

HIMSS¹⁹ CHAMPIONS OF HEALTH UNITE

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Balancing Value & Burden: CMS Electronic Quality Reporting



Session #199, February 14, 2019

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Conflict of Interest

Michelle Schreiber, MD

Centers for Medicare & Medicaid Services

Has no real or apparent conflicts of interest to report.

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Debbie Krauss, MS BSN RN, Nurse
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Agenda

- Introduction
- eCQM Strategy Project
 - Timeline of Activities
 - Approach to Learn Stakeholder Experiences
 - Overview of Burdens and Recommendations
 - Initiatives underway to increase value and reduce burden
 - Collaborative Measure Development Workspace
 - Data Element Repository
 - Demonstration
 - Resources
- Question & Answer Session

Learning Objectives

- Learn how CMS has engaged with stakeholders to understand the burden associated with measure implementation and electronic quality reporting.
- Identify initiatives underway to increase the value and reduce burden associated with measure development, implementation, and reporting.
- Understand how the Collaborative Measure Development Workspace can help improve value through increased stakeholder engagement and transparency into the development process.



Introduction

- **Primary goal of Administration:**
Remove obstacles that get in the way of the time clinicians spend with their patients
- **Patients Over Paperwork**
 - Shows CMS's commitment to patient-centered care and improving beneficiary outcomes
 - Includes several major tasks aimed at reducing burden for clinicians
 - Motivates CMS to evaluate its regulations to see what could be improved



A New Approach to Meaningful Outcomes

What is Meaningful Measures Initiative?

- Launched in 2017, the purpose of the Meaningful Measures initiative is to:
- Improve outcomes for patients
- Reduce data reporting burden and costs on clinicians and other health care providers
- Focus CMS's quality measurement and improvement efforts to better align with what is most meaningful to patients



eCQM Strategy Project

Problem Statement and Project Scope

Problem Statement

- Providers participating in CMS quality and value-based purchasing programs have shared challenges they experience related to the **complexity and high burden of electronic clinical quality measure implementation, data capture, and reporting.**

Project Scope

- **Measure Development** process from concept to the MUC list
- **Electronic Clinical Quality Reporting** requirements and processes from eCQM implementation to submission
- **Tools for Development and Reporting**



eCQM Strategy Project Timeline and Activities



eCQM Strategy Project **Approach to Learn Stakeholder Experiences**

- Training completed by User-Centered Design Experts
- Focus on engaging directly with hospitals, providers, and other stakeholders to:
 - Hear their experiences
 - Understand what is working well
 - Understand where there are opportunities for improvement
- Journey mapping to visualize the provider processes and help identify gaps, moments of frustration/delight, etc., and thus lead to insights for improvement



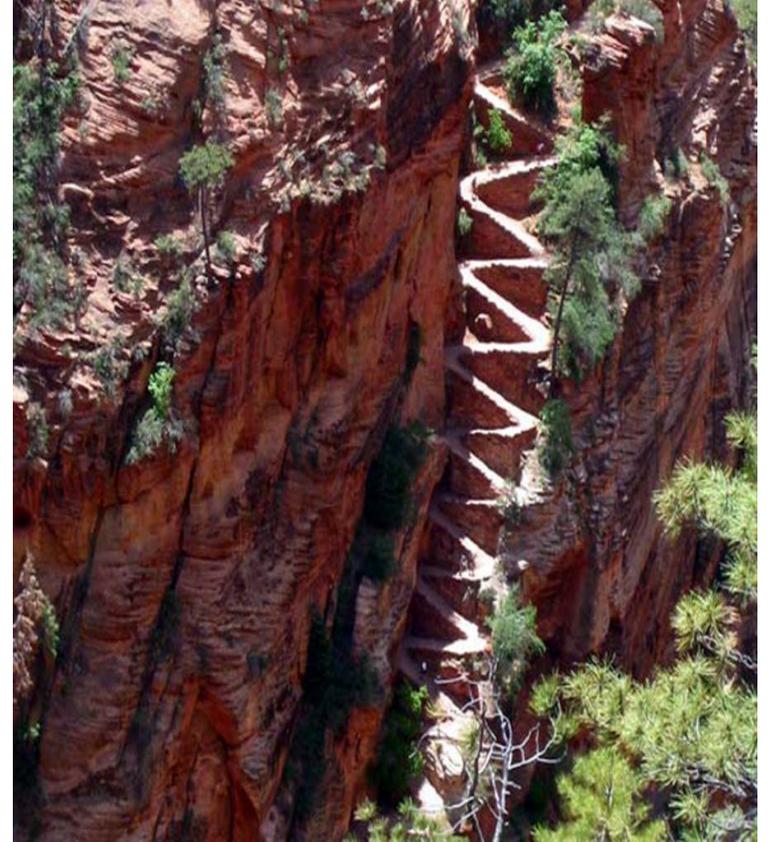
eCQM Strategy Project Approach to Learn Stakeholder Experiences

- Engaged with the following stakeholders:
 - Clinicians
 - Hospitals
 - Measure developers
 - Health IT vendors
 - Data submission vendors
 - CMS measure, policy-related, & Information Systems Group (ISG) staff
 - ONC
- Engagement venues: site visits, listening sessions, face to face discussions at CMS, CMS Quality Conference, ONC Annual Meeting, and HIMSS 2018
- Focus on experiences and processes of stakeholders
- Review of current state processes within CMS



Walters Wiggles ZION

"I think I can, I think I can!?!?!?"

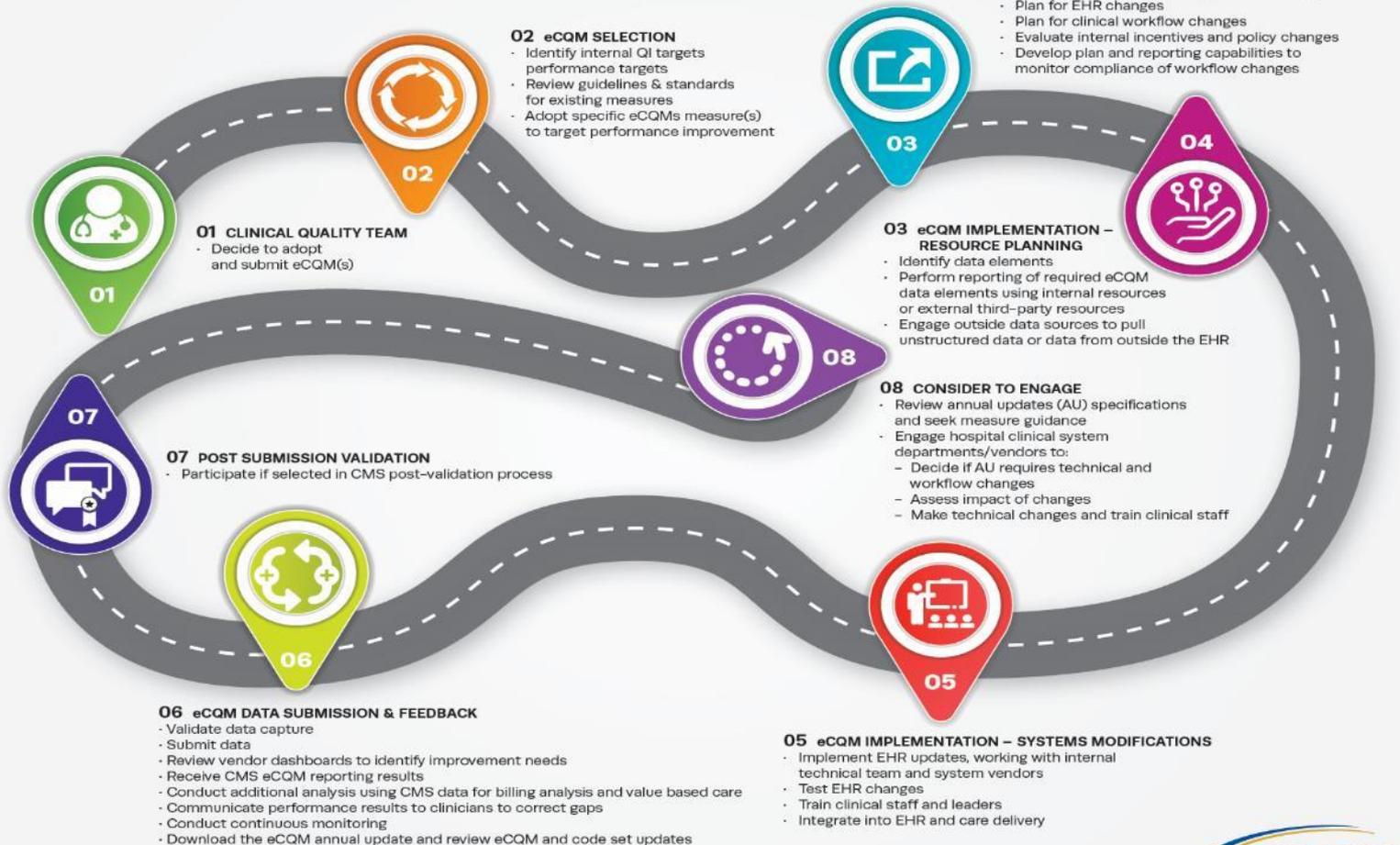


Success!! The Relaxing Descent



Hospital eCQM Inpatient Quality Reporting Journey

The Hospital experience utilizing electronic Clinic Quality Measures (eCQM) in the Inpatient Quality Reporting Program.



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eCQM STRATEGY RECOMMENDATIONS

ALIGNMENT

- eCQM reporting requirements across CMS program care settings
- eCQM specifications, value sets, and data collection

COMMUNICATION, EDUCATION, AND OUTREACH

- Coordinated education and outreach campaigns to learn from stakeholders and share CMS program information
- Measure-level webinars
- Clear eCQM guidance, plain language, and improved website usability

EHR CERTIFICATION PROCESS

- eCQM certification aligned with CMS reporting requirements



VALUE

- Quality dashboard best practice collaboration between providers and CMS
- Data element definitions

DEVELOPMENT PROCESS

- Collaborative Measure Development Workspace
- Data element repository
- Clinically feasible workflow for data capture
- Feasibility testing for new data elements

IMPLEMENTATION AND REPORTING PROCESSES

- Clear eCQM specifications, tools, and resources
- Feasible data elements
- Submission of data elements and eCQMs with FHIR and APIs
- Use of eCQM standards to support interoperability
- Consolidated pre-submission validation testing tools
- eCQM attribution research and pilots

eCQM Strategy Project General Recommendations from CCSQ Leadership

- Happy with the work: given green light across the board to implement recommendations
- Implement a user-centered design focus is essential in all efforts
- Collaborate and convene with stakeholders and across programs for data submission which will result in most efficient and effective processes
- Work collectively across CMS groups to breakdown barriers and achieve aligned goals
- Conduct continuous improvement for communication, education, and outreach to ensure stakeholders can easily understand program requirements



eCQM Strategy Project Progress on Implementing Recommendations

- Measure Development
 - Convened a working session in September with measure development stakeholders to review related recommendations
 - Measure developers launched initiative to increase focus on clinical workflows
 - Exploring value and expanded use of hybrid measures, which are clinical quality measures that link patient-level electronically specified EHR data to CMS claims data for the purpose of enhancing risk adjustment.
- Measure Implementation and Reporting
 - Measure-level webinars planned for both Eligible Clinicians and Eligible Hospitals to kicked off in October and run through February
 - Convened a CMS working session in October to discuss CMS program opportunities
 - Planned Collaborative Measure Development (CMD) Workspace
 - Improvements to Inpatient Quality Reporting System are in progress¹⁷



eCQM Strategy Project Progress on Implementing Recommendations (Cont.)

- Follow-up with External Groups
 - Held discussions with non-CMS organizations to share recommendations that were within their respective oversight. Those organizations include:
 - Health IT Vendors
 - National Library of Medicine/Value Set Authority Center
 - National Quality Forum
 - Electronic Health Records Association
- CMS Activities to Support Implementers
 - Working on improvements to QPP and IQR Help Desks
 - Delivered webinars to assist providers with understanding program requirements, Quality Reporting Document Architecture (QRDA) Implementation Guide and troubleshooting, eCQM data validation, available tools and resources, and Pre-Submission Validation Application (PSVA) overview



eCQM Strategy Project **What's new for Measure Development, Implementation, & Reporting?**

Burden Reduction Using Electronic Data

- CCSQ is testing Fast Healthcare Interoperability Resources (FHIR®) for Quality Measurement
 - Da Vinci Project
 - Alignment with the community around adoption of FHIR, including Providers, ONC, Health IT Vendors, Payers
 - HL7 Connectathons
 - Testing the submission of quality data using FHIR
 - Testing the calculation of eCQMs using FHIR
 - Application Programming Interfaces (API) to create a seamless exchange of quality data from an EHR
 - FHIR-based Certification processes and tools



Inputs into eCQM Concepts

Meaningful Measures Areas
CMS Measures Inventory Tool (CMIT)
Measures Under Consideration (MUC) List

- Perform assessment against Meaningful Measures Areas
- Perform assessment against CMS eCQMs under development
- Check if already exists in similar measure

- Communicate regular updates on measures under development

SUBSCRIBE
TO CMD
WORKSPACE
UPDATES

**Collaborative
Measure
Development
Workspace**

NEW eCQM
CLINICAL
WORKFLOW

- Provide a shared development workspace
- Provide access to measure workflow documentation
- Capture comments on evolving eCQMs
- Allow sites to express interest in testing

- Provide access to test results
- Provide access to all important test attributes
- Provide access to a test measure scorecard

eCQM TEST
RESULTS

eCQM DATA
ELEMENT
REPOSITORY

- Provide access to eCQM data elements
- Provide access to value set codes
- Allow users to access use cases related to a data element(s)
- Access data element test results
- Provide comments related to a data element(s) for measures under development



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SUBSCRIBE TO CMD WORKSPACE UPDATES

Collaborative Measure Development Workspace

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Live on December 28, 2018

eCQM TEST RESULTS

- Provide access to test results
- Provide access to all important test attributes
- Provide access to a test measure scorecard

eCQM DATA ELEMENT REPOSITORY

- Provide access to eCQM data elements
- Provide access to value set codes
- Allow users to access use cases related to a data element(s)
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CMD Workspace: Definition

- Hosted on the Electronic Clinical Quality Improvement (eCQI) Resource Center
- Set of interconnected resources, tools, and processes for eCQMs
- Promotes transparency and better interaction across stakeholder communities interested in developing and implementing more harmonized, accurate, and meaningful electronic clinical quality measures.
- Provides access to the eCQM Data Element Repository, an online, searchable tool that provides all the data elements associated with eCQMs used in CMS Quality Reporting Programs.



Collaborative Measure Development Workspace

Demonstration

<https://ecqi.healthit.gov/collaborative-measure-development>

Questions?

Debbie Krauss, MS BSN RN, Nurse,
Centers for Medicare & Medicaid Services

Deborah.Krauss@cms.hhs.gov

To share feedback or get involved, please email:

eCQMStrategy@groups.mitre.org

Please don't forget to complete your session evaluation.



Collaborative Measure Development Workspace

Backup Slides



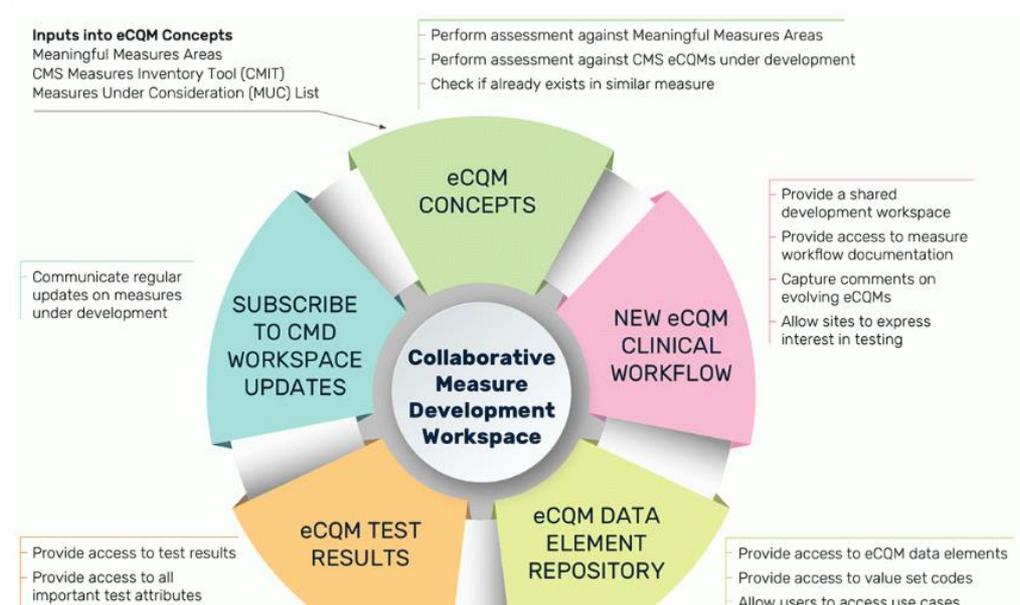
Collaborative Measure Development (CMD) Workspace

[About](#)

[eCQM Data Element Repository](#)

CMD Workspace

The CMD Workspace brings together a set of interconnected resources, tools, and processes to promote transparency and better interaction across stakeholder communities that develop, implement, and report electronic clinical [quality measures](#) & [eCQM](#).



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- [Special Measures Initiative \(SMI\) Center](#)
- [Measures Under Consideration \(MUC\)](#)

Available Components

[eCOM[®] Data Element Repository \(DERep[®]\)](#)

An online, searchable eCOM Data Element Repository provides all the data elements associated with published and tested [eCOMs[®]](#), as well as the definitions for each data element. This information will improve clarity for those implementing eCOMs.

[Visit the eCOM Data Element Repository](#)

Future Components

eCQM Concepts

The eCQM Concept Workspace will give users the ability to submit new measure concepts, align new measures with Meaningful Measures criteria, and identify whether similar measures exist. Feedback can help guide the [measure developer[®]](#) to refine the concept and purpose behind a new measure to better suit the needs of the quality measurement reporting community.

New eCQM Clinical Workflow

Groups will be able to access all the measure development tools in the Collaborative Development Workspace and work in an iterative manner to perform measure development activities. Experts interested in a measure, measure endorsers, and other stakeholders can provide early comments, clinical workflow concerns, and guidance during the development lifecycle. Lessons learned from previous measure development efforts can help developers address implementation-specific issues that arise during development.

eCQM Test Results

The Draft Measure Test Results will offer transparency into the feasibility, reliability and [validity[®]](#) testing, a testing scorecard, and additional characteristics of test sites, including types of [health.IT[®]](#) used, number of test sites included, and rating of each data element in the testing process for each measure.

Subscribe to CMD Workspace Updates

CMD Workspace participants will be able to sign up for alerts on the progress of evolving measures within a specialty area.

[Request space membership](#)

Last Updated: January 8, 2019



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Collaborative Measure Development (CMD) Workspace

[About](#)[eCQM Data Element Repository](#)

eCQM® Data Element Repository (DERep®)

The eCQM Data Element Repository (DERep) provides all the data elements associated with published and tested [eCQMs](#) for use in CMS quality reporting programs as well as the definitions and clinical focus for each data element. An end user can sort information by data element, eCQM, union, [ODM attribute](#), or [ODM category](#) and datatype data element.

The data elements provided are for use by [Eligible Professional/Eligible Clinician](#) and [Eligible Hospital/Critical Access Hospital](#) eCQMs for 2019 CMS quality reporting and performance periods. Information contained within the DERep is derived from the eCQM [specifications](#), Quality Data Model, Version 5.3, and the [Value Set](#) Authority Center ([VSAC](#)). Each eCQM data element includes information about the value set, the [ODM datatype](#), and the [ODM attributes](#) used by that data element. *Note: The data element descriptions may be updated in the DERep as compared to the VSAC. These descriptions will ultimately be in sync with the descriptions contained in the VSAC in Spring 2019.*

Filter Options	Search	Sort by	Order		
- All Data Elements - ▾	<input type="text"/>	Title ▾	Asc ▾	<input type="button" value="Apply"/>	<input type="button" value="Reset"/>

Select a filter or search by term and click Apply to see results. Filter definitions are below:

[eCQM® Data Element](#)

The eCQM data elements provide a listing of all data elements used in [eCQMs](#) for 2019 CMS quality reporting and performance periods. Each eCQM data element includes information about the [value set](#), the [ODM datatype](#), and the [ODM attributes](#) used by that data element. Note: [DERep](#) data element descriptions may not yet be updated in the [VSAC](#). The DERep and VSAC data element descriptions will be synchronized in Spring 2019.

eCQM

The eCQM filter currently provides a list of 24 eCQMs in CMS programs - 16 [Eligible Hospital/Critical Access Hospital](#) and 8 [Eligible Professional/Eligible Clinician](#) measures. The individual eCQM pages provide the measure rationale and a list of all the eCQM data elements associated with the measure and information about each data element. Additional Eligible Professional/Eligible Clinician measures will be added in Spring 2019.

eCQM Unions

The eCQM Unions filter provides a listing of the eCQM unions represented in the Clinical Quality Language (CQL) of the [eCQM specifications](#). For each

Filter Options

- All Data Elements - 

Search

Sort by

Title 

Order

Asc 

Apply

Reset

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eCQM Unions

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Medical Induction Medication:

- ["Medication, Administered": "Oxytocin"] union ["Medication, Administered": "Dinoprostone"]

Note: The eCQM unions shown do not include the COL logic criteria to fulfill them, or elements present in the embedded logic of the union. For each eCQM union, the eCQMs that use the union are listed. **Please refer to the respective eCQM [specification®](#) for complete logic criteria associated with the unions.**

[QDM Attribute®](#)

The QDM Attributes filter provides a listing of all the ODM attribute definitions that can be reused in QDM datatype definitions in eCQMs for 2019 CMS quality reporting and performance periods. Each attribute includes specific details about [QDM®](#) data elements including the ODM definition and where it is used within data elements.

[QDM Categories® and QDM Datatypes®](#)

The QDM Categories and ODM Datatypes filter provides a listing of all ODM categories and datatypes used in eCQMs for 2019 CMS quality reporting and performance periods. For each [ODM category®](#) and datatype, the page provides the respective definition along with the available attribute groupings for the selected ODM datatype. A ODM Category consists of a single clinical concept identified by a value set or direct reference code. A ODM Datatype is the context in which each ODM Category is used to describe a part of the clinical care process.



Filter Options

Search

Sort by

Order

- All Data Elements -

Title

Asc

Apply

Reset

- All Data Elements -

Apply to see results. Filter definitions are below:

eCQM Data Elements

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eCQM Unions

EH/CAH eCQMs

EP/EC eCQMs

ODM Attributes

ODM Categories and ODM Datatypes

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[ODM Categories](#) and [ODM Datatypes](#)

The ODM Categories and ODM Datatypes filter provides a listing of all ODM categories and datatypes used in eCQMs for 2019 CMS quality reporting and performance periods. For each [ODM category](#) and datatype, the page provides the respective definition along with the available attribute groupings for the selected ODM datatype. A ODM Category consists of a single clinical concept identified by a value set or direct reference code. A ODM Datatype is the context in which each ODM Category is used to describe a part of the clinical care process.



CMS113v7 – Elective Delivery (PC-01)

[DERep Home Page](#)**Rationale:**

Elective Delivery (PC-01). For almost 3 decades, the American College of Obstetricians and Gynecologists (ACOG) and the American Academy of Pediatrics (AAP) have had in place a standard requiring 39 completed weeks gestation prior to ELECTIVE delivery, either vaginal or operative (ACOG, 1996). A survey conducted in 2007 of almost 20,000 births in HCA hospitals throughout the U.S. carried out in conjunction with the March of Dimes at the request of ACOG revealed that almost 1/3 of all babies delivered in the United States are electively delivered with 5% of all deliveries in the U.S. delivered in a manner violating ACOG/AAP guidelines. Most of these are for convenience, and result in significant short term neonatal morbidity (neonatal intensive care unit admission rates of 13- 21%) (Clark et al., 2009). According to Glantz (2005), compared to spontaneous labor, elective inductions result in more cesarean births and longer maternal length of stay. The American Academy of Family Physicians (2000) also notes that elective induction doubles the cesarean delivery rate. Repeat elective cesarean births before 39 weeks gestation also result in higher rates of adverse respiratory outcomes, mechanical ventilation, sepsis and hypoglycemia for the newborns (Tita et al., 2009).

Data Elements

[Assessment Performed: Estimated Gestational Age at Delivery](#)

Value Set Description from VSAC:

Clinical Focus: This set of values contains 'observable entities' that represent the estimated gestational age at delivery.

Data Element Scope: The intent of this data element is to identify the fetus's estimated length of gestation at delivery. Using the Quality Data Model, this particular element will map to the 'Assessment' category.

Inclusion Criteria: Include SNOMED CT codes that identify the estimated gestational age at delivery.

Exclusion Criteria: None

Constrained to codes in the Estimated Gestational Age at Delivery value set ([2.16.840.1.113762.1.4.1045.26](#))

ODM Datatype - Assessment Performed: Data elements that meet criteria using this datatype should document completion of the assessment indicated by the ODM category and its corresponding value set. Timing: The time the assessment is completed; Author dateTime.

[Assessment Performed: Labor](#)

Value Set Description from VSAC:

Clinical Focus: This set of values represent the concept of labor.

Data Element Scope: The intent of this data element is to identify that a patient is in labor. Using the Quality Data Model, this particular element will map to the 'Physical Exam' category.

Inclusion Criteria: Include SNOMED CT codes that identify onset and establishment of labor.

Exclusion Criteria: Exclude codes describing later stages of labor and latent labor.

Constrained to codes in the Labor value set ([2.16.840.1.113883.3.117.1.7.1.281](#))

ODM Datatype - Assessment Performed: Data elements that meet criteria using this datatype should document completion of the assessment indicated by the ODM category and its corresponding value set. Timing: The time the assessment is completed; Author dateTime.



Diagnosis: Cornual Ectopic Pregnancy

[DERep Home Page](#)

Value Set Description from VSAC:

CLINICAL FOCUS: This set of values contains diagnosis that represent a cornual ectopic pregnancy.

DATA ELEMENT SCOPE: The intent of this data element is to identify a cornual ectopic pregnancy.

INCLUSION CRITERIA: Includes codes representing cornual ectopic pregnancy.

EXCLUSION CRITERIA: Excludes codes representing ectopic pregnancies other than cornual ectopic pregnancies, such as tubal ectopic pregnancies.

Constrained to codes in the Cornual Ectopic Pregnancy value set ([2.16.840.1.113762.1.4.1110.12](#))

QDM Datatype - [Diagnosis](#)

Data elements that meet criteria using this datatype should document the Condition/Diagnosis/Problem and its corresponding value set. The onset dateTime corresponds to the implicit start dateTime of the datatype and the abatement dateTime corresponds to the implicit stop dateTime of the datatype. If the abatement dateTime is not present, then the diagnosis is considered to still be active. When this datatype is used with timing relationships, the criterion is looking for an active diagnosis for the time frame indicated by the timing relationships. Timing: The Prevalence Period references the time from the onset date to the abatement date.

Used By:

[CMS13v7](#)

Included in Unions:

[History of Uterine Surgery Diagnosis Union](#)

QDM Attributes

[Prevalence Period](#)

Value Set Description from VSAC:

Prevalence Period is the time from onset dateTime to abatement dateTime.

Diagnosis

[DERep Home Page](#)

QDM Definition:

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Direct Descendants:

[Diagnosis: Atrial Fibrillation/Flutter](#)

[Diagnosis: Cancer](#)

[Diagnosis: Cardiopulmonary arrest](#)

[Diagnosis: Conditions Possibly Justifying Elective Delivery Prior to 39 Weeks Gestation](#)

[Diagnosis: Cornual Ectopic Pregnancy](#)

[Diagnosis: Dementia & Mental Degenerations](#)

[Diagnosis: Diabetic Retinopathy](#)

[Diagnosis: Galactosemia](#)

[Diagnosis: Live Birth Newborn Born in Hospital](#)

[Diagnosis: Obstetrics](#)

[Diagnosis: Obstetrics VTE](#)

[Diagnosis: Pain Related to Prostate Cancer](#)

[Diagnosis: Perforation of Uterus](#)

[Diagnosis: Primary Open-Angle Glaucoma](#)

[Diagnosis: Prostate Cancer](#)

[Diagnosis: Single Live Born Newborn Born in Hospital](#)

[Diagnosis: Uterine Rupture](#)

[Diagnosis: Uterine Window](#)

[Diagnosis: Venous Thromboembolism](#)

QDM Attributes

[Anatomical Location Site](#)

Value Set Description from VSAC:

The anatomical site or structure where the diagnosis/problem manifests itself (a). The anatomical site or structure that is the focus of the action represented by the datatype (b).

[Author Datetime](#)

Value Set Description from VSAC:

The time the data element was entered into the clinical software. Note, some datatypes include both Relevant Time and Author date attributes. The



History of Uterine Surgery Diagnosis Union

[DERep Home Page](#)

Used By:
[CMS113v7](#)

Data Elements contained within the Union

[Diagnosis: Cornual Ectopic Pregnancy](#)

Value Set Description from VSAC:

Clinical Focus: This set of values contains diagnosis that represent a cornual ectopic pregnancy.

Data Element Scope: The intent of this data element is to identify a cornual ectopic pregnancy.

Inclusion Criteria: Includes codes representing cornual ectopic pregnancy.

Exclusion Criteria: Excludes codes representing ectopic pregnancies other than cornual ectopic pregnancies, such as tubal ectopic pregnancies.

Constrained to codes in the Cornual Ectopic Pregnancy value set ([2.16.840.1.113762.1.4.1110.12](#)).

ODM Datatype - Diagnosis: Data elements that meet criteria using this datatype should document the Condition/Diagnosis/Problem and its corresponding value set. The onset dateTime corresponds to the implicit start dateTime of the datatype and the abatement dateTime corresponds to the implicit stop dateTime of the datatype. If the abatement dateTime is not present, then the diagnosis is considered to still be active. When this datatype is used with timing relationships, the criterion is looking for an active diagnosis for the time frame indicated by the timing relationships. Timing: The Prevalence Period references the time from the onset date to the abatement date.

[Diagnosis: Perforation of Uterus](#)

Value Set Description from VSAC:

Clinical Focus: This set of values contains diagnoses that represent perforation of the uterus.

Data Element Scope: The intent of this data element is to identify perforation of the uterus.

Inclusion Criteria: Includes codes that identify perforation of the uterus.

Exclusion Criteria: Excludes codes identifying perforation to body structures other than the uterus.

Constrained to codes in the Perforation Of Uterus value set ([2.16.840.1.113762.1.4.1110.14](#)).

ODM Datatype - Diagnosis: Data elements that meet criteria using this datatype should document the Condition/Diagnosis/Problem and its corresponding value set. The onset dateTime corresponds to the implicit start dateTime of the datatype and the abatement dateTime corresponds to the implicit stop dateTime of the datatype. If the abatement dateTime is not present, then the diagnosis is considered to still be active. When this datatype is used with timing relationships, the criterion is looking for an active diagnosis for the time frame indicated by the timing relationships. Timing: The Prevalence Period references the time from the onset date to the abatement date.

[Diagnosis: Uterine Rupture](#)

