

# Pioneers in Quality™

## Expert to Expert Series:

CAC-3 Home Management Plan of Care Document  
Given to Patient/Caregiver (CMS26v6)

EHDI 1a- Hearing Screening Prior to Hospital  
Discharge (CMS31v7)

9-10 am (PT)

10-11 am (MT)

11 am-12 pm (CT)

12-1 pm (ET)

March 5, 2019



Pioneers in Quality™

Expert to Expert Series: CAC-3 & EHDI-1a



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You will also need this passcode

- 3920872

This information is also in the Chat box with a clickable link.

At the end of this session, participants will be able to:

- Apply concepts learned about the new Clinical Quality Language (CQL) expression language for the CAC-3 & EHDI-1a eQMs
- Identify common issues and questions regarding CAC-3 & EHDI-1a eQMs and
- Prepare to implement the CQL expression language for the 2019 eQm reporting year (2020 data submission)

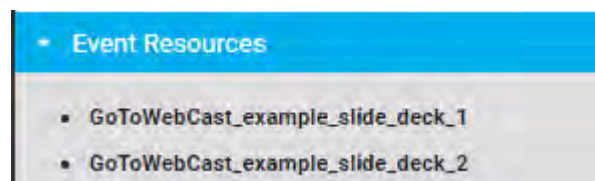
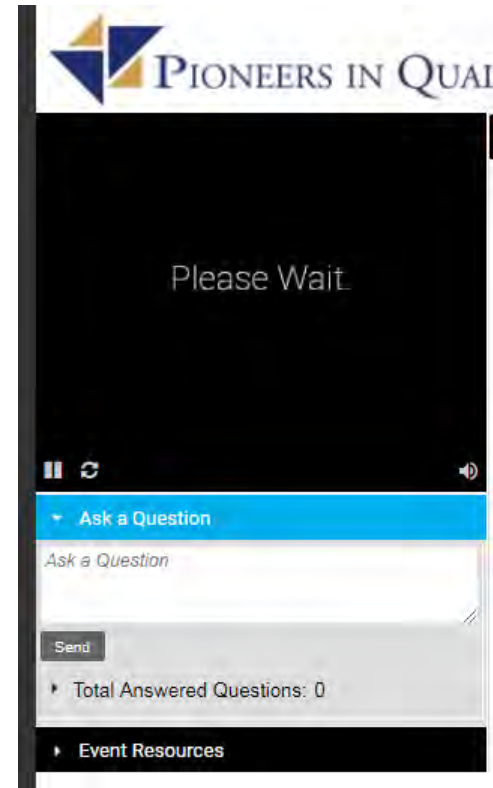
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# Pioneers in Quality™

## Expert to Expert Series: CAC-3 & EHDI-1a



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### Pioneers in Quality

**Pioneers in Quality - Home**

Proven Practices Webinar Series

**Pioneers in Quality™ Recognition**

➤ 2018 Pioneers in Quality Expert and Solution Contributors

### 2018 Proven Practices Collection and Webinar Series

Four hospitals and/or health systems [were recognized](#) as 2018 Pioneers in Quality™ Expert Contributors for their efforts to advance the evolution and utilization of electronic clinical quality measures (eCQMs). These organizations presented during the Joint Commission's Pioneers in Quality™ 2018 eCQM Proven Practices webinar series and are featured within the 2018 Proven Practice Collection along with the five Experts Contributors recognized in 2017. You can access the 2018 [Proven Practices Collection here](#).

**Pioneers in Quality: eCQM "Expert to Expert" Series**  
[Series Information/Session Replays](#)

Promotional Video

In March, the webinar recording and slide deck will be accessible on The Joint Commission website via the Expert to Expert landing page ([https://www.jointcommission.org/piq\\_expert\\_to\\_expert\\_series/](https://www.jointcommission.org/piq_expert_to_expert_series/)).

As follow-up items are posted, an email will be sent to all individuals that registered.

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- California Board of Registered Nursing
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# CAC-3 Home Management Plan of Care (HMPC) Document Given to Patient/Caregiver (CMS26v6)

March 5, 2019

# Introduction

## Home Management Plan of Care (HMPC) Document Given to Patient/Caregiver



- Asthma is the most common chronic disease in children and a major cause of morbidity and health care costs nationally
- In 2015, 47.5 % of children with asthma, age 18 & younger, reported having an asthma attack in the past year
- Chronic asthma in children can account for a significant annual loss of school days
- Guidelines continue to support patient education for self-management

# Introduction (continued)

Home Management Plan of Care (HMPC) Document Given to Patient/Caregiver



HMPC document that addresses all of the following:

- Arrangements for follow-up care
  - Actual appointment
- Environmental control and control of other triggers
  - Patient specific triggers
- Method and timing of rescue actions
  - When to take action, what steps, when to contact physician
- Use of controllers and use of relievers

Marilyn Parenzan, MBA, RHIA, CPHQ

# CQL Basics Overview

March 5, 2019



# Electronic Clinical Quality Measures (eCQM)

Evolving eCQM Standards



	Metadata	Data Model	Logic
Calendar Year 2018	HQMF (Metadata, Population Structure)	Quality Data Model	
Calendar Year 2019	HQMF (Metadata, Population Structure)	Quality Data Model	Clinical Quality Language

## Population Criteria

### Initial Population

TJC."Encounter with Principal Diagnosis and Age"

### Denominator

TJC."Ischemic Stroke Encounter"

### Denominator Exclusions

TJC."Ischemic Stroke Encounters with Discharge Status"  
union TJC."Comfort Measures during Hospitalization"

### Numerator

TJC."Ischemic Stroke Encounter" IschemicStrokeEncounter  
with "Antithrombotic Therapy at Discharge" DischargeAntithrombotic  
such that DischargeAntithrombotic.authorDatetime during IschemicStrokeEncounter.relevantPeriod

## Definitions

### Antithrombotic Not Given at Discharge

["Medication, Not Discharged": "Antithrombotic Therapy"] NoAntithromboticDischarge  
where NoAntithromboticDischarge.negationRationale in "Medical Reason"  
or NoAntithromboticDischarge.negationRationale in "Patient Refusal"

### Antithrombotic Therapy at Discharge

["Medication, Discharge": "Antithrombotic Therapy"]

### Denominator

TJC."Ischemic Stroke Encounter"

### Denominator Exceptions

TJC."Ischemic Stroke Encounter" IschemicStrokeEncounter  
with "Antithrombotic Not Given at Discharge" NoDischargeAntithrombotic  
such that NoDischargeAntithrombotic.authorDatetime during IschemicStrokeEncounter.relevantPeriod

## Functions

### Global.CalendarAgeInYearsAt(BirthDateTime DateTime, AsOf DateTime)

years between ToDate(BirthDateTime)and ToDate(AsOf)

### Global.Hospitalization(Encounter "Encounter, Performed")

( singleton from ( ["Encounter, Performed": "Emergency Department Visit"] EDVisit  
where EDVisit.relevantPeriod ends 1 hour or less on or before start of Encounter.relevantPeriod  
) ) X  
return if X is null then Encounter.relevantPeriod else Interval[start of X.relevantPeriod, end of Encounter.relevantPeriod]

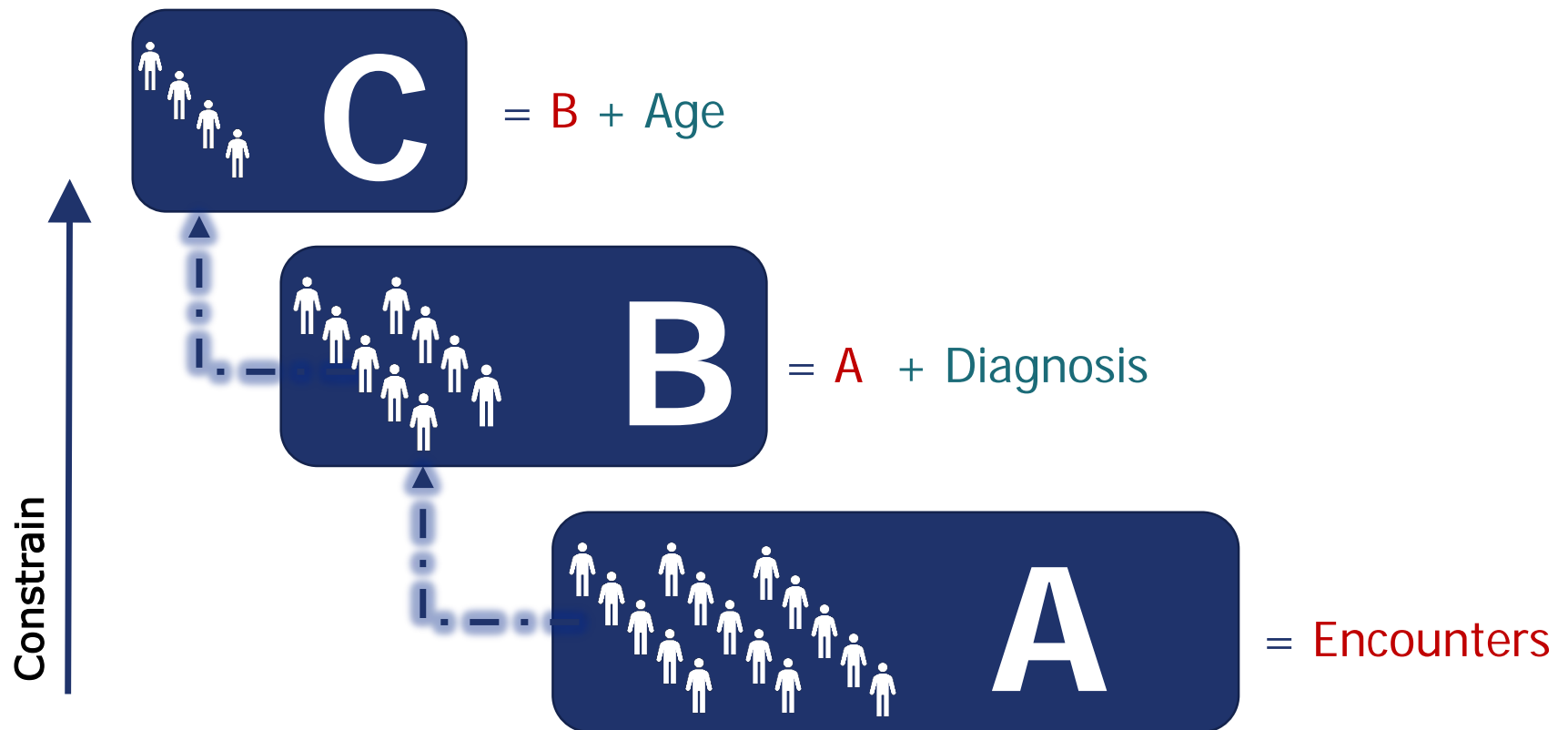
Building  
Blocks



# CQL Definition

Example of Generic Population Criteria

## Initial Population = C





# CQL Definition

## Initial Population:

TJC.Encounter with Principal Diagnosis and Age

### ▲ TJC.Encounter with Principal Diagnosis and Age

"All Stroke Encounter" AllStrokeEncounter  
with ["Patient Characteristic Birthdate"] BirthDate  
such that Global."CalendarAgeInYearsAt"(BirthDate.birthDatetime, start of AllStrokeEncounter.relevantPeriod) >= 18

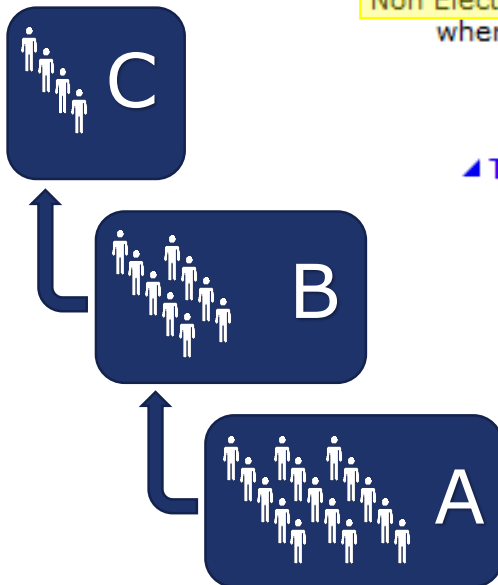
### ▲ TJC.All Stroke Encounter

"Non Elective Inpatient Encounter" NonElectiveEncounter  
where NonElectiveEncounter.principalDiagnosis in "Hemorrhagic Stroke"  
or NonElectiveEncounter.principalDiagnosis in "Ischemic Stroke"

### ▲ TJC.Non Elective Inpatient Encounter

["Encounter, Performed": "Non-Elective Inpatient Encounter"] NonElectiveEncounter  
where Global."LengthInDays"(NonElectiveEncounter.relevantPeriod) <= 120  
and NonElectiveEncounter.relevantPeriod ends during "Measurement Period"

Constrain



# Definition Anatomy

Definitions are made up of:

**Library Alias**

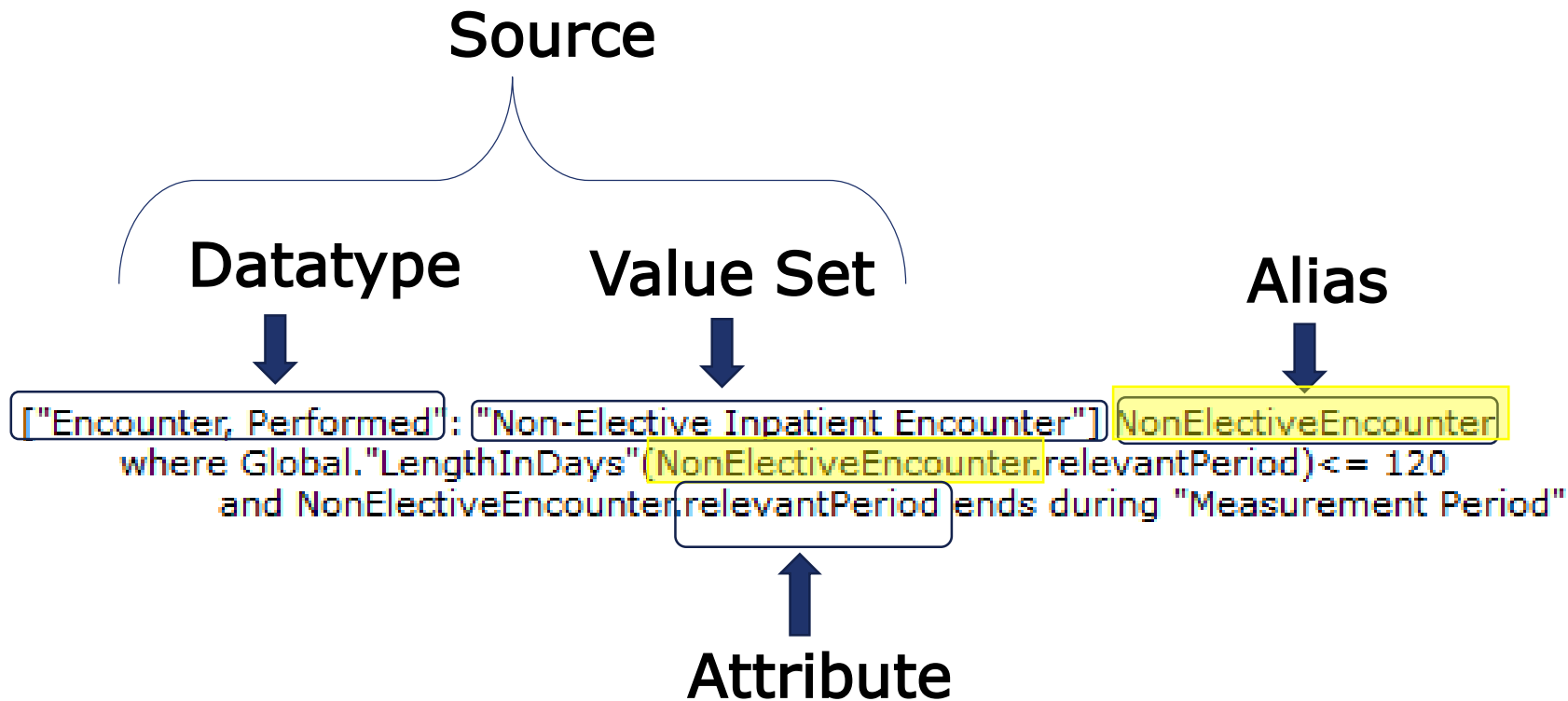
**Name**

▲ **TJC.Non Elective Inpatient Encounter**

```
["Encounter, Performed": "Non-Elective Inpatient Encounter"] NonElectiveEncounter  
where Global."LengthInDays"(NonElectiveEncounter.relevantPeriod) <= 120  
and NonElectiveEncounter.relevantPeriod ends during "Measurement Period"
```

**Expression**

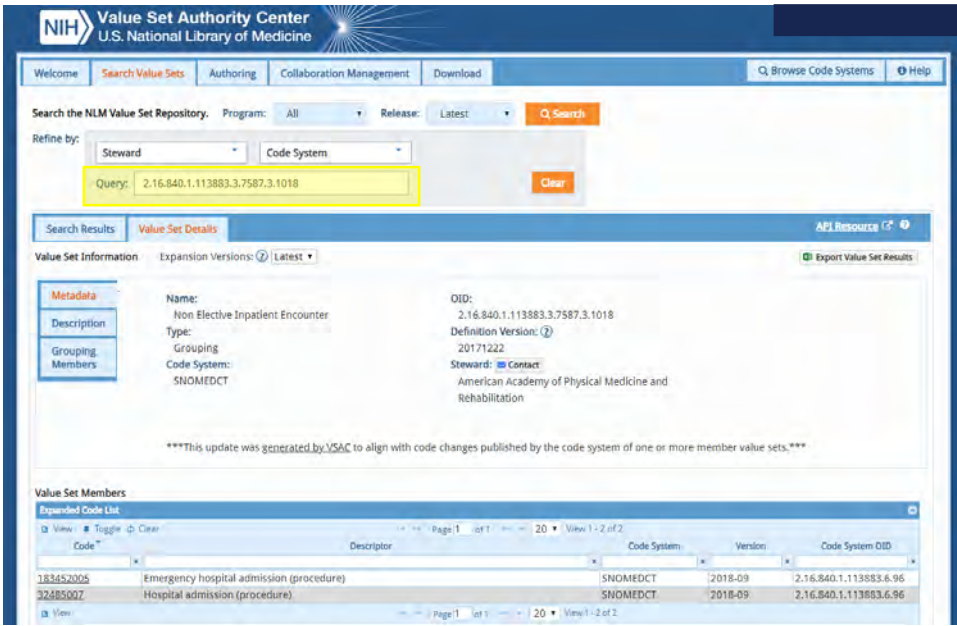
# Definition Anatomy



# Definition Anatomy- Value Sets

## Terminology

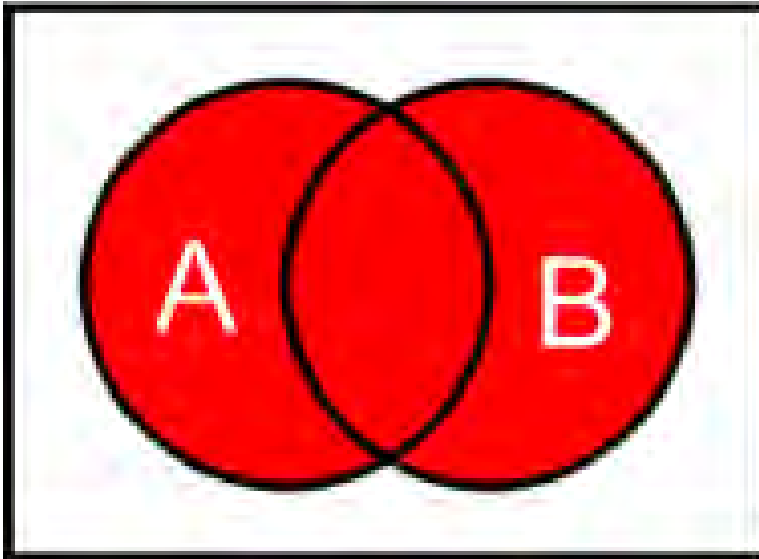
- valueset "Antithrombotic Therapy" using "2.16.840.1.113883.3.117.1.7.1.201"
- valueset "Comfort Measures" using "1.3.6.1.4.1.33895.1.3.0.45"
- valueset "Discharge To Acute Care Facility" using "2.16.840.1.113883.3.117.1.7.1.87"
- valueset "Discharged to Health Care Facility for Hospice Care" using "2.16.840.1.113883.3.117.1.7.1.207"
- valueset "Discharged to Home for Hospice Care" using "2.16.840.1.113883.3.117.1.7.1.209"
- valueset "Emergency Department Visit" using "2.16.840.1.113883.3.117.1.7.1.292"
- valueset "Ethnicity" using "2.16.840.1.114222.4.11.837"
- valueset "Hemorrhagic Stroke" using "2.16.840.1.113883.3.117.1.7.1.212"
- valueset "Ischemic Stroke" using "2.16.840.1.113883.3.117.1.7.1.247"
- valueset "Left Against Medical Advice" using "2.16.840.1.113883.3.117.1.7.1.308"
- valueset "Medical Reason" using "2.16.840.1.113883.3.117.1.7.1.473"
- valueset "Non-Elective Inpatient Encounter" using "2.16.840.1.113883.3.117.1.7.1.424"
- valueset "ONC Administrative Sex" using "2.16.840.1.113762.1.4.1"
- valueset "Patient Expired" using "2.16.840.1.113883.3.117.1.7.1.309"
- valueset "Patient Refusal" using "2.16.840.1.113883.3.117.1.7.1.93"
- valueset "Payer" using "2.16.840.1.114222.4.11.3591"
- valueset "Race" using "2.16.840.1.114222.4.11.836"



The screenshot displays the Value Set Authority Center (VSAC) interface. The search results for the value set "Non-Elective Inpatient Encounter" (OID: 2.16.840.1.113883.3.7587.3.1018) are shown. The interface includes a search bar, a "Refine by" section with dropdowns for "Steward" and "Code System", and a "Query" field containing the value set ID. The search results section shows the value set details, including its name, type, grouping, code system, and definition version. Below the details is a table of value set members, which lists codes, descriptors, code systems, and versions.

Code	Descriptor	Code System	Version	Code System OID
183452005	Emergency hospital admission (procedure)	SNOMEDCT	2018-09	2.16.840.1.113883.6.96
32485007	Hospital admission (procedure)	SNOMEDCT	2018-09	2.16.840.1.113883.6.96

# Common CQL Operators



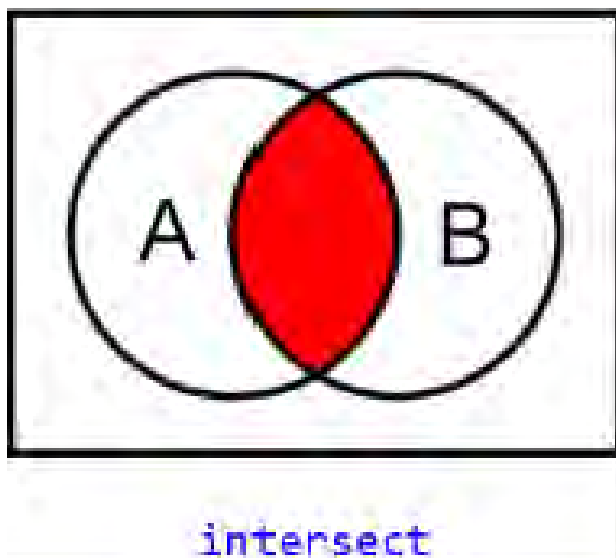
union

## Example: Combining a list of Diagnoses

### ▲ History of Uterine Surgery Diagnosis

```
["Diagnosis": "Perforation of Uterus"]  
  union ["Diagnosis": "Uterine Window"]  
  union ["Diagnosis": "Uterine Rupture"]  
  union ["Diagnosis": "Cornual Ectopic Pregnancy"]
```

# Common CQL Operators



## Example:

List A= All inpatient encounters with age  $\geq 18$

List B= All encounters with a CBC level

## **Result of intersection=**

a list of any inpatient encounters with age  $\geq 18$   
and a CBC level

# Initial Population - CAC-3 (CMS26v6)

Pediatric asthma inpatients with an age of 2 through 17 years, and length of stay less than or equal to 120 days that ends during the measurement period.



## Initial Population:

**“Encounter with Principal Diagnosis of Asthma with Age Between 2 and 17 Years”**

# Initial Population - CAC-3 (CMS26v6)

Pediatric asthma inpatients with an age of 2 through 17 years, and length of stay less than or equal to 120 days that ends during the measurement period.



## Initial Population:

**“Encounter with Principal Diagnosis of Asthma with Age Between 2 and 17 Years”**

**“Encounter with Principal Diagnosis of Asthma with Age Between 2 and 17 Years”:**

- Global."Inpatient Encounter" InpatientEncounter with ["Patient Characteristic Birthdate"] BirthDate such that Global."CalendarAgeInYearsAt"(BirthDate.birthDatetime, start of InpatientEncounter.relevantPeriod) between 2 and 17 where InpatientEncounter.principalDiagnosis in Asthma



# Initial Population - CAC-3 (CMS26v6)

Pediatric asthma inpatients with an age of 2 through 17 years, and length of stay less than or equal to 120 days that ends during the measurement period.



## Initial Population:

**“Encounter with Principal Diagnosis of Asthma with Age Between 2 and 17 Years”**

**“Encounter with Principal Diagnosis of Asthma with Age Between 2 and 17 Years”:**

- *Global. "Inpatient Encounter" InpatientEncounter* with ["Patient Characteristic Birthdate"] BirthDate such that Global."CalendarAgeInYearsAt"(BirthDate.birthDatetime, start of InpatientEncounter.relevantPeriod) between 2 and 17 where InpatientEncounter.principalDiagnosis in Asthma

# Initial Population - CAC-3 (CMS26v6)

Pediatric asthma inpatients with an age of 2 through 17 years, and length of stay less than or equal to 120 days that ends during the measurement period.



## Initial Population:

**“Encounter with Principal Diagnosis of Asthma with Age Between 2 and 17 Years”**

**“Encounter with Principal Diagnosis of Asthma with Age Between 2 and 17 Years”:**

- Global."Inpatient Encounter" *InpatientEncounter* with ["Patient Characteristic Birthdate"] BirthDate such that Global. "*CalendarAgeInYearsAt*"(BirthDate.birthDatetime, start of *InpatientEncounter*.relevantPeriod) between 2 and 17 where InpatientEncounter.principalDiagnosis in Asthma

# Initial Population - CAC-3 (CMS26v6)

Pediatric asthma inpatients with an age of 2 through 17 years, and length of stay less than or equal to 120 days that ends during the measurement period.



## Initial Population:

**“Encounter with Principal Diagnosis of Asthma with Age Between 2 and 17 Years”**

**“Encounter with Principal Diagnosis of Asthma with Age Between 2 and 17 Years”:**

- Global."Inpatient Encounter" *InpatientEncounter* with ["Patient Characteristic Birthdate"] BirthDate such that Global."CalendarAgeInYearsAt"(BirthDate.birthDatetime, start of InpatientEncounter.relevantPeriod) between 2 and 17 where *InpatientEncounter.principalDiagnosis* in Asthma

# Initial Population - CAC-3 (CMS26v6)

Pediatric asthma inpatients with an age of 2 through 17 years, and length of stay less than or equal to 120 days that ends during the measurement period.

## Initial Population:

**“Encounter with Principal Diagnosis of Asthma with Age Between 2 and 17 Years”**

**“Encounter with Principal Diagnosis of Asthma with Age Between 2 and 17 Years”:**

- *Global. "Inpatient Encounter"* InpatientEncounter with ["Patient Characteristic Birthdate"] BirthDate such that Global."CalendarAgeInYearsAt"(BirthDate.birthDatetime, start of InpatientEncounter.relevantPeriod) between 2 and 17 where InpatientEncounter.principalDiagnosis in Asthma

### *Global. "Inpatient Encounter":*

- ["Encounter, Performed": "Encounter Inpatient"] EncounterInpatient where "LengthInDays"(EncounterInpatient.relevantPeriod) <= 120 and EncounterInpatient.relevantPeriod ends during "Measurement Period"

# Initial Population - CAC-3 (CMS26v6)



Pediatric asthma inpatients with an age of 2 through 17 years, and length of stay less than or equal to 120 days that ends during the measurement period.

## Initial Population:

**“Encounter with Principal Diagnosis of Asthma with Age Between 2 and 17 Years”**

**“Encounter with Principal Diagnosis of Asthma with Age Between 2 and 17 Years”:**

- Global."Inpatient Encounter" InpatientEncounter with ["Patient Characteristic Birthdate"] BirthDate such that Global."CalendarAgeInYearsAt"(BirthDate.birthDatetime, start of InpatientEncounter.relevantPeriod) between 2 and 17 where InpatientEncounter.principalDiagnosis in Asthma

## **Global."Inpatient Encounter":**

- ["Encounter, Performed": *"Encounter Inpatient"*] *EncounterInpatient* where "LengthInDays"(EncounterInpatient.relevantPeriod) <= 120 and EncounterInpatient.relevantPeriod ends during "Measurement Period"

# Initial Population - CAC-3 (CMS26v6)

Pediatric asthma inpatients with an age of 2 through 17 years, and length of stay less than or equal to 120 days that ends during the measurement period.

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**“Encounter with Principal Diagnosis of Asthma with Age Between 2 and 17 Years”:**

- Global."Inpatient Encounter" InpatientEncounter with ["Patient Characteristic Birthdate"] BirthDate such that Global."CalendarAgeInYearsAt"(BirthDate.birthDatetime, start of InpatientEncounter.relevantPeriod) between 2 and 17 where InpatientEncounter.principalDiagnosis in Asthma

## **Global."Inpatient Encounter":**

- ["Encounter, Performed": "Encounter Inpatient"] *EncounterInpatient* where *"LengthInDays"(EncounterInpatient.relevantPeriod) <= 120* and EncounterInpatient.relevantPeriod ends during "Measurement Period"

# Initial Population - CAC-3 (CMS26v6)

Pediatric asthma inpatients with an age of 2 through 17 years, and length of stay less than or equal to 120 days that ends during the measurement period.

## Initial Population:

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**“Encounter with Principal Diagnosis of Asthma with Age Between 2 and 17 Years”:**

- Global."Inpatient Encounter" InpatientEncounter with ["Patient Characteristic Birthdate"] BirthDate such that Global."CalendarAgeInYearsAt"(BirthDate.birthDatetime, start of InpatientEncounter.relevantPeriod) between 2 and 17 where InpatientEncounter.principalDiagnosis in Asthma

## **Global."Inpatient Encounter":**

- ["Encounter, Performed": "Encounter Inpatient"] *EncounterInpatient* where "LengthInDays"(EncounterInpatient.relevantPeriod) <= 120 and *EncounterInpatient.relevantPeriod* ends during *"Measurement Period"*

# Initial Population - CAC-3 (CMS26v6)

Pediatric asthma inpatients with an age of 2 through 17 years, and length of stay less than or equal to 120 days that ends during the measurement period.



## Initial Population:

**“Encounter with Principal Diagnosis of Asthma with Age Between 2 and 17 Years”**

**“Encounter with Principal Diagnosis of Asthma with Age Between 2 and 17 Years”:**

- Global."Inpatient Encounter" InpatientEncounter with ["Patient Characteristic Birthdate"] BirthDate such that Global."CalendarAgeInYearsAt"(BirthDate.birthDatetime, start of InpatientEncounter.relevantPeriod) between 2 and 17 where InpatientEncounter.principalDiagnosis in Asthma



# Denominator - CAC-3 (CMS26v6)

Patients Discharged to Home or Police Custody



## Denominator:

“Encounter with Discharge Disposition to Home or Police Custody”

# Denominator - CAC-3 (CMS26v6)

Patients Discharged to Home or Police Custody



## Denominator:

"Encounter with Discharge Disposition to Home or Police Custody"

### "Encounter with Discharge Disposition to Home or Police Custody":

- "Encounter with Principal Diagnosis of Asthma with Age Between 2 and 17 Years"  
AsthmaAgeEncounter where AsthmaAgeEncounter.dischargeDisposition in "Discharge To Home Or Police Custody"

# Denominator - CAC-3 (CMS26v6)

Patients Discharged to Home or Police Custody



## Denominator:

"Encounter with Discharge Disposition to Home or Police Custody"

### "Encounter with Discharge Disposition to Home or Police Custody":

- *"Encounter with Principal Diagnosis of Asthma with Age Between 2 and 17 Years"*  
*AsthmaAgeEncounter* where *AsthmaAgeEncounter.dischargeDisposition* in "Discharge To Home Or Police Custody"

# Denominator - CAC-3 (CMS26v6)

Patients Discharged to Home or Police Custody



## Denominator:

"Encounter with Discharge Disposition to Home or Police Custody"

### "Encounter with Discharge Disposition to Home or Police Custody":

- "Encounter with Principal Diagnosis of Asthma with Age Between 2 and 17 Years"  
*AsthmaAgeEncounter* where *AsthmaAgeEncounter.dischargeDisposition* in "Discharge To Home Or Police Custody"

# Numerator - CAC-3 (CMS26v6)

Pediatric asthma inpatients with documentation that they or their caregivers were given a written Home Management Plan of Care (HMPC) document that addresses all of the following:

1. Arrangements for follow-up care
2. Environmental control and control of other triggers
3. Method and timing of rescue actions
4. Use of controllers
5. Use of relievers

-OR-

Documentation that the patient or their caregiver refused a written Home Management Plan of Care (HMPC) document.

# Numerator - CAC-3 (CMS26v6)

## Numerator:

( "Encounter with Discharge Disposition to Home or Police Custody" DischargeToHomeEncounter with "Asthma Management Plan Completed" ActionPlan such that ActionPlan.authorDatetime during DischargeToHomeEncounter.relevantPeriod )

### Union

( "Encounter with Discharge Disposition to Home or Police Custody" DischargeToHomeEncounter with "No Asthma Management Plan Due To Patient Refusal" NoActionPlan such that NoActionPlan.authorDatetime during DischargeToHomeEncounter.relevantPeriod )

# Numerator - CAC-3 (CMS26v6)

## Numerator:

( "Encounter with Discharge Disposition to Home or Police Custody" DischargeToHomeEncounter with "Asthma Management Plan Completed" ActionPlan such that ActionPlan.authorDatetime during DischargeToHomeEncounter.relevantPeriod )

Union

( "Encounter with Discharge Disposition to Home or Police Custody" DischargeToHomeEncounter with "No Asthma Management Plan Due To Patient Refusal" NoActionPlan such that NoActionPlan.authorDatetime during DischargeToHomeEncounter.relevantPeriod )

## Numerator

( *"Encounter with Discharge Disposition to Home or Police Custody"* DischargeToHomeEncounter with "Asthma Management Plan Completed" ActionPlan

such that ActionPlan.authorDatetime during DischargeToHomeEncounter.relevantPeriod

union

( *"Encounter with Discharge Disposition to Home or Police Custody"* DischargeToHomeEncounter with "No Asthma Management Plan Due To Patient Refusal" NoActionPlan

such that NoActionPlan.authorDatetime during DischargeToHomeEncounter.relevantPeriod )

# Numerator - CAC-3 (CMS26v6)

## Numerator:

( "Encounter with Discharge Disposition to Home or Police Custody" DischargeToHomeEncounter with "Asthma Management Plan Completed" ActionPlan such that ActionPlan.authorDatetime during DischargeToHomeEncounter.relevantPeriod )  
Union  
( "Encounter with Discharge Disposition to Home or Police Custody" DischargeToHomeEncounter with "No Asthma Management Plan Due To Patient Refusal" NoActionPlan such that NoActionPlan.authorDatetime during DischargeToHomeEncounter.relevantPeriod )

## Numerator

( "Encounter with Discharge Disposition to Home or Police Custody" *DischargeToHomeEncounter* with *"Asthma Management Plan Completed" ActionPlan* such that *ActionPlan*.authorDatetime during *DischargeToHomeEncounter*.relevantPeriod )  
union  
( "Encounter with Discharge Disposition to Home or Police Custody" DischargeToHomeEncounter with "No Asthma Management Plan Due To Patient Refusal" NoActionPlan such that NoActionPlan.authorDatetime during DischargeToHomeEncounter.relevantPeriod )



# Numerator - CAC-3 (CMS26v6)

## Numerator:

( "Encounter with Discharge Disposition to Home or Police Custody" DischargeToHomeEncounter with "Asthma Management Plan Completed" ActionPlan such that ActionPlan.authorDatetime during DischargeToHomeEncounter.relevantPeriod )

Union

( "Encounter with Discharge Disposition to Home or Police Custody" DischargeToHomeEncounter with "No Asthma Management Plan Due To Patient Refusal" NoActionPlan such that NoActionPlan.authorDatetime during DischargeToHomeEncounter.relevantPeriod )

## Numerator

( "Encounter with Discharge Disposition to Home or Police Custody" DischargeToHomeEncounter with "Asthma Management Plan Completed" ActionPlan

such that ActionPlan.authorDatetime during DischargeToHomeEncounter.relevantPeriod )

union

( "Encounter with Discharge Disposition to Home or Police Custody" DischargeToHomeEncounter with "No Asthma Management Plan Due To Patient Refusal" NoActionPlan

such that NoActionPlan.authorDatetime during DischargeToHomeEncounter.relevantPeriod )

## "Asthma Management Plan Completed"

- *["Communication: From Provider To Patient": "Asthma action plan"]*

# Numerator - CAC-3 (CMS26v6)

## Numerator:

( "Encounter with Discharge Disposition to Home or Police Custody" DischargeToHomeEncounter with "Asthma Management Plan Completed" ActionPlan such that ActionPlan.authorDatetime during DischargeToHomeEncounter.relevantPeriod )

Union

( "Encounter with Discharge Disposition to Home or Police Custody" DischargeToHomeEncounter with "No Asthma Management Plan Due To Patient Refusal" NoActionPlan such that NoActionPlan.authorDatetime during DischargeToHomeEncounter.relevantPeriod )

## "Asthma Management Plan Completed"

- ["Communication: From Provider To Patient": *"Asthma action plan"*]

## Terminology

- code "Asthma action plan" ("LOINC version 2.63 Code (69981-9)")

# Numerator - CAC-3 (CMS26v6)

## Numerator:

( "Encounter with Discharge Disposition to Home or Police Custody" DischargeToHomeEncounter with "Asthma Management Plan Completed" ActionPlan such that ActionPlan.authorDatetime during DischargeToHomeEncounter.relevantPeriod )

Union

( "Encounter with Discharge Disposition to Home or Police Custody" DischargeToHomeEncounter with "No Asthma Management Plan Due To Patient Refusal" NoActionPlan such that NoActionPlan.authorDatetime during DischargeToHomeEncounter.relevantPeriod )

## Numerator

( "Encounter with Discharge Disposition to Home or Police Custody" DischargeToHomeEncounter with "Asthma Management Plan Completed" ActionPlan

such that *ActionPlan.authorDatetime during DischargeToHomeEncounter.relevantPeriod* )

union

( "Encounter with Discharge Disposition to Home or Police Custody" DischargeToHomeEncounter with "No Asthma Management Plan Due To Patient Refusal" NoActionPlan

such that NoActionPlan.authorDatetime during DischargeToHomeEncounter.relevantPeriod )

## "Asthma Management Plan Completed"

- ["Communication: From Provider To Patient": "Asthma action plan"]

# Numerator - CAC-3 (CMS26v6)

## Numerator:

( "Encounter with Discharge Disposition to Home or Police Custody" DischargeToHomeEncounter with "Asthma Management Plan Completed" ActionPlan such that ActionPlan.authorDatetime during DischargeToHomeEncounter.relevantPeriod )

Union

( "Encounter with Discharge Disposition to Home or Police Custody" DischargeToHomeEncounter with "No Asthma Management Plan Due To Patient Refusal" NoActionPlan such that NoActionPlan.authorDatetime during DischargeToHomeEncounter.relevantPeriod )

## Numerator

( "Encounter with Discharge Disposition to Home or Police Custody" DischargeToHomeEncounter with "Asthma Management Plan Completed" ActionPlan such that ActionPlan.authorDatetime during DischargeToHomeEncounter.relevantPeriod )

union

( "Encounter with Discharge Disposition to Home or Police Custody" *DischargeToHomeEncounter* with *"No Asthma Management Plan Due To Patient Refusal" NoActionPlan* such that *NoActionPlan*.authorDatetime during *DischargeToHomeEncounter*.relevantPeriod )

## "Asthma Management Plan Completed"

- ["Communication: From Provider To Patient": "Asthma action plan"]

# Numerator - CAC-3 (CMS26v6)

## Numerator:

( "Encounter with Discharge Disposition to Home or Police Custody" DischargeToHomeEncounter with "Asthma Management Plan Completed" ActionPlan such that ActionPlan.authorDatetime during DischargeToHomeEncounter.relevantPeriod )

Union

( "Encounter with Discharge Disposition to Home or Police Custody" DischargeToHomeEncounter with "No Asthma Management Plan Due To Patient Refusal" NoActionPlan such that NoActionPlan.authorDatetime during DischargeToHomeEncounter.relevantPeriod )

## Numerator

( "Encounter with Discharge Disposition to Home or Police Custody" DischargeToHomeEncounter with "Asthma Management Plan Completed" ActionPlan such that ActionPlan.authorDatetime during DischargeToHomeEncounter.relevantPeriod )

union

( "Encounter with Discharge Disposition to Home or Police Custody" DischargeToHomeEncounter with "No Asthma Management Plan Due To Patient Refusal" NoActionPlan such that NoActionPlan.authorDatetime during DischargeToHomeEncounter.relevantPeriod )

### "Asthma Management Plan Completed"

- ["Communication: From Provider To Patient": "Asthma action plan"]

### "No Asthma Management Plan Due to Patient Refusal"

- ["Communication: From Provider To Patient, *Not Done*": "Asthma action plan"] *NoActionPlan* where *NoActionPlan.negationRationale* in "Patient Refusal"

# Numerator - CAC-3 (CMS26v6)

## Numerator:

( "Encounter with Discharge Disposition to Home or Police Custody" DischargeToHomeEncounter with "Asthma Management Plan Completed" ActionPlan such that ActionPlan.authorDatetime during DischargeToHomeEncounter.relevantPeriod )

Union

( "Encounter with Discharge Disposition to Home or Police Custody" DischargeToHomeEncounter with "No Asthma Management Plan Due To Patient Refusal" NoActionPlan such that NoActionPlan.authorDatetime during DischargeToHomeEncounter.relevantPeriod )

## Numerator

( "Encounter with Discharge Disposition to Home or Police Custody" DischargeToHomeEncounter with "Asthma Management Plan Completed" ActionPlan such that ActionPlan.authorDatetime during DischargeToHomeEncounter.relevantPeriod )

union

( "Encounter with Discharge Disposition to Home or Police Custody" DischargeToHomeEncounter with "No Asthma Management Plan Due To Patient Refusal" NoActionPlan such that *NoActionPlan.authorDatetime during DischargeToHomeEncounter.relevantPeriod* )

### "Asthma Management Plan Completed"

- ["Communication: From Provider To Patient": "Asthma action plan"]

### "No Asthma Management Plan Due to Patient Refusal"

- ["Communication: From Provider To Patient, Not Done": "Asthma action plan"] NoActionPlan where NoActionPlan.negotiationRationale in "Patient Refusal"

Lynn Perrine, MSN, RN

Xidong Deng, PhD

# EHDI 1a- Hearing Screening Prior to Hospital Discharge (CMS31v7)

March 5, 2019

# Introduction

## Hearing Screening Prior to Hospital Discharge



- The Joint Committee on Infant Hearing (JCIH) endorses early detection of and intervention for infants with hearing loss.
- The goal of early hearing detection and intervention (EHDI) is to maximize linguistic competence and literacy development for children who are deaf or hard of hearing.
- The JCIH supports the concept of regular measurements of performance and recommends routine monitoring of these measures for interprogram comparison and continuous quality improvement. Performance benchmarks represent a consensus of expert opinion in the field of newborn hearing screening and intervention. The benchmarks are the minimal requirements that should be attained by high quality programs. Frequent measures of quality permit prompt recognition and correction of any unstable component of the EHDI process.

Source: Joint Committee on Infant Hearing, Year 2007 Position Statement: Principles and Guidelines for Early Hearing Detection and Intervention Programs



# Initial Population

Live birth encounters at a hospital or birthing facility where the newborn was discharged with hospital stays  $\leq 120$  days that ends during the measurement period

## Initial Population:

“Encounter with Live Birth Diagnosis”  
union “Diagnosis Live Birth Newborn Born in Hospital”

## Encounter with Live Birth Diagnosis:

- “Inpatient Encounters” InpatientEncounter  
where exists InpatientEncounter.diagnoses EncounterDiagnosis  
where EncounterDiagnosis in “Live Birth Newborn Born in Hospital”

## Inpatient Encounters:

- [“Encounter, Performed”: “Encounter Inpatient”] Encounter where  
Global. “LengthInDays”(Encounter.relevantPeriod) $\leq 120$   
and Encounter.relevantPeriod ends during “Measurement Period”

## Live Birth Newborn Born in Hospital:

- valueset “Live Birth Newborn Born in Hospital” using  
“2.16.840.1.113762.1.4.1046.6”

# Initial Population

Live birth encounters at a hospital or birthing facility where the newborn was discharged with hospital stays  $\leq 120$  days that ends during the measurement period

## Initial Population:

"Encounter with Live Birth Diagnosis"  
union "Diagnosis Live Birth Newborn Born in Hospital"

## Inpatient Encounters:

- [*"Encounter, Performed": "Encounter Inpatient"*] Encounter where  
Global. "LengthInDays"(Encounter.*relevantPeriod*)  $\leq 120$   
and Encounter.*relevantPeriod ends during "Measurement Period"*

# Initial Population

Live birth encounters at a hospital or birthing facility where the newborn was discharged with hospital stays  $\leq 120$  days that ends during the measurement period

## Initial Population:

"Encounter with Live Birth Diagnosis"  
union "Diagnosis Live Birth Newborn Born in Hospital"

## Inpatient Encounters:

- ["Encounter, Performed": "Encounter Inpatient"] Encounter where Global. "*LengthInDays*" (Encounter.relevantPeriod)  $\leq 120$  and Encounter.relevantPeriod ends during "Measurement Period"

### Global. "*LengthInDays*":

- (Value Interval<DateTime>)

# Initial Population

Live birth encounters at a hospital or birthing facility where the newborn was discharged with hospital stays  $\leq 120$  days that ends during the measurement period

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union "Diagnosis Live Birth Newborn Born in Hospital"

## Encounter with Live Birth Diagnosis:

- "*Inpatient Encounters*" *InpatientEncounter*  
where exists InpatientEncounter.diagnoses EncounterDiagnosis  
where EncounterDiagnosis in "Live Birth Newborn Born in Hospital"

## Inpatient Encounters:

- ["Encounter, Performed": "Encounter Inpatient"] Encounter where  
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where exists *InpatientEncounter.diagnoses EncounterDiagnosis*  
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- ["Encounter, Performed": "Encounter Inpatient"] Encounter where  
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## Initial Population:

"Encounter with Live Birth Diagnosis"  
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## Encounter with Live Birth Diagnosis:

- "Inpatient Encounters" InpatientEncounter  
where exists InpatientEncounter.diagnoses *EncounterDiagnosis*  
where *EncounterDiagnosis in "Live Birth Newborn Born in Hospital"*

## Inpatient Encounters:

- ["Encounter, Performed": "Encounter Inpatient"] Encounter where  
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# Initial Population

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where exists InpatientEncounter.diagnoses EncounterDiagnosis  
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## Inpatient Encounters:

- ["Encounter, Performed": "Encounter Inpatient"] Encounter where  
Global. "LengthInDays"(Encounter.relevantPeriod)  $\leq 120$   
and Encounter.relevantPeriod ends during "Measurement Period"

## Live Birth Newborn Born in Hospital:

- valueset "Live Birth Newborn Born in Hospital" using  
"2.16.840.1.113762.1.4.1046.6"

# Denominator

Denominator is equal to the Initial Population

## Denominator:

"Initial Population"

## Initial Population:

- *"Encounter with Live Birth Diagnosis"*  
union *"Diagnosis Live Birth Newborn Born in Hospital"*



# Denominator

Denominator is equal to the Initial Population

## Denominator:

"Initial Population"

## Initial Population:

- *"Encounter with Live Birth Diagnosis"*  
union *"Diagnosis Live Birth Newborn Born in Hospital"*

### Encounter with Live Birth Diagnosis:

- "Inpatient Encounters" InpatientEncounter where exists InpatientEncounter.diagnoses EncounterDiagnosis where EncounterDiagnosis in "Live Birth Newborn Born in Hospital"

### Inpatient Encounters:

- ["Encounter, Performed": "Encounter Inpatient"] Encounter Global."LengthInDays"  
(Encounter.relevantPeriod)<=120 and Encounter.relevantPeriod ends during "Measurement Period"

### Live Birth Newborn Born in Hospital:

- valueset "Live Birth Newborn Born in Hospital" using "2.16.840.1.113762.1.4.1046.6"

# Denominator Exclusions

A live birth encounter where the newborn expires prior to discharge and has not received a complete hearing screening



## Denominator Exclusions:

“Initial Population” LiveBirthEncounter  
where LiveBirthEncounter.dischargeDisposition ~ “Patient deceased during stay (discharge  
status = dead) (finding)”  
and not exists “Has Complete Hearing Screening”

# Denominator Exclusions

A live birth encounter where the newborn expires prior to discharge and has not received a complete hearing screening

## Denominator Exclusions:

“Initial Population” LiveBirthEncounter

where LiveBirthEncounter.dischargeDisposition ~ “Patient deceased during stay (discharge status = dead) (finding)”

and not exists “Has Complete Hearing Screening”

## “Initial Population” LiveBirthEncounter

### Encounter with Live Birth Diagnosis:

- “Inpatient Encounters” InpatientEncounter where exists InpatientEncounter.diagnoses EncounterDiagnosis where EncounterDiagnosis in “Live Birth Newborn Born in Hospital”

### Inpatient Encounters:

- [“Encounter, Performed”: “Encounter Inpatient”] Encounter Global.“LengthInDays” (Encounter.relevantPeriod) <= 120 and Encounter.relevantPeriod ends during “Measurement Period”

### Live Birth Newborn Born in Hospital:

- valueset “Live Birth Newborn Born in Hospital” using “2.16.840.1.113762.1.4.1046.6”

# Denominator Exclusions

A live birth encounter where the newborn expires prior to discharge and has not received a complete hearing screening

## Denominator Exclusions:

"Initial Population" LiveBirthEncounter  
where LiveBirthEncounter.dischargeDisposition ~ "Patient deceased during stay (discharge status = dead) (finding)"  
and not exists "Has Complete Hearing Screening"

"Initial Population" LiveBirthEncounter

**LiveBirthEncounter.dischargeDisposition ~ "Patient deceased during stay (discharge status = dead) (finding)"**

- "*code* "Patient deceased during stay (discharge status = dead) (finding)" using "*SNOMEDCT version 2017-09 Code (371828006)* "

# Denominator Exclusions

A live birth encounter where the newborn expires prior to discharge and has not received a complete hearing screening

## Denominator Exclusions:

"Initial Population" LiveBirthEncounter  
where LiveBirthEncounter.dischargeDisposition ~ "Patient deceased during stay (discharge status = dead) (finding)"  
and not exists "Has Complete Hearing Screening"

"Initial Population" LiveBirthEncounter

LiveBirthEncounter.dischargeDisposition ~ "Patient deceased during stay (discharge status = dead) (finding)"

- "code "Patient deceased during stay (discharge status = dead) (finding)" using "SNOMEDCT version 2017-09 Code (371828006)"

"Has Complete Hearing Screening"

- "Inpatient Encounters" InpatientEncounter  
where exists "Left Hearing Screen Performed" LeftHearingScreen  
where LeftHearingScreen.authorDatetime during InpatientEncounter.relevantPeriod  
and exists "Right Hearing Screen Performed" RightHearingScreen  
where RightHearingScreen.authorDatetime during InpatientEncounter.relevantPeriod

# Denominator Exclusions

A live birth encounter where the newborn expires prior to discharge and has not received a complete hearing screening

## Denominator Exclusions:

“Initial Population” LiveBirthEncounter  
where LiveBirthEncounter.dischargeDisposition ~ “Patient deceased during stay (discharge status = dead) (finding)”  
and not exists “Has Complete Hearing Screening”

## “Has Complete Hearing Screening”

- “Inpatient Encounters” InpatientEncounter  
where exists “Left Hearing Screen Performed” LeftHearingScreen  
where LeftHearingScreen.authorDatetime during InpatientEncounter.relevantPeriod  
and exists “Right Hearing Screen Performed” RightHearingScreen  
where RightHearingScreen.authorDatetime during InpatientEncounter.relevantPeriod

## Inpatient Encounters:

- [“Encounter, Performed”: “Encounter Inpatient”] Encounter.Global.“LengthInDays” (Encounter.relevantPeriod) <= 120 and Encounter.relevantPeriod ends during “Measurement Period”

# Denominator Exclusions

A live birth encounter where the newborn expires prior to discharge and has not received a complete hearing screening

## Denominator Exclusions:

“Initial Population” LiveBirthEncounter  
where LiveBirthEncounter.dischargeDisposition ~ “Patient deceased during stay (discharge status = dead) (finding)”  
and not exists “Has Complete Hearing Screening”

## “Left Hearing Screen Performed”

- [“Diagnostic Study, Performed”: “Newborn Hearing Screen Left” LeftScreen  
where LeftScreen.result in “Pass or Refer”

### Terminology

- valueset “Pass Or Refer” using “2.16.840.1.114222.4.1.214079.1.1.6”

## “Has Complete Hearing Screening”

- “Inpatient Encounters” InpatientEncounter  
where exists “*Left Hearing Screen Performed*” LeftHearingScreen  
*where LeftHearingScreen.authorDatetime during InpatientEncounter.relevantPeriod*  
and exists “Right Hearing Screen Performed” RightHearingScreen  
where RightHearingScreen.authorDatetime during InpatientEncounter.relevantPeriod

# Denominator Exclusions

A live birth encounter where the newborn expires prior to discharge and has not received a complete hearing screening

## Denominator Exclusions:

“Initial Population” LiveBirthEncounter  
where LiveBirthEncounter.dischargeDisposition ~ “Patient deceased during stay (discharge status = dead) (finding)”  
and not exists “Has Complete Hearing Screening”

### “Right Hearing Screen Performed”

- [“Diagnostic Study, Performed”: “Newborn Hearing Screen Right” RightScreen  
where RightScreen.result in “Pass or Refer”

### “Left Hearing Screen Performed”

- [“Diagnostic Study, Performed”: “Newborn Hearing Screen Left” LeftScreen  
where LeftScreen.result in “Pass or Refer”

### Terminology

- valueset “Pass Or Refer” using “2.16.840.1.114222.4.1.214079.1.1.6”

### “Has Complete Hearing Screening”

- “Inpatient Encounters” InpatientEncounter  
where exists “Left Hearing Screen Performed” LeftHearingScreen  
where LeftHearingScreen.authorDatetime during InpatientEncounter.relevantPeriod  
and exists “*Right Hearing Screen Performed*” RightHearingScreen  
*where RightHearingScreen.authorDatetime during  
InpatientEncounter.relevantPeriod*



# Numerator

A live birth encounter where a complete newborn hearing screening is performed prior to discharge or the newborn is not screened due to medical reasons

## Numerator:

"Has Complete Hearing Screening"  
union "Hearing Screen Not Done Due to Medical Reasons"

### Has Complete Hearing Screening:

- "Inpatient Encounters" InpatientEncounter where exists "Left Hearing Screen Performed" LeftHearingScreen where LeftHearingScreen.authorDatetime during InpatientEncounter.relevantPeriod and exists "Right Hearing Screen Performed" RightHearingScreen where RightHearingScreen.authorDatetime during InpatientEncounter.relevantPeriod

### Hearing Screen Not Done Due to Medical Reasons:

- "Initial Population" LiveBirthEncounter with ( ["Diagnostic Study, Not Performed": "Newborn Hearing Screen Left"] union ["Diagnostic Study, Not Performed": "Newborn Hearing Screen Right"] ) ScreenNotDone such that ScreenNotDone.negotiationRationale in "Medical Reasons" and ScreenNotDone.authorDatetime during LiveBirthEncounter.relevantPeriod

# Numerator

A live birth encounter where a complete newborn hearing screening is performed prior to discharge or the newborn is not screened due to medical reasons

## Numerator:

“Has Complete Hearing Screening”  
union “Hearing Screen Not Done Due to Medical Reasons”

### “Has Complete Hearing Screening”

- “Inpatient Encounters” InpatientEncounter where exists “Left Hearing Screen Performed” LeftHearingScreen where LeftHearingScreen.authorDatetime during InpatientEncounter.relevantPeriod and exists “Right Hearing Screen Performed” RightHearingScreen where RightHearingScreen.authorDatetime during InpatientEncounter.relevantPeriod

### “Inpatient Encounters”:

- [“Encounter, Performed”: “Encounter Inpatient”] Encounter Global.“LengthInDays” (Encounter.relevantPeriod)<=120 and Encounter.relevantPeriod ends during “Measurement Period”

### “Left Hearing Screen Performed”:

- [“Diagnostic Study, Performed”: “Newborn Hearing Screen Left” LeftScreen where LeftScreen.result in “Pass or Refer”

### “Right Hearing Screen Performed”:

- [“Diagnostic Study, Performed”: “Newborn Hearing Screen Right” RightScreen where RightScreen.result in “Pass or Refer”

# Numerator

A live birth encounter where a complete newborn hearing screening is performed prior to discharge or the newborn is not screened due to medical reasons

## Numerator:

“Has Complete Hearing Screening”  
union “Hearing Screen Not Done Due to Medical Reasons”

## Hearing Screen Not Done Due to Medical Reasons:

- “Initial Population” LiveBirthEncounter with ( ["Diagnostic Study, Not Performed": "Newborn Hearing Screen Left"] union ["Diagnostic Study, Not Performed": "Newborn Hearing Screen Right"] ) ScreenNotDone such that ScreenNotDone.negotiationRationale in "Medical Reasons" and ScreenNotDone.authorDatetime during LiveBirthEncounter.relevantPeriod

### “Initial Population” LiveBirthEncounter

#### Encounter with Live Birth Diagnosis:

- “Inpatient Encounters” InpatientEncounter where exists InpatientEncounter.diagnoses EncounterDiagnosis where EncounterDiagnosis in “Live Birth Newborn Born in Hospital”

#### Inpatient Encounters:

- ["Encounter, Performed": "Encounter Inpatient"] Encounter Global.“LengthInDays” (Encounter.relevantPeriod) <= 120 and Encounter.relevantPeriod ends during "Measurement Period"

#### Live Birth Newborn Born in Hospital:

- valueset "Live Birth Newborn Born in Hospital" using "2.16.840.1.113762.1.4.1046.6"

# Numerator

A live birth encounter where a complete newborn hearing screening is performed prior to discharge or the newborn is not screened due to medical reasons

## Numerator:

"Has Complete Hearing Screening"  
union "Hearing Screen Not Done Due to Medical Reasons"

## Hearing Screen Not Done Due to Medical Reasons:

- "Initial Population" LiveBirthEncounter with ( ["Diagnostic Study, Not Performed": "*Newborn Hearing Screen Left*"] union ["Diagnostic Study, Not Performed": "*Newborn Hearing Screen Right*"] ) ScreenNotDone such that ScreenNotDone.negotiationRationale in "*Medical Reasons*" and ScreenNotDone.authorDatetime during LiveBirthEncounter.relevantPeriod

## Terminology

- valueset "Newborn Hearing Screen Left" using "2.16.840.1.114222.4.1.214079.1.1.3"
- valueset "Newborn Hearing Screen Right" using "2.16.840.1.114222.4.1.214079.1.1.4"
- valueset "Medical Reasons" using "2.16.840.1.114222.4.1.214079.1.1.7"

# Numerator Exclusions

None



# Denominator Exceptions

None

# Resources



## 1. eCQI Resource Center: <https://ecqi.healthit.gov/cql>

- One stop shop for all information related to eCOM's
- Find EH program information via: <https://ecqi.healthit.gov/eligible-hospital/critical-access-hospital-ecqms> such as:
  - Measure specifications
  - Technical Release Notes- which states all changes made to each measure during annual updates and during the addendum (code updates)
  - eCOM Measure Flows- to help understand the measure algorithms
- Links to many Educational Resources such as:
  - COL Standards: <https://ecqi.healthit.gov/cql-clinical-quality-language>
  - QDM (Quality Data Model): <https://ecqi.healthit.gov/qdm-quality-data-model>
    - QDMv5.3 Annotated is used for the 2019 reporting
  - eCOM Implementation Check List: <https://ecqi.healthit.gov/ecqm-implementation-checklist>
  - Previous recordings & slide deck presentations: <https://ecqi.healthit.gov/cql/cql-educational-resources>
- Events page to see and register for upcoming educational events <https://ecqi.healthit.gov/ecqi/ecqi-events>

## 2. Value Set Authority Center (VSAC): <https://vsac.nlm.nih.gov/>

- To look up the codes listed in the value sets of a measure
- Requires license but free of charge
- Quick link to download valuesets/Direct reference codes from the VSAC: <https://vsac.nlm.nih.gov/download/ecqm?rel=20180917>

# Resources



## 3. Technical CQL Resources:

- Getting Started with CQL: Technical Implementation for Vendors: <https://health.mitre.org/blog/getting-started-with-cql-technical-implementation-for-vendors/>
- Formatting and Usage: <https://github.com/esacinc/CQL-Formatting-and-Usage-Wiki/wiki>
- CQL GitHub Tools Repository: [https://github.com/cqframework/clinical\\_quality\\_language](https://github.com/cqframework/clinical_quality_language)
- CQL Specification - CQL Release 1, Standard for Trial Use (STU) 2
  - [http://www.hl7.org/implement/standards/product\\_brief.cfm?product\\_id=400](http://www.hl7.org/implement/standards/product_brief.cfm?product_id=400)
  - <http://cql.hl7.org/STU2/index.html>
- CQL-Based HQMF IG – Release 1, STU 2.1
  - [http://www.hl7.org/implement/standards/product\\_brief.cfm?product\\_id=405](http://www.hl7.org/implement/standards/product_brief.cfm?product_id=405)

## 4. To submit an issue ticket for a CQL specific question, please visit the ONC JIRA site

- <https://oncprojecttracking.healthit.gov/support/projects/CQLIT>

## 5. To submit an issue ticket for a measure specific question, please visit the ONC JIRA site

- <https://oncprojecttracking.healthit.gov/support/projects/CQM/issues>

## 6. Pioneers in Quality Expert to Expert Replays and Slides:

[https://www.jointcommission.org/piq\\_expert\\_to\\_expert\\_series/](https://www.jointcommission.org/piq_expert_to_expert_series/)

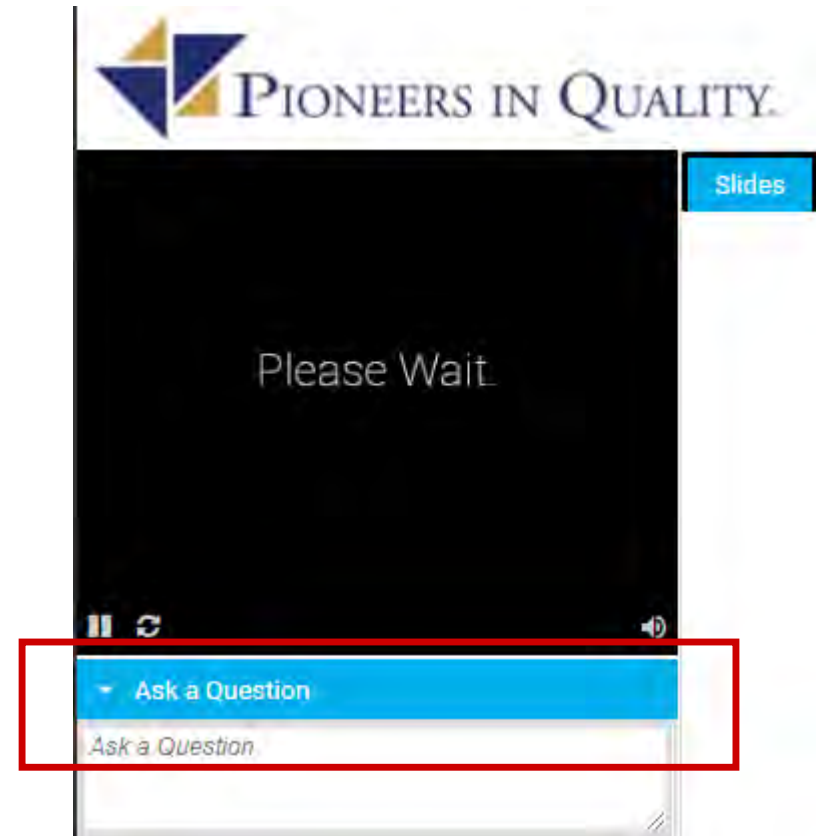
## 7. Pioneers in Quality Portal: [https://www.jointcommission.org/topics/pioneers\\_in\\_quality.aspx](https://www.jointcommission.org/topics/pioneers_in_quality.aspx)

# Pioneers in Quality™

## Expert to Expert Series: CAC-3 & EHDI-1a



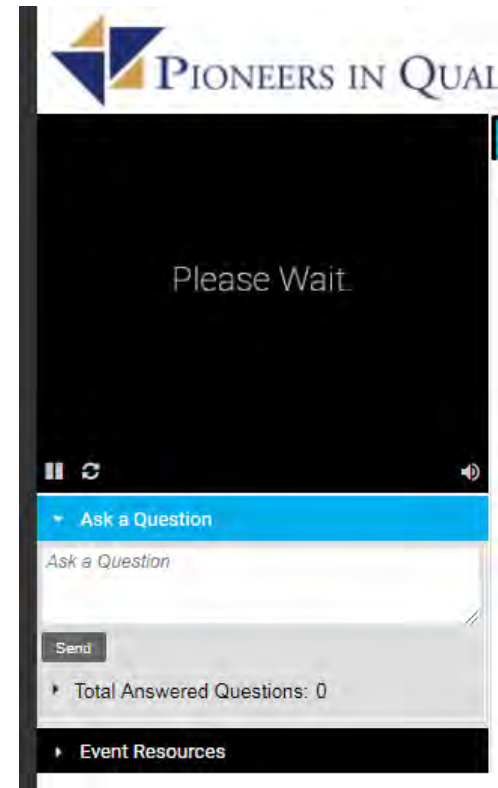
- Please ask questions through the Questions pane
- Click the arrow to expand and close the pane.
- Include slide number with question if applicable





## REMINDER - Slides are available for download now!

- To access the slides, see the Event Resources Pane
- Click the triangle to open the list of PDFs
- Select the slides for today's session. A new window will open permitting you to save or print the PDFs



# Pioneers in Quality™

## Expert to Expert Series: CAC-3 & EDHI-1a



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### Pioneers in Quality: Expert to Expert Series

November 30, 2018

The Joint Commission and the Centers for Medicare & Medicaid Services are joining you on their journey towards electronic clinical quality measure (eCQM) a Clinical Quality Language (CQL) logic expression language for the 2019 eCQM repository "deep dive" into the new Clinical Quality Language (CQL) expression language.

The Joint Commission's Pioneers in Quality: Expert to Expert series is connecting you with eCQM developers in an "office hours" format. Each session features a presentation on the new CQL expression language. Session 1: eCQM measure logic, followed by a discussion of common questions and issues. Session 2: eCQM measure logic, followed by a discussion of common questions and issues. Session 3: eCQM measure logic, followed by a discussion of common questions and issues.

The Expert to Expert Series will feature the following sessions. Register below links to register for each session.

Session Titles	Date	Registration Links	Slides	Transcripts	Recordings	Q&As
eCQM Clinical Quality Language (CQL) Basics Webinar for Hospitals	29-Nov-18	NA – Session has already occurred	<a href="#">11/29 PDF slide deck</a>	<a href="#">11/29 PDF transcript</a>	<a href="#">11/29 recording</a>	<a href="#">11/29 PDF Q&amp;A document</a>
Expert to Expert Session 1: STK-2, -3, & -6	11-Dec-18	NA – Session has already occurred	<a href="#">12/11 PDF slide deck</a>	<a href="#">12/11 PDF transcript</a>	<a href="#">12/11 recording</a>	<a href="#">12/11 PDF Q&amp;A document</a>
Expert to Expert Session 2: STK-5 and AMI-8a	29-Jan-18	NA – Session has already occurred	<a href="#">01/29 PDF slide deck</a>	To be posted following session	To be posted following session	To be posted following session
Expert to Expert Session 3: ED-1 and -2	12-Feb-19	NA – Session has already occurred	<a href="#">02/12 PDF slide deck</a>	To be posted following session	To be posted following session	To be posted following session

Visit [https://www.jointcommission.org/piq\\_expert\\_to\\_expert\\_series/](https://www.jointcommission.org/piq_expert_to_expert_series/) to register for future sessions and access slides, webinar recordings, and Q&A documents when available.

# Pioneers in Quality™

## Expert to Expert Series: CAC-3 & EDHI-1a



### 2019 eCQM Proven Practices Submission Period Open

February 25, 2019



On Feb 25, Joint Commission launched the 2019 Proven Practices submission tool.

Visit

[https://www.jointcommission.org/pioneers\\_in\\_quality\\_proven\\_practices\\_collection/](https://www.jointcommission.org/pioneers_in_quality_proven_practices_collection/)

for additional information about the Proven Practices Program.

The Submission Deadline is April 5.

The Joint Commission supports organizations adopting electronic clinical quality measures (eCQMs) by enabling the sharing of eCQM and health-IT driven quality improvement practices. The Joint Commission is seeking your pioneering "eCQM Proven Practices" success stories. This program recognizes hospitals and systems that effectively leverage eCQMs and health IT to drive quality improvement — and provides a platform for organizations to share their work as learning for other accredited organizations.

[The 2019 "eCQM Proven Practices" submission tool is now open and you are invited to submit your application.](#)

[View the full PDF application before completing online. PLEASE NOTE SUBMISSIONS ARE ACCEPTED VIA THE ONLINE APPLICATION ONLY.](#)

Topics of interest include, but are not limited to:

- Demonstrated success in improving clinical performance or outcomes utilizing eCQMs
- Robust and integrated clinical decision support into EHR workflows and quality measurement
- Optimizing clinical workflow and eCQM collection to support quality care
- Improving or ensuring eCQM data quality and accuracy
- Innovative use of staffing (e.g. quality, informatics, clinical roles) or governance to support eCQM implementation
- Educating clinicians on quality improvement and electronic data collection

*\* Recognition is limited to Joint Commission and/or Centers for Medicare & Medicaid Services (CMS) eCQMs.*

**The submission period closes April 5, 2019 at 11:59 pm Central Daylight Time.**

## CE Session Evaluation Survey and Certificate

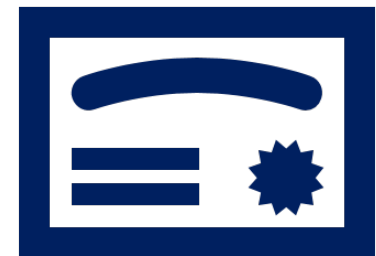


You will receive an automated email that will direct you how to access the evaluation survey.

We use your feedback to inform future content and assess the quality of our sessions.

**The evaluation closes in 2 weeks.**

After the evaluation period closes, a printable certificate will be emailed to all participants that complete the survey and meet all CE requirements.



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Expert to Expert Series: : CAC-3 & EHDI-1a



**Thank you for attending this session.**

