December 15 CMS Quality Vendor Workgroup

December 15, 2016
12:00 – 1:30 p.m. ET
<table>
<thead>
<tr>
<th>Topic</th>
<th>Speaker</th>
</tr>
</thead>
</table>
| ONC Update: Health IT Support for Zika Response  | James Daniel  
Office of the National Health IT Coordinator, HHS                  |
| Hospital Inpatient Quality Reporting (HIQR)      | Artrina Sturges  
Hospital Inpatient Value, Incentives, and Quality Reporting (VIQR), CMS |
| Program Update                                   |                                                                        |
| eCQI Resource Center Integration with USHIK      | Shanna Hartman and Edna Boone  
Division of Electronic and Clinician Quality, CMS                       |
| MACRA Section 101(f) Patient Relationship Codes  | Theodore Long  
Center for Clinical Standards and Quality, CMS                        |
| Questions                                        |                                                                        |
ONC Update: Health IT Support for Zika Response

James Daniel

Office of the National Coordinator for Health Information Technology, HHS
Related Resources

CDC-ONC Community of Practice Related to Zika


ONC Federal Advisory Committee (FACA) Task Force

Hospital Inpatient Quality Reporting (HIQR) Program Update

Artrina Sturges, EdD

Hospital Inpatient Value, Incentives, and Quality Reporting (VIQR) Outreach and Education Support Contractor
Qualitynet.org Updates – electronic Clinical Quality Measure (eCQM) Reporting Overview

• Website updates went live November 30
• All sections updated, including a new tab for Electronic Health Record (EHR) email notifications

**Qualitynet**

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**Electronic Clinical Quality Measures (eCQMs) Overview**

Beginning in the Calendar Year (CY) 2013, hospitals were provided the opportunity to voluntarily submit data for electronic clinical quality measures (eCQMs). These quality measures were developed specifically to allow an electronic health record (EHR) system certified to the Office of the National Coordinator (ONC) standards to capture, report, calculate, and submit the data.

Effective CY 2016, hospitals are required to electronically report clinical quality measures as a portion of the Hospital Inpatient Quality Reporting (IQR) and the EHR Incentive Programs.

Hospitals that successfully submit eCQM data to meet IQR Program requirements will also fulfill the Medicare EHR Incentive Program requirement for electronic reporting of eCQMs with one submission.

There are additional program requirements for the Hospital IQR and the Medicare and Medicaid EHR Incentive programs. For more information, refer to the Hospital Inpatient Quality Reporting Program pages of QualityNet and the EHR Incentive Programs pages of the CMS website. See Technical Specifications for technical guides, measure specifications information, and program resources to support successful program reporting.

Note: Critical Access Hospitals (CAHs) are encouraged, but not required, to participate in the Hospital IQR Program. For CY 2016/Fiscal Year (FY) 2016, CAHs are required to participate in the EHR Incentive Program. Review the EHR Incentive Programs information on the CMS.gov website for more information.
December 2016 EHR ListServe Distributions

• **12/1:** CMS Issues Additional Guidance Regarding the Hospital IQR Program Extraordinary Circumstances Extension/Exception (ECE) Policy for Calendar Year (CY) 2016 eCQM Reporting

• **12/1:** Reminder to Complete the Quality Reporting Data Architecture (QRDA) eCQM Submission Customer Satisfaction Survey

• **12/6:** Pioneers in Quality Webinar Expert to Expert Series – eSTK-2, eSTK-3, and eSTK-5 (December 13, 2016)

• **12/8:** Pioneers in Quality Webinar Expert to Expert Series eCAC-3 & eEHDI-1a (December 15, 2016)

**NOTE:** Archived EHR listserves are posted within 30 days to the QualityNet.org website in the eCQM section under the Email Notifications tab.

To ensure you’re receiving program updates, please visit the QualityNet.org website and locate the Join ListServes tab on the left side of the main page.
Upcoming Presentations and Archived Webinar Materials

Upcoming Presentations:
   January Provider Webinar – details coming soon!

Archived Webinar Materials:
   The Joint Commission, *Pioneers in Quality Expert-to-Expert Series* (please visit TJC website for archived presentation materials)

   Provider Webinar, *Common Errors for QRDA Category I Test & Production Files – Session II* (please visit the [QualityReportingCenter.com](http://QualityReportingCenter.com) or [QualityNet.org](http://QualityNet.org) for webinar materials)

**NOTE:** To register for upcoming webinars and to locate archived IQR-EHR Incentive Program Alignment webinar materials, please visit [QualityReportingCenter.com](http://QualityReportingCenter.com).

To register for upcoming webinars and to review archived Pioneers in Quality, Expert-to-Expert presentations, please visit [JointCommission.org](http://JointCommission.org).
Frequently Asked Question – Changes to ECE Criteria for CY 2016 eCQM Reporting

**Question:** Our hospital is considering submitting an ECE form for CY 2016 eCQM reporting. We are transitioning our EHR in early 2017 and have reviewed the criteria before, but were told CMS may have changed the criteria because a number of us are in the midst of changing EHR vendors. Is this true, and where can we locate the supporting documentation?

**Answer:** CMS recognizes that some hospitals continue to face significant challenges to comply with the new eCQM reporting requirements, including the time and financial burdens of switching EHR vendors and upgrading EHR systems. During this period of transition, CMS understands the possible need for additional exemptions and will consider granting ECE requests related to EHR vendor transitions and upgrades.

Hospitals who previously submitted ECEs and were denied based on the prior criteria are welcome to resubmit an updated ECE with documentation for reconsideration due to the policy clarification enacted by CMS November 22, 2016. The deadline for submitting ECEs remains April 1, 2017 for CY 2016 eCQM reporting.

**NOTE:** When eCQM reporting becomes more established and familiar to hospitals, CMS intends to treat an EHR vendor change as part of a hospital’s routine business operations and no longer an extraordinary circumstance for the purposes of granting an ECE. Stakeholders would first be informed through the issuance of additional guidance when that transition occurs.

This information was updated November 22, 2016, and is published as part of the eCQM ECE Policy Clarification Questions and Answers document posted on the [Qualitynet.org website](https://www.qualitynet.org) and the [QualityReportingCenter.com website](https://qualityreportingcenter.com).
Resources  (1 of 2)

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

Qnetsupport@hcqis.org

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

**eCQM General Program Questions – IQR Program & Policy**

https://cms-ip.custhelp.com

(866) 800-8765 or (844) 472-4477, 7 a.m. – 7 p.m. CT, Monday through Friday (except holidays)
Resources (2 of 2)

EHR (Meaningful Use) Information Center – EHR Incentive Program
(888) 734-6433, 7:30 a.m. – 6:30 p.m. CT, Monday through Friday

JIRA – Office of the National Coordinator for Health Information Technology (ONC) Project Tracking System
http://oncprojecttracking.org

Resource to submit questions and comments regarding:
  o Issues identified with eCQM logic
  o Clarification on specifications
  o The Combined QRDA Implementation Guide for 2016
eCQI Resource Center – USHIIK Integration
Shanna Hartman and Edna Boone
Office of the National Coordinator for Health Information Technology, HHS
Electronic Clinical Quality Improvement (eCQI) Resource Center

The one-stop shop for the most current resources to support Electronic Clinical Quality Improvement.

Getting Started
- A gentle introduction to understanding eCQI and this Resource Center

eCQMs
- The who, what, where, and why of eCQMs

Education
- A selection of educational materials and resources to broaden your eCQI knowledge

Latest News
- eCQM Receiving System Accepting Production Files Beginning October 1, 2016
- 2016 Change Review Process (CRP) for eCQMs

Upcoming Events
- FY 2017 IPPS Final Rule: IQR EHR Incentive Program Requirements Webinar
- Cypress Testing Tool “Tech Talk”

One-stop shop for the most current resources to support electronic clinical quality improvement
## EH Measures – Navigation to USHIK

### eCQM Resource Center

The one-stop shop for the most current resources to support Electronic Clinical Quality Improvement.

[Image of CMS logo]

### eCQM Resource Center Features
- About
- FAQ
- Glossary of eCQI Terms
- eCQI Resource Center Contact Information
- Search by Category

#### Topic Areas
- eCQM
- EH Measures
- EP Measures
- eCQM Tools
- eCQI Standards
- CQL
- HQMF
- QDM
- QRDA
- Kaizen
- Education
- Implementers
- Engage

### eCQMs for the 2017 Reporting Period

<table>
<thead>
<tr>
<th>Measure Name</th>
<th>Short Name</th>
<th>CMS ID</th>
<th>Domain</th>
<th>NQF ID</th>
<th>USHIK Version Links</th>
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<tbody>
<tr>
<td>Anticoagulation Therapy for Atrial Fibrillation/Flutter</td>
<td>Stroke3</td>
<td>CMS71v6</td>
<td>Effective Clinical Care</td>
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<td>CMS72v5</td>
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<td>Aspirin Prescribed at Discharge</td>
<td>AMIR2</td>
<td>CMS100v5</td>
<td>Effective Clinical Care</td>
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<td>Stroke10</td>
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<td>Fibrinolytic Therapy Received Within 30 Minutes of Hospital Arrival</td>
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<td>CMS60v5</td>
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<td>Healthy Term Newborn</td>
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<td>CMS185v5</td>
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</table>

[Table continues]
USHIK Integration – Unified Medical Language System (UMLS) Authentication

The page you are trying to view is only accessible to users who are authenticated to UMLS using their UTS account credentials.

If you do not have a UTS account, please select the link below to learn about and create an account.

How to License and Access the Unified Medical Language System™ (UMLS™) Data

If you need assistance with your UTS account, please select the following link to visit the NLM Customer Support page:

Please enter your UMLS username / password below.

Username: [ ] Password: [ ] Login

Bypass Authentication

* You may choose to bypass UMLS authentication if you do not have UMLS credentials.
If you bypass authentication, you can see details related to those artifacts which do not require authentication.
**USHIK Integration – eCQM Version Comparison**

### Electronic Clinical Quality Measure Comparison

<table>
<thead>
<tr>
<th>Action</th>
<th>eCQM Name</th>
<th>Organization</th>
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<tbody>
<tr>
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#### Metadata Attribute

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<th>CMS7V6s, April 2016 EH</th>
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<td>January 1, 200X through December 31, 200X</td>
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<td>The Joint Commission</td>
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<td>Measure Steward</td>
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<td>Measure Developer</td>
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<td>Description</td>
<td>Ischemic stroke patients with atrial fibrillation/flutter who are prescribed anticoagulation therapy at hospital discharge.</td>
<td>Ischemic stroke patients with atrial fibrillation/flutter who are prescribed anticoagulation therapy at hospital discharge.</td>
</tr>
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<td>Copyright</td>
<td>IHI 2009-2012 International Health Terminology Standards Development Organization. All rights reserved.</td>
<td>IHI 2009-2012 International Health Terminology Standards Development Organization. All rights reserved.</td>
</tr>
</tbody>
</table>
Electronic Clinical Quality Improvement (eCQI) Resource Center

» Provide feedback to ecqi-resource-center@hhs.gov.
» Submit key eCQI events for highlighting on the eCQI Resource Center.
» Add a link to the eCQI Resource Center from your website.
CMS Patient Relationship Categories

Theodore Long

Center for Clinical Standards and Quality, CMS
Patient Relationship Categories and Codes

• The Medicare Access and CHIP Reauthorization Act of 2015 (MACRA) requires that CMS share patient relationship categories and codes that will be used to attribute patients and episodes to clinicians.

• In April 2016, CMS posted a draft list of patient relationship categories and solicited public comment on the categories.

• In December 2016, CMS posted a new document to gain additional stakeholder input to these categories and codes ahead of the required final posting in April 2017.
Patient Relationship Categories and Codes

The following categories have been posted for public comment on CMS.gov:

1. Continuous Broad
2. Continuous Focused
3. Episodic Broad
4. Episodic Focused
5. Only as ordered by another clinician
Healthcare Common Procedure Coding System (HCPCS) Modifiers

• Medicare, Medicaid, and private health insurers use HCPCS procedure and modifier codes for claims processing.

• CMS has not yet applied for HCPCS Modifiers, we are soliciting public comments on whether these would be an appropriate mechanism for this work.

• Procedure codes would identify the services clinicians provide for CMS.
Patient Relationship Categories and Codes: Comments

- Comments on the categories and codes must be submitted by January 6, 2017 and can be submitted [here](#).
Questions?

cmsqualityteam@ketchum.com
Thank you!
The next CMS Quality Vendor Workgroup will be held on Thursday, January 19 from 12:00 – 1:30 p.m. ET.