

LONG-TERM CARE HOSPITAL QUALITY REPORTING PROGRAM (LTCH QRP)



COVID-19 Public Reporting Tip Sheet

This third edition of the LTCH QRP Public Reporting (PR) Tip Sheet:

Provides the following updates on LTCH QRP Public Reporting:

- Reporting of claims-based quality measures (QM).
- Definition of the quarters for reporting of claims-based QMs displayed on Care Compare and the Provider Data Catalog (PDC) until the normal annual refresh using the specified eight consecutive quarters of data occurs.
- Description of the public reporting of the COVID-19 Vaccination Coverage among Healthcare Personnel (HCP), reported through the Centers for Disease Control and Prevention’s (CDC) National Healthcare Safety Network (NHSN).
- An announcement regarding the accelerated refresh for NHSN Influenza Vaccination among HCP measure.



To understand the background of the LTCH QRP in relation to the COVID-19 Public Health Emergency (PHE), please refer to the [Second Edition LTCH COVID-19 PR Tip Sheet](#) published in February 2022. This previous tip sheet provided information about CMS’ plan to adjust public reporting due to the Calendar Year (CY) 2020 COVID-19 excepted data (Q1 and Q2 2020). The temporary exceptions to the LTCH data submission requirements, which ended on June 30, 2020, were a result of the COVID-19 PHE. The resumption of public reporting on Care Compare for the both the LTCH Continuity Assessment Record and Evaluation (CARE) Data Set (LCDS) assessment-based QMs and the CDC NHSN-based QMs with the December 2021 refresh cycle was explained. In addition, the plan for the resumption of public reporting for claims-based QMs during the June 2022 refresh was outlined.

Document Terms

CY 2020 COVID-19 Exempted

Data: Refers to exempted quarters of data (Q1 and Q2 2020) due to the COVID-19 PHE.

Normal Refresh: Refers to updates on Care Compare using the standard number of consecutive quarters of data.

Public Reporting and Care Compare

Inaugural Public Reporting for the COVID-19 Vaccination Coverage among Healthcare Personnel (HCP) Measure

As discussed in the LTCH Prospective Payment System (PPS) Fiscal Year (FY) 2022 Final Rule, this measure is designed to help assess whether LTCHs are taking steps to limit the spread of COVID-19 among HCP, reduce the risk of transmission within their facilities, and help sustain the ability of LTCHs to continue serving their communities through the PHE and beyond. Data collection for this process measure began October 1, 2021.

The inaugural reporting of this measure on Care Compare and the PDC occurred with the September 2022 refresh and is based on one quarter of data, the first being Q4 2021 (October 1, 2021, through December 31, 2021), affecting the CY 2021 reporting period/FY 2023 payment determination. Following this initial release, data will be updated and publicly reported on a quarterly basis. Compliance for annual payment update purposes will be based on four quarters of data submission each CY, beginning in CY 2022, and affecting FY 2024 payment determination.

Influenza Vaccination Coverage among HCP (NQF #0431) Measure

The collection and submission of data for the LTCH QRP NHSN Influenza Vaccination among HCP (NQF #0431) measure has been a requirement of the LTCH QRP since CMS first finalized this measure in the FY 2014 LTCH PPS Final Rule. In order to ensure that CMS is publicly posting the most recent QM data possible, CMS has decided to accelerate the refresh schedule for this measure. As stated above, this measure was initially finalized in the FY 2014 LTCH PPS Final Rule. It was publicly displayed for the first time on the legacy LTCH Compare web site in December 2017, using data from the 2015-2016 Influenza season. Please reference **Table 1** to understand which influenza season’s data has and will be used to calculate this measure for public display during a given corresponding Care Compare/PDC refresh:

Table 1. Summary of Influenza Season Data

Care Compare Refresh	Influenza Season Used for Public Display
December 2017	2015–2016
December 2018	2016–2017
December 2019	2017–2018
December 2020 ¹	2017–2018
December 2021	2018–2019
December 2022	2020–2021
March 2023 ²	2021–2022
December 2023	2022–2023

¹ Data were held constant as CMS was unable to refresh the data using the 2019-2020 Influenza season, since providers were exempted from submitting Q1 2020 data, due to the PHE.
² CMS plans to accelerate the refresh schedule so that the December 2023 refresh reflects the most current Influenza vaccination data available.

For information on all of the current LTCH measures, please refer to [LTCH QRP Measures Information](#) web page.

CMS’ Approach to Excepted Data

The Q1 and Q2 2020 COVID-19 excepted data are still impacting what is displayed on Care Compare. CMS resumed public reporting on Care Compare and the PDC beginning with the December 2021 refresh. This refresh included the CDC NHSN data (i.e., Catheter-Associated Urinary Tract Infections (CAUTI), Central-Line Associated Bloodstream Infections (CLABSI), Clostridium Difficile Infections (CDI), and Influenza Vaccination among HCP) and the LCDS-based QMs. CMS resumed reporting claims-based measure data in July 2022.



When did or will refreshes return to their expected (“normal”) quarters of data?

- March 2022 refresh (actual release, April 2022):
 - LCDS-based QMs normalized, using four consecutive quarters of data (except for the LTCH Change in Mobility Measure, which used six quarters of data).
- June 2022 refresh (actual release, July 2022):
 - CDC NHSN QMs CDI, CAUTI, and CLABSI normalized, using four consecutive quarters of data (Q3 2020–Q2 2021).
- December 2022 refresh:
 - CDC NHSN Influenza Vaccination Coverage among HCP QM will be normalized, using six months of data, updated annually.
- March 2023 refresh:
 - All LCDS-based QMs normalized, using expected quarters of data.
- September 2023 refresh:
 - The claims-based measures will normalize, using eight consecutive quarters of data.

Table 2 provides a summary of the data refreshes for each of the data sources in the LTCH QRP. It also provides the dates that are included in the respective quarterly refreshes for measures derived from each of the three data sources. The footnotes provide more detail and definitions.

Table 2. Summary of Data Refreshes

Quarter Refresh	LCDS Assessment-Based Measures ¹	NHSN-Based Measures	Claims-Based Measures
June 2022 (<i>Actual Release July 2022</i>)	Normal refresh except the Change in Mobility QM, which will use six quarters of data	Normal reporting resumes for CDI, CAUTI, and CLABSI using four consecutive quarters of data (Q3 2020–Q2 2021)	Public reporting resumes using six quarters of data (Q3 2019–Q4 2019 and Q3 2020–Q2 2021)
September 2022	Normal refresh except the Change in Mobility QM, which will use seven quarters of data	Normal refresh for CDI, CAUTI, and CLABSI Inaugural reporting of the COVID-19 Vaccination Coverage among HCP Measure using Q4 2021 data (October 1, 2021–December 31, 2021) ²	No refresh ³
December 2022	Normal refresh except Change in Mobility QM, which will use eight quarters of data ⁴	Normal reporting resumes for all NHSN measures ⁵	No refresh
March 2023	Normal reporting resumes for all LCDS measures	Normal refresh	No refresh
June 2023	Normal refresh	Normal refresh	No refresh
September 2023	Normal refresh	Normal refresh	Normal reporting resumes using eight consecutive quarters of data (Q4 2020–Q3 2022) ⁶

¹ Public reporting using four consecutive quarters of data resumed in March 2022 (actual release April 2022).

² Subsequent to this inaugural display, data will be updated and reported quarterly.

³ CMS will not perform the annual update in September 2022. The next update will be September 2023.

⁴ Data collection for the Transfer of Health Information LCDS assessment-based QMs began October 1, 2022.

⁵ HCP Influenza data were frozen using Q4 2018–Q1 2019 data until December 2022 when normal reporting will resume using 6 months of data (Q4 2020–Q1 2021).

⁶ Claims-based measures will fully normalize with the September 2024 refresh as Q1 and Q2 2020 exclusions will no longer be used in the stay constructions/lookback periods.

Reporting of Claims-Based Measures

CMS made the decision to delay public reporting by six months to allow more time to analyze the calculation of these measures and the effect of the excepted data on certain aspects of measure calculation such as look-back periods and risk adjustment.

CMS resumed the public reporting of claims-based measures using six quarters of data with the June 2022 refresh. Because of this recent refresh, CMS will not perform the normal annual update in September 2022, as the data will not change enough to be meaningful. CMS will next update these data during the September 2023 refresh, after which CMS will resume the normal cadence of annual updates.

Figure 1 below depicts how CMS accommodated the excepted two quarters of data related to the COVID-19 PHE, as well as the resumption of normal annual refresh in September 2023.

Figure 1. Quarters Used in Reporting of Claims-Based Measures

Quarter Refresh	2019				2020				2021				2022			
	Q1	Q2	Q3	Q4												
June 2022 ¹																
September 2022 ¹																
September 2023 ²																

¹Per the March 27, 2020, MLN Memo, Q1 and Q2 2020 data will not be publicly reported.
²Normal reporting using eight consecutive quarters of data resumes for claims-based measures. The darker shaded area displays the consecutive quarters of claims data that will be used for the September 2023 refresh.

Provider Reports

- **Provider Preview Report (PPR):** The purpose of the PPR is to give providers the opportunity to preview their LCDS, NHSN, and claims-based QM results prior to public display on Care Compare and the PDC.
- **Review and Correct (R&C) Report:** The purpose of the R&C report is for providers to access QM data prior to the data correction deadline for public reporting. It includes data from the most current quarter and data from the previous three quarters. The report notes which quarters are “open” for correction and which are “closed,” no longer allowing correction.
- **LTCH QM Reports:** These reports give providers confidential feedback on the facility’s performance. Providers can run a QM report for any reporting period of their choice; they can include a full year of data if requested. The QM report can include both facility-level and patient-level data.

Resources

- [First Edition LTCH QRP COVID-19 PR Tip Sheet.](#)
- [Second Edition LTCH QRP COVID-19 PR Tip Sheet.](#)
- [FY 2022 LTCH PPS Final Rule Fact Sheet \(CMS-1752-F\).](#)
- [FY 2022 LTCH PPS Final Rule \(CMS-1752-F\).](#)
- [LTCH QRP Data Submission Deadlines.](#)
- [CMS Medicare Learning Network Memo released March 27, 2020.](#)
- [Program Guidance and Information about the CMS response to COVID-19.](#)
- [LTCH QRP Spotlight & Announcements Webpage for Program Guidance, Updates, and Announcements.](#)
- [Public Reporting for the LTCH QRP.](#)
- [LTCH QRP Quick Reference Guide FY 2022.](#)

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