

Measure Applications
Partnership

PAC/LTC Workgroup Web
Meeting

February 9, 2015



NATIONAL
QUALITY FORUM

Meeting Objectives

- Orientation to MAP Off-Cycle Review Process
- Overview of the IMPACT Act Reporting Requirements
- Clarify the CMS Approach to Standardizing Measures Under the IMPACT Act
- Review measures under consideration

MAP Post-Acute Care/Long-Term Care Workgroup Membership

Workgroup Chair: Carol Raphael, MPA

Organizational Members

Aetna	Joseph Agostini, MD
American Medical Rehabilitation Providers Association	Suzanne Snyder Kauserud, PT
American Occupational Therapy Association	Pamela Roberts, PhD, OTR/L, SCRES, CPHQ, FAOTA
American Physical Therapy Association	Roger Herr, PT, MPA, COS-C
American Society of Consultant Pharmacists	Jennifer Thomas, PharmD
Caregiver Action Network	Lisa Winstel
Johns Hopkins University School of Medicine	Bruce Leff, MD
Kidney Care Partners	Allen Nissenson, MD, FACP, FASN, FNKF
Kindred Healthcare	Sean Muldoon, MD
National Consumer Voice for Quality Long-Term Care	Robyn Grant, MSW
National Hospice and Palliative Care Organization	Carol Spence, PhD
National Pressure Ulcer Advisory Panel	Arthur Stone, MD
National Transitions of Care Coalition	James Lett, II, MD, CMD
Providence Health & Services	Dianna Reely
Visiting Nurses Association of America	Margaret Terry, PhD, RN

MAP Post-Acute Care/Long-Term Care Workgroup Membership

Subject Matter Experts

Louis Diamond, MBChB, FCP(SA), FACP, FHIMSS
Gerri Lamb, PhD
Marc Leib, MD, JD
Debra Saliba, MD, MPH
Thomas von Sternberg, MD

Federal Government Members

Centers for Medicare & Medicaid Services (CMS)	Alan Levitt, MD
Office of the National Coordinator for Health Information Technology (ONC)	Elizabeth Palena Hall, MIS, MBA, RN
Substance Abuse and Mental Health Services Administration (SAMHSA)	Lisa C. Patton, PhD

MAP Off-Cycle Review Approach

MAP Off-Cycle Review Approach

- In exceptional circumstances, HHS may ask MAP to perform “off-cycle” reviews of measures outside of the annual pre-rulemaking process.
 - These reviews are on expedited timelines and must be accomplished within a 30 day period.
- HHS has requested that MAP perform an off-cycle review of four measures under consideration to implement provisions of the IMPACT Act of 2014.
- Off Cycle Review Process:
 - February 9: PAC/LTC Workgroup Meets
 - February 11-19: Public Comment Period
 - February 27: Coordinating Committee Meetings
 - March 6: Final Recommendations due to HHS

MAP Off-Cycle Review Approach General Timeline



IMPACT Act of 2014

IMPACT Act of 2014

- Currently, patients can receive post-acute care from four different settings:
 - Skilled nursing facilities (SNFs)
 - Inpatient rehabilitation facilities (IRFs)
 - Long-term care hospitals (LTCHs)
 - Home health agencies (HHAs)
- PAC providers are now required to report standardized patient assessment data as well as data on quality, resource use, and other measures.
- The IMPACT ACT aims to enable CMS to:
 - compare quality across PAC settings
 - improve hospital and PAC discharge planning
 - use standardized data to reform PAC payments
- The IMPACT Act is an important step toward measurement alignment and shared accountability across the healthcare continuum, which MAP has emphasized over the past several years.

IMPACT Act Reporting Requirements

- The standardized quality measures will address several domains including:
 - Functional status and changes in function;
 - Skin integrity and changes in skin integrity;
 - Medication reconciliation;
 - Incidence of major falls; and
 - The accurate communication of health information and care preferences when a patient is transferred.
- The IMPACT Act also requires the implementation of measures to address resource use and efficiency such as total Medicare spending per beneficiary, discharge to community, and risk-adjusted hospitalization rates of potentially preventable admissions and readmissions

CMS Approach to Standardizing Measures under the IMPACT Act

Input on Measures Under Consideration

Requested MAP Input

- CMS has requested MAP input on four measures under consideration to meet requirements of the IMPACT Act that could be potentially used across settings to provide standardized quality data.
 - E0678: Percent of Residents/Patients/Persons with Pressure Ulcers That Are New or Worsened
 - E0674: Percent of Residents/Patients/Persons Experiencing One or More Falls with Major Injury
 - X4210: All-cause readmission to hospital from post-acute care
 - S2631: Percent of Patients/Residents/Persons with an admission and discharge functional assessment and a care plan that addresses function
- While CMS will use the existing quality reporting programs to gather this data, MAP is asked to consider the requirements of the IMPACT Act as an overlay to the existing programs.

Measure: E0678 Percent of Residents/Patients/Persons with Pressure Ulcers That Are New or Worsened

Domain: Skin integrity and changes in skin integrity

- **Measure: E0678** Percent of Residents/Patients/Persons with Pressure Ulcers That Are New or Worsened
- **Preliminary Analysis Result:** Support.
 - The measure addresses an IMPACT domain and a MAP PAC/LTC core concept. The measure is NQF-endorsed for the SNF, IRF and LTCH settings (NQF #0678).
 - The measure is currently in use in the IRF and LTCH quality reporting programs.
 - In the 2015 MAP pre-rulemaking cycle, MAP conditionally supported X3704 Percent of Residents/Patients/Persons with Pressure Ulcers That Are New or Worsened for the HHQR program.

Measure: E0678 Percent of Residents/Patients/Persons with Pressure Ulcers That Are New or Worsened

Program	Endorsed	In Use in CMS Program	Prior MAP Input
SNF QRP	X		
LTCH QRP	X	X	Adopted for this program prior to MAP process
IRF QRP	X	X	Adopted for this program prior to MAP process
HHQRP			Conditionally support in 2014-2015 pre-rulemaking cycle

VOTE: Measure: E0678 Percent of Residents/Patients/Persons with Pressure Ulcers That Are New or Worsened

- Do you support measure E0678 Percent of Residents/Patients/Persons with Pressure Ulcers That Are New or Worsened to assess skin integrity and changes in skin integrity across PAC/LTC settings?

VOTE: Measure: E0678 Percent of Residents/Patients/Persons with Pressure Ulcers That Are New or Worsened

- Do you conditionally support measure E0678 Percent of Residents/Patients/Persons with Pressure Ulcers That Are New or Worsened to assess skin integrity and changes in skin integrity across PAC/LTC settings?

VOTE: Measure: E0678 Percent of Residents/Patients/Persons with Pressure Ulcers That Are New or Worsened

- Do you not support measure E0678 Percent of Residents/Patients/Persons with Pressure Ulcers That Are New or Worsened to assess skin integrity and changes in skin integrity across PAC/LTC settings?

Measure: E0674 Percent of Residents/Patients/Persons Experiencing One or More Falls with Major Injury

Domain: Incidence of major falls

- **Measure: E0674** Percent of Residents/Patients/Persons Experiencing One or More Falls with Major Injury
- **Preliminary Analysis Result:** Support.
 - The measure addresses an IMPACT domain and a MAP PAC/LTC core concept. MAP provided a recommendation of conditional support for this measure for IRFs during the 2014 pre-rulemaking cycle.
 - MAP recommended "support direction" for this measure for LTCH quality reporting program during the 2013 pre-rulemaking cycle.
 - This measure is in use in the LTCH quality reporting program.

Measure: E0674 Percent of Residents/Patients/Persons Experiencing One or More Falls with Major Injury

Program	Endorsed	In Use in CMS Program	Prior MAP Input
SNF QRP	X		
LTCH QRP		X	Support direction in 2012-2013 pre-rulemaking cycle. Measure should be specified and tested for the LTCH setting.
IRF QRP			
HHQRP			

VOTE: Measure: E0674 Percent of Residents/Patients/Persons Experiencing One or More Falls with Major Injury

- Do you support measure E0674 Percent of Residents/Patients/Persons Experiencing One or More Falls with Major Injury to assess incidence of major falls across PAC/LTC settings?

VOTE: Measure: E0674 Percent of Residents/Patients/Persons Experiencing One or More Falls with Major Injury

- Do you conditionally support measure E0674 Percent of Residents/Patients/Persons Experiencing One or More Falls with Major Injury to assess incidence of major falls across PAC/LTC settings?

VOTE: Measure: E0674 Percent of Residents/Patients/Persons Experiencing One or More Falls with Major Injury

- Do you not support measure E0674 Percent of Residents/Patients/Persons Experiencing One or More Falls with Major Injury to assess incidence of major falls across PAC/LTC settings?

Measure: X4210: All-cause Readmission to Hospital from Post-Acute Care

Domain: All-condition risk-adjusted potentially preventable hospital readmission rates

- **Measure: X4210:** All-cause readmission to hospital from post-acute care
- **Preliminary Analysis Result:** Support.
 - The measure addresses an IMPACT domain and a MAP PAC/LTC core concept. NQF has recently endorsed these readmission measures for all four settings (IRF #2502; SNF #2510; LTCH #2512; HH #2380.)
 - Skilled Nursing Facilities: In the 2015 pre-rulemaking cycle, MAP supported #2510 for the SNF Value-Based Purchasing Program. Measure #2510 was also recently finalized for use in MSSP in the 2015 PFS rule.
 - The IRFQR, LTCHQR and HHQR programs currently include an all-cause unplanned readmission measure.
 - The measures are all harmonized in the approach to capturing readmissions.

Measure: X4210: All-cause Readmission to Hospital from Post-Acute Care

Program	Endorsed	In Use in CMS Program	Prior MAP Input
SNF QRP	X (as NQF #2510)		Support in 2014-2015 pre-rulemaking. This measure addresses a PAC/LTC Core Concept and is a required measure for the SNF value-based purchasing program under the Protecting Access to Medicare Act of 2014 (PAMA). MAP noted that this measure is well aligned with readmission measures used in other settings.
LTCH QRP	X (as NQF # 2512)	X	Support direction in 2012-2013 pre-rulemaking cycle. A consolidated, evidence based readmission measure should be developed to promote alignment and shared responsibility across the care continuum and PAC/LTC settings.
IRF QRP	X (as NQF #2502)	X	Support direction in 2012-2013 pre-rulemaking cycle. A consolidated, evidence based readmission measure should be developed to promote alignment and shared responsibility across the care continuum and PAC/LTC settings.
HHQRP	X (as NQF #2380)	X	Support in 2013-2014 pre-rulemaking cycle and support direction in 2012-2013 pre-rulemaking cycle. A consolidated, evidence based readmission measure should be developed to promote alignment and shared responsibility across the care continuum and PAC/LTC settings.

VOTE: Measure: X4210: All-cause Readmission to Hospital from Post-Acute Care

- Do you support Measure X4210: All-cause Readmission to Hospital from Post-Acute Care to assess all-condition risk-adjusted potentially preventable hospital readmission rates across PAC/LTC settings?

VOTE: Measure: X4210: All-cause Readmission to Hospital from Post-Acute Care

- Do you conditionally support Measure X4210: All-cause Readmission to Hospital from Post-Acute Care to assess all-condition risk-adjusted potentially preventable hospital readmission rates across PAC/LTC settings?

VOTE: Measure: X4210: All-cause Readmission to Hospital from Post-Acute Care

- Do you not support Measure X4210: All-cause Readmission to Hospital from Post-Acute Care to assess all-condition risk-adjusted potentially preventable hospital readmission rates across PAC/LTC settings?

Measure: S2631 Percent of Patients/Residents/Persons with an admission and discharge functional assessment and a care plan that addresses function

Domain: Functional status, cognitive function, and changing in function and cognitive function

- **Measure: S2631** Percent of Patients/Residents/Persons with an admission and discharge functional assessment and a care plan that addresses function
- **Preliminary Analysis Result:** Conditional Support.
 - The measure addresses an IMPACT domain and a MAP PAC/LTC core concept.
 - MAP reviewed this measure in its 2014 pre-rulemaking for the LTCH QRP and provided a recommendation of conditional support, pending NQF-endorsement. This measure for LTCH (2631) is currently under review by NQF.
 - The Person and Family Centered Care Standing Committee did not reach consensus to endorse this measure due to concerns about the inclusion of the "plan of care" data elements for this measure. It was noted that the specifications indicate a discharge goal related to at least one of the assessment items rather than a plan.
 - Concerns were raised about the evidence for a plan of care being related to outcomes. The Committee evaluation and recommendations will be posted for public comment very soon and NQF will make a final recommendation on endorsement in the Spring.

Measure: S2631 Percent of Patients/Residents/Persons with an admission and discharge functional assessment and a care plan that addresses function

Program	Endorsed	In Use in CMS Program	Prior MAP Input
SNF QRP			
LTCH QRP			Conditional support in 2014-2015 pre-rulemaking cycle.
IRF QRP			
HHQRP			

VOTE: Measure: S2631 Percent of Patients/Residents/Persons with an admission and discharge functional assessment and a care plan that addresses function

- Do you conditionally support measure S2631 Percent of Patients/Residents/Persons with an admission and discharge functional assessment and a care plan that addresses function to assess Functional status, cognitive function, and changing in function and cognitive function across PAC/LTC settings?

VOTE: Measure: S2631 Percent of Patients/Residents/Persons with an admission and discharge functional assessment and a care plan that addresses function

- Do you support measure S2631 Percent of Patients/Residents/Persons with an admission and discharge functional assessment and a care plan that addresses function to assess Functional status, cognitive function, and changing in function and cognitive function across PAC/LTC settings?

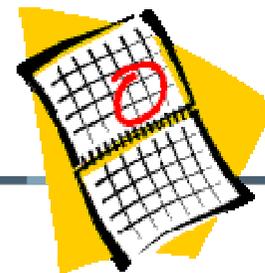
VOTE: Measure: S2631 Percent of Patients/Residents/Persons with an admission and discharge functional assessment and a care plan that addresses function

- Do you not support measure S2631 Percent of Patients/Residents/Persons with an admission and discharge functional assessment and a care plan that addresses function to assess Functional status, cognitive function, and changing in function and cognitive function across PAC/LTC settings?

Opportunity for Public Comment

Next Steps

- MAP PAC/LTC Workgroup upcoming off-cycle review activities:
 - February 11-19, 2015-Public comment period
 - February 27, 2015-Coordinating Committee Meeting
 - March 6, 2015 – NQF submits MAP's final recommendations on the Ad Hoc to CMS



Points of Contact

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Thank You!