program is pre-selected, and if the category related to the selected program has a single value, then it too will be pre-selected. Choose a program, then category, and then click on VIEW REPORTS to view your report choices. Select the report you wish to run from the table below by clicking on its name.

Report Program: IQR

Report Category: EHR Hospital Reporting - Submission Reports

[VIEW REPORTS](#)

▶ Search Report

REPORT NAME	REPORT DESCRIPTION
EHR Hospital Reporting - Submission Detail Report	The EHR Hospital Reporting Submission Detail Report displays detailed file
EHR Hospital Reporting - Submission Summary Report	The EHR Hospital Reporting Submission Summary Report displays summa

Available Test Data Submission Reports

Three reports are available for reviewing test data submissions within the *QSP*:

- Submission Summary Report
- Submission Detail Report
- eCQM Submission and Performance Report

NOTE: eCQMs are evaluated when submitting test files, but do not count toward program credit.

Hospital eCQM Receiving System: Production Files

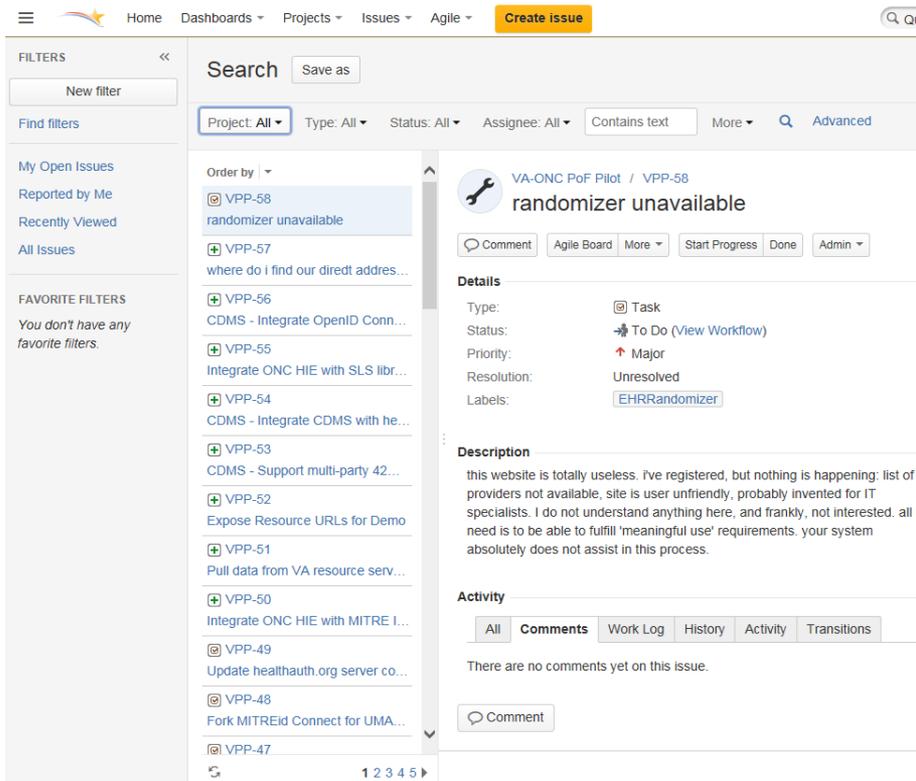
- Submission period for production QRDA files begins **October 2016** and runs through **February 28, 2017**
 - **Test files** will be accepted through **February 28, 2017**
- Data must be submitted as production files to meet program data submission requirements with patients meeting the Initial Patient Population of the applicable measures
- Presentation for submitting production files will be held later this year – webinar notification by EHR and IQR ListServes

Preparation Checklist for CY 2016 eCQM Reporting

Resources

CQM Issue Tracker

<https://jira.oncprojectracking.org/login.jsp>



- The CQM Issue Tracker is a tool for users to:
 - Track and provide feedback on eCQMs
 - Enter issues/questions related to eCQMs to be answered by an expert
 - Search all previously entered issues for responses
- A User Guide is available for anyone new to using this application and can be found at:

http://www.healthit.gov/sites/default/files/jira_powerpoint_v7.1.pdf

QualityNet eCQM Pages: ListServe Notifications

QualityNet Log in to QualityNet Secure Portal (formerly MyQualityNet) [Log In](#)

Home My QualityNet Help

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

Resources

- How do I subscribe?
- What lists am I subscribed to?
- ListServe Etiquette

ListServe Registration
Provide the required user information below. Then, select the Notifications you wish to receive or Discussion group you wish to join.

User Information

Your Name: (required)
E-mail: (required)
Verify E-mail: (required)
Password: (required)
Verify Password: (required)

*Passwords must be a minimum of 8 characters long and contain at least:

- one uppercase letter [A-Z]
- one lowercase letter [a-z]
- one numeric character [0-9]
- one special character (e.g., ! @ # % ^)

Program Notifications

Select the appropriate list(s) below to subscribe to e-mail notifications about related QualityNet enhancements, new releases, timeline or process/policy changes, and application or initiative alerts.

- Ambulatory Surgical Centers
- CART (CMS Abstraction & Reporting Tool)
- HDC (Hospital Data Collection)/Public Reporting
- Hospital IQR (Inpatient Quality Reporting) and Improvement
- Hospital Inpatient Value-Based Purchasing (HVBP) and Improvement
- Hospital OQR (Outpatient Quality Reporting)
- Hospital Reporting EHR (Electronic Health Record)
- Inpatient Psychiatric Facility Quality Reporting Program
- PPS-Exempt Cancer Hospitals Quality Reporting Program
- QIO Clinical Warehouse

Sign up for the Hospital Reporting EHR ListServe to receive emails about important issues related to eCQM submission.

<http://www.qualitynet.org/dcs/ContentServer?pagename=QnetPublic/ListServe/Register>

Fill out your contact information and check the box next to the Hospital Reporting EHR ListServe.

Related Rules

FY 2016 IPPS Final Rule (80 FR 49325 et seq.)

<http://www.gpo.gov/fdsys/pkg/FR-2015-08-17/pdf/2015-19049.pdf>

2015 Edition Health IT Certification Criteria Final Rule

<https://s3.amazonaws.com/public-inspection.federalregister.gov/2015-25597.pdf>

Medicare and Medicaid Programs; EHR Incentive Program – Stage 2 and Modifications to MU in 2015 through 2017

<https://s3.amazonaws.com/public-inspection.federalregister.gov/2015-25595.pdf>

Contacts

QualityNet Help Desk – PSVA and Data Upload Questions

- Qnetsupport@hcqis.org
- 1.866.288.8912, 7 a.m.–7 p.m. CT, Monday through Friday

eCQM General Program Questions – IQR Program

- <https://cms-ip.custhelp.com>
- 866.800.8765 or 844.472.4477, 7 a.m.–7 p.m. CT Monday through Friday (except holidays)

EHR (MU) Information Center – EHR Incentive Program Questions

- 888.734.6433, 7:30 a.m.– 6:30 p.m., CT Monday through Friday

The JIRA – ONC Project Tracking Website

- <http://oncprojecttracking.org> Resource to submit questions and comments regarding:
 - Issues identified with eCQM logic
 - Clarification on specifications
 - The Combined QRDA IG for 2016
 - The EHR Incentive Program

Preparation Checklist for CY 2016 eCQM Reporting

Question & Answer Session

Continuing Education Approval

This program has been approved for 1.0 continuing education (CE) unit for the following professional boards:

- Florida Board of Clinical Social Work, Marriage and Family Therapy and Mental Health Counseling
- Florida Board of Nursing Home Administrators
- Florida Council of Dietetics
- Florida Board of Pharmacy
- Board of Registered Nursing (Provider #16578)
 - It is your responsibility to submit this form to your accrediting body for credit.

CE Credit Process

- Complete the ReadyTalk[®] survey that will pop up after the webinar, or wait for the survey that will be sent to all registrants within the next 48 hours.
- After completion of the survey, click “Done” at the bottom of the screen.
- Another page will open that asks you to register in HSAG’s Learning Management Center.
 - This is a separate registration from ReadyTalk[®].
 - Please use your PERSONAL email so you can receive your certificate.
 - Healthcare facilities have firewalls up that block our certificates.

CE Certificate Problems?

- If you do not immediately receive a response to the email that you signed up with in the Learning Management Center, you have a firewall up that is blocking the link that is sent out.
- Please go back to the **New User** link and register your personal email account.
 - Personal emails do not have firewalls.

CE Credit Process: Survey

No

Please provide any additional comments

10. What is your overall level of satisfaction with this presentation?

Very satisfied

Somewhat satisfied

Neutral

Somewhat dissatisfied

Very dissatisfied

If you answered "very dissatisfied", please explain

11. What topics would be of interest to you for future presentations?

12. If you have questions or concerns, please feel free to leave your name and phone number or email address and we will contact you.

Done

Powered by **SurveyMonkey**
Check out our [sample surveys](#) and create your own now!

CE Credit Process

Thank you for completing our survey!

Please click on one of the links below to obtain your certificate for your state licensure.

You must be registered with the learning management site.

New User Link:

<https://lmc.hshapps.com/register/default.aspx?ID=da0a12bc-db39-408f-b429-d6f6b9ccb1ae>

Existing User Link:

<https://lmc.hshapps.com/test/adduser.aspx?ID=da0a12bc-db39-408f-b429-d6f6b9ccb1ae>

Note: If you click the 'Done' button below, you will not have the opportunity to receive your certificate without participating in a longer survey.

Done

CE Credit Process: New User

The screenshot shows a web browser window displaying the registration page for a CE credit course. The page header includes the HSAG logo (Health Services Advisory Group) on the left and a security notice on the right: "this is a secure site please provide credentials to continue" with a lock icon. Below the header, the course title "Learning Center Registration: OQR: 2015 Specifications Manual Update - 1-21-2015" is displayed. The registration form contains four input fields: "First Name:", "Last Name:", "Email:", and "Phone:". The "Phone:" field has a small icon of a telephone handset. A "Register" button is located below the "Email:" field. The page is framed by a blue border.

HSAG HEALTH SERVICES ADVISORY GROUP

this is a secure site
please provide credentials to continue

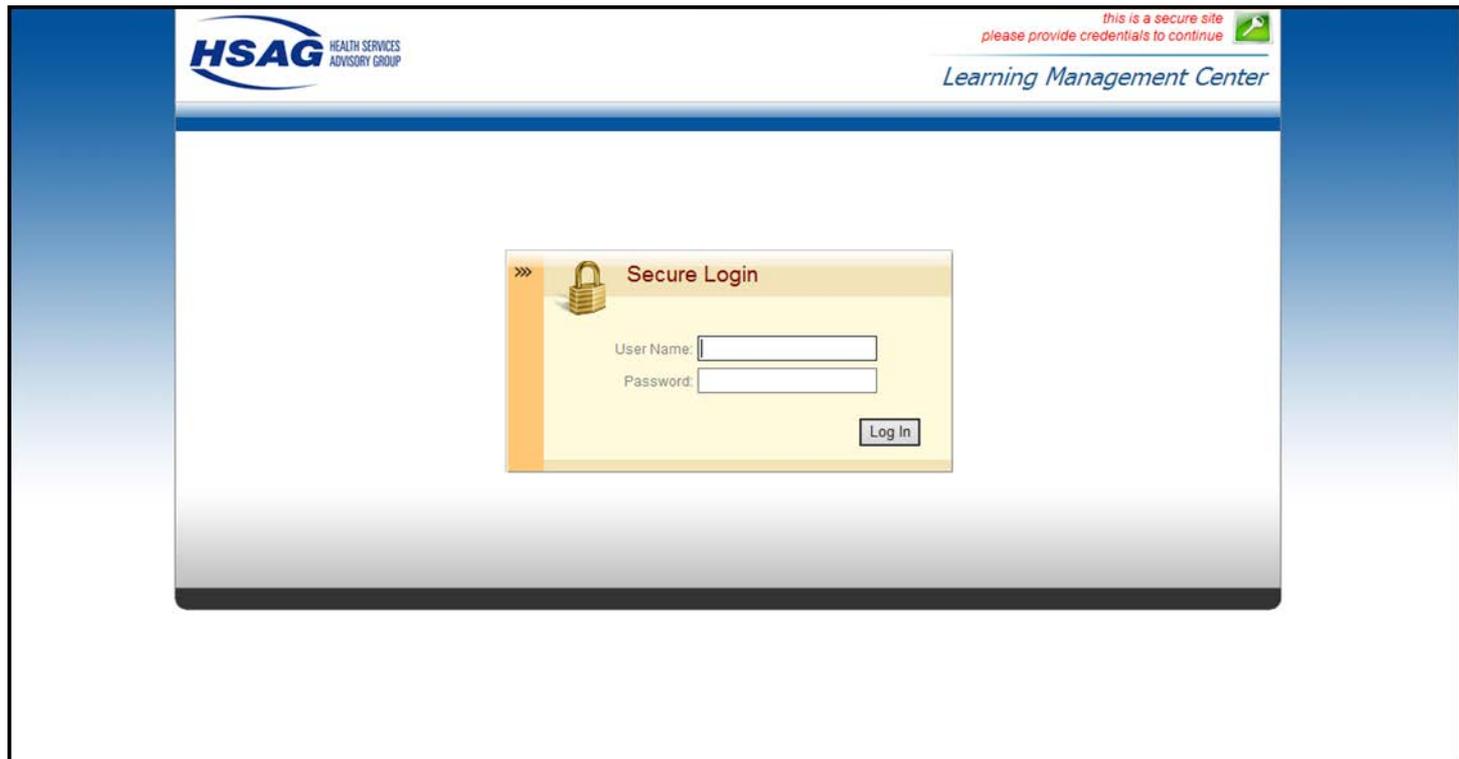
Learning Management Center

Learning Center Registration: OQR: 2015 Specifications Manual Update - 1-21-2015

First Name: Last Name:

Email: Phone:

CE Credit Process: Existing User



The screenshot displays the login interface for the HSAG Learning Management Center. At the top left is the HSAG logo (Health Services Advisory Group). At the top right, a security warning states "this is a secure site please provide credentials to continue" with a lock icon. Below this is the text "Learning Management Center". The central focus is a "Secure Login" box containing a padlock icon, a "User Name:" label with an input field, a "Password:" label with an input field, and a "Log In" button.