## Critical Access Hospital eCQM Resource List

### Updated January 15, 2020

**Note:** Resources included are those currently available as of January 15, 2020, and focus on Calendar Year 2019 reporting requirements. This list is updated periodically to reflect updates and new materials released by the Centers for Medicare & Medicaid Services (CMS).

# I. Understand eCQM Reporting requirements Inpatient Quality Reporting (IQR)

• 2019: Submit four of the 15 <u>available eCQMs</u> for one self-selected calendar quarter. *Data due* 03/02/2020. Note: Critical access hospitals (CAHs) are not held to the IQR program requirements, but meeting the Hospital IQR Program eCQM requirement also satisfies the CQM electronic reporting requirement for the Medicare Promoting Interoperability Program.

#### **Promoting Interoperability Program (formerly known as the Medicare EHR Incentive Program)**

• 2019: Eligible hospitals (EH) and CAHs must report eCQMs as aligned with the CMS IQR requirements (four of the eligible eCQMs for one self-selected calendar quarter), using Health Information Technology (IT) certified to the 2015 Edition of the ONC certification standards. Attestation is no longer an option except in circumstances where electronic reporting is not feasible. (In prior years, CAHs could attest to meet this requirement). Data due 03/02/2020. Note: ED-3 is available to report for the Medicare Promoting Interoperability Program; however, because it is an outpatient measure, it is not applicable for the Hospital IQR Program.

#### II. Review eCQM Resources

- QualityNet eCQM Overview: Information on eCQM reporting requirements for the Hospital IQR Program and alignment with the Promoting Interoperability Program requirements.
- <u>CY 2019 eCQM Submission Overview</u>: Summary of program requirements, technical requirements, and tools from the CMS Quality Reporting Center.
- <u>CY 2019 Available eCQMs</u>: List of measures for hospital eCQM submission.
- Quality Reporting Center Recorded Events: Materials and recordings from training and events related to eCQM reporting. Available recordings include:
  - CY 2019 eCQM Reporting Tips and Tools for the Hospital IQR and Promoting Interoperability Programs
  - o CMS QRDA Category I Implementation Guide Changes for CY 2019 Hospital Quality Reporting
  - o FY 2019 IPPS/LTCH PPS Final Rule: Overview of eCQM Reporting and Promoting Interoperability Programs
  - O Submitting CY 2019 eCQM Data Using CMS' Next Generation Hospital Quality Reporting System

    Note: For CY 2019 reporting hospitals can use either the legacy system, or the newly released Next

    Generation User Interface. More information on the new system is available here: eCQM Next

    Generation of Hospital Quality Reporting Navigation Guide: Fall 2019

#### III. Prepare IT and data

• **Health IT**: Health Information Technology (IT) certified to the <u>2015 Edition of the ONC certification</u> standards and certified to report all 15 eCQMs

- **Data Files:** Use any combination of QRDA Category I files, zero denominator declarations, and/or case threshold exemptions
  - o Technical Specifications and Resources for eCQM Reporting on QualityNet. Includes:
    - CMS Implementation Guide for QRDA Category I Hospital Quality Reporting Implementation Guide for 2019
    - 2019 CMS QRDA I Schematrons and Sample Files for Hospital Quality Reporting
  - o eCQM Electronic Specifications on eCQI Resource Center
    - Technical documentation is available for download to support CY 2019 eCQM reporting activities, including an eCQM Implementation Checklist, eCQM eMeasure Logic Guidance, eCQM measure flows, and eCQM Technical Release Notes.
      Note: Select the CY 2019 Reporting Period, as CY 2020 resources are also posted.
- **Submission Portal:** Ensure your facility has a QualityNet Secure Portal account, and the EHR Data Upload Role has been assigned. Contact the <u>QualityNet Helpdesk</u> for assistance (<u>qnetsupport@hcqis.org</u>, (866) 288-8912).

#### IV. Submit Test and Production Files via QualityNet

Use the Pre-Submission Validation Application (PSVA) for submitting a test file to check for accuracy and issues, and the production checklist (submission file) for final submission once issues are resolved.

- 1. Follow instructions from this resource to access the PSVA tool and submit test files: <u>CY 2019 Preparation Checklist – Test</u>
- 2. Upload files per instructions on checklist and online
- 3. Review files for omissions, errors, and work with vendor to resolve them
  - o EHR Hospital Reports Available in QualityNet Secure Portal
  - Quality Reporting Document Architecture (QRDA) Category I Conformance Statement Resource
- 4. Resubmit test file until no errors or omissions occur. Contact <u>Quality Net Help Desk</u> for unresolved issues (qnetsupport@hcqis.org, (866) 288-8912)
- 5. Follow instructions from this resource to complete final submission: CY 2019 Preparation Checklist Production

#### **Additional Resources**

- CMS Promoting Interoperability Program Requirements
- eCQM Issues Tracker
- eCQM Extraordinary Circumstance Extensions/Exemptions (ECE) Clarifications
- <u>Pioneers in Quality Portal</u>: Supported by Joint Commission program to assist hospitals on their journey towards eCQM adoption. Includes education, tools, and resources.
  - Expert to Expert Webinar Series: In-depth review of CQL expression language for specific measures. *Note: These resources are available free of charge, but registration is required to view.*

#### **Looking towards 2020 reporting**

For CY 2020, the number of available eCQMs for reporting has been reduced from 15 to 8. Hospitals are still required to submit 4 of the available measures for a self-selected calendar quarter. For more information:

- <u>FY 2020 IPPS/LTCH PPS Final Rule Overview for Hospital Quality Programs</u> Details on CY 2020 and 2021 eCQM reporting requirements are on slides 11 18.
- <u>eCQM Electronic Specifications on eCQI Resource Center</u> (Select the CY 2020 Reporting Period)