

Update: The Connecticut Promoting Interoperability Program is now accepting Electronic Clinical Quality Measures (eCQM) for Program Year 2018

All red text is new for 9/18/2018

Note: Participation in the eCQM portion of the program is optional. Providers may still attest to CQMs as they have in previous years.

Clinical quality measures, or CQMs, are tools that help measure and track the quality of health care services provided by eligible professionals (EPs), eligible hospitals (EHs), and critical access hospitals (CAHs) within our health care system. These measures use data associated with health care providers' ability to deliver high-quality care or relate to long-term goals for quality health care. To participate in the **Connecticut Promoting Interoperability (PI) Program (formerly known as the Medicaid Electronic Health Record (EHR) Incentive Program)** and receive an incentive payment, health care providers are required to submit CQM data from certified EHR technology (CEHRT).

The Connecticut **PI** Program will now offer the option for EPs to submit CQM data electronically.

This requires the following:

- Use of QRDA Category I or Category III for CQM electronic submissions
- EHR technology certified to the 2014 or 2015 Edition
 - Required to have the EHR technology certified to all 16 available CQMs
 - Would not require recertification each time updated to the most recent version of CQMs and continues to meet 2015 Edition certification criteria

Technical requirements:

- Use of eCQM specifications published in the 2017 eCQM annual update for CY 2018 reporting and any applicable addenda; available on the eCQI Resource Center Web site at <https://ecqi.healthit.gov/eh>
- 2018 CMS Implementation Guide for QRDA I for Hospital Quality Reporting; available at <https://ecqi.healthit.gov/qrda>

The table below outlines the CQM reporting requirements for Medicaid health care providers in 2018.

Reporting Method		EPs
# of CQMs	Manual Attestation	6
	Electronically	6
Reporting Period	Manual Attestation	Full Year
	Electronically	Full Year

What you need to do if you plan to submit eCQMS for Program Year 2018

Step 1	Inform the CT Department of Social Services (DSS), the PI program <u>at least 30-days before the end of the reporting year (December 31, 2018)</u> that you want to submit eCQMs by sending an email to Dr. Minakshi Tikoo at Minakshi.Tikoo@ct.gov . You will need to request credentials for the secure FTP site used to send and receive files for this purpose.
Step 2	Review the instructions for submitting QRDA files (See table below)
Step 3	Work with CT DSS staff to test the process for submitting eCQM files electronically. This can take anywhere from a week to a month depending on your staff availability. Once the test is successfully completed, you are ready to submit eCQMs. Please contact Dr. Tikoo to get started at Minakshi.tikoo@ct.gov .
Step 4	<p>Submit eCQM data (See table below)</p> <p>Within two days you will receive a processing results report on the secure FTP site acknowledging the data that was submitted, identification of any errors, and a summary of the processing:</p> <ul style="list-style-type: none"> Processing Date List of the files processed Number of files processed successfully Number of files with errors For each file that succeeded, a list of the eCQMs for that provider For each file that failed, a detailed explanation of the error(s) <p>If there are no errors, certificate files for each provider will be generated and put on your secure FTP site, acknowledging that they have successfully submitted eCQMs for the 2018 program year. The certificate will include a list of the 6 eCQMs submitted with the associated numerator and denominator for each participating eligible professional. See below for examples of the processing results report and certificates.</p> <p>If there are errors, CT-DSS will work with you to resolve them. If the errors cannot be resolved, you may have to manually attest to MAPIR.</p>
Step 5	Upload the certificate acknowledging successful submission of eCQMs when ready to attest in MAPIR.

Instructions for Submitting Electronic Clinical Quality Measure Data to CT DSS

If you are sending QRDA Category 1 files	If you are sending QRDA Category 3 files
1. Extract the following data from your EHR:	1. Extract the following data from your EHR:
a. Provider info in OPML documents	a. Provider info in QRDA Cat 3 documents

b. Patient info, in QRDA Cat 1 documents	
2. Send the files to CT DSS:	2. Send the files to CT DSS:
a. Zip the provider docs into a single ZIP file	a. Zip the provider QRDA Cat 3 docs into a single ZIP file
File naming convention: Providers_<YYYYMMDD>.opml.zip e.g. "c:\temp\Providers_20160501.opml.zip"	File naming convention: Providers_<YYYYMMDD>.opml.zip e.g. "c:\temp\Providers_20160501.opml.zip"
b. Zip the patient docs into a single ZIP file	
File naming convention: Patients_<YYYYMMDD>.qrda.zip e.g. "c:\temp\Patients_20160501.qrda.zip"	
3. Upload the ZIP files to the secure FTP site	3. Upload the ZIP files to the secure FTP site
a. Use the URL and credentials that have been provided to you	a. Use the URL and credentials that have been provided to you

FAQ:

Does the State's eCQM Request for Applications (RFA) released on August 17, 2018 by the Office of Health Strategy tie into the PCMH+, Project Notify or PI Program?

No. The State's eCQM RFA is not affiliated with these programs. EPs currently participating in the PI Program can report eCQMs for Program Year 2018. This reporting is separate from the State's eCQM RFA. EPs interested in submitting eCQMs for the PI Program can review and follow the instructions outlined above.

For More Information on eCQMs

Email: Minakshi.Tikoo@ct.gov

Visit: [CMS 2018](#)