



October 8, 2020

Dear Colleague:

The Joint Commission is excited to share information about the 2021 ORYX Performance Measurement program. During 2020, hospitals used the Direct Data Submission Platform (DDSP) for submission of electronic clinical quality measure (eCQM) data directly to The Joint Commission and were given access to the chart-abstracted module on DDSP. Continuing forward in 2021, organizations have one place to submit both eCQM and chart-abstracted data. The Direct Data Submission Platform eases the burden and expense of submission and empowers organizations with data for quality improvement.

As communicated in September, the Joint Commission has streamlined and simplified ORYX policy requirements effective CY2021. The new modified policies integrate an organization's E-App data to better define the applicable ORYX Policy. The ORYX Policies have been consolidated within the Direct Data Submission Platform (DDSP) to determine each organization's associated ORYX requirements. An HCO's ORYX requirements will be calculated by the number of Licensed Beds and/or volume of Outpatient Visits, instead of average daily census.

Joint Commission 2021 ORYX Requirements for Accreditation Purposes for eCQM and/or Chart-Abstracted data submission include the following:

- Acute Care Hospitals having Licensed Beds ≥ 26 OR Outpatient Visits $\geq 50,000$ and 300+ live births annually submit four chart-abstracted measures (PC-01, PC-02, PC-05 and PC-06), and select a minimum of 4 eCQMs, reporting the same eCQMs for two self-selected quarters. There are twelve eCQMs available.
- Acute Care Hospitals having Licensed Beds ≥ 26 OR Outpatient Visits $\geq 50,000$ and 1-299 live births annually submit one chart-abstracted measures (PC-01), and select a minimum of 4 eCQMs, reporting the same eCQMs for two self-selected quarters. There are twelve eCQMs available.
- Acute Care Hospitals having Licensed Beds ≥ 26 OR Outpatient Visits $\geq 50,000$ and do not provide obstetrical service do not submit chart-abstracted measures, and select a minimum of 4 eCQMs, reporting the same eCQMs for two self-selected quarters. There are twelve eCQMs available.
- Hospitals having Licensed Beds < 26 AND Outpatient Visits $< 50,000$ (small hospitals), are required to submit any combination of three (3) eCQMs and/or chart-abstracted measures applicable to patient population/services offered.

- Critical Access Hospitals (CAHs) are required to submit any combination of three (3) eQMs and/or chart-abstracted measures applicable to patient population/services offered.
- Freestanding Psychiatric Hospitals continue to report on the four required Hospital-Based Inpatient Psychiatric Services (HBIPS) measures (HBIPS-1, HBIPS-2, HBIPS-3, and HBIPS-5).
- Free-standing Children's Hospitals, Long Term Acute Care Hospitals (LTACHs), Inpatient Rehabilitation Facilities (IRFs) and HCOs participating in CMS PPS-Exempt Cancer Hospital Quality Reporting (PCHQR) program reporting requirements remain suspended.
- The Joint Commission has eliminated "self-reporting" of ORYX data. Hospitals that self-reported performance measurement data in the past are now expected to submit their data, starting CY2021, to the Direct Data Submission Platform (DDSP).

For more information and a detailed list of all measures, visit the Measurement section of The Joint Commission website at:

<https://www.jointcommission.org/measurement/reporting/accreditation-oryx/>

For questions, please contact us at hcooryx@jointcommission.org

Thank for your continued partnership with The Joint Commission toward our shared goal of quality improvement through performance data measurement.