

Quality Reporting Programs

- CQMs are in use across over 20 different programs

Hospital Quality	Physician Quality Reporting	PAC and Other Setting Quality Reporting	Payment Model Reporting	“Population” Quality Reporting
<ul style="list-style-type: none"> • Medicare and Medicaid EHR Incentive Program • PPS Exempt Cancer Hospitals • Inpatient Psychiatric Facilities • Inpatient Quality Reporting • HAC Reduction Program • Outpatient Quality Reporting • Ambulatory Surgical Centers 	<ul style="list-style-type: none"> • Medicare and Medicaid EHR Incentive Program • PQRS • eRx Quality Reporting 	<ul style="list-style-type: none"> • Inpatient Rehabilitation Facility • Nursing Home Compare Measures • LTCH Quality Reporting • Hospice Quality Reporting • Home Health Quality Reporting 	<ul style="list-style-type: none"> • Medicare Shared Savings Program • Hospital Value-based Purchasing • Physician Feedback/Value-based Modifier • ESRD QIP 	<ul style="list-style-type: none"> • Medicaid Adult Quality Reporting • CHIPRA Quality Reporting • Health insurance Exchange Quality Reporting • Medicare Part C • Medicare Part D

Why Are eCQMs Important?



CMS Quality Strategy

1. Make care safer by reducing harm caused in the delivery of care.
2. Strengthen person and family engagement and partners in their care.
3. Promote effective communication and coordination of care.
4. Promote effective prevention and treatment of chronic disease.
5. Work with communities to promote best practices in healthy living.
6. Make care affordable.

eCQMs Advance Quality Measurement

Greater
Clinical
Relevance

Lower
Provider
Burden

Improved
Measure
Robustness

Source: National Quality Forum, [Electronic Measures](#), December 2011

eCQM Development Lifecycle*

* Timelines are notional, not actual, and intended for the purposes of discussion. Measure development timelines vary based on the measure.

