

# **Centers for Medicare & Medicaid Services**

**Inpatient Rehabilitation Facility**

**Quality Reporting Program**

**Special Open Door Forum**

**November 14, 2013**

**1:00 p.m. – 2:30 p.m. EST**

# Affordable Care Act 3004 (b)

- Section 3004(b) of the Affordable Care Act (ACA) requires that Inpatient Rehabilitation Facilities (IRFs) submit quality measure data in a time, form, and manner required by the Secretary of HHS.
- IRFs that do not submit the required quality measure data will receive a two percentage point reduction to their annual payment update (APU) for the applicable payment year.

# The FY 2012 IRF PPS Final Rule Quality Measures

In FY 2012 IRF-PPS Final Rule, CMS adopted two quality measures (affecting the FY 2014 APU):

- Urinary Catheter-Associated Urinary Tract Infection (CAUTI) rate per 1,000 urinary catheter days, for Intensive Care Unit (ICU) Patients (NQF #0138)
- Percent of Patients or Residents with Pressure Ulcers that are New or Worsened (Short-Stay) (NQF #0678)

- FY 2012 IRF PPS Final Rule:

<http://www.gpo.gov/fdsys/pkg/FR-2011-08-05/pdf/2011-19516.pdf>

# IRF QRP Requirements for the FY 2014 Payment Determination

- The 1st IRF Quality Reporting Program (IRF QRP) reporting period began on 10/01/2012 and ended on 12/31/2012.
- IRFs were required to submit their data for the 1st reporting period by no later than May 15, 2013 (i.e. - final data submission deadline).
- Data collected during the 1st IRF QRP reporting period affected the FY 2014 APU (for IRFs that did not meet the reporting requirements).

# 2013 IRF Final Rule General Information

- The 2013 IRF QRP Final rule was published in the CY 2013 Hospital OPPS/ASC Final Rule on 11/15/2013, because only an IRF PPS payment update notice issued for FY 2013.
- The 2013 IRF final rule affects the FY 2015 APU.
- The reporting period related to the FY 2015 APU is 01/01/2013 to 12/31/2013.
- To review the text of this rule, go to the following webpage: <http://www.gpo.gov/fdsys/pkg/FR-2012-11-15/pdf/2012-26902.pdf>

# 2013 IRF Final Rule Policy Decisions

In the 2013 IRF Final Rule, CMS:

- Established a policy in which measures that have been finalized for use in the IRF QRP will remain in effect and continue from year to year unless retired, removed or suspended.
- This means that IRFs are required to continue reporting data for the CAUTI and pressure ulcer measure (and any new quality measures added) on a continuing basis unless retired, removed or suspended.

# 2013 IRF Final Rule Policy Decisions (cont.)

In the 2013 IRF Final Rule, CMS finalized a policy regarding when the rulemaking process is required to adopt changes made to existing IRF QRP measures by the NQF. This policy states that:

- Use the sub-regulatory process if the NQF changes are non-substantial; and
- Use the traditional rule making process if the NQF changes are considered to be substantial in nature;
- Determinations of what constitutes substantive and non-substantive changes are to be determined on a case-by case basis and through further rule making.

# 2013 IRF Final Rule Measure Updates

In the 2013 IRF Final Rule, it was necessary for CMS to adopt a revised version of the previously finalized CAUTI measure for the following reasons:

- The CAUTI measure was updated by the CDC (the measure steward) through the NQF measure maintenance process.
- The CDC requested expansion of the CAUTI measure to the IRF & LTCH settings.
- The CAUTI measure was re-titled as: ***“NHSN Catheter-Associated Urinary Tract Infection (CAUTI) Outcome Measure (NQF #0138)”***

# 2013 IRF Final Rule Measure Updates

In the 2013 IRF Final Rule, CMS adopted a non-risk adjusted version of the “Percent of Residents / Patients with Pressure Ulcers that are New or Worsened” measure:

- Because the current version the IRF-PAI did not include some risk adjustment items required for this measure.
- This non-risk-adjusted versions of the pressure ulcer measure collects numerator & denominator data only.
- Data collected for the non-risk adjusted version of the pressure ulcer measure will not be publically reported.
- Use of the non-risk adjusted P.U. measure was to continue until the IRF-PAI could be revised to include the necessary items.

# 2014 IRF Final Rule Measure Updates

**However, in the FY 2014 IRF PPS Final Rule, CMS:**

- Adopted the NQF endorsed (risk adjusted) “Percent of Residents/Patients with Pressure Ulcers that are New or Worsened” measure (NQF 0678) , beginning on 10/01/2014.
- Finalized a new version of the IRF-PAI which contains revised pressure ulcer items and risk adjustment co-variates
- Use of this revised IRF PAI will begin on 10/01/2014.

# 2014 IRF Final Rule Policy Decisions

**In the FY 2014 IRF PPS Final Rule, CMS established quarterly data submission deadlines:**

- Each quarterly data submission deadline occurs 4 ½ months (135 days) after the end of each quarter.
- IRFs must submit the quality data for each quarter by the quarterly data submission deadline.
- Data submitted after the quarterly data submission deadline will not be accepted for the purposes of IRF QRP compliance determination.
- Missing one or more of these deadlines can lead to a finding of non-compliance.

# 2014 IRF Final Rule Policy Decisions

Final Data Submission Deadlines for **Calendar Year (NHSN)** Based Measures Beginning on January 1, 2013 & Continuing

<b>CY Quarter</b>	<b>Data Collection Time Frame</b>	<b>Data Submission Deadline</b>
<b>Quarter 1</b>	January 1, 2013 – March 31, 2013 , then January 1 <sup>st</sup> – March 31 <sup>st</sup> each year	August 23, 2013* August 15 <sup>th</sup>
<b>Quarter 2</b>	April 1, 2013 – June 30, 2013, then April 1 <sup>st</sup> –June 30 <sup>th</sup> each year	November 15, 2013 November 15 <sup>th</sup>
<b>Quarter 3</b>	July 1, 2013 – September 30, 2013, then July 1 <sup>st</sup> –September 30 <sup>th</sup>	February 15, 2014 February 15 <sup>th</sup>
<b>Quarter 4</b>	Oct. 1, 2013 – December 31, 2013, then Oct. 1 <sup>st</sup> –December 31 <sup>st</sup> each year	May 15, 2014 May 15 <sup>th</sup>

\* This deadline was extended b/c of NHSN technical problems.

# 2014 IRF Final Rule Policy Decisions

Final Data Submission Deadlines for **IRF-PAI** Based Measures From **01/01/2013** to **09/30/2014** Only

<b>CY Quarter</b>	<b>Data Collection Time Frame</b>	<b>Data Submission Deadline</b>
<b>Quarter 1</b>	January 1, 2013 – March 31, 2013 January 1, 2014 – March 31, 2014	August 15, 2013 August 15, 2014
<b>Quarter 2</b>	April 1, 2013 – June 30, 2013 April 1, 2014 – June 30, 2014	Nov. 15, 2013 Nov. 15, 2014
<b>Quarter 3</b>	July 1, 2013 – September 30, 2013 July 1, 2014 – September 30, 2014*	Feb. 15, 2014 Feb. 15, 2015
<b>Quarter 4</b>	October 1, 2013 – December 31, 2013	May 15, 2014

\* The reporting of IRF-PAI based measures will change to a fiscal year basis on 10/1/2014 (See slide 14).

# 2014 IRF Final Rule Policy Decisions

Final Data Submission Deadlines for **IRF-PAI** Based Measures From 10/01/2014 & Continuing

<b>FY Quarter</b>	<b>Data Collection Time Frame</b>	<b>Data Submission Deadline</b>
<b>Quarter 1</b>	Oct. 1, 2014 – Dec. 31, 2014, then Oct. 1st – Dec. 31 <sup>st</sup> each year	May 15, 2015, then May 15 <sup>th</sup> each year
<b>Quarter 2</b>	Jan. 1, 2015 – March 31, 2015, then January 1st – March 31 <sup>st</sup> each year	Aug 15, 2015, then Aug. 15 <sup>th</sup> each year
<b>Quarter 3</b>	April 1, 2015 – June 30, 2015, then April 1st – June 30 <sup>th</sup> each year	Nov. 15, 2015, then Nov 1 <sup>st</sup> each year
<b>Quarter 4</b>	July, 1, 2015 – September 30, 2015 July 1st – September 30 <sup>th</sup> each year	Feb. 15, 2016, then Feb. 15 <sup>th</sup> each year

# 2014 IRF Final Rule Policy Decisions

## IRF Quality Reporting Program Quarterly Data Submission Schedule & Deadlines for NHSN and IRF-PAI Based Quality Measures **(Effective 10/01/2014)**

<b>Data Collection Period</b>	<b>Quarterly Data Submission Deadline</b>	<b>Type of Data Due</b>
Jan 1, 2013 – March 31, 2013, then Jan. 1 <sup>st</sup> – March 31 <sup>st</sup> each year	Aug. 15, 2013, then Aug.15 <sup>th</sup> each year	Quarter 1: NHSN data Quarter 2: IRF-PAI data
April 1, 2013 to June 30, 2013, then April 1 <sup>st</sup> to June 30 <sup>th</sup> each year	Nov. 15, 2013, then Nov15 <sup>th</sup> each year	Quarter 2: NHSN data Quarter 3: IRF-PAI data
July 1, 2013 to Sept. 30, 2013, then July 1 <sup>st</sup> to Sept. 30 <sup>th</sup> each year	Feb. 15, 2014, then Feb 15 <sup>th</sup> each year	Quarter 3: NHSN data Quarter 4: IRF-PAI data
Oct. 1, 2013 to Dec. 31, 2013, then Oct 1, 2013 to Dec. 31 <sup>st</sup> each year	May 15, 2014, then May 15 <sup>th</sup> each year	Quarter 4: NHSN data Quarter 1: IRF-PAI data

# FY 2014 IRF PPS Final Rule

## New Quality Measures (Affecting FY 2016 APU)

In FY 2014 IRF-PPS final rule, CMS:

- Adopted the NQF endorsed (risk adjusted) “Percent of Residents/Patients with Pressure Ulcers that are New or Worsened” measure (NQF 0678)
- Use of this measure will begin on 10/01/2014, and will affect the FY 2017 APU determination.
- Data for this measure will be collected with revised pressure ulcer data items on the IRF-PAI.
- Data will be collected on a fiscal year basis.

# FY 2014 IRF PPS Final Rule

## New Quality Measures

In FY 2014 IRF-PPS final rule, CMS finalized the addition of two new measures for use in the IRF QRP:

- Percent of Residents or Patients Who Were Assessed and Appropriately Given the Seasonal Influenza Vaccine (Short Stay) (NQF #0680)
- Influenza Vaccination Coverage Among Healthcare Personnel (NQF #0431)
- See: <http://www.gpo.gov/fdsys/pkg/FR-2013-08-06/pdf/2013-18770.pdf>

# FY 2014 IRF PPS Final Rule

## New Quality Measures

### Percent of Residents or Patients Who Were Assessed and Appropriately Given the Seasonal Influenza Vaccine (Short Stay) (NQF #0680)

- Use of the patient influenza vaccination measure (NQF #0680) will begin on 10/01/2014, and will affect the FY 2017 APU.
- Data will be collected using a new data item set that has been added to a new version of the IRF-PAI that will become effective on 10/01/2014.
- Data will be collected on a fiscal year basis.

# FY 2014 IRF PPS Final Rule - New Quality Measures Data Collection Time Frames and Submission Deadlines

Timeline for Collection and Submission of Data for the NQF #0680 Measure for the FY 2017 APU Determination and Continuing

<b>FY Quarter</b>	<b>Data Collection Time Frame</b>	<b>Data Submission Deadline</b>
<b>Quarter 1 (During IVS)</b>	Oct. 1, 2014 – Dec. 31, 2014, then Oct.1st – Dec. 31 <sup>st</sup> each year	May 15, 2015, then May 15 <sup>th</sup> each year
<b>Quarter 2 (During IVS)</b>	Jan. 1, 2015 – March 31, 2015, then Jan. 1st – March 31st each year	Aug 15, 2015, then Aug. 15 <sup>th</sup> each year
<b>Quarter 3 (Outside IVS)</b>	April 1, 2015 – June 30, 2015, then April 1st – June 30th each year *	Nov. 15, 2015, then Nov 1th each year
<b>Quarter 4 (Outside IVS)</b>	July, 1, 2015 – Sept. 30, 2015 July 1st – Sept. 30th each year *	Feb. 15, 2016, then Feb. 15 <sup>th</sup> each year

# FY 2014 IRF PPS Final Rule - New Quality Measures Data Collection Time Frames and Submission Deadlines

## **Guidelines for submission of data for the NQF #0680 measure:**

\*The 3rd and 4th FY quarters (which consist of 04/01 to 06/30 and 07/01 to 09/30 respectively), technically fall outside the influenza vaccination season (IVS) which has been defined by the CDC as being 10/01 to 03/31 each year.

\*Does an IRF have to perform a full influenza screening on each patient outside of the IVS?

# FY 2014 IRF PPS Final Rule - New Quality Measures Data Collection Time Frames and Submission Deadlines

Scenarios in which IRFs are required to submit full influenza vaccination screening data on the IRF-PAI between 04/01 and 09/30 (outside the IVS):

- Patient admitted on or before the start of the influenza vaccination season (IVS) on 10/01 but discharged during the IVS (10/01 to 03/31);
- Patients admitted prior to 03/31 (before the end of the IVS, but not discharged until on or after 04/01 (after the end of the IVS);
- Patients that are admitted prior to the start of the IVS on 10/01, and the influenza vaccine is available early.

**An IRF should never withhold the influenza vaccine from a patient when it is available prior to October 1st!**

# FY 2014 IRF PPS Final Rule - New Quality Measures Data Collection Time Frames and Submission Deadlines

## Influenza Vaccination Coverage Among Healthcare Personnel (NQF #0431)

- Use of this measure begins on 10/01/2014 and will affect the FY 2016 APU
- Each IRF will be required to collect data about healthcare workers at that IRF that do and do not receive the influenza vaccination during the influenza vaccination season.
- The CDC defines the influenza vaccination season as 10/01 to 03/31 each year.
- IRFs submit one report to NHSN during the time period of April 1st and May 15th each year.

# FY 2014 IRF PPS Final Rule - New Quality Measures Data Collection Time Frames and Submission Deadlines

## Timeline for Collection and Submission of Data for the NQF #0431 Measure

Data Collection Period	Data Submission Deadlines
October 1, 2014 to March 31, 2015	May 15 , 2015
October 1 <sup>st</sup> to March 31 <sup>st</sup> each year thereafter	May 15 <sup>th</sup> each year thereafter

# FY 2014 IRF PPS Final Rule

## New Quality Measures

**In FY 2014 IRF- PPS final rule, CMS adopted one additional claims-based quality measure:**

- All-cause Unplanned Readmission Measure for 30 Days Post-Discharge From Inpatient Rehabilitation Facilities;
- IRFs will not be required to report any data related to this measure, because it is based on claims data.

# FY 2014 IRF PPS Final Rule Changes to the IRF-PAI

IRFs are currently using version 1.1 of the IRF-PAI to submit payment related information and pressure ulcer quality data to CMS.

- This version of the IRF PAI went into effect on 10/01/2012.
- Version 1.1 will remain in effect until 09/30/2014.
- On 10/01/2014, IRFs will begin to use a revised IRF-PAI (version 1.2).
- Version 1.2 of the IRF-PAI contains revised pressure ulcer data items and patient influenza vaccination measure data items.

# FY 2014 IRF PPS Final Rule Changes to the IRF-PAI

- IRF-PAIs must be completed for all patients receiving inpatient services in an IRF under the following Medicare programs:
  - Medicare Fee-For-Service
  - Medicare Managed Care
- For more information about the collection and submission of IRF quality measure data, please visit the IRF Quality Reporting Program webpage and the IRF PPS webpage

**New IRF QRP Quality Measures:  
Percent of Patients or Residents Who Were Assessed and  
Appropriately Received the Seasonal Influenza Vaccine**

**NQF #0680 - Numerator Statement:**

- The number of patients in the denominator sample who:
  1. Received the influenza vaccine during the most recent influenza vaccine season, either in the facility/hospital or outside the facility/hospital
  2. Were offered but declined the influenza vaccine;

**New IRF QRP Quality Measures:  
Percent of Patients or Residents Who Were Assessed and  
Appropriately Received the Seasonal Influenza Vaccine**

**NQF #0680 - Numerator Statement (cont.):**

1. Were ineligible due to contraindication(s) (e.g., previous severe allergic reaction to influenza vaccine, history of Guillain-Barré Syndrome within 6 weeks after a previous influenza vaccination, or bone marrow transplant within the past 6 months).

Each criterion in the numerator will be computed and reported separately.

# New IRF QRP Quality Measures: Percent of Patients or Residents Who Were Assessed and Appropriately Received the Seasonal Influenza Vaccine

## NQF #0680 - Denominator

- Consists of all patients aged 6 months and older with target assessments during the denominator time window.
- The NQF standard includes patient refusal and ineligibility in both the denominator and the numerator.

## Exclusions

- Patients are excluded from the denominator if they were not in the facility (IRF-PAI O0250C = 1) during the denominator time window.

# New IRF QRP Quality Measures: Influenza Vaccination Coverage Among Healthcare Personnel (NQF #0431)

## NQF #0431 - Numerator Statement

HCP in the denominator population who during the time from October 1 (or when the vaccine became available) through March 31 of the following year:

- (a) Received an influenza vaccination administered at the healthcare facility, or reported in writing (paper or electronic) or provided documentation that influenza vaccination was received elsewhere; or
- (b) Were determined to have a medical contraindication/condition of severe allergic reaction to eggs or to other component(s) of the vaccine, or history of Guillain-Barre Syndrome within 6 weeks after a previous influenza vaccination; or

# New IRF QRP Quality Measures: Influenza Vaccination Coverage Among Healthcare Personnel

## **NQF #0431 - Numerator Statement (cont.)**

- (c) Declined influenza vaccination; or
- (d) Persons with unknown vaccination status or who do not otherwise meet any of the definitions of the above-mentioned numerator categories.

Numerators are to be calculated separately for each of the above groups.

# New IRF QRP Quality Measures: Influenza Vaccination Coverage Among Healthcare Personnel

## NQF #0431 - Denominator Statement

Number of HCP who are working in the healthcare facility for at least 1 working day between October 1 and March 31 of the following year, regardless of clinical responsibility or patient contact.

Denominators are to be calculated separately for:

- (a) **Employees:** all persons who receive a direct paycheck from the reporting facility (i.e. on the facility's payroll).

# New IRF QRP Quality Measures: Influenza Vaccination Coverage Among Healthcare Personnel

## NQF #0431 - Denominator Statement (cont.)

- (b) **Licensed independent practitioners:** include physicians (MD, DO), advanced practice nurses, and physician assistants only who are affiliated with the reporting facility who do not receive a direct paycheck from the reporting facility.
- (c) **Adult students/trainees and volunteers:** include all adult students/trainees and volunteers who do not receive a direct paycheck from the reporting facility.

# **New IRF QRP Quality Measures: All-Cause Unplanned Readmission Measure for 30 Days Post Discharge from Inpatient Rehabilitation Facilities**

## **Readmission Measure for 30 Days Post Discharge from Inpatient Rehabilitation Facilities**

- Unadjusted rate of readmission to a short-stay acute-care hospital or an LTCH in the 30 days after an IRF discharge was 15% for IRFs (RTI analysis, 2010–2011).
- Given large proportion of readmissions, CMS proposes to monitor the readmission rates.
- CMS Goals: Reduce IRF readmission rates that are inappropriately high; improve patient safety and quality of care.

# New IRF QRP Quality Measures: All-Cause Unplanned Readmission Measure for 30 Days Post Discharge from Inpatient Rehabilitation Facilities

## Readmission Measure for 30 Days Post Discharge from Inpatient Rehabilitation Facilities Measure (cont.)

- Measure estimates the risk-standardized rate of unplanned, all-cause hospital readmissions for cases discharged from IRFs who were readmitted to a short-stay acute care hospital or LTCH, within 30 days of an IRF discharge.
- Risk-Standardization: A predicted risk-adjusted rate for each IRF is compared to the expected risk-adjusted rate for the same cases at an average IRF to do the standardization.
- Examples of risk adjustors: acute hospital principal and secondary diagnoses, types of surgeries, CMGs, prior ICU use, number of prior hospitalizations

# New IRF QRP Quality Measures: Relevance of IRF Readmission Measure

## Readmission Measure for 30 Days Post Discharge from Inpatient Rehabilitation Facilities Measure (cont.)

- Measure will provide information to providers that is not easily available to them currently.
- Elevated risk-adjusted readmission rates are indicators that there are opportunities for improvements in patient care and transitions of care.
- Measure being submitted to NQF December 2013.

# New IRF QRP Quality Measures: Where To Find Additional Information About the Readmission Measure

Readmission measure specifications are posted on CMS website:

<http://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/IRF-Quality-Reporting/Downloads/DRAFT-Specifications-for-the-Proposed-All-Cause-Unplanned-30-day-Post-IRF-Discharge-Readmission-Measure.pdf>

# Reporting IRF Quality Reporting Program Data through CDC's NHSN

- CDC's NHSN is used as data submission mechanism for the CAUTI and Healthcare Personnel Vaccination measures.
- For information on data collection and submission for these measures, please visit <http://www.cdc.gov/nhsn/>
- IRFs must enroll in NHSN as inpatient rehabilitation facility and complete online training modules prior to receiving reporting permissions from NHSN.
  - If you have not yet enrolled your IRF, contact NHSN by e-mail at CDC website: [nhsn@cdc.gov](mailto:nhsn@cdc.gov).
  - FAQs about NHSN enrollment process available on website

# CDC NHSN Resources

- Operational Guidance for CAUTI, and Healthcare Personnel Vaccination Data to CDC's NHSN:
  - For reporting CAUTI data:  
<http://www.cdc.gov/nhsn/PDFs/irf/8-6-2012-IRF-CAUTI-Guidance.pdf>
  - For reporting Healthcare Personnel Vaccination data:  
<http://www.cdc.gov/nhsn/inpatient-rehab/hcp-vacc/index.html>
  - For assistance on NHSN enrollment process or questions related to CAUTI or Healthcare Personnel Vaccination submissions to NHSN for the IRF Quality Reporting Program, contact CDC NHSN help desk at [nhsn@cdc.gov](mailto:nhsn@cdc.gov)

# IRF QRP Resources: E-mail and Phone

- Send questions and comments on technical issues regarding the IRF-PAI to [IRFTechIssues@cms.hhs.gov](mailto:IRFTechIssues@cms.hhs.gov)
- Address questions regarding access to QIES, IRVEN submission, and CASPER to QIES Technical Support office: at [help@qtso.com](mailto:help@qtso.com) or by phone at 1-800-339-9313
- Address questions regarding clinical non-quality items on the IRF-PAI to QIES Technical Support office: at [help@qtso.com](mailto:help@qtso.com) or by phone at 1-800-339-9313

CASPER = Certification And Survey Provider Enhanced Reports

QIES = Quality Improvement Evaluation System

# IRF QRP Resources: E-mail and Internet

- IRF Quality Reporting Program website and e-mail address:
  - Visit: <http://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/IRF-Quality-Reporting/index.html>
  - E-mail: [IRF.questions@cms.hhs.gov](mailto:IRF.questions@cms.hhs.gov)
- To receive mailing list notices and announcements about the program, please sign up at
  - <https://public.govdelivery.com/accounts/USCMS/subscriber/new>
- IRF Quality Reporting Program Provider Training Slide Decks
  - Training slides from May 2012 IRF provider training conference and other Special Open Door Forums are available here: <http://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/IRF-Quality-Reporting/Training.html>

**Questions?**