The IMPACT Act

Long-Term Care Hospitals

Compare Fact Sheet

The Improving Medicare Post-Acute Care Transformation (IMPACT) Act of 2014 requires the submission of standardized and interoperable patient assessment data across the sites of post-acute care (PAC). The requirements, which standardize and make interoperable certain PAC assessment data, will support the exchange and reuse of data across PAC and other providers. The Centers for Medicare & Medicaid Services (CMS) is committed to improving the quality and outcomes for people who receive services in PAC settings, such as Long-Term Care Hospitals (LTCH), Skilled Nursing Facilities (SNF), Inpatient Rehabilitation Facilities (IRF), and Home Health Agencies (HHA). To support this goal, CMS launched the LTCH Compare Site on December 14, 2016. LTCH Compare can serve as a resource to providers in understanding their current quality ratings, which are based on the data they submit. This data can demonstrate how their service quality compares to other local facilities, as well as the average national quality scores. This transparency is important because it showcases facilities’ ongoing commitment to quality, which can not only make facilities more competitive in the marketplace, but can also improve engagement and confidence among staff, patients, caregivers, families, and stakeholders.

Start a conversation with your patients!

CMS created the new LTCH Compare Site not only for providers, but also for patients and family members, to support their ability to find and compare facilities based on infection rates and other quality indicators. You can start a conversation with your patients about how the new LTCH Compare Site impacts them by:

- Explaining that Compare sites provide a snapshot of the quality of care your facility offers,
- Encouraging your patients and their family members to review quality ratings, and
- Helping to strengthen patients and family members’ ability to make the best decisions for their health.
LTCH Compare Data

As of January 20, 2017, the LTCH Compare website contains data from approximately 97 percent of more than 420 LTCHs. Four quality measures are currently displayed on LTCH Compare:

LTCH Measure Titles and Descriptions

<table>
<thead>
<tr>
<th>Measure</th>
<th>Description</th>
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<tbody>
<tr>
<td>Rate of pressure ulcers that are new or worsened</td>
<td>Percent of Residents or Patients with Pressure Ulcers that are New or Worsened (Short Stay) (NQF #0678), Data updated quarterly</td>
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<tr>
<td>Rate of hospital readmission after discharge from LTCH</td>
<td>All-Cause Unplanned Readmission Measure for 30 Days Post Discharge from Long-Term Care Hospitals, (NQF #2512), Data updated annually</td>
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<tr>
<td>Central line-associated bloodstream infections (CLABSI)</td>
<td>National Healthcare Safety Network (NHSN) Central Line-Associated Bloodstream Infection (CLABSI) outcome measure, (NQF #0139), Data updated quarterly</td>
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<tr>
<td>Catheter-associated urinary tract infections (CAUTI)</td>
<td>National Healthcare Safety Network (NHSN) Catheter-Associated Urinary Tract Infection (CAUTI) outcome measure (NQF #0138), Data updated quarterly</td>
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Importance for Providers

As more measures are included on the LTCH Compare website, providers will gain an increasingly comprehensive understanding of how their facility is performing. Through regular data updates, providers can continually strive to improve their quality scores and track their performance over time. This sort of data can prove invaluable when assessing the impact of quality improvement efforts and evaluating best practices.

Resources

- For more information, visit the LTCH Quality Public Reporting webpage for more information on LTCH Compare.
- For questions about LTCH Public Reporting, please contact LTCH Public Reporting helpdesk: LTCHPRquestions@cms.hhs.gov.
- Subscribe to the Post-Acute Care Quality Reporting Program (PAC QRP) listserv for the latest LTCH QRP and IMPACT Act information including, but not limited to training, stakeholder engagement opportunities, and general updates about reporting requirements, quality measures, and reporting deadlines.