



# **SNF QRP Measure Calculations and Reporting User's Manual Version 3.0.1**

Prepared for

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Quality Measure, Assessment Instrument  
Development, Maintenance and Quality  
Reporting Program Support for the Long-Term  
Care Hospital (LTCH), Inpatient Rehabilitation  
Facility (IRF), Skilled Nursing Facility (SNF)  
QRPs and Nursing Home Compare (NHC)

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## Overview

This addendum provides quality measure updates to the [SNF QRP Measure Calculations and Reporting User's Manual, Version 3.0](#). This addendum, titled SNF QRP Measure Calculations and Reporting User's Manual, Version 3.0.1, provides measure-related changes specified in a change table format in lieu of a complete update to the overall manual. Updates are provided in the table below by manual chapter, section, page number, step/table indicator, updated language with strikeouts of prior language, and the description of the change. The step/table column adds specificity in locating the edits by indicating if the edits are located within a specific step or table on a given page. When edits are not found in a specific step/table, the column displays "N/A".

Measure-related changes delineated in this change table include an update to the SNF QRP self-care and mobility functional outcome measures that includes changes to the CMS IDs and age criteria. There are also updates to correct the i) omission of function response codes for the function process measure in Table 7-3 and ii) specifications for Comorbidity HCC Group 24 in Table A-5. This document clarifies the removal of the retired pressure ulcer quality measure, Percent of Residents or Patients with Pressure Ulcers That Are New or Worsened (Short Stay) (NQF #0678) (CMS ID: S002.02). In addition, the Discharge to Community quality measure is updated to include an exclusion for residents in long-term nursing facilities.

## SNF QRP Measure Calculations and Reporting User's Manual V3.0.1 Updates

#	Chapter	Section	Page Number	Step/ Table	SNF QRP Measure Calculations and Reporting User's Manual V3.0.1	Description of Change
1	1	1.3	4	N/A	<p>The definitions below refer to the following measures:</p> <ul style="list-style-type: none"> <li>• Application of Percent of Long-Term Care Hospital (LTCH) Patients With an Admission and Discharge Functional Assessment and a Care Plan That Addresses Function (NQF #2631) (CMS ID: S001.03)</li> <li>• SNF Functional Outcome Measure: Discharge Self-Care Score for Skilled Nursing Facility Residents (NQF #2635) <del>(CMS ID: S024.02)</del> (CMS ID: S024.03)</li> <li>• SNF Functional Outcome Measure: Discharge Mobility Score for Skilled Nursing Facility Residents (NQF #2636) <del>(CMS ID: S025.02)</del> (CMS ID: S025.03)</li> <li>• SNF Functional Outcome Measure: Change in Self-Care Score for Skilled Nursing Facility Residents (NQF #2633) <del>(CMS ID: S022.02)</del> (CMS ID: S022.03)</li> <li>• SNF Functional Outcome Measure: Change in Mobility Score for Skilled Nursing Facility Residents (NQF #2634) <del>(CMS ID: S023.02)</del> (CMS ID: S023.03)</li> </ul>	Reflects changes in CMS measure identifiers based on updated measure specifications.
2	1	1.3	5	Table 1-1	(See Appendix Table 1-1 below)	Reflects removal of the retired pressure ulcer measure: Percent of Residents or Patients with Pressure Ulcers That Are New or Worsened (Short Stay) (NQF #0678) (CMS ID: S002.02). Reflects changes in CMS measure identifiers based on updated measure specifications.

#	Chapter	Section	Page Number	Step/ Table	SNF QRP Measure Calculations and Reporting User's Manual V3.0.1	Description of Change
3	2	N/A	7	N/A	<ul style="list-style-type: none"> <li>Discharge to Community - Post Acute Care (PAC) Skilled Nursing Facility Quality Reporting Program (NQF #3481) <del>(CMS ID: S005.01)</del> (CMS ID: S005.02)</li> <li>This measure reports a SNF's risk-standardized rate of Medicare FFS residents who are discharged to the community following a SNF stay, and do not have an unplanned readmission to an acute care hospital or LTCH in the 31 days following discharge to community, and who remain alive during the 31 days following discharge to community. Community, for this measure, is defined as home or self-care, with or without home health services. <ul style="list-style-type: none"> <li><i>Note: This measure has been updated to exclude residents who had a long-term nursing facility (NF) stay in the 180 days preceding their hospitalization and SNF stay, with no intervening community discharge between the long-term NF stay and qualifying hospitalization.</i></li> </ul> </li> </ul>	Reflects changes in CMS measure identifier based on updated measure specifications, and note added to explain change in exclusion criteria.
4	3	3.1.1	9	1	Example: The 12-month Quality Measure Target Period for <del>CY2018</del> CY2019 is January 1, <del>2018</del> 2019 – December 31, <del>2018</del> 2019.	Updated target period.
5	3	3.1.1	10	2	Example: If the Quality Measure Target Period is January 1, <del>2018</del> 2019 – December 31, <del>2018</del> 2019, all MDS assessments with a Target Date on or after January 1, <del>2018</del> 2019 and on or before December 31, <del>2018</del> 2019 should be included.	Updated target period.
6	3	3.1.3	11	1	Example: If the Quality Measure Target Period is January 1, <del>2018</del> 2019 – December 31, <del>2018</del> 2019, the search window for the first iteration is January 1, <del>2018</del> 2019 through December 31, <del>2018</del> 2019.	Updated target period.

#	Chapter	Section	Page Number	Step/ Table	SNF QRP Measure Calculations and Reporting User's Manual V3.0.1	Description of Change
7	3	3.1.3	11	2	Footnote: The search window is a date range (e.g., the search window is January 1, <del>2018</del> 2019 – December 31, <del>2018</del> 2019). An MDS assessment is in the search window if its Target Date falls within the specified date range. If there is a PPS Discharge Assessment (A0310H = [1]) that is combined with an OBRA Discharge Assessment and the End date of most recent Medicare stay (A2400C) on this PPS Discharge Assessment (A0310H = [1]) is the last day of this search window, the Target Date of this assessment will be on or one day after the search window end date (on December 31, <del>2018</del> 2019 or on January 1, <del>2019</del> 2020).	Updated target period.
8	3	3.1.3	15	3	Example: If the Target Period is January 1, <del>2018</del> 2019 – December 31, <del>2018</del> 2019 and, for the first identified SNF Stay, the SNF Stay Start Date is July 1, <del>2018</del> 2019, then the search window for the search iteration is January 1, <del>2018</del> 2019 through June 30, <del>2018</del> 2019 (i.e., July 1, <del>2018</del> 2019 minus 1 day).	Updated target period.

#	Chapter	Section	Page Number	Step/ Table	SNF QRP Measure Calculations and Reporting User's Manual V3.0.1	Description of Change
9	3	3.2	15-16	N/A	<p>Measures included in this section:</p> <ul style="list-style-type: none"> <li><del>• Percent of Residents or Patients with Pressure Ulcers that Are New or Worsened (Short Stay) (NQF #0678) (CMS ID: S002.02)</del></li> <li>• Application of Percent of Residents Experiencing One or More Falls with Major Injury (Long Stay) (NQF #0674) (CMS ID: S013.02)</li> <li>• Application of Percent of Long-Term Care Hospital (LTCH) Patients With an Admission and Discharge Functional Assessment and a Care Plan That Addresses Function (NQF #2631) (CMS ID: S001.03)</li> <li>• Drug Regimen Review Conducted with Follow-up for Identified Issues – PAC SNF QRP (CMS ID: S007.02)</li> <li>• Changes in Skin Integrity Post-Acute Care: Pressure Ulcer/Injury (CMS ID: S038.02)</li> <li>• SNF Functional Outcome Measure: Discharge Self-Care Score for Skilled Nursing Facility Residents (NQF #2635) <del>(CMS ID: S024.02)</del> (CMS ID: S024.03)</li> <li>• SNF Functional Outcome Measure: Discharge Mobility Score for Skilled Nursing Facility Residents (NQF #2636) <del>(CMS ID: S025.02)</del> (CMS ID: S025.03)</li> <li>• SNF Functional Outcome Measure: Change in Self-Care Score for Skilled Nursing Facility Residents (NQF #2633) <del>(CMS ID: S022.02)</del> (CMS ID: S022.03)</li> <li>• SNF Functional Outcome Measure: Change in Mobility Score for Skilled Nursing Facility Residents (NQF #2634) <del>(CMS ID: S023.02)</del> (CMS ID: S023.03)</li> </ul>	Reflects removal of the retired pressure ulcer measure: Percent of Residents or Patients with Pressure Ulcers That Are New or Worsened (Short Stay) (NQF #0678) (CMS ID: S002.02) and changes in CMS measure identifiers based on updated measure specifications.
10	3	3.2	16	3	<p><del>a. Percent of Residents or Patients with Pressure Ulcers That Are New or Worsened (Short Stay) (NQF #0678) (CMS ID: S002.02), Table 7-1</del></p>	Reflects removal of the retired pressure ulcer measure: Percent of Residents or Patients with Pressure Ulcers That Are New or Worsened (Short Stay) (NQF #0678) (CMS ID: S002.02).

#	Chapter	Section	Page Number	Step/ Table	SNF QRP Measure Calculations and Reporting User's Manual V3.0.1	Description of Change
11	3	3.2	17	3	<p>f. SNF Functional Outcome Measure: Discharge Self-Care Score for Skilled Nursing Facility Residents (NQF #2635) <del>(CMS ID: S024.02)</del> (CMS ID: S024.03), Table 7-6</p> <p>g. SNF Functional Outcome Measure: Discharge Mobility Score for Skilled Nursing Facility Residents (NQF #2636) <del>(CMS ID: S025.02)</del> (CMS ID: S025.03), Table 7-7</p> <p>h. SNF Functional Outcome Measure: Change in Self-Care Score for Skilled Nursing Facility Residents (NQF #2633) <del>(CMS ID: S022.02)</del> (CMS ID: S022.03), Table 7-8</p> <p>i. SNF Functional Outcome Measure: Change in Mobility Score for Skilled Nursing Facility Residents (NQF #2634) <del>(CMS ID: S023.02)</del> (CMS ID: S023.03), Table 7-9</p>	Reflects changes in CMS measure identifiers based on updated measure specifications.
12	3	3.2	17	4	<p><del>a. Percent of Residents or Patients with Pressure Ulcers That Are New or Worsened (Short Stay) (NQF #0678) (CMS ID: S002.02)</del></p> <p><del>i. CASPER Review &amp; Correct reports are provided in Table 4-3 for the quarterly rates and Table 4-4 for the cumulative rates</del></p> <p><del>ii. CASPER QM reports Table 4-5</del></p>	Reflects removal of the retired pressure ulcer measure: Percent of Residents or Patients with Pressure Ulcers That Are New or Worsened (Short Stay) (NQF #0678) (CMS ID: S002.02).

#	Chapter	Section	Page Number	Step/ Table	SNF QRP Measure Calculations and Reporting User's Manual V3.0.1	Description of Change
13	3	3.2	18	4	<p>f. SNF Functional Outcome Measure: Discharge Self-Care Score for Skilled Nursing Facility Residents (NQF #2635)  <del>(CMS ID: S024.02)</del> (CMS ID: S024.03)</p> <p>i. CASPER Review &amp; Correct reports are provided in Table 4-3 for the quarterly rates and Table 4-4 for the cumulative rates</p> <p>ii. CASPER QM Reports Table 4-5</p> <p>g. SNF Functional Outcome Measure: Discharge Mobility Score for Skilled Nursing Facility Residents (NQF #2636)  <del>(CMS ID: S025.02)</del> (CMS ID: S025.03)</p> <p>i. CASPER Review &amp; Correct reports are provided in Table 4-3 for the quarterly rates and Table 4-4 for the cumulative rates</p> <p>ii. CASPER QM Reports Table 4-5</p> <p>h. SNF Functional Outcome Measure: Change in Self-Care Score for Skilled Nursing Facility Residents (NQF #2633)  <del>(CMS ID: S022.02)</del> (CMS ID: S022.03)</p> <p>i. CASPER Review &amp; Correct reports are provided in Table 4-3 for the quarterly rates and Table 4-4 for the cumulative rates</p> <p>ii. CASPER QM Reports Table 4-5</p> <p>i. SNF Functional Outcome Measure: Change in Mobility Score for Skilled Nursing Facility Residents (NQF #2634)  <del>(CMS ID: S023.02)</del> (CMS ID: S023.03)</p>	Reflects changes in CMS measure identifiers based on updated measure specifications.



#	Chapter	Section	Page Number	Step/ Table	SNF QRP Measure Calculations and Reporting User's Manual V3.0.1	Description of Change
14	4	4.1	20	1	<p><del>c. The data will be "frozen" 4.5 months (15<sup>th</sup> day of the 5<sup>th</sup> month) after the end of each calendar quarter (data submission deadline).</del></p> <p><del>i. e.g., Data will be frozen on August 15<sup>th</sup> for Quarter 1 (January 1 through March 31) data collection.</del></p> <p><i>c. Data submission deadline: data must be submitted by 11:59 p.m. ET on the 15th of August, November, February, or May after the end of each respective quarter. However, if the 15th of the month falls on a Friday, weekend, or federal holiday, the data submission deadline is delayed until 11:59 p.m. ET on the next business day.</i></p> <p><i>i. For example, the data submission deadline for Quarter 1 (January 1 through March 31) data collection would normally be 11:59 p.m. ET, August 15, which is the 15th day of the month, 5 months after the end of the data collection period. However, in FY 2021, August 15th falls on a Sunday; therefore, the deadline for this data submission is extended until the next business day which would be 11:59 p.m. ET on August 16, 2021.</i></p>	Updated data submission language for clarity and accuracy.
15	4	4.1	21	4	<p>4. The illustration of the reporting timeline for the CASPER Review and Correct Reports for the following quality measures is provided in Table 4-3 for the quarterly rates and Table 4-4 for the cumulative rates:</p> <p><del>a. Percent of Residents or Patients with Pressure Ulcers That Are New or Worsened (Short Stay) (NQF #0678) (CMS ID: S002.02)</del></p> <p>b. Application of Percent of Residents Experiencing One or More Falls with Major Injury (Long Stay) (NQF #0674) (CMS ID: S013.02)</p>	Reflects removal of the retired pressure ulcer measure: Percent of Residents or Patients with Pressure Ulcers That Are New or Worsened (Short Stay) (NQF #0678) (CMS ID: S002.02).

#	Chapter	Section	Page Number	Step/ Table	SNF QRP Measure Calculations and Reporting User's Manual V3.0.1	Description of Change
16	4	4.1	22	Table 4-2	(See Appendix Table 4-2 below)	Reflects removal of the retired pressure ulcer measure: Percent of Residents or Patients with Pressure Ulcers That Are New or Worsened (Short Stay) (NQF #0678) (CMS ID: S002.02), as well as changes to functional measure specifications and measure type for 2021.
17	4	4.2	24	2	<del>a. Percent of Residents or Patients with Pressure Ulcers That Are New or Worsened (Short Stay) (NQF #0678) (CMS ID: S002.02)</del>	Reflects removal of the retired pressure ulcer measure: Percent of Residents or Patients with Pressure Ulcers That Are New or Worsened (Short Stay) (NQF #0678) (CMS ID: S002.02).
18	4	4.2	25	2	f. SNF Functional Outcome Measure: Discharge Self-Care Score for Skilled Nursing Facility Residents (NQF #2635) <del>(CMS ID: S024.02) (CMS ID: S024.03)</del> g. SNF Functional Outcome Measure: Discharge Mobility Score for Skilled Nursing Facility Residents (NQF #2636) <del>(CMS ID: S025.02) (CMS ID: S025.03)</del> h. SNF Functional Outcome Measure: Change in Self-Care Score for Skilled Nursing Facility Residents (NQF #2633) <del>(CMS ID: S022.02) (CMS ID: S022.03)</del> i. SNF Functional Outcome Measure: Change in Mobility Score for Skilled Nursing Facility Residents (NQF #2634) <del>(CMS ID: S023.02) (CMS ID: S023.03)</del>	Reflects changes in CMS measure identifiers based on updated measure specifications.

#	Chapter	Section	Page Number	Step/ Table	SNF QRP Measure Calculations and Reporting User's Manual V3.0.1	Description of Change
19	6	6.1	33	N/A	<p>Currently, <del>six</del> five assessment-based quality measures for the SNF QRP are risk-adjusted using resident-level covariates for public reporting:</p> <ul style="list-style-type: none"> <li>• <del>Percent of Residents or Patients with Pressure Ulcers That Are New or Worsened (Short Stay) (NQF #0678) (CMS ID: S002.02)</del></li> <li>• Changes in Skin Integrity Post-Acute Care: Pressure Ulcer/Injury (CMS ID: S038.02)</li> <li>• SNF Functional Outcome Measure: Discharge Self-Care Score for Skilled Nursing Facility Residents (NQF #2635) <del>(CMS ID: S024.02)</del> (CMS ID: S024.03)</li> <li>• SNF Functional Outcome Measure: Discharge Mobility Score for Skilled Nursing Facility Residents (NQF #2636) <del>(CMS ID: S025.02)</del> (CMS ID: S025.03)</li> <li>• SNF Functional Outcome Measure: Change in Self-Care Score for Skilled Nursing Facility Residents (NQF #2633) <del>(CMS ID: S022.02)</del> (CMS ID: S022.03)</li> <li>• SNF Functional Outcome measure: Change in Mobility Score for Skilled Nursing Facility Residents (NQF #2634) <del>(CMS ID: S023.02)</del> (CMS ID: S023.03)</li> </ul>	Reflects removal of the retired pressure ulcer measure: Percent of Residents or Patients with Pressure Ulcers That Are New or Worsened (Short Stay) (NQF #0678) (CMS ID: S002.02) and changes in CMS measure identifiers based on updated measure specifications.

#	Chapter	Section	Page Number	Step/ Table	SNF QRP Measure Calculations and Reporting User's Manual V3.0.1	Description of Change
20	6	6.1	33	N/A	Section 6.2 to Section 6.4 outline the steps and methods used to calculate the risk-adjusted measure score for <del>Percent of Residents or Patients with Pressure Ulcers That Are New or Worsened (Short Stay) (NQF #0678) (CMS ID: S002.02)</del> , and Changes in Skin Integrity Post- Acute Care: Pressure Ulcer/Injury (CMS ID: S038.02). Section 6.5 presents the steps specific to the measure calculations used for SNF Functional Outcome Measure: Discharge Self-Care Score for Skilled Nursing Facility Residents (NQF #2635) <del>(CMS ID: S024.02)</del> <del>(CMS ID: S024.03)</del> and SNF Functional Outcome Measure: Discharge Mobility Score for Skilled Nursing Facility Residents (NQF #2636) <del>(CMS ID: S025.02)</del> <del>(CMS ID: S025.03)</del> . Section 6.6 presents the steps specific to the measure calculations for SNF Functional Outcome Measure: Change in Self-Care Score for Skilled Nursing Facility Residents (NQF #2633) <del>(CMS ID: S022.02)</del> <del>(CMS ID: S022.03)</del> and SNF Functional Outcome measure: Change in Mobility Score for Skilled Nursing Facility Residents (NQF #2634) <del>(CMS ID: S023.02)</del> <del>(CMS ID: S023.03)</del>	Reflects removal of the retired pressure ulcer measure: Percent of Residents or Patients with Pressure Ulcers That Are New or Worsened (Short Stay) (NQF #0678) (CMS ID: S002.02) and changes in CMS measure identifiers based on updated measure specifications.
21	6	6.2	34	N/A	This section outlines the steps used to calculate the risk-adjusted assessment-based SNF QRP quality measures <del>Percent of Residents or Patients with Pressure Ulcers That Are New or Worsened (Short Stay) (NQF #0678) (CMS ID: S002.02)</del> , and Changes in Skin Integrity Post-Acute Care: Pressure Ulcer/Injury (CMS ID: S038.02).	Reflects removal of the retired pressure ulcer measure: Percent of Residents or Patients with Pressure Ulcers That Are New or Worsened (Short Stay) (NQF #0678) (CMS ID: S002.02).
22	6	6.3	35	N/A	This section outlines the steps used to calculate the risk-adjusted assessment-based SNF QRP quality measures <del>Percent of Residents or Patients with Pressure Ulcers That Are New or Worsened (Short Stay) (NQF #0678) (CMS ID: S002.02)</del> , and Changes in Skin Integrity Post- Acute Care: Pressure Ulcer/Injury (CMS ID: S038.02).	Reflects removal of the retired pressure ulcer measure: Percent of Residents or Patients with Pressure Ulcers That Are New or Worsened (Short Stay) (NQF #0678) (CMS ID: S002.02).

#	Chapter	Section	Page Number	Step/ Table	SNF QRP Measure Calculations and Reporting User's Manual V3.0.1	Description of Change
23	6	6.3	36	N/A	As an example, consider the actual calculation used for the expected score for the measure <del>Percent of Residents or Patients with Pressure Ulcers That Are New or Worsened (NQF #0678) (S002.02)</del> <i>Changes in Skin Integrity Post-Acute Care: Pressure Ulcer/Injury (CMS ID: S038.02)</i> . The covariates for that QM are obtained from the PPS 5-Day assessment (A0310B = [1]) and are the following:	Reflects removal of the retired pressure ulcer measure: Percent of Residents or Patients with Pressure Ulcers That Are New or Worsened (Short Stay) (NQF #0678) (CMS ID: S002.02) and transition to new pressure ulcer measure: Changes in Skin Integrity Post-Acute Care: Pressure Ulcer/Injury.
24	6	6.4	37	N/A	This section outlines the steps used to calculate the risk-adjusted assessment-based SNF QRP quality measures: <del>Percent of Residents or Patients with Pressure Ulcers That Are New or Worsened (Short Stay) (NQF #0678) (CMS ID: S002.02)</del> , and <i>Changes in Skin Integrity Post-Acute Care: Pressure Ulcer/Injury (CMS ID: S038.02)</i> .	Reflects removal of the retired pressure ulcer measure: Percent of Residents or Patients with Pressure Ulcers That Are New or Worsened (Short Stay) (NQF #0678) (CMS ID: S002.02).
25	6	6.5	39	N/A	This section presents the steps specific to the measure calculations used for SNF Functional Outcome Measure: Discharge Self-Care Score for Skilled Nursing Facility Residents (NQF #2635) <del>(CMS ID: S024.02)</del> <i>(CMS ID: S024.03)</i> and SNF Functional Outcome Measure: Discharge Mobility Score for Skilled Nursing Facility Residents (NQF #2636) <del>(CMS ID: S025.02)</del> <i>(CMS ID: S025.03)</i>	Reflects changes in CMS measure identifiers based on updated measure specifications.
26	6	6.6	40	N/A	This section presents the steps specific to the measure calculations for SNF Functional Outcome Measure: Change in Self-Care Score for Skilled Nursing Facility Residents (NQF #2633) <del>(CMS ID: S022.02)</del> <i>(CMS ID: S022.03)</i> and SNF Functional Outcome measure: Change in Mobility Score for Skilled Nursing Facility Residents (NQF #2634) <del>(CMS ID: S023.02)</del> <i>(CMS ID: S023.03)</i> .	Reflects changes in CMS measure identifiers based on updated measure specifications.
27	7	N/A	44-45	Table 7-1	<del>Table 7-1: Percent of Residents or Patients with Pressure Ulcers That Are New or Worsened (Short Stay) (NQF #0678) (CMS ID: S002.02)</del> .	Reflects removal of the retired pressure ulcer measure: Percent of Residents or Patients with Pressure Ulcers That Are New or Worsened (Short Stay) (NQF #0678) (CMS ID: S002.02).

#	Chapter	Section	Page Number	Step/ Table	SNF QRP Measure Calculations and Reporting User's Manual V3.0.1	Description of Change
28	7	N/A	47-50	Table 7-3	(See Appendix Table 7-3 below)	Text was mistakenly transposed lower in V3.0 of manual.
29	7	N/A	54-56	Table 7-6	SNF Functional Outcome Measure: Discharge Self-Care Score for Skilled Nursing Facility Residents (NQF #2635) <del>(CMS ID: S024.02)</del> (CMS ID: S024.03)	Reflects changes in CMS measure identifiers based on updated measure specifications.
30	7	N/A	55	Table 7-6	3. The resident is younger than age <del>24</del> 18: a. A1600 (Entry Date) – A0900 (Birth Date) is less than <del>24</del> 18 years.	Updated to reflect revised age exclusion.
31	7	N/A	57-59	Table 7-7	SNF Functional Outcome Measure: Discharge Mobility Score for Skilled Nursing Facility Residents (NQF #2636) <del>(CMS ID: S025.02)</del> (CMS ID: S025.03)	Reflects changes in CMS measure identifiers based on updated measure specifications.
32	7	N/A	58	Table 7-7	3. The resident is younger than age <del>24</del> 18: a. A1600 (Entry Date) – A0900 (Birth Date) is less than <del>24</del> 18 years.	Updated to reflect revised age exclusion.
33	7	N/A	60-63	Table 7-8	SNF Functional Outcome Measure: Change in Self-Care Score for Skilled Nursing Facility Residents (NQF #2633) <del>(CMS ID: S022.02)</del> (CMS ID: S022.03)	Reflects changes in CMS measure identifiers based on updated measure specifications.
34	7	N/A	62	Table 7-8	4. The resident is younger than age <del>24</del> 18: a. A1600 (Entry Date) – A0900 (Birth Date) is less than <del>24</del> 18 years.	Updated to reflect revised age exclusion.
35	7	N/A	64-67	Table 7-9	SNF Functional Outcome Measure: Change in Mobility Score for Skilled Nursing Facility Residents (NQF #2634) <del>(CMS ID: S023.02)</del> (CMS ID: S023.03)	Reflects changes in CMS measure identifiers based on updated measure specifications.
36	7	N/A	67	Table 7-9	4. The resident is younger than age <del>24</del> 18: a. A1600 (Entry Date) – A0900 (Birth Date) is less than <del>24</del> 18 years.	Updated to reflect revised age exclusion.
37	Appendix A	N/A	69-70	Table A-1	(See Appendix Table A-1 below)	Reflects removal of the retired pressure ulcer measure: Percent of Residents or Patients with Pressure Ulcers That Are New or Worsened (Short Stay) (NQF #0678) (CMS ID: S002.02) and changes in CMS measure identifiers based on updated measure specifications.
38	Appendix A	A.1	70	Table A-2	<del>Table A-2: Risk Adjustment Covariates for the Percent of Residents or Patients with Pressure Ulcers That Are New or Worsened (Short Stay) (NQF #0678) (CMS ID: S002.02)</del>	Reflects removal of the retired pressure ulcer measure: Percent of Residents or Patients with Pressure Ulcers That Are New or Worsened (Short Stay) (NQF #0678) (CMS ID: S002.02).

#	Chapter	Section	Page Number	Step/ Table	SNF QRP Measure Calculations and Reporting User's Manual V3.0.1	Description of Change
39	Appendix A	A.1	98	Table A-5	<p>=1 if [Admission G0600D (Limb prosthesis) =1 or O0500I (Training and skill practice in Amputation)]  <del>&gt; ≥1</del>; or</p> <p>=1 if [Admission I8000 (Additional active diagnoses) or I0020B (Primary medical condition category)] = see Crosswalk ICD-10 codes to HCC173, HCC189, HCC190;          =0 if Primary Medical Condition Category I0020 = 08 (Amputation);          else = 0</p>	Updated to accurately capture the calculation of Comorbidity HCC Group 24.
40	Appendix A	A.3	100	N/A	<p>Example (Steps 4-6): <del>Percent of Residents or Patients with Pressure Ulcers That Are New or Worsened (Short Stay) Changes in Skin Integrity Post-Acute Care: Pressure Ulcer/Injury</del></p> <ul style="list-style-type: none"> <li>• MDS record had a discharge date of 06/15/<del>2018</del> 2019</li> <li>• In the Schedule tab of the Risk-Adjustment Appendix File, refer to the Pressure Ulcer measure.              – The discharge date of 06/15/<del>2018</del> 2019 is within the discharge date range for Risk- Adjustment Update ID <del>2</del> 1 (10/01/<del>2017</del> 2018 – 09/30/<del>2018</del> 2019). Therefore, the user should use the information provided in the Risk-Adjustment ID <del>2</del> 1 column.</li> <li>• Select the Pressure Ulcer tab and apply the intercept and coefficient values in the Risk- Adjustment ID <del>2</del> 1 column for each covariate.</li> <li>• Select the National Average tab and use the Risk-Adjustment Update ID <del>2</del> 1 column for the Pressure Ulcer national average observed score.</li> </ul>	Reflects removal of the retired pressure ulcer measure: Percent of Residents or Patients with Pressure Ulcers That Are New or Worsened (Short Stay) (NQF #0678) (CMS ID: S002.02) and transition to new pressure ulcer measure: Changes in Skin Integrity Post-Acute Care: Pressure Ulcer/Injury, increments dates, and corrects column for the risk-adjustment ID.

# Appendix



## Appendix Contents

This appendix provides excerpts from the [SNF QRP Measure Calculations and Reporting User's Manual, Version 3.0](#) to contextualize the information that has been substantially changed and included in the change table of this addendum, Version 3.0.1 (i.e., the appendix provides the updates to the tables and/or formulas from V3.0 of the manual that have substantial changes). The pages within the appendix directly correspond to the QM User's Manual V3.0 and the updates to the pages have been marked up in red font.

The Appendix Table of Contents provides an overview of the content contained within the appendix and maps this content to the corresponding rows in the V3.0.1 change table, as well as the chapter, page number, and section where the content is located in the QM User's Manual V3.0.

### Appendix Table of Contents

Change Table ISO	Chapter	Page Number	SNF QRP Measure Calculations and Reporting User's Manual V3.0 Reference	Description of Change
2	1	5	Section 1.3: Measure-Specific Definitions	Reflects removal of the retired pressure ulcer measure: Percent of Residents or Patients with Pressure Ulcers That Are New or Worsened (Short Stay) (NQF #0678) (CMS ID: S002.02). Reflects changes in CMS measure identifiers based on updated measure specifications.
15	4	22	Section 4.1: CASPER Review and Correct Reports	Reflects removal of the retired pressure ulcer measure: Percent of Residents or Patients with Pressure Ulcers That Are New or Worsened (Short Stay) (NQF #0678) (CMS ID: S002.02), as well as changes to functional measure specifications and measure type for 2021.
27	7	47-50	Chapter 7: Measure Logical Specifications for Assessment-Based (MDS) Quality Measures	Text was mistakenly transposed lower in V3.0 of manual.
36	Appendix A	69-70	Appendix A: Model Parameters	Reflects removal of the retired pressure ulcer measure: Percent of Residents or Patients with Pressure Ulcers That Are New or Worsened (Short Stay) (NQF #0678) (CMS ID: S002.02). Reflects changes in CMS measure identifiers based on updated measure specifications.

## Section 1.3: Measure-Specific Definitions

**Table 1-1**  
**SNF Assessment-Based (MDS) Quality Measure NQF Number, CMS ID, and Measure Reference Name Crosswalk**

Quality Measure	NQF #	CMS ID	Measure Reference Name
Application of Percent of Residents Experiencing One or More Falls with Major Injury (Long Stay)	0674	S013.02	Application of Falls
Application of Percent of Long-Term Care Hospital (LTCH) Patients With an Admission and Discharge Functional Assessment and a Care Plan That Addresses Function	2631	S001.03	Application of Functional Assessment/Care Plan
Drug Regimen Review Conducted with Follow-up for Identified Issues – PAC SNF QRP	n/a	S007.02	DRR
Changes in Skin Integrity Post-Acute Care: Pressure Ulcer/Injury	n/a	S038.02	Pressure Ulcer/Injury
SNF Functional Outcome Measure: Discharge Self-Care Score for Skilled Nursing Facility Residents	2635	S024.03	Discharge Self-Care Score
SNF Functional Outcome Measure: Discharge Mobility Score for Skilled Nursing Facility Residents	2636	S025.03	Discharge Mobility Score
SNF Functional Outcome Measure: Change in Self-Care Score for Skilled Nursing Facility Residents	2633	S022.03	Change in Self-Care Score
SNF Functional Outcome Measure: Change in Mobility Score for Skilled Nursing Facility Residents	2634	S023.03	Change in Mobility Score

## Section 4.1: CASPER Review and Correct Reports

**Table 4-2**  
**Measure Types by User-Requested Year for all Assessment-Based (MDS) Quality Measures**

Quality Measures	Measure Type by User-Requested Year	
	2020	2021*
Application of Percent of Residents Experiencing One or More Falls with Major Injury (Long Stay) (NQF #0674) (CMS ID: S013.02)	Existing	<i>Existing</i>
Application of Percent of Long-Term Care Hospital (LTCH) Patients With an Admission and Discharge Functional Assessment and a Care Plan That Addresses Function (NQF #2631) (CMS ID: S001.03)	Existing	<i>Existing</i>
Drug Regimen Review Conducted with Follow-up for Identified Issues – PAC SNF QRP (CMS ID: S007.02)	Existing	<i>Existing</i>
Changes in Skin Integrity Post-Acute Care: Pressure Ulcer/Injury (CMS ID: S038.02)	Existing	<i>Existing</i>
SNF Functional Outcome Measure: Discharge Self-Care Score for Skilled Nursing Facility Residents (NQF #2635) <i>(CMS ID: S024.03)</i>	Existing	<i>Existing</i>
SNF Functional Outcome Measure: Discharge Mobility Score for Skilled Nursing Facility Residents (NQF #2636) <i>(CMS ID: S025.03)</i>	Existing	<i>Existing</i>
SNF Functional Outcome Measure: Change in Self-Care Score for Skilled Nursing Facility Residents (NQF #2633) <i>(CMS ID: S022.03)</i>	Existing	<i>Existing</i>
SNF Functional Outcome Measure: Change in Mobility Score for Skilled Nursing Facility Residents (NQF #2634) <i>(CMS ID: S023.03)</i>	Existing	<i>Existing</i>

*\* Note that this header has been updated for the measure user-requested year. Unlike the remainder of the appendix which indicates edits with red text, the updated header text in this table is kept as white text to ensure sufficient contrast ratios between the text and background for 508-compliance purposes.*

# Chapter 7

## Measure Logical Specifications for Assessment-Based (MDS) Quality Measures

Table 7-3  
Application of Percent of Long-Term Care Hospital (LTCH) Patients With an Admission and Discharge Functional Assessment and a Care Plan That Addresses Function (NQF #2631) (CMS ID: S001.03)

Measure Description
This quality measure reports the percentage of Medicare Part A SNF Stays ( <u>Type 1 SNF Stays</u> and <u>Type 2 SNF Stays</u> ) with an admission and discharge functional assessment and a care plan that addresses function.
Measure Specifications
<p>If a resident has multiple Medicare Part A SNF stays during the target 12 months, then all stays are included in this measure.</p> <p><b>Incomplete and Complete Medicare Part A SNF Stays (<u>Type 1 SNF Stays</u> or <u>Type 2 SNF Stays</u>):</b>  <b>Incomplete SNF Medicare Part A SNF Stays:</b> Residents with incomplete stays (<i>incomplete</i> = [1]) are identified based on the following criteria using the specified data elements:</p> <ol style="list-style-type: none"> <li>1. Unplanned discharge, which would include discharge against medical advice, indicated by A0310G (Type of Discharge) = 2 (Unplanned discharge) [as indicated on an OBRA Discharge (RFA: A0310F = [10, 11]) at the end of the SNF stay that has a discharge date (A2000) that is on the same day or the day after the End Date of Most Recent Medicare Stay (A2400C)]. OR</li> <li>2. Discharge to acute hospital, psychiatric hospital, long-term care hospital indicated by A2100 = [03, 04, 09], [as indicated on an MDS Discharge (RFA: A0310F = [10, 11]) that has a discharge date (A2000) that is on the same day or the day after the End Date of Most Recent Medicare Stay (A2400C)]. OR</li> <li>3. SNF PPS Part A stay less than 3 days ((A2400C minus A2400B) &lt; 3 days) OR</li> <li>4. The resident died during the SNF stay (i.e., <u>Type 2 SNF Stays</u>). Type 2 SNF Stays are SNF stays with a PPS 5-Day Assessment (A0310B = [01]) and a matched Death in Facility Tracking Record (A0310F = [12]).</li> </ol> <p><b>Complete Medicare Part A SNF Stays:</b> Medicare Part A SNF Stays not meeting the definition of incomplete stays are considered complete Medicare Part A SNF Stays (<i>incomplete</i> = [0]).</p> <p><b>Numerator:</b>  For complete Medicare Part A SNF Stays (<i>incomplete</i> = [0]) in the denominator, three criteria are required for inclusion in the numerator: (i) complete admission functional assessment data on the PPS 5-Day assessment, <b>and</b> (ii) a discharge goal for at least one self-care or mobility item on the PPS 5-Day assessment, <b>and</b> (iii) complete discharge functional assessment data on the Part A PPS Discharge Assessment.</p> <p>For incomplete Medicare Part A SNF Stays (<i>incomplete</i> = [1]) in the denominator, collection of discharge functional status might not be feasible. Therefore, two criteria are required for inclusion in the numerator: (i) complete admission functional assessment data on the PPS 5-Day assessment, <b>and</b> (ii) a discharge goal for at least one self-care or mobility item on the PPS 5-Day assessment.</p>

(continued)

**Table 7-3 (continued)**  
**Application of Percent of Long-Term Care Hospital (LTCH) Patients With an Admission and Discharge Functional Assessment and a Care Plan That Addresses Function (NQF #2631) (CMS ID: S001.03)**

Measure Description
<p><i>Specifications for complete admission functional assessment data:</i></p> <p>For admission functional assessment data to be complete, each condition listed below <b>must</b> be met.</p> <ol style="list-style-type: none"> <li>1. GG0130A1. Eating = [01, 02, 03, 04, 05, 06, 07, 09, 10, 88]; <b>and</b></li> <li>2. GG0130B1. Oral hygiene = [01, 02, 03, 04, 05, 06, 07, 09, 10, 88]; <b>and</b></li> <li>3. GG0130C1. Toileting hygiene = [01, 02, 03, 04, 05, 06, 07, 09, 10, 88]; <b>and</b></li> <li>4. GG0170B1. Sit to lying = [01, 02, 03, 04, 05, 06, 07, 09, 10, 88]; <b>and</b></li> <li>5. GG0170C1. Lying to sitting on side of bed = [01, 02, 03, 04, 05, 06, 07, 09, 10, 88]; <b>and</b></li> <li>6. GG0170D1. Sit to stand = [01, 02, 03, 04, 05, 06, 07, 09, 10, 88]; <b>and</b></li> <li>7. GG0170E1. Chair/bed-to-chair transfer = [01, 02, 03, 04, 05, 06, 07, 09, 10, 88]; <b>and</b></li> <li>8. GG0170F1. Toilet transfer = [01, 02, 03, 04, 05, 06, 07, 09, 10, 88]; <b>and</b></li> <li>9. GG0170I1. Walk 10 feet = [01, 02, 03, 04, 05, 06, 07, 09, 10, 88]; <b>and</b></li> </ol> <p><i>For residents who are walking as indicated by a valid functional code [01, 02, 03, 04, 05, 06] for GG0170I1, include items:</i></p> <ol style="list-style-type: none"> <li>10. GG0170J1. Walk 50 feet with two turns = [01, 02, 03, 04, 05, 06, 07, 09, 10, 88]; <b>and</b></li> <li>11. GG0170K1. Walk 150 feet = [01, 02, 03, 04, 05, 06, 07, 09, 10, 88].</li> </ol> <p><i>For residents who are not walking as indicated by GG0170I1 = 07, 09, 10, or 88, GG0170J1 and GG0170K1 are skipped (^).</i></p> <p><i>For residents who use a wheelchair as indicated by GG170Q1=1, include items:</i></p> <ol style="list-style-type: none"> <li>12. GG0170R1. Wheel 50 feet with two turns = [01, 02, 03, 04, 05, 06, 07, 09, 10, 88]; <b>and</b></li> <li>13. GG0170RR1. Indicate the type of wheelchair or scooter used = [1, 2]; <b>and</b></li> <li>14. GG0170S1. Wheel 150 feet = [01, 02, 03, 04, 05, 06, 07, 09, 10, 88]; <b>and</b></li> <li>15. GG0170SS1. Indicate the type of wheelchair or scooter used = [1, 2].</li> </ol> <p><i>For residents who do not use a wheelchair as indicated by GG0170Q1=0, GG0170R1, GG0170RR1, GG0170S1, and GG0170SS1 are skipped (^).</i></p> <p><i>Specifications for a discharge goal (documenting a care plan that includes function):</i></p> <p>For the discharge goal, at least one of the items listed below <b>must</b> have a valid code as specified.</p> <ol style="list-style-type: none"> <li>1. GG0130A2. Eating = [01, 02, 03, 04, 05, 06, 07, 09, 10, 88]; <b>or</b></li> <li>2. GG0130B2. Oral hygiene = [01, 02, 03, 04, 05, 06, 07, 09, 10, 88]; <b>or</b></li> <li>3. GG0130C2. Toileting hygiene = [01, 02, 03, 04, 05, 06, 07, 09, 10, 88]; <b>or</b></li> <li>4. GG0130E2 Shower/bathe self = [01, 02, 03, 04, 05, 06, 07, 09, 10, 88]; <b>or</b></li> <li>5. GG0130F2 Upper body dressing = [01, 02, 03, 04, 05, 06, 07, 09, 10, 88]; <b>or</b></li> <li>6. GG0130G2 Lower body dressing = [01, 02, 03, 04, 05, 06, 07, 09, 10, 88]; <b>or</b></li> <li>7. GG0130H2 Putting on/taking off footwear = [01, 02, 03, 04, 05, 06, 07, 09, 10, 88]; <b>or</b></li> <li>8. GG0170A2 Roll left and right = [01, 02, 03, 04, 05, 06, 07, 09, 10, 88]; <b>or</b></li> <li>9. GG0170B2. Sit to lying = [01, 02, 03, 04, 05, 06, 07, 09, 10, 88]; <b>or</b></li> <li>10. GG0170C2. Lying to sitting on side of bed = [01, 02, 03, 04, 05, 06, 07, 09, 10, 88]; <b>or</b></li> </ol>

(continued)

**Table 7-3 (continued)**  
**Application of Percent of Long-Term Care Hospital (LTCH) Patients With an Admission and Discharge Functional Assessment and a Care Plan That Addresses Function (NQF #2631) (CMS ID: S001.03)**

Measure Description
11. GG0170D2. Sit to stand = [01, 02, 03, 04, 05, 06, 07, 09, 10, 88]; <i>or</i> 12. GG0170E2. Chair/bed-to-chair transfer = [01, 02, 03, 04, 05, 06, 07, 09, 10, 88]; <i>or</i> 13. GG0170F2. Toilet transfer = [01, 02, 03, 04, 05, 06, 07, 09, 10, 88]; <i>or</i> 14. GG0170G2. Car transfer = [01, 02, 03, 04, 05, 06, 07, 09, 10, 88]; <i>or</i> 15. GG 0170I2. Walk 10 feet = [01, 02, 03, 04, 05, 06, 07, 09, 10, 88]; <i>or</i> 16. GG0170J2. Walk 50 feet with two turns = [01, 02, 03, 04, 05, 06, 07, 09, 10, 88]; <i>or</i> 17. GG0170K2. Walk 150 feet = [01, 02, 03, 04, 05, 06, 07, 09, 10, 88]; <i>or</i> 18. GG0170L2. Walking 10 feet on uneven surfaces = [01, 02, 03, 04, 05, 06, 07, 09, 10, 88]; <i>or</i> 19. GG0170M2. 1 step (curb) = [01, 02, 03, 04, 05, 06, 07, 09, 10, 88]; <i>or</i> 20. GG0170N2. 4 steps = [01, 02, 03, 04, 05, 06, 07, 09, 10, 88]; <i>or</i> 21. GG0170O2. 12 steps = [01, 02, 03, 04, 05, 06, 07, 09, 10, 88]; <i>or</i> 22. GG0170P2. Picking up object = [01, 02, 03, 04, 05, 06, 07, 09, 10, 88]; <i>or</i> 23. GG0170R2. Wheel 50 feet with two turns = [01, 02, 03, 04, 05, 06, 07, 09, 10, 88]; <i>or</i> 24. GG0170S2. Wheel 150 feet = [01, 02, 03, 04, 05, 06, 07, 09, 10, 88].
<p><i>Specifications for complete discharge functional assessment data:</i></p> <p>For discharge functional assessment data to be complete, each condition listed below <b>must</b> be met. This only applies to residents with complete stays (discharge functional assessment data is not required for incomplete stays).</p> <ol style="list-style-type: none"> <li>1. GG0130A3. Eating = [01, 02, 03, 04, 05, 06, 07, 09, 10, 88]; <i>and</i></li> <li>2. GG0130B3. Oral hygiene = [01, 02, 03, 04, 05, 06, 07, 09, 10, 88]; <i>and</i></li> <li>3. GG0130C3. Toileting hygiene = [01, 02, 03, 04, 05, 06, 07, 09, 10, 88]; <i>and</i></li> <li>4. GG0170B3. Sit to lying = [01, 02, 03, 04, 05, 06, 07, 09, 10, 88]; <i>and</i></li> <li>5. GG0170C3. Lying to sitting on side of bed = [01, 02, 03, 04, 05, 06, 07, 09, 10, 88]; <i>and</i></li> <li>6. GG0170D3. Sit to stand = [01, 02, 03, 04, 05, 06, 07, 09, 10, 88]; <i>and</i></li> <li>7. GG0170E3. Chair/bed-to-chair transfer = [01, 02, 03, 04, 05, 06, 07, 09, 10, 88]; <i>and</i></li> <li>8. GG0170F3. Toilet transfer = [01, 02, 03, 04, 05, 06, 07, 09, 10, 88]; <i>and</i></li> <li>9. GG0170I3. Walk 10 feet = [01, 02, 03, 04, 05, 06, 07, 09, 10, 88]; <i>and</i></li> </ol> <p><i>For residents who are walking as indicated by a valid functional code [01, 02, 03, 04, 05, 06] for GG0170I3, include items:</i></p> <ol style="list-style-type: none"> <li>10. GG0170J3. Walk 50 feet with two turns = [01, 02, 03, 04, 05, 06, 07, 09, 10, 88]; <i>and</i></li> <li>11. GG0170K3. Walk 150 feet = [01, 02, 03, 04, 05, 06, 07, 09, 10, 88].</li> </ol> <p><i>For residents who are not walking, as indicated by GG0170I3 = 07, 09, 10, or 88, GG0170J3 and GG0170K3 are skipped (^).</i></p> <p><i>For residents who use a wheelchair as indicated by GG170Q3=1, include items:</i></p> <ol style="list-style-type: none"> <li>12. GG0170R3. Wheel 50 feet with two turns = [01, 02, 03, 04, 05, 06, 07, 09, 10, 88] <i>and</i></li> <li>13. GG0170RR3. Indicate the type of wheelchair or scooter used = [1, 2] <i>and</i></li> <li>14. GG0170S3. Wheel 150 feet = [01, 02, 03, 04, 05, 06, 07, 09, 10, 88] <i>and</i></li> <li>15. GG0170SS3. Indicate the type of wheelchair or scooter used = [1, 2].</li> </ol>

(continued)

**Table 7-3 (continued)**  
**Application of Percent of Long-Term Care Hospital (LTCH) Patients With an Admission and Discharge Functional Assessment and a Care Plan That Addresses Function (NQF #2631) (CMS ID: S001.03)**

Measure Description
<p><i>For residents who do not use a wheelchair as indicated by GG0170Q3=0, GG0170R3, GG0170RR3, GG0170S3, and GG0170SS3 are skipped (^).</i></p> <p><b>Denominator</b>  The total number of Medicare Part A SNF stays (<b><u>Type 1 SNF Stays</u></b> and <b><u>Type 2 SNF Stays</u></b>) with a Medicare Part A SNF Stay End Date (A2400C) during the measure target period.</p> <p><b>Exclusions</b>  There are no denominator exclusions for this measure.</p>
Covariates
None.

# Appendix A: Model Parameters

**Table A-1**  
**MDS Quality Measures Requiring National Average Observed Scores and Covariate Values for Risk-Adjustment**

Quality Measure	NQF #	CMS ID	Measure Reference Name	National Average Observed Scores	Covariate Values
Changes in Skin Integrity Post-Acute Care: Pressure Ulcer/Injury	N/A	S038.02	Pressure Ulcer/Injury	✓	✓
SNF Functional Outcome Measure: Change in Self-Care Score for Skilled Nursing Facility Residents	2633	S022.03	Change in Self-Care Score	✓	✓
SNF Functional Outcome Measure: Change in Mobility Score for Skilled Nursing Facility Residents	2634	S023.03	Change in Mobility Score	✓	✓
SNF Functional Outcome Measure: Discharge Self-Care Score for Skilled Nursing Facility Residents	2635	S024.03	Discharge Self-Care Score	n/a	✓
SNF Functional Outcome Measure: Discharge Mobility Score for Skilled Nursing Facility Residents	2636	S025.03	Discharge Mobility Score	n/a	✓



**Table A-5 (continued)**

**Risk-Adjustment Covariates for the Change in Self-Care Score, Change in Mobility Score, Discharge Self-Care Score, and Discharge Mobility Score Measures  
(NQF #2633, NQF #2634, NQF #2635, and NQF #2636)**

Risk Adjustor	Risk Adjustor Category	MDS Item(s) and Calculations <sup>a</sup>	Change in Self-Care Score (NQF #2633)	Change in Mobility Score (NQF #2634)	Discharge Self-Care Score (NQF #2635)	Discharge Mobility Score (NQF #2636)
Comorbidity HCC Group 24	Amputations: Traumatic Amputations and Complications (HCC173), Amputation Status, Lower Limb/Amputation Complications (HCC189), Amputation Status, Upper Limb (HCC190)	=1 if [Admission G0600D (Limb prosthesis) = 1 or O0500I (Training and skill practice in Amputation) ≥ 1]; or =1 if [Admission I8000 (Additional active diagnoses) or I0020B (Primary medical condition category)] = see Crosswalk ICD-10 codes to HCC173, HCC189, HCC190; =0 if Primary Medical Condition Category I0020 = 08 (Amputation);	✓	✓	✓	✓

HCC = Hierarchical Condition Category

Note: 'n/a' in a measure's coefficient column indicates a 0 value, and the risk adjuster can be left out of the regression model; The logic for calculating most risk adjusters is summarized as "*new variable* = [1] if *old item* = [X]; else = [0]". Thus, any instances of missing, a caret, or a dash should be coded as 0 for that risk adjuster item and the Medicare Part A SNF Stay would not be dropped.

<sup>a</sup> Calculation steps are run in the order in which they are presented (i.e., top to bottom within each risk-adjustor category) so that exceptions to the coding logic are accurately applied.

<sup>b</sup> When calculating the admission self-care and mobility score risk adjusters, first recode each function item so that a code of 07, 09, 10, or 88 is recoded to 01. Use this code as the score. If the mobility item is dash (-), skipped (^), or missing, recode to 01 and use this code as the score. If code is between 01 and 06, then use code as the score. The self-care – continuous covariate will have a range of scores from 7 to 42, and the mobility – continuous covariate will have a range of 15 to 90 after recoding.

<sup>c</sup> The 14 Primary Diagnosis Groups (Item I0020) should account for all Medicare Part A SNF Stay records. If a record is not included in one of the 14 groups due to missing information, please default to coding = [14] Other Medical Conditions so all records are included in one of the 14 groups. Please note that these groups are mutually exclusive.

<sup>d</sup> Although Complete Tetraplegia is originally part of this HCC, it has been excluded from this comorbidity in our model because it is an exclusion criterion for the SNF Discharge Self-Care Score Quality Measure. Residents with Incomplete or Unspecified Tetraplegia would be included in this category.