

Long-Term Care Hospital Quality Reporting Program (LTCH QRP)
Overview of Data Elements Used for Reporting Assessment-Based Quality Measures Affecting FY 2021 Annual Payment Update (APU) Determination

The Centers for Medicare & Medicaid Services' (CMS) Long-Term Care Hospital Quality Reporting Program (LTCH QRP) requires LTCHs to submit quality measure and standardized patient assessment data elements to CMS. For a given data submission period, the Long-Term Care Hospital Continuity Assessment Record and Evaluation Data Set (LTCH CARE Data Set) assessments submitted by an LTCH must meet the APU minimum submission threshold of no less than 80 percent of the LTCH CARE Data Set assessments having 100 percent completion of the required LTCH QRP data elements. These are the data elements needed to calculate the LTCH QRP quality measures and are defined as standardized data elements. Successful assessment completion is submission of actual patient data, as opposed to non-informative response options, i.e., "dash" (-). **Please note that while the coding of a "dash" is an optional response value for the data elements listed in this table, its use does not count toward meeting the APU minimum submission threshold.** Failure to meet the minimum threshold may result in a two (2) percentage point reduction in the LTCH's APU.

Below is a table indicating the LTCH CARE Data Set data elements that are used in determining the APU minimum submission threshold for the FY 2021 LTCH QRP determination. The LTCH CARE Data Set Version 4.00 is used for the CY Q1 – CY Q4 2019 (January – December 2019) data collection reporting period.

An "X" in the table below indicates the valid assessment type and data collection reporting period. For detailed measure specifications, please refer to the documents listed under "References" below.

Note: This table is limited to the data elements that are used for determining LTCH QRP compliance and are included in the APU submission threshold. There are additional data elements used to risk adjust the quality measures used in the LTCH QRP. It should be noted that failure to submit all data elements used to calculate and risk adjust a quality measure can affect the quality measure calculations that are displayed on the Compare website.

References:

LTCH QRP QM User's Manual V3.0: <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/LTCH-Quality-Reporting/Downloads/LTCH-Measure-Calculations-and-Reporting-Users-Manual-V30.pdf>

Final Specifications for LTCH QRP Quality Measures and Standardized Patient Assessment Data Elements: <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/LTCH-Quality-Reporting/Downloads/Measure-Specifications-for-FY17-LTCH-QRP-Final-Rule.pdf> and <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/LTCH-Quality-Reporting/Downloads/Final-Specifications-for-LTCH-QRP-Quality-Measures-and-Standardized-Patient-Assessment-Data-Elements-Effective-July-1-2018.pdf>

LTCH QRP Manual: <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/LTCH-Quality-Reporting/LTCH-CARE-Data-Set-and-LTCH-QRP-Manual.html>

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LTCH CARE Data Set Data Elements Used for FY 2021 LTCH QRP APU Determination		LTCH CARE Data Set Assessment Type				Data Collection Period (CY 2019)
LTCH CARE Data Set Section & Number	Data Element Label/Description	Admission	Planned Discharge	Unplanned Discharge	Expired	Q1 – Q4 CY 2019 LTCH CARE Data Set Version 4.00
B0100	Comatose	X	X			X
BB0700	Expression of Ideas and Wants	X	X			X
BB0800	Understanding Verbal and Non-Verbal Content	X	X			X
C1610A	Signs and Symptoms of Delirium (from CAM ©): Acute Onset	X	X	X		X
C1610B	Signs and Symptoms of Delirium (from CAM ©): Fluctuating Course	X	X	X		X
C1610C	Signs and Symptoms of Delirium (from CAM ©): Inattention	X	X	X		X
C1610D	Signs and Symptoms of Delirium (from CAM ©): Disorganized Thinking	X	X	X		X
C1610E1	Signs and Symptoms of Delirium (from CAM ©): Alert	X	X	X		X
C1610E2	Signs and Symptoms of Delirium (from CAM ©): Vigilant/Lethargic/Stupor/Coma	X	X	X		X
GG0130A1	Eating (Admission Performance)	X				X
GG0130A2	Eating (Discharge Goal)	X				X
GG0130A3	Eating (Discharge Performance)		X			X
GG0130B1	Oral hygiene (Admission Performance)	X				X
GG0130B2	Oral hygiene (Discharge Goal)	X				X
GG0130B3	Oral hygiene (Discharge Performance)		X			X
GG0130C1	Toileting hygiene (Admission Performance)	X				X
GG0130C2	Toileting hygiene (Discharge Goal)	X				X
GG0130C3	Toileting hygiene (Discharge Performance)		X			X
GG0130D1	Wash upper body (Admission Performance)	X				X
GG0130D2	Wash upper body (Discharge Goal)	X				X
GG0130D3	Wash upper body (Discharge Performance)		X			X
GG0170A1	Roll left and right (Admission Performance)	X				X
GG0170A2	Roll left and right (Discharge Goal)	X				X
GG0170A3	Roll left and right (Discharge Performance)		X			X
GG0170B1	Sit to lying (Admission Performance)	X				X

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GG0170B2	Sit to lying (Discharge Goal)	X				X
GG0170B3	Sit to lying (Discharge Performance)		X			X
GG0170C1	Lying to sitting on side of bed (Admission Performance)	X				X
GG0170C2	Lying to sitting on side of bed (Discharge Goal)	X				X
GG0170C3	Lying to sitting on side of bed (Discharge Performance)		X			X
GG0170D1	Sit to stand (Admission Performance)	X				X
GG0170D2	Sit to stand (Discharge Goal)	X				X
GG0170D3	Sit to stand (Discharge Performance)		X			X
GG0170E1	Chair/bed-to-chair transfer (Admission Performance)	X				X
GG0170E2	Chair/bed-to-chair transfer (Discharge Goal)	X				X
GG0170E3	Chair/bed-to-chair transfer (Discharge Performance)		X			X
GG0170F1	Toilet transfer (Admission Performance)	X				X
GG0170F2	Toilet transfer (Discharge Goal)	X				X
GG0170F3	Toilet transfer (Discharge Performance)		X			X
GG0170I1	Walk 10 feet (Admission Performance)	X				X
GG0170I2	Walk 10 feet (Discharge Goal)	X				X
GG0170I3	Walk 10 feet (Discharge Performance)		X			X
GG0170J1	Walk 50 feet with two turns (Admission Performance)	X				X
GG0170J2	Walk 50 feet with two turns (Discharge Goal)	X				X
GG0170J3	Walk 50 feet with two turns (Discharge Performance)		X			X
GG0170K1	Walk 150 feet (Admission Performance)	X				X
GG0170K2	Walk 150 feet (Discharge Goal)	X				X
GG0170K3	Walk 150 feet (Discharge Performance)		X			X
GG0170Q1	Does the patient use a wheelchair and/or scooter? (Admission)	X				X
GG0170Q3	Does the patient use a wheelchair and/or scooter? (Discharge)		X			X
GG0170R1	Wheel 50 feet with two turns (Admission Performance)	X				X

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GG0170R2	Wheel 50 feet with two turns (Discharge Goal)	X				X
GG0170R3	Wheel 50 feet with two turns (Discharge Performance)		X			X
GG0170RR1	Indicate the type of wheelchair or scooter used (Admission)	X				X
GG0170RR3	Indicate the type of wheelchair or scooter used (Discharge)		X			X
GG0170S1	Wheel 150 feet (Admission Performance)	X				X
GG0170S2	Wheel 150 feet (Discharge Goal)	X				X
GG0170S3	Wheel 150 feet (Discharge Performance)		X			X
GG0170SS1	Indicate the type of wheelchair or scooter used (Admission)	X				X
GG0170SS3	Indicate the type of wheelchair or scooter used (Discharge)		X			X
H0350	Bladder continence	X	X			X
H0400	Bowel continence	X				X
I0900	Peripheral vascular disease (PVD) or peripheral arterial disease (PAD)	X				X
I2900	Diabetes mellitus (DM)	X				X
J1900C	Number of falls since admission: Major injury		X	X	X	X
K0200A	Height (in inches)	X				X
K0200B	Weight (in pounds)	X				X
M0300B1	Number of Stage 2 pressure ulcers		X	X		X
M0300B2	Number of these Stage 2 pressure ulcers: present upon admission		X	X		X
M0300C1	Number of Stage 3 pressure ulcers		X	X		X
M0300C2	Number of these Stage 3 pressure ulcers present upon admission		X	X		X
M0300D1	Number of Stage 4 pressure ulcers		X	X		X
M0300D2	Number of these Stage 4 pressure ulcers present upon admission		X	X		X
M0300E1	Number of unstageable pressure ulcers/injuries due to non-removable dressing/device		X	X		X
M0300E2	Number of these unstageable pressure ulcers/injuries due to non-removable dressing/device present upon admission		X	X		X

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M0300F1	Number of unstageable pressure ulcers due to coverage of wound bed by slough and/or eschar		X	X		X
M0300F2	Number of these unstageable pressure ulcers due to coverage of wound bed by slough and/or eschar present upon admission		X	X		X
M0300G1	Number of unstageable pressure injuries presenting as deep tissue injury		X	X		X
M0300G2	Number of these unstageable pressure injuries presenting as deep tissue injury present upon admission		X	X		X
N2001	Drug Regimen Review	X				X
N2003	Medication Follow-up	X				X
N2005	Medication Intervention		X	X	X	X
O0150A	Invasive Mechanical Ventilation on Admission	X				X
O0150B	Assessed for readiness for SBT by day 2 of LTCH stay	X				X
O0150C	Deemed medically ready for SBT by day 2 of the LTCH stay	X				X
O0150D	Documentation of reason(s) that patient was deemed medically unready for SBT by day 2 of the LTCH stay	X				X
O0150E	SBT performed by day 2 of the LTCH stay	X				X
O0200A	Invasive Mechanical Ventilator: Liberation Status at Discharge		X	X		X
O0250A*	Did the patient receive the influenza vaccine in this facility for this year's influenza vaccination season?	*	*	*	*	*
O0250C*	If influenza vaccine not received, state reason	*	*	*	*	*

*Data collection for the patient influenza measure for Quarter 3 2018 (July 1 – September 30, 2018) affects the FY 2021 LTCH QRP. This measure was finalized for removal from the LTCH QRP, effective with patients admitted or discharged on or after October 1, 2018, in the FY 2019 IPPS/LTCH PPS final rule (83 FR 41632 through 41633). Please see: <https://www.gpo.gov/fdsys/pkg/FR-2018-08-17/pdf/2018-16766.pdf>. However, items O0250A, O0250B, and O0250C will remain on the LTCH CARE Data Set until the next version is released, and LTCHs should enter a dash or any valid code for these items beginning October 1, 2018 until the next LTCH CARE Data Set is released. Use of a dash for these items, for patients admitted or discharged after October 1, 2018, will not result in a 2 percent reduction in the LTCH's APU.