

Home Health Quality Measures - Process

Type	Measure Title	HH Compare	Risk Adjusted ¹	Measure Description	Numerator	Denominator	Measure-specific Exclusions	OASIS C Item(s) Used
Process - Timely Care	Timely Initiation of Care	Yes	No	Percentage of home health episodes of care in which the start or resumption of care date was either on the physician-specified date or within 2 days of the referral date or inpatient discharge date, whichever is later.	Number of home health episodes of care in which the start or resumption of care date was either on the physician-specified date or within 2 days of the referral date or inpatient discharge date, whichever is later.	Number of home health episodes of care ending with discharge, death, or transfer to inpatient facility during the reporting period, other than those covered by generic or measure-specific exclusions.	None	(M0102) Date of Physician-ordered Start of Care : (M0104) Date of Referral: (M0030) Start of Care Date: (M0032) Resumption of Care Date (M0100) Reason for Assessment (M1000) Inpatient Facility discharge (M1005) Inpatient Discharge Date
Process - Care Coordination	Physician Notification Guidelines Established	No	No	Percentage of home health episodes of care in which the physician-ordered plan of care, at start/resumption of care, establishes parameters (limits) for notifying the physician of changes in patient status.	Number of home health episodes of care in which the physician-ordered plan of care, at start/resumption of care, establishes parameters (limits) for notifying the physician of changes in patient status.	Number of home health episodes of care ending with discharge, death, or transfer to inpatient facility during the reporting period, other than those covered by generic or measure-specific exclusions.	Home health episodes for which the physician has chosen not to establish patient-specific parameters for this patient and the agency will use standardized clinical guidelines accessible for all care providers to reference.	(M2250) a. Patient-specific parameters for notifying physician plan of care
Process - Assessment	Depression Assessment Conducted	Yes	No	Percentage of home health episodes of care in which patients were screened for depression (using a standardized depression screening tool) at start/resumption of care.	Number of home health episodes of care in which patients were screened for depression (using a standardized depression screening tool) at start/resumption of care.	Number of home health episodes of care ending with discharge, death, or transfer to inpatient facility during the reporting period, other than those covered by generic or measure-specific exclusions.	Home health episodes for which the patient is nonresponsive.	(M1730) Depression Screening; (M1710) When Confused; (M1720) When Anxious
Process - Assessment	Multifactor Fall Risk Assessment Conducted for Patients 65 and Over	Yes	No	Percentage of home health episodes of care in which patients 65 and older had a multi-factor fall risk assessment at start/resumption of care.	Number of home health episodes of care in which patients 65 and older had a multi-factor fall risk assessment at start/resumption of care.	Number of home health episodes of care ending with discharge, death, or transfer to inpatient facility during the reporting period, other than those covered by generic or measure-specific exclusions.	Home health episodes for which the patient is NOT age 65 or older at the start of care/resumption of care.	(M1910) Multi-factor Fall Risk Assessment (M0066) Birth Date (M0030) Start of Care Date (M0032) Resumption of Care Date
Process - Assessment	Pain Assessment Conducted	Yes	No	Percentage of home health episodes of care in which the patient was assessed for pain, using a standardized pain assessment tool, at start/resumption of care.	Number of home health episodes of care in which the patient was assessed for pain, using a standardized pain assessment tool, at start/resumption of care.	Number of home health episodes of care ending with discharge, death, or transfer to inpatient facility during the reporting period, other than those covered by generic or measure-specific exclusions.	None	(M1240) Pain Assessment using a standardized pain assessment tool

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Process - Assessment	Pressure Ulcer Risk Assessment Conducted	Yes	No	Percentage of home health episodes of care in which the patient was assessed for risk of developing pressure ulcers at start/resumption of care.	Number of home health episodes of care in which the patient was assessed for risk of developing pressure ulcers either via an evaluation of clinical factors or using a standardized tool, at start/resumption of care.	Number of home health episodes of care ending with discharge, death, or transfer to inpatient facility during the reporting period, other than those covered by generic or measure-specific exclusions.	None	(M1300) Pressure Ulcer Risk Assessment
Process - Care Planning	Depression Interventions in Plan of Care	No	No	Percentage of home health episodes of care in which the physician-ordered plan of care includes interventions for depression such as medication, referral for other treatment, or a monitoring plan for current treatment.	Number of home health episodes of care in which patients had a physician-ordered plan of care that includes interventions for depression such as medication, referral for other treatment, or a monitoring plan for current treatment.	Number of home health episodes of care ending with discharge, death, or transfer to inpatient facility during the reporting period, other than those covered by generic or measure-specific exclusions.	Home health episodes of care where patient does not have symptoms or diagnosis of depression, nor current treatment for depression at start (resumption) of care, or patient is non-responsive.	(M2250) d. Depression intervention(s) plan of care (M1710) When Confused (M1720) When Anxious
Process - Care Planning	Diabetic Foot Care and Patient Education in Plan of Care	No	No	Percentage of home health episodes of care in which the physician-ordered plan of care includes regular monitoring for the presence of skin lesions on the lower extremities and patient education on proper diabetic foot care.	Number of home health episodes of care in which the physician-ordered plan of care includes regular monitoring for the presence of skin lesions on the lower extremities and patient education on proper diabetic foot care.	Number of home health episodes of care ending with discharge, death, or transfer to inpatient facility during the reporting period, other than those covered by generic or measure-specific exclusions.	Home health episodes of care where patient is not diabetic OR is a bilateral amputee at start (resumption) of care.	(M2250) b. Diabetic foot care in plan of care
Process - Care Planning	Falls Prevention Steps in Plan of Care	No	No	Percentage of home health episodes of care in which the physician-ordered plan of care includes interventions to mitigate the risk of falls.	Number of home health episodes of care in which interventions to mitigate the risk of falls were included in the physician-ordered plan of care.	Number of home health episodes of care ending with discharge, death, or transfer to inpatient facility during the reporting period, other than those covered by generic or measure-specific exclusions.	Home health episodes in which the patient is assessed not to be at risk for falls at start (resumption) of care.	(M2250) c. Falls prevention plan of care
Process - Care Planning	Pain Interventions In Plan of Care	No	No	Percentage of home health episodes of care in which the physician-ordered plan of care includes intervention(s) to monitor and mitigate pain.	Number of home health episodes of care in which intervention(s) to monitor and mitigate pain were included in the physician-ordered plan of care.	Number of home health episodes of care ending with discharge, death, or transfer to inpatient facility during the reporting period, other than those covered by generic or measure-specific exclusions.	Home health episodes of care where start (resumption) of care assessment indicated the patient did not have pain.	(M2250) e. Intervention(s) to monitor and mitigate pain plan of care

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Process - Care Planning	Pressure Ulcer Prevention in Plan of Care	Yes	No	Percentage of home health episodes of care in which the physician-ordered plan of care includes interventions to prevent pressure ulcers.	Number of home health episodes of care in which interventions to prevent pressure ulcers were included in the physician-ordered plan of care.	Number of home health episodes of care ending with discharge, death, or transfer to inpatient facility during the reporting period, other than those covered by generic or measure-specific exclusions.	Home health episodes for which a formal assessment indicated the patient was not at risk of developing pressure ulcers at start/resumption of care.	(M2250) f. Intervention(s) to prevent pressure ulcers plan of care
Process - Care Planning	Pressure Ulcer Treatment Based on Principles of Moist Wound Healing in Plan of Care	No	No	Percentage of home health episodes of care in which the physician-ordered plan of care includes pressure ulcer treatment based on principles of moist wound healing (or an order was requested).	Number of home health episodes of care in which pressure ulcer treatment based on principles of moist wound healing was specified in the physician-ordered plan of care (or an order was requested).	Number of home health episodes of care ending with discharge, death, or transfer to inpatient facility during the reporting period, other than those covered by generic or measure-specific exclusions.	Home health episodes where patient has no pressure ulcers with need for moist wound healing at start/resumption of care.	(M2250) g. Pressure ulcer treatment plan of care
Process - Care Plan Implementation	Depression Interventions Implemented during Short Term Episodes of Care	No	No	Percentage of short term home health episodes of care during which depression interventions were included in the physician-ordered plan of care and implemented.	Number of home health episodes of care during which depression interventions were included in the physician-ordered plan of care and implemented.	Number of home health episodes of care ending with a discharge or transfer to inpatient facility during the reporting period, other than those covered by generic or measure-specific exclusions.	Home health episodes for which assessment did not indicate symptoms/diagnosis of depression since the start/resumption of care assessment, OR an assessment for recertification or other followup was conducted between start/resumption of care and transfer or discharge, OR patient was non-responsive, OR patient died.	(M0100) Reason for Assessment (M2400) c. Depression intervention(s) (M1710) When Confused (M1720) When Anxious
Process - Care Plan Implementation	Depression Interventions Implemented during Long Term Episodes of Care	No	No	Percentage of long term home health episodes of care during which depression interventions were included in the physician-ordered plan of care and implemented (since the previous OASIS assessment).	Number of home health episodes of care during which depression interventions were included in the physician-ordered plan of care and implemented (since the previous OASIS assessment).	Number of home health episodes of care ending with a discharge or transfer to inpatient facility during the reporting period, other than those covered by generic or measure-specific exclusions.	Home health episodes for which assessment did not indicate symptoms/diagnosis of depression since the previous OASIS assessment, OR NO assessment for recertification or other followup was conducted between start/resumption of care and transfer or discharge, OR patient was non-responsive, OR patient died.	(M0100) Reason for Assessment (M2400) c. Depression intervention(s) (M1710) When Confused (M1720) When Anxious
Process - Care Plan Implementation	Depression Interventions Implemented during All Episodes of Care	No	No	Percentage of home health episodes of care during which depression interventions were included in the physician-ordered plan of care and implemented (since the previous OASIS assessment).	Number of home health episodes of care during which depression interventions were included in the physician-ordered plan of care and implemented (since the previous OASIS assessment).	Number of home health episodes of care ending with a discharge or transfer to inpatient facility during the reporting period, other than those covered by generic or measure-specific exclusions.	Home health episodes for which assessment did not indicate symptoms/diagnosis of depression since the previous OASIS assessment, OR patient was non-responsive, OR patient died.	(M0100) Reason for Assessment (M2400) c. Depression intervention(s) (M1710) When Confused (M1720) When Anxious

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Process - Care Plan Implementation	Diabetic Foot Care and Patient/Caregiver Education Implemented during Short Term Episodes of Care	Yes	No	Percentage of short term home health episodes of care during which diabetic foot care and education were included in the physician-ordered plan of care and implemented.	Number home health episodes of care during which diabetic foot care and education were included in the physician-ordered plan of care and implemented.	Number of home health episodes of care ending with a discharge or transfer to inpatient facility during the reporting period, other than those covered by generic or measure-specific exclusions.	Home health episodes for which the discharge/transfer assessment indicates the patient is not diabetic or is a bilateral amputee; OR an assessment for recertification or other followup was conducted between start/resumption of care and transfer or discharge, OR patient died.	(M0100) Reason for Assessment(M2400) a. Diabetic foot care intervention(s)
Process - Care Plan Implementation	Diabetic Foot Care and Patient / Caregiver Education Implemented during Long Term Episodes of Care	No	No	Percentage of long term home health episodes of care during which diabetic foot care and education were included in the physician-ordered plan of care and implemented (since the previous OASIS assessment).	Number home health episodes of care during which diabetic foot care and education were included in the physician-ordered plan of care and implemented (since the previous OASIS assessment).	Number of home health episodes of care ending with a discharge or transfer to inpatient facility during the reporting period, other than those covered by generic or measure-specific exclusions.	Home health episodes for which the discharge/transfer assessment indicates the patient is not diabetic or is a bilateral amputee; OR NO assessment for recertification or other followup was conducted between start/resumption of care and transfer or discharge, OR patient died.	(M0100) Reason for Assessment (M2400) a. Diabetic foot care intervention(s)
Process - Care Plan Implementation	Diabetic Foot Care and Patient / Caregiver Education Implemented during All Episodes of Care	No	No	Percentage of home health episodes of care in which diabetic foot care and education were included in the physician-ordered plan of care and implemented (since the previous OASIS assessment).	Number home health episodes of care during which diabetic foot care and education were included in the physician-ordered plan of care and implemented (since the previous OASIS assessment).	Number of home health episodes of care ending with a discharge or transfer to inpatient facility during the reporting period, other than those covered by generic or measure-specific exclusions.	Home health episodes for which the discharge/transfer assessment indicates the patient is not diabetic or is a bilateral amputee, OR patient died.	(M0100) Reason for Assessment (M2400) a. Diabetic foot care intervention(s)
Process - Care Plan Implementation	Heart Failure Symptoms Addressed during Short Term Episodes of Care	Yes	No	Percentage of short term home health episodes of care during which patients exhibited symptoms of heart failure and appropriate actions were taken.	Number of home health episodes of care during which patients exhibited symptoms of heart failure and appropriate actions were taken.	Number of home health episodes of care ending with a discharge or transfer to inpatient facility during the reporting period, other than those covered by generic or measure-specific exclusions.	Home health episodes for which patient does not have heart failure diagnosis, OR heart failure diagnosis, OR heart failure symptoms were not assessed, OR no heart failure symptoms exhibited since the previous assessment, OR recertification/other followup assessment was conducted between start/resumption of care and transfer or discharge, OR patient died.	(M0100) Reason for Assessment (M1500) Symptoms in Heart Failure Patients (M1510) Heart Failure Follow-up

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Process - Care Plan Implementation	Heart Failure Symptoms Addressed during Long Term Episodes of Care	No	No	Percentage of long term home health episodes of care during which patients exhibited symptoms of heart failure and appropriate actions were taken (since the previous OASIS assessment).	Number of home health episodes of care during which patients exhibited symptoms of heart failure and appropriate actions were taken (since the previous OASIS assessment).	Number of home health episodes of care ending with a discharge or transfer to inpatient facility during the reporting period, other than those covered by generic or measure-specific exclusions.	Home health episodes for which patient does not have heart failure diagnosis, OR heart failure symptoms were not assessed, OR no heart failure symptoms exhibited since the previous assessment, OR NO recertification/other followup assessment was conducted between start/resumption of care and transfer or discharge, OR patient died.	(M0100) Reason for Assessment (M1500) Symptoms in Heart Failure Patients (M1510) Heart Failure Follow-up
Process - Care Plan Implementation	Heart Failure Symptoms Addressed during All Episodes of Care	No	No	Percentage of home health episodes of care during which patients exhibited symptoms of heart failure and appropriate actions were taken (since the previous OASIS assessment).	Number of home health episodes of care during which patients exhibited symptoms of heart failure and appropriate actions were taken (since the previous OASIS assessment).	Number of home health episodes of care ending with a discharge or transfer to inpatient facility during the reporting period, other than those covered by generic or measure-specific exclusions.	Home health episodes for which patient does not have heart failure diagnosis, OR heart failure symptoms were not assessed, OR no heart failure symptoms exhibited since the previous assessment, OR patient died.	(M0100) Reason for Assessment (M1500) Symptoms in Heart Failure Patients (M1510) Heart Failure Follow-up
Process - Care Plan Implementation	Pain Interventions Implemented during Short Term Episodes of Care	Yes	No	Percentage of short term home health episodes of care during which pain interventions were included in the physician-ordered plan of care and implemented.	Number of home health episodes of care during which pain interventions were included in the physician-ordered plan of care and implemented.	Number of home health episodes of care ending with a discharge or transfer to inpatient facility during the reporting period, other than those covered by generic or measure-specific exclusions.	Home health episodes for which patient did not have pain between the previous assessment and discharge/transfer assessment OR an assessment for recertification or other followup was conducted between start/resumption of care and transfer or discharge, OR patient died.	(M0100) Reason for Assessment(M2400) d. Intervention(s) to monitor and mitigate pain
Process - Care Plan Implementation	Pain Interventions Implemented during Long Term Episodes of Care	No	No	Percentage of long term home health episodes of care during which pain interventions were included in the physician-ordered plan of care and implemented (since the previous OASIS assessment).	Number of home health episodes of care during which the pain interventions were included the physician-ordered plan of care and implemented (since the previous OASIS assessment).	Number of home health episodes of care ending with a discharge or transfer to inpatient facility during the reporting period, other than those covered by generic or measure-specific exclusions.	Home health episodes for which patient did not have pain between the previous assessment and discharge/transfer OR NO assessment for recertification or other followup was conducted between start/resumption of care and transfer or discharge, OR patient died.	(M0100) Reason for Assessment (M2400) d. Intervention(s) to monitor and mitigate pain:

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Process - Care Plan Implementation	Pain Interventions Implemented during All Episodes of Care	No	No	Percentage of all home health episodes of care during which pain interventions were included in the physician-ordered plan of care and implemented (since the previous OASIS assessment).	Number of home health episodes of care during which pain interventions were included in the physician-ordered plan of care and implemented (since the previous OASIS assessment).	Number of home health episodes of care ending with a discharge or transfer to inpatient facility during the reporting period, other than those covered by generic or measure-specific exclusions.	Home health episodes for which patient did not have pain between the previous assessment and discharge/transfer OR patient died.	(M0100) Reason for Assessment (M2400) d. Intervention(s) to monitor and mitigate pain
Process - Care Plan Implementation	Treatment of Pressure Ulcers Based on Principles of Moist Wound Healing Implemented during Short Term Episodes of Care	No	No	Percentage of short term home health episodes of care during which pressure ulcer treatment based on principles of moist wound healing was included in the physician-ordered plan of care and implemented.	Number of home health episodes of care during which pressure ulcer treatment based on principles of moist wound healing was included in the physician-ordered plan of care and implemented.	Number of home health episodes of care ending with a discharge or transfer to inpatient facility during the reporting period, other than those covered by generic or measure-specific exclusions.	Home health episodes where patient has no pressure ulcers with need for moist wound healing between start/resumption of care assessment and discharge/transfer, OR an assessment for recertification or other followup was conducted between start/resumption of care and transfer or discharge, OR patient died.	(M0100) Reason for Assessment (M2400) f. Pressure ulcer treatment based on principles of moist wound healing
Process - Care Plan Implementation	Treatment of Pressure Ulcers Based on Principles of Moist Wound Healing Implemented during Long Term Episodes of Care	No	No	Percentage of long term home health episodes of care during which pressure ulcer treatment based on principles of moist wound healing was included in the physician-ordered plan of care and implemented (since the previous OASIS assessment).	Number of home health episodes of care during which pressure ulcer treatment based on principles of moist wound healing was included in the physician-ordered plan of care and implemented (since the previous OASIS assessment).	Number of home health episodes of care ending with a discharge or transfer to inpatient facility during the reporting period, other than those covered by generic or measure-specific exclusions.	Home health episodes where patient has no pressure ulcers with need for moist wound healing between previous assessment and discharge/transfer, OR NO assessment for recertification or other followup was conducted between start/resumption of care and transfer or discharge, OR patient died.	(M0100) Reason for Assessment (M2400) f. Pressure ulcer treatment based on principles of moist wound healing
Process - Care Plan Implementation	Treatment of Pressure Ulcers Based on Principles of Moist Wound Healing Implemented during All Episodes of Care	No	No	Percentage of home health episodes of care during which pressure ulcer treatment based on principles of moist wound healing was included in the physician-ordered plan of care and implemented (since the previous OASIS assessment).	Number of home health episodes of care during which pressure ulcer treatment based on principles of moist wound healing was included in the physician-ordered plan of care and implemented (since the previous OASIS assessment).	Number of home health episodes of care ending with a discharge or transfer to inpatient facility during the reporting period, other than those covered by generic or measure-specific exclusions.	Home health episodes where patient has no pressure ulcers with need for moist wound healing between previous assessment and discharge/transfer, OR patient died.	(M0100) Reason for Assessment (M2400) f. Pressure ulcer treatment based on principles of moist wound healing

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Process - Education	Drug Education on High Risk Medications Provided to Patient/Caregiver at Start of Episode	No	No	Percentage of home health episodes of care in which patients/caregivers were educated about high-risk medications at start/resumption of care including instructions on how to monitor the effectiveness of drug therapy, how to recognize potential adverse effects, and how and when to report problems.	Number of home health episodes of care in which patients/caregivers were educated about high-risk medications at start/resumption of care including instructions on how to monitor the effectiveness of drug therapy, how to recognize potential adverse effects, and how and when to report problems.	Number of home health episodes of care ending with discharge, death, or transfer to inpatient facility during the reporting period, other than those covered by generic or measure-specific exclusions.	Home health episodes in which the patient is not taking any high risk drugs OR the patient/caregiver is fully knowledgeable about special precautions associated with all high-risk medications at start (resumption) of care.	(M2010) Patient/Caregiver High Risk Drug Education
Process - Education	Drug Education on All Medications Provided to Patient/Caregiver during Short Term Episodes of Care	Yes	No	Percentage of short term home health episodes of care during which patient/caregiver was instructed on how to monitor the effectiveness of drug therapy, how to recognize potential adverse effects, and how and when to report problems.	Number of home health episodes of care during which patient/caregiver was instructed on how to monitor the effectiveness of drug therapy, how to recognize potential adverse effects, and how and when to report problems.	Number of home health episodes of care ending with a discharge or transfer to inpatient facility during the reporting period, other than those covered by generic or measure-specific exclusions.	Home health episodes for which the patient was not taking any drugs between start/resumption of care and discharge/transfer, OR an assessment for recertification or other followup was conducted between start/resumption of care and transfer or discharge, OR the patient died.	(M0100) Reason for Assessment (M2015) Patient/Caregiver Drug Education Intervention:
Process - Education	Drug Education on All Medications Provided to Patient/Caregiver during Long Term Episodes of Care	No	No	Percentage of long term home health episodes of care during which patient/caregiver was instructed on how to monitor the effectiveness of drug therapy, how to recognize potential adverse effects, and how and when to report problems (since the previous OASIS assessment).	Number of home health episodes of care during which patient/caregiver was instructed on how to monitor the effectiveness of drug therapy, how to recognize potential adverse effects, and how and when to report problems (since the previous OASIS assessment).	Number of home health episodes of care ending with a discharge or transfer to inpatient facility during the reporting period, other than those covered by generic or measure-specific exclusions.	Home health episodes for which the patient was not taking any drugs since the last OASIS assessment prior to transfer/discharge, OR NO assessment for recertification or other followup was conducted between start/resumption of care and transfer or discharge, OR the patient died.	(M0100) Reason for Assessment (M2015) Patient/Caregiver Drug Education Intervention:
Process - Education	Drug Education on All Medications Provided to Patient/Caregiver during All Episodes of Care	No	No	Percentage of home health episodes of care during which patient/caregiver was instructed on how to monitor the effectiveness of drug therapy, how to recognize potential adverse effects, and how and when to report problems (since the previous OASIS assessment).	Number of home health episodes of care during which patient/caregiver was instructed on how to monitor the effectiveness of drug therapy, how to recognize potential adverse effects, and how and when to report problems (since the previous OASIS assessment).	Number of home health episodes of care ending with a discharge or transfer to inpatient facility during the reporting period, other than those covered by generic or measure-specific exclusions.	Home health episodes for which the patient was not taking any drugs since the last OASIS assessment prior to transfer/discharge, OR the patient died.	(M0100) Reason for Assessment (M2015) Patient/Caregiver Drug Education Intervention

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Process - Prevention	Falls Prevention Steps Implemented for Short Term Episodes of Care	No	No	Percentage of short term home health episodes of care during which interventions to mitigate the risk of falls were included in the physician-ordered plan of care and implemented.	Number of home health episodes of care during which interventions to mitigate the risk of falls were included in the physician-ordered plan of care and implemented.	Number of home health episodes of care ending with a discharge or transfer to inpatient facility during the reporting period, other than those covered by generic or measure-specific exclusions.	Home health episodes for which formal multi-factor assessment indicates the patient was NOT at risk for falls between start/resumption of care and the discharge/transfer, OR patient died, OR an assessment for recertification or other followup was conducted between start/resumption of care and transfer or discharge.	(M0100) Reason for Assessment (M2400) b. Falls prevention interventions
Process - Prevention	Falls Prevention Steps Implemented for Long Term Episodes of Care	No	No	Percentage of long term home health episodes of care during which interventions to mitigate the risk of falls were included in the physician-ordered plan of care and implemented (since the previous OASIS assessment).	Number of home health episodes of care during which interventions to mitigate the risk of falls were included in the physician-ordered plan of care and implemented (since the previous OASIS assessment).	Number of home health episodes of care ending with a discharge or transfer to inpatient facility during the reporting period, other than those covered by generic or measure-specific exclusions.	Home health episodes for which formal multi-factor assessment indicates the patient was NOT at risk for falls at or since the last OASIS assessment prior to transfer/discharge, OR patient died, OR NO assessment for recertification or other followup was conducted between start/resumption of care and transfer or discharge.	(M0100) Reason for Assessment (M2400) b. Falls prevention interventions
Process - Prevention	Falls Prevention Steps Implemented for All Episodes of Care	No	No	Percentage of home health episodes of care during which interventions to mitigate the risk of falls were included in the physician-ordered plan of care and implemented (since the previous OASIS assessment).	Number of home health episodes of care during which interventions to mitigate the risk of falls were included in the physician-ordered plan of care and implemented (since the previous OASIS assessment).	Number of home health episodes of care ending with a discharge or transfer to inpatient facility during the reporting period, other than those covered by generic or measure-specific exclusions.	Home health episodes for which formal multi-factor assessment indicates the patient was NOT at risk for falls at or since the last OASIS assessment prior to transfer or discharge, OR patient died.	(M0100) Reason for Assessment(M2400) b. Falls prevention interventions
Process - Prevention	Influenza Immunization Received for Current Flu Season	Yes	No	Percentage of home health episodes of care during which patients received influenza immunization for the current flu season.	Number of home health episodes of care during which the patient a) received vaccination from the HHA or b) had received vaccination from HHA during earlier episode of care, or c) was determined to have received vaccination from another provider.	Number of home health episodes of care ending with a discharge or transfer to inpatient facility during the reporting period, other than those covered by generic or measure-specific exclusions.	Home health episodes care for which no care was provided during October 1 - March 31, OR the patient died, or the patient does not meet age/condition guidelines for influenza vaccine.	(M0030) Start of Care Date (M0032) Resumption of Care Date (M0906) Discharge/Transfer/Death Date (M1040) Influenza Vaccine: (M1045) Reason Influenza Vaccine not received

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Process - Prevention	Influenza Immunization Offered and Refused for Current Flu Season	No	No	Percentage of home health episodes of care during which patients were offered and refused influenza immunization for the current flu season.	Number of home health episodes of care during which patients were offered and refused influenza immunization for the current flu season.	Number of home health episodes of care ending with a discharge or transfer to inpatient facility during the reporting period, other than those covered by generic or measure-specific exclusions.	Home health episodes care for which no care was provided during October 1 - March 31, OR the patient died, or the patient does not meet age/condition guidelines for influenza vaccine.	(M0030) Start of Care Date (M0032) Resumption of Care Date (M0906) Discharge/Transfer/Death Date (M1040) Influenza Vaccine: (M1045) Reason Influenza Vaccine not received
Process - Prevention	Influenza Immunization Contraindicated	No	No	Percentage of home health episodes of care during which patients were determined to have medical contraindication(s) to receiving influenza immunization.	Number of home health episodes of care during which patients were determined to have medical contraindication(s) to receiving influenza vaccination.	Number of home health episodes of care ending with a discharge or transfer to inpatient facility during the reporting period, other than those covered by generic or measure-specific exclusions.	Home health episodes care for which no care was provided during October 1 - March 31, OR the patient died, or the patient does not meet age/condition guidelines for influenza vaccine.	(M0030) Start of Care Date (M0032) Resumption of Care Date (M0906) Discharge/Transfer/Death Date (M1040) Influenza Vaccine: (M1045) Reason Influenza Vaccine not received
Process - Prevention	Pneumococcal Polysaccharide Vaccine Ever Received	Yes	No	Percentage of home health episodes of care during which patients were determined to have ever received Pneumococcal Polysaccharide Vaccine (PPV).	Number of home health episodes of care during which patients were determined to have ever received Pneumococcal Polysaccharide Vaccine (PPV).	Number of home health episodes of care ending with a discharge or transfer to inpatient facility during the reporting period, other than those covered by generic or measure-specific exclusions.	Home health episodes of care during which patient died, OR patient does not meet age/condition guidelines for PPV.	(M1050) Pneumococcal Vaccine: (M1055) Reason PPV not received
Process - Prevention	Pneumococcal Polysaccharide Vaccine Offered and Refused	No	No	Percentage of home health episodes of care during which patients were offered and refused Pneumococcal Polysaccharide Vaccine (PPV).	Number of home health episodes of care during which patients were offered and refused Pneumococcal Polysaccharide Vaccine (PPV).	Number of home health episodes of care ending with a discharge or transfer to inpatient facility during the reporting period, other than those covered by generic or measure-specific exclusions.	Home health episodes of care during which patient died, OR patient does not meet age/condition guidelines for PPV.	(M1050) Pneumococcal Vaccine: (M1055) Reason PPV not received
Process - Prevention	Pneumococcal Polysaccharide Vaccine Contraindicated	No	No	Percentage of home health episodes of care during which patients were determined to have medical contraindication(s) to receiving Pneumococcal Polysaccharide Vaccine (PPV).	Number of home health episodes of care during which patients were determined to have medical contraindication(s) to receiving Pneumococcal Polysaccharide Vaccine (PPV),	Number of home health episodes of care ending with a discharge or transfer to inpatient facility during the reporting period, other than those covered by generic or measure-specific exclusions.	Home health episodes of care during which patient died, OR patient does not meet age/condition guidelines for PPV.	(M1050) Pneumococcal Vaccine: (M1055) Reason PPV not received
Process - Prevention	Potential Medication Issues Identified and Timely Physician Contact at Start of Episode	No	No	Percentage of home health episodes of care in which the patient's drug regimen at start/resumption of home health care was assessed to pose a risk of clinically significant adverse effects or drug reactions and whose physician was contacted within one calendar day.	Number of home health episodes of care in which the patient's drug regimen at start/resumption of home health care was assessed to pose a risk of clinically significant adverse effects or drug reactions and whose physician was contacted within one calendar day.	Number of home health episodes of care ending with discharge, death, or transfer to inpatient facility during the reporting period, other than those covered by generic or measure-specific exclusions.	Home health episodes in which the patient is not taking any medications or no problems were identified during drug regimen review at start (resumption) of care.	(M2002) Medication Follow-up

Type	Measure Title	HH Compare	Risk Adjusted ¹	Measure Description	Numerator	Denominator	Measure-specific Exclusions	OASIS C Item(s) Used
Process - Prevention	Potential Medication Issues Identified and Timely Physician Contact during Short Term Episodes of Care	No	No	Percentage of short term home health episodes of care during which the patient's drug regimen was assessed to pose a risk of significant adverse effects or drug reactions and whose physician was contacted within one calendar day.	Number of home health episodes of care during which the patient's drug regimen was assessed to pose a risk of significant adverse effects or drug reactions and whose physician was contacted within one calendar day.	Number of home health episodes of care ending with a discharge or transfer to inpatient facility during the reporting period, other than those covered by generic or measure-specific exclusions.	Home health episodes where no significant medication issues were identified between start/resumption of care and the discharge/transfer, OR recertification or other followup assessment was conducted between start/resumption of care and transfer or discharge, OR the patient died.	(M0100) Reason for Assessment(M2004) Medication Intervention
Process - Prevention	Potential Medication Issues Identified and Timely Physician Contact during Long Term Episodes of Care	No	No	Percentage of long term home health episodes of care during which the patient's drug regimen was assessed to pose a risk of significant adverse effects or drug reactions and whose physician was contacted within one calendar day (since the previous OASIS assessment).	Number of home health episodes of care during which the patient's drug regimen was assessed to pose a risk of significant adverse effects or drug reactions and whose physician was contacted within one calendar day (since the previous OASIS assessment).	Number of home health episodes of care ending with a discharge or transfer to inpatient facility during the reporting period, other than those covered by generic or measure-specific exclusions.	Home health episodes where no significant medication issues were identified between previous assessment and discharge/transfer, OR NO recertification or other followup assessment was conducted between start/resumption of care and transfer or discharge, OR the patient died.	(M0100) Reason for Assessment (M2004) Medication Intervention
Process - Prevention	Potential Medication Issues Identified and Timely Physician Contact during All Episodes of Care	No	No	Percentage of home health episodes of care during which the patient's drug regimen was assessed to pose a risk of significant adverse effects or drug reactions and whose physician was contacted within one calendar day (since the previous OASIS assessment).	Number of home health episodes of care during which the patient's drug regimen was assessed to pose a risk of significant adverse effects or drug reactions and whose physician was contacted within one calendar day (since the previous OASIS assessment).	Number of home health episodes of care ending with a discharge or transfer to inpatient facility during the reporting period, other than those covered by generic or measure-specific exclusions.	Home health episodes where no significant medication issues were identified since the last OASIS assessment prior to transfer or discharge, OR the patient died.	(M0100) Reason for Assessment (M2004) Medication Intervention
Process - Prevention	Pressure Ulcer Prevention Implemented during Short Term Episodes of Care	Yes	No	Percentage of short term home health episodes of care during which interventions to prevent pressure ulcers were included in the physician-ordered plan of care and implemented.	Number of home health episodes of care during which interventions to prevent pressure ulcers were included in the physician-ordered plan of care and implemented.	Number of home health episodes of care ending with a discharge or transfer to inpatient facility during the reporting period, other than those covered by generic or measure-specific exclusions.	Home health episodes for which formal assessment indicates the patient was NOT at risk of developing pressure ulcers between start/resumption of care and the discharge/transfer, OR an assessment for recertification or other followup was conducted between start/resumption of care and transfer or discharge, OR the patient died.	(M0100) Reason for Assessment (M2400) e. Intervention(s) to prevent pressure ulcers

Type	Measure Title	HH Compare	Risk Adjusted ¹	Measure Description	Numerator	Denominator	Measure-specific Exclusions	OASIS C Item(s) Used
Process - Prevention	Pressure Ulcer Prevention Implemented during Long Term Episodes of Care	No	No	Percentage of long term home health episodes of care during which interventions to prevent pressure ulcers were included in the physician-ordered plan of care and implemented (since the previous OASIS assessment).	Number of home health episodes of care during which interventions to prevent pressure ulcers were included in the physician-ordered plan of care and implemented (since the previous OASIS assessment).	Number of home health episodes of care ending with a discharge or transfer to inpatient facility during the reporting period, other than those covered by generic or measure-specific exclusions.	Home health episodes for which formal assessment indicates the patient was NOT at risk of developing pressure ulcers at or since the last OASIS assessment prior to transfer/discharge, OR NO assessment for recertification or other followup was conducted between start/resumption of care and transfer or discharge, OR the patient died.	(M0100) Reason for Assessment (M2400) e. Intervention(s) to prevent pressure ulcers
Process - Prevention	Pressure Ulcer Prevention Implemented during All Episodes of Care	No	No	Percentage of home health episodes of care during which interventions to prevent pressure ulcers were included in the physician-ordered plan of care and implemented (since the previous OASIS assessment).	Number of home health episodes of care during which interventions to prevent pressure ulcers were included in the physician-ordered plan of care and implemented (since the previous OASIS assessment).	Number of home health episodes of care ending with a discharge or transfer to inpatient facility during the reporting period, other than those covered by generic or measure-specific exclusions.	Home health episodes for which formal assessment indicates the patient was NOT at risk of developing pressure ulcers at or since the last OASIS assessment prior to transfer or discharge, OR the patient died.	(M0100) Reason for Assessment (M2400) e. Intervention(s) to prevent pressure ulcers

¹ Process measures are not risk adjusted to compensate for differences in the patient population. This is because the processes of care in the measures apply to all of the patients in the denominator (except for those patients that are identified in the denominator exclusions).