

Long-Term Care Hospital (LTCH) Quality Reporting Program (QRP) Public Reporting Archive

March 12, 2020

LTCH Provider Preview Reports – Now Available

Long-Term Care Hospital (LTCH) Provider Preview Reports have been updated and are now available. The data contained within the Preview Reports is based on quality data submitted by LTCHs between **Quarter 4 – 2018 and Quarter 3 – 2019**, and reflects what will be published on LTCH Compare during the **June 2020** refresh of the website. Providers have 30 days (3/12/20 to 4/13/20) to review their performance data. Corrections to the underlying data will not be permitted during this time; however, providers can request CMS review of their data during the preview period if they believe the quality measure scores that are displayed within their Preview Reports are inaccurate.

As a reminder, data for the quality measure *Percent of Residents or Patients that have New or Worsened Pressure Ulcers (short stay)*, will continue to reflect data collected between Quarter 3 2017 – Quarter 2 2018. This data will continue to be publicly displayed until such time as the new *Changes in Skin Integrity Post-Acute Care: Pressure Ulcer/Injury*, is publicly displayed in fall 2020, as finalized in the FY 2018 IPPS/LTCH PPS Final Rule.

LTCHs can access their preview report by logging in to iQIES at <https://iqies.cms.gov/>. At the main screen, select Reports; then 'My Reports'.

For more information:

- [LTCH Compare](#)

March 11, 2020

LTCH Compare Quarterly Refresh- Now Available

The **March 2020** quarterly Long-Term Care Hospital (LTCH) Compare refresh is now available. This LTCH Compare update reflects quality data submitted by LTCHs between **Quarter 3 – 2018 and Quarter 2 – 2019**.

As a reminder, data for the quality measure *Percent of Residents or Patients that have New or Worsened Pressure Ulcers (short stay)*, will continue to reflect data collected between Quarter 3 2017 – Quarter 2 2018. This data will continue to be publicly displayed until such time as the new *Changes in Skin Integrity Post-Acute Care: Pressure Ulcer/Injury*, is publicly displayed in fall 2020, as finalized in the FY 2018 IPPS/LTCH PPS Final Rule.

As of the March 2020 refresh, CMS will no longer publicly display the measure *Percent of residents or patients who were assessed and appropriately given the seasonal influenza vaccine (short stay)*, as finalized in the FY 2019 IPPS/LTCH PPS Final Rule.

In summary, the following quality measures will be displayed on LTCH Compare during the December 2019 refresh:

- Percent of residents or patients with pressure ulcers that are new or worsened (short stay)
 - Q3 2017 – Q2 2018 (7/01/2017 – 6/30/2018)
- Percent of Residents Experiencing One or More Falls with Major Injury (Long Stay)
 - Q3 2018 – Q2 2019 (7/01/18 – 6/30/19)
- Percent of Long-Term Care Hospital (LTCH) Patients With an Admission and Discharge Functional Assessment and a Care Plan That Addresses Function
 - Q3 2018 – Q2 2019 (7/01/18 – 6/30/19)
- Application of Percent of Long-Term Care Hospital (LTCH) Patients With an Admission and Discharge Functional Assessment and a Care Plan That Addresses Function
 - Q3 2018 – Q2 2019 (7/01/18 – 6/30/19)
- National Healthcare Safety Network (NHSN) Catheter-Associated Urinary Tract Infection (CAUTI) outcome measure
 - Q2 2018 – Q1 2019 (4/01/2018 – 3/31/2019)
- National Healthcare Safety Network (NHSN) Central Line-Associated Bloodstream Infection (CLABSI) outcome measure
 - Q2 2018 – Q1 2019 (4/01/2018 – 3/31/2019)
- National Healthcare Safety Network (NHSN) Facility-wide Inpatient Hospital-Onset Clostridium difficile Infection (CDI) outcome measure
 - Q2 2018 – Q1 2019 (4/01/2018 – 3/31/2019)
- Influenza Vaccination Coverage Among Healthcare Personnel
 - Q3 2016 – Q2 2017 (7/01/2016 – 6/30/2017)
- Percent of residents or patients who were assessed and appropriately given the seasonal influenza vaccine (short stay)
 - Q3 2016 – Q2 2017 (7/01/2016 – 6/30/2017)
- Potentially Preventable 30-Day Post-Discharge Readmission Measure for Long-Term Care Hospital Quality Reporting Program
 - Q4 2016 – Q3 2018 (10/1/2016 – 9/30/2018)
- Discharge to Community-Post Acute Care (PAC) Long-Term Care Hospital Quality Reporting Program
 - Q4 2015 – Q3 2017 (10/01/2015 – 09/30/2017)
- Medicare Spending Per Beneficiary Post Acute Care (PAC) Long-Term Care Hospital Quality Reporting Program
 - Q4 2016 – Q3 2018 (10/1/2016 – 9/30/2018)

Please visit the [LTCH Compare website](#) to view the updated quality data.

For more information:

- [LTCH Quality Public Reporting](#) webpage

December 12, 2019

LTCH Compare Quarterly Refresh- Now Available

The **December 2019** quarterly Long-Term Care Hospital (LTCH) Compare refresh is now available. This LTCH Compare update reflects quality data submitted by LTCHs between **Quarter 2 - 2018 and Quarter 1 – 2019**. CMS has additionally included the annual update to the Discharge to Community quality measure.

As a reminder, data for the quality measure Percent of Residents or Patients that have New or Worsened Pressure Ulcers (short stay), will continue to reflect data collected between Quarter 3 2017 and Quarter 2 2018. This data will continue to be publicly displayed until such time as the new Changes in Skin Integrity Post-

Acute Care: Pressure Ulcer/Injury, is publicly displayed in fall 2020, as finalized in the FY 2018 Inpatient Prospective Payment System (IPPS)/LTCH Prospective Payment System (PPS) Final Rule.

As of the December 2019 refresh, CMS will no longer publicly display the National Healthcare Safety Network (NHSN) Facility-wide Inpatient Hospital-onset Methicillin-resistant Staphylococcus aureus (MRSA) Bacteremia outcome measure, as finalized in the FY 2019 IPPS/LTCH PPS Final Rule.

In summary, the following quality measures will be displayed on LTCH Compare during the December 2019 refresh:

- Percent of residents or patients with pressure ulcers that are new or worsened (short stay)
 - Q3 2017 – Q2 2018 (7/01/2017 – 6/30/2018)
- Percent of Residents Experiencing One or More Falls with Major Injury (Long Stay)
 - Q2 2018 – Q1 2019 (4/01/2018 – 3/31/2019)
- Percent of Long-Term Care Hospital (LTCH) Patients With an Admission and Discharge Functional Assessment and a Care Plan That Addresses Function
 - Q2 2018 – Q1 2019 (4/01/2018 – 3/31/2019)
- Application of Percent of Long-Term Care Hospital (LTCH) Patients With an Admission and Discharge Functional Assessment and a Care Plan That Addresses Function
 - Q2 2018 – Q1 2019 (4/01/2018 – 3/31/2019)
- National Healthcare Safety Network (NHSN) Catheter-Associated Urinary Tract Infection (CAUTI) outcome measure
 - Q1 2018 – Q4 2018 (1/01/2018 – 12/31/2018)
- National Healthcare Safety Network (NHSN) Central Line-Associated Bloodstream Infection (CLABSI) outcome measure
 - Q1 2018 – Q4 2018 (1/01/2018 – 12/31/2018)
- National Healthcare Safety Network (NHSN) Facility-wide Inpatient Hospital-Onset *Clostridium Difficile* Infection (CDI) outcome measure
 - Q1 2018 – Q4 2018 (1/01/2018 – 12/31/2018)
- Influenza Vaccination Coverage Among Healthcare Personnel
 - Q3 2016 – Q2 2017 (7/01/2016 – 6/30/2017)
- Percent of residents or patients who were assessed and appropriately given the seasonal influenza vaccine (short stay)
 - Q3 2016 – Q2 2017 (7/01/2016 – 6/30/2017)
- Potentially Preventable 30-Day Post-Discharge Readmission Measure for Long-Term Care Hospital Quality Reporting Program
 - Q4 2016 – Q3 2018 (10/1/2016 – 9/30/2018)
- **New!** Discharge to Community-Post Acute Care (PAC) Long-Term Care Hospital Quality Reporting Program
 - Q4 2015 – Q3 2017 (10/01/2015 – 09/30/2017)
- Medicare Spending Per Beneficiary Post - Acute Care (PAC) Long-Term Care Hospital Quality Reporting Program
 - Q4 2016 – Q3 2018 (10/1/2016 – 9/30/2018)

Please visit the [LTCH Compare website](#) to view the updated quality data.

For more information:

- [LTCH Quality Public Reporting webpage](#)