LTCH Quality Reporting Measures Information

What are the Long-Term Care Hospital (LTCH) quality reporting measures?

In the following table you’ll find:

- National Quality Forum (NQF) measure identification numbers and titles
- Measures used in the LTCH Quality Reporting Program (QRP) by payment determination year

Learn more about when data’s collected and must be submitted, as well as the most current definitions for the LTCH quality measures please refer to the LTCH QRP Manual available under the Downloads section of the LTCH Quality Reporting Training webpage. Collection periods and submission deadlines for the data are located on the LTCH Data Submission Deadlines webpage.

<table>
<thead>
<tr>
<th>NQF Measure ID</th>
<th>Measure Title</th>
<th>FY 2015</th>
<th>FY 2016</th>
<th>FY 2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>NQF #0138</td>
<td>National Health Safety Network (NHSN)</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td>Catheter-Associated Urinary Tract Infection (CAUTI) Outcome Measure</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>NQF #0139</td>
<td>NHSN Central Line-Associated Bloodstream Infection (CLABSI) Outcome Measure</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>NQF #0678</td>
<td>Percent of Residents or Patients with Pressure Ulcers that are New or Worsened (Short-Stay)</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>NQF #0680</td>
<td>Percent of Residents or Patients Who Were Assessed and Appropriately Given the Seasonal Influenza Vaccine (Short-Stay)</td>
<td>No</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>NQF #0431</td>
<td>Influenza Vaccination Coverage among Healthcare Personnel</td>
<td>No</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>NQF #1716</td>
<td>NHSN Facility-Wide Inpatient Hospital-Onset Methicillin-Resistant Staphylococcus aureus (MRSA) Bacteremia Outcome Measure</td>
<td>No</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>NQF #1717</td>
<td>NHSN Facility-Wide Inpatient Hospital-Onset Clostridium difficile Infection (CDI) Outcome</td>
<td>No</td>
<td>No</td>
<td>Yes</td>
</tr>
</tbody>
</table>
Measure

All-Cause Unplanned Readmission Measure for

NQF #2512 30 Days Post-Discharge from Long-Term Care Hospitals

No No Yes

Archive

LTCH Measure Information Archives

Updates:

July 30, 2015

The Long-Term Care Hospital (LTCH) Continuity Assessment Record & Evaluation (CARE) Data Set, version 3.0 final item sets and change table can be found in the Downloads section below. Additionally, the final LTCH QRP specifications for the quality measures adopted through the FY 2016 final rule can be found in the Downloads section at the bottom of this page.

April 29, 2015

We have removed the identification of an effective date for the draft changes to the corrected LTCH CARE Data Sets v3.0 because such a date has not yet been determined.

April 19, 2015

The Long-Term Care Hospital (LTCH) Continuity Assessment Record & Evaluation (CARE) Data Set, v3.00 draft item sets and change table can be found in the Downloads section below.

April 16, 2015

Section 3004(a) of the Affordable Care Act amended section 1886(m)(5) of the Act, requiring the Secretary to establish the Long-Term Care Hospital Quality Reporting Program (LTCH QRP). This program applies to all hospitals certified by Medicare as LTCHs.

Additionally, the Improving Medicare Post-Acute Care Transformation Act of 2014 (Pub. L. 113-185) (the IMPACT Act of 2014) amended the Act in ways that affect the LTCH QRP. Specifically, section 2(a) of the IMPACT Act of 2014 added section 1899B of the Act, and section 2(c)(3) of the IMPACT Act of 2014 amended section 1886(m)(5) of the Act.
Sections 1899B(c)(1) and (d)(1) of the Act direct the Secretary to specify measures that relate to at least five stated quality domains and three stated resource use and other measure domains. The IMPACT Act of 2014 also requires,
the extent possible, the submission of such quality measure data through the use of a Post-Acute Care (PAC) assessment instrument and the modification of such instrument as necessary to enable such use. For LTCHs, this requirement refers to the Long-Term Care Hospital Continuity Assessment Record and Evaluation Data Set (LTCH CARE Data Set) which is currently in use for the collection and submission of quality data to the Centers for Medicare & Medicaid Services (CMS) as part of the LTCH QRP.

In this document, we present specifications for four (4) quality measures proposed for the LTCH QRP through the FY 2016 IPPS/LTCH PPS Proposed Rule. The quality measure specifications can be found in the Downloads section at the bottom of this page.