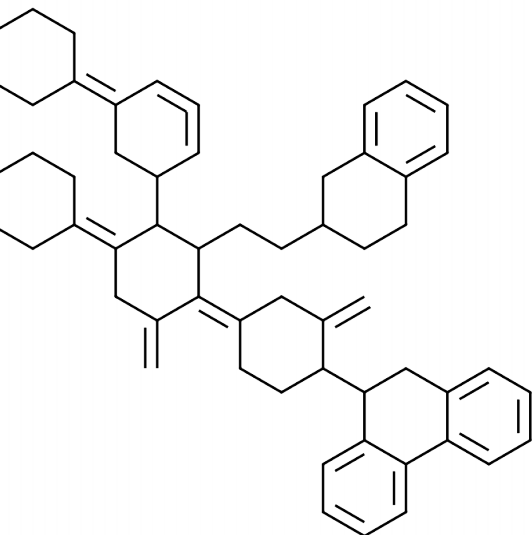




Hospital Inpatient Quality Reporting Program Submission Options for eCQM Reporting

[Calendar Year 2015]



The Electronically Specified Clinical Quality Measures (eCQM) reporting options available to meet the Hospital Inpatient Quality Reporting (IQR) Program and Medicare Electronic Health Record (EHR) Incentive Program requirements are summarized here.

For Hospital IQR Program in calendar year (CY) 2015, this is a voluntary reporting option.

If you choose to report electronically, one submission can satisfy the Medicare EHR Incentive program's CQM requirement and a PORTION of the Hospital IQR program measures required.

eCQMs for 2015

Legend: National Quality Strategy (NQS) Domains

- Population and Public Health (0)
- Efficient Use of Healthcare Resources (2)
- Patient and Family Engagement (5)
- Clinical Process/Effectiveness (14)
- Care Coordination (1)
- Patient Safety (6)

*Required for IQR

Of the 29 eCQMs that are available for EHR Incentive Program or “Meaningful Use”, 28 of those (shown below) also align with the IQR program. (ED-3 is excluded since it is an Outpatient Quality Reporting Program measure)

STK-2	STK-3	ED-1*	ED-2*
STK-4*	STK-5	VTE-1*	VTE-2*
STK-6*	STK-8*	VTE-3*	VTE-4
STK-10	PC-01*	VTE-5*	VTE-6*
AMI-2	AMI-7a*	SCIP-Inf-1a	PN-6
AMI-8a	AMI-10	SCIP-Inf-2a	SCIP-Inf-9
PC-05	HTN	CAC-3	EHDI-1a

12 of these measures are required for IQR and available as either chart abstracted measures or eCQMs.

If a hospital chooses to submit one calendar quarter (CY 2015 Q1, Q2, or Q3) as an eCQM by Nov. 30, 2015, the hospital does not need to also submit chart-abstracted data **for that measure**.

STK-2	STK-3	ED-1*	ED-2*
STK-4*	STK-5	VTE-1*	VTE-2*
STK-6*	STK-8*	VTE-3*	VTE-4
STK-10	PC-01*	VTE-5*	VTE-6*
AMI-2	AMI-7a*	SCIP-Inf-1a	PN-6
AMI-8a	AMI-10	SCIP-Inf-2a	SCIP-Inf-9
PC-05	HTN	CAC-3	EHDI-1a

Option One: eCQM Submission Only

Hospitals may use one submission to satisfy the eCQM reporting requirements for both the Hospital IQR and Medicare EHR Incentive Programs.

Hospitals that voluntarily choose to submit eCQM data must:

- Report one quarter of quality data from Quarters 1, 2 or 3 of CY 2015 during the annual submission period ending Nov. 30, 2015.
- Report data for the 16 eCQMs from the same discharge reporting quarter.
- When a hospital submits eCQMs for more than one reporting quarter, only the submission from the first quarter reported will be applied toward submission requirements.
- Submit through the QualityNet Secure Portal by Nov. 30, 2015, regardless of the reporting quarter submitted.
- Hospitals in their first year of Meaningful Use demonstration must submit all data by July 1, 2015.

Hospital IQR Program Tips	Medicare EHR Incentive Program Tips
<ul style="list-style-type: none"> • If 16 eligible measures are successfully electronically reported as QRDA-I files through QualityNet, the hospital can be considered to have fulfilled the requirements for the IQR reporting program for those specific measures. • If a hospital chooses to submit one calendar quarter (CY 2015 Q1, Q2, or Q3) as an eCQM by November 30, 2015, the hospital does not need to also submit chart-abstracted data for that measure. • If the 16 CQMs submitted electronically do not include all of the IQR-required measures, hospitals would need to manually abstract those remaining measures not submitted as eCQMs to meet the IQR program requirements. <i>NOTE: Electronically submitted data must contain one quarter of discharge data, whereas chart abstracted submission requires one year of discharge data and must meet IQR quarterly reporting deadlines.</i> 	<ul style="list-style-type: none"> • Hospitals demonstrating MU for the first time in 2015 would still be required to report CQMs by attestation for a continuous 90-day period in FY 2015 or report CQMs electronically for a 3-month CY quarter by July 1, 2015 to avoid the Medicare penalty of the subsequent year. • Submission of eCQMs does not meet the complete program requirements for the Medicare EHR Incentive Program. A complete list of program requirements is available on the CMS website • Can include submission of zero denominator declarations and/or QRDA Category 1 Release 2 data files.
Applies to BOTH programs	
<ul style="list-style-type: none"> • Submission of eCQMs does not meet the complete program requirements for the Hospital IQR Program. A complete list of Hospital IQR Program requirements is available on QualityNet • Can include submission of zero denominator declarations, minimum case thresholds, and/or QRDA Category 1 Release 2 data files. 	<ul style="list-style-type: none"> • Requires 16 eCQMs across three quality domains. • Hospitals that wish to submit eCQMs for 2015 must use the April 2014 version of the electronic specifications (using QRDA-I files) for calendar quarter (Q) 1, Q2, or Q3 of calendar year (CY) 2015.

eCQM Submission Benefits

- Fulfills the eCQM component of the Medicare EHR Incentive Program and a portion of the Hospital IQR Program with one submission
- Reduces the hospital reporting burden by minimizing manual abstraction and increasing measure alignment across programs
- Promotes the necessity of accepted data capture within the EHR system to allow for accurate reporting

Zero Denominator Declaration

- A zero denominator can be used when both:
 - A hospital's EHR system is certified for an eCQM
 - A hospital does not have patients that meet the denominator criteria of that CQM
- Submitting a zero denominator counts as a successful submission for that eCQM for both the EHR Incentive Program and the Hospital IQR Program

Case Threshold Exemption

- The case threshold exemption can be used when both:
 - A hospital's EHR system is certified to report data
 - There are five or fewer discharges during the relevant EHR reporting period
- If a hospital qualifies for an exemption for the eCQM, that eCQM counts toward meeting the IQR program requirement of the 16 eCQMs
- Hospitals do not have to utilize the case threshold exemption – they can submit applicable QRDA files if they choose

Option Two: Chart-Abstraction Only

Hospitals **may continue to** report all measures through chart abstraction for the Hospital IQR Program; however, they must report quality data for **all four quarters of CY 2015**.

Hospital IQR Program Tips	Medicare EHR Incentive Program Tips
<ul style="list-style-type: none"> • Electronically submitted data must contain one quarter of discharge data, whereas chart abstracted submission requires one year of discharge data and must meet IQR quarterly reporting deadlines 	<ul style="list-style-type: none"> • Hospitals separately submit clinical quality measure data (following program regulations for either eCQM or online attestation mechanisms) • Hospitals demonstrating MU for the first time in 2015 would still be required to report CQMs by attestation for a continuous 90-day period in FY 2015 or report CQMs electronically for a 3-month CY quarter by July 1, 2015 to avoid the Medicare penalty of the subsequent year
	Applies to BOTH programs
	N/A

Chart-Abstraction Benefits — Submission allows the data to be posted to Hospital Compare.

Note: Hospitals can still submit one quarter of eCQMs even when submitting chart-abstracted measures for the full year. Reference the section on Option Three within this document for details.

Option Three: Supplementary Submissions

Hospitals may submit via Chart-Abstraction for all required measures **and also** submit one quarter via eCQM submission. Though not required, hospitals are encouraged to report measures both electronically and via manual abstraction methods in 2015 to allow for system evaluation and quality assurance monitoring.

Hospital IQR Program Tips	Medicare EHR Incentive Program Tips
<ul style="list-style-type: none"> Hospitals report all four quarters through chart abstraction for the Hospital IQR Program Hospitals also submit one quarter via eCQM submission 	<ul style="list-style-type: none"> Hospitals separately submit clinical quality measure data (following program regulations for either eCQM or online attestation mechanisms). Hospitals demonstrating MU for the first time in 2015 would still be required to report CQMs by attestation for a continuous 90-day period in FY 2015 or report CQMs electronically for a 3-month CY quarter by July 1, 2015 to avoid the Medicare penalty of the subsequent year.
	<p>Applies to BOTH programs</p>
	<p>N/A</p>

Supplementary Submission Benefits

- Provides an opportunity to test your system to confirm its capabilities and determine if data is being accurately documented within the system.
- Allows time to prepare for eCQM submission while it is still voluntary and allows your hospital or your vendor to be ready once eCQM submission is a required component of either program.

Find more information online at
www.atomAlliance.org