



MARCH 2021 CMS QUALITY PROGRAMS BI- MONTHLY FORUM

March 30, 2021



AGENDA

Topic	Speaker
• Medicare Promoting Interoperability Program Updates	Andrew Morgan Division of Value-Based Incentives and Quality Reporting, CMS
• Call for Measures and Certified Electronic Health Record Technology Updates	Dylan Podson Division of Value-Based Incentives and Quality Reporting, CMS
• Electronic Clinical Quality Measure Standards Cycle Graphic Overview	Jennifer Seeman ESAC, Inc.
• Electronic Clinical Quality Improvement Resource Center Updates	Edna Boone Battelle/ESAC, Inc.
• Quality Payment Program Updates	Kati Moore Division of Electronic and Clinician Quality, CMS



MEDICARE PROMOTING INTEROPERABILITY PROGRAM UPDATES

*Presenter: Andrew Morgan, Division of Value-Based
Incentives and Quality Reporting, CMS*



2020 MEDICARE PROMOTING INTEROPERABILITY PROGRAM DATA SUBMISSION EXTENSION REMINDER

- The deadline for hospitals and critical access hospitals (CAHs) to submit their 2020 Medicare Promoting Interoperability Program data is now **Thursday, April 1, 2021 at 11:59 p.m. ET.**
- Medicare-eligible hospitals and CAHs must attest through the [QualityNet Secure Portal](#).
 - If you are new to the QualityNet system, you must [enroll](#).
 - If you qualify for both the Medicare and Medicaid Promoting Interoperability Programs, you must demonstrate meaningful use to CMS and not to your State Medicaid agency and will need to complete registration and attestation with CMS.
- For more information, you can visit the [Registration & Attestation page](#) on the Promoting Interoperability Programs website.



2021 MEDICARE PROMOTING INTEROPERABILITY PROGRAM HARDSHIP EXCEPTION APPLICATION UPDATES



CALL FOR MEASURES AND CERTIFIED ELECTRONIC HEALTH RECORD TECHNOLOGY (CEHRT) UPDATES

Presenter: Dylan Podson, Division of Value-Based Incentives and Quality Reporting, CMS



MEDICARE PROMOTING INTEROPERABILITY PROGRAM ANNUAL CALL FOR MEASURES

- The Annual Call for Measures for eligible hospitals and critical access hospitals (CAHs) participating in the Medicare Promoting Interoperability Program opened on **March 25, 2021**.
 - Proposals submitted by the deadline will be considered for inclusion in future rulemaking.
 - Submission forms must be completed to be considered. Any information not applicable to the measure proposal must state “N/A” or “not applicable.”
- Proposals must be sent to CMSPICallforMeasures@ketchum.com by June 30, 2021. Applicants will receive email confirmations of their submission.
- For more information, visit the [Annual Call for Measures page](#) on the Promoting Interoperability Programs website.



UPDATED 2021 CEHRT REQUIREMENTS

- In accordance with the updated certification criteria in the ONC 21st Century Cures Act Final Rule, Medicare Promoting Interoperability Program participants can use 2015 Edition CEHRT, the 2015 Edition Cures Update criteria, or a combination of the two in order to meet the CEHRT definition as finalized in the CY 2021 PFS final rule.
 - The ONC 21st Century Cures Act Final Rule introduced a small number of new certification criteria, revised several existing certification criteria, and removed several certification criteria.
 - This approach is similar to previous transition periods between Editions. For example, the transition from the 2014 Edition to 2015 Edition of CEHRT.
 - Health IT Vendors and health care providers will have until December 31, 2022 to upgrade to the 2015 Edition Cures Update of CEHRT.



UPDATED 2021 CEHRT REQUIREMENTS

- CEHRT functionality must be in place by the first day of the EHR reporting period and the product must be certified by the last day of the EHR reporting period.
- The eligible hospital or CAH must be using their selected version's functionality for the full EHR reporting period.
- For more information regarding these updates, please review:
 - [2021 Physician Fee Schedule Final Rule](#)
 - [ONC 21st Century Cures Act Final Rule](#)

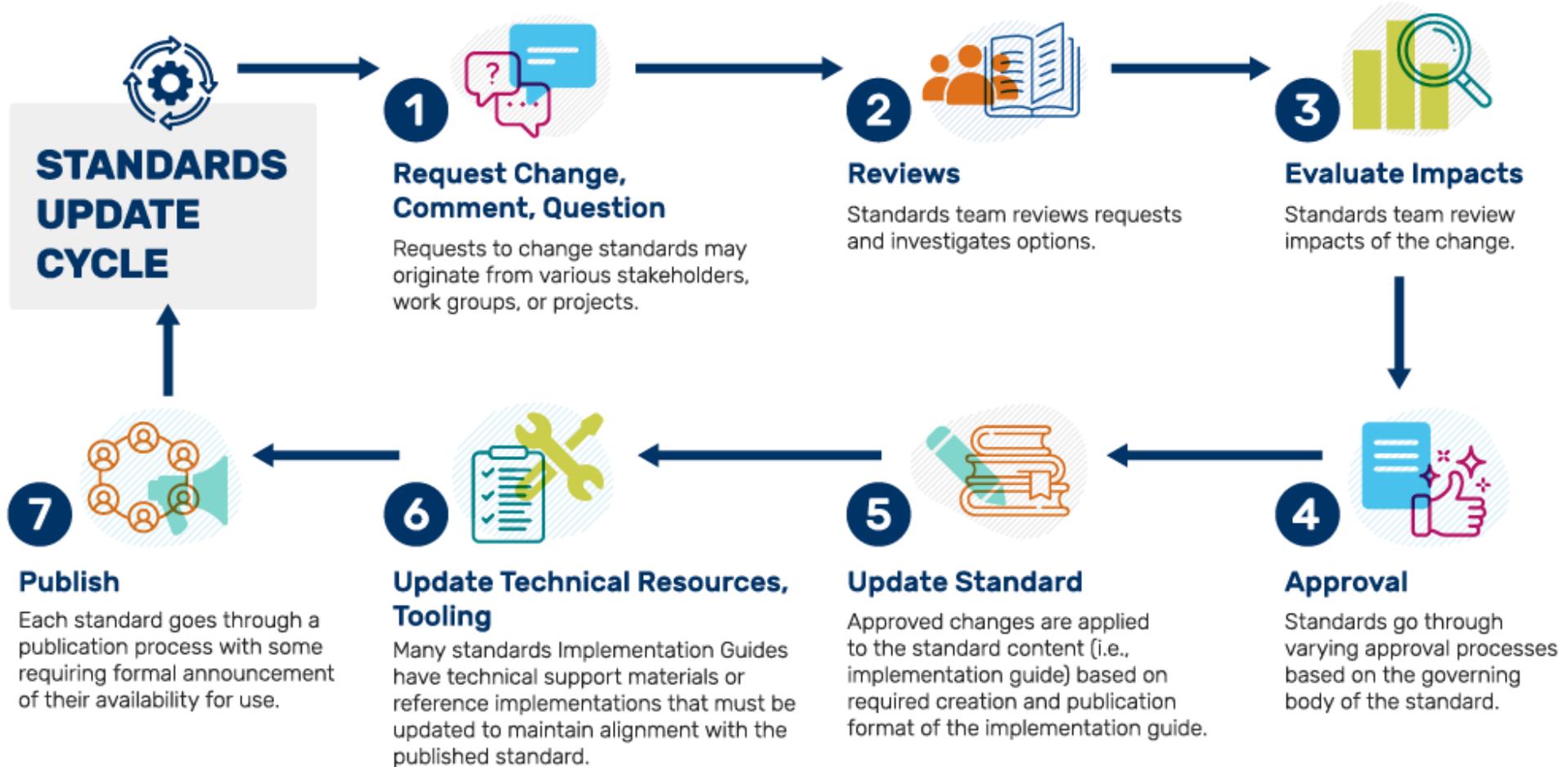


ELECTRONIC CLINICAL QUALITY MEASURE (ECQM) STANDARDS CYCLE GRAPHIC OVERVIEW

Presenter: Jennifer Seeman, ESAC, Inc.



ECQM STANDARDS CYCLE



ELECTRONIC CLINICAL QUALITY IMPROVEMENT (ECQI) RESOURCE CENTER UPDATES

Presenter: Edna Boone, Battelle/ESAC, Inc.



ECQM ANNUAL UPDATE PRE-PUBLICATION DOCUMENT

- The Centers for Medicare & Medicaid Services (CMS) published the [Electronic Clinical Quality Measures \(eCQM\) Annual Update Pre-Publication Document](#) on February 8, 2021.
- Purpose:
 - Describes changes in the standards and code system versions used in the eCQMs for potential use in CMS quality reporting programs for the 2022 reporting/performance period.
 - Designed to help health information technology (IT)/electronic health record (EHR) developers, Eligible Professionals/Eligible Clinicians, and Eligible Hospitals/Critical Access Hospitals prepare for the 2022 reporting/performance period through transparent pre-release of expected standards and code system versions.

LOCATING THE ECQM ANNUAL UPDATE PRE-PUBLICATION DOCUMENT



Eligible Professional / Eligible Clinician eQMs

[Receive updates on this topic](#)

Select Performance Period:

2022

eCQM Resources

EP/EC eQMs

About

Search Resources

Apply

2022 Performance Period Eligible Professional / Eligible Clinician Resources

For Use	eCQM Implementation Resources	Published
Jan 1 - Dec 31 2022	eCQM Annual Update Pre-Publication Document (PDF) ⓘ	Feb 2021

LOCATING THE ECQM ANNUAL UPDATE PRE-PUBLICATION DOCUMENT

The screenshot shows the eCQI Resource Center website. At the top left is the logo "eCQI RESOURCE CENTER". To its right is a navigation menu with "eCQMs" (Electronic Clinical Quality Measures), "Resources" (Standards, Tools, & Resources), "About" (eCQI, CDS, FAQs, Engage), and "Sign In" (Manage Your Account). A search bar labeled "Enter keywords" is on the far right. A large blue banner contains the text "Updated eCQM pages and enhanced eCQM Data Element navigation Now Available" and three orange buttons: "Eligible Professional/Clinician", "Eligible Hospital/CAH", and "eCQM Telehealth Guidance Now Available". A dark blue dropdown menu is open, listing "EP/EC ECQMS" (Eligible Professional / Eligible Clinician eCQMs, Pre-Rulemaking eCQMs), "EH/CAH ECQMS" (Eligible Hospital / Critical Access Hospital eCQMs, Pre-Rulemaking eCQMs, Hybrid Measures), "ABOUT" (About eCQMs, eCQM Annual Timeline, eCQM Lifecycle, Certification), and "MEASURE COLLABORATION" (Measure Collaboration (MC) Workspace). A background image shows a healthcare professional at a desk.

Featured Resources



ECQM STANDARDS & TOOLS VERSIONS CHART

- CMS updated the [eCQM Standards & Tools Versions Chart](#) on February 12, 2021.
- Provides the standards and tools used to create, test, and support the implementation of the eCQMs for potential use in CMS quality reporting programs for the 2022 reporting/performance period and previous years.
- Similar to the Pre-Publication document, the Versions chart is designed to help health IT/EHR developers, Eligible Professionals/Eligible Clinicians, and Eligible Hospitals/Critical Access Hospitals prepare for the 2022 reporting/performance period.



LOCATING THE ECQM STANDARDS AND TOOLS VERSIONS CHART

eCQI
RESOURCE CENTER

eCQMs -
Electronic Clinical
Quality Measures

Resources -
Standards, Tools, &
Resources

About -
eCQI, CDS, FAQs
Engage

Sign In
Manage Your
Account

Enter keywords

eCQI Tools & Key Resources

[Receive updates on this topic](#)

About **eCQM Standards and Tools Versions** eCQI Tools & Resources Library Education

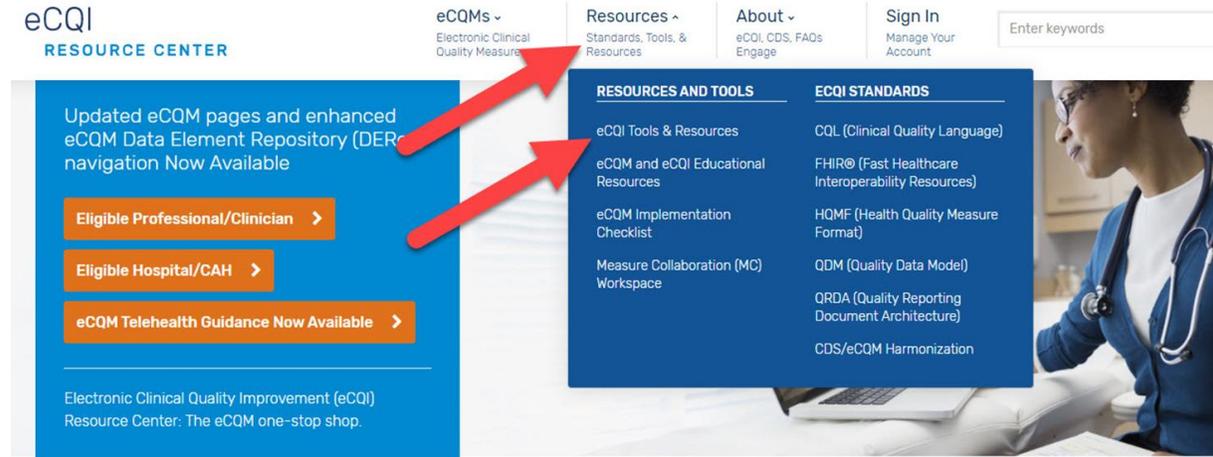
The standards and tools versions listed for each reporting/performance period are the versions used to create and/or support the implementation of the specific reporting/performance period specifications. Newer versions of the standards and tools may be available, but were not used in the development of the reporting/performance period listed.

Reporting/Performance Period

Select a Reporting Period

Reporting/Performance Period	eCQM Annual Update	Tool and Resource Versions	Standard Versions
2022	<ul style="list-style-type: none"> EH/CAH Spring 2021 EP/Eligible Clinicians Spring 2021 	<ul style="list-style-type: none"> MAT V6.04 eCQM Logic and Implementation Guidance V5.0 Cypress V6.0 Bonnie V4.2.1 CQL-to-ELM Translator V1.4.6 	<ul style="list-style-type: none"> QDM v5.5 Guidance Update (PDF) HL7 V3 IG: CQL-based HQMF IG R1 STU 4* HL7 CQL R1 STU 4 HL7 V3 HQMF Normative Release 1* HL7 QRDA I R1 STU R5.2 with errata HL7 QRDA III R1 STU R2.1 2022 CMS QRDA I IG for Hospital Quality Reporting (Coming Summer 2021) 2022 CMS QRDA III IG for Eligible Clinicians/EPs (Coming Summer 2021)

LOCATING THE ECQM STANDARDS AND TOOLS VERSIONS CHART



Featured Resources



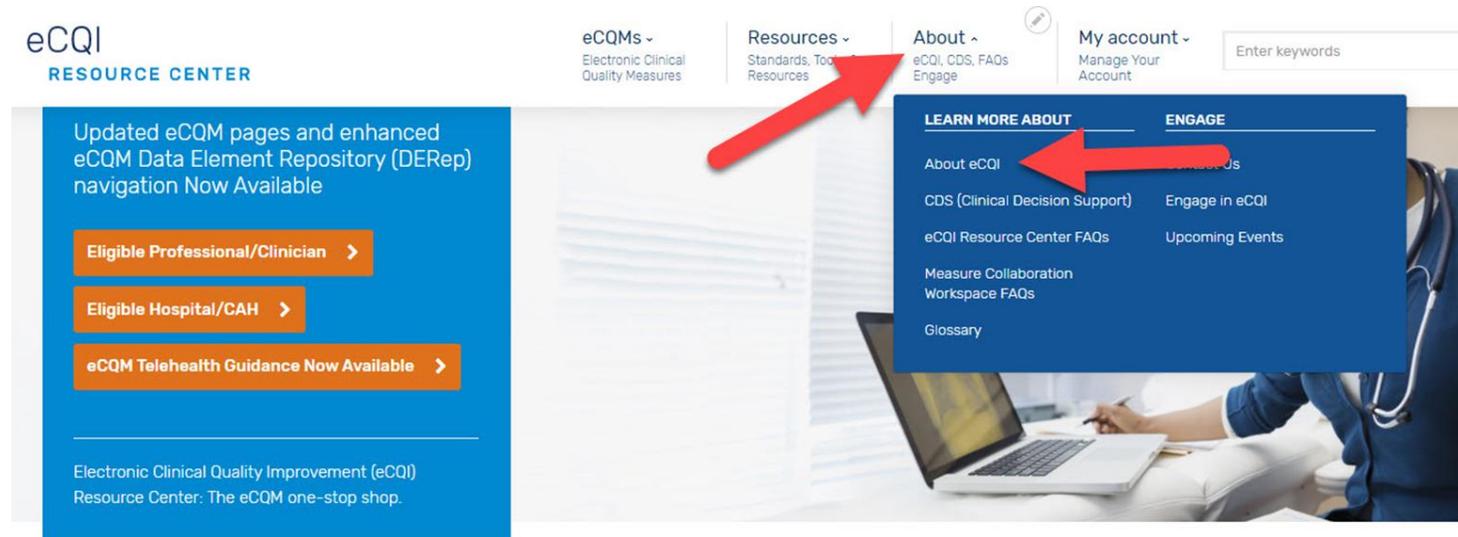
ECQI ECOSYSTEM GRAPHIC

- The eCQI Ecosystem Graphic was adapted from a graphic developed by the Health Level Seven International® (HL7®) Quality Improvement Workgroup.
- The image highlights the ideal iterative flow of evidence-based information from research to clinical practice and measurement to evaluate clinical performance and outcomes for healthcare organizations.
- Please note that while it is depicted in a linear fashion, the process is often interactive between stakeholders and phases as well as iterative.
- Find on the [About eCQI](#) page.

ECQI ECOSYSTEM GRAPHIC



LOCATING THE ECQI ECOSYSTEM GRAPHIC



Featured Resources

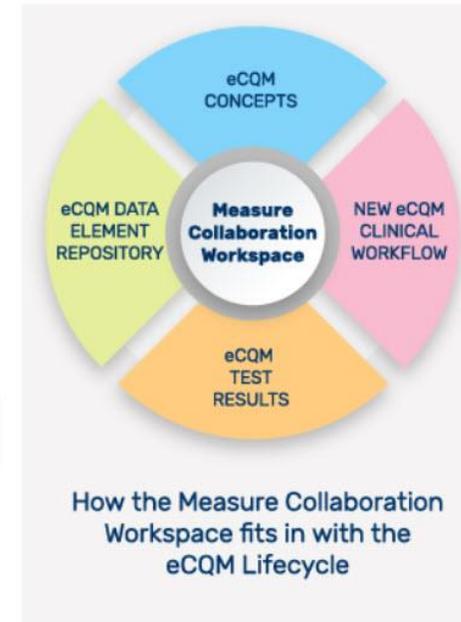
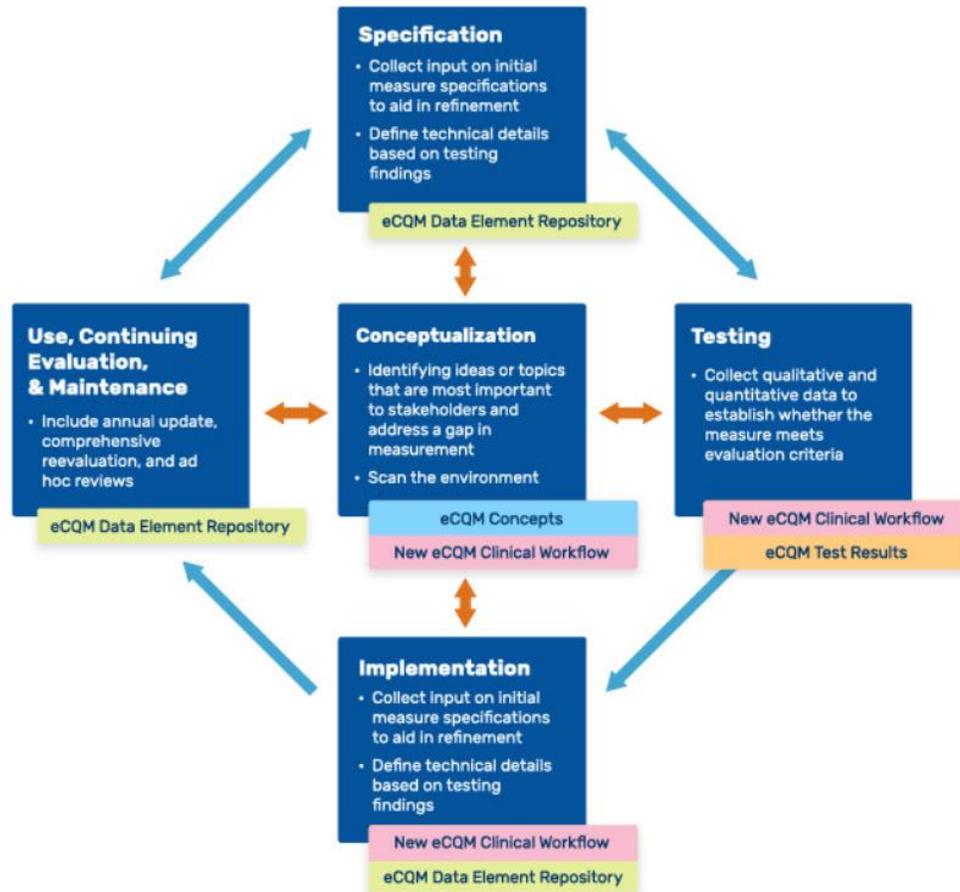


MEASURE COLLABORATION (MC) WORKSPACE AND LIFECYCLE GRAPHIC

- The [MC Workspace](#) is a web-based tool that brings together a set of interconnected resources, tools, and processes to promote transparency and better interaction across stakeholder communities that develop, implement, and report eCQMs.
- The new graphic highlights the key MC Workspace modules for use during various [eCQM Lifecycle](#) stages.



MEASURE COLLABORATION (MC) WORKSPACE



LOCATING MEASURE COLLABORATION (MC) WORKSPACE/ECQM LIFECYCLE GRAPHIC

The screenshot displays the eCQI Resource Center website. At the top left, the logo reads "eCQI RESOURCE CENTER". A red arrow points to the "eCQMs" dropdown menu, which includes "Electronic Clinical Quality Measures". To its right are "Resources" (Standards, Tools, & Resources) and "About" (eCQI, CDS, FAQs, Engage) menus. A search bar on the right contains the text "Enter keywords" and a magnifying glass icon. Below the navigation is a blue banner with the text "Updated eCQM pages and enhanced eCQM Data Element Repository (DER) navigation Now Available". Three orange buttons are visible: "Eligible Professional/Clinician", "Eligible Hospital/CAH", and "eCQM Telehealth Guidance Now Available". Below the banner is a blue box with the text "Electronic Clinical Quality Improvement (eCQI) Resource Center: The eCQM one-stop shop." A dark blue dropdown menu is open, showing categories: "EP/EC ECQMS" (Eligible Professional / Eligible Clinician eCQMs, Pre-Rulemaking eCQMs), "EH/CAH ECQMS" (Eligible Hospital / Critical Access Hospital eCQMs, Pre-Rulemaking eCQMs, Hybrid Measures), "ABOUT" (About eCQMs, eCQM Annual Timeline, eCQM Lifecycle, Certification), and "MEASURE COLLABORATION" (Measure Collaboration (MC) Workspace). A red arrow points to the "Measure Collaboration (MC) Workspace" link. Below the dropdown is a photograph of a healthcare professional at a desk. At the bottom, the "Featured Resources" section contains three icons: a person with a speech bubble, a hospital building with a cross, and a graduation cap.

ENGAGE IN ECQI

- The federal government and private stakeholders provide opportunities for stakeholders to actively engage in eCQI efforts in multiple ways, e.g., open meetings, public comment periods, expert panels, and educational events.
- On the [Engage in eCQI](#) page you can select the user type you most associate yourself with and the table will sort opportunities that may be of interest to you.



LOCATING ENGAGE IN ECQI

The screenshot shows the eCQI Resource Center website. At the top left is the eCQI logo and 'RESOURCE CENTER'. Navigation tabs include 'eCQMs - Electronic Clinical Quality Measures', 'Resources - Standards, Tools, & Resources', 'About - eCQI, CDS, FAQs Engage', and 'My account - Manage Your Account'. A search bar is on the right. A blue sidebar on the left contains a message about updated eCQM pages and three orange buttons: 'Eligible Professional/Clinician', 'Eligible Hospital/CAH', and 'eCQM Telehealth Guidance Now Available'. Below this is the text 'Electronic Clinical Quality Improvement (eCQI) Resource Center: The eCQM one-stop shop.' The main content area features a blue dropdown menu under 'About' with two columns: 'LEARN MORE ABOUT' (containing links for About eCQI, CDS, eCQI Resource Center FAQs, Measure Collaboration Workspace FAQs, and Glossary) and 'ENGAGE' (containing links for Contact Us, Engage in eCQI, and Upcoming Events). Red arrows point to the 'About' dropdown and the 'Engage in eCQI' link. The background image shows a person in a blue lab coat working at a laptop.

Featured Resources



SNIPPET OF ENGAGE IN ECQI PAGE

Engage in Electronic Clinical Quality Improvement (eCQI)

[Receive updates on this topic](#)

Ways to engage with the eCQI community

The federal government and private stakeholders provide opportunities for stakeholders to actively engage in eCQI efforts through open meetings, public comment periods, expert panels, and educational events. Select the user type you most associate yourself with and the table will filter opportunities that may be of interest to you.

What User Type do you most associate with?

- Any -

Apply

Opportunity	Description
CDS Connect	Receive occasional updates regarding open-source, freely available CDS Connect tools—including a repository of clinical decision support (CDS) artifacts, authoring tool for creation of CDS, and prototype development tools for testing and integrating CDS into health systems.
CMS Measures Management System Listserv	Provides periodic e-mail newsletters with information on CMS quality measures, updates to the MMS web pages, and other CMS news.



CONTACT THE ECQI RESOURCE CENTER AND MC WORKSPACE

- Email comments, suggestions, questions, and requests to post events and news to ecqi-resource-center@hhs.gov
- Visit the [eCQI Resource Center Frequently Asked Questions](#)
- Visit the [MC Workspace Frequently Asked Questions](#)



QUALITY PAYMENT PROGRAM (QPP) UPDATES

*Presenter: Kati Moore, Division of Electronic and Clinician
Quality, CMS*



MERIT-BASED INCENTIVE PAYMENT SYSTEM (MIPS) 2020 DATA SUBMISSION PERIOD

- The MIPS 2020 data submission period will close tomorrow, **March 31, 2021** at **8 p.m. ET.**
- To submit 2020 MIPS data, eligible clinicians should follow the steps outlined below:
 - Go to the [Quality Payment Program website](#).
 - Sign in using your QPP access credentials.
 - If you aren't registered in the HCQIS Authorization Roles and Profile (HARP) system, refer to the [QPP Access User Guide](#).
 - Submit your MIPS data for the 2020 performance period or review the data reported on your behalf by a third party.



COVID-19 RESPONSE: 2020 & 2021 PERFORMANCE YEARS

- The 2019 Coronavirus (COVID-19) public health emergency continues to impact all clinicians across the United States and territories:

2020 Performance Year

- **Extended** MIPS Automatic Extreme and Uncontrollable Circumstances (EUC) policy to all individual MIPS eligible clinicians for 2020 performance year.
 - MIPS eligible clinicians reporting as individuals will only be scored on performance categories for which data was submitted. All other performance categories will be reweighted to 0% of their final score.
 - Applies to MIPS eligible clinicians except for those who submitted data in two or more performance categories or those who reported as a group.
- EUC application for groups, virtual groups, and APM Entities has also been reopened through **March 31, 2021**.

2021 Performance Year

- Continuing **EUC Policy** for 2021 performance year.
- MIPS eligible clinicians, groups, virtual groups, and APM Entities can submit an application requesting reweighting of one or more MIPS performance categories to 0% due to the current COVID -19 public health emergency.
- The EUC application will be available on qpp.cms.gov **later this spring**.

- For more information, visit the [QPP COVID-19 Response webpage](#).



2021 MIPS ANNUAL CALL FOR PROMOTING INTEROPERABILITY MEASURES AND IMPROVEMENT ACTIVITIES

- The MIPS Annual Call for Measures and Activities process allows clinicians and organizations to identify and submit:
 - Measures for the Promoting Interoperability performance category
 - Activities for the improvement activities performance category
- The MIPS Annual Call for Promoting Interoperability Measures and Improvement Activities submission period will close on **July 1, 2021**.
- The Annual Call for Quality Measures has a different submission process and deadline.
- To propose new measures and activities for MIPS, review the 2021 Call for Measures and Activities [resources](#) on the QPP Resource Library.



CONSUMER ASSESSMENT OF HEALTHCARE PROVIDERS AND SYSTEMS (CAHPS) FOR MIPS SURVEY

- Registration for groups, virtual groups, and APM Entities administering the CAHPS for MIPS survey opens this Thursday, **April 1, 2021** and closes on **June 30, 2021**.
 - Groups and virtual groups can choose to administer the CAHPS for MIPS survey as a Quality measure, as well as separately attest to it as an Improvement Activity.
 - No one is automatically registered for the CAHPS for MIPS survey. If you registered in PY 2020, you'll need to register again for PY 2021.
- To register, [sign into QPP](#), go to the Manage Access page, and click “Edit Registration.”



QUESTIONS?

CMSQualityTeam@Ketchum.com



THANK YOU!

The next CMS Quality Programs Bi-Monthly Forum is tentatively scheduled for May 2021. CMS will share more information when it becomes available.

