Medicare Promoting Interoperability PROGRAM

2024 Medicare Promoting Interoperability Program Electronic Clinical Quality Measures (eCQMs) Fact Sheet

Electronic Clinical Quality Measures (eCQM) Overview

To successfully participate in the Medicare Promoting Interoperability Program, the Centers for Medicare & Medicaid Services (CMS) requires eligible hospitals and critical access hospitals (CAHs) to report on eCQMs.

What are eCQMs?

eCQMs are tools that help measure and track the quality of healthcare services provided by eligible hospitals and CAHs within our healthcare system. These measures use data reported from electronic health records (EHRs) that are associated with healthcare providers' ability to deliver high-quality care or relate to long-term goals for quality healthcare. eCQMs help ensure that our healthcare system is delivering effective, safe, efficient, patient-centered, equitable, and timely care.

eCQM Reporting Period

Eligible hospitals and CAHs that report on eCQMs to the Medicare Promoting Interoperability Program are required to report on a full calendar year of data.

Medicare Promoting Interoperability Program eCQM Reporting Requirements for All Hospitals		
# of eCQMs	Total Available	12
	Required	Safe Use of Opioids eCQM, Severe Obstetric
		Complications eCQM, and Cesarean Birth eCQM,
		plus 3 self-selected eCQMs listed below (6 eCQMs
		total)
Reporting Period	Electronic Reporting	A full year of data
	Period	
CY 2024 Submission Deadline		February 28, 2025



eCQM Reporting Requirements

Eligible hospitals and CAHs are required to report on at least three self-selected eCQMs, plus the Safe Use of Opioids –Concurrent Prescribing eCQM, Severe Obstetric Complications eCQM, and the Cesarean Birth eCQM, for a total of six eCQMs.

Below are all the eCQM options available to report on for CY 2024.

Short Name	Measure Name	
Safe Use of Opioids	Safe Use of Opioids – Concurrent Prescribing	
PC-02	Cesarean Birth	
PC-07	Severe Obstetric Complications	
STK-2	Discharged on Antithrombotic Therapy	
STK-3	Anticoagulation Therapy for Atrial Fibrillation/Flutter	
STK-5	Antithrombotic Therapy by End of Hospital Day Two	
VTE-1	Venous Thromboembolism Prophylaxis	
VTE-2	Intensive Care Unit Venous Thromboembolism Prophylaxis	
HH-HYPO	Hospital Harm - Severe Hypoglycemia	
HH-HYPER	Hospital Harm - Severe Hyperglycemia	
HH-ORAE	Hospital Harm - Opioid-Related Adverse Events	
GMCS	Global Malnutrition Composite Score	

Please note, for CY 2024, to be considered a meaningful user and avoid a downward payment adjustment, eligible hospitals and CAHs must also use the ONC health IT certification criteria in 45 CFR 170.316, as finalized in the CY 2024 Medicare Physician Fee Schedule final rule (88 FR 79307 through 79312).

Additional Resources

- Hospital Inpatient Quality Reporting (IQR) Program
- eCQI Resource Center