

Long-Term Care Hospital (LTCH) Quality Reporting Program (QRP) Measures Information Archive

September 8, 2020

LTCH QRP Measure Calculations and Reporting User's Manual V3.1.1

The Long-Term Care Hospital (LTCH) Quality Reporting Program (QRP) Measure Calculations and Reporting User's Manual Version 3.1.1 and associated risk adjustment appendix are now available in the **Downloads** section below.

This document serves as an addendum that communicates quality measure updates to the LTCH QRP Measure Calculations and Reporting User's Manual Version 3.1. The LTCH QRP Measure Calculations and Reporting User's Manual V3.1.1 is effective on October 1, 2020 and provides information on measure-related changes in a change table format in lieu of a complete update to the overall manual. Additionally, we have included the updated Risk Adjustment Appendix File for the LTCH Quality Reporting Program Measures Calculations and Reporting User's Manual V3.1.1, which contains the risk-adjustment values used to calculate the risk-adjusted quality measures.

We would like to describe several changes to the quality measure specifications, including removal of the Percent of Residents or Patients with Pressure Ulcers That Are New or Worsened measure and updates to the exclusion criteria for the LTCH Functional Outcome and Discharge to Community measures.

Specification update to the LTCH Functional Outcome Measure: Change in Mobility Among Patients Requiring Ventilator Support:

1. Exclusion criteria: The age exclusion criterion for this measure has been updated from 21 years to 18 years, such that any patient younger than 18 years of age will be excluded from measure calculations.

Specification update for the LTCH Discharge to Community Measure:

1. Exclusion criteria: This measure has been updated to exclude patients who had a long-term nursing facility (NF) stay in the 180 days preceding their hospitalization and LTCH stay, with no intervening community discharge between the long-term NF stay and qualifying hospitalization.

June 17, 2020

Revised: FY 2022 LTCH QRP APU Table for Reporting Assessment-Based Measures and SPADES

The Centers for Medicare & Medicaid Services (CMS) is delaying the release of the Long-Term Care Hospital (LTCH) Continuity Assessment Record and Evaluation (CARE) Data Set (LCDS) V5.0. This delay is due to the COVID-19 Public Health Emergency (PHE). As a

result, the implementation of the FY 2022 LTCH Quality Reporting Program (QRP) Annual Payment Update (APU) Table for Reporting Assessment-Based measures and Standardized Patient Assessment Data Elements (SPADES) is revised. This document is found in the **Downloads** section below.

The items indicated in the column for Data Collection Periods Q1, Q2, and Q3 of 2020 using the LTCH Continuity Assessment Record and Evaluation Data Set (LCDS) V4.0 will continue to be required for FY 2022 APU calculation in Q4 2020. This will continue until October 1st of the year that is at least one fiscal year after the end of the PHE.