



# COVID-19 Public Reporting Tip Sheet

The purpose of the tip sheet is to provide information to long-term care hospitals (LTCHs) to understand the Centers for Medicare & Medicaid Services' (CMS) public reporting strategy for CMS quality data submissions that were either optional or excepted from public reporting due to the COVID-19 public health emergency (PHE). The impact on CMS' LTCH Compare website refreshes are also outlined. This tip sheet serves as a supplemental document to the [LTCH COVID-19 PHE Tip Sheet](#) published in July 2020, providing guidance to address LTCH quality data submissions after July 1, 2020, once the temporary LTCH exceptions from the COVID-19 PHE ended.



## LTCH QRP and Public Reporting on LTCH Compare

The LTCH QRP was established under Section 3004(b) of the Patient Protection and Affordable Care Act of 2010 and expanded with the Improving Medicare Post-Acute Care Transformation Act of 2014. Both require the reporting of quality measures that relate to the care provided by LTCH programs across the country. The data for the quality of patient care measures are derived from three sources:

- LTCH Continuity Assessment Record and Evaluation Data Set (LTCH CARE Data Set).
- Centers for Disease Control and Prevention's National Healthcare Safety Network (NHSN).
- Medicare fee-for-service claims.

## Temporary LTCH QRP Exceptions Due to the COVID-19 PHE

The CMS [March 27, 2020 Medicare Learning Network \(MLN\) memo](#) provided temporary exceptions to the LTCH QRP data submission requirements due to the COVID-19 PHE to assist LTCH providers while they directed resources toward caring for patients and ensuring the health and safety of patients and staff. CMS granted an exception to the QRP reporting requirements for the quarters detailed in Figure 1.

**Figure 1. Quarters for Which Data Are Optional or Excepted**

Quarter	NHSN and LTCH Care Data Set Data Submission
October 1, 2019–December 31, 2019 (Q4 2019)	Optional
January 1, 2020–March 31, 2020 (Q1 2020)	Excepted
April 1, 2020–June 30, 2020 (Q2 2020)	Excepted

These changes to LTCH Care Data Set data submission requirements ended **on June 30, 2020**.

## Impact of Data Exceptions on Public Reporting

The LTCH QRP is a pay-for-reporting program; as such, CMS is statutorily required to publicly report the data. In the March 27, 2020, announcement, CMS indicated that data submission for Q4 2019 was optional and that any data submitted would be used for reporting purposes. Since data submission for Q4 2019 was strong, these data will be included in measure calculations for public reporting.

The missing data for Q1 2020 and Q2 2020 will impact what is displayed on LTCH Compare; therefore, CMS developed a strategy to accommodate the exempted quarters of data.

## CMS Strategy for Excepted Data

For Q1 2020 and Q2 2020, providers were excepted from data submissions. For this reason, CMS will hold the data constant (i.e., freeze the data) following the December 2020 refresh. The affected Compare site refreshes that were scheduled to contain CY 2020 COVID-19 data (Q1 2020, and Q2 2020) include:

- March 2021
- June 2021
- September 2021

Due to technical issues that affected the calculation of LTCH quality measures, CMS has decided to delay the LTCH Compare September 2020 refresh until December 2020. Data from the June 2020 refresh of LTCH Compare will be held constant on the site until December 2020, when CMS will refresh the LTCH data, including the inaugural release of three new quality measures (*Changes in Skin Integrity Post-Acute Care: Pressure Ulcer/Injury; Drug Regimen Review Conducted with Follow-Up for Identified Issues for LTCHs; Functional Outcome Measure: Change in Mobility Among Long-Term Care Hospital Patients Requiring Ventilator Support*).

After the December 2020 refresh, CMS will hold the December 2020 data constant until we resume LTCH Compare site refreshes in December 2021. Refreshes will then return to normal by the March 2022 refresh of the IRF Compare site. Figure 2 provides a summary.



**Figure 2. Summary of Data Refreshes**

Quarter Refresh	LTCH Compare (LTCH QRP) Assessment-Based Measures Claims-Based Measures NHSN-Based Measures
September 2020	Continue to display June 2020 refresh data
December 2020	Normal refresh to include Q4 2019 data (inaugural posting of 3 new quality measures)
March 2021	Freeze
June 2021	Freeze
September 2021	Freeze
December 2021	Public reporting resumes*
March 2022	Normal Refresh

\*To account for missing PHE-accepted data (Q1 2020 and Q2 2020) when public reporting resumes, any potential change in measure calculation methodology will be subject to notice-and-comment rulemaking.

All NHSN (e.g., CAUTI, CLABSI, CDI, and HCP Influenza) quality measures will be frozen beginning with the December 2020 refresh through the December 2021 refresh. CMS will continue to report NHSN infection data to post-acute care providers via their confidential provider feedback reports throughout this time.

## Provider Reports

### How will the data freeze affect the provider reports?

- **Provider Preview Reports:**
  - The purpose of these reports is to give providers the opportunity to preview their LTCH Care Data Set quality measure results and NHSN results prior to public display on LTCH Compare.
  - CMS will delay the September 2020 refresh until December 2020. Subsequent to the December 2020 refresh, CMS will not issue provider preview reports for those refreshes that continue to display the constant data. For additional information on the issuance of provider preview reports related to the December 2020 refresh, please continue to visit the [LTCH QR Public Reporting website](#) for updates.
- **Review and Correct Report:**
  - The purpose of this report is for providers have access to quality measure data prior to the data correction deadline for public reporting. It includes data from

the most current quarter “open” for data correction and data from the previous three quarters “closed” for data correction (frozen data).

- There will be no data available (open) to correct for Q1 2020 and Q2 2020.
- **Quality Measure (QM) Reports:**
  - These reports give you confidential feedback on your agency’s performance. You can run these for any reporting period of your choice and they can include a full year of data if you request. They include both the patient-level data and the facility-level data.
  - Providers will be able to confidentially review any data from Q1 and Q2 2020 that they chose to submit.

**Note:** Post July 1, 2020, correction and submission deadlines will revert to their normal schedule. Data displays and correction/submission deadlines will apply for Q3 2020 and beyond.

### When will the data return to normal?

The LTCH Compare site data will go back to its expected quarters of data displayed in March 2022.

## Data Submission On or After July 1, 2020

Since the temporary exception for LTCH quality reporting requirements ended on June 30, 2020, **starting on July 1, 2020**, LTCHs are expected to resume timely quality data collection and submission of measure and patient assessment data for the LTCH Care Data Set and NHSN. There are no submission requirements for Medicare claims data.

### How will new LTCH Care Data Set submissions be impacted by data that was exempted due to the COVID-19 PHE?

- CMS is aware that some of the discharges submitted on or after July 1, 2020, may not have a matching LTCH Care Data Set admission record, providing the admission occurred in Q1 or Q2 2020, as CMS excepted quality data submissions during this timeframe. This may cause an “out of sequence” warning error during the submission process.
- CMS will make adjustments on their end to accommodate any records with missing admissions.
- These mismatched sets of records will not be counted or included in your LTCH data calculations for LTCH Compare.



## Warning Errors

Error Number	Error Type	Error Description
909	Out of Sequence	<b>Inconsistent Record Sequence:</b> Under CMS sequencing guidelines, this type of record does not logically follow the type of record received prior to this one.

Despite this warning, data will still be accepted into the system. (no action is needed)

## Resources

- **For the Interim Final Rule with Comment Period (IFC-1):**  
<https://www.federalregister.gov/documents/2020/04/06/2020-06990/medicare-and-medicaid-programs-policy-and-regulatory-revisions-in-response-to-the-covid-19-public>
- **For the Interim Final Rule with Comment Period released April 30, 2020, (IFC-2):**  
<https://www.federalregister.gov/documents/2020/05/08/2020-09608/medicare-and-medicaid-programs-basic-health-program-and-exchanges-additional-policy-and-regulatory>
- **For the CMS Medicare Learning Network memo released March 27, 2020:**  
<https://www.cms.gov/files/document/guidance-memo-exceptions-and-extensions-quality-reporting-and-value-based-purchasing-programs.pdf>
- **For program guidance and information about the CMS response to COVID-19:**  
<https://www.cms.gov/About-CMS/Agency-Information/Emergency/EPRO/Current-Emergencies/Current-Emergencies-page>
- **For program guidance, updates, and announcements regarding the LTCH QRP, visit the Spotlight & Announcements web page:** <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/LTCH-Quality-Reporting/LTCH-Quality-Reporting-Spotlight-Announcements>.
- **Long-Term Care Hospital (LTCH) Quality Reporting Program (QRP) Quick Reference Guide FY 2021** <https://www.cms.gov/files/document/pac-ltch-fy2021-quickreferenceguide.pdf>

Email questions to the LTCH Help Desk:

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