ADDITIONAL INFORMATION REGARDING ELECTRONIC CLINICAL QUALITY MEASURES (ECQMS) FOR CMS QUALITY REPORTING PROGRAMS FOR ELIGIBLE HOSPITALS (EH) AND CRITICAL ACCESS HOSPITALS (CAH)

The table below titled "Electronic Clinical Quality Measures for Eligible Hospitals and Critical Access Hospitals" includes up-to-date information for Electronic Clinical Quality Measures (eCQMs) that will be used to electronically report 2024 clinical quality measure data for the Centers for Medicare & Medicaid Services (CMS) quality reporting programs. Measures are not eligible for 2024 reporting unless and until they are proposed and finalized through CMS notice-and-comment rulemaking for each applicable program. Subsequent updates will be provided in a new version of this table with a summary of the updates located in a version history table at the end of the document.

Please note, because measure stewards updated the titles and descriptions for the eCQMs in this table, they may not match the information provided on NQF's website. Measures that do not have an NQF number are measures that are not currently endorsed.

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ELECTRONIC CLINICAL QUALITY MEASURES FOR ELIGIBLE HOSPITALS AND CRITICAL ACCESS HOSPITALS

CMS eCQM ID	NQF #	Measure Title	Measure Description	Numerator Statement	Denominator Statement	Measure Set Identifier
CMS71v13	Not Applicable	Anticoagulation Therapy for Atrial Fibrillation/Flutter	Ischemic stroke patients with atrial fibrillation/flutter who are prescribed or continuing to take anticoagulation therapy at hospital discharge	Inpatient hospitalizations for patients prescribed or continuing to take anticoagulation therapy at hospital discharge	Inpatient hospitalizations for patients with a principal diagnosis of ischemic stroke, and a history of atrial ablation, or current or history of atrial fibrillation/flutter	STK-3
CMS72v12	Not Applicable	Antithrombotic Therapy By End of Hospital Day 2	Ischemic stroke patients administered antithrombotic therapy by the end of hospital day 2	Inpatient hospitalization for patients who had antithrombotic therapy administered the day of or day after hospital arrival	Inpatient hospitalizations for patients with a principal diagnosis of ischemic stroke	STK-5
CMS104v12	Not Applicable	Discharged on Antithrombotic Therapy	Ischemic stroke patients prescribed or continuing to take antithrombotic therapy at hospital discharge	Inpatient hospitalizations for patients prescribed or continuing to take antithrombotic therapy at hospital discharge	Inpatient hospitalizations for patients with a principal diagnosis of ischemic stroke	STK-2
CMS108v12	Not Applicable	Venous Thromboembolism Prophylaxis	This measure assesses the number of patients who received Venous Thromboembolism (VTE) prophylaxis or have documentation why no VTE prophylaxis was given between the day of arrival to the day after hospital admission or surgery end date for surgeries that start the day of or the day after hospital admission	Inpatient hospitalizations for patients who received VTE prophylaxis: • between the day of arrival and the day after hospital admission • the day of or the day after surgery end date (for surgeries that end the day of or the day after hospital admission) Inpatient hospitalizations for patients who have documentation of a reason why no VTE prophylaxis was given: • between the day of arrival and the day after hospital admission • the day of or the day after surgery end date (for surgeries that end the day of or the day after hospital admission)	Equals Initial population: Inpatient hospitalizations for patients age 18 and older, discharged from hospital inpatient acute care without a diagnosis of venous thromboembolism (VTE) or obstetrics with a length of stay less than or equal to 120 days that ends during the measurement period	VTE-1

CMS eCQM ID	NQF #	Measure Title	Measure Description	Numerator Statement	Denominator Statement	Measure Set Identifier
CMS190v12	Not Applicable	Intensive Care Unit Venous Thromboembolism Prophylaxis	This measure assesses the number of patients who received Venous Thromboembolism (VTE) prophylaxis or have documentation why no VTE prophylaxis was given the day of or the day after the initial admission (or transfer) to the Intensive Care Unit (ICU) or surgery end date for surgeries that start the day of or the day after ICU admission (or transfer)	Inpatient hospitalizations for patients who received VTE prophylaxis: • the day of or the day after ICU admission (or transfer) • the day of or the day after surgery end date (for surgeries that end the day of or the day after ICU admission or transfer) Inpatient hospitalizations for patients who have documentation of a reason why no VTE prophylaxis was given: • between the day of arrival and the day after ICU admission (for patients directly admitted as inpatients to the ICU) • the day of or the day after surgery end date (for surgeries that end the day of or the day after ICU admission or transfer)	Inpatient hospitalizations for patients directly admitted or transferred to ICU during the hospitalization	VTE-2
CMS334v5	0471e	Cesarean Birth	Nulliparous women with a term, singleton baby in a vertex position delivered by cesarean birth	Inpatient hospitalizations for patients who deliver by cesarean section	Inpatient hospitalizations for nulliparous patients who delivered a live term singleton newborn >= 37 weeks' gestation See Guidance and Definition Sections for more details.	PC-02
CMS506v6	3316e	Safe Use of Opioids - Concurrent Prescribing	Proportion of inpatient hospitalizations for patients 18 years of age and older prescribed, or continued on, two or more opioids or an opioid and benzodiazepine concurrently at discharge	Inpatient hospitalizations where the patient is prescribed or continuing to take two or more opioids or an opioid and benzodiazepine at discharge	Equals Initial Population: Inpatient hospitalizations (inpatient stay less than or equal to 120 days) that end during the measurement period, where the patient is 18 years of age and older at the start of the encounter and prescribed one or more new or continuing opioid or benzodiazepine at discharge	N/A

CMS eCQM ID	NQF #	Measure Title	Measure Description	Numerator Statement	Denominator Statement	Measure Set Identifier
CMS816v3	3503e	Hospital Harm - Severe Hypoglycemia	The measure assesses the number of inpatient hospitalizations for patients age 18 and older who were administered at least one hypoglycemic medication during the encounter, who suffer the harm of a severe hypoglycemic event during the encounter	Inpatient hospitalizations where a severe hypoglycemic event occurred during the encounter, which is: A glucose result less than 40 mg/dL AND A hypoglycemic medication administered within 24 hours prior to the start of the severe hypoglycemic event (i.e., the glucose result less than 40 mg/dL) AND No subsequent repeat test for glucose with a result greater than 80 mg/dL within five minutes of the time of the initial glucose test with result less than 40mg/dL Only one qualifying severe hypoglycemic event is counted in the numerator, and only one severe hypoglycemic event is counted per encounter. The 24-hour and 5-minute timeframes are based on the time the glucose was drawn, as this reflects the time the patient was experiencing that specific glucose level.	Equals Initial Population: Inpatient hospitalizations that end during the measurement period for patients age 18 and older and at least one hypoglycemic medication was administered during the encounter. The measure includes instances of administration of hypoglycemic medications in the emergency department or in observation status at the start of an inpatient hospitalization when assessing inclusion of encounters in the measure denominator.	HH-Hypo
CMS819v2	3501e	Hospital Harm - Opioid-Related Adverse Events	This measure assesses the number of inpatient hospitalizations for patients age 18 and older who have been administered an opioid medication and are subsequently administered an opioid antagonist within 12 hours, an indication of an opioid-related adverse event	Inpatient hospitalizations where an opioid antagonist was administered outside of the operating room and within 12 hours following administration of an opioid medication. The route of administration of the opioid antagonist must be by intranasal spray, inhalation, intramuscular, subcutaneous, or intravenous injection. Only one numerator event is counted per encounter.	Equals Initial Population: Inpatient hospitalizations for patients age 18 and older during which at least one opioid medication was administered outside of the operating room	HH-ORAE

CMS eCQM ID	NQF #	Measure Title	Measure Description	Numerator Statement	Denominator Statement	Measure Set Identifier
CMS871v3	3533e	Hospital Harm - Severe Hyperglycemia	This measure assesses the number of inpatient hospital days for patients age 18 and older with a hyperglycemic event (harm) per the total qualifying inpatient hospital days for that encounter	Inpatient hospitalizations with a hyperglycemic event within the first 10 days of the encounter minus the first 24 hours, and minus the last period before discharge from the hospital if less than 24 hours A hyperglycemic event is defined as: • A day with at least one glucose value >300 mg/dL, OR • A day where a glucose test and result was not found, and it was immediately preceded by two contiguous, consecutive days where at least one glucose value during each of the two days was >=200 mg/dL	Equals Initial Population: Inpatient hospitalizations for patients age 18 and older that end during the measurement period, as well as either: • A diagnosis of diabetes that starts before or during the encounter; OR • Administration of at least one dose of insulin or any hypoglycemic medication during the encounter; OR • Presence of at least one glucose value >=200 mg/dL at any time during the encounter	HH-Hyper
CMS986v2	3592e	Global Malnutrition Composite Score	This measure assesses the percentage of hospitalizations for adults aged 65 years and older at the start of the inpatient encounter during the measurement period with a length of stay equal to or greater than 24 hours who received optimal malnutrition care during the current inpatient hospitalization where care performed was appropriate to the patient's level of malnutrition risk and severity. Malnutrition care best practices recommend that for each hospitalization, adult inpatients are screened for malnutrition risk, assessed to confirm findings of malnutrition risk or for a hospital dietitian referral order, and if identified with a "moderate"; or "severe" malnutrition status in the current performed malnutrition assessment, receive a current "moderate"; or "severe" malnutrition diagnosis and have a current nutrition care plan performed.	Measure Observation: This is a continuous variable measure. There are six measure observations for this measure. This measure is constructed of four clinically eligible components aggregated as an arithmetic average of eligible hospitalizations. A single measure population is used to calculate the "TotalMalnutritionComponentsScore" and "TotalMalnutritionCompositeScore as Percentage". "Measure Observation 1" identifies hospital encounters where a "Malnutrition Risk Screening" was performed with a current identified "Malnutrition Screening Not At Risk Result" or current "Malnutrition Screening At Risk Result". "Measure Observation 2" identifies hospital encounters where a "Nutrition Assessment" was performed with a current identified "Nutrition Assessment Status Not or Mildly Malnourished", "Nutrition Assessment Status Moderately Malnourished", or "Nutrition Assessment Status Severely Malnourished".	Measure/Initial Population: Valid Encounter: Inpatient hospitalizations during the measurement period with length of stay of 24 hours or more among individuals 65 years of age and older at the start of the inpatient encounter	GMCS

CMS eCQM ID	NQF #	Measure Title	Measure Description	Numerator Statement	Denominator Statement	Measure Set Identifier
CMS986v2 (continued)				"Measure Observation 3" identifies hospital encounters where a current "Malnutrition Diagnosis" was documented. "Measure Observation 4" identifies hospital encounters where a current "Nutrition Care Plan" was performed. "Population 5 Measure Observation "TotalMalnutritionComponentsScore" Calculations • For each hospitalization, Population Criteria 5 represents the subtotal of Measure Observations performed for Population Criteria 1, 2, 3, and 4. • For the reporting facility, the Population Criteria 5 Aggregate Operator 'Count' counts the number of eligible hospitalizations during the measurement period. Population 6 Measure Observation "TotalMalnutritionCompositeScore as Percentage" Calculations: • For each hospitalization, Population Criteria 6 represents the sum of performed Measure Observations 1, 2, 3, and 4 divided by the number of clinically eligible denominators. For the reporting facility, the Population Criteria 6 Aggregate Operator 'Average' averages the performance of each "TotalMalnutritionCompositeScore as Percentage" across all eligible hospitalizations during the measurement period.		

CMS eCQM ID	NQF #	Measure Title	Measure Description	Numerator Statement	Denominator Statement	Measure Set Identifier
CMS1028v2	Not Applicable	Severe Obstetric Complications	Patients with severe obstetric complications which occur during the inpatient delivery hospitalization	Inpatient hospitalizations for patients with severe obstetric complications (not present on admission that occur during the current delivery encounter) including the following: • Severe maternal morbidity diagnoses (see list below) • Severe maternal morbidity procedures (see list below) • Discharge disposition of expired Please note that present on admission codes may be those entered by coding staff, extracted from billing/claims data. Severe Maternal Morbidity Diagnoses: • Cardiac – Acute heart failure – Acute myocardial infarction – Aortic aneurysm – Cardiac arrest/ventricular fibrillation – Heart failure/arrest during procedure or surgery • Hemorrhage – Disseminated intravascular coagulation – Shock • Renal – Acute renal failure • Respiratory – Adult respiratory distress syndrome – Pulmonary edema • Sepsis • Other OB – Air and thrombotic embolism – Amniotic fluid embolism – Eclampsia – Severe anesthesia complications • Other Medical – Puerperal cerebrovascular disorder – Sickle cell disease with crisis	Inpatient hospitalizations for patients delivering stillborn or live birth with >= 20 weeks, 0 days gestation completed	PC-07

CMS eCQM ID	NQF #	Measure Title	Measure Description	Numerator Statement	Denominator Statement	Measure Set Identifier
CMS1028v2 (continued)				• Severe Maternal Morbidity Procedures: – Blood transfusion – Conversion of cardiac rhythm – Hysterectomy – Temporary tracheostomy – Ventilation		