**Background Information - Electronic Clinical Quality Measures**

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| **Resource** | **Summary** |
| **CMS – Clinical Quality Measure Basics** | Overview of clinical quality measures and rules. Updated 9/4/2015. <https://www.cms.gov/Regulations-and-Guidance/Legislation/EHRIncentivePrograms/ClinicalQualityMeasures.html> |
| **AHRQ – Working for Quality** | National Quality Strategy decks and recorded webinars (most recent webinar August 2015)  <http://www.ahrq.gov/workingforquality/events.htm> |
| **eCQI Resource Center** | The eCQI Resource Center is a joint effort to bring together stakeholders from across the eCQI community and provide a centralized location for news, information, tools and standards related to eCQI and electronic clinical quality measures (eCQMs). (11/2015)  <https://ecqi.healthit.gov/> |
| **CMS HITECH Medicaid EHR Team (MeT) Community of Practice and Advanced User Group** | Online community and repository for State Medicaid agencies to communicate, collaborate and innovate in the successful implementation of the Medicaid EHR Incentive Program. (11/2015) <http://www.medicaidhitechta.org/>   * CMS and the Medicaid EHR Team (MeT) contains educational opportunities scheduled and materials posted on the CMS Medicaid HITECH Technical Assistance Web site. * CMS HITECH eCQM Community of Practice (CoPs) focus on adoption, capture, and reporting for MU and transition to eCQM for quality based performance. CoP sessions and links to register for a CoP – presentations and notes posted on Medicaid HITECH TA>[Communities of Practice](http://www.medicaidhitechta.org/CommunitiesofPractice.aspx) (log in required. See state Medicaid team)   + Educational and Special Topic Webinars –     - **Understanding CQM Session**is for state staff new to the Medicaid EHR Incentive Program, staff new to the CQM concepts, and staff who would like a refresher on CQMs     - **Advanced eCQM User Group** is focused on how to use the eCQM data.   For access please contact your state Medicaid EHR group. |
| **CMS Physician Quality Reporting System (PQRS)** | PQRS is a quality reporting program that uses negative payment adjustments to promote reporting of quality information by individual eligible professionals (EPs), EPs providing services at a Critical Access Hospital (CAH) billing under method II, and PQRS group practices participating in the group practice reporting option (GPRO).  **PQRS Fact Sheet** (9/9/15)–(<https://www.cms.gov/Newsroom/MediaReleaseDatabase/Fact-sheets/2015-Fact-sheets-items/2015-09-09.html>)  **CMS Quality Reporting Programs Strategic Vision Document** (August 2015)– (<https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/PQRS/Downloads/Physician_Quality_Reporting_Programs_Strategic_Vision_Document.pdf>) |
| **ONC Health IT Enabled Quality Improvement vision paper** | Vision using health IT for care quality improvement (11/2014)  <https://www.healthit.gov/sites/default/files/HITEnabledQualityImprovement-111214.pdf> |