



Critical Access Hospital Electronic Clinical Quality Measure (eCQM) Resource List

August 2023

eCQM Reporting requirements are aligned between two CMS programs:

Promoting Interoperability (PI) Program	Inpatient Quality Reporting (IQR)
<ul style="list-style-type: none"> • CAHs must participate in the Medicare PI Program to avoid a downward payment adjustment. • Hospitals are required to submit eCQM data from certified electronic health record technology (CEHRT) • eCQMs submission is one component of the Medicare PI Program • For a complete summary of PI requirements, see 2023 Promoting Interoperability Program Requirements CMS 	<ul style="list-style-type: none"> • Critical access hospitals (CAHs) are not held to the IQR program requirements but meeting the Hospital IQR Program eCQM requirement also satisfies the eCQM electronic reporting requirement for the Medicare PI Program. • CAHs are not included in the CMS eCQM data validation process.

Calendar Year (CY) 2023 eCQM Reporting Requirements:

- All four quarters of CY 2023
- Four measures:
 - Safe Use of Opioids – Concurrent Prescribing (mandatory)
 - Self-select Three (3) of the thirteen [available eCQMs](#) for each quarter
- Submission period deadline: **February 29, 2024**

Submission Process:

Data must be submitted through the Hospital Quality Reporting (HQR) Secure Portal as any combination of the following:

- Report QRDA Category I files with patients meeting the initial patient population of applicable measure(s).
- Zero denominator declarations.
- Case threshold exemptions (≤ 5 cases in the reporting quarter).



Available eCQMs:

Short Name	Available Measures by Reporting Year	CY 2023	CY 2024
ED-2	Median Admit Decision Time to ED Departure Time for Admitted Patients	X	
VTE-1	Venous Thromboembolism Prophylaxis	X	X
VTE-2	Intensive Care Unit Venous Thromboembolism Prophylaxis	X	X
PC-05	Exclusive Breast Milk Feeding	X	
STK-2	Discharged on Antithrombotic Therapy	X	X
STK-3	Anticoagulation Therapy for Atrial Fibrillation/Flutter	X	X
STK-5	Antithrombotic Therapy By End of Hospital Day 2	X	X
STK-6	Discharged on Statin Medication	X	
ePC-02	Cesarean Birth*	X	Required
ePC-07	Severe Obstetric Complications*	X	Required
HH-01	Hospital Harm—Severe Hypoglycemia	X	X
HH-02	Hospital Harm—Severe Hyperglycemia	X	X
HH-ORAE	Hospital Harm – Opioid-Related Adverse Events		X
GCMS	Global Malnutrition Composite Score		X
Safe Use of Opioids	Safe Use of Opioids – Concurrent Prescribing	Required	Required

*All hospitals, except those that do not have OB or do not perform deliveries, are required to report ePC-02 and ePC-07 starting with the CY 2024 reporting period.

eCQM Resources:

- [QualityNet eCQM Overview](#): Information on eCQM reporting requirements for the Hospital IQR Program and alignment with the PI Program requirements.
- [CY 2023 Available eCQMs](#): List of measures for hospital eCQM submission.
- [CY 2023 eCQM Submission Overview](#): Summary of program requirements, technical requirements, and tools.
- [CY 2023 eCQM QRDA 1 File Submission Checklist](#): eCQM file submission instructions for the Hospital Quality Reporting System.
- [eCQI Resource Center](#):
 - Documentation to support CY 2023 eCQM reporting activities, including measure summaries, an eCQM Implementation Checklist, eCQM eMeasure Logic Guidance, eCQM measure flows, and eCQM Technical Release Notes
 - *Note: Ensure you select the CY 2023 Reporting Period, as resources for other reporting periods are also posted.*
- **Quality Reporting Center Events**: Training and events related to eCQM reporting are typically held in last quarter of each calendar year.
 - Events from previous years can be found at: [eCQM Events on Demand](#)

Changes Coming!

Public Reporting

- CMS announced they would start public reporting of eCQM data beginning with CY 2021 data.
- CY 2021 and 2022 data is available in the [CMS Provider Data Catalog](#), and has been included on the [Inpatient Hospital Preview reports](#) since January 2023, but the data is not currently publicly displayed on [CMS Care Compare](#).
- CMS will announce the public display of eCQM data on [CMS Care Compare](#) at a future date.
- Hospitals will have the opportunity to review their data before it is made public during a 30-day preview period.

Increased Reporting Requirements

- In CY 2024, the number of eCQMs required for submission will increase to six, with two maternal health-related measures required for hospitals with labor and delivery services.
- For information on CY 2023 and 2024 year requirements: [FY 2023 IPPS/LTCH PPS Final Rule Overview for Hospital Quality Programs](#) (Quality Reporting Center Recorded Event- Sept. 1, 2022)
- Three additional eCQMs will be available for reporting starting in CY 2025:
 - Hospital Harm – Pressure Injury
 - Hospital Harm – Acute Kidney Injury
 - Excessive Radiation Dose or Inadequate Image Quality for Diagnostic Computed Tomography (CT) in Adults

Hybrid Hospital-Wide Readmission (HWR) and Hospital-Wide Mortality (HWM) Measures

- A hybrid measure uses both claims data and core clinical data elements from the electronic health records (EHR) for measure calculation.
- Voluntary reporting for the HWR and HWM measures is available in 2023. Reporting will be mandatory under the Hospital IQR Program starting in 2024. The measures will be publicly reported beginning in 2025 (based on the 2024 submission).
 - Next voluntary data submission deadline: **October 2, 2023**, for hospitalizations between July 1, 2022, through June 30, 2023.
 - Hospitals that voluntarily report will receive a hospital-specific report in spring 2024.
 - For details: [Submitting Voluntary Hybrid Measure Data](#) (Quality Reporting Center Recorded Event – August 11, 2023)

Outpatient eCQMs

- CMS recently adopted the first eCQM in the Outpatient Quality Reporting (OQR) Program:
 - OP-40: Appropriate Treatment for ST-Segment Elevation Myocardial Infarction (STEMI) Patients in the Emergency Department (ED)
 - Specifications are available on the ECQI Resource Center: [Outpatient Quality Reporting eCQMs](#)
- As part of OQR, for PPS facilities, reporting of OP-40 is voluntary for CY2023, and mandatory for CY 2024. Reporting of the OP-40 eCQM does not count towards the required eCQM reporting for the Promoting Interoperability Program.

Additional Resources

- [CMS Promoting Interoperability Program Requirements](#)
- [eCQM Extraordinary Circumstance Extensions/Exemptions \(ECE\) Clarifications](#)