

Long-Term Care Hospital (LTCH) Quality Reporting Program (QRP) Spotlights & Announcements Archives

September 16, 2020

LTCH CARE Data Set Quarterly Q&As, September 2020

The Centers for Medicare & Medicaid Services (CMS) is publishing the Long-Term Care Hospital (LTCH) Continuity Assessment Record and Evaluation (CARE) Data Set (LCDS) Quarterly Q&As September 2020 document so that all LTCH providers have the benefit of the updates/clarifications to guidance. CMS occasionally identifies the opportunity to clarify or refine guidance. Moving forward, CMS plans to publish LCDS Q&As on a quarterly basis.

The Quarterly Q&As document can be accessed via the [LTCH CARE Data Set and LTCH QRP Manual](#) webpage.

September 8, 2020

LTCH QRP COVID-19 PR Tip Sheet is Available

The Long-Term Care Hospital (LTCH) COVID-19 Public Reporting (PR) Tip Sheet is now available. The purpose of this Tip Sheet is to help providers understand the Centers for Medicare & Medicaid Services (CMS)' public reporting strategy for the Post-Acute Care (PAC) Quality Reporting Program (QRP) in the midst of the COVID-19 public health emergency (PHE). This Tip Sheet explains the CMS strategy to account for CMS quality data, which were exempted from public reporting due to COVID-19, and the impact on CMS' LTCH Compare website refreshes. Please navigate to the [LTCH QRP Training](#) webpage to download this document.

July 24, 2020

LTCH QRP COVID-19 PHE Tip Sheet is Available

The Long-Term Care Hospital (LTCH) COVID-19 Public Health Emergency (PHE) Tip Sheet is now available. This tip sheet is designed to assist LTCH providers in understanding the status of the LTCH Quality Reporting Program (QRP) during the COVID-19 PHE. Also provided is practical guidance to address LTCH quality data submission requirements starting July 1, 2020, now that the temporary LTCH QRP exemptions from the COVID-19 PHE have ended. Please navigate to the [LTCH QRP Training](#) webpage to download this document.

July 13, 2020

LTCH QRP: Non-Compliance Notifications. Reconsiderations are due by August 18, 2020.

CMS is providing notifications to Long-Term Care Hospitals (LTCHs) that were determined to be out of compliance with LTCH Quality Reporting Program (QRP) requirements for calendar year (CY) 2019, which will affect their fiscal year (FY) 2021 Annual Update (i.e., APU). Non-compliance notifications will be distributed by the Medicare Administrative Contractors (MACs) and will also be placed into facilities' My Reports folders in the internet Quality Improvement and Evaluation System (iQIES) on July 13, 2020. Either notification is official notice of non-compliance. Facilities that receive a letter of non-compliance may submit a request for reconsideration to CMS **via email no later than 11:59:59 EST, August 18, 2020**. If you receive a notice of

non-compliance and would like to request a reconsideration, see the instructions in your notification letter and on the [LTCH Quality Reporting Reconsideration and Exception & Extension](#) webpage.

Please note: Any reconsideration containing protected health information (PHI) will not be processed. All PHI must be removed in order for a reconsideration to be reviewed.

June 23, 2020

Reminder:

QRPs are expected to report their quality data to meet requirements starting Quarter 3, which begins July 1, 2020.

The March 27, 2020 Medicare Learning Network Newsletter (MLN) Exceptions and Extensions for Quality Reporting Program (QRP) Requirements that includes Skilled Nursing Facilities, Home Health Agencies, Hospices, Inpatient Rehabilitation Facilities, and Long-Term Care Hospitals (hereafter referred to as post-acute care (PAC) programs) applies only to Quarter 4 of 2019 (October 1-December 31, 2019) and Quarters 1 and 2 of 2020 (January 1-June 30, 2020). Providers are expected to report data and meet the QRP requirements beginning with Quarter 3, 2020 that starts July 1, 2020.

As stated in that March 27, 2020 MLN Newsletter, "In some instances, these exceptions and extensions are granted because the data collected may be greatly impacted by the response to COVID-19 and therefore should not be considered in the quality reporting program. CMS is closely monitoring the situation for potential adjustments and will update exception lists, exempted reporting periods, and submission deadlines accordingly as events occur."

Starting with Quarter 3 that begins July 1, 2020, the Centers for Medicare and Medicaid Services (CMS) expects providers to report their quality data. CMS will analyze the data for each program recognizing that the COVID-19 public health emergency (PHE) remains in effect and could impact the quality data submitted. CMS will closely monitor the situation for public reporting of the data and provide any updates.