2015 Edition Final Rule: Clinical Quality Measurement

Rule Reference: 2015 Edition Health Information Technology (Health IT) Certification Criteria, Base Electronic Health Record (EHR) Definition, and ONC Health IT Certification Program Modifications Final Rule (The "2015 Edition")

Background

The 2015 Edition final rule, published by the Office of the National Coordinator for Health Information Technology (ONC), updates the ONC Health IT Certification Program and includes certification criteria to support electronic clinical quality measurement (eCQM) and reporting across the health care ecosystem. The 2015 Edition eCQM certification criteria also support the requirements of the Medicare and Medicaid Electronic Health Record (EHR) Incentive Programs (EHR Incentive Programs) and other Centers for Medicare & Medicaid Services (CMS) program requirements.

Criteria Related to ECQMs

Below, we have highlighted several criteria related to eCQMs. We encourage stakeholders to review all available criteria to determine the criteria that best suit their needs.

- *Record and Export*: A system user will be able to record and export individual patient-level eCQM data formatted to the HL7 Quality Reporting Data Architecture (QRDA) Category I Release 3 Implementation Guide (IG) at any time the user chooses, for one or multiple patients without needing to request support from a developer to operate. This requirement is part of the certification criteria necessary to satisfy the 2015 Edition Base EHR definition. The ability to export eCQM data will serve two purposes. First, this functionality will allow a provider or health system to view and verify their eCQM results for quality improvement on a near real-time basis. Second, the export functionality gives providers the ability to export their results to multiple programs, such as those run by CMS, states, and private payers.

- *Import and Calculate*: A Health IT Module will be required to demonstrate that it can import data in order to be certified to this certification criterion using the QRDA Category I Release 3 IG, even if it is also certified to provide "record and export" and

"report" functions. This functionality could streamline the testing and certification process by importing QRDA Category I files rather than systems needing to manually enter test patient data. Also, the import functionality can promote quality improvement and data sharing between systems by providing systems the ability to import eCQM data from other systems in a standardized format. The intent is for users of certified health IT to be able to import eCQM data formatted to the QRDA Category I standard for one or more patients without needing to request support from a developer.

- *Report*: This criterion supports eCQM reporting using the consensus-based industry QRDA Category I Release 3 and QRDA Category III Release 1 IGs and also supports better alignment with the reporting requirements of CMS programs. The requirements for reporting to CMS (e.g., use of the CMS QRDA IG) are included as an optional provision within the criterion because not all certified health IT is intended to be used for CMS reporting. The certification to the HL7 QRDA Category I and III standards provide a baseline for interoperability of eCQM data as these standards are consensus-based and industry developed. Additionally, the HL7 QRDA standards are program-agnostic and can support a number of use cases for exchanging CQM data.

- *Filter*: The filter functionality included in this criterion will allow a provider to make a query for eCQM results using one or a combination of data captured by the certified health IT for quality improvement and quality reporting purposes. It can also aid in the identification of health disparities, enable care quality improvement, and support providers in delivering more effective care to their patient populations. This certification criterion requires a Health IT Module to be able to record data (according to specified standards, where applicable) and filter CQM results at both patient and aggregate levels. These filters include, but are not limited to, practice site address, patient age, patient sex, and patient problem list.