

Critical Access Hospital Electronic Clinical Quality Measure (eCQM) Resource List

September 2024

Jump to sections in this list

[Inpatient eCQMs](#) | [Hybrid Measures](#) | [Outpatient eCQMs](#)
[Additional Resources](#) | [Available Inpatient eCQMs Table](#)

Inpatient eCQM Reporting requirements are aligned between two Centers for Medicare and Medicaid (CMS) programs:

Promoting Interoperability (PI) Program	Inpatient Quality Reporting (IQR)
<ul style="list-style-type: none"> • CAHs must participate in the Medicare Promoting Interoperability (PI) Program to avoid a downward payment adjustment. • Hospitals are required to submit eCQM data from certified electronic health record technology (CEHRT) • eCQM submission is one component of the Medicare PI Program • For a complete summary of PI requirements, see the 2024 Promoting Interoperability Program Requirements CMS 	<ul style="list-style-type: none"> • Critical access hospitals (CAHs) are not held to the IQR program requirements but meeting the Hospital IQR Program eCQM requirement also satisfies the eCQM electronic reporting requirement for the Medicare PI Program. • CAHs are not included in the CMS eCQM data validation process.

Calendar Year (CY) 2024 Inpatient eCQM Reporting Requirements:

- Six measures for all four quarters of CY 2024
 - Three self-selected measures from the list of [available Inpatient eCQMs](#)
 - Three required measures:
 - Safe Use of Opioids – Concurrent Prescribing
 - ePC-02 - Cesarean Birth¹
 - ePC-06 – Severe Obstetric Complications¹
- Submission deadline: February 28, 2025

Submission Process:

Data must be submitted through the Hospital Quality Reporting (HQR) Secure Portal as any combination of the following:

- Upload QRDA Category I files with patients meeting the initial patient population of applicable measure(s).
- Zero denominator declarations.
- Case threshold exemptions ($\neg < 5$ cases in the reporting quarter).

¹ All hospitals are required to report ePC-02 and ePC-07 starting with the CY 2024 reporting period, those that do not provide OB services should submit a zero-denominator declaration for those two measures.

Inpatient eCQM Resources:

- [QualityNet eCQM Overview](#): Information on eCQM reporting requirements for the Hospital IQR Program and alignment with the PI Program requirements.
- [CY 2024 Available eCQMs](#): List of measures for hospital eCQM submission.
- [CY 2024 eCQM Submission Overview](#): Summary of program requirements, technical requirements, and tools.
- [CY 2024 eCQM QRDA 1 File Submission Checklist](#): eCQM file submission instructions for the Hospital Quality Reporting System.
- [Electronic Clinical Quality Improvement \(eCQI\) Resource Center](#):
 - Documentation to support CY 2024 eCQM reporting activities, including measure summaries, an eCQM Implementation Checklist, eCQM eMeasure Logic Guidance, eCQM measure flows, and eCQM Technical Release Notes.

Note: Ensure you select the CY 2024 Reporting Period, as resources for other reporting periods are also posted.

- [Quality Reporting Center Events](#): Training and events related to eCQM reporting.
 - Events from current previous years can be found at [eCQM Events on Demand](#).

Changes Coming!

Public Reporting

- CMS announced they would start public reporting of inpatient eCQM data beginning with CY 2021 data.
- CY 2021 and 2022 data is available in the [CMS Provider Data Catalog](#) (public use files), and eCQM data has been included on the [Inpatient Hospital Preview reports](#) since January 2023.
 - CMS will report the *Safe Use of Opioids eCQM* on [CMS Care Compare](#) starting in October 2024 (CY 2023 reporting).
 - Public display of additional eCQMs on [CMS Care Compare](#) is anticipated in the future.
- Hospitals can review their eCQM data before it is made public during a 30-day preview period.

Increased Reporting Requirements

- CMS has indicated that they will increase reporting requirements over the coming years, shifting to increasing the number of hospital-harm related eCQMs that are mandatory for reporting (see table below). In addition to the mandatory measures, hospitals will still self-select three additional measures for reporting.
- Two new additional eCQMs will be available for reporting starting in CY 2026:
 - Hospital Harm – Falls with Injury
 - Hospital Harm – Postoperative Respiratory Failure

Hybrid Measures and Outpatient eQMs

Hybrid Hospital-Wide Readmission (HWR) and Hospital-Wide Mortality (HWM) Measures

- A hybrid measure uses both claims data and core clinical data elements from the electronic health records (EHR) for measure calculation.
- Reporting for the HWR and HWM is mandatory under the Hospital IQR Program starting in 2024². The measures are anticipated to be publicly reported beginning in 2025 (based on the 2024 submission).
 - Data submission deadline: **September 30, 2024**, for hospitalizations between July 1, 2023, through June 30, 2024.
 - Hospitals that report will receive a hospital-specific measure report in spring 2025.
- Hybrid Hospital-Wide Readmission is an [MBQIP 2025 Core Measure](#)
- Resources:
 - [FY 2026 Hybrid Measures Data](#) (Quality Reporting Center Recorded Event – focusing on data due September 30, 2024), Recorded July 30, 2024
 - [Reporting eQOM and Hybrid Measure Data Using the 2024 CMS QRDA Category I Implementation Guide](#) (On-Demand recording from the Quality Reporting Center), Recorded April 20, 2024
 - Hybrid Measures Standards and Tools: [Hybrid Measures \(2024\) | eCQI Resource Center \(healthit.gov\)](#)
 - [RQITA Hybrid Hospital-Wide Readmission Data Submission Guide](#)

Outpatient eQMs

- CMS recently started adopting eQMs in the Outpatient Quality Reporting (OQR) Program. Two eQMs are currently available:
 - OP-40: Appropriate Treatment for ST-Segment Elevation Myocardial Infarction (STEMI) Patients in the Emergency Department.
 - Mandatory for OQR with CY 2024 reporting (one self-selected quarter)
 - Excessive Radiation Dose or Inadequate Image Quality for Diagnostic Computed Tomography (CT) in Adults
 - Voluntary for OQR for CY 2025, Mandatory for CY 2026
- Resources:
 - Specifications for both measures are available on the eQI Resource Center: [Outpatient Quality Reporting eQMs](#)
 - [ST-Segment Elevation Myocardial Infarction \(STEMI\) Electronic Clinical Quality Measure \(eQOM\): Appropriate Treatment for STEMI Patients in the Emergency Department](#) (Quality Reporting Center Recorded webinar, April 24, 2024)

Note: Reporting outpatient eQMs does not count towards the required eQOM reporting for the Promoting Interoperability Program.

Additional Resources

- [CMS Promoting Interoperability Program Requirements](#)
- [eQOM Extraordinary Circumstance Extensions/Exemptions \(ECE\) Clarifications](#)

² CMS added a provision in the 2025 Outpatient Prospective Payment System (OPPS) Proposed Rule to make the 2024 reporting of HWR and HWM data voluntary, pushing back the required submission timeline to 2025.

Available Inpatient eQMs (X–can be self-selected by hospitals for reporting)

Short Name	Available Measures by Reporting Year	CY 2024	CY 2025	CY 2026	CY 2027	CY 2028
GMCS	Global Malnutrition Composite Score*	X	X	X	X	X
VTE-1	Venous Thromboembolism Prophylaxis	X	X	X	X	X
VTE-2	Intensive Care Unit Venous Thromboembolism Prophylaxis	X	X	X	X	X
STK-2	Discharged on Antithrombotic Therapy	X	X	X	X	X
STK-3	Anticoagulation Therapy for Atrial Fibrillation/Flutter	X	X	X	X	X
STK-5	Antithrombotic Therapy by End of Hospital Day 2	X	X	X	X	X
IP-ExRad	Excessive Radiation Dose or Inadequate Image Quality for Diagnostic Computed Tomography (CT) in Adults		X	X	X	X
HH-RF	Hospital Harm - Falls with Injury			X	X	X
HH-RF	Hospital Harm - Postoperative Respiratory Failure			X	X	X
HH-01	Hospital Harm—Severe Hypoglycemia	X	X	Required	Required	Required
HH-02	Hospital Harm—Severe Hyperglycemia	X	X	Required	Required	Required
HH-ORAE	Hospital Harm – Opioid-Related Adverse Events	X	X	X	Required	Required
HH-PI	Hospital Harm – Pressure Injury		X	X	X	Required
HH-AKI	Hospital Harm – Acute Kidney Injury		X	X	X	Required
ePC-02	Cesarean Birth**	Required	Required	Required	Required	Required
ePC-07	Severe Obstetric Complications**	Required	Required	Required	Required	Required
Safe Use of Opioids	Safe Use of Opioids – Concurrent Prescribing <i>(Also an MBQIP Measure)</i>	Required	Required	Required	Required	Required

* Population expanded to those over 18 years of age starting in CY 2025 (previous specifications for 65+).

**All hospitals, except those that do not have OB or do not perform deliveries, are required to report ePC-02 and ePC-07 starting with the CY 2024 reporting period.