

CQMR Service Suspension Memo

The Oregon Health Authority has implemented the Clinical Quality Metrics Registry (CQMR) for use in the CCO quality incentive metrics program and the Medicaid EHR Incentive Program. The CQMR has been a core component of OHA's efforts to ensure quality in the Medicaid program while supporting value-based payment and addressing provider burden. Specifically, [the CQMR was intended](#) to provide a streamlined solution for reporting, delivering efficiencies in data collection and reducing reporting burdens by leveraging national standards. **After careful consideration, in light of changing national standards, we have decided to suspend the CQMR service.**

OHA remains committed to the goals of collecting robust clinical data on outcomes measures to support health system transformation while reducing provider burden. Until the new national standards for quality measures are ready for implementation, however, the CQMR can't advance those goals, because we lack a reliable way to collect the necessary data from providers. The current climate makes suspending the CQMR service the best option for both the Agency and the stakeholders who report clinical quality metrics.

We find ourselves without a clear path to patient-level clinical quality data at this time. As discussed at the September CCO [Metrics TAG meeting](#), federal standards for EHR certification and electronic clinical quality measure (eCQM) reporting have changed. For ambulatory providers, vendor support for patient-level reporting is no longer required, dropping an enormous obstacle onto our old path. Although a new standard for patient-level eCQM reporting has been identified for future use, it is still in pilot testing for quality reporting, so a new path is still under construction. As long as we can't collect patient-level data for measure calculation and analysis, there is no advantage to using the CQMR rather than reverting to our previous methods of reporting. Simply put, we want to ensure any program we provide or requirements we make are both efficient and effective—and we can't confidently do that right now.

The suspension will not affect which measures are reported for 2020, but it will change how the measures are reported. For 2020 reporting, we simply will revert to our previous approaches to reporting.

- For EHR-sourced CCO quality incentive metrics, CCOs will use an Excel template that will be posted on the [CCO Metrics](#) page, along with the updated 2020 guidance documentation.
- Medicaid EHR Incentive Program eligible providers will report their eCQMs in the MAPIR system, as in prior years; further information will be added to the [Program Year 2020](#) page.

Authorized users will continue to be able to log in to the CQMR until the end of 2020. After that time, access to the CQMR will be unavailable until further notice. Our CQMR vendor, however, will maintain all of the configuration to support the service. In the future, the CQMR service could be restored and updated to new standards without having to repeat all of the work that has gone into implementation to date.

We are tremendously grateful to our many stakeholders who have invested considerable time, dedication, and partnership to the Clinical Quality Metrics Registry. Thank you for your time and expertise. We will continue working with you to identify a new path and move forward as the fog begins to lift from the reporting landscape.