eCQMs 101

Getting Started with Electronic Clinical Quality Measures

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Today's presenter

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Agenda:

- Understanding eCQMs
- Implementing eCQMs
- Analysis & Monitoring of eCQMs
- CMS IQR Program
- TJC ORYX Program
- Q&A

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CMS Statement

“After holding eCQM reporting and submission policies constant for a number of years in order to give hospitals and their vendors additional time to improve eCQM reporting capabilities, and stating our intention to transition to more robust reporting, we believe that it is time to increase the level of reporting...”

TJC Statement

“The eCQMs used by The Joint Commission are updated on an annual basis to account for changes in clinical evidence, measure logic, and coding updates. *The Joint Commission maintains close alignment with CMS measures where possible and continues to advance eCQM development to drive quality improvement…”*

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Year 1: Building the Foundation

- Identify Team & Resources
- Review Regulatory Requirements
- Organize, Review & Educate: Measures, specifications…
- Gap Analysis and Roadblocks
- Implementation: Plan, Build, Map, Educate
- Validate
- Monitor & Improve
- Gaps and Roadblocks
- Submit
- Return to Start

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Identify Team & Resources

(and make sure everyone understands)

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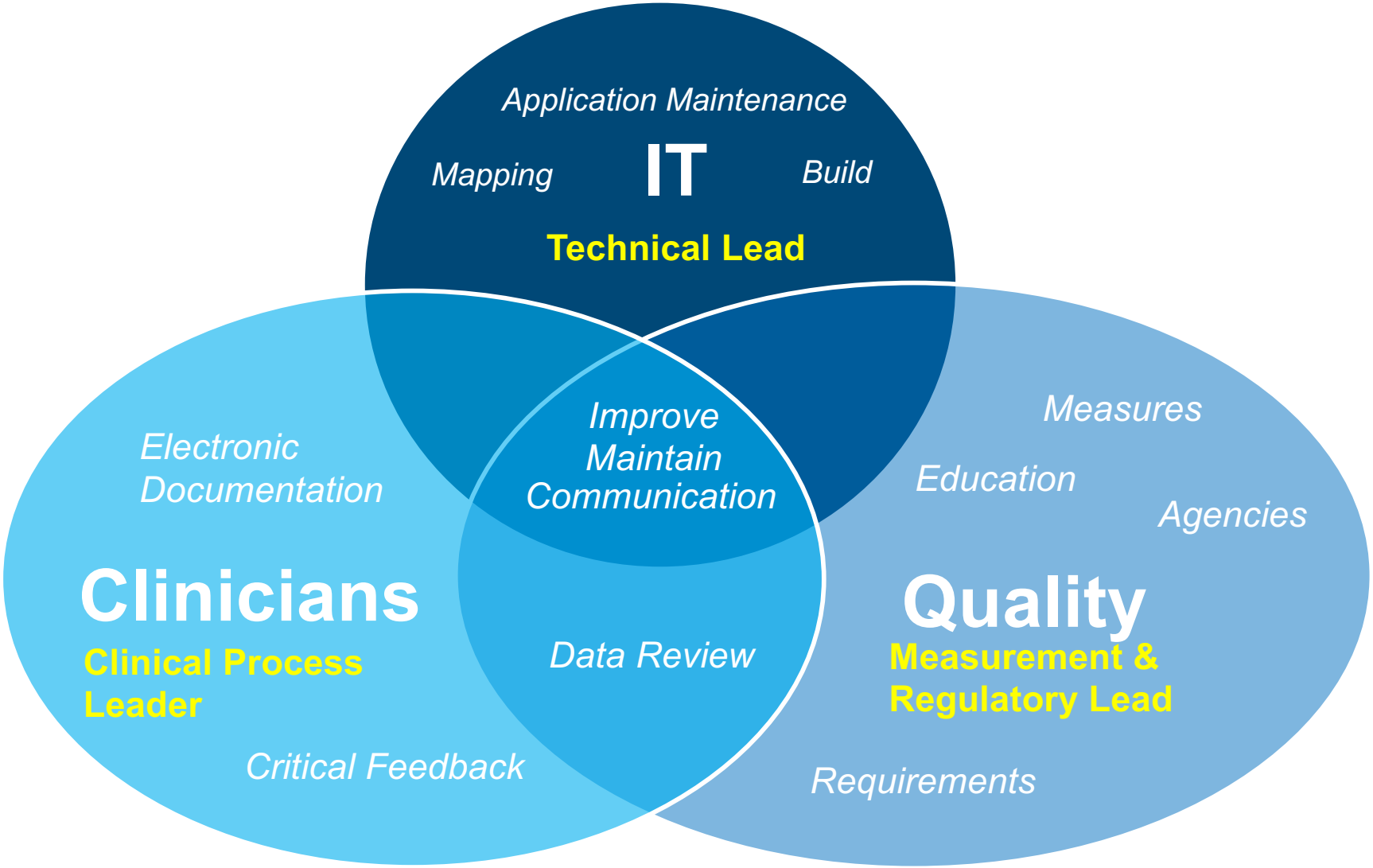
eCQM Team


Application Maintenance
Mapping
IT
Build
Technical Lead
Improve
Maintain
Communication
Electronic
Documentation
Measures
Education
Agencies
Clinicians
Clinical Process
Leader
Critical Feedback
Data Review
Quality
Measurement &
Regulatory Lead
Requirements

Understanding eCQMs

Clinical Quality Measures:

"Tools that help measure and track the quality of health care services provided by eligible professionals, eligible hospitals and critical access hospitals (CAHs) within our health care system" - CMS.gov

- Clinical Processes
- Patient Safety
- Treatments
- Outcomes

Electronic Clinical Quality Measures:

"eCQMs use data from electronic health records (EHR) and/or health Information technology systems to measure health care quality"
- eCQI Resource Center

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Manual Abstraction Process

Data documented in patient record

Manual chart review by abstractor

Data manually extracted and calculated for reporting

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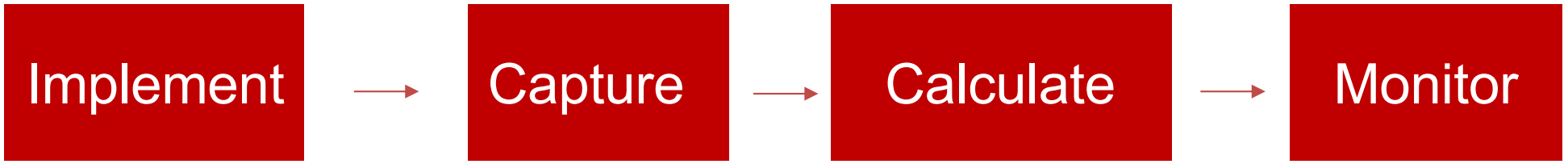
eCQM Process



Specifications, data elements, nomenclature –Build & Map

Structured data documented electronically and captured in the EHR

Electronically extracted data for calculation and electronic reporting

Validate & Review

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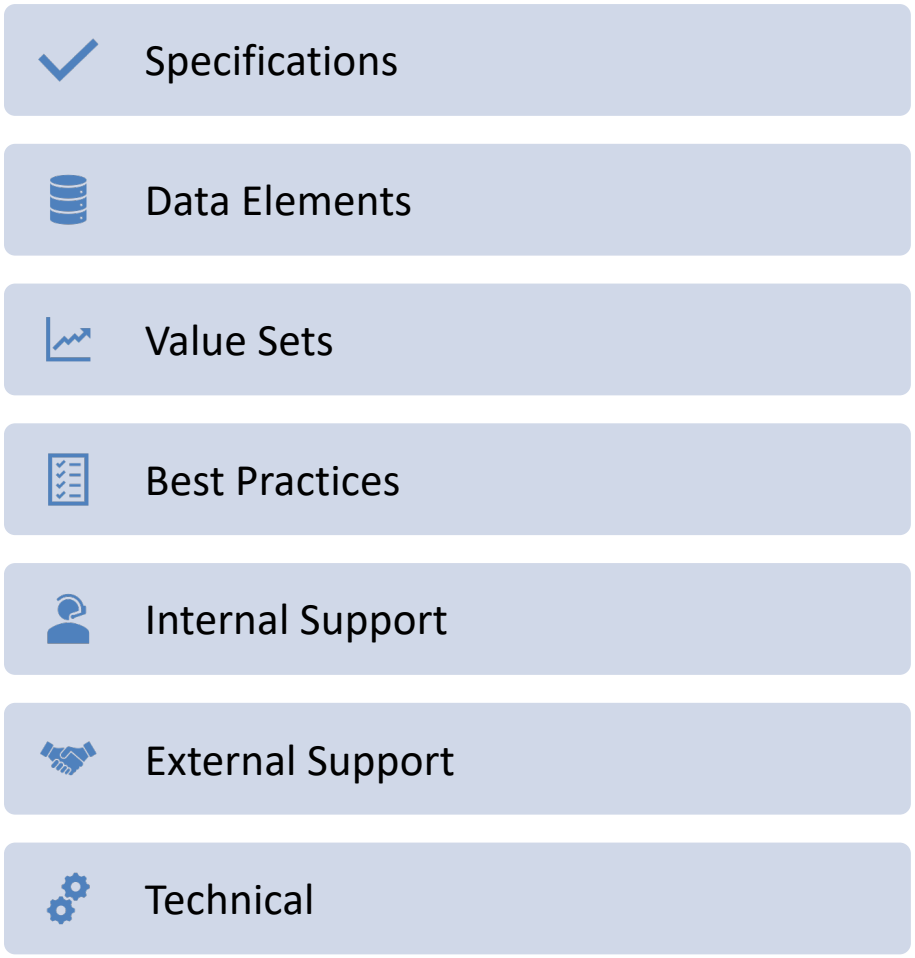
Resources



- eCQI Resource Center
- Quality Net
- CMS
- TJC
- JIRA
- VSAC
- Vendors

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Review Regulatory Requirements

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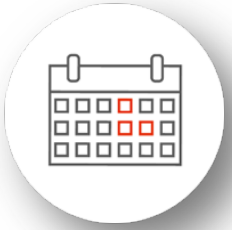
IQR: 2021 eCQMs

REQUIREMENT:

Hospitals must submit 2 Quarters and at least 4 of the available **9** eCQMs

SUBMISSION METHOD:

QualityNet Secure Portal



DEADLINE:

Annual Submission Deadline of February 2022

IQR: 2021 eCQMs

2021:

- 2 self-selected quarters
- Minimum of 4 self-selected eCQMs
- Addition of CMS 506: Safe Use of Opioids – Concurrent Prescribing
- Publicly reported on Hospital Compare

VTE-1	**VTE-2**	**STK-6**
STK-5	**PC-05**	**STK-3**
ED-2	**STK-2**	**OPI-1**

IQR: 2022 eCQMs

2022:

- 3 self-selected quarters
- Minimum of 4 eCQMs
  - ✓ 3 self-selected eCQMs
  - ✓ 1 required: Safe Use of Opioids – Concurrent Prescribing
- Publicly reported on Hospital Compare

VTE-1	**VTE-2**	**STK-6**
STK-5	**PC-05**	**STK-3**
ED-2	**STK-2**	**OPI-1**

IQR: 2021 Hybrid

Hybrid Hospital-Wide Readmission Measure

- Claims and Electronic Health Record Data
- 2 years of **voluntary** reporting:
  July 1, 2021-June 30, 2022; July 1, 2022 -June 30, 2023
- Electronic specifications available Spring 2020
- Confidential hospital-specific feedback reports
- Voluntary submissions will not be publicly reported and will not impact payment determination

Beginning with the FY 2026 payment determination

- Remove Claims-Based Hospital-Wide All-Cause Readmission measure
- Replace with **required** Hybrid HWR Reporting for the Period:
  July 1, 2023-June 30, 2024
- Publicly reported on Hospital Compare

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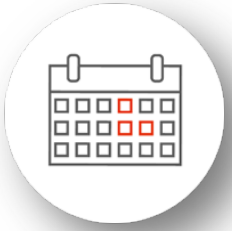
ORYX: 2021 eCQMs

REQUIREMENT:

Hospitals must submit 2 Quarters and at least 4 of the available **12** eCQMs

SUBMISSION METHOD:

Direct Data Submission Platform (DDSP)



DEADLINE:

Annual Submission Deadline of March 15, 2022

ORYX: 2021 eCQMs

2021:

- 2 self-selected quarters (do not need to be consecutive)
- Minimum 4 self-selected eCQMs (submit the same measures for both quarters)
- Addition of CMS 506: Safe Use of Opioids Concurrent Prescribing & ePC-06: Unexpected Complications in Term Newborns

VTE-1	**VTE-2**	**STK-2**	**STK-3**
STK-5	**STK-6**	**PC-01 (TJC only)**	**PC-02 (TJC only)**
PC-05	**PC-06 (TJC only)**	**ED-2**	**OPI-1**

ORYX: 2021 eCQMs

For any or all of the required chart-abstracted Perinatal Care Measures (PC-01, PC-02, PC-05 and PC-06), **HCOs may submit a minimum of two quarters *of eCQM data* (ePC-01, ePC-02, ePC-05 and ePC-06) instead of four quarters of the corresponding chart-abstracted measures**

- If an HCO decides to submit all 4 perinatal care eCQMs (ePC-01, ePC-02, ePC-05 and ePC-06) and the HCO has >300 live births, the Joint Commission will consider both the chart-abstracted and eCQM ORYX requirements as complete.

CMS v TJC

	CMS		TJC	
	Status	**Required for IQR submission?**	**Status**	**Required for ORYX® submission?**
VTE-1	Active	Yes (Submit any 4 eCQMs)	Active	Yes (Submit any 4 eCQMs)
VTE-2	Active	Yes (Submit any 4 eCQMs)	Active	Yes (Submit any 4 eCQMs)
ED-2	Active	Yes (Submit any 4 eCQMs)	Active	Yes (Submit any 4 eCQMs)
eOPI-1*	Active	Yes (Submit any 4 eCQMs)	Active	Yes (Submit any 4 eCQMs)
PC-01	Retired	No	Active	Yes (Submit any 4 eCQMs)
PC-02	Not available	No	Active	Yes (Submit any 4 eCQMs)
PC-05	Active	Yes (Submit any 4 eCQMs)	Active	Yes (Submit any 4 eCQMs)
PC-06*	Not available	No	Active	Yes (Submit any 4 eCQMs)
STK-2	Active	Yes (Submit any 4 eCQMs)	Active	Yes (Submit any 4 eCQMs)
STK-3	Active	Yes (Submit any 4 eCQMs)	Active	Yes (Submit any 4 eCQMs)
STK-5	Active	Yes (Submit any 4 eCQMs)	Active	Yes (Submit any 4 eCQMs)
STK-6	Active	Yes (Submit any 4 eCQMs)	Active	Yes (Submit any 4 eCQMs)

Organize, Review & Educate:

Measures, Specifications, Data Elements, Value Sets / Nomenclature

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1) ***Bookmark your resources*** - Each eCQM has an associated specification which define the intent, populations, logic, data elements and value sets
2) ***Master the measures –*** do your homework, study
3) ***Understand your population –*** take expert advice; focus on measures that matter

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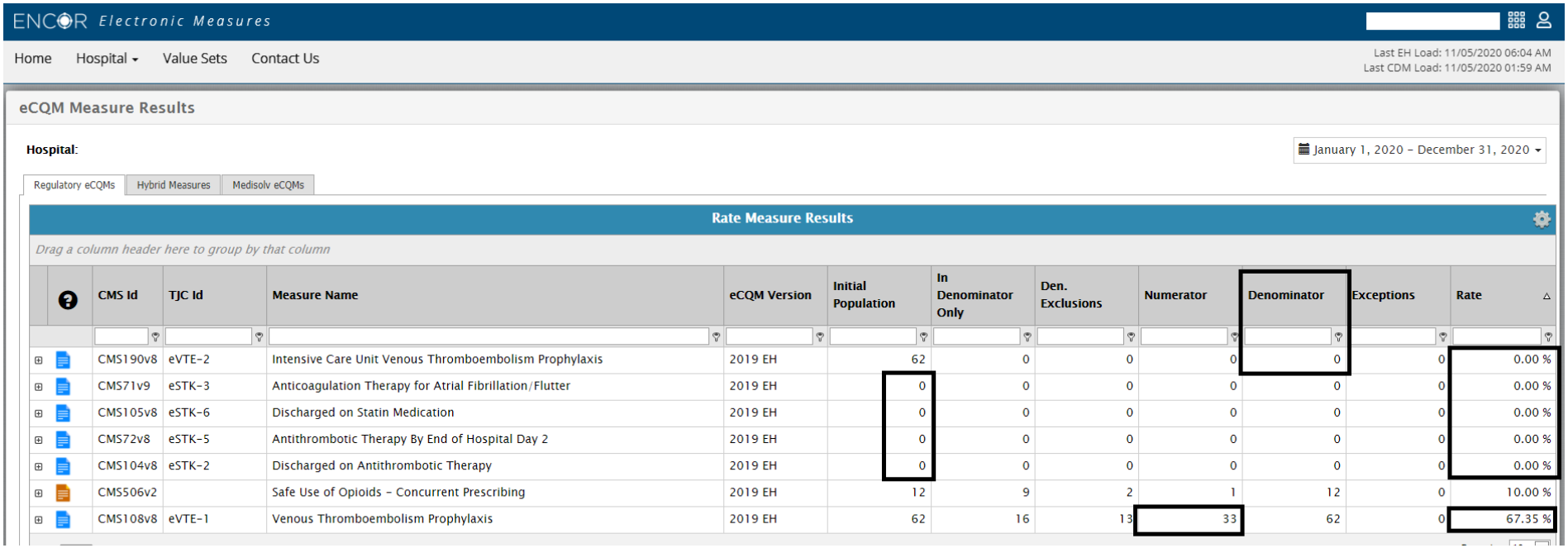
How does an eCQM work?

1) Specification outlines data requirements
2) Clinicians document that data in a structured field in the EHR
3) Each documentation field is ‘mapped’ to codes
4) Codes drive eCQM results:

No Code / Wrong Code = No Data Evaluation = No Results



CMS Id	TJC Id	Measure Name	eCQM Version	Initial Population	In Denominator Only	Den. Exclusions	Numerator	Denominator	Exceptions	Rate
CMS190v8	eVTE-2	Intensive Care Unit Venous Thromboembolism Prophylaxis	2019 EH	62	0	0	0	0	0	0.00 %
CMS71v9	eSTK-3	Anticoagulation Therapy for Atrial Fibrillation/Flutter	2019 EH	0	0	0	0	0	0	0.00 %
CMS105v8	eSTK-6	Discharged on Statin Medication	2019 EH	0	0	0	0	0	0	0.00 %
CMS72v8	eSTK-5	Antithrombotic Therapy By End of Hospital Day 2	2019 EH	0	0	0	0	0	0	0.00 %
CMS104v8	eSTK-2	Discharged on Antithrombotic Therapy	2019 EH	0	0	0	0	0	0	0.00 %
CMS506v2		Safe Use of Opioids – Concurrent Prescribing	2019 EH	12	9	2	1	12	0	10.00 %
CMS108v8	eVTE-1	Venous Thromboembolism Prophylaxis	2019 EH	62	16	13	33	62	0	67.35 %

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Initial Population

Denominator

Exclusions

Numerator

Exceptions

Performance Rate = Numerator / Denominator

(minus Exclusions & Exceptions) * 100

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STK-2 Discharged on Antithrombotic Therapy

eCQM Title	**Discharged on Antithrombotic Therapy**		
eCQM Identifier (Measure Authoring Tool)	104	**eCQM Version number**	8.1.000
NQF Number	Not Applicable	**GUID**	42bf391f-38a3-4c0f-9ece-dcd47e9609d9
Measurement Period	January 1, 20XX through December 31, 20XX		
Measure Steward	The Joint Commission		
Measure Developer	The Joint Commission		
Endorsed By	None		
Description	Ischemic stroke patients prescribed or continuing to take antithrombotic therapy at hospital discharge		
Copyright	LOINC(R) copyright 2004-2018 Regenstrief Institute, Inc. This material contains SNOMED Clinical Terms(R) (SNOMED CT[R]) copyright 2004-2018 International Health Terminology Standards Development Organisation. All Rights Reserved. Measure specifications are in the Public Domain		
Disclaimer	These performance measures are not clinical guidelines and do not establish a standard of medical care, and have not been tested for all potential applications. The measures and specifications are provided without warranty.		
Measure Scoring	Proportion		
Measure Type	Process		
Stratification	None		
Risk Adjustment	None		
Rate Aggregation	None		
Rationale	The effectiveness of antithrombotic agents in reducing stroke mortality, stroke-related morbidity and recurrence rates has been studied in several large clinical trials. While the use of these agents for patients with acute ischemic stroke and transient ischemic attacks continues to be the subject of study, substantial evidence is available from completed studies. Data at this time suggest that antithrombotic therapy should be prescribed at discharge following acute ischemic stroke to reduce stroke mortality and morbidity as long as no contraindications exist. For patients with a stroke due to a cardioembolic source (e.g. atrial fibrillation, mechanical heart valve), warfarin is recommended unless contraindicated. In recent years, novel oral anticoagulant agents (NOACs) have been developed and approved by the U.S. Food and Drug Administration (FDA) for stroke prevention, and may be considered as an alternative to warfarin for select patients. Anticoagulation therapy is not generally recommended for secondary stroke prevention in patients presumed to have a non-cardioembolic stroke. Anticoagulants at doses to prevent venous thromboembolism are insufficient antithrombotic therapy to prevent recurrent ischemic stroke or TIA.		
Clinical Recommendation Statement	Clinical trial results suggest that antithrombotic therapy should be prescribed at discharge following acute ischemic stroke to reduce stroke mortality and morbidity as long as no contraindications exist		
Improvement Notation	Improvement noted as an increase in rate		

STK-2 Discharged on Antithrombotic Therapy

Initial Population	Inpatient hospitalizations for patients age 18 and older, discharged from inpatient care (non-elective admissions) with a principal diagnosis of ischemic or hemorrhagic stroke and a length of stay less than or equal to 120 days that ends during the measurement period
Denominator	Inpatient hospitalizations for patients with a principal diagnosis of Ischemic stroke
Denominator Exclusions	Inpatient hospitalizations for patients admitted for elective carotid intervention. This exclusion is implicitly modeled by only including non-elective hospitalizations. Inpatient hospitalizations for patients discharged to another hospital Inpatient hospitalizations for patients who left against medical advice Inpatient hospitalizations for patients who expired Inpatient hospitalizations for patients discharged to home for hospice care Inpatient hospitalizations for patients discharged to a health care facility for hospice care Inpatient hospitalizations for patients with comfort measures documented
Numerator	Inpatient hospitalizations for patients prescribed or continuing to take antithrombotic therapy at hospital discharge
Numerator Exclusions	Not Applicable
Denominator Exceptions	Inpatient hospitalizations for patients with a documented reason for not prescribing antithrombotic therapy at discharge. Inpatient hospitalizations for patients who receive Ticagrelor as an antithrombotic therapy during the hospitalization.
Supplemental Data Elements	For every patient evaluated by this measure also identify payer, race, ethnicity and sex

Population logic

STK-2 Discharged on Antithrombotic Therapy

Population Criteria

Initial Population

TJC."Encounter with Principal Diagnosis and Age"

Denominator

TJC."Ischemic Stroke Encounter"

Denominator Exclusions

TJC."Ischemic Stroke Encounters with Discharge Disposition"
union TJC."Comfort Measures during Hospitalization"

Numerator

TJC."Ischemic Stroke Encounter" IschemicStrokeEncounter
with "Antithrombotic Therapy at Discharge" DischargeAntithrombotic
such that DischargeAntithrombotic.authorDatetime during IschemicStrokeEncounter.relevantPeriod

Numerator Exclusions

None

Denominator Exceptions

"Encounter With No Antithrombotic At Discharge"
union "Encounter With Ticagrelor During Hospitalization"

Stratification

None

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Definitions

STK-2 Discharged on Antithrombotic Therapy

Definitions

Antithrombotic Not Given at Discharge

```
["Medication, Not Discharged": "Antithrombotic Therapy"] NoAntithromboticDischarge
    where NoAntithromboticDischarge.negationRationale in "Medical Reason"
        or NoAntithromboticDischarge.negationRationale in "Patient Refusal"
```

Antithrombotic Therapy at Discharge

```
["Medication, Discharge": "Antithrombotic Therapy"]
```

Denominator

```
TJC."Ischemic Stroke Encounter"
```

Denominator Exceptions

```
"Encounter With No Antithrombotic At Discharge"
    union "Encounter With Ticagrelor During Hospitalization"
```

Denominator Exclusions

```
TJC."Ischemic Stroke Encounters with Discharge Disposition"
    union TJC."Comfort Measures during Hospitalization"
```

Encounter With No Antithrombotic At Discharge

```
TJC."Ischemic Stroke Encounter" IschemicStrokeEncounter
    with "Antithrombotic Not Given at Discharge" NoDischargeAntithrombotic
        such that NoDischargeAntithrombotic.authorDatetime during IschemicStrokeEncounter.relevantPeriod
```

Encounter With Ticagrelor During Hospitalization

```
TJC."Ischemic Stroke Encounter" IschemicStrokeEncounter
    with ["Medication, Administered": TJC."Ticagrelor Therapy"] Ticagrelor
        such that Ticagrelor.relevantPeriod starts during Global."HospitalizationWithObservation"(IschemicStrokeEncounter)
```

Initial Population

```
TJC."Encounter with Principal Diagnosis and Age"
```

Numerator

```
TJC."Ischemic Stroke Encounter" IschemicStrokeEncounter
    with "Antithrombotic Therapy at Discharge" DischargeAntithrombotic
        such that DischargeAntithrombotic.authorDatetime during IschemicStrokeEncounter.relevantPeriod
```

SDE Ethnicity

```
["Patient Characteristic Ethnicity": "Ethnicity"]
```

SDE Payer

```
["Patient Characteristic Payer": "Payer"]
```

SDE Race

```
["Patient Characteristic Race": "Race"]
```

SDE Sex

```
["Patient Characteristic Sex": "ONC Administrative Sex"]
```

TJC.All Stroke Encounter

```
"Non Elective Inpatient Encounter" NonElectiveEncounter
    where NonElectiveEncounter.principalDiagnosis in "Hemorrhagic Stroke"
        or NonElectiveEncounter.principalDiagnosis in "Ischemic Stroke"
```

TJC.Comfort Measures during Hospitalization

```
"Ischemic Stroke Encounter" IschemicStrokeEncounter
    with "Intervention Comfort Measures" ComfortMeasure
        such that Coalesce(start of ComfortMeasure.relevantPeriod, ComfortMeasure.authorDatetime)during Global."HospitalizationWithObservation"
(IschemicStrokeEncounter)
```


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STK-2 Discharged on Antithrombotic Therapy

Data Elements *are identified in the measure logic and have an associated "Value Set":*

A list of acceptable codes for each data element. The value sets are identified with an OID which is searchable on VSAC (Value Set Authority Center) https://vsac.nlm.nih.gov

- code "Birth date" ("LOINC Code (21112-8)")
- valueset "Antithrombotic Therapy" (2.16.840.1.113883.3.117.1.7.1.201)
- valueset "Comfort Measures" (1.3.6.1.4.1.33895.1.3.0.45)
- valueset "Discharge To Acute Care Facility" (2.16.840.1.113883.3.117.1.7.1.87)
- valueset "Discharged to Health Care Facility for Hospice Care" (2.16.840.1.113883.3.117.1.7.1.207)
- valueset "Discharged to Home for Hospice Care" (2.16.840.1.113883.3.117.1.7.1.209)
- valueset "Emergency Department Visit" (2.16.840.1.113883.3.117.1.7.1.292)
- valueset "Ethnicity" (2.16.840.1.114222.4.11.837)
- valueset "Hemorrhagic Stroke" (2.16.840.1.113883.3.117.1.7.1.212)
- valueset "Ischemic Stroke" (2.16.840.1.113883.3.117.1.7.1.247)
- valueset "Left Against Medical Advice" (2.16.840.1.113883.3.117.1.7.1.308)
- valueset "Medical Reason" (2.16.840.1.113883.3.117.1.7.1.473)
- valueset "Non-Elective Inpatient Encounter" (2.16.840.1.113883.3.117.1.7.1.424)
- valueset "Observation Services" (2.16.840.1.113762.1.4.1111.143)
- valueset "ONC Administrative Sex" (2.16.840.1.113762.1.4.1)
- valueset "Patient Expired" (2.16.840.1.113883.3.117.1.7.1.309)
- valueset "Patient Refusal" (2.16.840.1.113883.3.117.1.7.1.93)
- valueset "Payer" (2.16.840.1.114222.4.11.3591)
- valueset "Race" (2.16.840.1.114222.4.11.836)
- valueset "Ticagrelor Therapy" (2.16.840.1.113762.1.4.1110.39)

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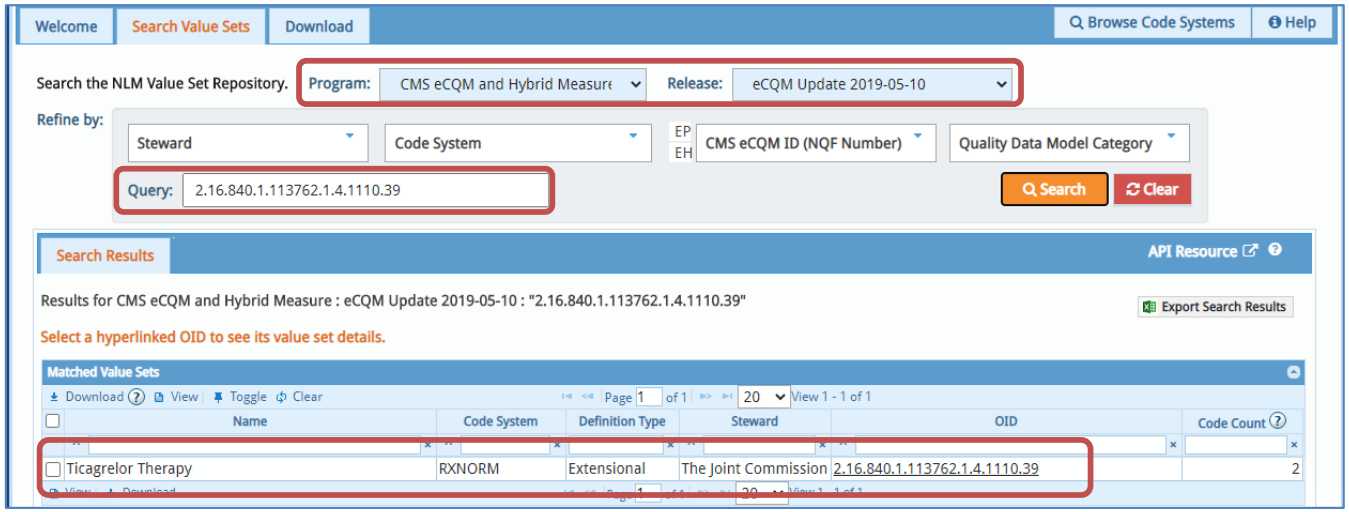
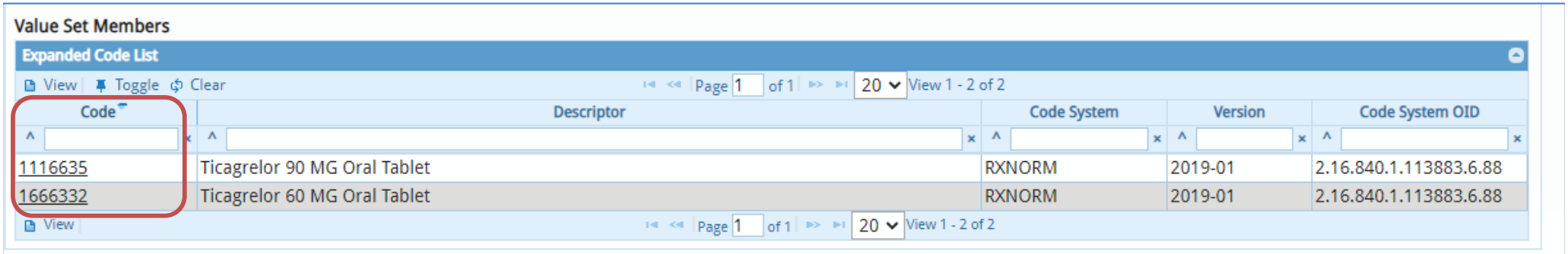
STK-2 Discharged on Antithrombotic Therapy

Each Value Set contains acceptable codes (nomenclature) and the associated description.





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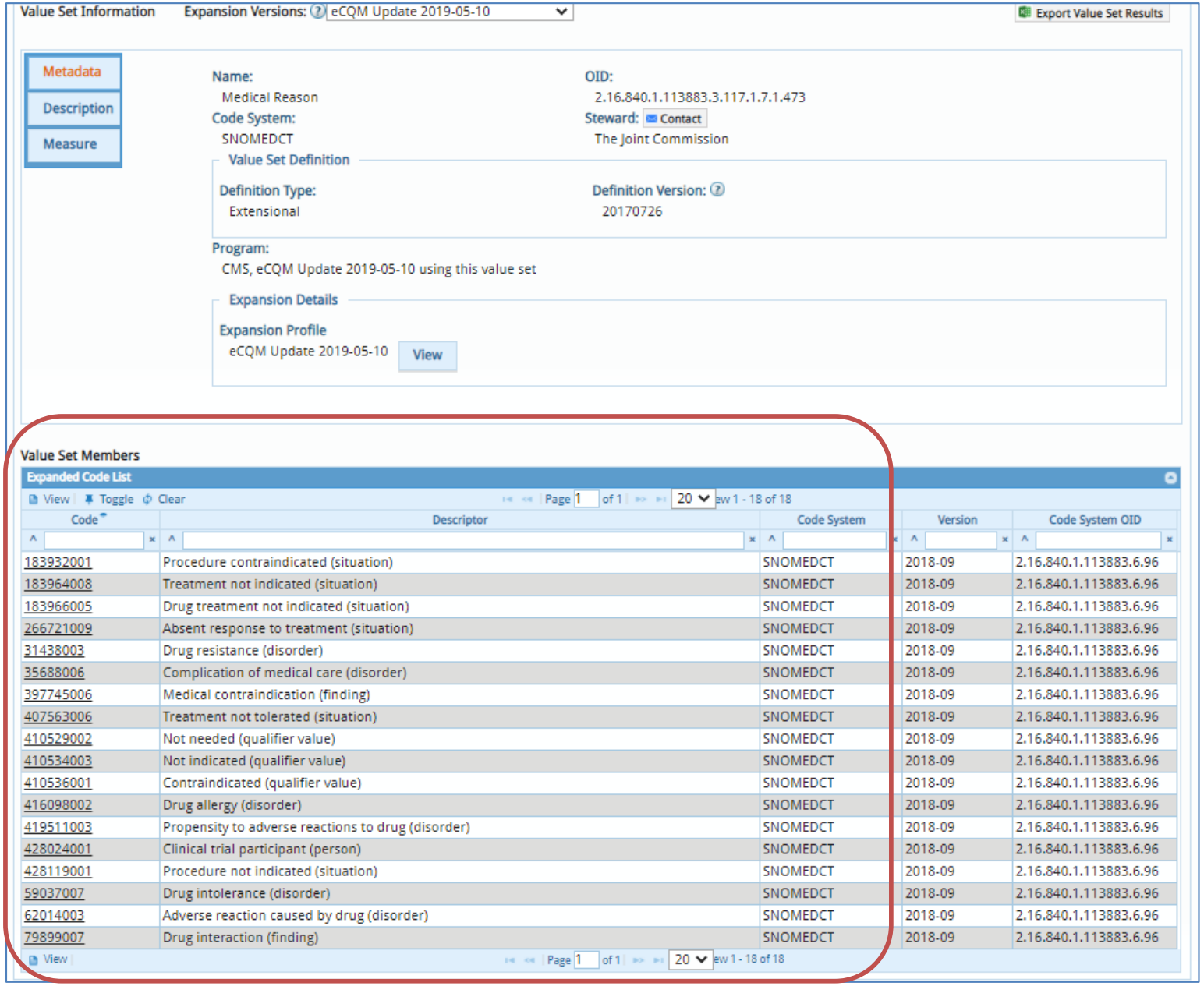
STK-2 Discharged on Antithrombotic Therapy



Value Set Information Expansion Versions: eCQM Update 2019-05-10 Export Value Set Results

Metadata | Description | Measure

Name: Medical Reason
OID: 2.16.840.1.113883.3.117.1.7.1.473
Code System: SNOMEDCT
Steward: Contact — The Joint Commission

Value Set Definition

Definition Type: Extensional
Definition Version: 20170726

Program: CMS, eCQM Update 2019-05-10 using this value set

Expansion Details

Expansion Profile: eCQM Update 2019-05-10 — View

Value Set Members

Expanded Code List

View | Toggle | Clear Page 1 of 1 20 View 1 - 18 of 18

Code	Descriptor	Code System	Version	Code System OID
183932001	Procedure contraindicated (situation)	SNOMEDCT	2018-09	2.16.840.1.113883.6.96
183964008	Treatment not indicated (situation)	SNOMEDCT	2018-09	2.16.840.1.113883.6.96
183966005	Drug treatment not indicated (situation)	SNOMEDCT	2018-09	2.16.840.1.113883.6.96
266721009	Absent response to treatment (situation)	SNOMEDCT	2018-09	2.16.840.1.113883.6.96
31438003	Drug resistance (disorder)	SNOMEDCT	2018-09	2.16.840.1.113883.6.96
35688006	Complication of medical care (disorder)	SNOMEDCT	2018-09	2.16.840.1.113883.6.96
397745006	Medical contraindication (finding)	SNOMEDCT	2018-09	2.16.840.1.113883.6.96
407563006	Treatment not tolerated (situation)	SNOMEDCT	2018-09	2.16.840.1.113883.6.96
410529002	Not needed (qualifier value)	SNOMEDCT	2018-09	2.16.840.1.113883.6.96
410534003	Not indicated (qualifier value)	SNOMEDCT	2018-09	2.16.840.1.113883.6.96
410536001	Contraindicated (qualifier value)	SNOMEDCT	2018-09	2.16.840.1.113883.6.96
416098002	Drug allergy (disorder)	SNOMEDCT	2018-09	2.16.840.1.113883.6.96
419511003	Propensity to adverse reactions to drug (disorder)	SNOMEDCT	2018-09	2.16.840.1.113883.6.96
428024001	Clinical trial participant (person)	SNOMEDCT	2018-09	2.16.840.1.113883.6.96
428119001	Procedure not indicated (situation)	SNOMEDCT	2018-09	2.16.840.1.113883.6.96
59037007	Drug intolerance (disorder)	SNOMEDCT	2018-09	2.16.840.1.113883.6.96
62014003	Adverse reaction caused by drug (disorder)	SNOMEDCT	2018-09	2.16.840.1.113883.6.96
79899007	Drug interaction (finding)	SNOMEDCT	2018-09	2.16.840.1.113883.6.96

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Gap Analysis & Roadblocks

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CMS 104 Discharged on Antithrombotic Therapy

- **Denominator**
  - Non-Elective Inpatients with Ischemic Stroke (principal dx)
  - > 18 years of age
  - Length of stay < 120 days
  - Discharged during reporting period

- **Denominator Exclusions**
  - Comfort measures only during hospitalization
  - Discharge Dispositions

- **Numerator**
  - Antithrombotic Prescribed at Discharge

- **Denominator Exceptions**
  - Negation: Medical Reason/Patient Refusal
  - Ticagrelor administration during hospitalization

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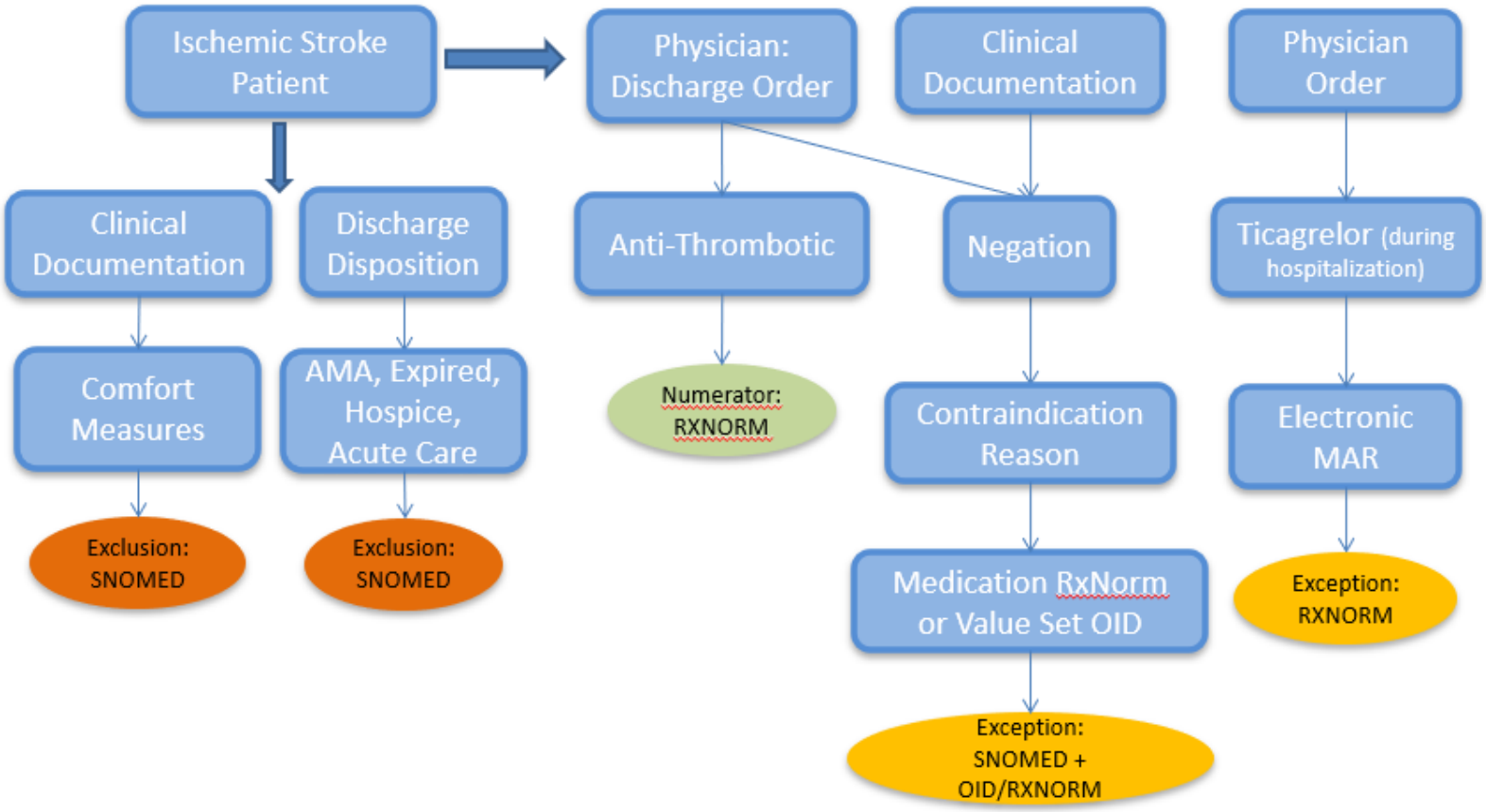
CMS 104 Discharged on Antithrombotic Therapy



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eCQMs Roadblocks

- Structured Data
- Nomenclature & Mapping (SNOMED, RxNorm, LOINC, ICD)
- Interpreting results
- Timing
- New data elements
- Logic – complex, doesn't align with workflow, flaws
- Annual updates

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Implementation:

Plan, Build, Map, Educate

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Implementation

1. Do you have electronic documentation in place currently that can be used to capture eCQM data?
2. Do you have to build new electronic documentation?
3. Have you considered all areas where documentation is captured?
4. Do you have to train new users?
5. Do you have to implement new workflow?

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Implementation

Antithrombotic Not Given at Discharge

```
["Medication, Not Discharged": "Antithrombotic Therapy"] NoAntithromboticDischarge
    where NoAntithromboticDischarge.negationRationale in "Medical Reason"
        or NoAntithromboticDischarge.negationRationale in "Patient Refusal"
```

Changes to

Workflow / Documentation

Mapping

Application

Determine

- Who impacted by change?
- Where
- How
- When

Educate

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Structured Documentation!

- Discharge Medications
- CPOE
- Nursing Documentation
- Physician Documentation
- Problem List
- eMAR
- OR / ED / OB

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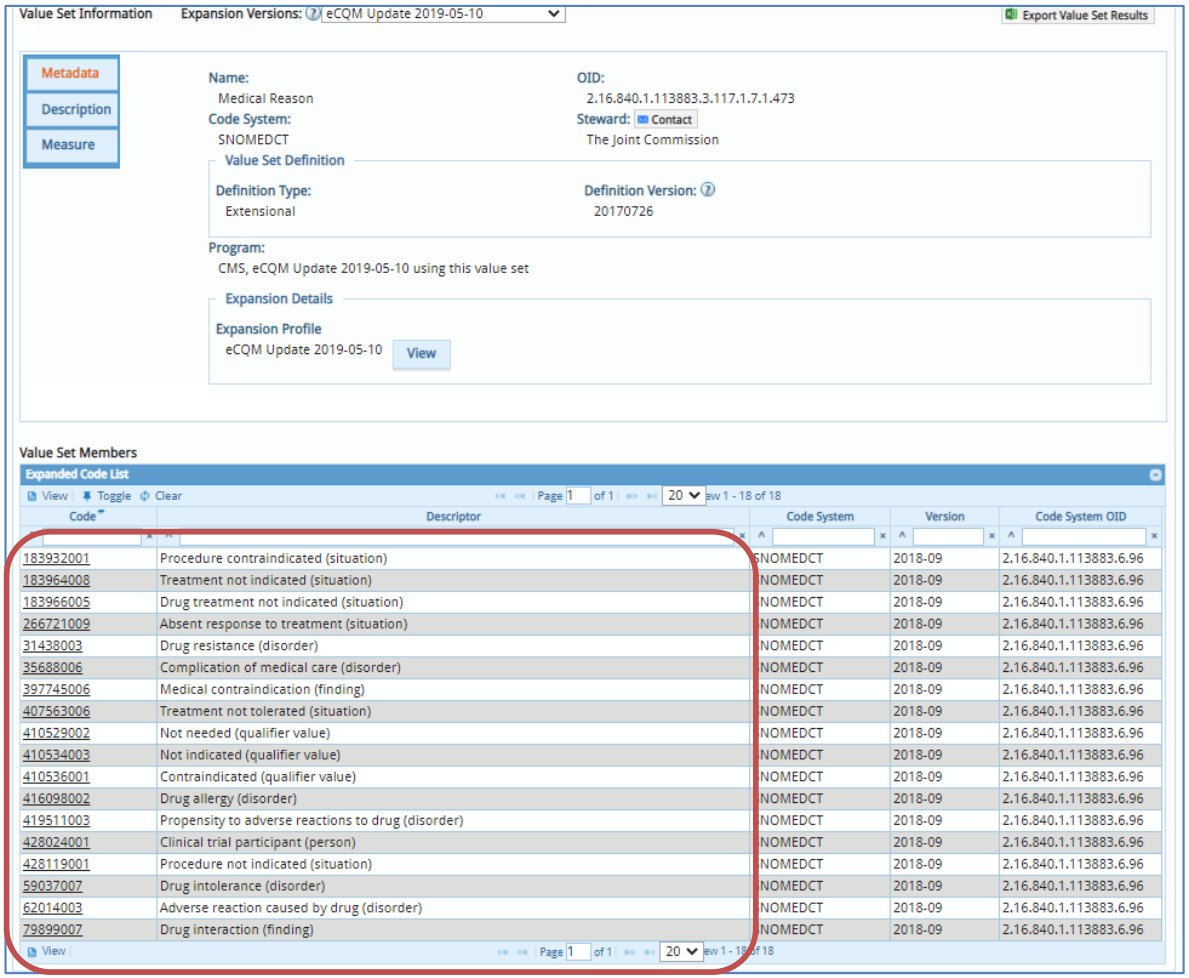
Mapping

1) Identify current documentation or new documentation to align with data element
2) Review and identify code descriptions from value set that align with documentation
3) Map codes to appropriate fields in the EHR



Value Set Information Expansion Versions: eCQM Update 2019-05-10 Export Value Set Results

Metadata | Description | Measure

Name: Medical Reason
OID: 2.16.840.1.113883.3.117.1.7.1.473
Code System: SNOMEDCT
Steward: Contact — The Joint Commission

Value Set Definition

Definition Type: Extensional
Definition Version: 20170726

Program: CMS, eCQM Update 2019-05-10 using this value set

Expansion Details

Expansion Profile: eCQM Update 2019-05-10 — View

Value Set Members

Expanded Code List

View | Toggle | Clear Page 1 of 1 20 View 1 - 18 of 18

Code	Descriptor	Code System	Version	Code System OID
183932001	Procedure contraindicated (situation)	SNOMEDCT	2018-09	2.16.840.1.113883.6.96
183964008	Treatment not indicated (situation)	SNOMEDCT	2018-09	2.16.840.1.113883.6.96
183966005	Drug treatment not indicated (situation)	SNOMEDCT	2018-09	2.16.840.1.113883.6.96
266721009	Absent response to treatment (situation)	SNOMEDCT	2018-09	2.16.840.1.113883.6.96
31438003	Drug resistance (disorder)	SNOMEDCT	2018-09	2.16.840.1.113883.6.96
35688006	Complication of medical care (disorder)	SNOMEDCT	2018-09	2.16.840.1.113883.6.96
397745006	Medical contraindication (finding)	SNOMEDCT	2018-09	2.16.840.1.113883.6.96
407563006	Treatment not tolerated (situation)	SNOMEDCT	2018-09	2.16.840.1.113883.6.96
410529002	Not needed (qualifier value)	SNOMEDCT	2018-09	2.16.840.1.113883.6.96
410534003	Not indicated (qualifier value)	SNOMEDCT	2018-09	2.16.840.1.113883.6.96
410536001	Contraindicated (qualifier value)	SNOMEDCT	2018-09	2.16.840.1.113883.6.96
416098002	Drug allergy (disorder)	SNOMEDCT	2018-09	2.16.840.1.113883.6.96
419511003	Propensity to adverse reactions to drug (disorder)	SNOMEDCT	2018-09	2.16.840.1.113883.6.96
428024001	Clinical trial participant (person)	SNOMEDCT	2018-09	2.16.840.1.113883.6.96
428119001	Procedure not indicated (situation)	SNOMEDCT	2018-09	2.16.840.1.113883.6.96
59037007	Drug intolerance (disorder)	SNOMEDCT	2018-09	2.16.840.1.113883.6.96
62014003	Adverse reaction caused by drug (disorder)	SNOMEDCT	2018-09	2.16.840.1.113883.6.96
79899007	Drug interaction (finding)	SNOMEDCT	2018-09	2.16.840.1.113883.6.96

View Page 1 of 1 20 View 1 - 18 of 18

Validate

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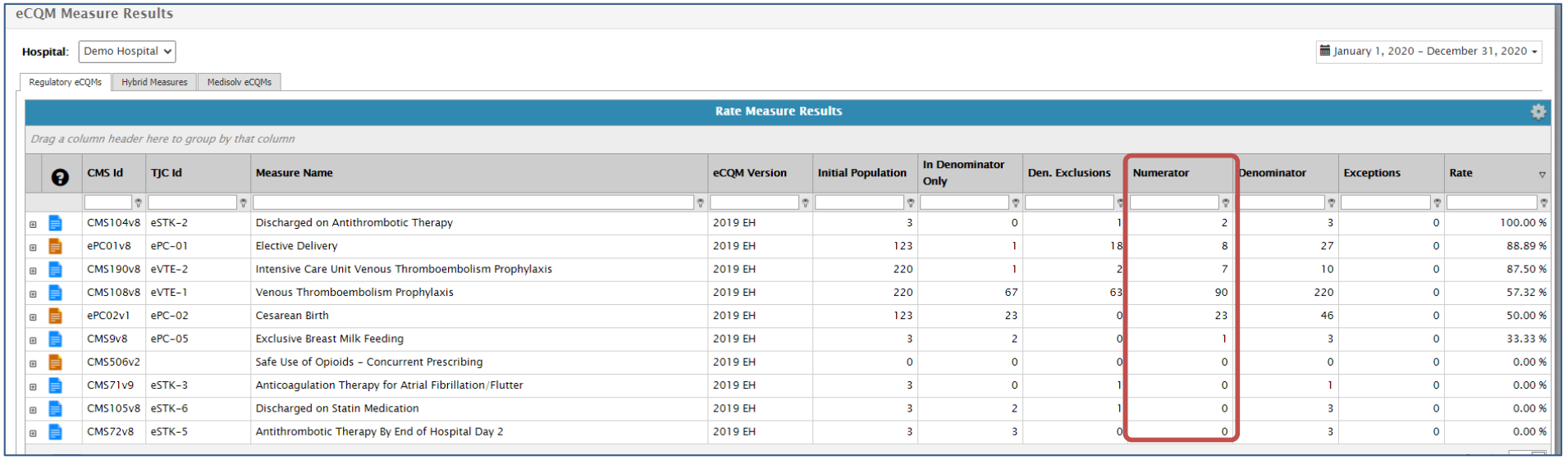
Validate



eCQM Measure Results

Hospital: Demo Hospital

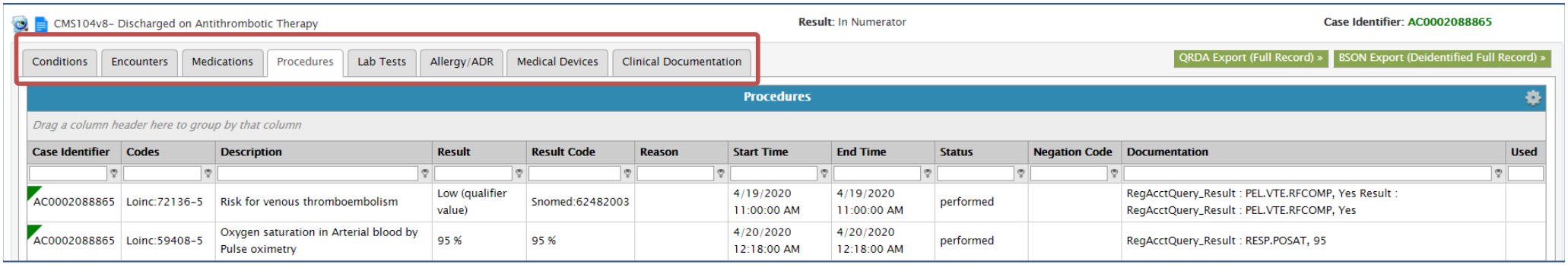
January 1, 2020 – December 31, 2020

Regulatory eCQMs | Hybrid Measures | Medisolv eCQMs

Rate Measure Results

Drag a column header here to group by that column

CMS Id	TJC Id	Measure Name	eCQM Version	Initial Population	In Denominator Only	Den. Exclusions	Numerator	Denominator	Exceptions	Rate
CMS104v8	eSTK-2	Discharged on Antithrombotic Therapy	2019 EH	3	0	1	2	3	0	100.00 %
ePC01v8	ePC-01	Elective Delivery	2019 EH	123	1	18	8	27	0	88.89 %
CMS190v8	eVTE-2	Intensive Care Unit Venous Thromboembolism Prophylaxis	2019 EH	220	1	2	7	10	0	87.50 %
CMS108v8	eVTE-1	Venous Thromboembolism Prophylaxis	2019 EH	220	67	63	90	220	0	57.32 %
ePC02v1	ePC-02	Cesarean Birth	2019 EH	123	23	0	23	46	0	50.00 %
CMS9v8	ePC-05	Exclusive Breast Milk Feeding	2019 EH	3	2	0	1	3	0	33.33 %
CMS506v2		Safe Use of Opioids – Concurrent Prescribing	2019 EH	0	0	0	0	0	0	0.00 %
CMS71v9	eSTK-3	Anticoagulation Therapy for Atrial Fibrillation/Flutter	2019 EH	3	0	1	0	1	0	0.00 %
CMS105v8	eSTK-6	Discharged on Statin Medication	2019 EH	3	2	1	0	3	0	0.00 %
CMS72v8	eSTK-5	Antithrombotic Therapy By End of Hospital Day 2	2019 EH	3	3	0	0	3	0	0.00 %



CMS104v8– Discharged on Antithrombotic Therapy

Result: In Numerator

Case Identifier: AC0002088865

Conditions | Encounters | Medications | Procedures | Lab Tests | Allergy/ADR | Medical Devices | Clinical Documentation

QRDA Export (Full Record) » | BSON Export (Deidentified Full Record) »

Procedures

Drag a column header here to group by that column

Case Identifier	Codes	Description	Result	Result Code	Reason	Start Time	End Time	Status	Negation Code	Documentation	Used
AC0002088865	Loinc:72136-5	Risk for venous thromboembolism	Low (qualifier value)	Snomed:62482003		4/19/2020 11:00:00 AM	4/19/2020 11:00:00 AM	performed		RegAcctQuery_Result : PEL.VTE.RFCOMP, Yes Result : RegAcctQuery_Result : PEL.VTE.RFCOMP, Yes	
AC0002088865	Loinc:59408-5	Oxygen saturation in Arterial blood by Pulse oximetry	95 %	95 %		4/20/2020 12:18:00 AM	4/20/2020 12:18:00 AM	performed		RegAcctQuery_Result : RESP.POSAT, 95	

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Validate

CMS 105

Medications

eader here to group by that column

Codes	Description	Status	Route	Start Time	End Time	Negation Code	Documentation	Used
RxNorm:904475	Pravastatin Sodium 40 MG Oral Tablet	discharge		10/23/2019 5:40:00 PM			PRAVASTATIN SOD40 MG, AC, CONT	

CMS 108

Codes	Description	Status	Route	Start Time	End Time	Negation Code	Documentation	Used
RxNorm:854235	0.4 ML Enoxaparin sodium 100 MG/ML Prefilled Syringe	administered	Subcutaneous route (qualifier value)	12/30/2018 4:51:00 AM	12/30/2018 4:52:00 AM		PhaRx, PhaRxMedications: LOV51	

CMS 71

Codes	Description	Status	Start Time	End Time	Negation Code	Documentation	Used
Oid :2.16.840.1.113883.3.117.1.7.1.200	Anticoagulant Therapy	discharge not done	9/16/2019 11:56:00 AM	9/16/2019 11:56:00 AM	406149000	AdmVisitClinicalQueriesMult : CQM.COARE1, 1	

Monitor & Improve

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Monitor & Improve

Rate Measure Results

Drag a column header here to group by that column

CMS Id	TJC Id	Measure Name	Initial Population	In Denominator Only	Den. Exclusions	Numerator	Denominator	Exceptions	Rate
CMS105v7	eSTK-6	Discharged on Statin Medication	70	1	14	54	69	0	98.18 %
CMS108v7	eVTE-1	Venous Thromboembolism Prophylaxis	3217	57	1249	1911	3217	0	97.10 %
CMS190v7	eVTE-2	Intensive Care Unit Venous Thromboembolism Prophylaxis	3217	21	140	591	761	9	96.57 %
CMS72v7	eSTK-5	Antithrombotic Therapy By End of Hospital Day 2	70	3	21	45	69	0	93.75 %
CMS104v7	eSTK-2	Discharged on Antithrombotic Therapy	70	13	14	42	69	0	76.36 %
CMS71v8	eSTK-3	Anticoagulation Therapy for Atrial Fibrillation/Flutter	70	8	7	6	22	1	42.86 %
CMS113v7	ePC-01	Elective Delivery	134	0	0	0	0	0	0.00 %
CMS9v7	ePC-05	Exclusive Breast Milk Feeding	0	0	0	0	0	0	0.00 %

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Monitor & Improve

Who?
How often?

Rate Measure Results

Drag a column header here to group by that column

CMS Id	TJC Id	Measure Name	Initial Population	In Denominator Only	Den. Exclusions	Numerator	Denominator	Exceptions	Rate
CMS105v7	eSTK-6	Discharged on Statin Medication	70	1	14	54	69	0	98.18 %
CMS108v7	eVTE-1	Venous Thromboembolism Prophylaxis	3217	57	1249	1911	3217	0	97.10 %
CMS190v7	eVTE-2	Intensive Care Unit Venous Thromboembolism Prophylaxis	3217	21	140	591	761	9	96.57 %
CMS72v7	eSTK-5	Antithrombotic Therapy By End of Hospital Day 2	70	3	21	45	69	0	93.75 %
CMS104v7	eSTK-2	Discharged on Antithrombotic Therapy	70	13	14	42	69	0	76.36 %
CMS71v8	eSTK-3	Anticoagulation Therapy for Atrial Fibrillation/Flutter	70	8	7	6	22	1	42.86 %
CMS113v7	ePC-01	Elective Delivery	134	0	0	0	0	0	0.00 %
CMS9v7	ePC-05	Exclusive Breast Milk Feeding	0	0	0	0	0	0	0.00 %

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Monitor & Improve

CMS108v8– Venous Thromboembolism Prophylaxis

Result: In Denominator Only

Conditions | Encounters | Medications | Procedures | Lab Tests | Allergy/ADR | Medical Devices | Clinical Documentation

Medical Devices

Drag a column header here to group by that column

Codes	Description	Start Time	End Time	Status
Snomed:428421000124107	Intermittent pneumatic compression sleeve (physical object)	1/8/2020 7:30:00 AM	1/8/2020 7:30:00 AM	applied
Snomed:428421000124107	Intermittent pneumatic compression sleeve (physical object)	1/8/2020 7:30:00 AM	1/8/2020 7:30:00 AM	ordered

CMS108v8– Venous Thromboembolism Prophylaxis

Result: In Denominator Only

Conditions | Encounters | Medications | Procedures | Lab Tests | Allergy/ADR | Medical Devices | Clinical Documentation

Encounters

Drag a column header here to group by that column

Codes	Decision To Admit Code	Description	Start Time	End Time	Facility Departure	Dis
Snomed:183452005		Emergency hospital admission (procedure)	1/3/2020 5:00:00 PM	1/8/2020 11:35:00 AM		
Snomed:4525004		Emergency department patient visit (procedure)	1/3/2020 1:20:00 PM	1/3/2020 5:00:00 PM	1/3/2020 5:00:00 PM	
Snomed:73607007	73607007	Hospital admission, emergency, from emergency room (procedure)	1/3/2020 3:16:00 PM	1/3/2020 3:16:00 PM		

Monitor & Improve

1. Regular Team Meetings – group emails & chats
2. Include stakeholders in decision making. Ask for input & feedback!
3. Educate on changes to requirements, measures, workflow
4. Weekly status updates
5. Provide access to eCQM reports and/or dashboards

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Gaps and Roadblocks

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Gaps and Roadblocks

- Regulatory Changes
- EHR Updates, Migrations
- Clinical and Documentation Changes
- Mapping Maintenance
- Continued Education
- Improvement Hurdles

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Submit

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Submission

- ONC Certified (2015)
- Use Correct Version
  - eCQM Specs
  - Value Sets
- QRDA I File Submission
- Vendor Authorization & DDSP Invite
- EHR Certification ID
- HARP (QNET) & DDSP (TJC)
- **Post-Submission Validation**
- Documentation of completion

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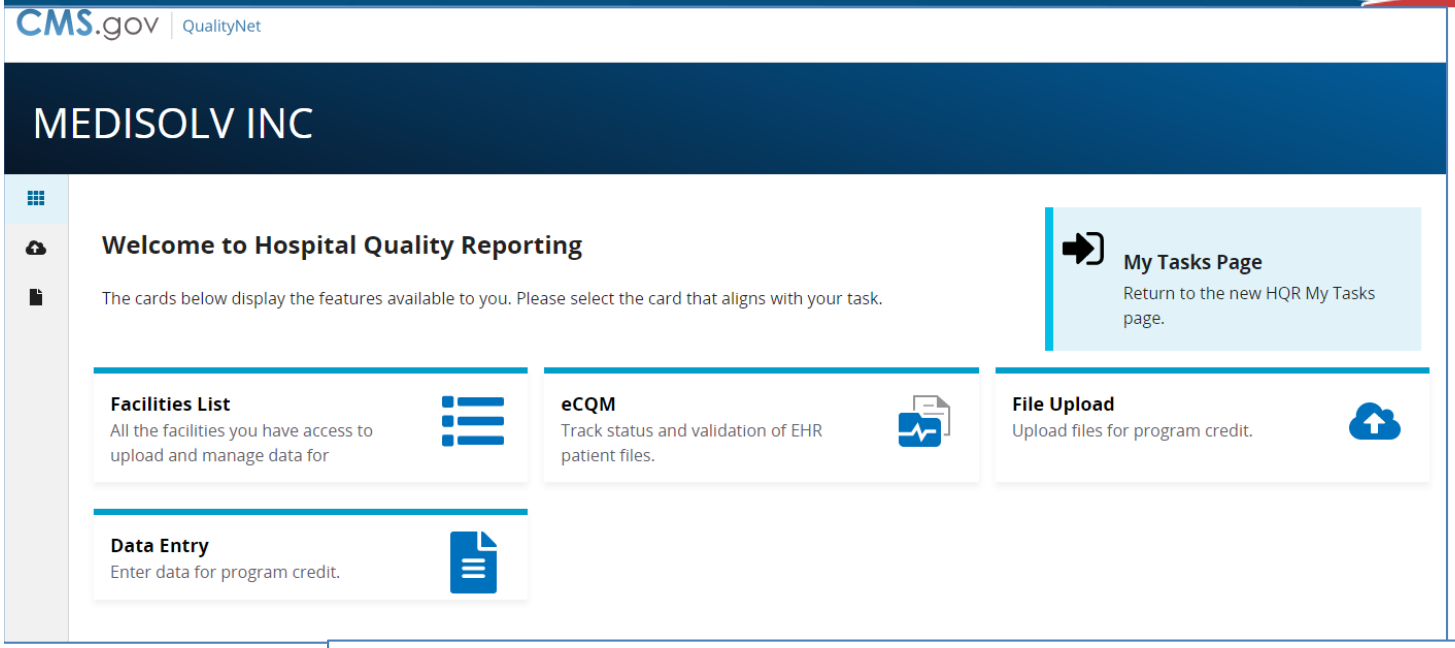
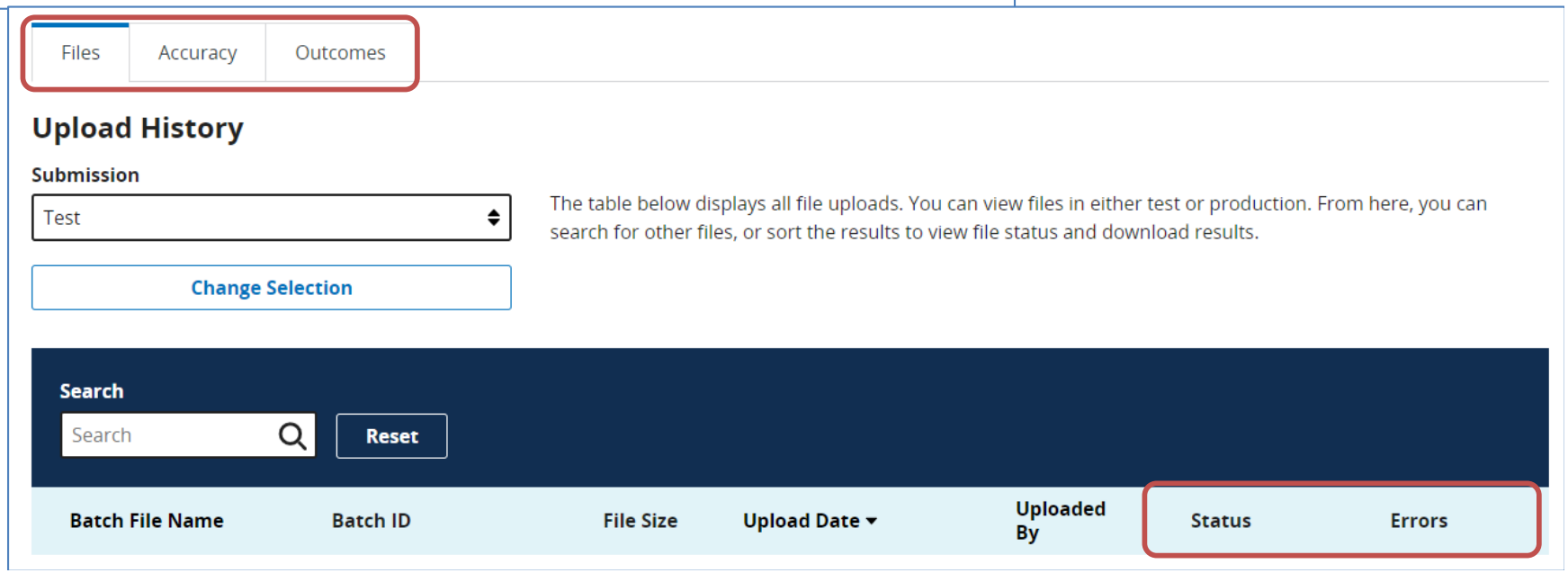
IQR - HARP


CMS.gov | QualityNet
MEDISOLV INC
Welcome to Hospital Quality Reporting
The cards below display the features available to you. Please select the card that aligns with your task.
My Tasks Page
Return to the new HQR My Tasks page.
Facilities List
All the facilities you have access to upload and manage data for
eCQM
Track status and validation of EHR patient files.
File Upload
Upload files for program credit.
Data Entry
Enter data for program credit.


Files
Accuracy
Outcomes
Upload History
Submission
Test
The table below displays all file uploads. You can view files in either test or production. From here, you can search for other files, or sort the results to view file status and download results.
Change Selection
Search
Search
Reset
Batch File Name
Batch ID
File Size
Upload Date
Uploaded By
Status
Errors

IQR - Submit

Report Run Date: 11/09/2019

EHR Hospital Reporting – eCQM Performance Summary Report

Submitter: V100359

Discharge Quarter: 01/01/2019 - 03/31/2019

Measure Set: AMI, CAC, ED, HearScreening, Hybrid Measures, PC, PN, SCIP, STK, VTE

Submitter ID: V100359-Medisolv, Inc

Provider ID:

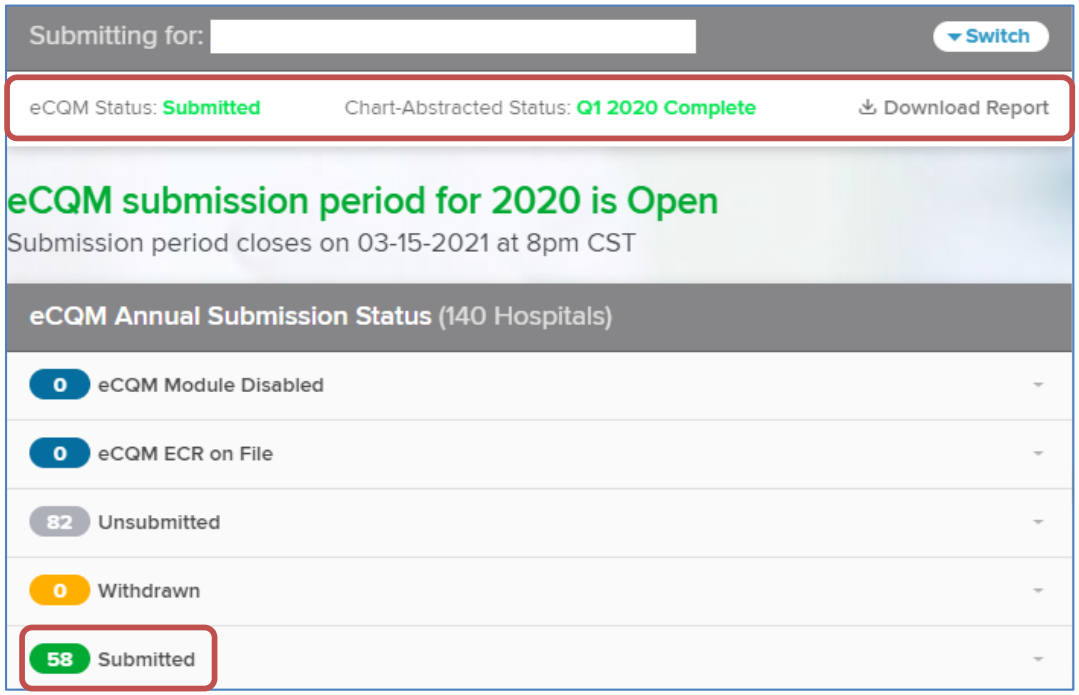
Measure ID	Version #	IPP	Denominator Population	Numerator Population	Denominator Exclusion	Denominator Exception	Continuous Variable	Performance Score
Measure Set: AMI								
AMI-8a	7	21	16	14	0	1	-	93.3333333 %
Measure Set: CAC								
CAC-3	6	1	1	1	-	-	-	100 %
Measure Set: ED								
ED-1 (Stratum 1)	7	2059	2059	0	-	-	335 minutes	-
ED-1 (Stratum 2)	7	30	30	0	-	-	366 minutes	-
ED-2 (Stratum 1)	7	1954	1954	0	-	-	298 minutes	-
ED-2 (Stratum 2)	7	30	30	0	-	-	313.5 minutes	-
Measure Set: HearScreening								
EHDI-1a	7	231	231	231	0	-	-	100 %
Measure Set: PC								
PC-01*	7	181	26	6	0	-	-	23.0769231 %
PC-05	7	201	201	55	30	-	-	32.1637427 %
Measure Set: STK								
STK-2	7	39	30	24	6	0	-	100 %
STK-3	8	39	8	4	3	0	-	80 %
STK-5	7	39	30	22	5	1	-	91.6666667 %
STK-6	7	39	30	19	6	3	-	90.4761905 %
Measure Set: VTE								
VTE-1	7	2261	2261	1716	538	-	-	99.5937319 %
VTE-2	7	2261	236	196	39	1	-	100 %

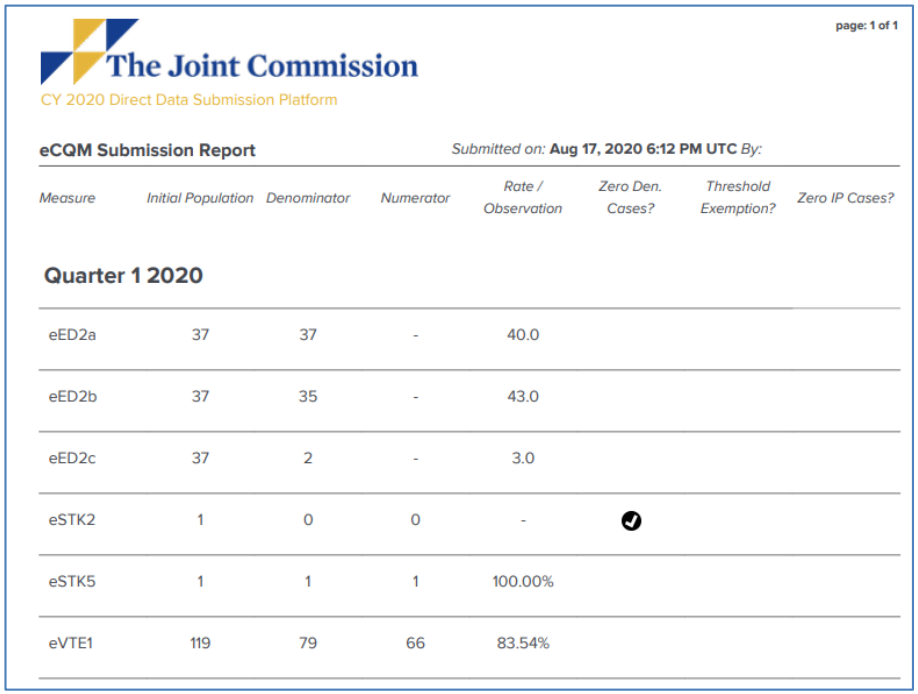
Rate Measure Results

Drag a column header here to group by that column

CMS Id	TJC Id	Measure Name	eCQM Version	Initial Population	In Denominator Only	Den. Exclusions	Numerator	Denominator	Exceptions	Rate
CMS113v7	ePC-01	Elective Delivery	2018 EH	181	9	16	1	26	0	10.00 %

TJC - DDSP





page: 1 of 1

The Joint Commission

CY 2020 Direct Data Submission Platform

eCQM Submission Report *Submitted on:* **Aug 17, 2020 6:12 PM UTC** *By:*

Measure	*Initial Population*	*Denominator*	*Numerator*	*Rate / Observation*	*Zero Den. Cases?*	*Threshold Exemption?*	*Zero IP Cases?*
Quarter 1 2020							
eED2a	37	37	-	40.0			
eED2b	37	35	-	43.0			
eED2c	37	2	-	3.0			
eSTK2	1	0	0	-	✓		
eSTK5	1	1	1	100.00%			
eVTE1	119	79	66	83.54%			

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TJC - DDSP

Data Accuracy | Quality Improvement

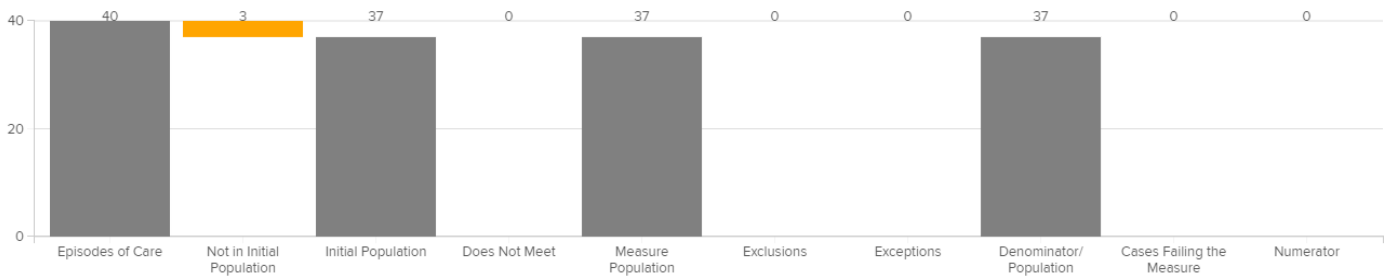
Quality Improvement

Measure
eED2a

Active Patients
37

Total Episodes of Care
40

Population Breakdown for the Selected Measure (Episodes of Care)



Clear Selection

Active Documents (37)

QRDA Documents without Errors

Search documents

Search

54ac ...l2.xml
54ac ...57.xml
54ac ...5d.xml
54ac ...e2.xml
54ac ...de.xml
54ac ...l4.xml
54ac ...83.xml
54ac ...'b.xml
54ac ...53.xml
54ac ...le.xml
54ac ...l1.xml
54ac ...l.xml
54c9 ...:df.xml
5550 ...6f.xml
557a ...6d.xml

Review patient results

Select Measures

eED2a

Select Quarter

quarter
2020Q1

Results by Measure

Rules engine results for measures by quarter.

	2020Q1	
	Initial Population	Observed Rate/Observation
eED2a	37	40
eED2b	37	43
eED2c	37	3
eSTK2	1	-
eSTK5	1	100%
eVTE1	119	83.54%

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Year 2: Maintaining the Foundation

- Verify Team & Update Resources
- Review Regulatory Requirement Changes
- Review Changes: Measures, Specifications…
- Update Gap Analysis / Roadblocks
- Review Data Capture, Mapping – Implement Updates
- Validate
- Monitor & Improve
- Submit

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Maintaining the Foundation

2020 Reporting:

Denominator Exceptions

"Encounter With No Antithrombotic At Discharge"
union "Encounter With Ticagrelor During Hospitalization"

Value Set Members

Expanded Code List

View | Toggle | Clear Page 1 of 1 20 View 1 - 2 of 2

Code	Descriptor	Code System	Version	Code System OID
1116635	Ticagrelor 90 MG Oral Tablet	RXNORM	2019-01	2.16.840.1.113883.6.88
1666332	Ticagrelor 60 MG Oral Tablet	RXNORM	2019-01	2.16.840.1.113883.6.88

2021 Reporting:

Denominator Exceptions

"Encounter With No Antithrombotic At Discharge"
union "Encounter With Pharmacological Contraindications for Antithrombotic Therapy at Discharge"

Value Set Members

Expanded Code List

View | Toggle | Clear Page 1 of 1 20 View 1 - 4 of 4

Code	Descriptor	Code System	Version	Code System OID
1116635	Ticagrelor 90 MG Oral Tablet	RXNORM	2020-01	2.16.840.1.113883.6.88
1666332	Ticagrelor 60 MG Oral Tablet	RXNORM	2020-01	2.16.840.1.113883.6.88
855812	prasugrel 10 MG Oral Tablet	RXNORM	2020-01	2.16.840.1.113883.6.88
855818	prasugrel 5 MG Oral Tablet	RXNORM	2020-01	2.16.840.1.113883.6.88

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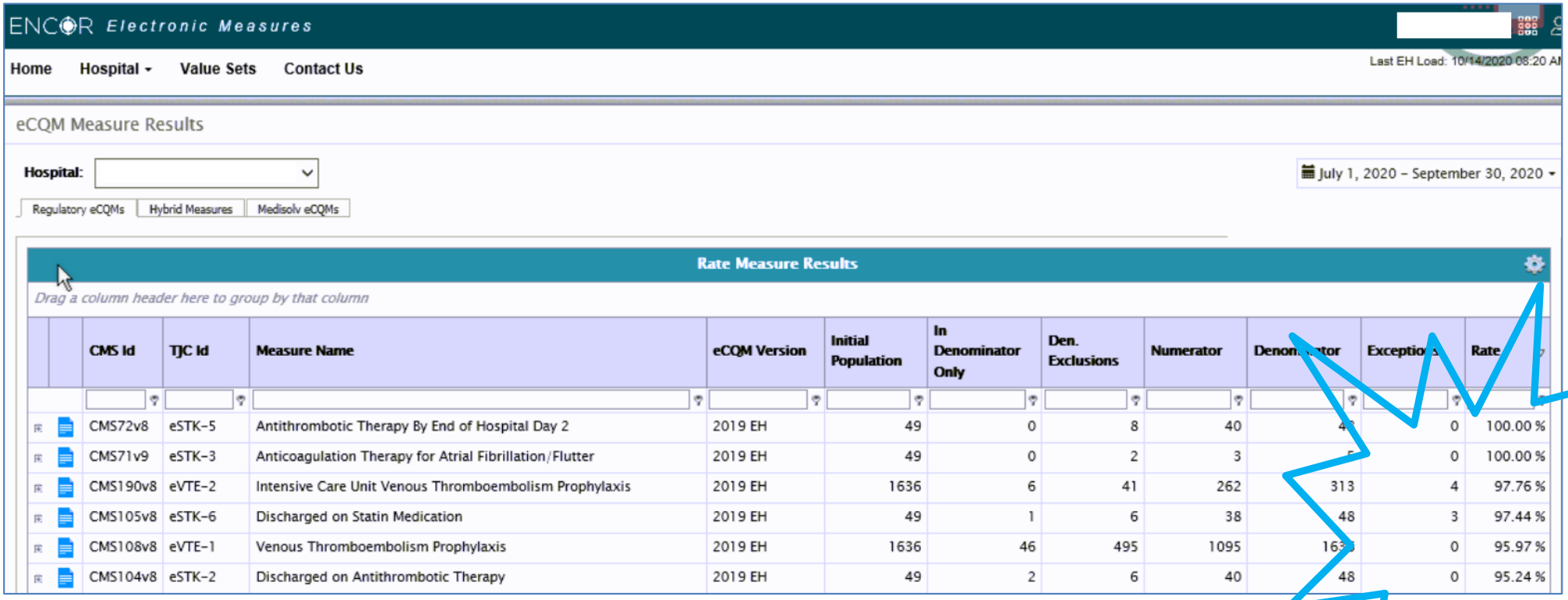
Share & Celebrate Success!



CMS Id	TJC Id	Measure Name	eCQM Version	Initial Population	In Denominator Only	Den. Exclusions	Numerator	Denominator	Exceptions	Rate
CMS72v8	eSTK-5	Antithrombotic Therapy By End of Hospital Day 2	2019 EH	49	0	8	40	48	0	100.00 %
CMS71v9	eSTK-3	Anticoagulation Therapy for Atrial Fibrillation/Flutter	2019 EH	49	0	2	3	5	0	100.00 %
CMS190v8	eVTE-2	Intensive Care Unit Venous Thromboembolism Prophylaxis	2019 EH	1636	6	41	262	313	4	97.76 %
CMS105v8	eSTK-6	Discharged on Statin Medication	2019 EH	49	1	6	38	48	3	97.44 %
CMS108v8	eVTE-1	Venous Thromboembolism Prophylaxis	2019 EH	1636	46	495	1095	1636	0	95.97 %
CMS104v8	eSTK-2	Discharged on Antithrombotic Therapy	2019 EH	49	2	6	40	48	0	95.24 %

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kbeatson@medisolv.com

Questions?

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