



# Question and Answer Session I

## Calendar Year 2016 eCQM Reporting

### **Jennifer Seeman**

Program Manager, Hospital Quality Reporting (HQR) Electronic Health Record (EHR)  
Portfolio, Program, and Project Management (PM3) Support Contractor (SC)

### **Artrina Sturges, EdD**

Project Lead, Inpatient Quality Reporting (IQR) – EHR Incentive Program Alignment  
Hospital Inpatient Value, Incentives, and Quality Reporting (VIQR) Outreach and Education SC

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# Purpose

This presentation is the first of two sessions devoted to addressing submitter questions related to the mandatory electronic Clinical Quality Measure (eCQM) submission process for the Hospital IQR and Medicare EHR Incentive Programs for CY 2016.

# Objectives

At the conclusion of this presentation, participants will be able to perform the following:

- Have greater insight for troubleshooting common CMS Quality Reporting Document Architecture (QRDA) Category I file submission errors to reduce the likelihood of file rejection
- Locate and utilize tools and reference materials to assist with submission activities
- Perform the steps necessary for successful submission of eCQM test and production files

# Agenda

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- Discuss Feedback and Submission Reports
- Open Question & Answer Session

Question and Answer Session I – CY 2016 eCQM  
Reporting

**Discuss Feedback and Submission Reports**

# Report Category – Drop-down Menu

**CMS.gov QualityNet** Search QualityNet.org

Home - Quality Programs - My Reports - My Tools - Help -

Home > My Reports > Run Reports

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

Select Program, Category and Report Report Parameters Confirmation

### 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 - Feedback Reports
- EHR Hospital Reporting - Submission Reports
- Hospital Reporting - Feedback Reports
- Hospital Reporting - Annual Payment Update Reports
- Hospital Reporting - Data Validation Reports
- Hospital Reporting - QIO Feedback Reports
- Hospital Value-Based Purchasing - Feedback Reports
- Public Reporting - Preview Reports

VIEW REPORTS

Report Category is required. Use the arrow keys to select one value from the dropdown list.

REPORT NAME	REPORT DESCRIPTION
No Reports are available.	

# Differences Between Feedback and Submission Report Categories

## Feedback Category

- Primarily used by hospitals
- Data should be the same in the feedback or the submission categories

## Submission Category

- Primarily used by vendors, but can be accessed by hospitals
- Hospitals authorize vendors to access these reports
- Able to pull up numerous hospitals at once and analyze data

# Feedback and Submission Reports

**Report Program** IQR  **Report Category** EHR Hospital Reporting - Feedback 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 information for selected uploaded EHR data.
EHR Hospital Reporting - Submission Summary Report	The EHR Hospital Reporting Submission Summary Report displays summary information for selected uploaded EHR data.
EHR Hospital Reporting - eCQM Performance Summary Report	The EHR Hospital Reporting eCQM Performance Summary Report displays summary information for selected Provider and their related eCQM performance.
EHR Hospital Reporting - eCQM Submission Status Report	The EHR Hospital Reporting eCQM Submission Status Report displays submission information by Clinical Quality Measure.
EHR Hospital Reporting - eCQM Submission and Performance Feedback Report	The EHR Hospital Reporting eCQM Submission and Performance Feedback Report displays detailed information for selected patient encounters and the related eCQM performance.
Hospital Reporting - Vendors Authorized to Upload Data	The Vendors Authorized to Upload Data report displays a list of vendors authorized by a hospital to submit hospital data on their behalf.

**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 information for selected uploaded EHR data.
EHR Hospital Reporting - Submission Summary Report	The EHR Hospital Reporting Submission Summary Report displays summary information for selected uploaded EHR data.
EHR Hospital Reporting - eCQM Performance Summary Report	The EHR Hospital Reporting eCQM Performance Summary Report displays summary information for selected Provider and their related eCQM performance.
EHR Hospital Reporting - eCQM Submission Status Report	The EHR Hospital Reporting eCQM Submission Status Report displays submission information by Clinical Quality Measure.
EHR Hospital Reporting - eCQM Submission and Performance Feedback Report	The EHR Hospital Reporting eCQM Submission and Performance Feedback Report displays detailed information for selected patient encounters and the related eCQM performance.
Hospital Reporting - Vendors Authorized to Upload Data	The Vendors Authorized to Upload Data report displays a list of vendors authorized by a hospital to submit hospital data on their behalf.



# Submission Detail Report Parameters

## Feedback Category

### Report Parameters

Select the parameters that define the report you will run, then click RUN REPORT.

\* Indicates required fields.

EHR Hospital Reporting - Submission Detail Report - IQR

\* State:

State is required. Use the arrow keys and space bar to select one or more values from the dropdown list.

\* Provider:

\* Discharge Quarter:

Submitter:

File Status:

Test Case Indicator:

\* Report Format:

## Submission Category

### Report Parameters

Select the parameters that define the report you will run, then click RUN REPORT.

\* Indicates required fields.

EHR Hospital Reporting - Submission Detail Report - IQR

\* State:

\* Submitter:

\* Upload Start Date:

(Upload Start Date may not be prior to 07/01/2012)

\* Upload End Date:

(Upload Date Range cannot exceed 12 months)

Provider:

Batch ID:

\* Discharge Quarter:

File Status:

Test Case Indicator:

\* Report Format:

# Submission Detail Report Screenshots

## Feedback Report

Report Run Date: 12/06/2016 Page 1 of 4741

**EHR Hospital Reporting - Submission Detail Report**  
 Provider: [REDACTED]  
 Submitter: All  
 File Status: All  
 Test Case Indicator: All  
 Discharge Quarter: 07/01/2016 - 09/30/2016

Provider ID	Submitter ID	EHR Certification Number	File Name	Batch ID	Upload Date	File Status	Feedback Message	Test Case Indicator
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	11/03/2016 11:40	ACCEPTED	INFO: QRDA file accepted.	YES
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	11/03/2016 11:40	ACCEPTED	INFO: QRDA file accepted.	YES
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	11/03/2016 11:40	ACCEPTED	INFO: QRDA file accepted.	YES

## Submission Report

Report Run Date: 09/22/2016 Page 1 of 8

**EHR Hospital Reporting - Submission Detail Report**  
 Submitter: [REDACTED]  
 Upload Date Range: 09/12/2016 - 09/13/2016  
 Provider: All  
 Batch ID: [REDACTED]  
 File Status: All  
 Test Case Indicator: All  
 Discharge Quarter: 04/01/2016 - 06/30/2016

Submitter ID	Provider ID	EHR Certification Number	File Name	Batch ID	Upload Date	File Status	Feedback Message	Test Case Indicator
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	09/13/2016 11:16	REJECTED	ERROR: CCN (NULL) cannot be validated (CONF:CMS_0066).	YES
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	09/13/2016 11:16	REJECTED	ERROR: Reporting Period Effective Date Range does not match one of the Program's CY Discharge Quarters (CONF:CMS_0079).	YES

# Submission Summary Report Parameters

## Feedback Category

EHR Hospital Reporting - Submission Summary Report - IQR

\* State:

\* Provider:

\* Discharge Quarter:  
Please select

Submitter:

Measure Set:

Domain:

File Status:

Test Case Indicator:

\* Report Format:  
PDF

## Submission Category

EHR Hospital Reporting - Submission Summary Report - IQR

\* State:

\* Submitter:

\* Upload Start Date:  
   
(Upload Start Date may not be prior to 07/01/2012)

\* Upload End Date:  
   
(Upload Date Range cannot exceed 12 months)

Provider:

Batch ID:

\* Discharge Quarter:  
Please select

Measure Set:

Domain:

File Status:

Test Case Indicator:

\* Report Format:  
PDF

# Submission Summary – Feedback Category Screenshot

Report Run Date: 12/06/2016 Page 1 of 3

**EHR Hospital Reporting - Submission Summary Report**  
 Provider: [REDACTED]  
 Submitter: All  
 Domain: All  
 Measure Set: All  
 File Status: All  
 Test Case Indicator: All  
 Discharge Quarter: 07/01/2016 - 09/30/2016

Submitter	Measure Name	Domain	File Status	Measure Count
Total Files Submitted: 1192				
Total Files Accepted: 1192				
Total Files Deleted: 0				
Total Files Rejected: 0				
Provider: [REDACTED]				
Submitter: [REDACTED]				
Measure Set: ED				
	ED-1	Patient and Family Engagement	ACCEPTED	1366
	ED-2	Patient and Family Engagement	ACCEPTED	1366
Measure Set: STK				
	STK-2	Clinical Process/Effectiveness	ACCEPTED	21
	STK-10	Care Coordination	ACCEPTED	21

# Submission Summary – Submission Category Screenshot

Report Run Date: 09/15/2016 Page 1 of 1

**EHR Hospital Reporting - Submission Summary Report**  
 Submitter: [REDACTED]  
 Upload Date Range: 07/01/2016 - 09/15/2016  
 Provider: All  
 Batch ID: All

**Domain:** Care Coordination, Clinical Process/Effectiveness, Efficient Use of Healthcare Resources, Patient Safety, Patient and Family Engagement, Population and Public Health  
**Measure Set:** AMI, CAC, ED, HearScreening, PC, PN, SCIP, STK, VTE  
**File Status:** ACCEPTED, DELETED, REJECTED  
**Test Case Indicator:** YES, NO  
**Discharge Quarter:** 07/01/2016 - 09/30/2016

Provider	Measure Name	Domain	File Status	Measure Count
<b>Total Files Submitted: 2357</b>				
<b>Total Files Accepted: 1142</b>				
<b>Total Files Deleted: 0</b>				
<b>Total Files Rejected: 1215</b>				
Submitter: [REDACTED] Provider: [REDACTED]				
<b>Measure Set: PC</b>				
	PC-01	Clinical Process/Effectiveness	ACCEPTED	179
	PC-05	Clinical Process/Effectiveness	REJECTED	1207
<b>Measure Set: VTE</b>				
	VTE-1	Patient Safety	ACCEPTED	973
	VTE-1	Patient Safety	REJECTED	6

# eCQM Performance Summary Report Parameters

## Feedback Category

EHR Hospital Reporting - eCQM Performance Summary Report - IQR

\* State:

\* Provider:

\* Discharge Quarter:  
Please select

Submitter:

Measure Set:

\* Report Format:  
PDF

## Submission Category

EHR Hospital Reporting - eCQM Performance Summary Report - IQR

\* State:

\* Submitter:

\* Discharge Quarter:  
Please select

Provider:

Measure Set:

\* Report Format:  
PDF

# eCQM Performance Summary Feedback Category Screenshot

Report Run Date: 12/06/2016

Page 1 of 1

## EHR Hospital Reporting – eCQM Performance Summary Report

Provider: [REDACTED]

Discharge Quarter: 07/01/2016 - 09/30/2016

Submitter: All

Measure Set: All

Provider ID: [REDACTED]

Submitter ID: [REDACTED]

Measure ID	Version#	IPP	Denominator Population	Numerator Population	Denominator Exclusion	Denominator Exception	Continuous Variable	Performance Score
<b>Measure Set: ED</b>								
ED-1	4	153	0	0	-	-	0 minutes	-
ED-1 (Stratum 1)	4	303	303	0	-	-	191 minutes	-
ED-2	4	164	0	0	-	-	0 minutes	-
ED-2 (Stratum 1)	4	292	292	0	-	-	64 minutes	-
<b>Measure Set: STK</b>								
STK-2	4	7	7	5	0	0	-	71.4285714 %
STK-10	4	7	7	6	0	-	-	85.7142857 %

# eCQM Performance Summary Submission Category Screenshot

Report Run Date: 09/21/2016

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EHR Hospital Reporting – eCQM Performance Summary Report

Submitter: [REDACTED]

Discharge Quarter: 07/01/2015 - 09/30/2015

Provider: [REDACTED]

Measure Set: AMI, CAC, ED, HearScreening, PC, PN, SCIP, STK, VTE

Submitter ID: [REDACTED]

Provider ID: [REDACTED]

Measure ID	Version#	IPP	Denominator Population	Numerator Population	Denominator Exclusion	Denominator Exception	Continuous Variable	Performance Score
<b>Measure Set: ED</b>								
ED-1 (Stratum 1)	3	58	58	0	-	-	219.5 minutes	-
ED-1 (Stratum 2)	3	58	58	0	-	-	219.5 minutes	-
ED-2	3	47	0	0	-	-	0 minutes	-
ED-2 (Stratum 1)	3	11	11	0	-	-	118 minutes	-
ED-2 (Stratum 2)	3	11	11	0	-	-	118 minutes	-
<b>Measure Set: STK</b>								
STK-2	3	3	3	2	0	0	-	66.666667 %
STK-3	4	1	1	0	0	0	-	-
STK-5	3	3	3	2	1	0	-	100 %
STK-6	3	3	3	1	0	0	-	33.333333 %
STK-8	3	1	1	0	0	-	-	-
STK-10	3	4	4	0	0	-	-	-
<b>Measure Set: VTE</b>								
VTE-1	3	10709	10709	1943	6733	-	-	48.8682093 %
VTE-2	3	3010	1	1	0	0	-	100 %
VTE-3	3	148	0	0	0	-	-	-
VTE-4	3	65	0	0	0	-	-	-
VTE-5	3	30	1	0	-	-	-	-
VTE-6*	3	28	0	0	0	-	-	-



# eCQM *Submission Status* Report Parameters

## Feedback Category

EHR Hospital Reporting - eCQM Submission Status Report - IQR

\* State:

\* Provider:

\* Discharge Quarter:

Submitter:

\* Report Format:

## Submission Category

EHR Hospital Reporting - eCQM Submission Status Report - IQR

\* State:

\* Submitter:

\* Discharge Quarter:

Provider:

\* Report Format:

# eCQM Submission Status – Feedback Category Screenshot

Page 1 of 2

Report Run Date: 12/06/2016

EHR Hospital Reporting – eCQM Submission Status Report

Provider: [REDACTED]

Submitter: All

Discharge Quarter: Q3 2016

Data As Of: 11/07/2016

Provider: [REDACTED]

Submitter: [REDACTED]

Discharge Quarter: Jul 01 - Sep 30, 2016

EHR Domain Count: 3

IQR Domain Count: 3

Successful MU Submission<sup>3</sup>: Y

Successful IQR-EHR Submission<sup>4</sup>: Y

Measure ID	Domain	Submission Status <sup>2</sup>	Last Submission Date/Time
AMI-2	Clinical Process/Effectiveness	Not Submitted	N/A
AMI-7a	Clinical Process/Effectiveness	Not Submitted	N/A
AMI-8a	Clinical Process/Effectiveness	Not Submitted	N/A
AMI-10	Clinical Process/Effectiveness	Not Submitted	N/A
CAC-3	Patient and Family Engagement	Not Submitted	N/A
ED-1	Patient and Family Engagement	Submitted	11/07/2016 10:14

# eCQM Submission Status – Submission Category Screenshot

Page 1 of 198

Report Run Date: 12/06/2016  
**EHR Hospital Reporting – eCQM Submission Status Report**  
 Submitter: [REDACTED]  
 Provider: [REDACTED] (...)  
 Discharge Quarter: Q3 2016

Data As Of: 12/05/2016  
 Submitter: [REDACTED]  
 Provider: [REDACTED]  
 Discharge Quarter: Jul 01 - Sep 30, 2016

EHR Domain Count: 2  
 IQR Domain Count: 2

Successful MU Submission<sup>3</sup>: Y  
 Successful IQR-EHR Submission<sup>4</sup>: Y

Measure ID	Domain	Submission Status <sup>2</sup>	Last Submission Date/Time
AMI-2	Clinical Process/Effectiveness	Not Submitted	N/A
AMI-7a	Clinical Process/Effectiveness	Not Submitted	N/A
AMI-8a	Clinical Process/Effectiveness	Not Submitted	N/A
AMI-10	Clinical Process/Effectiveness	Not Submitted	N/A
CAC-3	Patient and Family Engagement	Not Submitted	N/A
ED-1	Patient and Family Engagement	Submitted	12/05/2016 17:29

# ***Submission Status Report Overview***

- Production file submissions **only**
- Summary-level view signaling successful submission of eCQMs, zero denominators, and case threshold exemptions

**NOTE:** The report is a snapshot in time. If additional production data is submitted or existing data modified and resubmitted, then the summary-level view could change. This could indicate a hospital is no longer in compliance, based on the most recent submission to the CMS data-receiving system. Please use the most recently generated eCQM Submission Status Report to determine submission status.

# eCQM Submission and Performance Feedback Parameters

## Feedback Category

EHR Hospital Reporting - eCQM Submission and Performance Feedback Report - IQR

\* State:

\* Provider:

\* Discharge Quarter:  
Please select

Submitter:

Measure ID:

Message Type:

Test Case Indicator:

\* Report Format:  
PDF

## Submission Category

EHR Hospital Reporting - eCQM Submission and Performance Feedback Report - IQR

\* State:

\* Submitter:

\* Upload Start Date:  
  
(Upload Start Date may not be prior to 07/01/2012)

\* Upload End Date:  
  
(Upload Date Range cannot exceed 12 months)

Provider:

Batch ID:

\* Discharge Quarter:  
Please select

Measure ID:

Message Type:

Test Case Indicator:

\* Report Format:  
PDF

# eCQM Submission and Performance Feedback – Feedback Category Screenshot

Report Run Date: 09/15/2016

EHR Hospital Reporting - eCQM Submission and Performance Feedback Report

Provider: [REDACTED]  
 Discharge Quarter: 07/01/2016 - 09/30/2016  
 Submitter: All  
 Test Case Indicator: Yes, No  
 Measure ID: All  
 Message Type: All

Provider ID:	[REDACTED]
Submitter ID:	[REDACTED]
Patient ID:	[REDACTED]
Batch ID:	[REDACTED]
File Name:	[REDACTED]
Test Case Indicator:	Yes
Upload Date: 08/24/2016	

Admission Date	Discharge Date	Measure ID	Version#	Title/Description	Message
08/08/2016	08/11/2016	VTE-1	[V4]	Venous Thromboembolism Prophylaxis	90001 NUMERATOR MET: Patient meets the criteria for inclusion in the numerator population.

Measure Count: 1

Provider ID:	[REDACTED]
Submitter ID:	[REDACTED]
Patient ID:	[REDACTED]
Batch ID:	[REDACTED]
File Name:	[REDACTED]
Test Case Indicator:	Yes
Upload Date: 08/24/2016	

Admission Date	Discharge Date	Measure ID	Version#	Title/Description	Message
08/04/2016	08/18/2016	VTE-1	[V4]	Venous Thromboembolism Prophylaxis	90001 NUMERATOR MET: Patient meets the criteria for inclusion in the numerator population.

Measure Count: 1

# eCQM Submission and Performance Feedback – Submission Category Screenshot

Report Run Date: 11/21/2016

## EHR Hospital Reporting - eCQM Submission and Performance Feedback Report

Submitter: [REDACTED]  
 Upload Date Range: 11/07/2016-11/07/2016  
 Provider: All  
 Batch ID: [REDACTED]  
 Discharge Quarter: 07/01/2016 - 09/30/2016  
 Test Case Indicator: All  
 Measure ID: All  
 Message Type: All

Submitter ID: [REDACTED] Provider ID: [REDACTED] Patient ID: [REDACTED] Batch ID: [REDACTED] File Name: [REDACTED] Test Case Indicator: No						Upload Date: 11/07/2016
---	--	--	--	--	--	-------------------------

Admission Date	Discharge Date	Measure ID	Version #	Title/Description	Message
08/05/2016	08/06/2016	VTE-1	[V4]	Venous Thromboembolism Prophylaxis	20150017 EXCLUDED: Patient encounter does not meet specified criteria.

Measure Count: 1

Submitter ID: [REDACTED] Provider ID: [REDACTED] Patient ID: [REDACTED] Batch ID: [REDACTED] File Name: [REDACTED] Test Case Indicator: No						Upload Date: 11/07/2016
---	--	--	--	--	--	-------------------------

Admission Date	Discharge Date	Measure ID	Version #	Title/Description	Message
09/13/2016	09/14/2016	VTE-1	[V4]	Venous Thromboembolism Prophylaxis	20150017 EXCLUDED: Patient encounter does not meet specified criteria.

Measure Count: 1

# EHR Report Overview

Report Title	Purpose	Availability
Submission Detail Report	File-level validation	Test and production
Submission Summary Report	Submission summary validation	Test and production
eCQM Performance Summary Report	Summary-level measure performance calculations	Production only
eCQM Submission Status Report	Summary-level; signals successful submission of QRDA Category I files, zero denominator declarations and/or case threshold exemptions	Production only
eCQM Submission and Performance Feedback Report	Patient-level measure calculations	Test and production



Question and Answer Session I – CY 2016 eCQM  
Reporting

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**Question and Answer Session**

# Question and Answer Session I – CY 2016 eCQM Reporting

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## **Resources**


# Resources to Troubleshoot Error Messages

- [2016 CMS QRDA Implementation Guide for Eligible Professional Programs and Hospital Quality Reporting](#)  
CMS eCQM Library and the Electronic Clinical Quality Improvement (eCQI) Resource Center
- [Addendum to 2016 CMS QRDA Implementation Guide for Eligible Professional and Hospital Quality Reporting](#)  
CMS eCQM Library and the eCQI Resource Center
- [HL7 Implementation Guide for CDA Release 2: Quality Reporting Document Architecture, Category I, Draft Standard for Trial Use Release 3 \(QRDA-I R3\)](#)  
June 2015

# QRDA Category I Conformance Statement Interactive Resource

The QRDA Category I Conformance Statement Interactive Resource is posted on the *QualityNet* website and on the [Quality Reporting Center](#) website:

[Home](#) » [Inpatient](#) » [Hospital IQR Program](#) » [Resources and Tools](#)



**QRDA Category I Conformance Statement Resource – CY 2016 eCQM Reporting**

[Next Page](#)

## Select a CONF Number From the Table Below

<a href="#">CONF: CMS_0060</a> Encounter Performed Discharge Date Null	<a href="#">CONF: CMS_0062</a> Encounter Performed Admission Date	<a href="#">CONF: CMS_0063</a> Encounter Performed Discharge Date	<a href="#">CONF: CMS_0068</a> Dummy CCN
<a href="#">CONF: CMS_0072</a> QRDA Document Format Error	<a href="#">CONF: CMS_0073</a> QRDA Document Format Error	<a href="#">CONF: CMS_0074</a> Version Specific Measure Identifier	<a href="#">CONF: CMS_0078</a> QRDA File Size Exceeds 5 MB
<a href="#">CONF: CMS_0079</a> Reporting Period Effective Date Range	<a href="#">CONF: 81-9371</a> Conformant Patient Name	<a href="#">CONF: 81-9372</a> Cannot Contain Name Parts	<a href="#">CONF: 1098-6394</a> Administrative Gender Code
<a href="#">CONF: 1098-7508</a> Effective Time	<a href="#">CONF: 1098-14838</a> Service Event – Low Effective Time	<a href="#">CONF: 1140-27571 &amp; CONF 1098-5300_C01</a> Contain Birthtime – Precise to the Day	<a href="#">CONF: 1140-27745</a> Medication Order Requires Authors

[Back](#)      [End](#)

# Contacts for Outreach

## **QualityNet Help Desk – PSVA and Data Upload**

[qnetsupport@hcqis.org](mailto:qnetsupport@hcqis.org)

(866) 288-8912, 7 a.m. – 7 p.m. CT, Monday through Friday

## **eCQM General Program Questions – IQR Policy and Program**

<https://cms-ip.custhelp.com>

(866) 800-8765 or (844) 472-4477, 8 a.m. – 8 p.m. ET, Monday through Friday (except holidays)

## **EHR (Meaningful Use) Information Center (EHRIC) – EHR Incentive Program and Attestation Questions**

(888) 734-6433 (press option 1), 7:30 a.m. – 6:30 p.m. CT, Monday through Friday

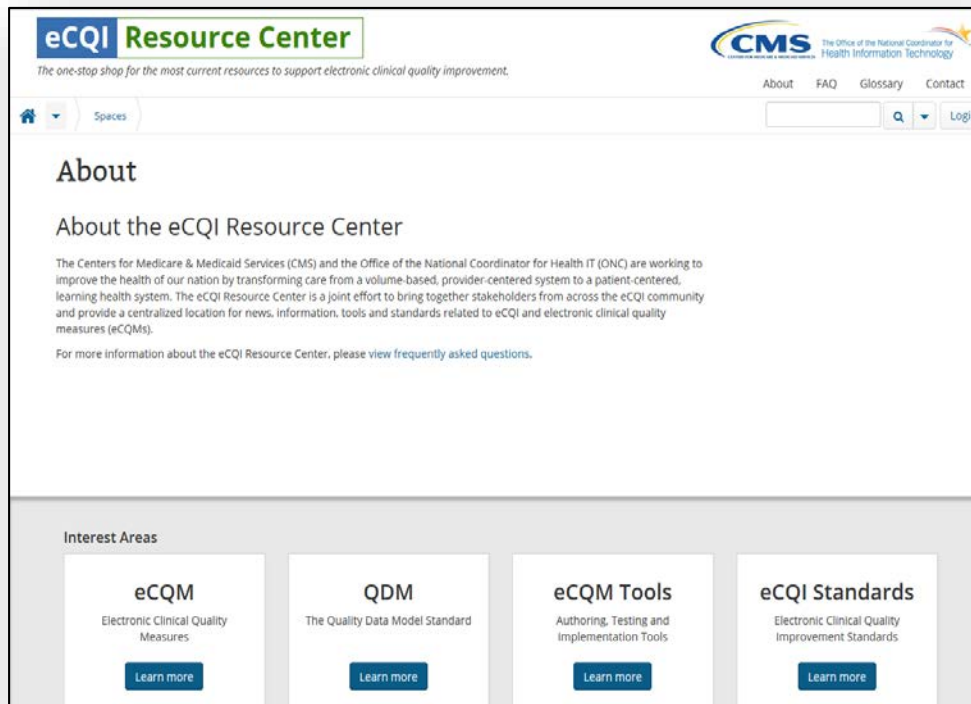
## **JIRA – Office of the National Coordinator (ONC) Issue Tracking System**

[JIRA website](#) – resource to submit questions and comments regarding the following:

- Issues identified with eCQM logic
- Clarification on specifications
- The combined QRDA implementation guide for 2016

# eCQI Resource Center

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



- Resources for various stages of eCQI
- Information about standards and tools to support eCQI
- Links to external resources related to eCQMs and data reporting include the following:
  - ONC JIRA issue trackers
  - Measure Authoring tool
  - Value Set Authority Center
  - National Quality Strategy resources

# eCQM Library

[https://www.cms.gov/regulations-and-guidance/legislation/ehrincentiveprograms/ecqm\\_library.html](https://www.cms.gov/regulations-and-guidance/legislation/ehrincentiveprograms/ecqm_library.html)

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

**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.

The eCQM Library contains the following resources:

- eCQM specifications for eligible providers and eligible hospitals
- CMS QRDA implementation guides
- Additional resources, such as a guide to reading eCQMs

# CMS.gov

## Registration and Attestation Page

<https://www.cms.gov/Regulations-and-Guidance/Legislation/EHRIncentivePrograms/RegistrationandAttestation.html>

The screenshot displays the CMS.gov website interface. At the top, the CMS.gov logo is on the left, and navigation links (Home, About CMS, Newsroom, FAQs, Archive, Share, Help, Print) are on the right. Below the logo, the text "Centers for Medicare & Medicaid Services" is visible. A search bar is located to the right of the logo. A horizontal menu contains several categories: Medicare, Medicaid/CHIP, Medicare-Medicaid Coordination, Private Insurance, Innovation Center, Regulations & Guidance (highlighted in blue), Research, Statistics, Data & Systems, and Outreach & Education. Below the menu, a breadcrumb trail reads: Home > Regulations and Guidance > EHR Incentive Programs > Registration & Attestation. The main content area is titled "Registration & Attestation" and includes a link to "Click here to Register or Attest for the Medicare and/or Medicaid EHR Incentive Programs". Two notes are present: one for Medicaid Eligible Professionals and another for Eligible Hospitals that register for "Both Medicare & Medicaid". A section titled "Are you registering or attesting on behalf of an Eligible Professional?" follows, explaining that CMS allows a third party to register and attest on behalf of an eligible professional, provided they have an Identity and Access Management System (I&A) web user.

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Centers for Medicare & Medicaid Services

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 > Registration & Attestation

**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](#)

### Registration & Attestation

[Click here to Register or Attest for the Medicare and/or Medicaid EHR Incentive Programs](#)

**Note for Medicaid Eligible Professionals:** Some states have not yet opened their Medicaid EHR Incentive Programs. Eligible Professionals will not be able to register for a Medicaid EHR Incentive Program until their state's program has launched and that state's site has opened. Information on when registration will be available for specific states is posted at [Medicaid State Information](#).

**Note for Eligible Hospitals that register for "Both Medicare & Medicaid":** You may pre-register for the Medicaid EHR Incentive Program before your state launches, but you will be placed in a "pending state validation" status for eligibility in the Medicaid EHR Incentive Program. You will not be able to complete the Medicaid program eligibility requirements or receive a Medicaid incentive payment until your state's program is launched. You may, however, continue with registration and attestation for the Medicare program. For a list of expected program launch dates, please visit the [Medicaid State Information](#) page.

#### Are you registering or attesting on behalf of an Eligible Professional?

CMS allows an eligible professional to designate a third party to register and attest on his or her behalf. To do so, users working on behalf of an eligible professional must have an Identity and Access Management System (I&A) web user



# Quality Reporting Center

[www.qualityreportingcenter.com](http://www.qualityreportingcenter.com)



- HOME
- EVENTS CALENDAR
- INPATIENT >
- OUTPATIENT >
- ASC >
- EDUCATION >
- QIN-QIO >

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 (VIQR), Outpatient Quality Reporting (OQR) Outreach and Education Support Programs, is dedicated to improving quality care delivery and health outcomes by collaborating with healthcare providers.

[Log In](#) to Access QIO Section

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

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## Upcoming Events

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

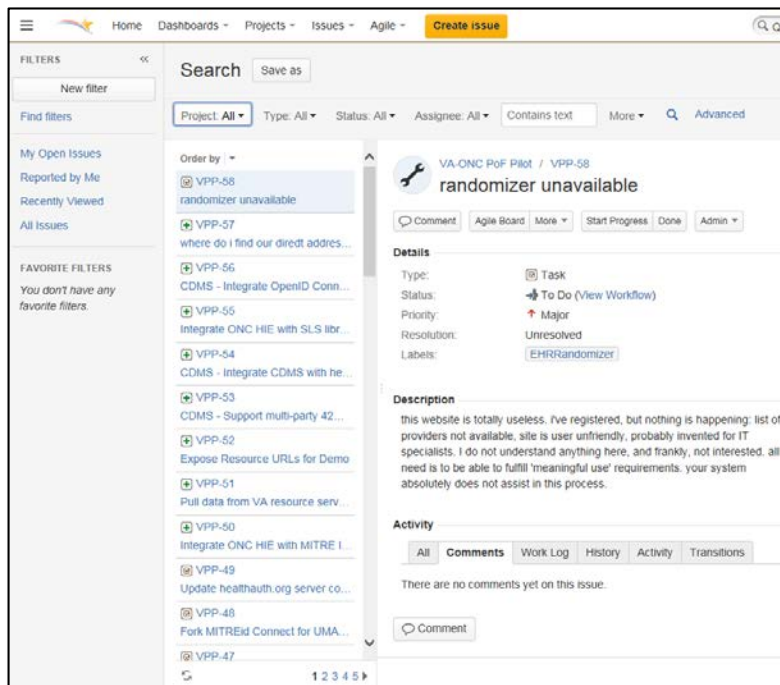
March 28, 2016  
[Annual Requirements: DACA, HCP, Structural Measures, and QualityNet SA](#)

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

[See the full calendar](#)

# CQM Issue Tracker

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



The CQM issue tracker is a tool for the following:

- Tracking and providing feedback on eCQMs
- Entering issues/questions related to eCQMs, to be answered by an expert
- Searching all previously entered issues for responses

For this application, a user guide is available at

[http://www.healthit.gov/sites/default/files/jira\\_powerpoint\\_v7.1.pdf](http://www.healthit.gov/sites/default/files/jira_powerpoint_v7.1.pdf)