

Electronic Clinical Quality Measures (eCQMs)

What You Need to Know for the 2021 Reporting Year

October 1, 2020 - The 2021 eCQM pages for Eligible Hospitals (EHs) and Critical Access Hospitals (CAHs) are now available! The new pages: [Expandse](#), [6.15](#), [6.08](#), [C/S](#), and [MG](#), include best practices and supporting documentation that reflect the 2021 RY specifications. The eCQM update has notable changes, including the **addition** of an optional, new Opioid eCQM and the introduction of **new workflows** in several of the remaining eCQMs; details noted below. For the complete specifications, refer to the [eCQI Resource Center](#). To receive notification when the 2021 RY SQL reports are available, please subscribe to our 2021 eCQM Pages.

Your organization must choose from the following available eCQMs for the 2021 Reporting Year*:

Short Name	eMeasure Name
PC-05	Exclusive Breast Milk Feeding
ED-2	Median Admit Decision Time to ED Departure Time for Admitted Patients
STK-02	Discharged on Antithrombotic Therapy
STK-03	Anticoagulation Therapy for Atrial Fibrillation/Flutter
STK-05	Antithrombotic Therapy By End of Hospital Day 2
STK-06	Discharged on Statin Medication
VTE-1	Venous Thromboembolism Prophylaxis
VTE-2	Intensive Care Unit Venous Thromboembolism Prophylaxis
Not Applicable	Safe Use of Opioids - Concurrent Prescribing

* For first-year and returning program participants, the reporting period includes two self-selected quarters of eCQM data for 2021 and participants are required to attest on four self-selected measures.

The table below summarizes the major changes to each measure. This is a high-level overview of the changes — each Best Practice, particularly the “What’s Changed” boxes, should also be reviewed.

CQM Measure	CQM Measure 2021 RY Changes
Venous Thromboembolism Prophylaxis (VTE-1) and Intensive Care Unit Venous Thromboembolism Prophylaxis (VTE-2)	<ol style="list-style-type: none"> Expanded VTE prophylaxis time frame to allow interventions in the ED or Observation setting prior to admission to count toward the numerator. A new value set was added for pharmacologic prophylaxis: Rivaroxaban and Betrixaban for VTE Prophylaxis. Value Set Principal was removed. Several value sets were removed and replaced with new value sets. Nomenclature mapping should be reviewed and updated

	as needed.
Median Admit Decision Time to ED Departure Time for Admitted Patients (ED-2)	<ol style="list-style-type: none"> 1. New workflow for decision to admit to capture 'Assessment, Performed'. 2. New value sets added for 'Assessment Performed' decision to admit concept. Nomenclature mapping should be reviewed and updated as needed.
Exclusive Breast Milk Feeding (PC-05)	<ol style="list-style-type: none"> 1. New value set and workflow for birth weight was added. If gestational age workflow is left blank, the system will now look to birth weight. 2. The criteria of length of stay (LOS), diagnosis of galactosemia, and subject to parenteral nutrition were moved from initial population to denominator exclusions.
Discharged on Antithrombotic Therapy (STK-2)	<ol style="list-style-type: none"> 1. The Denominator Exception for patients who receive Ticagrelor or Prasugrel, as an antithrombotic therapy during the hospitalization, is changed to at discharge. 2. Value set for Ticagrelor was replaced with a new value set: Pharmacological Contraindications For Antithrombotic Therapy grouping.
Anticoagulation Therapy for Atrial Fibrillation/Flutter (STK-3)	<ol style="list-style-type: none"> 1. No significant changes.
Antithrombotic Therapy By End of Hospital Day 2 (STK-5)	<ol style="list-style-type: none"> 1. Value set for Ticagrelor was replaced with a new value set: Pharmacological Contraindications For Antithrombotic Therapy grouping. 2. Denominator exclusion for patients with an INR greater than 3.5 was changed to a denominator exception. 3. Denominator exception for patients who receive Ticagrelor was edited to include Ticagrelor or Prasugrel given as an antithrombotic therapy the day of or the day after hospital arrival.
Discharged on Statin Medication (STK-6)	<ol style="list-style-type: none"> 1. No significant changes.
Safe Use of Opioids-Concurrent Prescribing	<ol style="list-style-type: none"> 1. This measure is a new eCQM for 2021 reporting and is optional. 2. Beginning in 2022, Safe Use of Opioids is required as one of the eCQMs to report. 3. Added denominator exclusion for patients who receive palliative or hospice care during the visit. The value set for palliative or hospice care for this measure is (2.16.840.1.113883.3.600.1.1579), which contains some of the same snomed codes as the palliative care/comfort measures value set from other CQMs (1.3.6.1.4.1.33895.1.3.0.45). Four common snomed codes are available to eliminate the need for separate queries.