

## 2017-2018 LTCH Quality Reporting Reconsideration and Exception & Extension Archives

The Reconsideration webpage provides information and updates related to the reconsideration process for the LTCH QRP. On this page, you will find guidelines and processes for submitting reconsiderations requests and requests for exceptions and exemptions.

### **LTCH QRP: Natural Disaster Protocol**

For disasters impacting the Post-Acute Care Quality Reporting programs, a disaster-specific memo will be posted to the downloads section below with additional information, including impacted counties and quality reporting quarters.

### **Updates**

#### **Notice: February 23, 2018**

Please review the Disaster Exceptions/Exemptions for Medicare Certified Providers Affected by Severe Storms and Flooding memo located in the Download section below for additional information regarding the data reporting exceptions and exemptions related to Hurricane Nate.

#### **Notice: February 22, 2018**

Please review the Disaster Exceptions/Exemptions for Medicare Certified Providers memo located in the Download section below for additional information regarding the data reporting exceptions and exemptions related to the December California Wildfires (FEMA [DR-4353](#)).

#### **Notice: November 02, 2017**

Please review the Disaster Exceptions/Exemptions for Medicare Certified Providers memo located in the Download section below for additional information regarding the data reporting exceptions and exemptions related to the Northern California Wildfires.

#### **Notice: September 14, 2017**

Please review the Hurricane Irma - Disaster Exceptions/Exemptions for Medicare Certified Providers Affected by Severe Storms and Flooding memo located in the Download section below for additional information regarding the data reporting exceptions and exemptions related to Hurricane Irma.

**Notice: August 31, 2017**

Please review the Hurricane Harvey - Disaster Exceptions/Exemptions for Medicare Certified Providers Affected by Severe Storms and Flooding memo located in the Download section below for additional information regarding the data reporting exceptions and exemptions related to Hurricane Harvey.

**NOTICE: November 16, 2016**

Please review the [Extraordinary Circumstances Extension due to Hurricane Matthew November](#) located in the Download section below for additional information regarding the blanket exemption for data submission related to Hurricane Matthew.

## **Reconsideration**

### **Reconsideration Request Overview**

In the FY 2015 Inpatient Prospective Payment System /Long-Term Care Hospital Prospective Payment System Final Rule (79 FR 50317 through 50318), the Centers for Medicare & Medicaid Services (CMS) finalized the FY 2016 and subsequent year's Long-Term Care Hospital (LTCH) Quality Reporting Program (QRP) Reconsideration and Exception and Extension requirements. Any LTCH determined to be out of compliance with the LTCH QRP requirements may be subject to a two (2) percentage point reduction in their annual payment update (APU).

### **What is Reconsideration?**

Reconsideration is a request for a review of the initial CMS compliance determination for a given LTCH, for a given fiscal year (FY).

### **When Would an LTCH Submit a Reconsideration Request?**

LTCHs may file for reconsideration if they believe the finding of non-compliance is in error, or they have evidence of the impact of extraordinary circumstances which prevented timely submission of data.

### **Reconsideration Request Process**

A LTCH must first receive a CMS letter of non-compliance, in order to apply for reconsideration. A LTCH disagreeing with the compliance determination and the impending payment reduction decision may submit a request for reconsideration to CMS **within thirty (30) days from the date at the top of the non-compliance notification letter distributed electronically using QIES**. CMS will not accept any requests submitted after the thirty (30) day deadline.

### **Creating a Reconsideration Request**

**Please note: The only method for submitting reconsideration requests is via email. Requests submitted by any other means will not be reviewed for reconsideration.**

LTCHs are required to submit their request to CMS via email with the subject line: "LTCH ACA 3004 Reconsideration Request" and include the LTCH CMS Certification Number (CCN) (e.g., LTCH ACA 3004 Reconsideration Request, XXXXXX). The request must be sent to the following email address: [LTCHQRPRReconsiderations@cms.hhs.gov](mailto:LTCHQRPRReconsiderations@cms.hhs.gov).

The email request must include the following information:

- LTCH CMS Certification Number (CCN)
- LTCH Business Name
- LTCH Business Address
- CEO or CEO-designated representative contact information including: name, email address, telephone number, and physical mailing address
- CMS identified reason(s) for non-compliance from the non-compliance notification letter
- Information supporting the LTCH belief that non-compliance is in error, or evidence of the impact of extraordinary circumstances which prevented timely submission of data

The request for reconsideration ***must be accompanied by supporting documentation demonstrating compliance***. CMS will be unable to review any request that fails to provide the necessary documentation along with the request for reconsideration. Supporting documentation may include any or all of the following:

**Please note: Do not include protected health information (PHI) or other Health Insurance Portability and Accountability Act (HIPAA) violations in the documentation being submitted to CMS for review.**

- Proof of submission
- Email communications

- Data submission reports from the Quality Improvement Evaluation System (QIES)
- Data submission reports from the National Healthcare Safety Network (NHSN)
- Proof of approved exception or extension for the reporting time frame
- Copy of the CCN activation letter
- Other documentation supporting the rationale for seeking reconsideration

#### **Review Data Submission Requirements**

For FY 2018 payment determination, LTCHs are required to collect the following quality measures:

- NQF #0138 National Healthcare Safety Network (NHSN) Catheter-Associated Urinary Tract Infection (CAUTI) Outcome Measure through the Centers for Disease Control and Prevention (CDC) NHSN, for the reporting period of January 1, 2016, through December 31, 2016
- NQF #0139 NHSN Central-Line Associated Blood Stream Infections (CLABSI) Outcome Measure through the CDC NHSN, for the reporting period of January 1, 2016, through December 31, 2016
- NQF #0678 Percent of Residents or Patients with Pressure Ulcers That Are New or Worsened (Short-Stay) using the LTCH Continuity Assessment Record and Evaluation (CARE) Data Set Version3.0 and transmitted through the Assessment Submission and Processing (ASAP) system to the Quality Improvement Evaluation System (QIES), for the reporting period of January 1, 2016, through December 31, 2016
- NQF #0431 NHSN Influenza Vaccination Coverage among Healthcare Personnel through the CDC NHSN, is based on Q4 2016 (October –December 2016) through Q1 2017 (January-March) reporting period.
- NQF #0680 Percent of Residents or Patients Who Were Assessed and Appropriately Given the Seasonal Influenza Vaccine based on Q4 2015 (October- December 2015) through Q1 2016 (January-March 2016)
- NQF #1716 NHSN Inpatient Hospital-Onset Methicillin-Resistant Staphylococcus aureus (MRSA) Bacteremia Outcome Measure through the CDC NHSN for reporting period January 1, 2016 through December 31, 2016
- NQF #1717 NHSN Inpatient Hospital-Onset Clostridium difficile Infection (CDI) Outcome Measure through the CDC NHSN for the reporting period January 1, 2016 through December 31, 2016
- NHSN Ventilator-Associated Event (VAE) Outcome Measure through the CDC NHSN for the reporting period January 1, 2016 through December 31, 2016.
- NQF #0674 Percent of Residents Experiencing One or More Falls with Major Injury (Long Stay) using the LTCH Continuity Assessment Record and Evaluation (CARE) Data Set Version3.0 and transmitted through the Assessment Submission and Processing (ASAP) system to the Quality Improvement Evaluation System (QIES), for the reporting period of April 1, 2016, through December 31, 2016

- NQF #2631 Percent of Long-Term Care Hospital Patients with an Admission and Discharge Functional Assessment and a Care Plan That Addresses Function using the LTCH Continuity Assessment Record and Evaluation (CARE) Data Set Version3.0 and transmitted through the Assessment Submission and Processing (ASAP) system to the Quality Improvement Evaluation System (QIES), for the reporting period of April 1, 2016, through December 31, 2016
- NQF #2631 Application of Percent of Long-Term Care Hospital Patients with an Admission and Discharge Functional Assessment and a Care Plan That Addresses Function using the LTCH Continuity Assessment Record and Evaluation (CARE) Data Set Version3.0 and transmitted through the Assessment Submission and Processing (ASAP) system to the Quality Improvement Evaluation System (QIES), for the reporting period of April 1, 2016, through December 31, 2016
- NQF #2632 Change in Mobility Among Long-Term Care Hospital Patients Requiring Ventilator Support using the LTCH Continuity Assessment Record and Evaluation (CARE) Data Set Version3.0 and transmitted through the Assessment Submission and Processing (ASAP) system to the Quality Improvement Evaluation System (QIES), for the reporting period of April 1, 2016, through December 31, 2016.

#### **Reconsideration Request Process Timeline**

Below is the ***estimated*** reconsideration process timeline for FY 2019 payment determination:

- June - July 2018 - CMS issues notices of non-compliance to LTCHs that failed to meet quality reporting requirements via letter from the MACs as well as distributed electronically using QIES.
- July - August 2018 - Reconsideration requests are due to CMS thirty (30) days from the date on the notification of non-compliance distributed electronically into the CASPER folders in QIES.
- July - August 2018 - CMS provides an email acknowledgement within five (5) business days upon receipt of reconsideration request.
- September 2018 - CMS notifies LTCHs of the Agency's decision on the reconsideration requests via letter from the MACs as well as distributed electronically into the CASPER folders in QIES.

CMS will send a long-term care hospital written notification of a decision of noncompliance with the quality data and standardized patient assessment data reporting requirements for a particular fiscal year. CMS also will use the Quality Improvement and Evaluation system (QIES) Assessment Submission and Processing (ASAP) System to provide notification of noncompliance to the long-term care hospital.

#### **Filing an Appeal**

LTCHs dissatisfied with the LTCH QRP reconsideration ruling may file a claim under 42 CFR Part 405, Subpart R (a Provider Reimbursement Review Board [PRRB] appeal). Details are available on the *CMS.gov* [PRRB Review Instructions](#) website.

## Exception and Extension

### Exception and Extension Requests Overview

CMS provides LTCHs an opportunity to request an exception or extension from the program's reporting requirements in the event they are unable to submit quality data due to extraordinary circumstances beyond their control. LTCHs affected by a natural or man-made disaster or other extraordinary circumstances may request an exception or extension by filing a Request for Reconsideration Due to Disaster or Extraordinary Circumstance.

### Submission of Exception and/or Extension Process

All LTCHs requesting an exception or extension must submit the request within ninety (90) days of the event. CMS may grant the exception or extension for one or more quarters. CMS may also grant the exception or extension to LTCHs that have not requested one when an extraordinary circumstance, such as an act of nature, affects an entire region or locale. CMS will communicate through routine channels when such determination is made.

LTCHs must request an exception or extension via email with the subject line, "Disaster Exception or Extension Request", and send it to: [LTCHQRPreconsiderations@cms.hhs.gov](mailto:LTCHQRPreconsiderations@cms.hhs.gov). The email must include the following information:

- LTCH CCN
- LTCH Business Name
- LTCH Business Address
- CEO or CEO-designated personnel contact information including name, email address, telephone number, and physical mailing address
- Description of the event (examples provided above) associated with the reason for requesting the exception or extension
- A date when the LTCH believes that it will again be able to submit LTCH QRP data and a justification for the proposed date.

### Response from CMS

CMS will provide a written acknowledgement upon receipt of the exception and extension request. CMS will notify the CEO or CEO-designated contact provided in the request with the decision, via USPS mail and email.

### More Information

For additional assistance, LTCHs may submit questions related to the reconsideration request or waiver requirements to the following email address: [LTCHQRPreconsiderations@cms.hhs.gov](mailto:LTCHQRPreconsiderations@cms.hhs.gov).

### Downloads

- [2018-190-IP ListServe Exceptions Michael FEMA FL GA AL 11.30.2018 vFINAL \[PDF, 223KB\]](#)
- [2018-189-IP ListServe Exceptions Florence FEMA NC SC VA Updated 11.30.20 \[PDF, 200KB\]](#)
- [Memo-Applicability-of-Reporting-Requirements-for-Certain-Health-Care Hurricane Nate 2018-02-08.pdf \[PDF, 93KB\]](#)
- [Memo-Applicability-of-Reporting-Requirements-for-Certain-Health-Care December Wildfires 2018-02-08.pdf \[PDF, 86KB\]](#)
- [2017-149-IP Exceptions Harvey FEMA TX LA Updated Final 10-12-17.pdf \[PDF, 66KB\]](#)
- [Memo: Applicability of Reporting Requirements for Certain Health Care Facilities Affected by Hurricane Irma – Updated December 11, 2017 \[PDF, 69KB\]](#)
- [Extraordinary Circumstances Extension due to Hurricane Matthew November \[PDF, 49KB\]](#)
- [LTCH FY2016 Reconsideration Help Document \[PDF, 331KB\]](#)