

Home Health Quality Measures – Potentially Avoidable Events

Notes:

- Risk Adjustment:** These measures will not be risk-adjusted, beginning with episodes that start on or after January 1, 2019.
- “Quality Episode” Definition:** Quality episodes are used in the calculation of the quality measures. Quality episodes are not the same as payment episodes. A quality episode begins with either a SOC (start of care) or ROC (resumption of care) and ends with a transfer, death, or discharge for a patient regardless of the length of time between the start and ending events.
- All Payer Data:** As of July 1, 2025, CMS has mandated collection and submission of OASIS data for all patients receiving skilled care with any pay source (a.k.a. all-payer) who are not exempt from OASIS data collection, . At this time the OASIS-based quality measures in the Home Health Quality Reporting Program will continue to report only data for Medicare fee-for-service, Medicare Advantage (Medicare managed care), Medicaid, and Medicaid managed care.
- Generic Exclusions (as noted in the Denominator Column):** Defined as patients for whom OASIS assessments are not required. This includes (1) patients under the age of 18, (2) patients receiving maternity services only, (3) patients receiving personal care, homemaker, or chore services only, (4) patients receiving outpatient therapy services provided by a HHA and billed under Medicare Part B benefit that do not have a home health plan of care in effect, (5) patients receiving a service from a company (other than the Medicare-certified HHA) using HHA staff under a loaned employee agreement, and (6) single visit quality episodes.

Measure Title	Care Compare	NQF Status	Risk Adjusted	Measure Description	Numerator	Denominator	Measure-specific Exclusions	OASIS Item(s) Used
Emergent Care for Improper Medication Administration, Medication Side Effects	No	Not Endorsed	No	Percentage of home health quality episodes during which the patient required emergency medical treatment from a hospital emergency department related to improper medication administration or medication side effects.	Number of home health quality episodes where the discharge/transfer assessment indicated the patient required emergency medical treatment from a hospital emergency department related to improper medication administration or medication side effects.	Number of home health quality episodes ending with a discharge or transfer to inpatient facility during the reporting period, other than those covered by generic or measure-specific exclusions.	Home health quality episodes for which emergency department use or reason for emergency department use is unknown at transfer or discharge.	(M2301) Emergent Care (M2310) Reason for Emergent Care (M0100) Reason for Assessment
Emergent Care for Hypo/Hyperglycemia	No	Not Endorsed	No	Percentage of home health quality episodes during which the patient required emergency medical treatment from a hospital emergency department related to hypo/hyper-glycemia.	Number of home health quality episodes where the discharge or transfer to inpatient facility assessment indicated the patient required emergency medical treatment from a hospital emergency department related to hypo/hyper-glycemia.	Number of home health quality episodes ending with a discharge or transfer to inpatient facility during the reporting period, other than those covered by generic or measure-specific exclusions.	Home health quality episodes for which emergency department use or reason for emergency department use is unknown at transfer or discharge.	(M2301) Emergent Care (M2310) Reason for Emergent Care (M0100) Reason for Assessment
Development of Urinary Tract Infection	No	Not Endorsed	No	Percentage of home health quality episodes during which patients developed a bladder or urinary tract infection.	Number of home health quality episodes where the discharge assessment indicates the patient has been treated for a urinary tract infection in the past 14 days.	Number of home health quality episodes ending with a discharge during the reporting period, other than those covered by generic or measure-specific exclusions.	Home health quality episodes for which the patient, at start/resumption of care, already was being treated for a urinary tract infection, OR episodes that end with inpatient facility transfer or death.	(M1600) Urinary Tract Infection (M0100) Reason for Assessment
Increase in Number of Pressure Ulcers/Injuries	No	Withdrawn	No	Percentage of home health quality episodes during which the patient had a larger number of pressure ulcers/injuries at discharge than at start of care.	Number of home health quality episodes where the discharge assessment indicates more pressure ulcers/injuries (stage 2 or higher, or unstageable) at discharge than at start/resumption of care.	Number of home health quality episodes ending with a discharge during the reporting period, other than those covered by generic or measure-specific exclusions.	Home health quality episodes that end with inpatient facility transfer or death.	(M1306) Unhealed Pressure Ulcer/Injury at Stage 2 or Higher (M1311) Current Number of Unhealed Pressure Ulcers/Injuries at Each Stage (M0100) Reason for Assessment

Measure Title	Care Compare	NQF Status	Risk Adjusted	Measure Description	Numerator	Denominator	Measure-specific Exclusions	OASIS Item(s) Used
Substantial Decline in 3 or more Activities of Daily Living	No	Not Endorsed	No	Percentage of home health quality episodes during which the patient became substantially more dependent in at least three out of seven activities of daily living.	Number of home health quality episodes where at discharge the patient was substantially more impaired in at least three of the activities listed below than at start/resumption of care: Ambulation, Toilet Transferring, Toileting Hygiene, Bed Transferring, Bathing, Grooming, and Eating.	Number of home health quality episodes ending with a discharge during the reporting period, other than those covered by generic or measure-specific exclusions.	Home health quality episodes for which the patient, at start/resumption of care, was totally or almost totally dependent in 3 of the activities listed, OR episodes that end with inpatient facility transfer or death.	(M1800) Grooming (M1830) Bathing (M1840) Toilet Transferring (M1845) Toileting Hygiene (M1850) Transferring (M1860) Ambulation/Locomotion (M1870) Feeding or Eating (M0100) Reason for Assessment
Substantial Decline in Management of Oral Medications	No	Not Endorsed	No	Percentage of home health quality episodes during which the patient's ability to take their medicines correctly (by mouth) got much worse.	Number of home health quality episodes where the value recorded on the discharge assessment indicates total dependence in management of oral medications, while the value recorded on the start/resumption of care assessment indicated total independence.	Number of home health quality episodes ending with a discharge during the reporting period, other than those covered by generic or measure-specific exclusions.	Home health quality episodes for which the patient, at start/resumption of care, was not totally independent in taking oral medicines, OR episodes that end with inpatient facility transfer or death.	(M2020) Management of Oral Medications (M0100) Reason for Assessment
Discharged to the Community Needing Wound Care or Medication Assistance	No	Not Endorsed	No	Percentage of home health quality episodes at the end of which the patient was discharged, with no formal assistance available, needing wound care or medication assistance.	Number of home health quality episodes where, at discharge, patient remained in the community without skilled services from a Medicare Certified HHA or non-institutional hospice, and had a pressure ulcer of stage 3 or 4, or a non-healing surgical wound, or a non-healing stasis ulcer, or was totally dependent in medication administration.	Number of home health quality episodes ending with a discharge during the reporting period, other than those covered by generic or measure-specific exclusions.	Home health quality episodes that end with inpatient facility transfer or death.	(M2102) Types and Sources of Assistance (M2420) Discharge Disposition (M1710) When Confused (M1324) Stage of Most Problematic Unhealed Pressure Ulcer/Injury that is Stageable (M1334) Status of Most Problematic Stasis Ulcer that is Observable (M1342) Status of Most Problematic Surgical Wound that is Observable (M2020) Management of Oral Medications (M0100) Reason for Assessment
Discharged to the Community Needing Toileting Assistance	No	Not Endorsed	No	Percentage of home health quality episodes at the end of which the patient was discharged, with no formal assistance available, needing toileting assistance.	Number of home health quality episodes where the discharge assessment indicated the patient, was totally dependent in toileting, and remained in community without skilled services from a Medicare Certified HHA or non-institutional hospice.	Number of home health quality episodes ending with a discharge during the reporting period, other than those covered by generic or measure-specific exclusions.	Home health quality episodes that end with inpatient facility transfer or death.	(M2102) Types and Sources of Assistance (M1840) Toilet Transferring (M1845) Toileting Hygiene (M2420) Discharge Disposition (M0100) Reason for Assessment

Measure Title	Care Compare	NQF Status	Risk Adjusted	Measure Description	Numerator	Denominator	Measure-specific Exclusions	OASIS Item(s) Used
Discharged to the Community with Behavioral Problems	No	Not Endorsed	No	Percentage of home health quality episodes at the end of which the patient was discharged, with no formal assistance available, demonstrating behavior problems.	Number of home health quality episodes where the discharge assessment indicated the patient remained in community without skilled services from a Medicare Certified HHA or non-institutional hospice, and demonstrated at least two behavior problems.	Number of home health quality episodes ending with a discharge during the reporting period, other than those covered by generic or measure-specific exclusions.	Home health quality episodes that end with inpatient facility transfer or death.	(M2102) Types and Sources of Assistance (M2420) Discharge Disposition (M1740) Cognitive, behavioral, and psychiatric symptoms (M0100) Reason for Assessment
Discharged to the Community with an Unhealed Stage 2 Pressure Ulcer	No	Not Endorsed	No	Percentage of home health quality episodes at the end of which the patient was discharged with a stage 2 pressure ulcer that has remained unhealed for 30 days or more while a home health patient.	Number of home health quality episodes where, at discharge, patient remained in the community without skilled services from a Medicare Certified HHA or non-institutional hospice and had a pressure ulcer of stage 2 more than 30 days old, and the patient has been on service at least 30 days.	Number of home health quality episodes for which discharge disposition is unknown at discharge, OR for episodes ending with a discharge during the reporting period, other than those covered by generic or measure-specific exclusions.	Home health quality episodes that end with inpatient facility transfer or death.	(M2420) Discharge Disposition (M1306) Unhealed Pressure Ulcer/Injury at Stage 2 or Higher (M1307) The Oldest Stage 2 Pressure Ulcer that is present at discharge (M0030) Start of Care Date (M0032) Resumption of Care Date: (M0906) Discharge/Transfer/Death Date (M0100) Reason for Assessment