



MDPCP eCQM Reporting

In this user guide, you will find information about eCQM reporting requirements and processes for 2025 MDPCP eCQMs reporting available via the CRISP Health Information Exchange (HIE) Portal.

General Information

Eligible Professionals (EPs) are required to submit eCQMs via CRISP for annual reporting. MDPCP practices must submit the measures manually via the MDPCP eCQMs tab on the CRISP HIE Portal. MDPCP practices must report three eCQMs:

- CMS 165v13: Controlling High Blood Pressure
- CMS 122v13: Diabetes: Hemoglobin A1c Poor Control
 - **Please Note: This is considered a reverse measure (lower the score, better the performance)**
- CMS 2v14: Screening for Depression and Follow-Up Plan

An added variable for CMS 2v14 measures is **denominator exceptions**. A denominator exception is any condition that should remove a patient, procedure, or unit of measurement from the denominator of the performance rate only if the numerator criteria are not met. A denominator exception allows for adjustment of the calculated score for those providers with higher risk populations. A denominator exception also provides for the exercise of clinical judgment and should be specifically defined where capturing the information in a structured manner fits the clinical workflow. Denominator exception cases are removed from the denominator.

That variable is different than a **denominator exclusion**. A denominator exclusion is a case that should be removed from the measure population and denominator before determining if numerator criteria are met. Denominator exclusions are used in proportion and ratio measures to help narrow the denominator.

Important Dates for Submission of 2025 MDPCP eCQMs

Measurement Period:	01/01/2025– 12/31/2025
Reporting can begin:	01/01/2026
Final submission deadline:	03/31/2026

User Credentialing

Users that have current access to the HIE portal and have access to the “MDPCP eCQMs” tab, will continue to have access to the tab. If you would like to request access please notify your HIE Administrator to add it to your account. If the asset is not available for the HIE Administrator in the HIE Portal, they should send an email to their CRISP Outreach Representative.



CRISP

PLEASE NOTE: CRISP cannot guarantee that users requesting access after 3/21/26 will be given appropriate permissions prior to the 3/31/26 submission deadline.

eCQM Entry

- Log into the CRISP HIE Portal: portal.crisphealth.org



Log in to CRISP Identity

[Reset your password?](#)

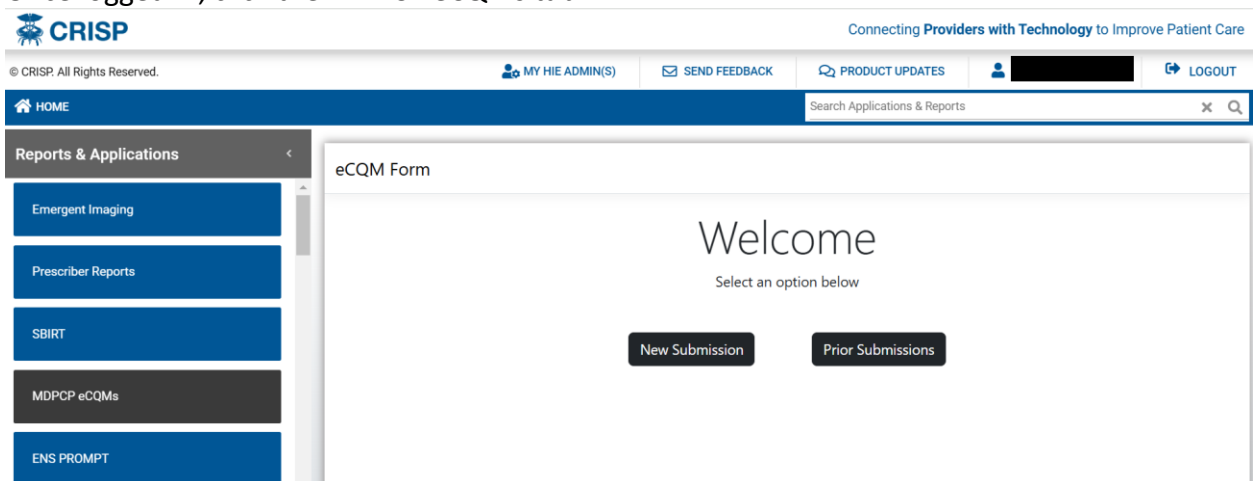
Warning: CRISP policy prohibits username and password sharing.
Violation could result in account termination.

Next

Questions or Concerns? Please contact the CRISP Customer Care Team at support@crisphealth.org or (877) 952-7477.

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1. Once logged in, click the MDPCH eCQMs tab



2. At the Welcome screen, select either “New Submission” to create a new report, or “Prior Submissions” to see your submission history over the years.



- After clicking the “New Submission” tab, please enter your MDPCP ID without the track ID. For example, if your ID is T2MD0000, please enter MD0000.

The screenshot shows the CRISP web application interface. The top navigation bar includes the CRISP logo, the tagline "Connecting Providers with Technology to Improve Patient Care", and links for "MY HIE ADMIN(S)", "SEND FEEDBACK", "PRODUCT UPDATES", and "LOGOUT". A search bar for "Search Applications & Reports" is also present. The left sidebar, titled "Reports & Applications", lists several options: "Emergent Imaging", "Prescriber Reports", "SBIRT", "MDPCP eCQMs" (which is highlighted), and "ENS PROMPT". The main content area is titled "eCQM Form" and "MDPCP eCQM Submission". It contains a "Manual Submission" section with instructions: "Enter your practice ID's last six alpha-numeric characters, i.e., MD0000. Do not enter the first two alpha-numeric characters, i.e., T1." Below this is a text input field labeled "MDPCP Practice ID" and a "Submit" button.

- The name and address of your practice should appear once you hit submit. Confirm that the practice details that appear are correct. If they are not correct, re-enter the MDPCP ID. (If the name of the practice is correct but the details in the address are wrong, please proceed with reporting but make a note and contact your CRISP Outreach Representative.

This screenshot shows the same CRISP web application interface as the previous one, but after the submission. The "MDPCP eCQM Submission" form now displays "Practice Details". These details include: "MDPCP ID" (partially redacted), "Practice Name" (redacted), "Alternate Name" (redacted), "Address" (redacted), "City" (redacted), and "Zip" (redacted). It also shows "Last Submission" as "No submissions received to date." and "Submitted By" as a redacted field. A confirmation message states: "Please confirm you have the correct practice before proceeding." Below this, a note says: "If any details look incorrect, but this is the correct facility, please send corrections to [support@crispealth.org](\"mailto:support@crispealth.org\")." At the bottom of the form are two buttons: a green "Continue" button and a grey "Re-enter ID" button.



5. Select Report Type and decide if you are reporting the three eQMs as a practice, or individual NPIs.

The screenshot shows the CRISP web application interface. On the left is a sidebar titled 'Reports & Applications' with a list of links: MDPCP eQMs, HIE Admin Tool, Referral Portal CBO, Referral Portal MCO, COVID Lab Tools - No Patient, Provider Directory, and Medically. The main content area has a header with 'CRISP' and 'Connecting Providers with Tec'. Below the header, there's a 'Report Type' section with a dropdown menu set to 'Practice'. Above this section, there's a warning box: 'Be sure to submit your entries before leaving this page! HIE Portal sessions end after 15 minutes of inactivity, at which point all unsaved work will be lost. Keep the following in mind while reporting each measure: The denominator must be equal to the initial patient population, The numerator must not be greater than the denominator minus denominator exclusions, Denominator exceptions must be less than the denominator, Prevent incomplete data submissions - capture all necessary data points for each quality measure to prevent incomplete or inaccurate calculations, Prevent data extraction issues by confirming your reported data matches what is in your EHR before final submission.'

6. To report as a practice, please submit data for all measures: CMS 122v12 (Diabetes HbA1c Poor Control), CMS 165v12 (Controlling High Blood Pressure), and CMS 2v13 (Screening for Depression and Follow-Up Plan). Hit the Submit button once data entry is complete.

The screenshot shows the data entry form for three eQMs. Each eQM has a title, a description, and four input fields: Initial Patient Population, Numerator, Denominator, and Denominator Exclusions. The Denominator field has a note: 'Denominator should be equal to the Initial Patient Population.'

CMS 2v14 ⓘ
Preventive Care and Screening: Screening for Depression and Follow-Up Plan

Initial Patient Population
[Input Field]

Numerator [Input Field] Denominator [Input Field] Denominator Exclusions [Input Field] Denominator Exceptions [Input Field]

Denominator should be equal to the Initial Patient Population.

CMS 122v13 ⓘ
Diabetes HbA1c Poor Control
A lower calculated performance rate for this measure indicates better clinical care or control

Initial Patient Population
[Input Field]

Numerator [Input Field] Denominator [Input Field] Denominator Exclusions [Input Field]

Denominator should be equal to the Initial Patient Population.

CMS 165v13 ⓘ
Controlling High Blood Pressure

Initial Patient Population
[Input Field]

Numerator [Input Field] Denominator [Input Field] Denominator Exclusions [Input Field]

Denominator should be equal to the Initial Patient Population.

- If entering data for individual providers, select the “Individual” Report Type. Type in the provider NPI, and if valid, the name of the provider will appear on the right-hand side.

Be sure to submit your entries before leaving this page!

HIE Portal sessions end after 15 minutes of inactivity, at which point all unsaved work will be lost.

Keep the following in mind while reporting each measure:

- The denominator must be equal to the initial patient population
- The numerator must not be greater than the denominator minus denominator exclusions
- Denominator exceptions must be less than the denominator
- Prevent incomplete data submissions - capture all necessary data points for each quality measure to prevent incomplete or inaccurate calculations
- Prevent data extraction issues by confirming your reported data matches what is in your EHR before final submission

Provider #1

Report Type

Are you reporting measures as an individual or for your practice?

Individual

NPI

Ten digit NPI

This NPI belongs to:

Enter an NPI to validate.

According to the CRISP Provider Directory.

- If submitting data for more than one NPI, select “Add Provider” at the bottom of the screen. Once all providers have had their data entered, hit “Submit.”

Numerator

Denominator

Denominator Exclusions

Denominator should be equal to the Initial Patient Population.

Add provider

If submitting individual measures, you may report for more than one provider.

Submit

Note: If multiple submissions for a practice or individual are received, the most recent submission will be counted.



9. If the Submission does not go through, please review each measure for the logic noted in the screenshot below and correct any errors before trying to submit again.

Report Type
Are you reporting measures as an individual or for your practice?

CMS 2v13 ⓘ
Preventive Care and Screening: Screening for Depression and Follow-Up Plan
Initial Patient Population

Numerator	Denominator	Denominator Exclusions	Denominator Exceptions
<input type="text" value="385"/>	<input type="text" value="500"/>	<input type="text" value="0"/>	<input type="text" value="0"/>

Denominator should be equal to the Initial Patient Population.

CMS 122v12 ⓘ
Diabetes HbA1c Poor Control
Initial Patient Population

Numerator	Denominator	Denominator Exclusions
<input type="text" value="100"/>	<input type="text" value="800"/>	<input type="text" value="0"/>

Denominator should be equal to the Initial Patient Population.

CMS 165v12 ⓘ
Controlling High Blood Pressure
Initial Patient Population

Numerator	Denominator	Denominator Exclusions
<input type="text" value="450"/>	<input type="text" value="650"/>	<input type="text" value="0"/>

Denominator should be equal to the Initial Patient Population.

Submit Note: If multiple submissions for a practice or individual are received, the most recent submission will be counted.

10. Other Important things to note:

- If data was previously entered, the most recent submission at the time the portal closes is the one that will be considered final. You cannot enter some data on one date and additional data on a later date and expect the two sets of data to be added together. If more than one person from your organization has access to the MDPCP eQMs tab, please coordinate so that only one person submits data per practice.
- If your EHR already removes Denominator Exclusions and Denominator Exceptions from the Denominator, you will have to add them back in so that your Denominator equals the Initial Patient Population. Please contact your MDPCP coach if you have any questions about this.
- All fields must be populated so even if the exclusions and exceptions are zeros, you must enter "0" in that field for the form to work properly.



11. After hitting submit (for either a group or an individual submission) you will be taken to a review page. Please carefully review your submission, and if correct, please check the “I attest” button and click submit. To view “Column Definitions” hover over the light blue column title. Column names have been collapsed to help with printing.

Practice ID: MD [REDACTED]

ID	Type	2PP	2N	2D	2DExl	2DExp	122PP	122N	122D	122DExl	165PP	165N	165D	165DExl
MD [REDACTED]	Practice	500	385	500	0	0	800	100	800	0	650	450	650	0

- ☒ I attest that the information submitted is true, accurate, and includes the entire practice patient population (not only MDPCP beneficiaries). I also acknowledge that this data will be used to calculate my practice's MDPCP eCQM performance rate.

Submit

Go back

Search Applications & Reports x Q

eCQM Form

My Submissions: MDPCP

New

For a printable version of this table click [here](#).

CMS 2 Denominator Exclusions

ID	Type	NPI	2PP	2N	2D	2DExl	2DExp	122PP	122N	122D	122DExl	165PP	165N	165D	165DExl	Date
MD [REDACTED]	Practice		500	385	500	0	0	800	100	800	0	650	450	650	0	12/9/2024 5:57:47 PM

12. After hitting submit, all users will be taken to a summary page of all submissions submitted by that user. Under the “New” button in the screenshot below, please see the sentence “For a printable version of this table, click here.”

eCQM Form

My Submissions: MDPCP

New

For a printable version of this table click [here](#).

ID	Type	NPI	2PP	2N	2D	2DExl	2DExp	122PP	122N	122D	122DExl	165PP	165N	165D	165DExl	Date
MD [REDACTED]	Practice		500	385	500	0	0	800	100	800	0	650	450	650	0	12/9/2024 5:57:47 PM



13. Users have the option to print their submissions or download them as a CSV. All users must print a copy of their submissions, share with practices or supervisors for verification, and save the copy for auditing purposes.

ID	Type	NPI	2PP	2N	2D	2DEx	2DExp	122PP	122N	122D	122DEx	165PP	165N	165D	165DEx	Date
MD0710	Practice		500	385	500	0	0	800	100	800	0	650	450	650	0	12/9/2024 5:57:47 PM

14. Once users complete their submission, they will receive an email confirmation from CRISP

MDPCP PY2024 eCQM Data Submission Confirmation

From: donotreply.ecqm@crisphealth.org
To: [REDACTED]
Subject: MDPCH PY2024 eCQM Data Submission Confirmation

Attachments: MDPCH - CRISP eCQM Form.csv (526 bytes)

Your PY2024 eCQM data has been successfully submitted to the CRISP eCQM portal. The MDPCH Management Office will submit your eCQM data to CMS on your behalf. Please ensure you keep a copy of this eCQM data for your records.

Sincerely,
The MDPCH Management Office

The contents of this e-mail and any attachments are intended solely for the use of the named addressee(s) and may contain confidential and/or privileged information. Any unauthorized use, copying, disclosure, or distribution of the contents of this e-mail is strictly prohibited. If you are not the intended recipient, please notify the sender immediately and delete this email. Thank you.

Bulk eCQM Entry

1. Go through the 'New Submission' process. Scroll down below 'Manual Submission'. Click the hyperlink to download the excel template.

Bulk Submission

- Only "Practice" submissions are accepted in bulk. If you are submitting as an individual, please use the manual submission form above.
- A template for bulk submission can be downloaded [here](#).
- The uploaded file must be in .csv format with the appropriate headings found in the template.
- Column names have been shortened for ease of use. Please refer to the user guide for complete names and definitions of each column.
- Keep the following in mind while reporting each measure:
 - The denominator must be equal to the initial patient population
 - The numerator must not be greater than the denominator minus denominator exclusions
 - Denominator exceptions must be less than the denominator
 - Prevent incomplete data submissions - capture all necessary data points for each quality measure to prevent incomplete or inaccurate calculations
 - Prevent data extraction issues by confirming your reported data matches what is in your EHR before final submission

Please choose file to upload. No file chosen

2. Open the excel template from your downloads. Please do not change the template or format. Enter the measure data and then save the file.



ID	2PP	2N	2D	2DExl	2DExp	122PP	122N	122D	122DExl	165PP	165N	165D	165DExl

3. Click 'Choose File' and select your saved file. Once it is selected, click the blue 'Upload' button.

Bulk Submission

- Only "Practice" submissions are accepted in bulk. If you are submitting as an individual, please use the manual submission form above.
- A template for bulk submission can be downloaded [here](#).
- The uploaded file must be in .csv format with the appropriate headings found in the template.
- Column names have been shortened for ease of use. Please refer to the user guide for complete names and definitions of each column.
- Keep the following in mind while reporting each measure:
 - The denominator must be equal to the initial patient population
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 - Denominator exceptions must be less than the denominator
 - Prevent incomplete data submissions - capture all necessary data points for each quality measure to prevent incomplete or inaccurate calculations
 - Prevent data extraction issues by confirming your reported data matches what is in your EHR before final submission

Please choose file to upload. No file chosen

If an update to a previous submission for 2025 is required then the submitter must input the correct information for all the measures, including for the measures not needing an update. The last submission per MDPCP ID is final.

If you are experiencing any issues with logging in or submitting data, please contact the CRISP Outreach Representative. Please be sure to indicate that it is for MDPCP eCQMs on the "MDPCP eCQMs" tab. If you are having challenges with how to capture the data from your Electronic Health Record, or what constitutes an appropriate data point (e.g., Initial Patient Population), please contact the MDPCP Office of Advanced Primary Care at mdh.pcmode@maryland.gov or your practice Coach.