Key Takeaways

- Medicare Eligible hospitals (EHs) and Critical Access Hospitals (CAHs) can meet the clinical quality measurement reporting requirement for Meaningful Use by either attesting or eReporting on 19 of the 26 eCQMs in the Stage 2 Final Rule menu.
- First year EHs and CAHs must attest.
- For EHs and CAHs that choose to attest in 2015, CMS is proposing to change the attestation period for eCQMs from a full fiscal year starting on October 1st 2014-September 30, 2015 to any continuous 90-day period within calendar year 2015. First year EHs and CAHs may also attest eCQMs for any continuous 90 day period in calendar year 2016. Returning MU EHs and CAHs must attest for a full calendar year worth of data in 2016.
- EHs and CAHs that choose eReport and are successful will meet the eCQM reporting program for both Meaningful Use and the CMS Inpatient Quality Reporting (IQR) program in one submission.
- The eCQM eReporting option requires use of 2014 CEHRT and the latest versions of eCQM specifications.
- Medicaid EH and CAH eCQM reporting timelines and submission requirements will continue to be determined by each of the states.

CQM Attestation Option Requirements for Medicare Eligible Hospitals (EHs) and Critical Access Hospitals (CAHs)

- EHs and CAHs may meet the CQM component of Meaningful Use by attesting to collecting data on 16 of the 29 available eCQMs found in the Meaningful Use Stage 2 menu using 2014 Certified EHR Technology (CEHRT.)
eCQM Attestation Periods and Submission Deadlines for Medicare Eligible Hospitals (EHs) and Critical Access Hospitals (CAHs) in 2015 and 2016

- For 2015 EHs and CAHs choosing to attest Meaningful Use may collect CQM data on any continuous 90 day period in calendar year 2015.
  - Attesting EHs and CAHs may use a continuous 90-day reporting period for CQMs even if it is different from their continuous 90-day EHR reporting period for the meaningful use objectives and measures.

- For 2016 first time MU EHs and CAHs choosing to attest for any stage of Meaningful Use may collect data on any continuous 90 day period in calendar year 2016.
- For 2016 EHs and CAHs choosing to attest for any stage of Meaningful Use must collect data for a full calendar year 2016.

CQM eReporting Option Requirements for Medicare Eligible Hospitals (EHs) and Critical Access Hospitals (CAHs)

- As highlighted in the FY15 IPPS Final Rule, Second Year Stage 1 and Stage 2 EHs and CAHs may also meet the CQM component of Meaningful Use by:
  - Electronically collecting data on 16 CQMs of the 29 available CQMs found in the Meaningful Use Stage 2 Final Rule menu.
  - Selected eCQMs must come from a minimum of 3 of the 6 National Quality Domains.
  - Using 2014 CEHRT and the latest Measure Specifications
    - If errors are found in a specification, EHs must utilize the latest correct specification for the eCQM
  - Submit patient level data using reporting standard QRDA I to QualityNet in the manner prescribed in the FY15 IPPS Final Rule

- EHs successfully reporting and meeting all other Meaningful Use and Inpatient Quality Reporting Program (IQR) requirements will meet the CQM reporting requirement for both programs with one successful electronic submission.

- For this option, EH’s CQM data will be publically reported on HospitalCompare.gov.
eCQM eReporting Periods and Submission Deadlines for Medicare Eligible Hospitals (EHs) and Critical Access Hospitals (CAHs) in 2015 and 2016

- EHs and CAHs may eReport CQM data on any of the quarters of calendar year 2015, with a submission deadline of February 29th, 2016.
  - Quarter 1: January 1st-March 30th, 2015
  - Quarter 2: April 1st-June 30th, 2015
  - Quarter 3: July 1st-September 30th, 2015
  - Quarter 4: October 1st-December 31st, 2015
    - Note- Per the 2014 Stage 2 Flexibility Rule and the FY2015 IPPS Final Rule, EHs initially had to close the eReporting/Attestation period for eCQMs on September 30th. CMS is proposing an extra quarter to align EHs to calendar year cycles.
- EHs and CAHs now may attest for a quarter rather than the previously required (per the 2014 Stage 2 Flexibility Rule) full fiscal year..

Defined CQM sets and the published electronic specifications for CQMs that are in use for all CMS aligned programs are currently posted on the eCQM Library page:
http://www.cms.gov/Regulations-andGuidance/Legislation/EHRIncentivePrograms/eCQM_Library.html

Meaningful Use eCQM Reporting for Medicaid Eligible Hospitals (EHs) and Critical Access Hospitals (CAHs) in 2015 and 2016

- Medicaid EHs and CAHs must report on 16 of the 29 eCQMs found in the Stage 2 Meaningful Use Final Rule. The 16 selected eCQMs must cover 3 of the 6 National Quality Strategy Domains.
- States will continue to determine, with CMS approval through the State Medicaid Health IT Plan process
  - reporting methods (aggregate data using QRDA III or patient level data using QRDA I)
  - Collection period
  - Submission Deadline