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<p>Introduction to the Manual</p>	<p>The Introduction was updated to align with the CMS <i>Specifications Manual for National Hospital Inpatient Quality Measures</i>, Version 5.14, effective for discharges on and after July 1, 2023.</p>	<p>Electronic Clinical Quality Measures (eCQMs) Overview</p> <p><b>Change to:</b> Beginning in calendar year (CY) 2013, hospitals were provided the opportunity to voluntarily submit data for eCQMs. These quality measures were developed specifically to allow an electronic health record (EHR) system certified to the Office of the National Coordinator (ONC) standards to capture, export, calculate, and report the measure data. Since CY 2016, hospitals have been required to report eCQM data as a portion of the Hospital IQR Program and the Medicare Promoting Interoperability Program (previously known as the Medicare EHR Incentive Program). Hospitals that successfully submit eCQM data to meet Hospital IQR Program requirements will also satisfy the eCQM reporting requirements for the Medicare Promoting Interoperability Program for eligible hospitals and critical access hospitals (CAHs) with one submission.</p> <p>Refer to the Technical Specifications and Resources for the CMS Quality Reporting Document Architecture (QRDA) Category I Implementation Guide for the applicable reporting period, measure specification information, and program resources to support successful eCQM reporting on the eCQI Resource Center at: <a href="https://ecqi.healthit.gov/">https://ecqi.healthit.gov/</a>.</p> <p><b>Note:</b> Critical access hospitals (CAHs) are encouraged, but not required, to participate in the Hospital IQR Program. CAHs are required to participate in the Medicare Promoting Interoperability Program. Review the Promoting Interoperability Programs page on the CMS.gov website for more information.</p>