

May CMS and ONC eHealth Vendor Workgroup

May 28, 2015
12:00 PM EDT

Agenda Item	Speaker
2016 IQR Hospital IPPS Proposed Rule	Cindy Tourison Division of Quality Measurement (DQM) Center for Clinical Standards and Quality (CCSQ)
EHR Incentive Programs Update <ul data-bbox="67 696 904 911" style="list-style-type: none">• Comment Period Reminder• 2016 Eligible Professionals Hardship Exception Application Reminder• CMS eHealth Biweekly Webinar Update	Beth Myers Division of Health IT Initiatives (DHIT) Center for Clinical Standards and Quality (CCSQ)
eCQM Update <ul data-bbox="67 1118 710 1218" style="list-style-type: none">• Annual Update• eCQI Resource Center Update	Molly MacHarris Quality Measurement and Value-Based Incentives Group Center for Clinical Standards and Quality (CCSQ)



2016 IQR Hospital IPPS Proposed Rule – eCQMs

Cindy Tourison, MSHI

**Program Lead of Hospital Inpatient Quality Reporting Alignment and
Value-Based Purchasing**

Center for Clinical Standards and Quality

May 26, 2015

Proposed eCQM Reporting Changes: Goals

Alignment of IQR with EHR
Incentive Program and other
quality reporting programs

Increased adoption of
electronically specified clinical
quality measures (eCQMs)

Interoperability between
EHRs and CMS data
collection systems

Reduction of reporting burden for
hospitals

Electronic collection of quality
performance information to
become a seamless component
of care delivery

Proposed eCQM Reporting Changes: Clarification

- For CY 2015/FY 2017
 - Hospitals that successfully submit the following stroke (STK) measures as eCQMs **are not required to chart-abstract** and submit STK-01 to meet Hospital IQR Program requirements for the FY 2017 payment determination:

STK-02	STK-06
STK-03	STK-08
STK-04	STK-10

- Hospitals that do not submit the specified electronic clinical quality measures **must continue to chart-abstract** and submit STK-01 as previously required
- For CY 2016/FY 2018
 - CMS has proposed to remove STK-1

Proposed eCQM Reporting Changes: EHR Incentive Program

- Continued alignment of eCQM reporting with the Hospital IQR program
- Removal of Quality Reporting Document Architecture (QRDA) Category III as a possible option
- eReporting of QRDA Category I requirement to remain
 - Accepting Attestation in Calendar Year (CY) 2016 and 2017

Proposed eCQM Reporting Changes: Hospital IQR Program

The Proposed Rule recommends that hospitals be required to submit data for 16 of the 28 available eCQMs to meet IQR program requirements starting with CY 2016/FY 2018 payment determination.

Proposed eCQM Reporting Changes: Reporting Period

CY 2016/FY 2018 eCQM Data Reporting Periods and Finalized Submission Deadlines		
CY 2016 Quarter	Reporting Period CY 2016	Proposed Submission Deadlines
1	January 1–March 31	N/A
2	April 1–June 30	N/A
3	July 1–September 30	November 30, 2016
4	October 1–December 31	February 28, 2017



What Stays the Same for eCQMs?

- Hospitals will need to submit data utilizing the most recent eCQM specifications.
 - For calendar year 2016 submissions, the May 2015 specifications will be required.
- The requirement to utilize Certified Electronic Health Record Technology (CEHRT) 2014 Edition will remain.

What Stays the Same for eCQMs?

Patient & Family Engagement

ED-1
ED-2
STK-8
CAC-3
VTE-5

Patient Safety

VTE-1
VTE-6
VTE-2
SCIP-INF-9
HTN
SCIP-INF-1a

Efficient Use of Healthcare Resources

PN-6
SCIP-INF-2a
Care Coordination
STK-10
ED-3*

Clinical Process/Effectiveness

STK-2	AMI-2	VTE-3
STK-3	AMI-7A	VTE-4
STK-4	AMI-8A	PC-05
STK-5	AMI-10	PC-01
STK-6	EHDI-1a	

- 29 available electronically specified clinical quality measures
- Twenty-eight are applicable for the IQR Program*

*ED-3 is an Outpatient measure and therefore not applicable for IQR.

Proposed eCQM Reporting Changes: Hospital IQR Program CY 2016/FY 2018 Payment Determination

- In the CY 2016/FY 2018 Proposed Rule, there are six Clinical Process Measures required for IQR.

ED-1	ED-2
PC-01	STK-4
VTE- 5	VTE-6

- There are two options for reporting these measures.
 1. Submit either one full calendar year of 2016 data (Q1–Q4) as chart-abstracted data.
 2. Electronically submit two quarters of data (Q3 and Q4) for any of the six measures along with the other eCQMs representative of the hospital's patient mix to meet the 16 eCQM program requirement.

Note: Any of the six measures that are not submitted as eCQMs will have to be chart-abstracted following program requirements.

Public Reporting of eCQMs

- The Proposed Rule recommends delaying the public reporting of eCQM data.
- Measures reported electronically would be marked with a footnote on *Hospital Compare* noting that:
 - The hospital submitted data via EHR
 - Data are being processed and analyzed
 - Data will eventually be publicly reported once it has been determined that the data are reliable and accurate

Proposed Rule Comments

- **All comments are due June 16, 2015.**
- CMS encourages submission of electronic comments.
 - To find the Proposed rule and start the comment submission process use the Federal Register link at <http://www.regulations.gov>.
- **Responses to all comments will be in the final rule to be issued August 1, 2015.**

Review the Proposed Rule

To aid in your review of the Proposed Rule, details regarding various quality reporting programs can be found on the pages listed below:

- Hospital Inpatient Quality (IQR) Program, pp. 24555–24590
- Hospital Value-Based Purchasing (VBP) Program, pp. 24498–24509
- Hospital-Acquired Conditions (HAC) Reduction Program, pp. 24509–24514
- Hospital Readmissions Reduction Program (HRRP), pp. 24488–24498
- Electronic Health Records (EHR) Incentive Program, pp. 24611–24615
- PPS-Exempt Cancer Hospital Quality Reporting (PCHQR) Program, pp. 24590–24595

Upcoming Presentations

- 2016 IQR Hospital IPPS Proposed Rule
 - Presented by Cindy Tourison and Kristen Borowski
 - Friday, May 29, 2015
 - Presented at 10:00 AM ET and 1:00 PM ET
- Register for the morning session at the following link: <https://cc.readytalk.com/r/5dzi17gn3os8&eom>
- Register for the afternoon session (repeat of the morning session) at the following link: <https://cc.readytalk.com/r/57g2qqbsik1g&eom>

Opportunities to get involved

eCQM Validation Pilot Project

- Opportunity for hospitals to work one-on-one with CMS to determine system and process readiness for eCQM submission
 - Scroll to bottom of page to view:
 - Pilot FAQs
 - Pilot Technical Solution document
 - Pilot Walkthrough and Interview document
- <https://www.qualitynet.org/dcs/ContentServer?c=Page&pagename=QnetPublic%2FPage%2FQnetTier3&cid=1140537256076>

Opportunities to Get Involved

- The Pre-Submission Validation Application (PSVA) pilot was developed to allow users to:
 - Validate QRDA Category I files in real time
 - Correct errors prior to submission
- PSVA supports the submission of data files to the CMS hospital eCQM receiving system directly from the tool

Opportunities to Get Involved

- Requirements for participating in the PSVA pilot include a hospital's ability to:
 - Create QRDA Cat I files based on the HL7 base standard for QRDA
 - Download and install the PSVA on the facility's infrastructure
 - Attend a 30-minute PSVA Pilot Participant Information Session in June 2015
 - Attend two 30-minute PSVA Pilot Feedback sessions in July 2015
 - Record and submit feedback on the use of PSVA tool
 - Complete testing by July 31, 2015
- Facilities interested in participating are requested to contact Stephanie Wilson by email at stephanie.wilson@hcqis.org



Thank you!

*Please share your feedback
on the Proposed Rule*

Beth Myers

EHR INCENTIVE PROGRAMS UPDATE

Reminder - Comment on Proposed Rules

- Deadlines are approaching:
 - Stage 3 Meaningful Use NPRM - **Comment by May 29**
 - <http://www.regulations.gov/#!documentDetail;D=CMS-2015-0033-0002>
 - Modifications to Meaningful Use in 2015-2017 NPRM - **Comment by June 15**
 - <http://www.regulations.gov/#!documentDetail;D=CMS-2015-0045-0001>

CMS Help Desks

- **EHR Information Center Help Desk**
 - (888) 734-6433 / TTY: (888) 734-6563
 - Hours of operation: Monday-Friday 8:30 a.m. – 4:30 p.m. in all time zones (except on Federal holidays)
- **NPPES Help Desk**
 - Visit <https://nppes.cms.hhs.gov/NPPES/Welcome.do>
 - (800) 465-3203 - TTY (800) 692-2326
- **PECOS Help Desk**
 - Visit <https://pecos.cms.hhs.gov/>
 - (866)484-8049 / TTY (866)523-4759
- **Identification & Access Management System (I&A) Help Desk**
 - PECOS External User Services (EUS) Help Desk Phone: 1-866-484-8049
 - TTY 1-866-523-4759
 - E-mail: EUSSupport@cgi.com
- **QualityNet Help Desk**
 - Available Monday – Friday; 7:00 a.m.–7:00 p.m. Central Time (CT)
 - 1-866-288-8912 / TTY: 1-877-715-6222
 - Email: Qnetsupport@hcqis.org

Eligible Professionals (EPs): 2016 EHR Hardship Exception Application Available

- **Take Action by July 1 to Avoid 2016 Medicare Payment Adjustment:**
 - Payment adjustments for EPs that did not successfully participate in the Medicare EHR Incentive Program in 2014 will begin on **January 1, 2016**
 - The hardship exception application and [instructions](#) for an [individual](#) and for [multiple](#) Medicare EPs are available on the [EHR Incentive Programs website](#).
 - If approved, the exception is valid for the 2016 payment adjustment only

Now Available Online: CMS eHealth Webinars on NPRMs

- Visit the [CMS eHealth Events](#) page to access webinar PPTs on the proposed rules for the EHR Incentive Programs
 - May 5 EHR Incentive Programs Proposed Rules Overview Webinar
 - [PDF Presentation](#)
 - [Webinar Recording](#) (Recording ID: 39WPCQ; Key: eHealth)
 - May 7 Modifications to Meaningful Use in 2015-2017 Overview Webinar
 - [PDF Presentation](#)
 - [Webinar Recording](#) (Recording ID: 8K2F25; Key: eHealth)
 - May 11 Stage 3/2015 Certification Criteria Proposed Rules Overview
 - [PDF Presentation](#)
 - [Webinar Recording](#) (Recording ID: 8BRPG4; Key: eHealth)

Register Now for the Next CMS eHealth Biweekly Webinar

Taking the Next Step with Electronic Quality Measures (eCQM 102) for Quality Reporting Programs - How to Implement Quality Measure Updates

- **Thursday, June 4, 12 - 1:30pm ET**
 - Register today:
<https://www.livemeeting.com/lrs/8000055450/Registration.aspx?pageName=4k8hcrpbgj68n6lf>
 - Questions? Email Alyssa Crawford:
acrawford@mathematica-mpr.com

Molly MacHarris
ECQM UPDATE

Updated 2014 eCQMs for 2016 Reporting Now Available

- On May 1, CMS posted the annual update for the 2014 eCQMs
- Providers will use these measures to electronically report 2016 quality data for CMS quality reporting programs, including PQRS, IQR, and the EHR Incentive Programs
- To access the measures, visit the [eCQM Library page](#)

eCQI Resource Center Update

- The 2014 eCQMs for 2016 reporting are also available on the Electronic Clinical Quality Improvement (eCQI) Resource Center, located on the HealthIT.gov website: <http://ecqi.healthit.gov>.

The screenshot shows the eCQI Resource Center website. The browser address bar displays "ecqi.healthit.gov". The page header includes the "eCQI Resource Center" logo and the tagline "The one-stop shop for the most current resources to support electronic clinical quality improvement." The CMS logo is visible in the top right corner. The main content area features a dark blue banner with the text: "The one-stop shop for the most current resources to support electronic clinical quality improvement. Learn about eCQI resources and connect with the community of professionals who are dedicated to clinical quality improvement for better health." Below this banner are two main sections: "Getting Started" and "Putting eCQMs to Work".

Getting Started
A gentle introduction to understanding electronic clinical quality improvement and measures
[More information](#)

Putting eCQMs to Work
The who, what, when, where and why of eCQMs
[More information](#)

Latest News
There are no new articles.

Upcoming Events

Jun 17 2015	QDM User Group Webinar Monthly webinar of the QDM User Group. You will need to register for the QDM User Group webinar.
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QUESTIONS?