


The Use of HL7 Specifications in Quality Measurement & Reporting

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Objectives

- Discuss current standards involved with electronic quality measurement and reporting
- Break down QRDA I & III at a very high-level
- Explore Relationships Between QRDA and HQMF
- Discuss issues around the current standards
- Discuss work being done by S&I Clinical Quality Framework around eQCMs and reporting and new standards

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Current Standards Framework

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Foundational HL7 v3 Standards

- Among others:
 - Reference Information Model (RIM)
 - Data Types Specifications
 - ISO-Harmonized Data Types, Release 1
 - Abstract Data Type Specifications
 - Data Types Release 1 (R1) – Used by CDA-based documents like QRDA
 - Data Types Release 2 (R2) – Used by HQMF-based documents
 - Vocabulary


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Quality Measure Standards

- [Quality Data Model \(QDM\)](#)
- [HL7 Health Quality Measures Format \(HQMF\)](#)
- [HL7 QDM-based HQMF Implementation Guide \(IG\)](#)

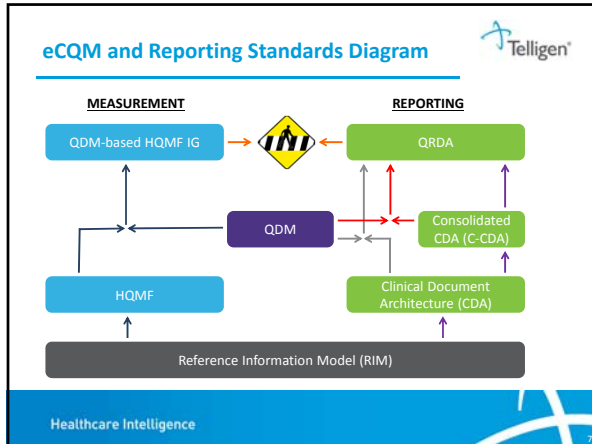
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Quality Reporting Standards Framework

- [HL7 Clinical Document Architecture \(CDA\)](#)
- [Consolidated CDA \(C-CDA\)](#)
- Quality Reporting Document Architecture (QRDA)
 - [Category I](#)
 - [Category III](#)

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CMS QRDA Implementation Guide (IG)

- CMS QRDA IG**
 - In its 3rd annual release, with each release corresponding to a particular program year
 - During the first year, there were multiple CMS QRDA IGs, siloed by category and whether they were for the Eligible Professional or Eligible Hospital Community (PY 2014)
 - Beginning with PY 2015, the CMS QRDA IGs were consolidated
 - Work continues on the PY 2017 CMS QRDA IG – publication TBD
 - The Eligible Hospital portion went through public comment 3/30 – 4/18
 - The Eligible Professional portion was split out from the EH section due to a timing issue with regulations. It went through public comment from 4/11 – 5/2

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QRDA I

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QRDA I Outline

- Header:**
 - Metadata about the file including some patient and provider info
- Body:**
 - Measure section:* Measures for which data is being provided
 - Reporting Parameters section:* Reporting period information
 - Patient Data section:* Encounters, Diagnoses, etc.

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QRDA I Example

- Human Readable: [CAC_Multiple_Sample.html](#)
- QRDA I XML: [CAC_Multiple_Sample.xml](#)

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QRDA I Relationship to HQMF


- According to QRDA I, a QRDA I file would be generated based on the patient being in the Initial Population for one of the measures being reported in the file
- Data Elements provided in the QRDA I file based on the data elements needed by each of the measures being reported in the file
- Data elements conveyed through templates mapped to the respective templated elements in the respective HQMF files

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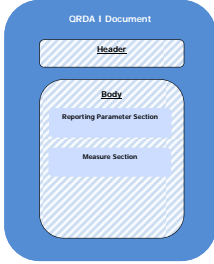
QRDA III

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QRDA III Outline




- **Header:**
 - Metadata about the file including some provider info
- **Body:**
 - *Reporting Parameters section:* Reporting period information
 - *Measure section:*
 - Performance Rate(s)/CV if applicable
 - Measure Pop (MP) Counts
 - Per MP, Stratifier and SDE count(s)



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QRDA III Example



- Human Readable: [Comprehensive Primary Care \(CPC\) Initiative Sample QRDA-III Report.htm](#)
- QRDA III XML: [Comprehensive Primary Care \(CPC\) Initiative Sample QRDA-III Report.xml](#)

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Measure Score




- Set by the respective measure - codified in the HQMF file
- Per HQMF, determines what measure populations may be provided in a measure and how those measure populations are used
- Used to determine what measure populations should be provided in a QRDA III file for a measure and if a performance rate(s) or measure observation(s) should be provided

Note: Measure Score is not provided in a QRDA I or QRDA III file for each measure.

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Universally Unique Identifiers (UUIDs)



- In QRDA III, UUIDs are used to indicate measures and related items
 - Measure
 - CMS 136 v4: "40280381-4555-e1c1-0145-b957717c3738"
 - Measure Populations
 - CMS 125 v3 Denominator: "37E2B857-67E4-4C21-A1C2-77857A05B908"
 - Stratifiers
 - CMS 126 v3 Stratum 4: "40280381-3d61-56a7-013e-66493e984444"

Note: These UUIDs match the UUIDs in the related HQMF files, thereby allowing comparison of apples to apples and oranges to oranges.

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Problems With Current Framework

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Problems with Current QDM Model

- Flat
 - Example:
 - Current QDM has 3 different attributes to express different facets about the level of care within an encounter:
 - Facility Location
 - Facility Location Arrival Datetime
 - Facility Location Departure Datetime
- Inconsistent
- Does not always map well to EHRs and how data is collected
- Different than the model used for Clinical Decision Support (CDS)

Current Measure Language Problems

- The current QDM expression language is:
 - Use-case oriented and therefore not very extensible
 - Requires mapping to HQMF
 - Rigid
 - Weighty (e.g., CMS 117 v5 rel. on 04/06/16 has approx. 5,923 lines of XML)
 - Includes a model tightly coupled with its internal expression language
 - Contains different rules than QDM, so certain conventions were adopted in the QDM-based HQMF IG
 - Very Complex and Difficult to understand
 - Not the same language being used for Clinical Decision Support (CDS)

Standards & Interoperability Clinical Quality Framework Initiative

Scope of the Initiative

- To identify, define, and harmonize electronic standards that promote integration between CDS and eCQM in the areas of:
 - Metadata: Identify common metadata across the two domains and harmonize the identification and representation of that metadata.
 - Quality Information Data Model: Develop a quality information data model that supports the requirements of eCQM and CDS.
 - Logical Expression Language: Develop a common expression language that can be used to define both CDS and eCQM logical expressions
- To refactor existing CDS and eCQM standards to utilize the harmonized standards
- To the extent possible, pilot the standards

HQMF Framework

Current:	Near Future:	Long-Term Future:												
<table border="1"> <tr> <td>HQMF (Metadata, Data Criteria, Population Structure)</td> <td>QDM (Logic)</td> </tr> <tr> <td></td> <td>QDM (Data Model)</td> </tr> </table>	HQMF (Metadata, Data Criteria, Population Structure)	QDM (Logic)		QDM (Data Model)	<table border="1"> <tr> <td>HQMF (Metadata, Data Criteria, Population Structure)</td> <td>CQL (Logic)</td> </tr> <tr> <td></td> <td>QDM (Data Model)</td> </tr> </table>	HQMF (Metadata, Data Criteria, Population Structure)	CQL (Logic)		QDM (Data Model)	<table border="1"> <tr> <td>FHIR eCQM (Metadata, Data Criteria, Population Structure)</td> <td>CQL (Logic)</td> </tr> <tr> <td></td> <td>QUICK (Data Model)</td> </tr> </table>	FHIR eCQM (Metadata, Data Criteria, Population Structure)	CQL (Logic)		QUICK (Data Model)
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	QUICK (Data Model)													

Future Logical Expression Language

- Clinical Quality Language
- CQL Defined
 - A high-level, domain-specific language, focused on clinical quality, which can be turned into a syntax-independent, canonical representation of logic for clinical decision support
- Promises
 - Easier to write and understand than HQMF
 - Flexible
 - Plug and play models – e.g., QDM, QUICK
 - No requirement for expression language mapping to HQMF

Don't Worry – Be happy

- HQMF is **not** going away...at least, not now
- HQMF metadata, data criteria, population criteria and measure observation sections will still be used

HQMF Structure:

```

<qualityMeasureDocument>
  <!-- Metadata -->
  <!-- Data Criteria -->
  <!-- Population Criteria -->
  <!-- Measure Observations (if needed) -->
</qualityMeasureDocument>
    
```

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Reasons for Keeping HQMF

- Provides context for the measure through use of metadata
- Gives overall structure for a measure
- Offers cohesiveness by explanation of how populations relate to each other
- Supplies a way to transition to the new expression language
- Asserts the individual data points that need to be reported to CMS

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HQMF – High-level Changes

- Current:**
 - HQMF Contains Metadata
 - QDM Datatypes and Expression Language Mapped to HQMF Templates and Expression Language
 - 1 file: HQMF
- Future:**
 - HQMF Contains Metadata
 - HQMF & CQL Have Symbiotic Relationship:
 - Data points provided in HQMF to help with scoop and filter approach
 - Populations point to a .cql file and related definitions
 - 3 files: HQMF, CQL & ELM

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Picture Worth A Thousand Words

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CQL Expressions


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CQL File Structure

- Each library is a readable, plain text file – e.g., [CMS 146](#)
- May include other libraries by reference
- Logic in each file is potentially reusable by other libraries

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CQL Declarations



- **library** declaration
 - Defines the name and optional version of the library
- **using** declaration
 - Defines the data model(s) in use in file
- **include** declaration
 - Defines other libraries (CQL files) referenced
- **context** declaration
 - Defines the context for subsequent statements(e.g. Patient or Population)
 - Anchors references in the file
- **parameter** declaration
 - Defines available "inputs"
- **valueset** declaration
 - Defines user-friendly labels for value sets within the library

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Declaration Examples



```
// Library definition
library CMS146 version '2'

// Data model reference
using QDM version '4.2'


// Include Common library
include ChlamydiaScreening_Common version '2' as Common

// Define additional value sets for use within this artifact
valueset "Acute Pharyngitis": '2.16.840.1.113883.3.464.1003.102.12.1011'

// Establish patient context
context Patient
```

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Retrieve



- Retrieves information from the data layer
 - Respects current context (Patient, Population)
- Specified in terms of Data Model
 - `{ 'namedTypeSpecifier' }`
 - ["Encounter, Performed"]
 - ["Procedure, Order"]
 - ["Device, Applied"]
- Optionally filter by "primary" Code
 - ["Encounter, Inpatient": "Inpatient"]
- Optionally filter by specific Code
 - ["Encounter, Performed": severity in "Severities"]

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Data Types



- Simple Types
 - Boolean: *True* or *False*
 - String: *'female'*
 - Number: *16*
 - Date/Time: *@2015-05-01*
- Clinical Types
 - Quantities: *3 months, 6 'g/mL'* // UCUM is sometimes used but not always
 - Value Sets: *"Female Administrative Sex"*
- Structured Types
 - Model Classes: *["Encounter, Performed"]*
 - Tuples: *tuple { causeOfDeath: PE.cause , dateOfDeath: PE."start datetime" }*

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Data Types



- List Types
 - { 1, 2, 3, 4, 5 }
- Interval Types
 - Interval(today – 1 years, today)
 - Interval(@2013-01-01, date from(now))
 - Interval[D."onset datetime", P."incision datetime"]
 - Interval[start of MeasurementPeriod, Last(M."start datetime")]

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Simple Expressions



- Logic
 - *A and B*
 - *A and not (B or C)*
- Comparison
 - *A >= B*
 - *A <> B*
- Arithmetic
 - *A + B*
 - *A + (B * C)*

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Timing/Interval Operations



- Full set from QDM
 - starts before start, starts same day as
- Timing Phrases
 - starts 3 days before start
 - starts 3 days or less before start
 - Ends within 3 days of start
- Interval operators
 - meets, overlaps, during
- Boundary access
 - start of MeasurementPeriod
- Membership
 - X in interval[4, 6]

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Interval Operators



Operator/Inverse	Diagram	Interpretation
X same as Y Y same as X		start of X = start of Y and end of X = end of Y
X before Y Y after X		end of X < start of Y
X meets before Y Y meets after X		successor of end of X = start of Y
X overlaps before Y Y overlaps after X		start of X <= start of Y and start of Y <= end of X
X begins Y Y begun by X		start of X = start of Y and end of X <= end of Y
X included in (during) Y Y includes X		start of X >= start of Y and end of X <= end of Y
X ends Y Y ended by X		start of X >= start of Y and end of X = end of Y

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Date/Time Manipulation



- Date Construction
 - @2014-01-01T12:00:00-06:00
 - Date(2014, 1, 1, 12, 0, 0, -6)
 - convert '2014-01-01T12:00:00-06:00' to DateTime
- Date Arithmetic
 - today + 3 months - 2 days
 - months between start of X and end of X
 - difference in days between X and Y
 - duration in months of X
- Date/Time extraction
 - date of D // returns the date without the time
 - time of D // returns the time without the date
- Component extraction
 - month of D // returns the number of whole units

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List Operations



- Selector – builds a list
 - { 1, 2, 3, 4, 5 }
- Membership – determine if an element is in a list
 - X in { 1, 2, 3, 4, 5 }
 - { 1, 2, 3, 4, 5 } contains X
- Comparison
 - L = { 4, 5, 6 } // true if L has the same elements
 - L includes { 4, 5, 6 } // true if L includes each element
 - { 4, 5, 6 } included in L // inverse of includes
- Indexer/Position
 - { 4, 5, 6 }[1] // 1-based, evaluates to 4
- Count
 - Count({ 4, 5, 6 }) // evaluates to 3
- First/Last
 - First({ 4, 5, 6 }) // evaluates to 4

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Queries



- The “query” construct is used to perform various operations, including filtering, shaping, sorting, and relating results.
- Simplest query involves only a single source:

```
[“Encounter, Performed”: “Inpatient”] E
```

The alias “E” allows the source to be referenced anywhere within the query.

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Filtering




- A “where” clause returns only those elements that satisfy the condition:

```
[“Encounter, Performed”: “Inpatient”] E  
where E.“length of stay” >= 120 days
```

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Shaping



- The “return” clause allows the shape of the result to be described:


```
// Select elements to be returned
["Medication, Active": "Insulin"] M
return Tuple { dose: M.dose, frequency: M.frequency }

// Compute value for returned elements
["Procedure, Performed": "Laparoscopy"] P
return Tuple { result: P.result, duration: duration in days of Interval[P.start
datetime", P.stop datetime"]}

// Extract values
["Medication, Administered": "Warfarin"] M
return duration of months in Interval[M.start datetime", M.stop datetime"]
```

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Sorting




- “sort by” allows the results of a query to be ordered
- Sorting is evaluated after any “return”

```
// basic sort by
["Encounter, Performed": "Outpatient"] E
sort by E.facility location arrival datetime

// sort by with return
["Medication, Order": "Insulin"] M
return Tuple { startDate: date from (M.start datetime), dose: M.dose, refills: M.refills }
sort by M.startDate desc
```

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Filtering by Relationships




- Use the “with” keyword to introduce a filtering relationship:

```
// use of with
["Encounter, Performed": "Inpatient"] E
with ["Diagnosis": "Acute Pharyngitis"] D
such that Interval[D.start datetime", D.stop datetime"] in Interval[E.start
datetime", E.stop datetime"]

NOTE: This operation is known as a semi-join in database languages.
```

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Multi-source Queries




- Queries can specify multiple sources to be combined:

```
// multi-source query
define "Encounters with overlapping Warfarin and Parenteral Therapies" =
from Encounters E, // another query called Encounters
"Warfarin Therapy" W, // another query called Warfarin Therapy
"Parenteral Therapy" P // another query called Parenteral Therapy
where W.start datetime" in Interval[E.admission datetime", E.discharge
datetime"]
and P.start datetime" in Interval[E.admission datetime", E.discharge datetime"]
and duration in days of (Interval[W.start datetime", W.stop datetime"]) intersect
Interval[P.start datetime", P.stop datetime"]) >= 5
```

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Set Operations



- CQL supports standard set operations:
 - Union, intersection, and difference (except)


```
// union
["Encounter, Performed": "Outpatient"] EO
union ["Encounter, Performed": "Inpatient"] EI

//intersect
["Encounter, Performed": "Inpatient"] EI
where EI.length of stay" <=120 days
intersect ["Encounter, Performed": "Inpatient"] EI
ends during MeasurementPeriod

// difference (i.e., except)
["Encounter, Performed": "Provider Interaction"]
except ["Encounter, Performed": "Face-to-Face"]
```

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Conditional Expressions



- CQL supports an “if” expression, as well as a SQL-style “case” expression:

```
// conditional expression
if X > Y then X else Y

// selected case expression
case X
when 1 then 12
when 2 then 14
else 15
end

// general case expression
case when X > Y then X when Y > X then Y else 0 end
```

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Define Statements

- “define” statements can be used to break expressions into smaller chunks:

```
// encounters definition
define Encounters:
  ["Encounter, Performed": "Inpatient"] EI
  where Interval[EI."admission datetime", EI."discharge datetime"] during MeasurementPeriod

// encounters with dates definition
define "Encounters With Dates":
  Encounters E return Tuple { encounter: E, effectiveDate: Interval[E."admission datetime",
  E."discharge datetime"] }

// dates definition
define Dates:
  distinct "Encounters With Dates" X return X.effectiveDate
```

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Defining Functions

- CQL allows functions to be defined:

```
// function CumulativeDuration
define function CumulativeDuration(intervals: List<Interval<DateTime>>){
  return Sum((collapse intervals) X return duration in days of X)
}


// use function
Define Encounters: ["Encounter, Performed": "Inpatient"

define CMD:
  CumulativeDuration(Encounters E return Interval[E."admission datetime", E."discharge
  datetime"])
```

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Using Libraries

- Each library defines a name and optional version
- Elements referenced from a library must be qualified
- Library names must be unique within a repository
- Version number is optional for library definition
 - If none given, references cannot use a version
- Version is optional for include definition
 - If specified, that version must be used
 - If none given, the “most recent” version is used

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Questions?



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Standards Resources

- [Quality Data Model, v4.2](#)
- [Health Quality Measures Format \(HQMF\)](#)
- [QDM-based HQMF Implementation Guide \(IG\), R1.3](#)
- [Clinical Document Architecture \(CDA\)](#)
- [Consolidated CDA](#)
- [Quality Reporting Document Architecture \(QRDA\) Category I](#)
- [Quality Reporting Document Architecture \(QRDA\) Category III](#)
- [CMS QRDA IG \(PY 2016\)](#)

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Standards Resources

- [Clinical Quality Language \(CQL\)](#)
- [CQL-based HQMF IG](#)
- [Quality Improvement Core \(QICore\) IG](#)
- [Quality Information and Clinical Knowledge \(QUICK\)](#)
- [S&I Clinical Quality Framework](#)

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