Clinical Quality Measures

Passed

☐   § 170.315(c)(1) — record and export

☐   § 170.315(c)(2) — import and calculate

☐   § 170.315(c)(3) — report

Criteria	Care Setting	Measurement Period	Date	Key Milestones
Clinical Quality Measures				
§ 170.315(c)(1)—record and export	Ambulatory & Inpatient	3/1/2022 - 6/1/2022	Start test plan execution: May, 2022	☐ Based on historical data, select the most popular eCQMs.
§ 170.315(c)(2)—import and calculate			July, 2022	☐ The file should upload and be accepted by the environment without error.
§ 170.315(c)(3)—report			July, 2022	☐ The file should upload and be accepted by the environment without error.
			July, 2022	☐ All populations of all measures should match.
			August, 2022	☐

<table>
<tr><td><u>Table of Contents</u></td><td colspan="6">Associated Certification Criteria:
§ 170.315(c)(1) - Clinical quality measures (CQMs) — record and export
§ 170.315(c)(2) - Clinical quality measures (CQMs) — import and calculate
§ 170.315(c)(3) - Clinical quality measures (CQMs) — report</td></tr>
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Measure Description:
- Capture and record electronic clinical quality measure (eCQM) data in EHR (or trading partner's EHR) for calculating eCQMs.
- Electronically create a data file for transmission of CQM data in accordance with the CMS QRDA Category I IG for inpatient measures as adopted in § 170.205(h)(3) and CMS QRDA Category III IG for ambulatory measures as adopted in § 170.205(k)(3).

Justification:
We chose to concentrate on the aspects of this criterion that would closely follow the actual activities of Dynamic Health IT users with respect to eCQM calculation and output:
1) Run quality measure reports and display results on Dashboard to compare with industry-standard benchmarks and with prior/expected performance.
2a) Generate eCQM output for PI/IQR (universal eCQM reporting program for hospitals) and ensure that it can be successfully uploaded to the PI/IQR website.
2b) Generate eCQM output for MIPS (the most widely-used eCQM reporting program for ambulatory) and ensure that it can be successfully uploaded to the Quality Payment Program (QPP) website.
3a) Verify that CQMsolution is a product that can support hospital quality reporting needs.
3b) Verify that CQMsolution is a product that can support MIPS participants in achieving an end-to-end reporting bonus.

Metric Description:
1) 100 percent matching data elements in CQMsolution vs EHR. . This will be confirmed by visual validation of the following data: • Demographics
• Problems
• Medications
• Allergies
2) 100 percent matching calculation results in CQMsolution vs submission environment
3) 0 percent of files uploaded to submission environment result in errors

Standards Implemented: (SVAP)
• HL7 CDA® R2 Implementation Guide: Quality Reporting Document Architecture - Category I (QRDA I); Release 1, DSTU Release 3 (US Realm), Volume 1 - Introductory Material, June 2015
• HL7 CDA R2 Implementation Guide: Quality Reporting Document Architecture - Category I (QRDA I); Release 1, DSTU Release 3 (US Realm), Volume 2 - Templates and Supporting Material, June 2015

Developer Info:
DYNAMIC HEALTH IT, INC
320 Monticello Ave.
New Orleans, LA 70121
504.309.9103
Care Setting:
CQMsolution is used for eCQM submission in both ambulatory and inpatient environments, thus this test plan accounts for both care settings.

Product Info:
Product Name: CQMsolution
Product Version: 6.0
CHPL ID:
15.02.02.2713.A051.04.03.0.201214

Methods Use to Demonstrate Interoperability:
• Visual inspection and matching of QRDA I data to EHR data
• Matching of calculation results from CQMsolution to CMS
• API Sandbox testing with CMS for file acceptance

Test Step:	Testing Procedure:	Expected Outcomes:	Key Milestone Date:	Key Milestone:	Outcome:	Comment(s)
	* Inpatient Setting					
1i	Identify Trading Partner (TP) and coordinate with TP for calculating and reporting electronic clinical quality measures (eCQMs) using production data as described in this RWT plan.	• Confirm Trading Partner • Confirm ability to calculate and report eCQMs • Confirm with TP that production data will be used, whether in an actual live environment or a copy of a live environment	Start test plan execution: May, 2022	☐		
2i	Identify four EH (Eligible Hospital) eCQMs for RWT.	Based on historical data, select the most popular eCQMs.				
3i	Identify a one calendar quarter reporting period with adequate patient data for reporting.	Admins with sufficient familiarity with the hospital's clinical activities should be able to choose a period with an appropriate amount of quality data.				

4a	Capture and record clinical quality measure (CQM) data in Trading Partner's (TP) EHR. Since manual data entry for an adequate quantity of data would be onerous, we will use actual patient data. a. If TP is integrated with CQMsolution, CQMsolution will capture data through a SQL query, so that when a user runs a CQM report, CQMsolution pulls data directly from the TP's database. b. Alternative approach: Pull in data through QRDA I files in a .zip folder	Data ready for report generation.		

5a	Correctly calculate numerator, denominator, exclusion and exception values for selected eCQMs.	The CQMsolution report should complete with no errors.		
6a	Spot-check 10 patients for each measure, ensuring that some are in the denominator only, some are in the numerator and denominator and, if possible, some are exclusions or exceptions.	Use Patient List to check which categories Initial Patient Population (IPP), Denominator (Den), Exclusions (Excl), Numerator (Num) or Exceptions (Excp) each patient falls into. For each spot-check patient, use the drill-down to confirm that the patient data in CQMsolution (encounters, codes, demographics) matches the patient data in the EHR and that the patient is correctly categorized in CQMsolution.		
7a	Upload the generated MIPS QRDA III file to QPP.	The file should upload and be accepted by the environment without error.	July, 2022	☐
8	Check the submission environment's measure calculation results and compare them to CQMsolution's calculation results. *Both settings*	All populations of all measures should match.	July, 2022	☐
9	Calculate and compile metrics		August, 2022	☐

Authorized Representative Name:			
Authorized Representative Email:			
Authorized Representative Phone:			
Authorized Representative Signature:			
Date:			