Centers for Medicare & Medicaid Services

2026 Electronic Clinical Quality Measures for Hospitals - Inpatient

May 2025

ADDITIONAL INFORMATION REGARDING ELECTRONIC CLINICAL QUALITY MEASURES (ECQMS) FOR CMS QUALITY REPORTING PROGRAMS FOR HOSPITALS - INPATIENT

The table below titled, "Electronic Clinical Quality Measures for Hospitals - Inpatient," includes up-to-date information for Electronic Clinical Quality Measures (eCQMs) that will be used to electronically report 2026 clinical quality measure data for the Centers for Medicare & Medicaid Services (CMS) quality reporting programs. Measures are not eligible for 2026 reporting unless and until they are proposed and finalized through CMS notice-and-comment rulemaking for each applicable program. Subsequent updates will be provided in a new version of this table with a summary of the updates located in a version history table at the end of the document.

Please note, because the measure stewards updated the titles and descriptions for the eCQMs in this table, they may not match the information provided on the consensus-based entity (CBE)'s Submission Tool and Repository (STAR) Measure Database. Measures that do not have a CBE number are not currently endorsed.

This table does not include the measures listed under the 2026 program candidate eCQM filter of the eCQI Resource Center.

CMS eCQM ID	CBE #	Measure Title	Measure Description	Numerator Statement	Denominator Statement	Measure Type	Measure Set Identifier
CMS71v15	Not Applicable	Anticoagulation Therapy for Atrial Fibrillation/Flutter	Ischemic stroke patients with atrial fibrillation/flutter who are prescribed or continuing to take anticoagulation therapy at hospital discharge	Inpatient hospitalizations for patients prescribed or continuing to take anticoagulation therapy at hospital discharge	Inpatient hospitalizations for patients with a principal diagnosis of ischemic stroke, and a history of atrial ablation, or current or history of atrial fibrillation/flutter	Process	STK-3
CMS72v14	Not Applicable	Antithrombotic Therapy by End of Hospital Day 2	Ischemic stroke patients administered antithrombotic therapy by the end of hospital day 2	Inpatient hospitalization for patients who had antithrombotic therapy administered the day of or day after hospital arrival	Equals Initial Population: Inpatient hospitalizations (non-elective admissions) for patients age 18 and older, discharged from inpatient care with a principal diagnosis of ischemic stroke, ending during the measurement period	Process	STK-5
CMS104v14	Not Applicable	Discharged on Antithrombotic Therapy	Ischemic stroke patients prescribed or continuing to take antithrombotic therapy at hospital discharge	Inpatient hospitalizations for patients prescribed or continuing to take antithrombotic therapy at hospital discharge	Equals Initial Population: Inpatient hospitalizations (non-elective admissions) for patients age 18 and older, discharged from inpatient care with a principal diagnosis of ischemic stroke, ending during the measurement period	Process	STK-2

CMS eCQM ID	CBE #	Measure Title	Measure Description	Numerator Statement	Denominator Statement	Measure Type	Measure Set Identifier
CMS108v14	Not Applicable	Venous Thromboembolism Prophylaxis	This measure assesses the number of patients who received Venous Thromboembolism (VTE) prophylaxis or have documentation why no VTE prophylaxis was given between the day of arrival to the day after hospital admission or surgery end date for surgeries that end the day after hospital admission	Inpatient hospitalizations for patients who received VTE prophylaxis: - between the day of arrival and the day after hospital admission - the day of or the day after surgery end date (for surgeries that end the day after hospital admission) Inpatient hospitalizations for patients who have documentation of a reason why no VTE prophylaxis was given: - between the day of arrival and the day after hospital admission - the day of or the day after surgery end date (for surgeries that end the day after hospital admission)	Equals Initial Population: Inpatient hospitalizations for patients age 18 and older, discharged from hospital inpatient acute care without a diagnosis of venous thromboembolism (VTE) or obstetrics that ends during the measurement period	Process	VTE-1
CMS190v14	Not Applicable	Intensive Care Unit Venous Thromboembolism Prophylaxis	This measure assesses the number of patients who received Venous Thromboembolism (VTE) prophylaxis on the day of or the day after the initial admission (or transfer) to the Intensive Care Unit (ICU) or on the day of or the day after surgery end date for surgeries that end the day after ICU admission (or transfer) or have documentation why no VTE prophylaxis was given between the day of arrival and the day after ICU admission (for patients directly admitted as inpatients to the ICU) or on the day of or the day after surgery end date for surgeries that end the day after ICU admission (or transfer)	Inpatient hospitalizations for patients who received VTE prophylaxis: - the day of or the day after ICU admission (or transfer) - the day of or the day after surgery end date (for surgeries that end the day after ICU admission or transfer) Inpatient hospitalizations for patients who have documentation of a reason why no VTE prophylaxis was given: - between the day of arrival and the day after ICU admission (for patients directly admitted as inpatients to the ICU) - the day of or the day after surgery end date (for surgeries that end the day after ICU admission or transfer)	Inpatient hospitalizations for patients directly admitted or transferred to ICU during the hospitalization	Process	VTE-2
CMS334v7	0471e	Cesarean Birth	Nulliparous patients with a term, singleton baby in a vertex position delivered by cesarean birth	Inpatient hospitalizations for patients who deliver by cesarean section	Inpatient hospitalizations for nulliparous patients who delivered a live term singleton newborn >= 37 weeks' gestation	Outcome	PC-02

CMS eCQM ID	CBE #	Measure Title	Measure Description	Numerator Statement	Denominator Statement	Measure Type	Measure Set Identifier
CMS506v8	3316e	Safe Use of Opioids - Concurrent Prescribing	Proportion of inpatient hospitalizations for patients 18 years of age and older prescribed, or continued on, two or more opioids or an opioid and benzodiazepine concurrently at discharge	Inpatient hospitalizations where the patient is prescribed two or more opioids or an opioid and benzodiazepine at discharge	Equals Initial Population: Inpatient hospitalizations that end during the measurement period, where the patient is 18 years of age and older at the start of the encounter and prescribed one opioid and/or benzodiazepine at discharge	Process	N/A
CMS816v5	3503e	Hospital Harm - Severe Hypoglycemia	The measure assesses the number of inpatient hospitalizations for patients age 18 and older who were administered at least one hypoglycemic medication during the encounter and who suffer the harm of a severe hypoglycemic event during the encounter	Inpatient hospitalizations where a severe hypoglycemic event occurred during the encounter. A severe hypoglycemic event is: - A glucose test with a result less than 40 mg/dL AND - A hypoglycemic medication was administered within 24 hours before the start of the severe hypoglycemic event (i.e., the glucose test with a result less than 40 mg/dL) AND - There was no subsequent repeat test for glucose with a result greater than 80 mg/dL within five minutes or less from the start of the initial glucose test with a result less than 40 mg/dL Only one qualifying severe hypoglycemic event is counted in the numerator, and only one severe hypoglycemic event is counted per encounter. The 24-hour and 5-minute timeframes are based on the time the glucose was drawn, as this reflects the time the patient was experiencing that specific glucose level.	Equals Initial Population: Inpatient hospitalizations that end during the measurement period for patients age 18 and older and at least one hypoglycemic medication administration starts during the encounter	Outcome	HH-Hypo

CMS eCQM ID	CBE #	Measure Title	Measure Description	Numerator Statement	Denominator Statement	Measure Type	Measure Set Identifier
CMS819v4	3501e	Hospital Harm - Opioid-Related Adverse Events	This measure assesses the number of inpatient hospitalizations for patients age 18 and older who have been administered an opioid medication outside of the operating room and are subsequently administered a non-enteral opioid antagonist outside of the operating room within 12 hours, an indication of an opioid-related adverse event	Inpatient hospitalizations where a non-enteral opioid antagonist administration starts during the hospitalization outside of the operating room and 12 hours or less following an opioid medication administered outside of the operating room. The route of administration of the opioid antagonist must be by intranasal spray, inhalation, intramuscular, subcutaneous, or intravenous injection. Only one numerator event is counted per encounter.	Equals Initial Population: Inpatient hospitalizations that end during the measurement period for patients age 18 and older and at least one opioid medication administration starts during the hospitalization outside of the operating room	Outcome	HH-ORAE
CMS826v3	3498e	Hospital Harm - Pressure Injury	The measure assesses the number of inpatient hospitalizations for patients aged 18 and older who suffer the harm of developing a new stage 2, stage 3, stage 4, deep tissue, or unstageable pressure injury	Inpatient hospitalizations for patients with a new deep tissue pressure injury (DTPI) or stage 2, 3, 4, or unstageable pressure injury, as evidenced by any of the following: A DTPI or stage 2, 3, 4, or unstageable pressure injury diagnosis not present on admission as indicated by a present on admission indicator of N or U. A DTPI found on exam greater than 72 hours after the start of the encounter. A stage 2, 3, 4 or unstageable pressure injury found on exam greater than 24 hours after the start of the encounter. Only one harm (new qualifying pressure injury) is counted per hospitalization.	Equals Initial Population: Inpatient hospitalizations that end during the measurement period for patients aged 18 and older	Outcome	HH-PI

CMS eCQM ID	CBE #	Measure Title	Measure Description	Numerator Statement	Denominator Statement	Measure Type	Measure Set Identifier
CMS832v3	3713e	Hospital Harm - Acute Kidney Injury	The measure assesses the number of inpatient hospitalizations for patients age 18 and older who have an acute kidney injury (AKI) stage 2 or greater that occurred during the encounter. AKI stage 2 or greater is defined as a substantial increase in serum creatinine value, or by the initiation of kidney dialysis (continuous renal replacement therapy (CRRT), hemodialysis, or peritoneal dialysis).	Inpatient hospitalizations for patients who develop AKI stage 2 or greater during the encounter, as evidenced by: A subsequent increase in serum creatinine value at least 2 times higher than the lowest serum creatinine value, and the increased value is greater than the highest sex-specific normal value for serum creatinine. Or: Kidney dialysis (CRRT, hemodialysis, or peritoneal dialysis) initiated more than 48 hours after the start of the encounter. Evidence of a 2 times increase in serum creatinine is not required. Only one harm is counted per encounter.	Equals Initial Population: Inpatient hospitalizations that end during the measurement period for patients 18 years of age or older without an obstetrical or pregnancy related condition, with a length of stay of 48 hours or longer, and who had at least one serum creatinine value after 48 hours from the start of the hospitalization	Outcome	HH-AKI
CMS871v5	3533e	Hospital Harm - Severe Hyperglycemia	This measure assesses the number of inpatient hospital days for patients age 18 and older with a hyperglycemic event (harm) per the total qualifying inpatient hospital days for that encounter	Inpatient hospitalizations with a hyperglycemic event within the first 10 days of the encounter minus the first 24 hours, and minus the last period before discharge from the hospital if less than 24 hours. A hyperglycemic event is defined as: - A day with at least one glucose value >300 mg/dL. OR - A day where a glucose test and result was not found, and it was immediately preceded by two contiguous, consecutive days where at least one glucose value during each of the two days was >=200 mg/dL.	Equals Initial Population: Inpatient hospitalizations for patients age 18 and older that end during the measurement period, as well as either: - A diagnosis of diabetes that starts before the end of the encounter; or - Administration of at least one dose of insulin or any hypoglycemic medication that starts during the encounter; or - Presence of at least one glucose value >=200 mg/dL at any time during the encounter.	Outcome	HH-Hyper

CMS eCQM ID	CBE #	Measure Title	Measure Description	Numerator Statement	Denominator Statement	Measure Type	Measure Set Identifier
CMS986v5	3592e	Malnutrition Care Score	This measure assesses the percentage of eligible encounters of adults aged 18 years and older at the start of the eligible encounter during the measurement period, with a length of stay equal to or greater than 24 hours, who received optimal malnutrition care where care performed was appropriate to the patient's level of malnutrition risk and severity. Malnutrition care best practices recommend that for each eligible encounter, adult inpatients are (1) screened for malnutrition risk or for a dietitian referral order to be placed, (2) assessed by a registered dietitian (RD) or registered dietitian nutritionist (RDN) to confirm findings of malnutrition risk, and if identified with a "moderate" or "severe" malnutrition status in the current performed malnutrition assessment, (3) receive a "moderate" or "severe" malnutrition diagnosis by a physician or eligible clinician as defined by the Centers for Medicare & Medicaid Services (CMS), and (4) have a current nutrition care plan performed by an RD/RDN.	Measure Observation: This measure is constructed of four clinically eligible components that are aggregated as an arithmetic average of eligible encounters and expressed as a percentage. The four populations used to calculate the four components may differ and the measure observations for the four components do not need to be performed sequentially.	Measure/Initial Population: Eligible encounters during the measurement period with length of stay of 24 hours or more among individuals 18 years of age and older at the start of the inpatient encounter	Intermediate Outcome	MCS

CMS eCQM ID	CBE #	Measure Title	Measure Description	Numerator Statement	Denominator Statement	Measure Type	Measure Set Identifier
CMS1017v2	4120e	Hospital Harm - Falls with Injury	This ratio measure assesses the number of inpatient hospitalizations where at least one fall with a major or moderate injury occurs among the total qualifying inpatient hospital days for patients age 18 years and older	Inpatient hospitalizations where the patient has a fall that results in a major or moderate injury during the encounter. The diagnosis of a major or moderate injury must not be present on admission.	Equals Initial Population: Inpatient hospitalizations for patients age 18 and older with a length of stay less than or equal to 120 days that ends during the measurement period	Outcome	HH-FI

CMS eCQM ID	CBE #	Measure Title	Measure Description	Numerator Statement	Denominator Statement	Measure Type	Measure Set Identifier
CMS1028v4	Not Applicable	Severe Obstetric Complications	Patients with severe obstetric complications that occur during the inpatient delivery hospitalization	Population Criteria 1, Numerator: All Severe Obstetric Complications (SOC). Inpatient hospitalizations for patients with severe obstetric complications (not present on admission that occur during the current delivery encounter) including the following: - Severe maternal morbidity diagnoses (see list below) - Severe maternal morbidity procedures (see list below) - Discharge disposition of expired Population Criteria 2, Numerator: Delivery encounters with SOC excluding encounters where transfusion was the only SOC. Inpatient hospitalizations for patients with severe obstetric complications (not present on admission that occur during the current delivery encounter) including the following: - Severe maternal morbidity diagnoses (see list below) - Severe maternal morbidity procedures (see list below) - Discharge disposition of expired Severe Maternal Morbidity Diagnoses: - Cardiac - Hemorrhage - Renal - Respiratory - Sepsis - Other OB - Other Medical Severe Maternal Morbidity Procedures: - Blood transfusion - Conversion of cardiac rhythm - Hysterectomy - Temporary tracheostomy - Ventilation	Population Criteria 1, Denominator: Inpatient hospitalizations for patients delivering stillborn or live birth with >= 20 weeks, 0 days gestation completed Population Criteria 2, Denominator: Same denominator population as Population Criteria 1.	Outcome	PC-07

CMS eCQM ID	CBE #	Measure Title	Measure Description	Numerator Statement	Denominator Statement	Measure Type	Measure Set Identifier
CMS1074v3	3663e	Excessive Radiation Dose or Inadequate Image Quality for Diagnostic Computed Tomography (CT) in Adults (Facility IQR)	This measure provides a standardized method for monitoring the performance of diagnostic CT to discourage unnecessarily high radiation doses, a risk factor for cancer, while preserving image quality. This measure is expressed as a percentage of CT exams that are out-of-range based on having either excessive radiation dose or inadequate image quality relative to evidence-based thresholds based on the clinical indication for the exam. All diagnostic CT exams of specified anatomic sites performed in hospital inpatient care settings are eligible. This eCQM requires the use of additional software to access primary data elements stored within radiology electronic health records and translate them into data elements that can be ingested by this eCQM.	Calculated CT Size-Adjusted Dose greater than or equal to a threshold specific to the CT Dose and Image Quality Category, or Calculated CT Global Noise value greater than or equal to a threshold specific to the CT Dose and Image Quality Category	Equals Initial Population (All CT scans in adults aged 18 years and older at the start of the measurement period that have a CT Dose and Image Quality Category and were performed during an inpatient hospitalization that ends during the measurement period) with a CT Dose and Image Quality Category, a Calculated Global Noise value, and a Calculated CT Size-Adjusted Dose value	Intermediate Outcome	IP-ExRad

CMS eCQM ID	CBE #	Measure Title	Measure Description	Numerator Statement	Denominator Statement	Measure Type	Measure Set Identifier
CMS1218v2	4130e	Hospital Harm - Postoperative Respiratory Failure	This measure assesses the number of elective inpatient hospitalizations for patients aged 18 years and older without an obstetrical condition who have a procedure resulting in postoperative respiratory failure (PRF)	Elective inpatient hospitalizations for patients with postoperative respiratory failure as evidenced by any of the following: Criterion A: Mechanical ventilation (MV) initiated within 30 days after first OR procedure, as evidenced by: A.1. Intubation that occurs outside of a procedural area and within 30 days after the end of the first OR procedure of the encounter. or A.2. MV that occurs outside of a procedural area within 30 days after the end of the first OR procedure of the encounter and is preceded by a period of non-invasive oxygen therapy between the end of the OR procedure and the MV occurrence, and without a subsequent OR procedure between the non-invasive oxygen therapy and the MV occurrence. or Criterion B: MV with a duration of more than 48 hours after the first OR procedure, as evidenced by: B.1. Extubation that occurs outside of a procedural area more than 48 hours after the end of an OR procedure and within 30 days after the end of the first OR procedure, and is not preceded by a period of non-invasive oxygen therapy or a subsequent OR procedure between the end of the OR procedure and the extubation occurrence. or B.2 Mechanical ventilation that occurs between 48 and 72 hours after the end of an OR procedure and within 30 days after the end of the first OR procedure, and is not preceded by a non-invasive oxygen therapy or a subsequent OR procedure between the end of the OR procedure and the MV occurrence.	Equals Initial Population: Elective inpatient hospitalizations with no preceding emergency department visit that end during the measurement period for patients aged 18 and older without an obstetrical condition and at least one surgical procedure was performed within the first 3 days of the encounter	Outcome	HH-RF

VERSION HISTORY

Date	Comments
May 2025	Original publication