

Quality Reporting Program Provider Training



IRF Functional Measures

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Acronyms in This Presentation

- CMS – Centers for Medicare & Medicaid Services
- IMPACT – Improving Medicare Post-Acute Care Transformation
- IRF – Inpatient Rehabilitation Facility
- IRF-PAI – Inpatient Rehabilitation Facility-Patient Assessment Instrument
- LTCH – Long-Term Care Hospital
- NQF – National Quality Forum
- PAC – Post-Acute Care
- QRP – Quality Reporting Program

PAC CMS LTCH
IRF-PAI
NQF IMPACT
IRF QRP

Objectives

- Identify key components of a quality measure.
- Describe the Inpatient Rehabilitation Facility (IRF) functional quality measures.
- Identify resources that detail measure calculation specifications.



Key Components of Quality Measures

- Target population.
- Numerator/denominator.
- Exclusion criteria.
- Data elements.
- Risk-adjustment approach.
- Calculation algorithm.



IRF Functional Quality Measures

Quality Measure	NQF #	CMS ID	Measure Reference Name
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	1008.01	Application of Functional Assessment
IRF Functional Outcome Measure: Change in Self-Care Score for Medical Rehabilitation Patients	2633	1009.01	Change in Self-Care
IRF Functional Outcome Measure: Change in Mobility Score for Medical Rehabilitation Patients	2634	1010.01	Change in Mobility
IRF Functional Outcome Measure: Discharge Self-Care Score for Medical Rehabilitation Patients	2635	1011.01	Discharge Self-Care
IRF Functional Outcome Measure: Discharge Mobility Score for Medical Rehabilitation Patients	2636	1012.01	Discharge Mobility

NQF #2631

Application of Percent of Long-Term Care Hospital (LTCH)
Patients with an Admission and Discharge Functional
Assessment and a Care Plan that Addresses Function

Application of Functional Assessment: Quality Measure Description

- Process measure calculated using data from the Inpatient Rehabilitation Facility-Patient Assessment Instrument (IRF-PAI).
- Implemented across post-acute care (PAC) settings to meet the requirements of the Improving Medicare Post-Acute Care Transformation (IMPACT) Act.
- Reports the percentage of all IRF patient stay-level records with an admission and discharge functional assessment and a care plan that addresses function.
- The treatment goal provides evidence that a care plan with a goal has been established for the patient.



Application of Functional Assessment: Quality Measure Description (cont.)



- Documentation of a goal for one of the function items reflects that the patient's care plan addresses function.
- The function goal is recorded at admission for at least one of the standardized self-care or mobility function items using the 6-level rating scale or one of the activity not attempted codes.

Application of Functional Assessment: Numerator/Denominator

Numerator

Number of patients with functional assessment data for each self-care and mobility activity and at least one self-care or mobility goal.

Denominator

Number of Medicare
(Part A and Part C) patients.

Application of Functional Assessment

Numerator Details: Complete Stays

The following are required for patients who have **complete** stays to be counted in the numerator:

1

A valid numeric score indicating the patient's functional status, or a valid code indicating the activity was not attempted for each of the functional assessment items on the admission assessment.

2

A valid numeric score, which is a discharge goal indicating the patient's expected level of independence, or a valid code indicating the activity was not attempted for at least one self-care or mobility item on the admission assessment.

3

A valid numeric score indicating the patient's functional status, or a valid code indicating the activity was not attempted, for each of the functional assessment items on the discharge assessment.

Application of Functional Assessment

Numerator Details: Incomplete Stays

The following are required for patients who have **incomplete** stays to be counted in the numerator:

1

A valid numeric score indicating the patient's functional status, or a valid code indicating the activity was not attempted for each of the functional assessment items on the admission assessment.

2

A valid numeric score, which is a discharge goal indicating the patient's expected level of independence, or a valid code indicating the activity was not attempted for at least one self-care or mobility item on the admission assessment.

Application of Functional Assessment: Included Self-Care Items

- GG0130A. Eating.
- GG0130B. Oral hygiene.
- GG0130C. Toileting hygiene.

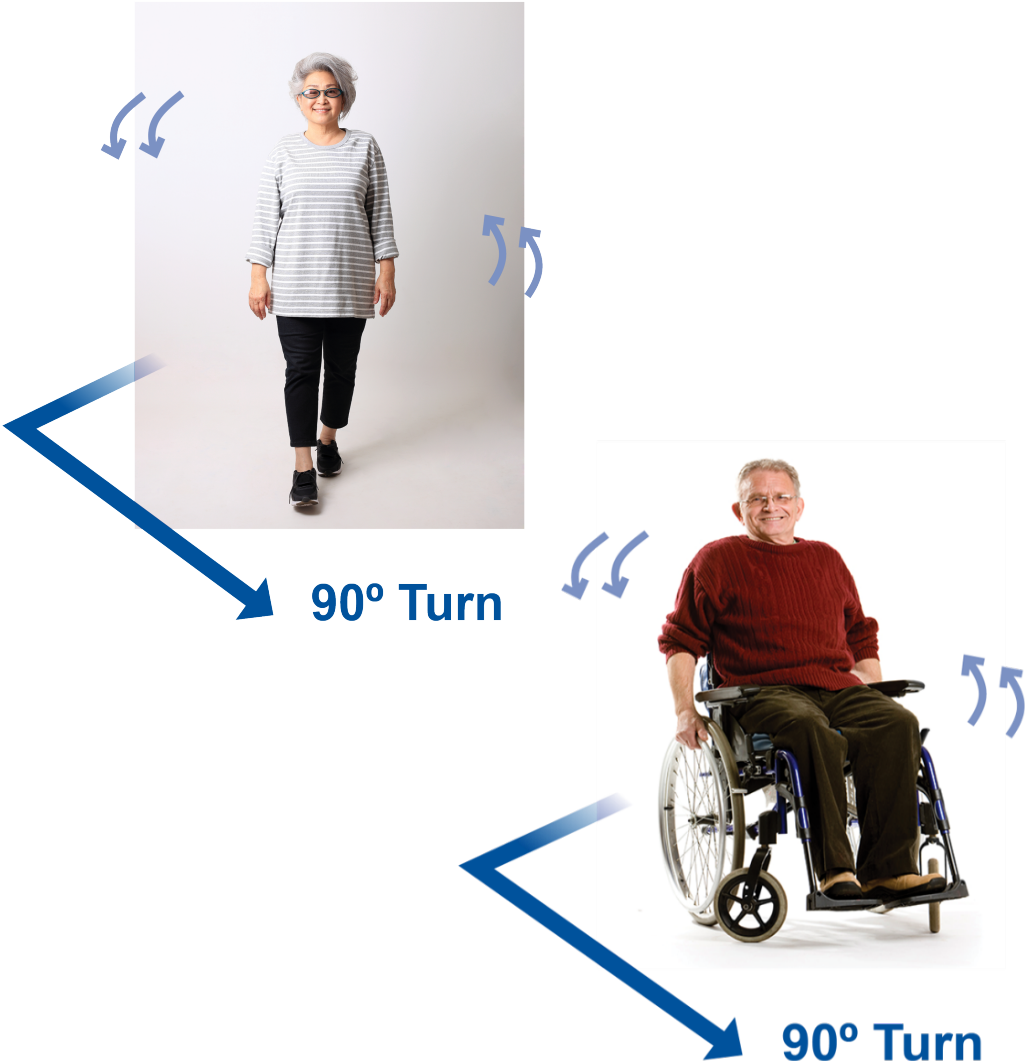


Application of Functional Assessment: Included Mobility Items

- GG0170B. Sit to lying.
- GG0170C. Lying to sitting on side of bed.
- GG0170D. Sit to stand.
- GG0170E. Chair/bed-to-chair transfer.
- GG0170F. Toilet transfer.



Application of Functional Assessment: Included Mobility Items (cont.)



For patients who are walking:

- GG0170J. Walk 50 feet with two turns.
- GG0170K. Walk 150 feet.

For patients who use a wheelchair:

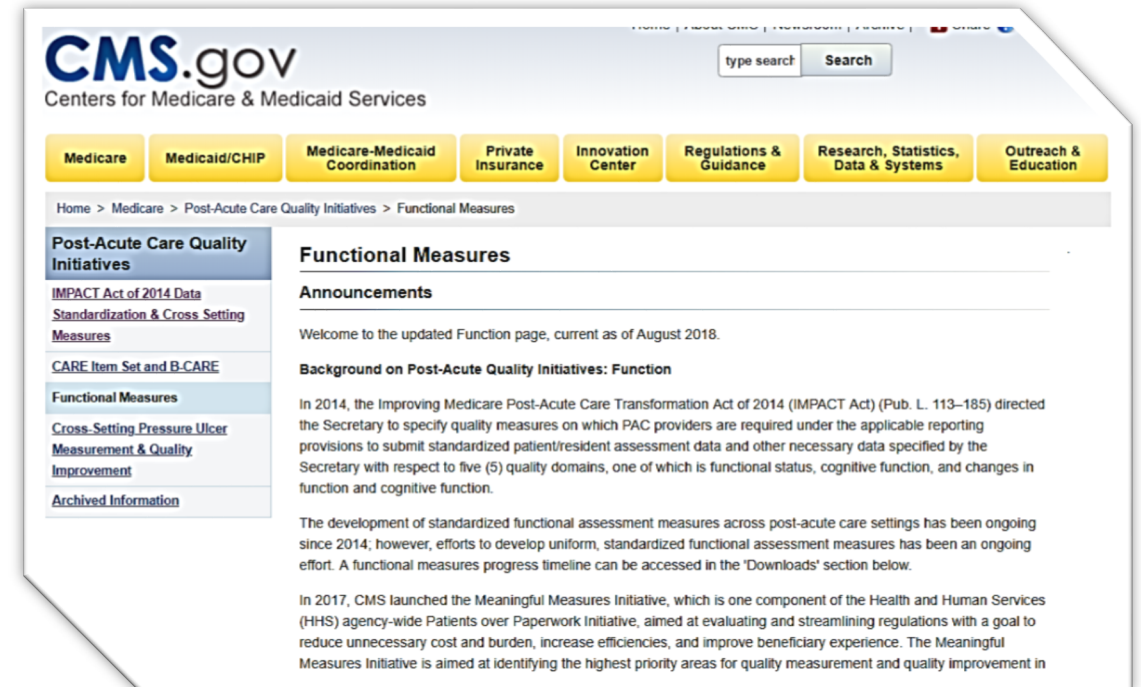
- GG0170R. Wheel 50 feet with two turns.
 - GG0170RR. Indicate the type of wheelchair/scooter used.
- GG0170S. Wheel 150 feet.
 - GG0170SS. Indicate the type of wheelchair/scooter used.

Application of Functional Assessment: Risk Adjustment

- This quality measure is a process measure and is not risk-adjusted.
- Completion of a functional assessment, which includes the use of “activity not attempted” codes, is not affected by the medical and functional complexity of the patient/resident; therefore, risk adjustment of this quality measure is not warranted.

Application of Functional Assessment: Detailed Information

- More information for this quality measure, including detailed specifications, can be accessed on the CMS Functional Measures web page:
<https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/Post-Acute-Care-Quality-Initiatives/Functional-Measures-.html>.



NQF #2633

IRF Functional Outcome Measure: Change in Self-Care Score for Medical Rehabilitation Patients

Change in Self-Care: Quality Measure Description

- Outcome measure calculated using data from the IRF-PAI.
- Estimates the risk-adjusted change in self-care score between admission and discharge among IRF patients age 21 and older.
- The change in self-care score is calculated as the difference between the discharge self-care score and the admission self-care score.
- **Target Population:** IRF patients who are at least 21 years of age, Medicare beneficiaries, are not independent in all of the self-care activities at the time of admission, and have complete stays.



Note: This measure does not have a simple form for the numerator and denominator.

Change in Self-Care: Quality Measure Description (cont.)

This outcome measure requires the collection of:

1

Admission and discharge functional status data by clinicians using standardized data elements that assess specific self-care activities.

2

Risk factors data at the time of admission, such as patient functioning prior to the current illness, injury, or exacerbation.

Change in Self-Care: Quality Measure Exclusions

This quality measure has six exclusion criteria:

1. Patients with incomplete stays.
2. Patients who are independent with all self-care activities at the time of admission.
3. Patients in a coma, persistent vegetative state, complete tetraplegia, locked-in state, severe anoxic brain damage, cerebral edema, or compression of brain.
4. Patients younger than 21 years.
5. Patients discharged to hospice (home or institutional facility).
6. Patients who are not Medicare beneficiaries.

Change in Self-Care: Included Self-Care Items

- GG0130A. Eating.
- GG0130B. Oral hygiene.
- GG0130C. Toileting hygiene.
- GG0130E. Shower/bathe self.
- GG0130F. Upper body dressing.
- GG0130G. Lower body dressing.
- GG0130H. Putting on/taking off footwear.



Change in Self-Care: Risk Adjustment

- Patients treated in IRFs vary in terms of primary diagnosis, demographic characteristics, and coexisting conditions.
- Patients may have different expected improvement in function on the basis of these factors. Therefore, this outcome measure is risk-adjusted.
- Risk adjustment controls for specific patient characteristics (e.g., age or diagnosis) that may affect patients' outcomes so that facility data may be compared.



Change in Self-Care: Risk-Adjustment Variables

1. Age group.
2. Admission self-care score (continuous).
3. Admission self-care score (squared).
4. Primary diagnosis group.
5. Interaction between admission self-care and primary diagnosis group.
6. Prior acute or IRF primary diagnosis – surgical.
7. Prior functioning: self-care.
8. Prior functioning: indoor ambulation.
9. Prior mobility/device aids.
10. Stage 2 pressure ulcer.
11. Stage 3, 4, or unstageable pressure ulcer/injury.
12. Cognitive function.
13. Communication impairment.
14. Bladder incontinence.
15. Bowel incontinence.
16. Swallowing ability.
17. Comorbidities.

Change in Self-Care: Detailed Risk-Adjustment Information

Table A-5

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

Covariate	Covariate Category	IRF-PAI Item(s) and Calculations*	Change in Self-Care (NQF #2633)	Change in Mobility (NQF #2634)	Discharge Self-Care (NQF #2635)	Discharge Mobility (NQF #2636)
Model Intercept	—	—	✓	✓	✓	✓
Age Group	<35 years	Truncate (Item 12 – Item 6) = age; If age <35 years = 1; else = 0	✓	✓	✓	✓
Age Group	35–44 years	Truncate (Item 12 – Item 6) = age; If age 35–44 years = 1; else = 0	✓	✓	✓	✓
Age Group	45–54 years	Truncate (Item 12 – Item 6) = age; If age 45–54 years = 1; else = 0	✓	✓	✓	✓
Age Group	55–64 years	Truncate (Item 12 – Item 6) = age; If age 55–64 years = 1; else = 0	✓	✓	✓	✓
Age group (reference category)	65–74 years (reference category)	Truncate (Item 12 – Item 6) = age; If age 65–74 years = 1; else = 0	n/a	n/a	n/a	n/a
Age Group	75–84 years	Truncate (Item 12 – Item 6) = age; If age 75–84 years = 1; else = 0	✓	✓	✓	✓
Age Group	85–90 years	Truncate (Item 12 – Item 6) = age; If age 85–90 years = 1; else = 0	✓	✓	✓	✓

Detailed risk-adjustment information for this measure can be found in Appendix A of the **IRF Quality Reporting Program (QRP) Measure Calculations and Reporting User's Manual**.

Observed Change in Self-Care Calculation

1. Calculate the admission self-care score, after recoding.
2. Calculate the discharge self-care score, after recoding.
3. Identify the excluded stays.
4. Determine the included stays.
5. Calculate the observed change in self-care score for each patient stay.
6. Calculate the facility-level average observed change in self-care.
7. Round the value to one decimal space.



Change in Self-Care: Detailed Information

- A summary of this quality measure can be accessed on the National Quality Forum (NQF) website:
<http://www.qualityforum.org/qps/2633>.
- More detailed specifications for this quality measure, including risk-adjustment testing and selection information, can be downloaded from:
<http://www.qualityforum.org/ProjectTemplateDownload.aspx?SubmissionID=2633>.

The screenshot displays the NQF website interface. At the top, there's a navigation bar with 'About Us', 'News', 'NQF Work', and a search bar. Below this is a 'Measure Search' section with a search box and a 'Search as Phrase' checkbox. The main content area is titled 'Measures (Result List)' and shows a list of measures. The selected measure is '2633 Inpatient Rehabilitation Facility (IRF) Functional Outcome Measure: Change in Self-Care Score for Medical Rehabilitation Patients'. The measure is described as 'VIEW THE NEW SPEC.: There is a new version under consideration.' and is stewarded by 'Centers for Medicare & Medicaid Services'. The 'Measure Description' section explains that the measure estimates the risk-adjusted mean change in self-care score between admission and discharge for IRF Medicare patients. The 'Numerator Statement' states that the measure does not have a simple form for the numerator and denominator, but estimates the risk-adjusted change in self-care score. The 'Denominator Statement' states that the denominator is the number of IRF Medicare patient stays, except those that meet the exclusion criteria. The 'Exclusions' section lists 6 exclusion criteria, including patients with incomplete stays, patients who are unexpectedly discharged to an acute care setting, and patients who die or leave an IRF. The 'Take Action' section includes a 'Status' section with 'Current Activity: Endorsement Maintenance: Patient Experience and Function Spring Cycle 2019', 'Endorsed', 'Last Updated Date: Jan 11, 2017', 'Corresponding Measures: Not Available', and 'Measure History: Full History'. There is also a 'Found in Portfolio(s)' section with 'Patient Experience and Function'.

NQF #2634

IRF Functional Outcome Measure: Change in Mobility Score for Medical Rehabilitation Patients

Change in Mobility: Quality Measure Description

- Outcome measure calculated using data from the IRF-PAI.
- Estimates the risk-adjusted mean change in mobility score between admission and discharge among IRF patients ages 21 or older.
- The change in mobility score is calculated as the difference between the discharge mobility score and the admission mobility score.
- **Target Population:** IRF patients who are at least 21 years of age, Medicare beneficiaries, are not independent in all of the self-care activities at the time of admission, and have complete stays.

Note: This measure does not have a simple form for the numerator and denominator.

Change in Mobility: Quality Measure Description (cont.)

This outcome measure requires the collection of:

1

Admission and discharge functional status data by clinicians using standardized data elements that assess specific functional mobility activities.

2

Risk factors data at the time of admission, such as patient functioning prior to the current illness, injury, or exacerbation.

Change in Mobility: Quality Measure Exclusions

This quality measure has six exclusion criteria:

1. Patients with incomplete stays.
2. Patients who are independent with all mobility activities at the time of admission.
3. Patients in a coma, persistent vegetative state, complete tetraplegia, locked-in state, severe anoxic brain damage, cerebral edema, or compression of brain.
4. Patients younger than 21 years.
5. Patients discharged to hospice.
6. Patients who are not Medicare beneficiaries.

Change in Mobility: Included Mobility Items

- GG0170A. Roll left and right.
- GG0170B. Sit to lying.
- GG0170C. Lying to sitting on side of bed.
- GG0170D. Sit to stand.
- GG0170E. Chair/bed-to-chair transfer.
- GG0170F. Toilet transfer.
- GG0170G. Car transfer.



Change in Mobility: Included Mobility Items (cont.)

For patients who are walking:

- GG0170I. Walk 10 feet.
- GG0170J. Walk 50 feet with two turns.
- GG0170K. Walk 150 feet.
- GG0170L. Walking 10 feet on uneven surfaces.
- GG0170M. 1 step (curb).
- GG0170N. 4 steps.
- GG0170O. 12 steps.
- GG0170P. Picking up object.



Change in Mobility: Risk-Adjustment Variables

1. Age group.
2. Admission mobility score (continuous).
3. Admission mobility score (squared).
4. Primary diagnosis group.
5. Interaction between admission self-care and primary diagnosis group.
6. Prior acute or IRF primary diagnosis – surgical.
7. Prior functioning: indoor ambulation.
8. Prior functioning: stair negotiation.
9. Prior functioning: cognition.
10. Prior mobility/device aids.
11. Stage 2 pressure ulcer.
12. Stage 3, 4, or unstageable pressure ulcer/injury.
13. Cognitive function.
14. Communication impairment.
15. Bladder incontinence.
16. Bowel incontinence.
17. Swallowing ability.
18. Total parenteral nutrition.
19. History of falls.
20. Comorbidities.

Change in Mobility: Detailed Risk-Adjustment Information

Table A-5

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

Covariate	Covariate Category	IRF-PAI Item(s) and Calculations*	Change in Self-Care (NQF #2633)	Change in Mobility (NQF #2634)	Discharge Self-Care (NQF #2635)	Discharge Mobility (NQF #2636)
Model Intercept	—	—	✓	✓	✓	✓
Age Group	<35 years	Truncate (Item 12 – Item 6) = age; If age <35 years = 1; else = 0	✓	✓	✓	✓
Age Group	35–44 years	Truncate (Item 12 – Item 6) = age; If age 35–44 years = 1; else = 0	✓	✓	✓	✓
Age Group	45–54 years	Truncate (Item 12 – Item 6) = age; If age 45–54 years = 1; else = 0	✓	✓	✓	✓
Age Group	55–64 years	Truncate (Item 12 – Item 6) = age; If age 55–64 years = 1; else = 0	✓	✓	✓	✓
Age group (reference category)	65–74 years (reference category)	Truncate (Item 12 – Item 6) = age; If age 65–74 years = 1; else = 0	n/a	n/a	n/a	n/a
Age Group	75–84 years	Truncate (Item 12 – Item 6) = age; If age 75–84 years = 1; else = 0	✓	✓	✓	✓
Age Group	85–90 years	Truncate (Item 12 – Item 6) = age; If age 85–90 years = 1; else = 0	✓	✓	✓	✓

Detailed risk-adjustment information for this measure can be found in Appendix A of the IRF QRP Measure Calculations and Reporting User's Manual.

Observed Change in Mobility Calculation

1. Calculate the admission mobility score, after recoding.
2. Calculate the discharge mobility score, after recoding.
3. Identify the excluded stays.
4. Determine the included stays.
5. Calculate the observed change in mobility score for each patient stay.
6. Calculate the facility-level average observed change in mobility.
7. Round the value to one decimal space.



Change in Mobility: Detailed Information

- A summary of this quality measure can be accessed on the NQF website:
<http://www.qualityforum.org/qps/2634>.
- More detailed specifications for this quality measure, including risk-adjustment testing and selection information, can be downloaded from:
<http://www.qualityforum.org/ProjectTemplateDownload.aspx?SubmissionID=2634>.

The screenshot displays the NQF website interface for measure 2634. The header includes 'NATIONAL QUALITY FORUM' and navigation links for 'About Us', 'News', and 'NQF Work'. A search bar contains the number '2634'. Below the search bar, there are tabs for 'Measures (Result List)', 'Portfolios (130)', and 'Compare'. The main content area shows the measure title 'Inpatient Rehabilitation Facility (IRF) Functional Outcome Measure: Change in Mobility Score for Medical Rehabilitation Patients' and its steward, 'Centers for Medicare & Medicaid Services'. A 'Measure Description' section explains that the measure estimates the mean risk-adjusted mean change in mobility score between admission and discharge for IRF Medicare Part A and C patients. A 'Numerator Statement' section states that the measure estimates the risk-adjusted change in mobility score between admission and discharge among IRF Medicare Part A and C patients age 21 and older. A 'Denominator Statement' section states that the denominator is the number of IRF Medicare Part A and C patient stays, except those that meet the exclusion criteria. An 'Exclusions' section lists six exclusion criteria, including 'Patients with immediate stay'. On the right side, there is a 'Take Action' section with links for 'Status', 'Current Activity', 'Endorsement Maintenance', 'Patient Experience and Function Spring Cycle 2011', 'Endorsed', 'Last Updated Date: Jan 09, 2018', 'Corresponding Measures: Not Available', 'Measure History: Full History', and 'Found in Portfolio(s): Patient Experience and Function'.

NQF #2635

IRF Functional Outcome Measure: Discharge Self-Care Score for Medical Rehabilitation Patients

Discharge Self-Care: Quality Measure Description

- Outcome measure calculated using data from the IRF-PAI.
- Estimates the percentage of IRF patients who meet or exceed an expected discharge self-care score.
- **Target Population:** IRF patients who are at least 21 years of age, Medicare beneficiaries, and have complete stays.



Discharge Self-Care: Quality Measure Description (cont.)

This outcome measure requires the collection of:

1

Admission and discharge functional status data by clinicians using standardized data elements that assess specific self-care activities.

2

Risk factors data, such as patient functioning prior to the current illness, injury, or exacerbation.

Discharge Self-Care: Numerator/Denominator

Numerator

The number of patients in an IRF with a discharge self-care score that is equal to or higher than the calculated expected discharge self-care score.

Denominator

The total number of Medicare Part A and Medicare Advantage patient stay-level IRF-PAI records with a discharge date in the measure target period, which do not meet the exclusion criteria.

Discharge Self-Care: Quality Measure Exclusions

This quality measure has five exclusion criteria:

1. Patients with incomplete stays.
2. Patients in a coma, persistent vegetative state, complete tetraplegia, locked-in state, severe anoxic brain damage, cerebral edema, or compression of brain.
3. Patients younger than 21 years.
4. Patients discharged to hospice.
5. Patients not covered by the Medicare program.

Discharge Self-Care: Included Self-Care Items

- GG0130A. Eating.
- GG0130B. Oral hygiene.
- GG0130C. Toileting hygiene.
- GG0130E. Shower/bathe self.
- GG0130F. Upper body dressing.
- GG0130G. Lower body dressing.
- GG0130H. Putting on/taking off footwear.

The data required to calculate this measure are the same as the “Change in Self-Care” measure (NQF #2633).



Discharge Self-Care: Risk-Adjustment Variables

1. Age group.
2. Admission self-care score (continuous).
3. Admission self-care score (squared).
4. Primary diagnosis group.
5. Interaction between admission self-care and primary diagnosis group.
6. Prior acute or IRF primary diagnosis – surgical.
7. Prior functioning: self-care.
8. Prior functioning: indoor ambulation.
9. Prior mobility/device aids.
10. Stage 2 pressure ulcer.
11. Stage 3, 4, or unstageable pressure ulcer/injury.
12. Cognitive function.
13. Communication impairment.
14. Bladder incontinence.
15. Bowel incontinence.
16. Swallowing ability.
17. Comorbidities.

Discharge Self-Care: Detailed Risk-Adjustment Information

Table A-5

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

Covariate	Covariate Category	IRF-PAI Item(s) and Calculations*	Change in Self-Care (NQF #2633)	Change in Mobility (NQF #2634)	Discharge Self-Care (NQF #2635)	Discharge Mobility (NQF #2636)
Model Intercept	—	—	✓	✓	✓	✓
Age Group	<35 years	Truncate (Item 12 – Item 6) = age; If age <35 years = 1; else = 0	✓	✓	✓	✓
Age Group	35–44 years	Truncate (Item 12 – Item 6) = age; If age 35–44 years = 1; else = 0	✓	✓	✓	✓
Age Group	45–54 years	Truncate (Item 12 – Item 6) = age; If age 45–54 years = 1; else = 0	✓	✓	✓	✓
Age Group	55–64 years	Truncate (Item 12 – Item 6) = age; If age 55–64 years = 1; else = 0	✓	✓	✓	✓
Age group (reference category)	65–74 years (reference category)	Truncate (Item 12 – Item 6) = age; If age 65–74 years = 1; else = 0	n/a	n/a	n/a	n/a
Age Group	75–84 years	Truncate (Item 12 – Item 6) = age; If age 75–84 years = 1; else = 0	✓	✓	✓	✓
Age Group	85–90 years	Truncate (Item 12 – Item 6) = age; If age 85–90 years = 1; else = 0	✓	✓	✓	✓

Detailed risk-adjustment information for this measure can be found in Appendix A of the IRF QRP Measure Calculations and Reporting User's Manual.

Observed Discharge Self-Care Calculation

1. Calculate the observed discharge self-care score.
2. Identify the excluded stays.
3. Calculate the expected discharge self-care score.
4. Calculate the difference in observed and expected discharge self-care scores.
5. Determine the denominator count.
6. Determine the numerator count.
7. Calculate the facility-level discharge self-care percent.
8. Round the value to one decimal space.



Discharge Self-Care: Detailed Information

- A summary of this quality measure can be accessed on the NQF website:
<http://www.qualityforum.org/qps/2635>.
- More detailed specifications for this quality measure, including risk-adjustment testing and selection information, can be downloaded from:
<http://www.qualityforum.org/ProjectTemplateDownload.aspx?SubmissionID=2635>.

The screenshot displays the NQF website interface for Measure 2635. The header includes the NQF logo and navigation links. The main content area shows the measure title, a warning about a new specification, and a detailed description. The left sidebar provides filters for narrowing the search, and the right sidebar offers actions and status information.

NATIONAL QUALITY FORUM

Measure Search [Search]

Search as Phrase

Measures (Result List) Portfolios Compare Add to Compare Add to Portfolio Export

2635 **VIEW THE NEW SPEC: There is a new version under consideration.**

Inpatient Rehabilitation Facility (IRF) Functional Outcome Measure: Discharge Self-Care Score for Medical Rehabilitation Patients

STEWARD: Centers for Medicare & Medicaid Services

Measure Description:
This measure estimates the percentage of IRF patients who meet or exceed an expected discharge self-care score.

Numerator Statement:
The numerator is the number of patients in an IRF with an observed discharge self-care score that is equal to or higher than the calculated expected discharge self-care score.

Denominator Statement:
Inpatient Rehabilitation Facility patients included in this measure are at least 21 years of age, Medicare Part A and C beneficiaries, and have complete stays.

Exclusions:
This quality measure has five exclusion criteria:
1) Patients with incomplete stays.
Rationale: It can be challenging to gather accurate discharge functional status data for patients who experience incomplete stays. Patients with incomplete stays include patients who are unexpectedly discharged to an acute care setting (Short-stay Acute Hospital, Critical Access Hospital, Inpatient Psychiatric Facility, or Long-term Care Hospital), because of a medical emergency; patients discharged to another IRF; patients who die or leave an Inpatient Rehabilitation Facility (IRF) against medical advice; and patients with a length of stay less than 3 days.

Take Action

Status
Current Activity:
Endorsement Maintenance:
Patient Experience and Function Spring Cycle 2019
Endorsed
Last Updated Date:
Oct 03, 2017
Corresponding Measures:
Not Available
Measure History:
Full History

Found in Portfolio(s)
Patient Experience and Function

NQF #2636

IRF Functional Outcome Measure: Discharge Mobility Score for Medical Rehabilitation Patients

Discharge Mobility: Quality Measure Description

- Outcome measure calculated using data from the IRF-PAI.
- Estimates the percentage of IRF patients who meet or exceed an expected discharge mobility score.
- **Target Population:** IRF patients who are at least 21 years of age, Medicare beneficiaries, and have complete stays.



Discharge Mobility: Quality Measure Description (cont.)

This outcome measure requires the collection of:

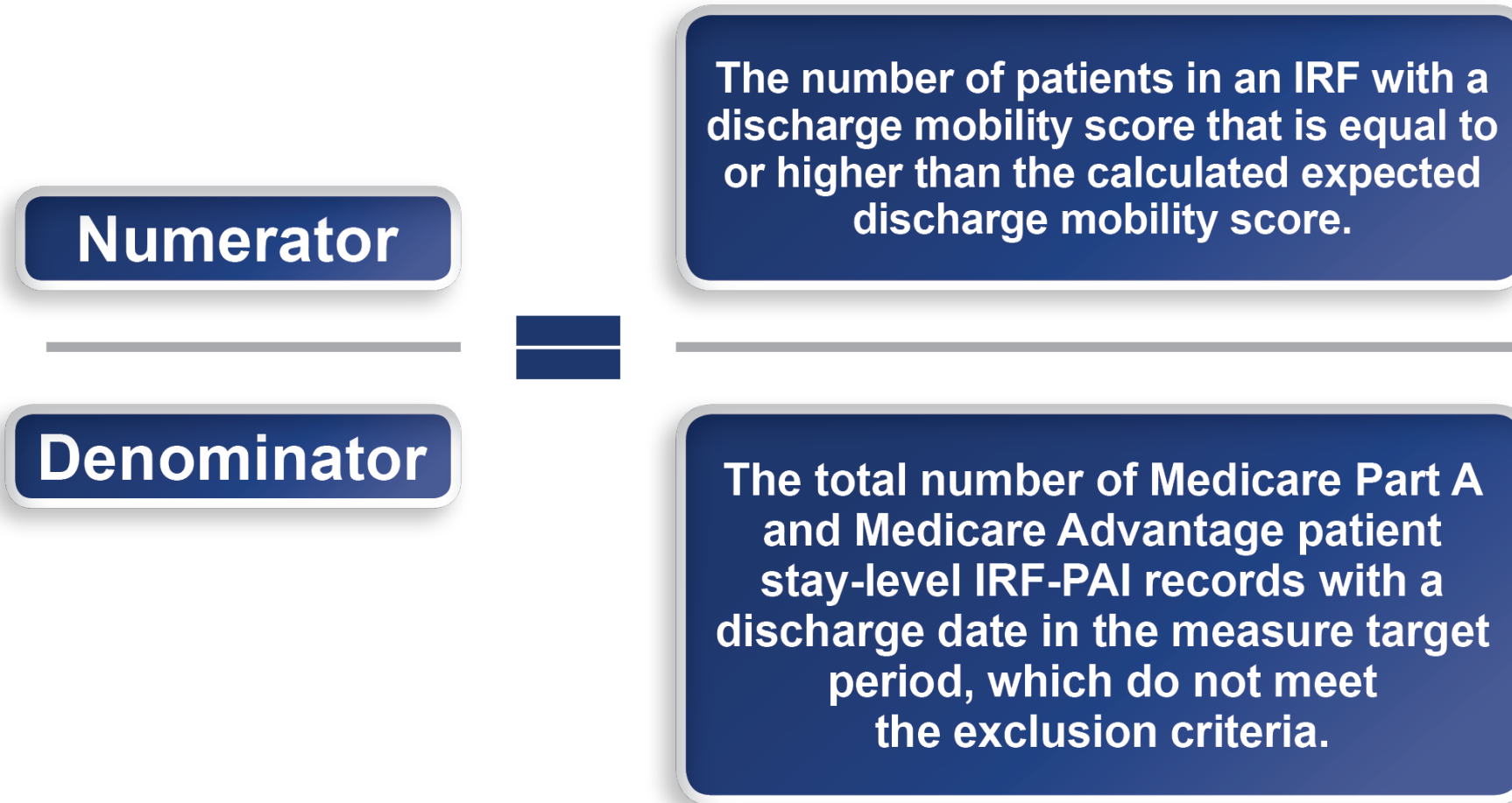
1

Admission and discharge functional status data by clinicians using standardized data elements that assess specific functional mobility activities.

2

Risk factors data, such as patient functioning prior to the current illness, injury, or exacerbation.

Discharge Mobility: Numerator/Denominator



Discharge Mobility: Quality Measure Exclusions

This quality measure has five exclusion criteria:

1. Patients with incomplete stays.
2. Patients in a coma, persistent vegetative state, complete tetraplegia, locked-in state, severe anoxic brain damage, cerebral edema, or compression of brain.
3. Patients younger than 21 years.
4. Patients discharged to hospice.
5. Patients who are not Medicare beneficiaries.

Discharge Mobility: Included Mobility Items

- GG0170A. Roll left and right.
- GG0170B. Sit to lying.
- GG0170C. Lying to sitting on side of bed.
- GG0170D. Sit to stand.
- GG0170E. Chair/bed-to-chair transfer.
- GG0170F. Toilet transfer.
- GG0170G. Car transfer.

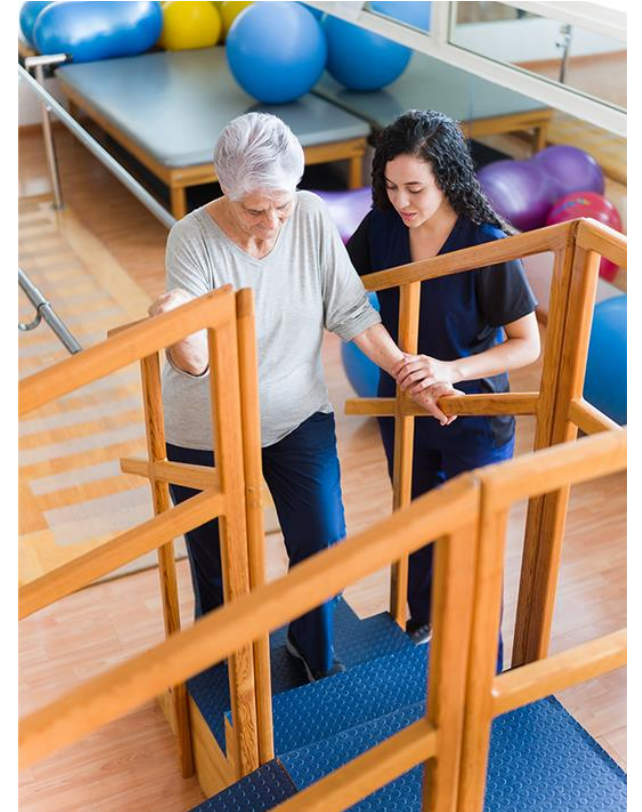
The data required to calculate this measure are the same as the “Change in Mobility” measure (NQF #2634).



Discharge Mobility: Included Mobility Items (cont.)

For patients who are walking:

- GG0170I. Walk 10 feet.
- GG0170J. Walk 50 feet with two turns.
- GG0170K. Walk 150 feet.
- GG0170L. Walking 10 feet on uneven surfaces.
- GG0170M. 1 step (curb).
- GG0170N. 4 steps.
- GG0170O. 12 steps.
- GG0170P. Picking up object.



Discharge Mobility: Risk-Adjustment Variables

1. Age group.
2. Admission mobility score (continuous).
3. Admission mobility score (squared).
4. Primary diagnosis group.
5. Interaction between admission self-care and primary diagnosis group.
6. Prior acute or IRF primary diagnosis – surgical.
7. Prior functioning: indoor ambulation.
8. Prior functioning: stair negotiation.
9. Prior functioning: cognition.
10. Prior mobility/device aids.
11. Stage 2 pressure ulcer.
12. Stage 3, 4, or unstageable pressure ulcer/injury.
13. Cognitive function.
14. Communication impairment.
15. Bladder incontinence.
16. Bowel incontinence.
17. Swallowing ability.
18. Total parenteral nutrition.
19. History of falls.
20. Comorbidities.

Discharge Mobility: Detailed Risk-Adjustment Information

Table A-5

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

Covariate	Covariate Category	IRF-PAI Item(s) and Calculations*	Change in Self-Care (NQF #2633)	Change in Mobility (NQF #2634)	Discharge Self-Care (NQF #2635)	Discharge Mobility (NQF #2636)
Model Intercept	—	—	✓	✓	✓	✓
Age Group	<35 years	Truncate (Item 12 – Item 6) = age; If age <35 years = 1; else = 0	✓	✓	✓	✓
Age Group	35–44 years	Truncate (Item 12 – Item 6) = age; If age 35–44 years = 1; else = 0	✓	✓	✓	✓
Age Group	45–54 years	Truncate (Item 12 – Item 6) = age; If age 45–54 years = 1; else = 0	✓	✓	✓	✓
Age Group	55–64 years	Truncate (Item 12 – Item 6) = age; If age 55–64 years = 1; else = 0	✓	✓	✓	✓
Age group (reference category)	65–74 years (reference category)	Truncate (Item 12 – Item 6) = age; If age 65–74 years = 1; else = 0	n/a	n/a	n/a	n/a
Age Group	75–84 years	Truncate (Item 12 – Item 6) = age; If age 75–84 years = 1; else = 0	✓	✓	✓	✓
Age Group	85–90 years	Truncate (Item 12 – Item 6) = age; If age 85–90 years = 1; else = 0	✓	✓	✓	✓

Detailed risk-adjustment information for this measure can be found in Appendix A of the **IRF QRP Measure Calculations and Reporting User's Manual**.

Observed Discharge Mobility Calculation

1. Calculate the observed discharge mobility score.
2. Identify the excluded stays.
3. Calculate the expected discharge mobility score.
4. Calculate the difference in observed and expected discharge mobility scores.
5. Determine the denominator count.
6. Determine the numerator count.
7. Calculate the facility-level discharge mobility percent.
8. Round the value to one decimal space.



Discharge Mobility: Detailed Information

- A summary of this quality measure can be accessed on the NQF website:
<http://www.qualityforum.org/qps/2636>.
- More detailed specifications for this quality measure, including risk-adjustment testing and selection information, can be downloaded from:
<http://www.qualityforum.org/ProjectTemplateDownload.aspx?SubmissionID=2636>.

The screenshot displays the NQF website interface for Measure 2636. The header includes the NQF logo, navigation links (About Us, News, NQF Work), and a search bar. The main content area is titled "Measures (Result List)" and shows the measure details for "2636". A banner indicates a new specification is under consideration. The measure is titled "Inpatient Rehabilitation Facility (IRF) Functional Outcome Measure: Discharge Mobility Score for Medical Rehabilitation Patients" and is stewarded by "Centers for Medicare & Medicaid Services". The left sidebar provides filters for Measure Type (Process, Composite, Cost/Resource Use, Efficiency, Outcome, Structure, Intermediate Clinical Outcome) and Endorsement Status (Endorsement Status, eMeasure, Measure Steward, Use in Federal Program, Clinical Condition/Topic Area, Condition Specific, Strategy). The main content area includes sections for Measure Description, Numerator Statement, Denominator Statement, and Exclusions. The right sidebar shows the Status (Current Activity, Endorsement Maintenance, Patient Experience and Function Spring Cycle 2019), Endorsed date (Oct 03, 2017), Corresponding Measures (Not Available), Measure History (Full History), and Found in Portfolio(s) (Patient Experience and Function).

IRF QRP Measure Calculations and Reporting User's Manual Version 3.0

Downloads


[IRF QM Report - Measures Added - October 2018 \[PDF, 43KB\]](#) 

[IRF QRP Table for Reporting Assessment-Based Measures for the FY 2020 IRF QRP APU](#)

[IRF Measure Calculations and Reporting User's Manual V3.0 \[PDF, 1MB\]](#) 

[IRF Measure Calculations and Reporting User's Manual V3.0 Change Table \[PDF, 515KB\]](#)

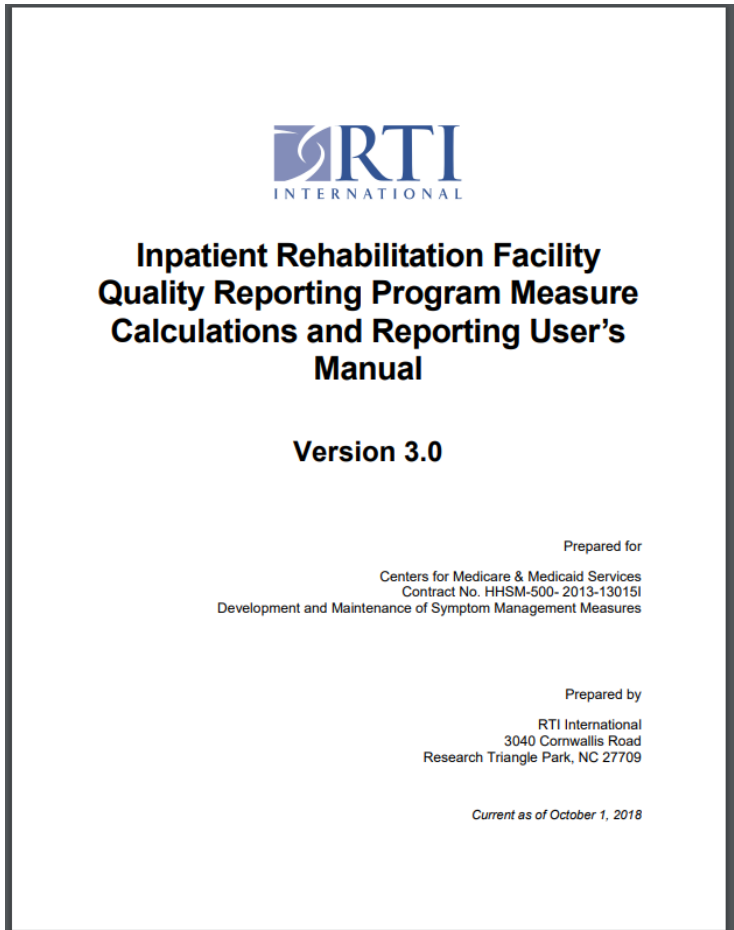
[Risk Adjustment Appendix File For IRF Measure Calculations and Reporting User's Manual](#)

[Final Specifications for IRF QRP Quality Measures and Standardized Patient Assessment
October 1 2018.pdf \[PDF, 395KB\]](#) 

Specifications for IRF QRP quality measures can be found in the IRF QRP Measure Calculations and Reporting User's Manual Version 3.0, at the following link:

<https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/IRF-Quality-Reporting/IRF-Quality-Reporting-Program-Measures-Information-.html>.

IRF QRP Measure Calculations and Reporting User's Manual Version 3.0 (cont.)



- Chapter 1: Manual organization/definition of key terminology.
- Chapter 2: National Healthcare Safety Network measures.
- Chapter 3: Medicare claims-based measures.
- Chapter 4: Record selection for assessment-based quality measures.
- Chapter 5: CASPER data selection for assessment-based quality measures.
- Chapter 6: Calculation of assessment-based quality measures.
- Chapter 7: Measure logic specifications for assessment-based measures.
- Appendix A: Model parameters.

Summary



Five IRF functional measures.

- Process measure:
 - Application of Percent of Long-Term Care Hospital (LTCH) Patients With an Admission and Discharge Functional Assessment and a Care Plan That Addresses Function.
- Outcome measures:
 - Change in Self-Care Score for Medical Rehabilitation Patients.
 - Change in Mobility Score for Medical Rehabilitation Patients.
 - Discharge Self-Care Score for Medical Rehabilitation Patients.
 - Discharge Mobility Score for Medical Rehabilitation Patients.

Summary (cont.)



- Key quality measure components:
 - Target population.
 - Numerator/denominator statements.
 - Exclusion criteria.
 - Data elements.
 - Risk-adjustment approach.
 - Calculation algorithms.
- Detailed specifications can be accessed at the following link:
<https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/IRF-Quality-Reporting/IRF-Quality-Reporting-Program-Measures-Information-.html>.

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Questions?

