MARCH 2022 CMS QUALITY PROGRAMS BI-MONTHLY FORUM

March 1, 2022

AGENDA

Topic	Speaker
• **Medicare Promoting Interoperability Program Updates**	**Drew Morgan** Division of Value-Based, Incentives and Quality Reporting, CMS
• **Quality Payment Program Updates**	**Vidya Sellappan** Division of Electronic and Clinician Quality, CMS
• **Electronic Clinical Quality Improvement (eCQI) Resource Center Measure Compare**	**Vidya Sellappan** Division of Electronic and Clinician Quality, CMS **Kathy Lesh** Healthcare Quality Research Leader, Battelle
• **Electronic Clinical Quality Measure (eCQM) Updates**	**Stephanie Parver** Health Analyst, Mathematica
• **2022 CMS QRDA III Implementation Guide and Sample Files for Eligible Clinicians Program**	**Yan Heras** Principal Informaticist, ICF
• **May 2022 Fast Healthcare Interoperability Resources (FHIR) Connectathon**	**Jennifer Seeman** Project Manager, ICF
• **Center for Medicare and Medicaid Innovation Updates**	**Corey Henderson** Center for Medicare and Medicaid Innovation, CMS

MEDICARE PROMOTING INTEROPERABILITY PROGRAM UPDATES

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

MEDICARE PROMOTING INTEROPERABILITY PROGRAM: CY 2021 ATTESTATION REMINDER

- The deadline to register and attest for the calendar year (CY) 2021 Medicare Promoting Interoperability Program is **March 31, 2022** at **11:59 p.m. ET**.
- Program participants from eligible hospitals and critical access hospitals (CAHs) are required to attest through CMS's Hospital Quality Reporting system (previously, the QualityNet Secure Portal).
- More information can be found on the Registration & Attestation webpage on the Promoting Interoperability Programs website.

QUALITY PAYMENT PROGRAM UPDATES

Presenters: Vidya Sellappan, Division of Electronic and Clinician Quality, CMS

DATES & DEADLINES

- **March 31: Merit-based Incentive Payment System (MIPS) data due**
  - MIPS eligible clinicians who participated in the 2021 performance year of the Quality Payment Program (QPP) have until **8 p.m. ET on March 31, 2022,** to submit their data.
  - To submit your 2021 MIPS data:
    - Go to the QPP webpage.
    - Sign in using your QPP access credentials.
    - Submit your MIPS data for the 2021 performance year or review the data reported on your behalf by a third party.
  - For more information, view: MIPS 2021 Data Submission User Guide and 2021 Opt-in and Voluntary Reporting Election Process Guide.
- **April 1: Registration for CAHPS for MIPS Survey opens**
  - If you're participating in traditional MIPS as a group, virtual group, or alternative payment model (APM) Entity and want to report via the CMS Web Interface or administer the CAHPS for MIPS Survey, you need to register between **April 1** and **June 30, 2022**.
    - Learn more about how to register on the QPP website.

2022 CALL FOR MEASURES

- The MIPS Annual Call for Measures and Activities process allows clinicians, professional associations and medical societies that represent clinicians, researchers, consumer groups, and others to identify and submit measures and activities.

- Currently, CMS is accepting submissions for:
  - Measures for the **Promoting Interoperability** performance category
  - Activities for the **improvement activities** performance category

- **The submission period for 2024 measures closes July 1, 2022.**

- To propose new measures and activities for MIPS, review the 2022 Call for Measures and Activities Overview Fact Sheet and fill out and submit the forms from the 2022 Call for Measures and Activities (ZIP).

QPP SMALL PRACTICES NEWSLETTER

- CMS recently developed a **QPP Small Practices Newsletter**, which will provide information that's tailored to small practices about relevant program updates, upcoming milestones, and resources to support successful participation in the QPP.
- This newsletter will also include relevant updates and resources announced through the QPP listserv.
- Subscribe to the newsletter here and visit the QPP Support for Small Practices webpage for more information.

- **Relevant new resources:**
  - 2022 MIPS Quick Start Guide for Small Practices - Explains how small practices (15 or fewer clinicians) can get started with MIPS in 6 steps in performance year 2022.
  - What's New in 2022 for Small Practices - Explains performance year 2022 MIPS policies for small practices (15 or fewer clinicians) that are changing or new as well as the performance year 2022 timeline.

UPCOMING WEBINARS

- **Web Interface Support Calls**
  - CMS is hosting a series of Support Calls for groups, virtual groups, and APM Entities that have been reporting data for the quality performance category through the CMS Web Interface.
  - They'll provide important information and updates on reporting quality data, as well as the opportunity to engage in Q&A sessions with CMS subject matter experts.
  - **Upcoming Support Calls: March 9 and March 23- from 1 p.m. - 2:30 pm ET.**

NEW RESOURCES

- CMS Web Interface Transition Guide - Provides information to groups and virtual groups that previously used the CMS Web Interface, in preparation for the sunsetting of the CMS Web Interface in the traditional MIPS.
- CMS Web Interface Transition Guide: Getting Started with eCQM Reporting - Outlines the steps that stakeholders should take to prepare for reporting electronic clinical quality measure (eCQM) reporting under MIPS.
- CMS Web Interface Transition Guide: Getting Started with MIPS CQM Reporting - Outlines the steps that stakeholders should take to prepare for reporting MIPS clinical quality measures (CQMs) under MIPS.
- 2022 Quality Benchmarks - Lists and explains 2022 historical benchmarks used to assess performance in the quality performance category.
- MIPS Value Pathways Development Resources - Provides instructions on how to submit a MIPS Value Pathways (MVPs) candidate to CMS for consideration.

UPCOMING RESOURCES

- 2022 Quick Start and User Guides
- 2022 Specialty Guides

eCQI RESOURCE CENTER MEASURE COMPARE FEATURE UPDATE

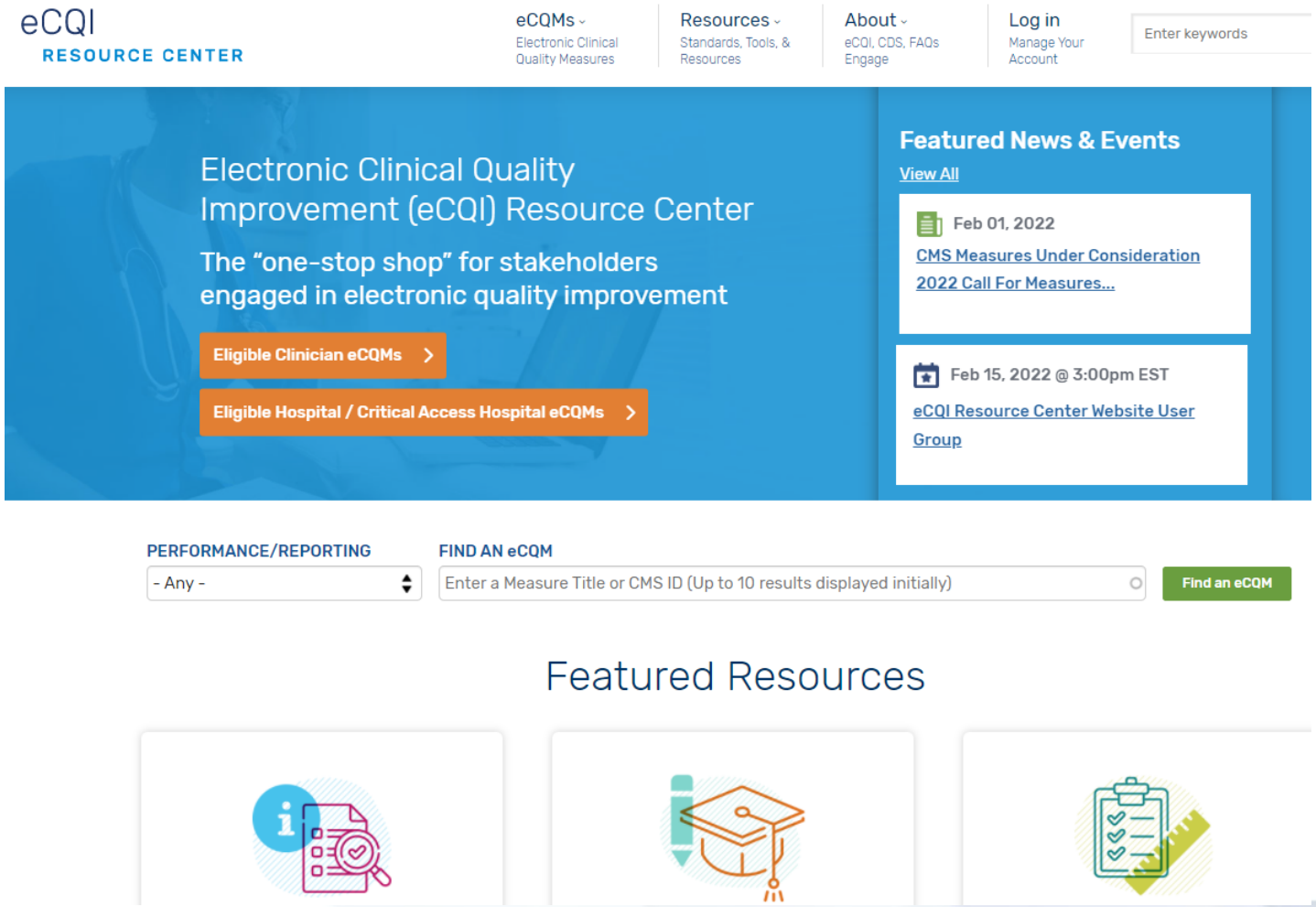
Presenters: Vidya Sellappan, Division of Electronic and Clinician Quality, CMS and Kathy Lesh, Healthcare Quality Research Leader, Battelle

eCQI RESOURCE CENTER WEBSITE

- The Electronic Clinical Quality Improvement (eCQI) Resource Center:
  - Electronic Clinical Quality Measures (eCQM) specifications and implementation materials for Eligible Clinicians, Eligible Hospitals, and Critical Access Hospitals
  - eCQI standards information
  - eCQI tools, resources, and educational materials
- Measure Compare Feature Updates
  - Ability to start a new search when comparing measures
  - Ability to reset to return to initial measure page
  - Additional filters for measures
  - More download options
  - Updated instructions for navigation – search displays up to 10 results

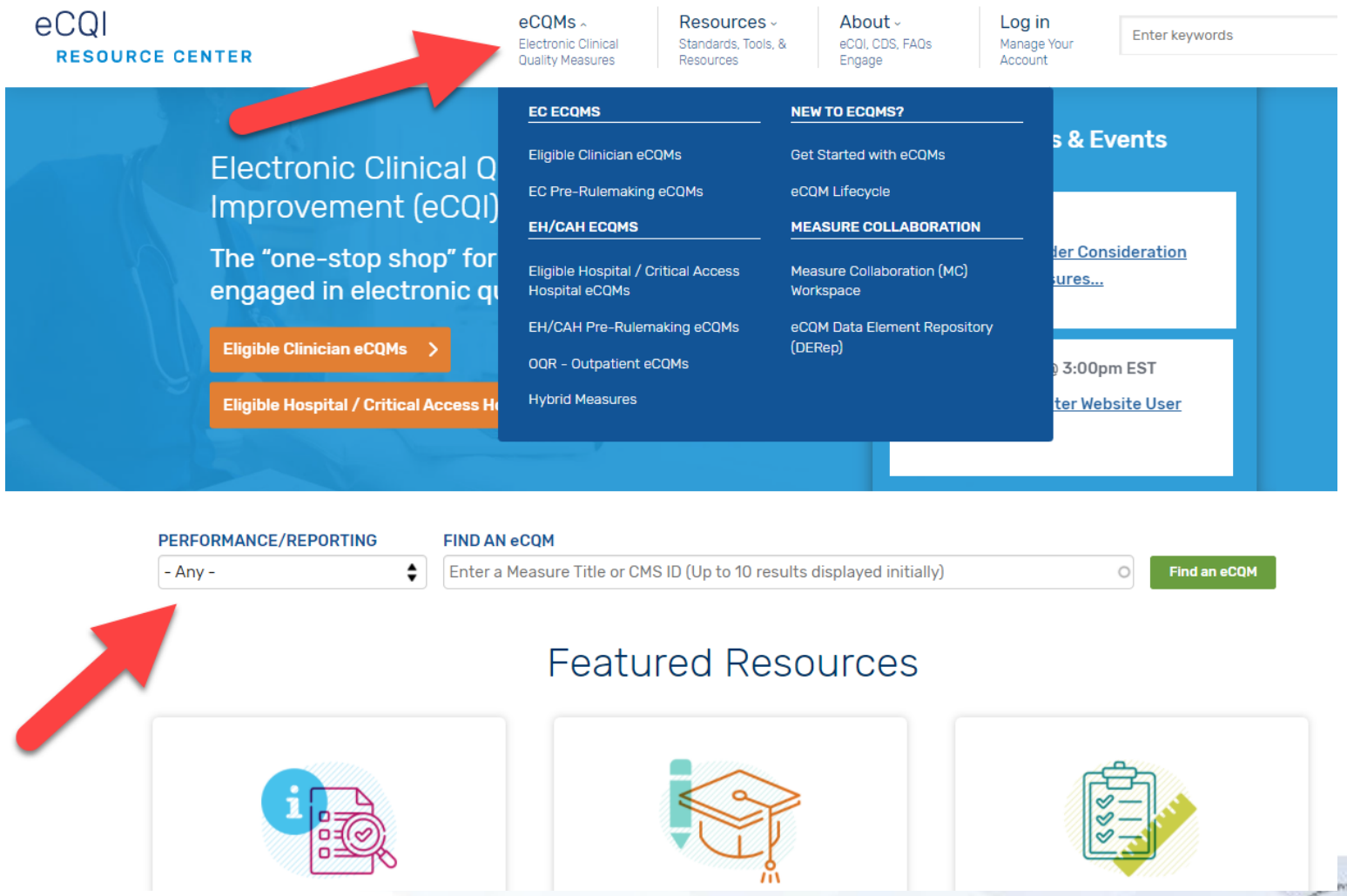
eCQI RESOURCE CENTER DEMONSTRATION

NAVIGATING THE eCQI RESOURCE CENTER

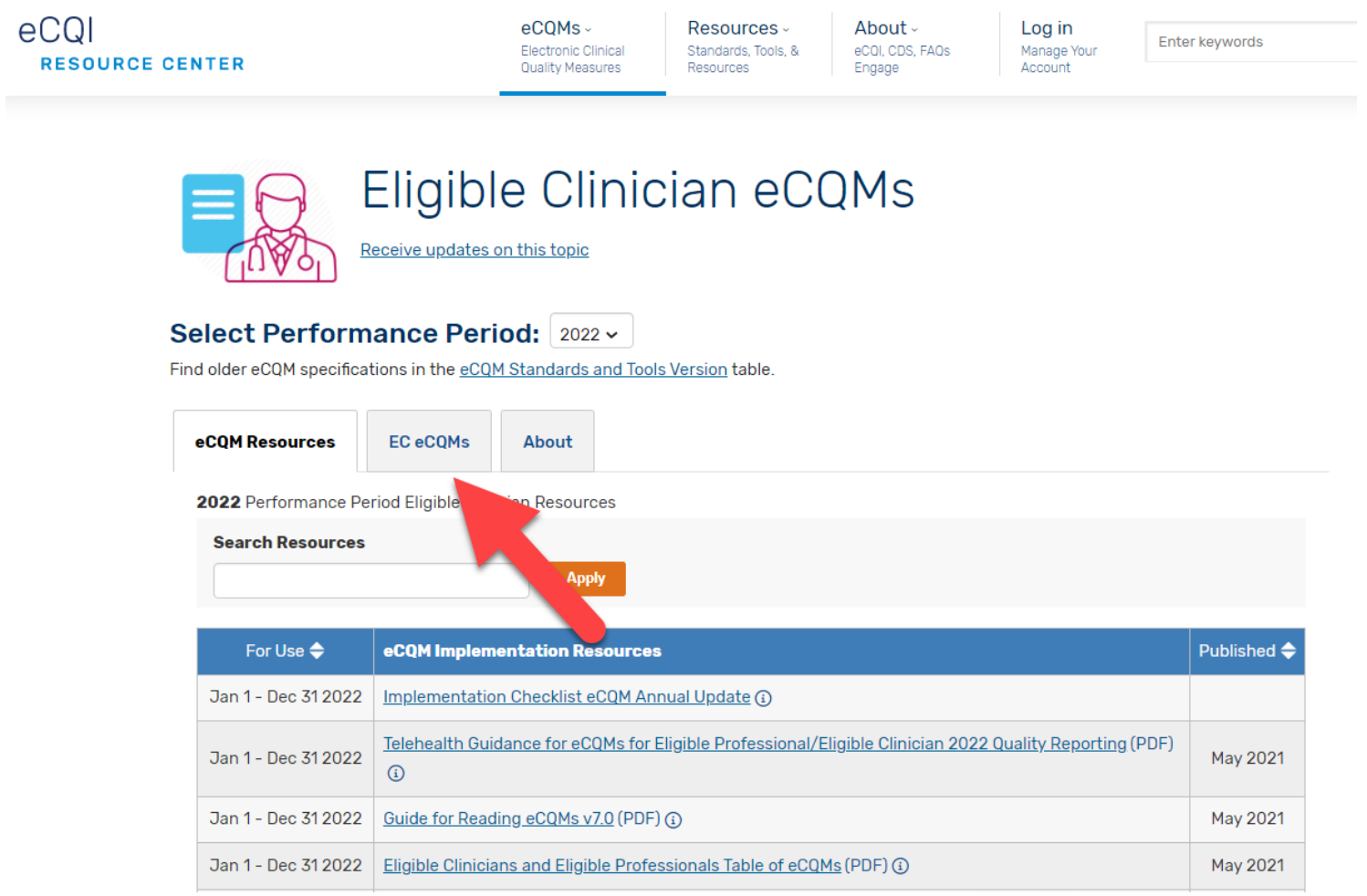


https://ecqi.healthit.gov

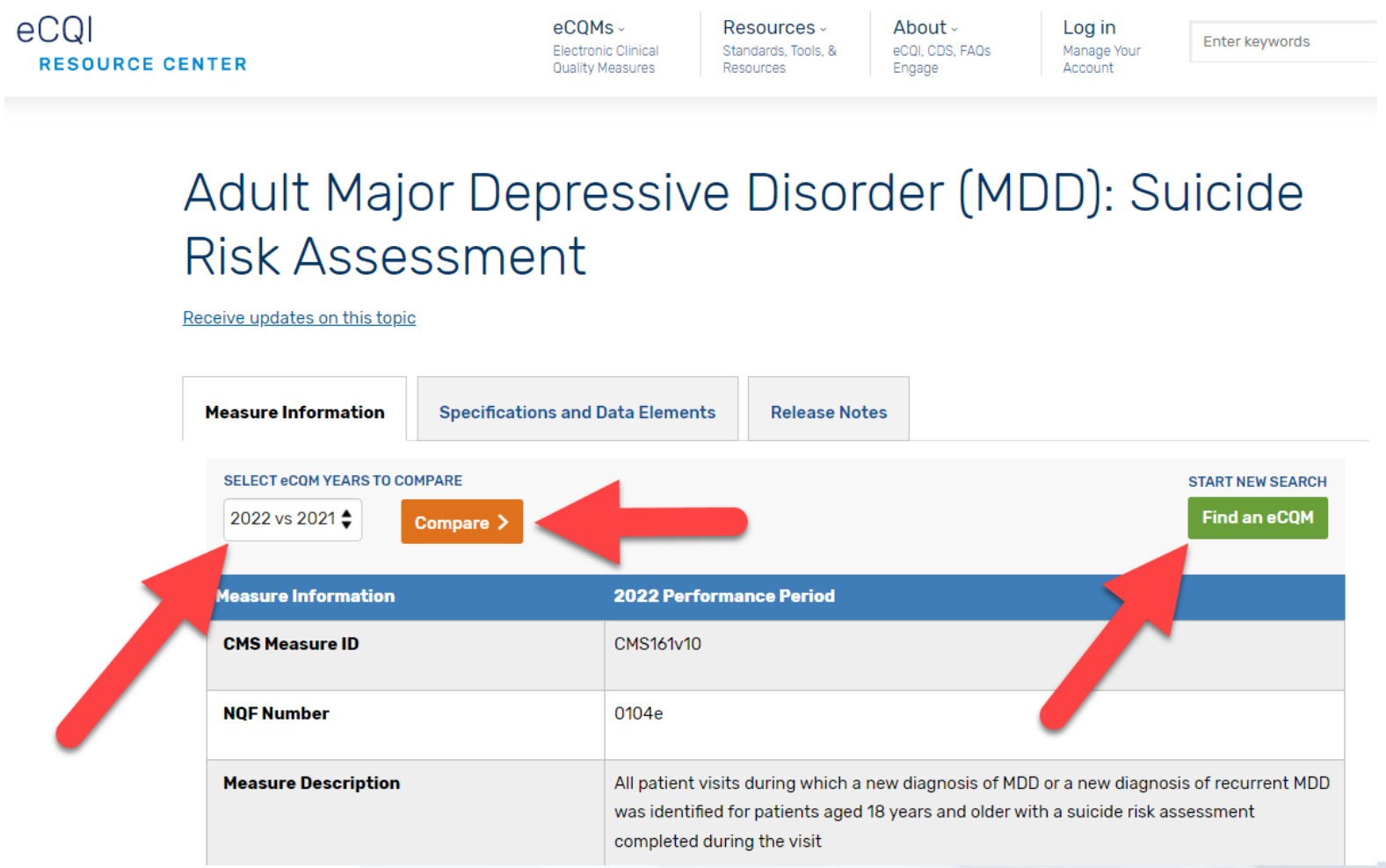
NAVIGATING THE eCQI RESOURCE CENTER



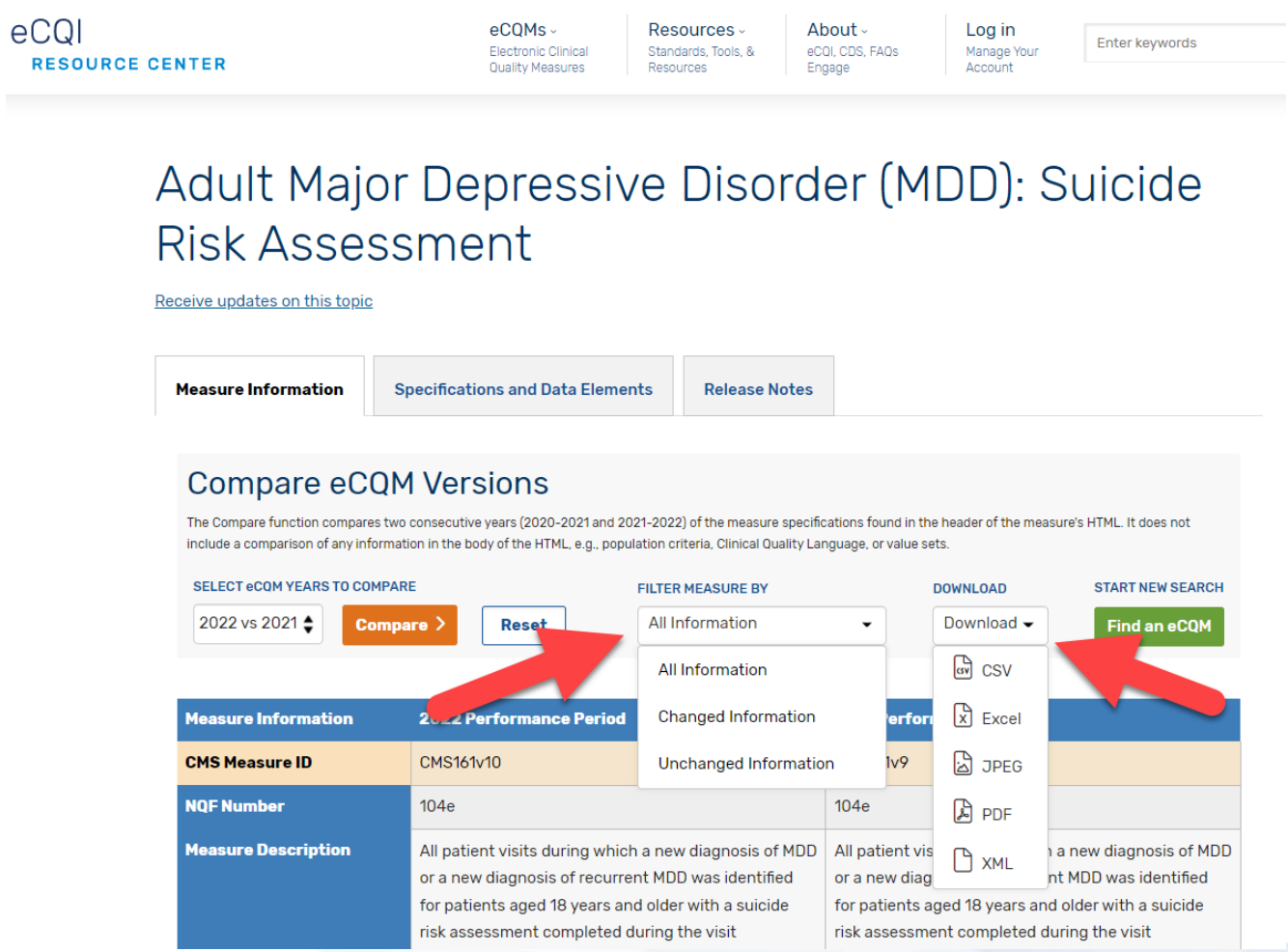
NAVIGATING THE eCQI RESOURCE CENTER



NAVIGATING THE eCQI RESOURCE CENTER



NAVIGATING THE eCQI RESOURCE CENTER



CONTACT THE eCQI RESOURCE CENTER

- We encourage you to visit and provide feedback on the eCQI Resource Center by emailing comments, suggestions, questions, and requests to post events and news to ecqi-resource-center@hhs.gov.
- Visit the eCQI Resource Center Frequently Asked Questions

eCQI RESOURCE CENTER MEASURE COLLABORATION (MC) WORKSPACE CONCEPTS AND TESTING OPPORTUNITIES MODULES

Presenters: Vidya Sellappan, Division of Electronic and Clinician Quality, CMS; Kathy Lesh, Healthcare Quality Research Leader, Battelle

MEASURES COLLABORATION (MC) WORKSPACE ON THE eCQI RESOURCE CENTER

- In 2019 CMS engaged with stakeholders to get an understanding of eCQM implementation and reporting burden and asked for recommendations for improvement in the use of eCQMs in CMS quality reporting programs.
- 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.

MEASURES COLLABORATION (MC) WORKSPACE

- The MC Workspace has three modules designed to engage stakeholders in the different stages of the Measure Lifecycle
  - eCQM Concepts Module – Gives users the ability to search for eCQM concepts suggested by others and comment on those suggested eCQM concepts, submit new eCQM concepts, describe the population(s), and assign a care setting.
  - eCQM Testing Opportunity Module – Provides stakeholders with available opportunities to participate in eCQM testing.
  - The eCQM Data Element Repository (DERep) – Provides detailed information about data elements used in eCQM in CMS programs.

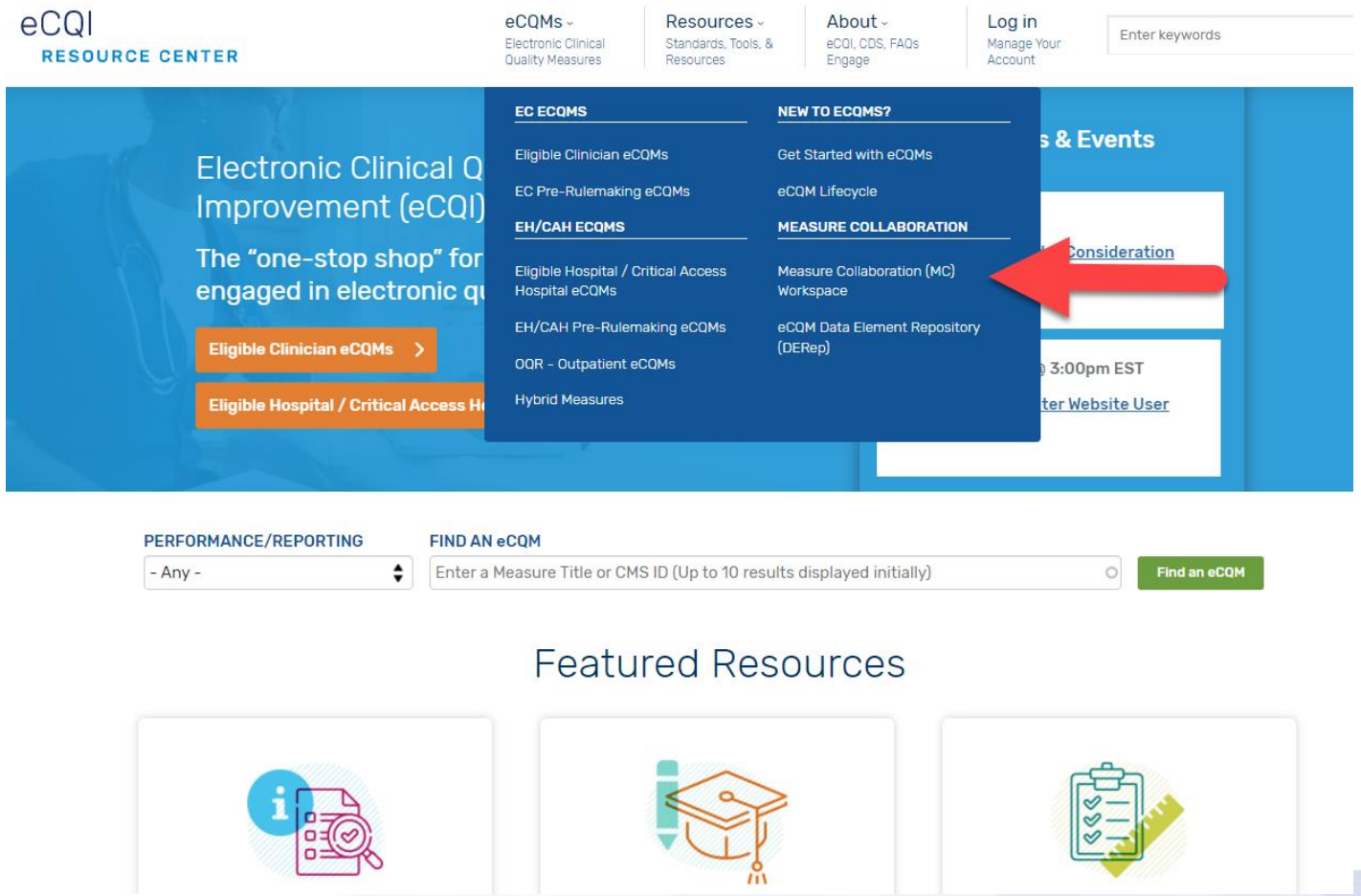
MC WORKSPACE CONCEPTS MODULE

- eCQM Concepts module gives Authenticated Users the ability to comment on suggested eCQM concepts or suggest new eCQM concepts.
- The suggested eCQM concept author may request the concept is shared with CMS.

MC WORKSPACE TESTING OPPORTUNITIES MODULE

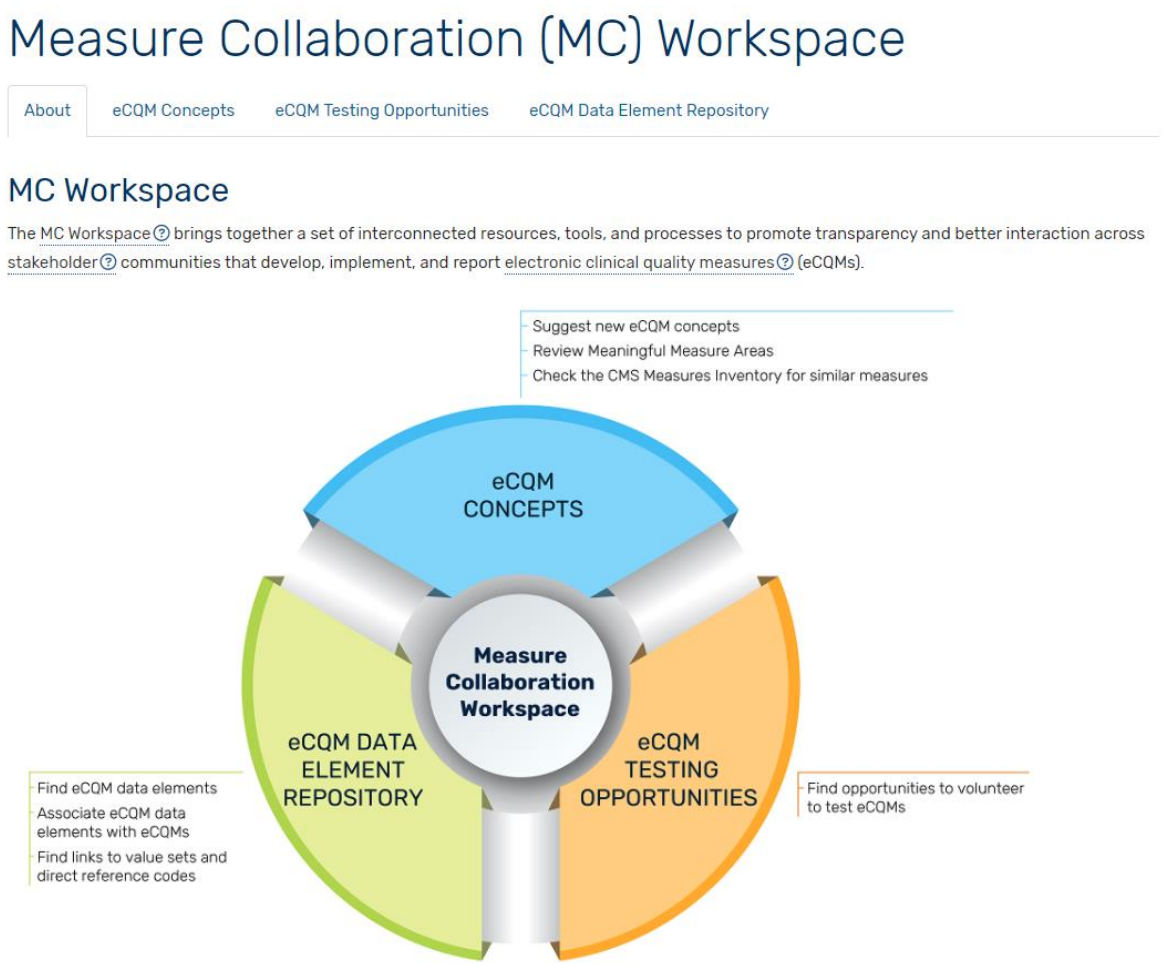
- The eCQM Testing Opportunities module allows eCQM developers to announce opportunities to test eCQMs.
- eCQM developers may seek volunteers at different stages of the Measure Lifecycle.
- eCQM developers may use the announcement template and send to ecqi-resource-center@hhs.gov.

NAVIGATING THE ECQI RESOURCE CENTER



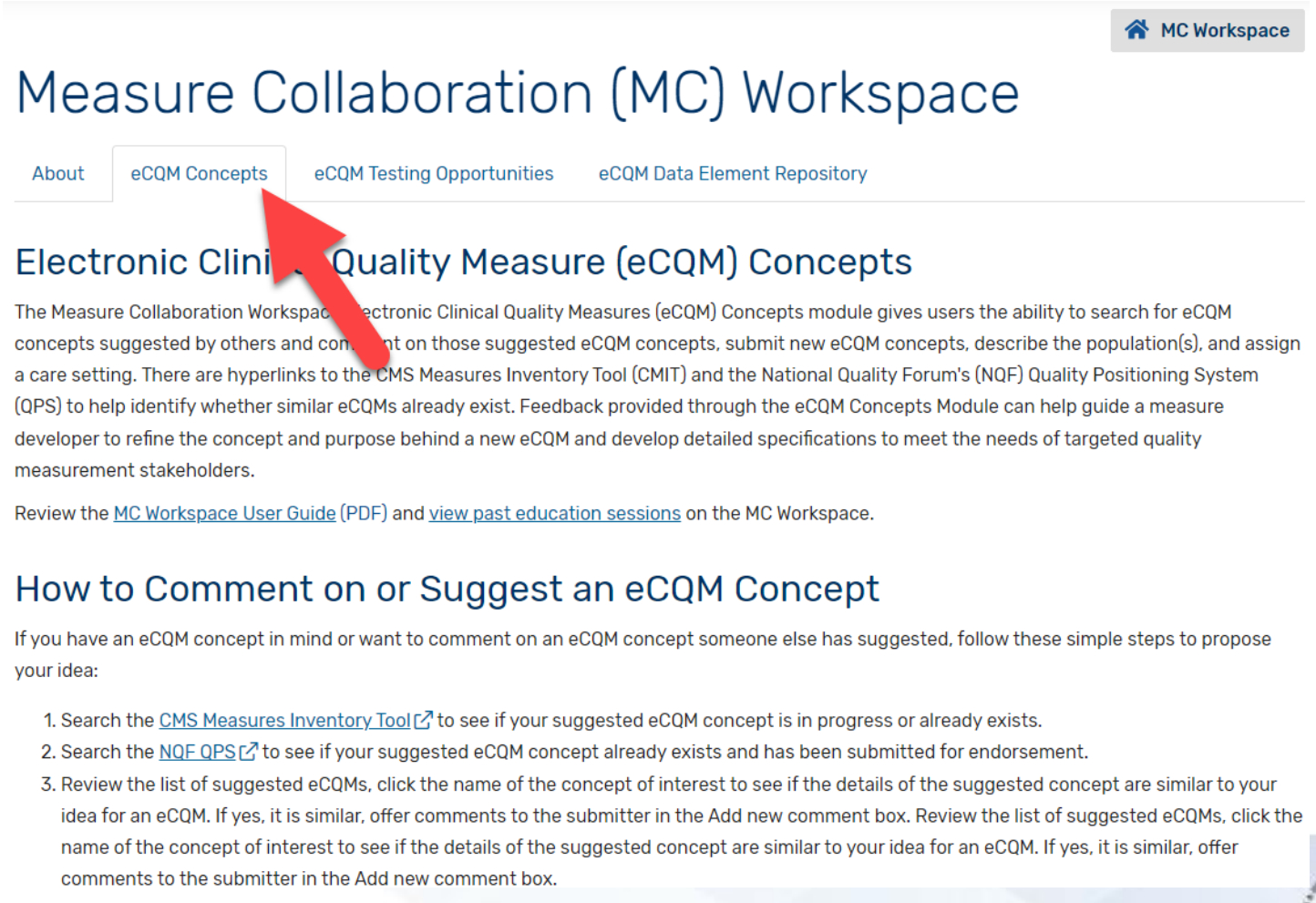
https://ecqi.healthit.gov/

NAVIGATING THE ECQI RESOURCE CENTER – MC WORKSPACE



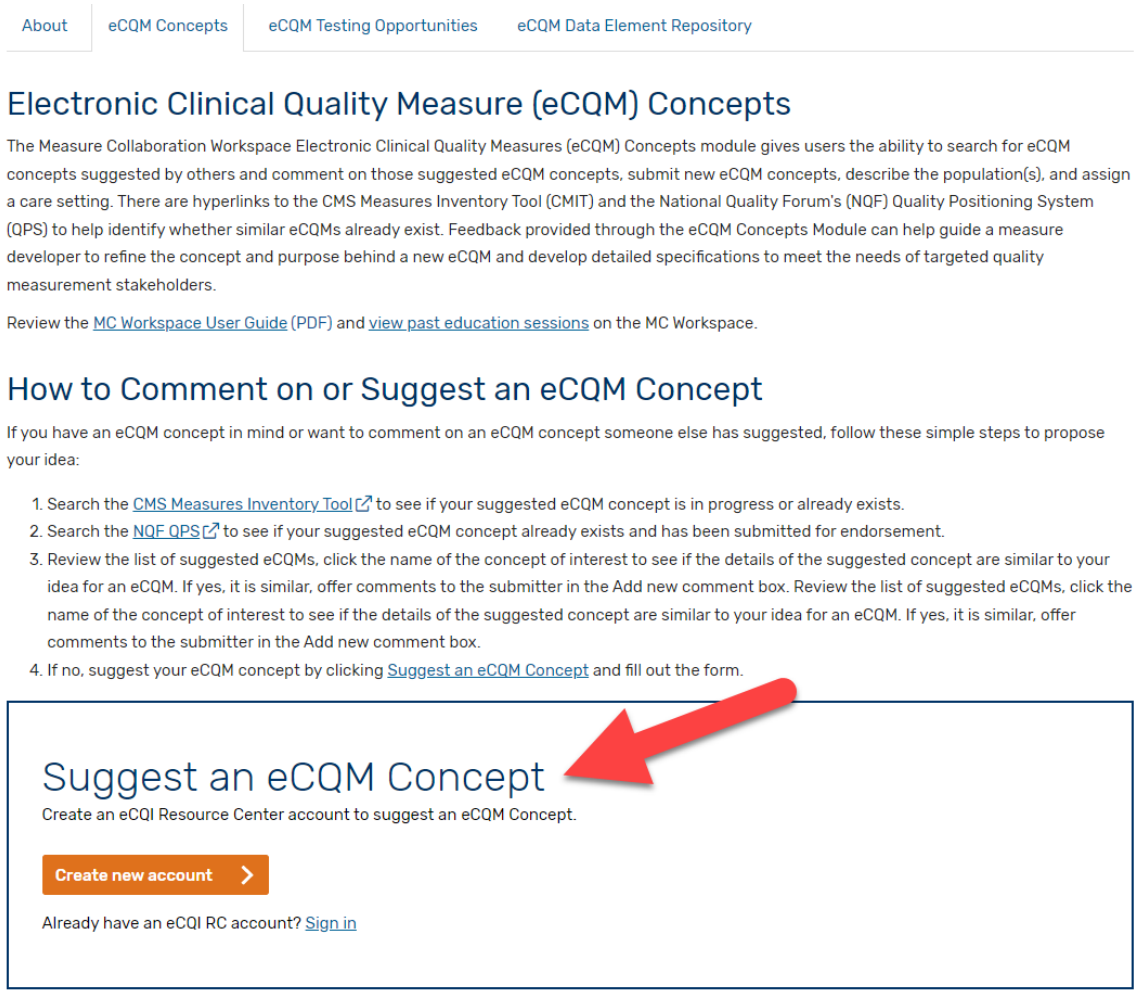
https://ecqi.healthit.gov/mc-workspace-2

NAVIGATING THE ECQI RESOURCE CENTER – ECQM CONCEPTS



https://ecqi.healthit.gov/mc-workspace-2/ecqm-concepts

ECQM CONCEPTS – SUGGEST AN ECQM CONCEPT



About | eCQM Concepts | eCQM Testing Opportunities | eCQM Data Element Repository

Electronic Clinical Quality Measure (eCQM) Concepts

The Measure Collaboration Workspace Electronic Clinical Quality Measures (eCQM) Concepts module gives users the ability to search for eCQM concepts suggested by others and comment on those suggested eCQM concepts, submit new eCQM concepts, describe the population(s), and assign a care setting. There are hyperlinks to the CMS Measures Inventory Tool (CMIT) and the National Quality Forum's (NQF) Quality Positioning System (QPS) to help identify whether similar eCQMs already exist. Feedback provided through the eCQM Concepts Module can help guide a measure developer to refine the concept and purpose behind a new eCQM and develop detailed specifications to meet the needs of targeted quality measurement stakeholders.

Review the MC Workspace User Guide (PDF) and view past education sessions on the MC Workspace.

How to Comment on or Suggest an eCQM Concept

If you have an eCQM concept in mind or want to comment on an eCQM concept someone else has suggested, follow these simple steps to propose your idea:

1. Search the CMS Measures Inventory Tool to see if your suggested eCQM concept is in progress or already exists.
2. Search the NQF QPS to see if your suggested eCQM concept already exists and has been submitted for endorsement.
3. Review the list of suggested eCQMs, click the name of the concept of interest to see if the details of the suggested concept are similar to your idea for an eCQM. If yes, it is similar, offer comments to the submitter in the Add new comment box. Review the list of suggested eCQMs, click the name of the concept of interest to see if the details of the suggested concept are similar to your idea for an eCQM. If yes, it is similar, offer comments to the submitter in the Add new comment box.
4. If no, suggest your eCQM concept by clicking Suggest an eCQM Concept and fill out the form.

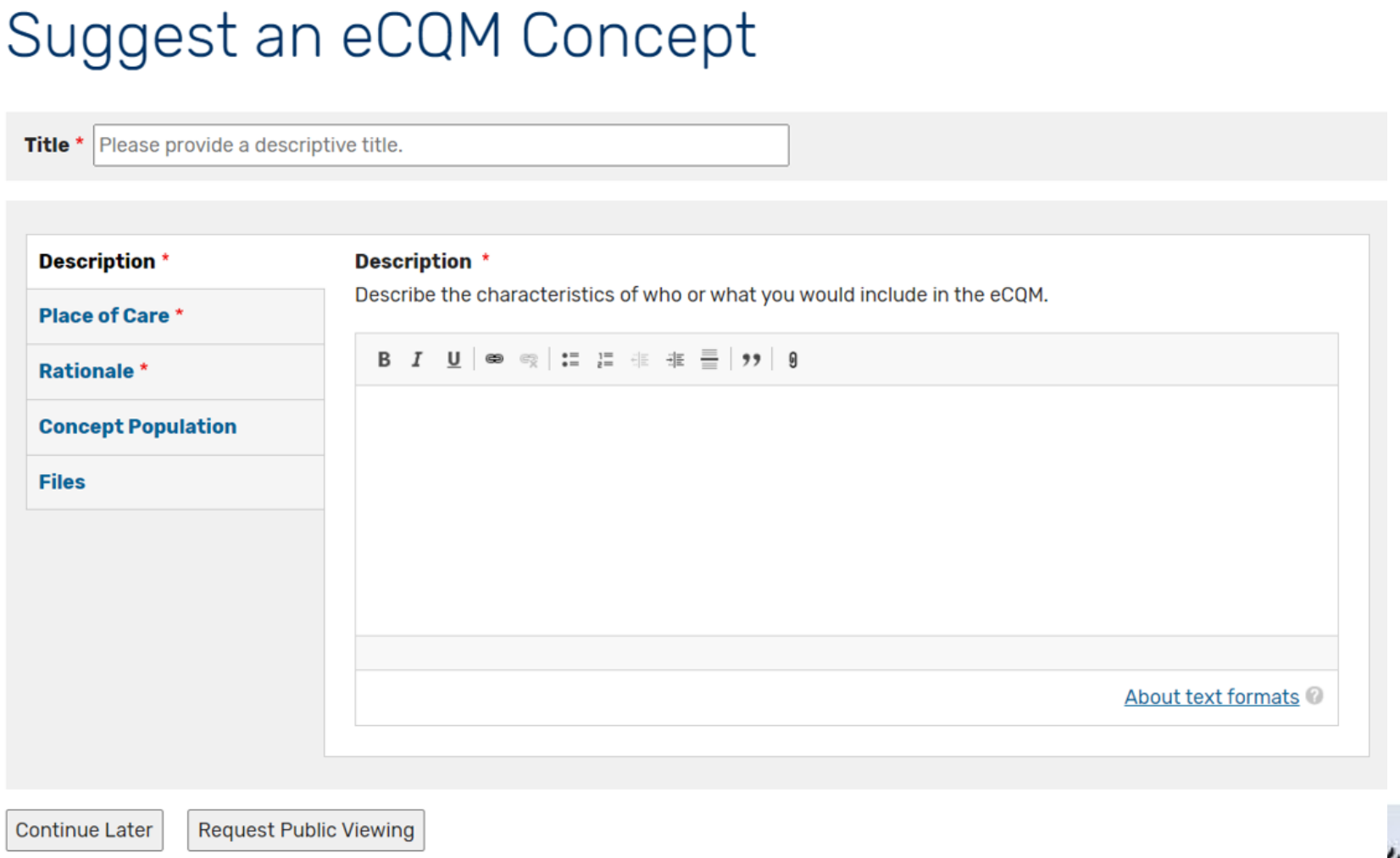
Suggest an eCQM Concept

Create an eCQI Resource Center account to suggest an eCQM Concept.

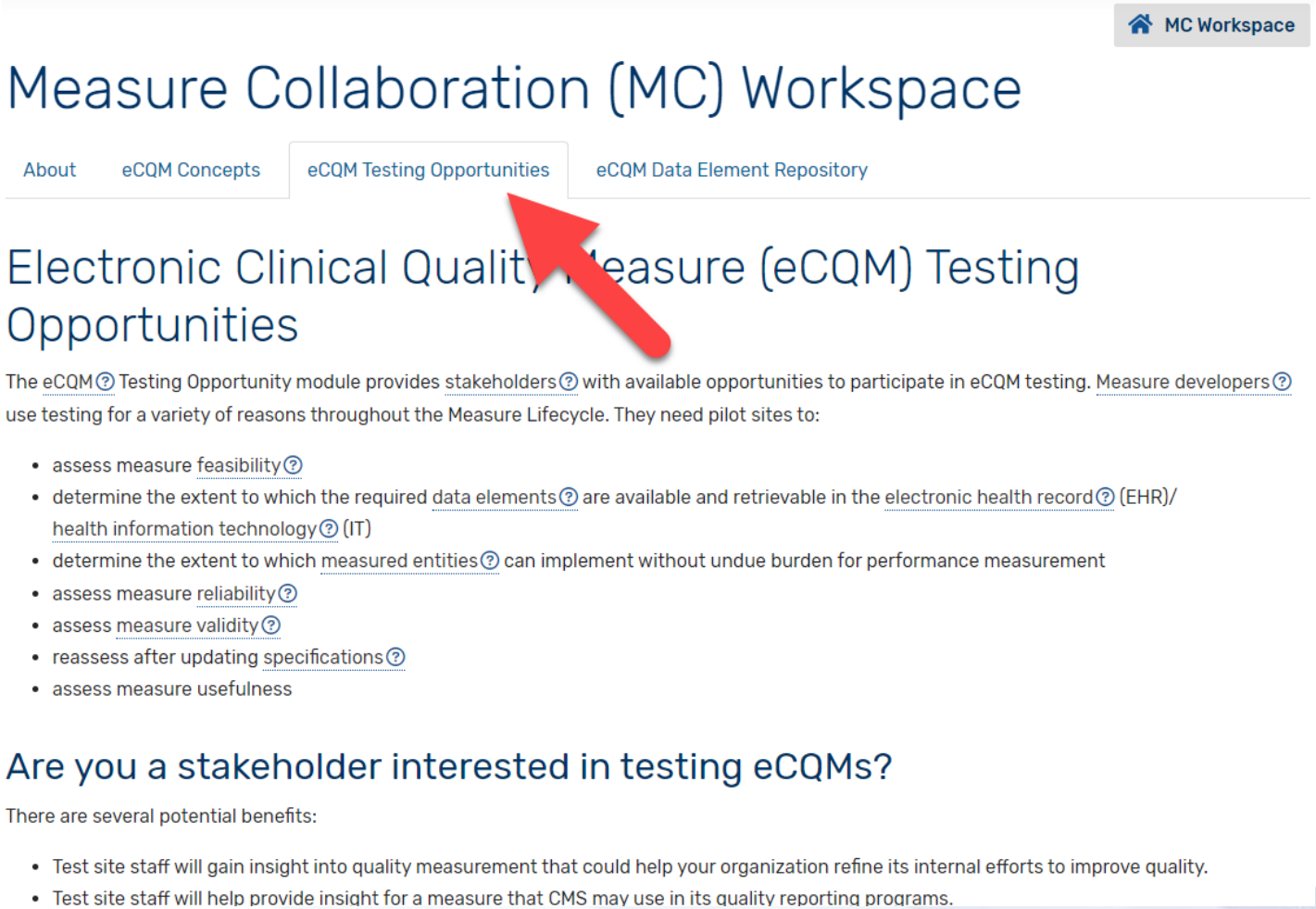
Create new account >

Already have an eCQI RC account? Sign in

SUGGEST AN ECQM CONCEPT PAGE



NAVIGATING THE ECQI RESOURCE CENTER – ECQM TESTING OPPORTUNITIES



https://ecqi.healthit.gov/mc-workspace-2/testing-opportunities

CONTACT THE ECQI RESOURCE CENTER

- We encourage you to visit and provide feedback on the eCQI Resource Center by emailing comments, suggestions, questions, and requests to post events and news to ecqi-resource-center@hhs.gov.
- Visit the eCQI Resource Center Frequently Asked Questions

eCQM PRE-PUBLICATION DOCUMENT NOW AVAILABLE

FOR THE 2023 REPORTING/PERFORMANCE PERIOD

Presenter: Stephanie Parver, Health Analyst, Mathematica

NOW AVAILABLE: eCQM ANNUAL UPDATE PRE-PUBLICATION DOCUMENT

FOR THE 2023 REPORTING/PERFORMANCE PERIOD

- The electronic clinical quality measures (eCQM) Annual Update Pre-Publication Document for the 2023 reporting/performance period is now available
- Describes changes in the standards and code system versions used in the updated eCQMs for potential use in CMS quality reporting programs
- Visit the electronic clinical quality improvement (eCQI) Resource Center for most current information on code systems and standard versions

ANTICIPATED STANDARDS*

FOR THE 2023 REPORTING/PERFORMANCE PERIOD

- HQMF R1 Normative – HL7 Version 3 Standard: Representation of the Health Quality Measure Format (eMeasure) Release 1
- HL7 V3 CQL-based HQMF Implementation Guide R1 STU 4.1 – HL7 Version 3 Implementation Guide: Clinical Quality Language (CQL)-based Health Quality Measure Format (HQMF), Release 1 - US Realm, Standard for Trial Use 4.1
- CQL R1 Mixed Normative/Trial-Use (CQL 1.5) – Clinical Quality Language Specification, Release 1 Mixed Normative/Trial-Use and the derivative CQL-to-ELM translator v1.5.3
- QRDA I R1 STU 5.3 – Quality Reporting Document Architecture - Category I Release 1, Standard for Trial Use Release 5.3 (November 2021)
- QRDA III R1 Normative – Quality Reporting Document Architecture - Category III Release 1 (September 2021)
- QDM v5.6 – Quality Data Model Version 5.6
- CMS QRDA IGs – CMS Quality Reporting Document Architecture Implementation Guides (CMS QRDA I IG for Hospital Quality Reporting released in Spring 2022 for the 2023 reporting period. CMS QRDA III IG v1.0 for Eligible Clinician Programs will be released in Summer 2022 and an updated version will be released in the Fall 2022 after publication of the Physician Fee Schedule Final Rule for the 2023 performance period)

**Note: CMS may elect to update the eCQM specifications and supporting materials during reporting/performance periods due to code system changes, clinical guidelines, standards enhancements, etc.*

ANTICIPATED CODE SYSTEM VERSIONS*

FOR 2023 REPORTING/PERFORMANCE PERIOD

- **ActCode** – HL7V3.0_2021-03
- **AdministrativeGender HL7V3.0_2021-03** – Administrative Gender Value Set
- **CDCREC 1.2** – Centers for Disease Control and Prevention Race and Ethnicity Code Set Version
- **CDT 2022** – Current Dental Terminology
- **CPT 2021** – Current Procedural Terminology
- **CVX 2021-12** – Clinical Vaccine Formulation
- **HCPCS 2022** – Healthcare Common Procedure Coding System
- **HSLOC 2020** – NHSN Healthcare Service Location Codes
- **ICD-9-CM 2013** – International Classification of Diseases, Ninth Revision, Clinical Modification (in use due to look-back periods of some eCQMs)
- **ICD-10-CM 2022** – International Classification of Diseases, Tenth Revision, Clinical Modification
- **ICD-10-PCS 2022** – International Classification of Diseases, Tenth Revision, Procedure Coding System
- **LOINC 2.71** – Logical Observation Identifiers Names and Codes
- **RxNorm 2022-01** – A normalized naming system for generic and branded drugs
- **SNOMED CT US Edition 2021-09** – A comprehensive and precise health terminology for electronic exchange of clinical health information
- **SOP 9.2** – Source of Payment

**Note: CMS may elect to update the eCQM specifications and supporting materials during reporting/performance periods due to code system changes, clinical guidelines, standards enhancements, etc.*

eCQM RESOURCES

- Please submit questions or comments regarding the standards and/or code system versions used in the upcoming eCQM updates for 2023 reporting/performance to the eCQM Issue Tracker
- Visit the eCQI Resource Center to find published eCQM specifications and resources

UPDATED 2022 CMS QRDA III IMPLEMENTATION GUIDE AND SAMPLE FILES FOR ELIGIBLE CLINICIANS PROGRAM

Presenter: Yan Heras, Principal Informaticist, ICF

2022 CMS QRDA III IG AND SAMPLE FILES

- CMS has published an update to the 2022 CMS Quality Reporting Document Architecture (QRDA) Category III Implementation Guide (IG) and Sample Files.
- The 2022 CMS QRDA III IG outlines requirements for eligible clinicians to report electronic clinical quality measures (eCQMs) for the calendar year 2022 performance period.

UPDATES TO THE 2022 CMS QRDA III IG AND SAMPLE FILES

- Added to Table 14: UUID List for MIPS CY 2022 Performance Period eCQM Specifications Eligible Professionals and Eligible Clinicians
    - The missing UUID of population 2 numerator exclusion for CMS156v10. This issue was reported in QRDA Known Issue QKI-6
    - Missing measure CMS646v2
- CMS added these tables based on the CY 2022 Medicare Physician Fee Schedule (PFS) Final Rule
    - Table 15: Improvement Activities Identifiers for the MIPS CY 2022 Performance Period
    - Table 16: Promoting Interoperability Objectives and Measures Identifiers for the MIPS CY 2022 Performance Period
    - Table 17: Promoting Interoperability Attestation Statements Identifiers
- CMS made minor edits to the 2022 CMS QRDA III Sample Files header comments.

ADDITIONAL QRDA-RELATED RESOURCES

- Find additional QRDA-related resources, as well as current and past IGs, on the Electronic Clinical Quality Improvement (eCQI) Resource Center QRDA page.
- For questions related to this guidance, the QRDA IGs, or Schematron, visit the ONC Project Tracking System (Jira) QRDA project.
- See the QRDA Known Issues Dashboard for solutions under development for both QRDA I and III known technical issues. These known issues supplement the information in QRDA IGs and other supporting documents.

MAY 2022 HL7® FHIR® CONNECTATHON 30

Presenter: Jennifer Seeman, Project Manager, ICF

HL7® FHIR® CONNECTATHON 30 MAY 2022

- Virtual Event Date: May 2-4, 2022 (Time: Eastern)
- http://www.hl7.org/events/fhir/connectathon/2022/05/
- Early bird savings for registration is available until April 4th
- Opportunity to work directly with other FHIR developers and senior members of the FHIR standards development team.
- The CMS eCQM Standards Team will continue the testing and use of FHIR-based Quality Measures for use in Quality Measurement programs, including CMS, Gaps in Care (GIC) and Clinical Decision Support (CDS) Use Cases.
- If you have any questions, feel free to email us at fhir@icf.com

CMS INNOVATION CENTER UPDATES

Presenter: Corey Henderson, Center for Medicare & Medicaid Innovation, CMS

PARTICIPATION STATUS TOOL

- CMS updated its Quality Payment Program Participation Status Tool in January 2022 based on the third snapshot of data from APM Entities.
  - The third snapshot includes data from Medicare Part B claims with **dates of service between January 1, 2021 and August 31, 2021**.
  - The tool includes 2021 Qualifying APM Participant (QP) and MIPS APM participation status.
- If you join a MIPS APM in the last 4 months of the year (from the end of snapshot 3 until the end of the performance year), you:
  - Will be considered a participant in the MIPS APM, and
  - Will be eligible to voluntarily report through the APP
- The fourth snapshot will be released in March 2022 for MIPS APMs.

NEW RESOURCES

- 2021 APP Data Submission Guide - Provides details on how to submit data to QPP through the APP for the 2021 performance year.
- 2021 APP Data Submission Videos – Provides an overview of how groups and ow Medicare Shared Savings Program Accountable Care Organizations (ACOs) can submit data and report the APP through the QPP website for the 2021 performance period.

UPCOMING RESOURCES

- 2022 APP Zip File
- 2022 APP Measures

QUESTIONS?

CMSQualityTeam@Ketchum.com

THANK YOU!

The next CMS Quality Programs Bi-Monthly Forum is tentatively scheduled for May 2022. CMS will share more information when it becomes available.