|                                    | Requirements  | Electronic Clinical<br>Quality Measure (eCQM<br>Requirements |  |
|------------------------------------|---|--|--|
| report<br>eCQM<br>quarte<br>to pat | 4) eCQMs,<br>ting the same<br>As for all four (4)<br>ters as applicable<br>tient population/<br>tees offered. | 3<br>There are 16 available<br>eCQMs for CY2023.             | <ul> <li>Additional measures are available for<br/>submission based on patient<br/>population/services offered.</li> <li>1HCOs can submit associated eCQMs<br/>instead of chart-abstracted Measures to<br/>meet their PC measure requirements.</li> <li>2HCOsthat do not provide Obstetrical<br/>Services are not required to submit<br/>alternate chart-abstracted measures but<br/>may do so if they wish.</li> <li>3If unable to submit eCQMs, HCOs must<br/>request an extenuating circumstance<br/>exemption from TJC and will be required to<br/>submit three (3) chart-abstracted measures<br/>for all four (4) quarters of CY2023</li> </ul> |

## ORYX OVERVIEW: HAP & CAH

### Additional Information

#### General:

**NEW** Chart-abstracted and eCQM data submission dimelines were delayed in 2022 while a new Joint Commission Direct Data Submission (DDSP) was built to collect both chart-abstracted and eCQM data. The current timeline is available on website under "Supporting Materials". **NEW**: The Joint Commission has retired /removed chart-abstracted HBIPS-1.

The Joint Commission has not adopted the following CMS measures for 2023: SEP-1, Hospital Commitment to Health Equity, Sgrfeer Brocial Drivers of Health, Screen Positive ate for Social Drivers of Health.

#### **Extenuating Circumstances:**

<sup>3</sup> If an HCO is required but unable to submit eCQMs, the HCO msustamit an Extenuating Circumstanc Request (ECR) form from The information Commission prior to the 1Q2023 chart-abstracted deadline; those HCOs granted an ECR for submission of eCQMS are required to the stude (3) chart-abstracted measures for allour (4) quarters of CY2023.

HCOs requesting extenuating circumstance for chart-abstracted measures must submit an ECR form prior to the deadline of the deadline data submission deadline.

Eligible hospitals and Critica Access Hospitals (CAHs) must submit a new ECR formany subsequent years and in no case many eligible hospital or CAH be granted an exception from ore than five consecutive years.

Organizations request ECR forms via email to COORYX@jointcommission.org

#### Chart-Abstracted:

<sup>2</sup> Hospitalst

# 2023 ORYX <sup>®</sup> Performance Measure Reporting Requirements: Hospital Accreditation Program (HAP) and Critic al Access Hospital Accreditation (CAH) Program

|         | ty Type: Hospitals with 26 Licensed beds    |  |                        |                                     |                             |   |  |
|---------|---|--|------------------------|-------------------------------------|-----------------------------|---|--|
| Measure | Measure Short Name                          | 2023 ORYX<br>Measures                  | Measure<br>Data Source | Publicly Reported<br>(Quality Chec) | CMS Hospital IQR<br>CY 2023 | Additional Comments   |  |
| REQUIRE | IDHART-ABSTRACTED MEASURES                  |  |                        |                                     |                             |   |  |
| PC-01   | Elective Deliveyr                           | Requiredif HCO<br>provides OB services | Chart                  | Yes                                 | Yes                         | <sup>2</sup> HCOs that do not provide<br>Obstetrical services are not   |  |
| PC-02   | Cesarean Birth                              | Requireid HCO has                      | Chart                  | Yes                                 |                             | required to submit  |  |
| PC-05   | Exclusive Breast Milk Feedign               | > 300 live births                      | Chart                  | Yes                                 |                             | alternative chart-abstracted<br>measures but may do so if<br>they wish. |  |
| PC-06   | Unexpected Complication Term Newborns       | annually                               | Chart                  | Yes                                 |                             |   |  |
| OPTIONA | CHART-ABSTRACTED MEASURES                   |  |                        |                                     |                             |   |  |
| ED-1    | Median ED Arrival to ED Departure-Admit     | Optional                               | Chart                  | Yes                                 | No                          | If an organization submits  |  |
| ED-2    | Admit Decision Time to ED Departure-Admit   | Optional                               | Chart                  | Yes                                 | No                          | optional measures 1Q2023,   |  |
| HBIPS-2 | Physical Restraint                          | Optional                               | Chart                  | Yes                                 |                             | they are required to submit   |  |
| HBIPS-3 | Seclusion                                   | Optional                               | Chart                  | Yes                                 |                             | those measures for the remainder of the calendar year.                  |  |
| HBIPS-5 | Antipsychotic Medications at Discharge      | Öptional                               | Chart                  | Yes                                 |                             |   |  |
| OP-18   | Median ED Arrival-ED Departure at Discharge | Optional                               | Chart                  | No                                  | OQR                         | , out.  |  |
| OP-23   | Head CT or MRI Scan Results-Stroke          | Optional                               | Chart                  | No                                  | OQR                         |   |  |
| IMM-2   | Influenza Immunization                      | Optional                               | Chart                  | Yes                                 |                             |   |  |

2023 ORYX ®

2023 ORYX <sup>®</sup> Performance Measure Reporting Requirements: Hospital Accreditation Program (HAP) and Critic al Access Hospital Accreditation (CAH) Program

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|               | Measure Sho  | rt Name  | 2023 ORYX<br>Measures | Measure Data<br>Source | Publicly Reported<br>(Quality Chec) | CMS Hospital<br>IPFQR<br>CY 2023 | Additional Comments   |
|---------------|--|----------|-----------------------|------------------------|-------------------------------------|----------------------------------|---|
|               | CHART-ABSTRACTED N                                     | IEASURES |                       |                        |                                     |                                  |   |
| IBIPS-2       | Physical Restraint                                     |          | Required              | Chart                  | Yes                                 | Yes                              |   |
| BIPS-3        | Seclusion  |          | Required              | Chart                  | Yes                                 | Yes                              |   |
| IBIPS-5       | Antipsychotic Medicatio                                |          | Required              | Chart                  | Yes                                 | Yes                              |   |
| MM-2<br>SUB-2 | Influenza Immuniz <b>ti</b> on<br>Alcohol Use Interven |          |                       |                        | Yes                                 | Yes                              | If an organization submits<br>optional measures 1Q2023<br>they are required to subm<br>those measures for the<br>remainder of the calendar ye |
|               |  |          |                       |                        |                                     |                                  |   |
|               |  |          |                       |                        |                                     |                                  |   |
|               |  |          |                       |                        |                                     |                                  |   |
|               |  |          |                       |                        |                                     |                                  |   |
|               |  |          |                       |                        |                                     |                                  |   |
|               |  |          |                       |                        |                                     |                                  |   |
|               |  |          |                       |                        |                                     |                                  |   |
|               |  |          |                       |                        |                                     |                                  |   |