



2022 IPPS Proposed Rule

MAY 12, 2021



CMS IQR Program: Hybrid Measures & eCQMs

IQR 2022:

Hybrid Measures

Current:

- Hospital-Wide Readmission
- Voluntary reporting July 1, 2022 – June 30, 2023

Proposed:

- Addition of Hospital-Wide All-Cause Risk Standardized Mortality measure
- Voluntary reporting July 1, 2022 - June 30, 2023

Currently Specified Core Clinical Data Element Variables

Data Elements	Units of Measurement	Time Window for First Captured Values
Heart Rate	Beats per minute	0-2 hours
Systolic Blood Pressure	mmHg	0-2 hours
Temperature	Degrees (Fahrenheit or Celsius)	0-2 hours
Oxygen Saturation	Percent	0-2 hours
Hematocrit	Percent	0-24 hours
Platelet	Count	0-24 hours
White Blood Cell Count	10 ⁹ per liter (X10E+09/L)	0-24 hours
Sodium	mmol/L	0-24 hours
Bicarbonate	mmol/L	0-24 hours
Creatinine	mg/dL	0-24 hours

IQR 2022: *eCQMs*

There are no changes from 2021 rule

Current & Proposed:

- Mandatory reporting
- Reporting year: Jan 1, 2022 – December 31, 2022
- 3 quarters – self-selected; do not need to be consecutive
- 4 eCQMs
 - ✓ 3 self-selected; must submit the same across quarters
 - ✓ 1 required: Safe Use of Opioids – Concurrent Prescribing
 1. VTE-1
 2. VTE-2
 3. STK-2
 4. STK-3
 5. STK-5
 6. STK-6
 7. PC-05
 8. ED-2
 9. Safe Use of Opioids (CMS 506; 3316e)
- Public reporting of all measures submitted



IQR 2023:

Hybrid Measures



Current:

- Hospital-Wide Readmission
- Mandatory reporting July 1, 2023 – June 30, 2024
- Removing the Claims-based HWR Measure
- **Publicly reported** with 30-day review period prior to public reporting

Proposed:

- *Addition* of Hospital-Wide All-Cause Risk Standardized Mortality measure
- Mandatory reporting July 1, 2023 - June 30, 2024
- **Publicly reported** with 30-day review period prior to public reporting

IQR 2023:

eCQMs

Current:

- Mandatory reporting + Public Reporting
- Reporting year: Jan 1, 2023 – December 31, 2023
- 4 quarters
- 4 eCQMs
 - ✓ 3 self-selected; must submit the same across quarters
 - ✓ 1 required: **Safe Use of Opioids – Concurrent Prescribing**
 - VTE-1
 - VTE-2
 - STK-2
 - STK-3
 - STK-5
 - STK-6
 - PC-05
 - ED-2
 - **Safe Use of Opioids (CMS 506; 3316e)**

Proposed:

- *Addition* of Hospital Harm-Severe Hypoglycemia (NQF #3503e) and Hospital Harm-Severe Hyperglycemia (NQF #3533e)

IQR 2024:

Hybrid Measures



Current:

- Hospital-Wide Readmission
- Mandatory reporting July 1, 2024 – June 30, 2025
- Removing the Claims-based HWR Measure
- **Publicly reported** with 30-day review period prior to public reporting

Proposed:

- *Addition* of Hospital-Wide All-Cause Risk Standardized Mortality measure
- Mandatory reporting July 1, 2024 - June 30, 2025
- **Publicly reported** with 30-day review period prior to public reporting

IQR 2024:

eCQMs

Current:

- Mandatory reporting + Public Reporting
- Reporting year: Jan 1, 2024 – December 31, 2024
- 4 quarters
- 4 eCQMs
- ✓3 self-selected; must submit the same across quarters
- ✓1 required: Safe Use of Opioids – Concurrent Prescribing
 - VTE-1
 - VTE-2
 - STK-2
 - STK-3
 - STK-5
 - STK-6
 - PC-05
 - ED-2
 - Safe Use of Opioids (CMS 506; 3316e)



IQR 2024:

eCQMs

Proposed:

- Removal of 4 eCQMs
 - Exclusive Breast Milk Feeding
 - Admit Decision Time to ED Departure Time
 - Anticoagulation Therapy for Afib/flutter
 - Discharged on Statin

VTE – 1	VTE – 2	STK – 2	STK – 5
OPI - 1	HH - 01	HH – 02	



Promoting Interoperability Program

Promoting Interoperability Program

Proposed Changes

- **Increase minimum** scoring threshold from **50 points to 60 points**
- 90-day EHR reporting period
- **Increase** available points for PDMP (optional) measure from **5 to 10**
- Maintain electronic health information data availability from **1/1/2016** forward for Provide Patient Access to Health Information
- Addition of Health Information Bi-Directional Exchange measure to the HIE objective as alternative to the 2 existing HIE measures (Send Health Info + Receive & Incorporate Health Info). Yes/No attestation. *(40 points)*
- **Require 4** Public Health and Clinical Data Exchange measures *(up to 10 points)*
- **Complete an annual assessment** via a SAFER Guides measure under the Protect Patient Health Information objective
- **Remove statements 2 & 3** from Prevention of Information Blocking



■ 2023

- **90-day** EHR reporting period
- **2 new** eCQMs (*aligns with IQR*)

■ 2024

- **180-day** EHR reporting period
- **Remove 4** eCQMs (*aligns with IQR*)



Clarifications and Other Updates

Clarifications and Other Updates

Hybrid Measures

HWM Measure

1

Age 65 – 94

(HWR: Age \geq 65)

2

Vital signs must be reported for >90% of hospital admissions.

3

Lab results must be reported for >90% of non-surgical admissions.

****HWR:
Age \geq 65
CCDEs must be reported for >90% of hospital admissions***

HWM Measure

LAB RESULTS

Many surgical patients
do not have results
within the time window.

*However, any lab values
that do fall within the
appropriate time window
should be submitted.*

VOLUNTARY REPORTING

There is **one voluntary
reporting period** for HWM.

Hospitals have two
separate opportunities to
learn how to report the
CCDEs for the HWR,
*which mostly aligns with
the HWM core clinical
data elements.*

SUBMISSION DEADLINE

Hospitals must submit
within 3 months
after the end of the
reporting period.

Clarifications and Other Updates

eCQMs

eCQMs

1

Measures must be the
same across quarters
in any given reporting year.

2

Quarters **do not** have
to be consecutive.

A close-up, angled view of a laptop screen displaying HTML code. The code includes various HTML tags like `<table>`, `<tr>`, `<td>`, `<div>`, and ``, along with attributes like `width`, `height`, `align`, and `style`. The keyboard is visible at the bottom of the frame.

- Has been updated consistent with the **2015 Edition Cures Update**
- Supports reporting requirements for **all eCQMs**

Helpful Resources

- eCQI Resource Center
 - <https://ecqi.healthit.gov/>
- Value Set Authority Center
 - <https://vsac.nlm.nih.gov/>
- Proposed Rule Fact Sheet
 - [Fact Sheet](#)
- Press Release
 - [Press Release](#)
- 2022 Proposed Rule
 - [Fiscal Year 2022 IPPS Proposed Rule](#)



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