

## Developer Organization Name

- The Garage Solutions, LLC

## Certification Details

### Product Name and Version Number:

- Bridge eCQM v1.0.0

### Certification Date:

- 4/18/2022

### Certified Health IT Product List (CHPL) ID:

- 15.04.04.1520.Brid.05.00.0.220418

### Certified Measure Criteria:

- §170.315 (d)(1)
- §170.315 (d)(2)
- §170.315 (d)(3)
- §170.315 (d)(5)
- §170.315 (d)(7)
- §170.315 (d)(9)
- §170.315 (d)(12)
- §170.315 (d)(13)
- §170.315 (g)(4)
- §170.315 (g)(5)
- §170.315 (c)(1)
- §170.315 (c)(2)
- §170.315 (c)(3)

### Certified Clinical Quality Measures

- CMS 2 v12 – Preventative Care and Screening for Depression and Follow-Up
- CMS 22 v11 – Preventative Care and Screening for High Blood Pressure and Follow-Up Documented
- CMS 50 v11 – Closing the Referral Loop: Receipt of Specialist Report
- CMS 69 v11 – Preventative Care and Screening: Body Mass Index (BMI) Screening and Follow-Up Plan
- CMS 122 v11 – Diabetes: Hemoglobin A1c (HbA1c) Poor Control (>9%)
- CMS 124 v11 – Cervical Cancer Screening
- CMS 125 v11 – Breast Cancer Screening

- CMS 127 v11 – Pneumococcal Vaccination Status for Older Adults
- CMS 130 v11 – Colorectal Cancer Screening
- CMS 131 v11 – Diabetes: Eye Exam
- CMS 134 v11 – Diabetes: Medical Attention for Nephropathy
- CMS 137 v11 – Initiation and Engagement of Substance Use Disorder Treatment
- CMS 138 v11 – Preventative Care and Screening: Tobacco Use: Screening and Cessation Intervention
- CMS 139 v11 – Falls: Screening for Fall Risk
- CMS 146 v11 – Appropriate Treatment for Pharyngitis
- CMS 147 v12 – Preventative Care and Screening: Influenza Immunization
- CMS 149 v11 – Dementia: Cognitive Assessment
- CMS 155 v11 – Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents
- CMS 156 v11 – Use of High-Risk Medications in Older Adults
- CMS 159 v11 – Depression Remission at Twelve Months
- CMS 165 v11 – Controlling High Blood Pressure
- CMS 347 v6 – Statin Therapy for the Prevention and Treatment of Cardiovascular Disease

## Additional Software relied upon for certification criteria:

- None

## ONC Disclaimer

*"This Health IT Module is 2015 Edition compliant and has been certified by an ONC-ACB in accordance with the applicable certification criteria adopted by the Secretary of Health and Human Services. This certification does not represent an endorsement by the U.S. Department of Health and Human Services."*

## Cost & Fees Associated:

Capability	Description of Capability	Costs or Fees*
<p><b>eCQM measure reporting</b></p>	<p>The Bridge 5.3.0 version specifically allows for the integration of QRDA formats QRDA I and EMR integration of clinical data to allow and produce the required summary views as well as exportable QRDA I and QRDA III formats for eCQM reporting submission.</p> <p>The certified eCQM measures are:</p> <ul style="list-style-type: none"> <li>- CMS2v12 – Preventative Care and Screening for Depression and Follow-Up</li> <li>- CMS22v11 – Preventative Care and Screening for High Blood Pressure and Follow-Up Documented</li> <li>- CMS50v11 – Closing the Referral Loop: Receipt of Specialist Report</li> <li>- CMS69v11 – Preventative Care an Screening: Body Mass Index (BMI) Screening and Follow-Up Plan</li> <li>- CMS122v11 – Diabetes: Hemoglobin A1c (HbA1c) Poor Control (&gt;9%)</li> <li>- CMS124v11 – Cervical Cancer Screening</li> <li>- CMS125v11 – Breast Cancer Screening</li> <li>- CMS127v11 – Pneumococcal Vaccination Status for Older Adults</li> <li>- CMS130v11 – Colorectal Cancer Screening</li> <li>- CMS131v11 – Diabetes: Eye Exam</li> <li>- CMS134v11 – Diabetes: Medical Attention for Nephropathy</li> </ul>	<p>Garage Solutions LLC (“Garage”) agrees to stand-up Bridge v5.3.0 and provide certified reporting for <b>Electronic Clinical Quality Measures</b>, hereby referred to as eCQMs for the Customer:</p> <ul style="list-style-type: none"> <li>o The reporting includes running all eCQM logic against the Customer’s attributed patient population.</li> <li>o The reporting includes running all eCQM logic against the Customer’s non-attributed patient population in the <i>Care Gaps Application</i> only. <ul style="list-style-type: none"> <li>▪ Any additional logic requests will be reviewed by the Garage which may/may not result in additional ASRs/Costs to be determined by the Garage and reviewed with the Customer in a timely manner.</li> </ul> </li> </ul> <p>The cost of providing this additional feature is as below:</p> <ul style="list-style-type: none"> <li>o \$1.00 per patient per month for configuration in live platform through the term of the Original Agreement</li> </ul> <p>If the customer wants to bring in these patients into any other Bridge apps for care management, analytics, etc., they will fall under the contract pricing for attributed lives.</p>

	<ul style="list-style-type: none"><li>- CMS137v11 – Initiation and Engagement of Substance Use Disorder Treatment</li><li>- CMS138v11 – Preventative Care and Screening: Tobacco Use: Screening and Cessation Intervention</li><li>- CMS139v11 – Falls: Screening for Fall Risk</li><li>- CMS146v11 – Appropriate Treatment for Pharyngitis</li><li>- CMS147v12 – Preventative Care and Screening: Influenza Immunization</li><li>- CMS149v11 – Dementia: Cognitive Assessment</li><li>- CMS155v11 – Weight Assessment and Counseling for Nutrition and Physical Activity for Children/Adolescents</li><li>- CMS156v11 – Use of High-Risk Medications in Older Adults</li><li>- CMS159v11 – Depression Remission at Twelve Months</li><li>- CMS165v11 – Controlling High Blood Pressure</li><li>- CMS347v6 – Statin Therapy for the Prevention and Treatment of Cardiovascular Disease</li></ul>	
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*\*Types of costs or fees that a user may be required to pay to purchase, license, implement, maintain, upgrade, use, or otherwise enable and support the use of the implementation or use of the capability -OR- in connection with the data generated in the course using the capability*