

INPATIENT Current								
Measures Collected and Submitted by the Hospital								
	HIQRP		VBP		HITECH	CheckPoint	WI Medicaid P4P- MY Assessment Program	WI Medicaid P4P- MY Withhold Program
MEASURE Bolded measures must be manually abstracted and submitted to HQR site quarterly.	Reporting effective date	Affects APU	Reporting effective date	Affects Reimbursement	Promoting Interoperability Program			
<i>Sepsis and Septic Shock</i>								
Severe Sepsis and Septic Shock: Management Bundle Measure	Oct 2015	FY 2017	CY 2024	FY 2026				
<i>Medication-Related Adverse Events</i>								
HH-01 Hospital Harm – Severe Hypoglycemia eCQM	Mandatory CY 2026	FY 2028			Yes			
HH-02 Hospital Harm – Severe Hyperglycemia eCQM	Mandatory CY 2026	FY 2028			Yes			
<i>Opioid-Related Measures</i>								
Safe Use of Opioids - Concurrent Prescribing eCQM	Mandatory CY 2022	FY 2024			Yes			

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Hospital Harm - Opioid Related Adverse Events eCQM	Mandatory CY 2027	FY 2029			Yes			
Perinatal Care (PC)								
ePC-02 Cesarean Birth	Mandatory CY 2024	FY 2026			Yes	manual entry starts Nov 2024	X	
ePC-07 Severe Obstetric Complications	Mandatory CY 2024	FY 2026			Yes	manual entry starts Nov 2024		
Newborn Screening Card Transit Time – received at State Lab 3 days of Collection						X	X	
Stroke								
STK-2 Ischemic stroke patients discharged on antithrombotic therapy eCQM					Yes			

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STK-3 anticoagulation therapy for atrial fibrillation/flutter eCQM					Yes			
STK-5 Antithrombotic therapy by the end of hospital day two eCQM					Yes			
<i>Venous Thromboembolism (VTE)</i>								
VTE-1 Venous thromboembolism Prophylaxis eCQM					Yes			
VTE-2 Intensive care unit VTE prophylaxis eCQM					Yes			
<i>Patient Safety Indicators</i>								
Pressure Ulcers						X		
Pneumothorax						X		
Post-op Hemorrhage/Hematoma						X		
Post-op Respiratory Failure						X		
Post-op Sepsis						X		

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Risk Adjusted Complication Rate for Elective Primary Total Hip and Total Knee						X		
Additional eCQM Measures								
Global Malnutrition Composite Score eCQM Modify to add ages 18-64 in CY 2026					Yes			
Hospital Harm – Pressure Injury eCQM	Mandatory CY 2028	FY 2030			Available for reporting CY 2025			
Hospital Harm – Acute Kidney Injury eCQM	Mandatory CY 2028	FY 2030			Available for reporting CY 2025			
Hospital Harm – Falls with Injury eCQM					Available for reporting CY 2026			

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Hospital Harm – Post-operative Respiratory Failure eCQM					Available for reporting CY 2026		
Excessive Radiation Dose or Inadequate Image Quality for Diagnostic CT Adults eCQM					Available for reporting CY 2025		
Structural Measure							
Maternal Morbidity	Oct 2021	FY 2023					
Hospital Commitment to Health Equity	CY2023 End after CY 2023	FY 2025 Remove after FY 2025					
Patient Safety	CY 2025	FY 2027					
Age Friendly Hospital	CY 2025	FY 2027					
Measures Reported to NHSN							
Central Line Associated Bloodstream Infection Expand to include some non-ICU wards			Feb 2013 Jan 2017	FY 2015 FY 2019		X	X
CLABSI - Oncology units	CY 2026	FY 2028					
Surgical Site Infection			Jan 2014	FY2016			

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Catheter-Associated Urinary Tract Infection Expand to include some non-ICU wards			Jan 2014 Jan 2017	FY 2016 FY 2019		X		
CAUTI - Oncology units	CY 2026	FY 2028						
MRSA Bacteremia			Jan 2015	FY 2017		X		
Clostridium Difficile (C. Diff)			Jan 2015	FY 2017		X		
Healthcare Personnel Influenza Vaccination	Jan 2013	FY 2015				X		
SSI – Colon						X		
SSI – Abdominal Hysterectomy						X		
<i>Patients' Experience of Care</i>								
HCAHPS survey	Ongoing	Ongoing	July 2011	FY2013		X	X	
Updated survey	CY 2025	FY 2027		FY2030				
Definitely Recommend Hospital H_RECMND_DY						X	X	



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Doctors Always Communicated Well H_COMP_2_A_P						X	X	
Nurses Always Communicated Well H_COMP_1_A_P						X	X	
Patients Always Received Requested Help H_COMP_3_A_P						X	X	
Staff Always Explained Medications H_COMP_5_A_P						X	X	
Always Quiet at Night H QUIET_HSP_A_P						X	X	
Room Always Clean H_CLEAN_HSP_A_P						X	X	
Staff Provided Discharge Instructions H_COMP_6_Y_P						X	X	
Patients Understood their Care When They Left H_COMP_7_SA						X	X	

INPATIENT Current							
Measures Collected and Submitted by the Hospital							
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MEASURE Bolded measures must be manually abstracted and submitted to HQR site quarterly.	Reporting effective date	Affects APU	Reporting effective date	Affects Reimbursement	Promoting Interoperability Program		
THA/TKA PRO-PM Hospital-Level Total Hip Arthroplasty and/or Total Knee Arthroplasty Patient-Reported Outcome-Based Performance Measure	Voluntary for <u>procedures performed</u> 7/2023-6/2024 Required for <u>procedures performed</u> 7/2024-6/2025	Voluntary data submission will not affect APU. Required for FY2028 APU					

eCQM Reporting Requirements		
Reporting Period/Payment Determination	Total Number of eCQMs Reported	eCQMs Required to be Reported
CY 2024/FY 2026 and CY 2025/FY 2027	6	Safe Use of Opioids-Concurrent Prescribing Cesarean Birth Severe Obstetric Birth 3 additional self-selected eCQMs
CY 2026/FY 2028	8	Safe Use of Opioids-Concurrent Prescribing Cesarean Birth Severe Obstetric Birth Hospital Harm-Severe Hyperglycemia Hospital Harm-Severe Hypoglycemia 3 additional self-selected eCQMs
CY 2027/FY 2029	9	Safe Use of Opioids-Concurrent Prescribing Cesarean Birth Severe Obstetric Birth Hospital Harm-Severe Hyperglycemia Hospital Harm-Severe Hypoglycemia Hospital Harm-Opioid-Related Adverse Events 3 additional self-selected eCQMs
CY 2028/FY 2030	11	Safe Use of Opioids-Concurrent Prescribing Cesarean Birth Severe Obstetric Birth Hospital Harm-Severe Hyperglycemia Hospital Harm-Severe Hypoglycemia Hospital Harm-Opioid-Related Adverse Events Hospital Harm-Pressure Injury Hospital Harm-Acute Kidney Injury 3 additional self-selected eCQMs

Claims Based Measures Calculated by CMS (Inpatient)							
MEASURE	HIQRP		VBP				
	Reporting effective date	Affects APU	Reporting effective date	Affects Reimbursement	CheckPoint	WI Medicaid P4P-MY Assessment Program	WI Medicaid P4P-MY Withhold Program
<i>Mortality Measures (Medicare Patients)</i>							
Hospital 30-day, all-cause, risk-standardized mortality rate following AMI hospitalization for patients 18 and older			7/1/11	FY 2014	X		
Hospital 30-day, all-cause, risk-standardized mortality rate following heart failure hospitalization for patients 18 and older			7/1/11	FY 2014	X		
Hospital 30-day, all-cause, risk-standardized mortality rate following pneumonia hospitalization			7/1/11	FY 2014	X		
Hospital 30-day, all-cause, risk-standardized mortality rate following COPD hospitalization			7/1/16	FY 2021	X		
Hospital 30-day, all-cause, risk-standardized mortality rate following acute ischemic stroke		FY 2016			X		
7/2023-6/2025 Expand to include Medicare Advantage Hybrid Hospital-Wide All-Cause Mortality (Hybrid HWM) Hospitals report CCDEs & linking variables	Voluntary 7/2023-6/2024 7/2024-6/2025	FY 2027 FY 2028					
7/2024-6/2025 Expand to include Medicare Advantage	Mandatory 7/2025-6/2026						

Hospital 30-day, all-cause, risk-standardized mortality rate following CABG surgery			7/1/2017-6/30/2020	FY2022			
30-day risk-standardized death rate among surgical inpatients with complications	7/2023 - 6/2025	FY 2027					

Claims Based Measures Calculated by CMS (Inpatient)							
MEASURE	HIQRP		VBP				
	Reporting effective date	Affects APU	Reporting effective date	Affects Reimbursement	CheckPoint	WI Medicaid P4P-MY Assessment Program	WI Medicaid P4P-MY Withhold Program
IQI 11 Mortality Rate-Abdominal Aortic Aneurysm Repair					X		
IQI 12 Mortality Rate-CABG					X		
IQI 31 Mortality Rate-Carotid Endarterectomy					X		
IQI 18 Mortality-Gastrointestinal hemorrhage					X		
IQI 19 Mortality Rate-Hip Fracture					X		
IQI 30 Mortality Rate-PTCA					X		
IQI 17 Mortality Rate-Stroke					X		
Readmission Measures (Medicare Patients)							
Hybrid Hospital-Wide Readmission Measure (Hybrid HWR)	Voluntary	FY 2028					
Hospitals report CCDEs & linking variables	7/2023-6/2024						
7/2024-6/2025 Expand to include Medicare Advantage	Mandatory 7/2025-6/2026						
30 Day Readmission-Acute MI					X		
30 Day Readmission-CABG					X		
30 Day Readmission-HF					X		

Claims Based Measures Calculated by CMS (Inpatient)							
MEASURE	HIQRP		VBP				
	Reporting effective date	Affects APU	Reporting effective date	Affects Reimbursement	CheckPoint	WI Medicaid P4P-MY Assessment Program	WI Medicaid P4P-MY Withhold Program
30-Day Readmission -COPD					X		
30 Day Readmission-Pneumonia					X		
30 Day Readmission-Total Hip/Total Knee					X		
Potentially Preventable Readmissions							X
<i>Surgical Complications</i>							
Hip/Knee: Hospital-level risk standardized complication rate (RSCR) following elective primary total hip\total knee arthroplasty			Jan 2015	FY 2019			
UPDATED Hip/Knee: Hospital-level risk standardized complication rate (RSCR) following elective primary total hip\total knee arthroplasty	4/2019 – 3/2022 End after March 2028	FY 2024 Remove after FY 2029		FY 2030			
4/2023-3/2025 Expand to include Medicare Advantage	4/2023-3/2025	FY 2027		FY 2033			
<i>AHRQ and Nursing Sensitive Care</i>							
PSI-4 Death among surgical inpatients with serious, treatable complications	End after 6/30/2025	Remove after FY 2026					
<i>Cost Efficiency</i>							
Medicare spending per beneficiary Add RRB beneficiaries for FY 2016			May 2013	FY 2015			
UPDATED Medicare spending per beneficiary (MSPB) Hospital Measure	End after CY 2025	FY 2024 Remove after FY 2027	CY 2026	FY 2028			

Claims Based Measures Calculated by CMS (Inpatient)

MEASURE	HIQRP		VBP				
	Reporting effective date	Affects APU	Reporting effective date	Affects Reimbursement	CheckPoint	WI Medicaid P4P-MY Assessment Program	WI Medicaid P4P-MY Withhold Program
Excess Days in Acute Care after Hospitalization for AMI Revised for FY 2024 payment determination		FY 2018					
Excess Days in Acute Care after Hospitalization for Heart Failure		FY 2018					
Excess Days in Acute Care after Hospitalization for Pneumonia	7/2014-6/2017	FY 2019					

<u>OUTPATIENT Current</u> Measures Collected and Submitted by Hospital					
HOQRP					
MEASURE	Reporting effective date	Affects APU	CheckPoint	WI Medicaid P4P-MY Assessment Program	WI P4P-My Withhold Program
<i>Cardiac Care Measures</i>					
OP-40 ST-Segment Elevation Myocardial Infarction (STEMI) eCQM	Voluntary CY 2023 Mandatory CY 2024	CY 2026			
<i>ED Measures</i>					
OP-18 Median time for discharged ED patients	Jan 2012 End after CY 2027	CY 2013 Remove after CY 2029			
Emergency Care Access & Timeliness eCQM	Voluntary CY 2027 Mandatory CY 2028	CY 2030			

<u>OUTPATIENT Current</u> Measures Collected and Submitted by Hospital					
	HOQRP				
MEASURE	Reporting effective date	Affects APU	CheckPoint	WI Medicaid P4P-MY Assessment Program	WI P4P-My Withhold Program
Stroke					
OP-23 Head CT or MRI scan results for acute ischemic stroke or hemorrhagic stroke patients who received head CT or MRI scan interpretation within 45 minutes of ED arrival	Jan 2012	CY 2013			
Imaging					
Excessive Radiation eCQM	Voluntary CY 2025				
Chart-Abstracted Measures with Aggregate Data Submission by Web-Based Tool (HQR System)					
OP-22 ED patient left without being seen	Jan-Jun 2012 Data End after CY 2027	CY 2013 Remove after CY 2029			
OP-29 Colonoscopy Follow-up interval Revise ages from "50-75" to "45-75"	April 1, 2014 CY 2024	CY 2016 CY 2026			
OP-31 Cataracts visual function CY 2024 Limit options for survey instrument used	Voluntary CY 2015				

OUTPATIENT Current
Measures Collected and Submitted by Hospital

MEASURE	HOQRP				
	Reporting effective date	Affects APU	CheckPoint	WI Medicaid P4P-MY Assessment Program	WI P4P-My Withhold Program
Measures Reported to NHSN					
OP-38 COVID-19 Vaccination Coverage among Healthcare Personnel	CY 2022	CY 2024			
Modified to HCP with "up-to-date" vaccines	CY 2024 End after CY 2023	CY2026 Remove after CY 2025			
Patients' Experience of Care					
OP-37a – 37e OAS CAHPS	Voluntary CY 2023 Mandatory CY 2024	CY 2026			
Patient-Reported Outcome Performance Measure					
OP-42 PRO-PM Following Elective Primary Total Hip Arthroplasty and/or Total Knee Arthroplasty in the HOPD Setting	Voluntary CY 2025 Voluntary CY 2026 Voluntary CY 2027 Mandatory CY 2028	CY 2031			
PRO-PM Patient Understanding of Key Information Related to Recovery After a Facility-Based Outpatient Procedure or Surgery Information Transfer PRO-PM	Voluntary CY 2026 Mandatory CY 2027	CY 2029			

Claims Based Measures Calculated by CMS (Outpatient)

Claims Based Measures Calculated by CMS (Outpatient)					
	HOQRP				
MEASURE	Reporting effective date	Affects APU	CheckPoint	WI Medicaid P4P-MY Assessment Program	WI P4P-My Withhold Program
Outcome Measures					
OP-32 Facility 7-Day Risk-Standardized Hospital Visit Rate after Outpatient Colonoscopy	CY 2016	CY 2018			
OP-35 Admissions and Emergency Department Visits for Patients Receiving Outpatient Chemotherapy	CY 2018	CY 2020			
OP-36 Hospital Visits after Hospital Outpatient Surgery	CY 2018	CY 2020			
Imaging Efficiency Measures					
OP-8 MRI lumbar spine for low back pain	Ongoing End after 2024	Ongoing Remove after CY 2026			
OP-10 Abdomen computed tomography (CT) use of contrast material	Ongoing	Ongoing			
OP-13 Cardiac imaging for preoperative risk assessment for non-cardiac low-risk surgery	CY 2010 End after 2024	CY 2012 Remove after CY 2026			
OP-39 Breast Screening Recall Rates	July 2020 – June 2021	CY 2023			

AMBULATORY SURGERY CENTER Current
Measures Collected and Submitted by Hospital

ASCQR Program					
MEASURE	Reporting effective date	Affects APU	CheckPoint	WI Medicaid P4P-MY Assessment Program	WI P4P-My Withhold Program
Measures Submitted through the CMS Web-Based Tool (HQR System)					
ASC-1 Patient Burn	CY 2023	CY 2025			
ASC-2 Patient Fall	CY 2023	CY 2025			
ASC-3 Wrong Site, Wrong Side, Wrong Patient, Wrong Procedure, Wrong Implant	CY 2023	CY 2025			
ASC-4 Hospital Transfer/Admission	CY 2023	CY 2025			
ASC-9 Endoscopy/Poly surveillance: Appropriate follow-up interval for normal colonoscopy in average risk patients	April 1, 2014	CY 2016			
Revise ages from "50-75" to "45-75"	CY 2024	CY 2026			
ASC-11 Cataracts visual function CY 2024 Limit options for survey instrument used	Voluntary CY 2015				
ASC-13 Normothermia Outcome	CY 2018	CY 2020			
ASC-14 Unplanned Anterior Vitrectomy	CY 2018	CY 2020			

AMBULATORY SURGERY CENTER Current Measures Collected and Submitted by Hospital					
MEASURE	ASCQR Program				
	Reporting effective date	Affects APU	CheckPoint	WI Medicaid P4P-MY Assessment Program	WI P4P-My Withhold Program
Measures Reported to NHSN					
ASC-20 COVID-19 Vaccination Coverage among Healthcare Personnel	CY 2022	CY 2024			
Modified to HCP with “up-to-date” vaccines	CY 2024 End after CY 2023	CY2026 Remove after CY 2025			
Outpatient and Ambulatory Surgery Consumer Assessment of Healthcare Providers and Systems					
ASC-15a-e OAS CAHPS	Voluntary CY 2024 Mandatory CY 2025	CY 2027			
Patient-Reported Outcome Performance Measure					
PRO-PM Following Elective Primary Total Hip Arthroplasty and/or Total Knee Arthroplasty in the ASC Setting	Voluntary CY 2025 Voluntary CY 2026 Voluntary CY 2027 Mandatory CY 2028	CY 2031			

Claims Based Measures Calculated by CMS

ASCQR Program					
MEASURE	Reporting effective date	Affects APU	CheckPoint	WI Medicaid P4P-MY Assessment Program	WI P4P-My Withhold Program
Outcome Measures					
ASC-12 Facility 7-Day Risk-Standardized Hospital Visit Rate after Outpatient Colonoscopy	CY 2016	CY 2018			
ASC-17 Hospital Visits after Orthopedic Ambulatory Surgical Center Procedures	CY 2019 & 2020	CY 2022			
ASC-18 Hospital Visits after Urology Ambulatory Surgical Center Procedures	CY 2019 & 2020	CY 2022			
ASC-19 Facility-Level 7-Day Hospital Visit after General Surgery Procedures Performed at ASC.	CY 2021 & 2022	CY 2024			

LONG-TERM CARE HOSPITAL Current
Measures Collected and Submitted by Hospital

MEASURE	LTCHQR Program		CheckPoint	WI Medicaid P4P-MY Assessment Program	WI P4P-My Withhold Program
	Reporting effective date	Affects APU			
<i>Chart-Abstracted Measures Reported Using the CMS Designated Data Submission System</i>					
Changes in Skin Integrity Post-Acute Care: Pressure Ulcer/Injury	July 2018	FY 2020			
Percent of Residents Experiencing One or More Falls with Major Injury	April 2016	FY 2018			
Change in Mobility among LTCH Patients Requiring Ventilator Support	April 2016	FY 2018			
Drug Regimen Review Conducted with Follow-Up for Identified Issues	April 2018	FY 2020			
Compliance with Spontaneous Breathing Trial (SBT) by Day 2 of the LTCH Stay	July 2018	FY 2020			
Ventilator Liberation Rate	July 2018	FY 2020			
Transfer of Health Information to the Provider, Post-Acute Care	Oct 2020	FY 2022			
Transfer of Health Information to the Patient, Post-Acute Care	Oct 2020	FY 2022			
Discharge Function Score	CY 2023	FY 2025			
COVID-19 Vaccine Percent of Patients/Residents Who Are Up to Date	Oct 2024	FY 2026			

LONG-TERM CARE HOSPITAL Current

Measures Collected and Submitted by Hospital

LTCHQR Program					
MEASURE	Reporting effective date	Affects APU	CheckPoint	WI Medicaid P4P-MY Assessment Program	WI P4P-My Withhold Program
Measures Reported to NHSN					
Urinary Catheter-Associated Urinary Tract Infection (CAUTI)	Oct 2012	FY 2014			
Central Line Catheter-Associated Bloodstream Infection (CLABSI)	Oct 2012	FY 2014			
Facility-wide Inpatient Hospital-onset Clostridium difficile Infection (CDI) Outcome Measure	Jan 2015	FY 2017			
Influenza Vaccination coverage among healthcare personnel	Oct 2014	FY 2016			
COVID-19 Vaccination Coverage among Healthcare Personnel Modified to HCP with "up to date" vaccine	Oct 2021 Oct 2023	FY 2023 FY 2025			

Claims Based Measures Calculated by CMS (Long-Term Care Hospitals)

LTCHQR Program					
MEASURE	Reporting effective date	Affects APU	CheckPoint	WI Medicaid P4P-MY Assessment Program	WI P4P-My Withhold Program
Resource Use and Other Measures (IMPACT)					
Potentially Preventable 30-day Post-Discharge Readmission Measure	CY 2016 and 2017	FY 2018			
Medicare Spending Per Beneficiary	CY 2016 and 2017	FY 2018			
Discharge to Community – PAC LTCH QRP	CY 2016 and 2017	FY 2018			

INPATIENT PSYCHIATRIC FACILITIES Current
Measures Collected and Submitted by Hospital

IPFQR Program					
MEASURE	Reporting effective date	Affects APU	CheckPoint	WI Medicaid P4P-MY Assessment Program	WI P4P-My Withhold Program
Hospital Based Inpatient Psychiatric Services					
HBIPS-2 Hours of physical restraint use	Oct 2012	FY 2014			
HBIPS-3 Hours of seclusion use	Oct 2012	FY 2014			

INPATIENT PSYCHIATRIC FACILITIES Current
Measures Collected and Submitted by Hospital

IPFQR Program					
MEASURE	Reporting effective date	Affects APU	CheckPoint	WI Medicaid P4P-MY Assessment Program	WI P4P-My Withhold Program
Substance Use					
SUB-2 Alcohol Use Brief Intervention Provided or Offered	Jan 2016	FY 2018			
SUB-2a Alcohol Use Brief Intervention	Jan 2016	FY 2018			
SUB-3 Alcohol and Drug Use Disorder Treatment Provided or Offered at Discharge	Jan 2017	FY 2019			
SUB-3a Alcohol and Drug Use Disorder Treatment at Discharge	Jan 2017	FY 2019			
Tobacco Treatment					
TOB-3 Tobacco Treatment Provided or Offered at Discharge	Jan 2016	FY 2018			
TOB-3a Tobacco Treatment at Discharge	Jan 2016	FY 2018			
Immunization					
IMM-2 Influenza Immunization	Oct 2015	FY 2017			
Transition of Care					
Transition Record with Specified Elements Received by Discharged Patients	Jan 2017	FY 2019			
Metabolic Disorders					
Screening for Metabolic Disorders	Jan 2017	FY 2019			

INPATIENT PSYCHIATRIC FACILITIES Current

Measures Collected and Submitted by Hospital

	IPFQR Program				
MEASURE	Reporting effective date	Affects APU	CheckPoint	WI Medicaid P4P-MY Assessment Program	WI P4P-My Withhold Program
Facility-Level Data					
Submit aggregate population counts by diagnostic group	CY 2015	FY 2017			
Submit aggregate population counts by payer	CY 2015	FY 2017			

Claims Based Measures Calculated by CMS

IPFQR Program					
MEASURE	Reporting effective date	Affects APU	CheckPoint	WI Medicaid P4P-MY Assessment Program	WI P4P-My Withhold Program
<i>Patients' Experience of Care</i>					
PIX Survey	Voluntary CY 2025 Mandatory CY 2026	FY 2028			
<i>Clinical Quality of Care Measure</i>					
Follow-up After Psychiatric Hospitalization	July 2021 – June 2022	FY 2024			
Medication Continuation following Discharge from an IPF	July 2017 – June 2019	FY 2021			
30-Day, Risk-Standardized All-Cause ED Visit Following an IPF Discharge	CY 2025	FY 2027			
<i>Readmission Measure</i>					
30 Day All-Cause Unplanned Readmission Following Psychiatric Hospitalization in an IPF		FY 2019			

INPATIENT REHABILITATION FACILITY Current
Measures Collected and Submitted by Hospital

MEASURE	IRF QRP		CheckPoint	WI Medicaid P4P-MY Assessment Program	WI P4P-My Withhold Program
	Reporting effective date	Affects APU			
Chart-Abstracted Measures Reported Through IRF-Patient Assessment Instrument (IRF-PAI)					
Changes in Skin Integrity Post-Acute Care: Pressure Ulcer/Injury	Oct 2018	FY 2020			
Application of Percent of Residents Experiencing One or More Falls with Major Injury	Oct 2016	FY 2018			
Discharge Self-Care Score for Medical Rehabilitation Patients (NQF#2635)	Oct 2016	FY 2018			
Discharge Mobility Score for Medical Rehabilitation Patients (NQF#2636)	Oct 2016	FY 2018			
Drug Regimen Review Conducted with Follow- Up for Identified Issues	Oct 2018	FY 2020			
Transfer of Health Information to the Provider, Post-Acute Care	Oct 2020	FY 2022			
Transfer of Health Information to the Patient, Post-Acute Care	Oct 2020	FY 2022			
Discharge Function Score	CY 2023	FY 2025			
COVID-19 Vaccine Percent of Patients/Residents Who Are Up to Date	Oct 2024 End after 9/30/25	FY 2026 Remove after FY 2027			

INPATIENT REHABILITATION FACILITY Current

Measures Collected and Submitted by Hospital

MEASURE	IRF QRP		CheckPoint	WI Medicaid P4P-MY Assessment Program	WI P4P-My Withhold Program
	Reporting effective date	Affects APU			
Measures Reported to NHSN					
Urinary Catheter-Associated Urinary Tract Infection (CAUTI) (NQF#0138)	Oct 2012	FY 2014			
NHSN Facility-wide Inpatient Hospital-Onset Clostridium Difficile Infection (CDI) Outcome Measure (NQF#1717)	Jan 2015	FY 2017			
Influenza Vaccination Coverage among Healthcare Personnel (NQF#0431)	Oct 2014	FY 2016			

Claims Based Measures Calculated by CMS (Inpatient Rehab Facilities)

MEASURE	IRF QRP				
	Reporting effective date	Affects APU	CheckPoint	WI Medicaid P4P-MY Assessment Program	WI P4P-My Withhold Program
<i>Resource Use and Other Measures (IMPACT)</i>					
Discharge to Community	CY 2016 and 2017	FY 2018			
Medicare Spending Per Beneficiary	CY 2016 and 2017	FY 2018			
Potentially Preventable 30-day Post-Discharge Readmission Measure for IRFs	CY 2016 and 2017	FY 2018			
Potentially Preventable Within Stay Readmission Measure for IRFs	CY 2016 and 2017	FY 2018			

END-STAGE RENAL DISEASE FACILITY Current
Measures Collected and Submitted by Facility

MEASURE	ESRD QIP		CheckPoint	WI Medicaid P4P-MY Assessment Program	WI P4P-My Withhold Program
	Reporting effective date	Affects Reimbursement			
Measures Reported to NHSN					
Bloodstream Infection in Hemodialysis Outpatients	2014	PY 2016			
Dialysis Event Reporting	CY 2017 End after CY 2024	PY 2019 Remove after PY 2026			
COVID-19 Vaccination Coverage among Healthcare Personnel Modified to HCP with "up to date" vaccines	CY 2023 CY 2024	PY 2025 PY 2026			
Measures Reported through ESRD Quality Reporting System					
ICH CAHPS	2012	PY 2014			
Hypercalcemia (NQF#1454)	2014	PY 2016			
Clinical Depression Screening and Follow-Up	2016	PY 2018			
Hemodialysis Vascular Access: Long-Term Catheter Rate (NQF#2978)	CY 2019	PY 2021			

END-STAGE RENAL DISEASE FACILITY Current

Measures Collected and Submitted by Facility

MEASURE	ESRD QIP		CheckPoint	WI Medicaid P4P-MY Assessment Program	WI P4P-My Withhold Program
	Reporting effective date	Affects Reimbursement			
Percentage of Prevalent Patients Waitlisted	CY 2020	PY 2022			
Medication Reconciliation	CY 2020	PY 2022			
Hospital Commitment to Health Equity	CY 2024 End after CY 2024	PY 2026 Remove after PY 2026			

Claims Based Measures Calculated by CMS

ESRD QIP					
MEASURE	Reporting effective date	Affects Reimbursement	CheckPoint	WI Medicaid P4P-MY Assessment Program	WI P4P-My Withhold Program
Kt/V Dialysis Adequacy Comprehensive	CY 2017 End after CY 2024	PY 2019 Remove after PY 2026			
Kt/V Dialysis Adequacy Measure Topic	CY 2025	PY 2027			
Standardized Readmission Ratio (SRR)	CY 2015	PY 2017			
Standardized Transfusion Ratio (STrR)	CY 2016	PY 2018			
Standardized Hospitalization Ratio (SHR)	CY 2018	PY 2020			

PPS – EXEMPT CANCER HOSPITALS Current
Measures Collected and Submitted by Facility

PCHQR Program					
MEASURE	Reporting effective date	Effective Program Years	CheckPoint	WI Medicaid P4P-MY Assessment Program	WI P4P-My Withhold Program
Documentation of Goals of Care Discussion among Cancer Patients	CY 2024	FY 2026			
<i>Structural Measures</i>					
Patient Safety	CY 2025	FY 2027			
<i>Patients' Experience of Care</i>					
HCAHPS survey Updated survey	April 2014 CY 2025	FY 2016 FY 2027			
<i>Measures Reported to NHSN</i>					
Catheter Associated Urinary Tract Infection	Jan 2013	FY 2014			
Central Line Associated Bloodstream Infection	Jan 2013	FY 2014			
Surgical Site Infection	Jan 2014	FY 2015			
Facility-wide Inpatient Hospital-onset Clostridium difficile Infection (CDI) Outcome Measure	Jan 2016	FY 2018			
Facility-wide Inpatient Hospital-onset Methicillin-resistant Staphylococcus aureus (MRSA) Bacteremia Outcome Measure	Jan 2016	FY 2018			
Influenza Vaccination Coverage Among Healthcare Personnel	Oct 2016	FY 2018			

COVID-19 Vaccination Coverage among Healthcare Personnel Modified to HCP with "up to date" vaccines	Oct 2021 Oct 2023	FY 2023 FY 2025			
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Claims Based Measures Calculated by CMS

MEASURE	PCHQR Program				
	Reporting effective date	Effective Program Year	CheckPoint	WI Medicaid P4P-MY Assessment Program	WI P4P-My Withhold Program
Admissions and Emergency Department Visits for Patients Receiving Outpatient Chemotherapy	July 2016 - June 2017	FY 2019			
EOL-Chemo: Proportion of Patients Who Died from Cancer Receiving Chemotherapy in the Last 14 Days of Life (NQF#0210)	July 2017- June 2018	FY 2020			
EOL-Hospice: Proportion of Patients Who Died from Cancer Not Admitted to Hospice (NQF#0215)	July 2017 -June 2018	FY 2020			
EOL-ICU: Proportion of Patients Who Died from Cancer Admitted to the ICU in the Last 30 Days of Life (NQF#0213)	July 2017 - June 2018	FY 2020			
EOL-3DH: Proportion of Patients Who Died from Cancer Admitted to Hospice for Less than Three Days (NQF#0216)	July 2017 - June 2018	FY 2020			
30-Day Unplanned Readmissions for Cancer Patients (NQF #3188)	Oct 2018 – Sept 2019	FY 2021			

Surgical Treatment Complications for Localized Prostate Cancer	July 2019 – June 2020	FY 2022			
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RURAL EMERGENCY HOSPITAL Current

Measures Collected and Submitted by Hospital

	REHQR Program				
MEASURE	Reporting effective date	Affects APU	CheckPoint	WI Medicaid P4P-MY Assessment Program	WI P4P-My Withhold Program
<i>ED Throughout</i>					
OP-18 Median Time from ED Arrival to ED Departure for Discharged ED Patients	CY 2024	CY 2026			
Emergency Care Access & Timeliness eCQM Optional measure hospitals can report on in lieu of OP-18	CY 2027	CY 2029			

Claims Based Measures Calculated by CMS (REH)

REHQR Program					
MEASURE	Reporting effective date	Affects APU	CheckPoint	WI Medicaid P4P-MY Assessment Program	WI P4P-My Withhold Program
Facility 7-Day Risk-Standardized Hospital Visit Rate after Outpatient Colonoscopy	CY 2024 thru CY 2026	CY 2028			
Risk-Standardized Hospital Visits Within 7 Days after Hospital Outpatient Surgery	CY 2024 CY 2024 and CY 2025	CY 2026 CY 2027			
Outcome Measures					
Abdomen Computed Tomography (CT) Use of Contrast Material	CY 2024	CY 2026			
Imaging Efficiency Measures					