

Configuring Hospital and Ambulatory Electronic Clinical Quality Measures Across an Enterprise

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MU happens at the intersection of Quality, Finance, Clinical Care & Information Services.



Background

Clinical quality measures (CQMs) are data specifications that measure health care processes, observations, treatments and outcomes. Numerous Centers for Medicare and Medicaid Services (CMS) programs utilize CQMs for reporting and measuring quality in order to determine payment. CMS has historically been using the manually abstracted versions of CQMs in its programs, however as Meaningful Use (MU) regulations drive electronic health record (EHR) adoption, there has been a strategic push to introduce the electronic versions of the measures into its rule-making.

Electronic clinical quality measures (eCQMs) use discrete data from the EHR to measure health care quality and are an essential performance factor in various CMS programs including MU, Inpatient Quality Reporting (IQR) and the ambulatory Quality Payment Program (QPP). The CMS reporting programs have 29 hospital and 64 ambulatory eCQMs available.

Objective

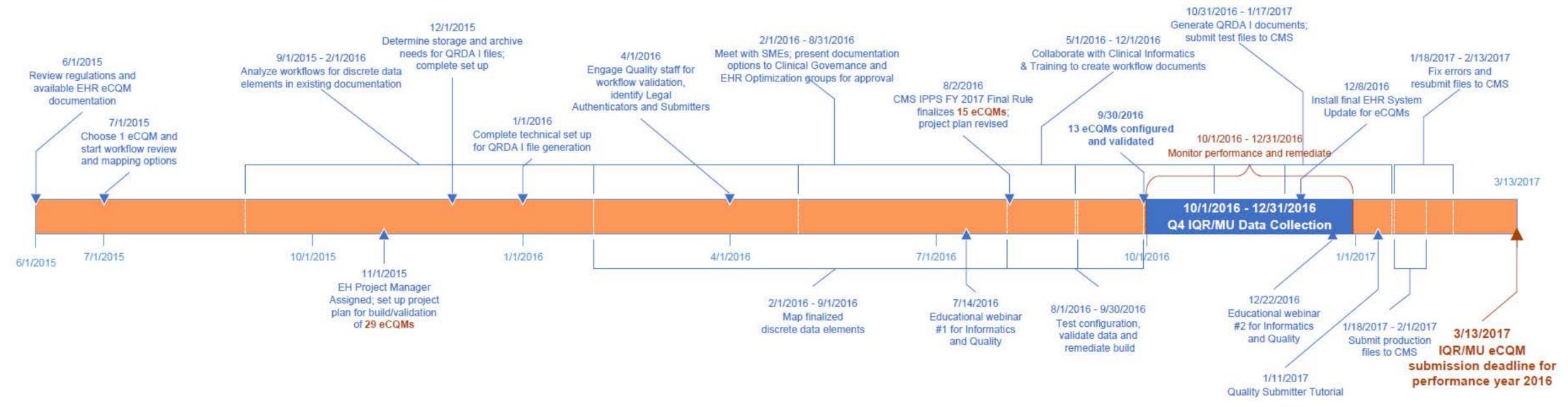
To develop two concurrent projects to build, configure, validate, document EHR workflows, and submit the required eCQMs for program performance years 2016 and 2017 for a large Catholic not-for-profit healthcare enterprise serving five states with 475 clinics, 33 hospitals and 9 affiliated community hospitals.

Project Partners

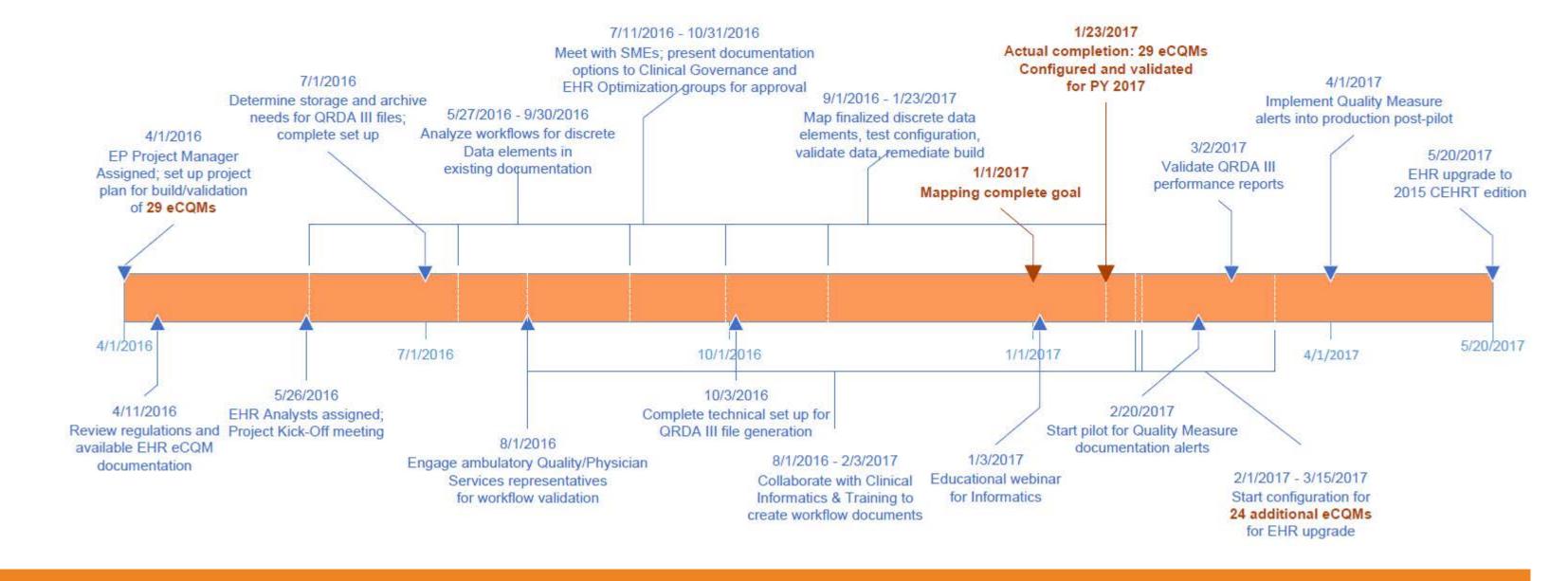
- Government Programs Team (sponsor)
- Inpatient & Ambulatory Quality (sponsors)
- Project Management Office
- EHR Analysts
- Clinical Informatics Specialists
- Curriculum Designers
- Quality Data Abstractors
- Clinical & Operational Leaders
- Affiliates' EHR analysts and Operational Leaders

eCQM Build and Validation Process

Inpatient process & timeline:



Ambulatory process & timeline:



SUPPORT

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Educational Materials Available in Multiple Locations

Navigator Quality Measure Alert:

Intranet Learning Library:

Note: Ambulatory eCQMs not submitted

for 2016 PY; Providence contracted with

a Medicare Qualified Registry to submit

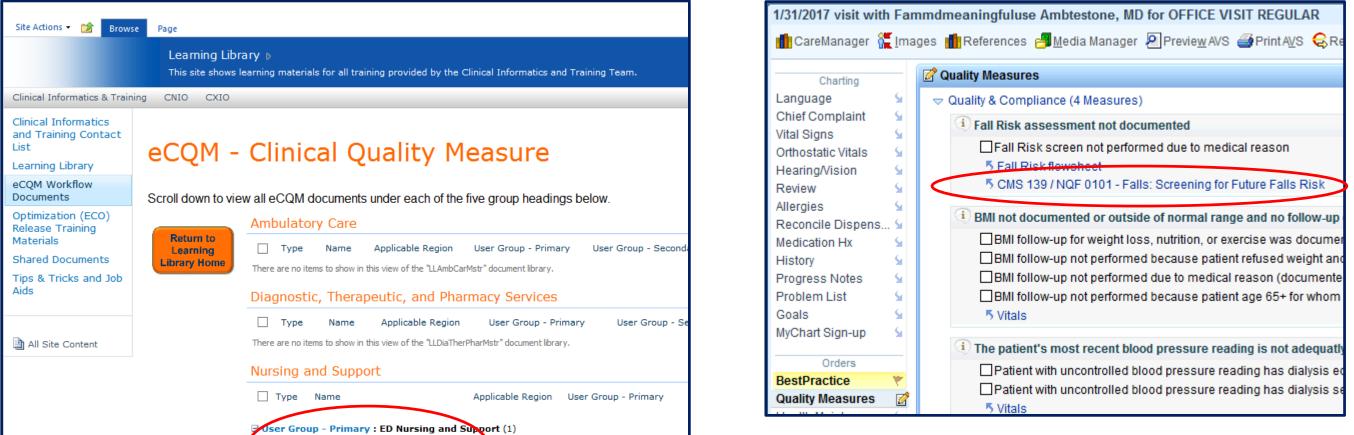
PQRS data for 2016 PY. Ambulatory

eCQMs will be submitted for Medicaid

MU, MIPS, and CPC+ for PY 2017

directly by the PH&S Government

Programs team.



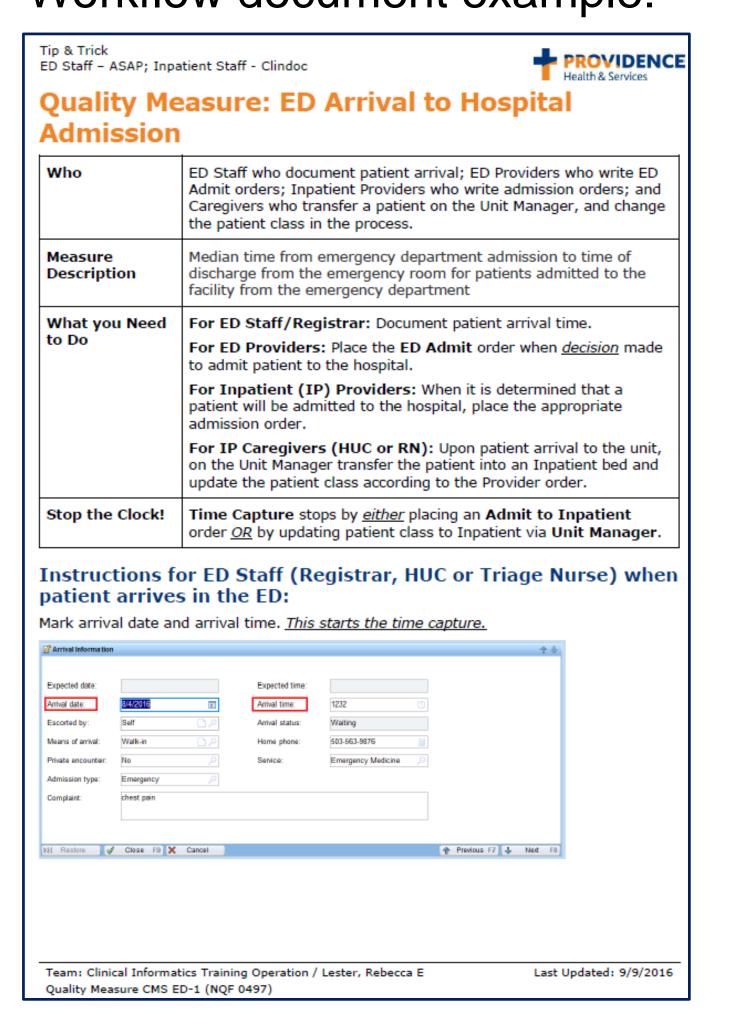
Link to

Learning Use Moly Dashboard [Department]

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Workflow document example:



eCQMs Configured

	ELIGIBLE HOSPITALS	ELIGIBLE PROVIDERS
	29 available from CMS	64 available from CMS
	MU/IQR requires 4 in 2016, 8 in 2017 TJC requires 6 in 2017	MU requires 9, MIPS requires 6, CPC+ requires 9
Configured	ED-1, ED-2, VTE-1, VTE-2, PC-05, EHDI-1, CAC-3, STK-2, STK-3, STK- 5, STK-6, STK-8, STK-10	CMS 2, 61, 68, 69, 74, 75, 117, 122, 123, 124, 125, 127, 130, 134, 135, 138, 139, 144, 146, 147, 148, 153, 154, 155, 156, 163, 164, 165, 182
Not Configured	PC-01, AMI-8a	

Discussion

Impression

- eCQM build and validation is not a simple IT project – it involves multiple teams, a lengthy timeline and strong project management
- Collaboration with key partners including EHR Analysts, Clinical Informatics Specialists, Training and Curriculum Designers, End-Users and Quality, Clinical and Operational Leaders was essential
- Deep understanding of the various reporting program rules in a changing regulatory environment aided the eCQM configuration options

Lessons Learned

- Same Project Manager for both projects provided consistency in the build, validation, testing and submission processes
- Importance of assigning an EHR analyst from every application for quick access to resolve eCQM build and submission error issues
- Test measure configuration often and install EHR system updates regularly to ensure optimal eCQM performance
- Attendance at CMS eCQM webinars essential to absorb set-up and regulatory information
- Unconfigured eCQMs submit tickets to ONC JIRA website for measure logic errors
- Collaboration with EHR analysts from Affiliates offered a sounding board for issues resolution and a consistent build

Next Steps

- Carry EH eCQM submission process forward for IQR/MU reporting for 2017 performance year
- Coordinate with System Quality Department for TJC eCQM reporting for 2017 performance year
- Implement EP MU/MIPS eCQM submission process for 2017 performance year