

Hospital Inpatient Quality Reporting Program Denominator Declaration

Please Note: A data collection tool available within the Hospital Quality Reporting system via the Hospital Quality Reporting Secure Portal allows hospitals to complete and submit their denominator declaration data. This document is a representation of the text contained in the denominator declaration data form and is for reference purposes only.

Denominator Declaration

Discharge Quarter

If your total cases are 5 or less for your reporting quarter please use the drop down below to identify Zero Denominator Declaration or Case Threshold Exemptions.

[*] Select if there was no denominator patient population for the certified measure for the selected date range.

[**] Enter 0-5 for quarter selection. Leave blank if eCQM is to be submitted.

Successful QRDA production submissions that meet the program requirements for the selected reporting quarter will override corresponding denominator declaration entries and are displayed on the Program Credit Report and Export.

Measure	Zero Denominator Declaration*/Case Threshold Exemption**
STK-2	Discharge on Antithrombotic Therapy <input type="text"/>
STK-3	Anticoagulation Therapy for Atrial Fibrillation/Flutter <input type="text"/>
STK-5	Antithrombotic Therapy by End of Hospital Day 2 <input type="text"/>
VTE-1	Venous Thromboembolism Prophylaxis <input type="text"/>
VTE-2	Intensive Care Unit Venous Thromboembolism Prophylaxis <input type="text"/>
Safe Use of Opioids	Safe Use of Opioids – Concurrent Prescribing <input type="text"/>
ePC-02	Cesarean Birth <input type="text"/>
ePC-07	Severe Obstetrics Complications <input type="text"/>
HH-01	Hospital Harm – Severe Hypoglycemia Measure <input type="text"/>
HH-02	Hospital Harm – Severe Hyperglycemia Measure <input type="text"/>
HH-ORAE	Hospital Harm – Opioid-Related Adverse Event <input type="text"/>
GMCS	Global Malnutrition Composite Score <input type="text"/>

[I'm ready to submit](#)

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