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

**Updated December 2022**

*This list is updated periodically to reflect updates and new resources.*

## eCQM Reporting requirements are aligned between two CMS programs

| Promoting Interoperability (PI) Program | Inpatient Quality Reporting (IQR) |
|---|---|
| • CAHs must participate in the Medicare PI Program to avoid a downward payment adjustment.<br>• Hospitals are required to submit eCQM data from certified electronic health record technology (CEHRT)<br>• eCQMs submission is one component of the Medicare PI Program: CY 2022 eCQM Fact Sheet<br>• For a complete summary of PI requirements, see 2022 Medicare Promoting Interoperability Program Requirements \| CMS | • 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.<br>• CAHs are not included in the CMS eCQM data validation process. |

## Calendar Year (CY) 2022 eCQM Reporting Requirements:

- Three self-selected quarters of CY 2022
- Four measures:
  - Safe Use of Opioids – Concurrent Prescribing (mandatory)
  - Self-select Three (3) of the nine available eCQMs for each of the three self-selected quarters.
- Submission period deadline: **February 28, 2023.**

## 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** *(anticipated)*.

## 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.

**Available eCQMs:**

| Short Name | Available Measures by Reporting Year | CY 2022 | CY 2023 | CY 2024 |
|---|---|---|---|---|
| ED-2 | Median Admit Decision Time to ED Departure Time for Admitted Patients | X | X | |
| VTE-1 | Venous Thromboembolism Prophylaxis | X | X | X |
| VTE-2 | Intensive Care Unit Venous Thromboembolism Prophylaxis | X | X | X |
| PC-05 | Exclusive Breast Milk Feeding | X | X | |
| STK-2 | Discharged on Antithrombotic Therapy | X | X | X |
| STK-3 | Anticoagulation Therapy for Atrial Fibrillation/Flutter | X | X | X |
| STK-5 | Antithrombotic Therapy By End of Hospital Day 2 | X | X | X |
| STK-6 | Discharged on Statin Medication | X | 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 | 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 2022 Available eCQMs: List of measures for hospital eCQM submission.
- CY 2022 eCQM Submission Overview: Summary of program requirements, technical requirements, and tools.
- eCQM QRDA 1 File Submission Checklist: eCQM file submission instructions for the Hospital Quality Reporting System.
- eCQI Resource Center:
  - Documentation to support CY 2022 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 2022 Reporting Period, as resources for other reporting periods are also posted.*

- **Quality Reporting Center Events:** Materials and recordings from training and events related to eCQM reporting. Available events include (additional recordings will be added as they are made available):
  - [CY 2022 eCQM reporting Tools and FAQs for the Hospital IQR Program and Medicare Promoting Interoperability Program](#), Recorded December 19, 2022
  - [CY 2022 eCQM Reporting and Data Submission Process](#), Recorded November 29, 2022
  - [Reviewing CY 2022 eCQM Reporting Resources for the Hospital IQR Program and Medicare Promoting Interoperability Program](#), Recorded October 24, 2022
  - [Resources for Reporting FY 2024 (CY 2022) eCQM and Hybrid HWR Measure Data](#), Recorded May 25, 2022
  - [Hospital IQR Program Requirements for CY 2022 Reporting](#), Recorded February 28, 2022 (eCQM information starts on slide 30)

## Changes Coming!
### Public Reporting
- CMS has announced they will start public reporting of eCQM data beginning with CY 2021 data.
- CY 2021 and CY 2022 data will be displayed on the [Provider Data Catalog](#), with the release of CY 2021 data anticipated in January 2023. 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- September 1, 2022

### Hybrid Hospital-Wide Readmissions Measure
- A hybrid measure uses both claims data and core clinical data elements from the electronic health records (EHR) for measure calculation.
- Voluntary reporting will be available in 2022 and 2023. Reporting will be mandatory under the Hospital IQR Program starting in 2024. The measure will be publicly reported beginning in 2025 (based on the 2024 submission).
  - Initial voluntary data submission deadline: **September 30, 2022,** for hospitalizations between July 1, 2021, through June 30, 2022.
  - Hospitals that voluntarily report will receive a hospital-specific report in spring 2023. For details: [Navigating the Voluntary Hybrid HWR Measure Data Submission Process](#) (Quality Reporting Center Recorded Event – August 5, 2022)

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