

Long-Term Care Hospital Quality Reporting Program Provider Training



LTCH Quality Reporting Program (QRP) Resources

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Acronyms in This Presentation

- Annual Payment Update (APU)
- Assessment Submission and Processing (ASAP)
- Catheter-Associated Urinary Tract Infection (CAUTI)
- Centers for Disease Control and Prevention (CDC)
- Centers for Medicare & Medicaid Services (CMS)
- Certification and Survey Provider Enhanced Reports (CASPER)
- Long-Term Care Hospital (LTCH)
- LTCH Continuity Assessment Record and Evaluation Data Set (LTCH CARE Data Set)



Acronyms in This Presentation (cont.)

- LTCH Quality Reporting Program (QRP)
- LTCH Assessment Submission Entry and Reporting (LASER)
- Medicare Administrative Contractor (MAC)
- National Healthcare Safety Network (NHSN)
- QIES Technical Support Office (QTSO)
- Quality Improvement and Evaluation System (QIES)
- Quality Measure (QM)
- Quality Reporting Program (QRP)
- Regional Office (RO)



Overview

Identify available Long-Term Care Hospital (LTCH) Quality Reporting Program (QRP) resources.

- Demonstrate website navigation.
- Describe LTCH QRP resources and Help Desks.
- Review how to access available frequently asked questions for the LTCH QRP.
- Review the Medicare Administrative Contractor (MAC) contact information used to correct or update facility information.
- Review of LTCH compliance information.



Objectives

- Identify the resources available to LTCH providers to guide their understanding of the LTCH QRP.
- Locate and navigate resources for compliance information.

Disclaimer

This presentation was current at the time it was published or uploaded onto the web. Medicare policy changes frequently, so links to the source documents have been provided within this presentation for your reference.

This presentation was prepared as a service to the public and is not intended to grant rights or impose obligations. This presentation may contain references or links to statutes, regulations, or other policy materials. The intent of the information provided is to be a general summary and not to take the place of either the written law or regulations. We encourage readers to review the specific statutes, regulations, and other interpretive materials for a full and accurate statement of their contents.

LTCH QRP Website



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Outreach & Education

Home > Medicare > Long Term Care Hospital Quality Reporting Program > Long-Term Care Hospital (LTCH) Quality Reporting (QRP)

Long Term Care Hospital Quality Reporting Program
[LTCH Quality Reporting Spotlight Announcements](#)
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Long-Term Care Hospital (LTCH) Quality Reporting (QRP)

Overview

What is the Long-Term Care Hospital (LTCH) Quality Reporting Program (QRP)?

The purpose of this page is to provide users with important announcements and updates regarding the LTCH QRP. This page is updated periodically whenever an important update needs to be communicated to LTCH providers regarding the LTCH QRP. Please refer to this page when seeking information on upcoming trainings, approaching data submission deadlines, updates to training materials or measures, reminders, and other useful communications.

The LTCH QRP, mandated by Section 3004(a) of the Patient Protection and Affordable Care Act of 2010, creates LTCH quality reporting requirements. Every year, by October 1, we publish the quality measures LTCHs must report. Section 3004(a) of the Affordable Care Act (ACA) amends section 1886(m)(5) of the Social Security Act(SSA) to direct the Secretary to establish quality reporting requirements for long-term care hospitals (LTCHs).

The Improving Medicare Post-Acute Care Transformation Act of 2014 (the IMPACT Act), LTCHs also requires LTCHs to submit standardized patient assessment data with regard to quality measures, resource use, and other measures. It further specifies that the data [elements] "... be standardized and interoperable so as to allow for the exchange of such data among such post-acute care providers and other providers and the use by such providers of such data that has been so exchanged, including by using common standards and definitions in order to provide access to longitudinal information for such providers to facilitate coordinated care and improved Medicare beneficiary outcomes ...".

Learn more about Affordable Care Act (ACA) Section 3004 (Quality Reporting for Long-Term Care Hospitals (LTCH), Inpatient Rehabilitation Facilities (IRF), and Hospice Programs). Please note the link below for P.L. Public Law No: 111-148, the Patient Protection and Affordable Care Act (H.R.3590 Health Care Law). <https://www.gpo.gov/fdsys/pkg/PLAW-111publ148/pdf/PLAW-111publ148.pdf>

Learn more about the Improving Medicare Post-acute Care Transformation (IMPACT) Act of 2014 which requires the submission of standardized data by Long-Term Care Hospitals (LTCHs), Skilled Nursing Facilities (SNFs), Home Health Agencies (HHAs) and Inpatient Rehabilitation Facilities (IRFs): <https://www.gpo.gov/fdsys/pkg/PLAW-113publ185/pdf/PLAW-113publ185.pdf>



LTCH QRP Website: Spotlight Announcements

CMS.gov
Centers for Medicare & Medicaid Services

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Medicare Medicaid/CHIP Medicare-Medicaid Coordination Private Insurance Innovation Center Regulations & Guidance Research, Statistics, Data & Systems Outreach & Education

Home > Medicare > Long Term Care Hospital Quality Reporting Program > LTCH Quality Reporting Spotlight Announcements

Long Term Care Hospital Quality Reporting Program

LTCH Quality Reporting Spotlight Announcements

[LTCH Quality Reporting Measures Information](#)

[LTCH CARE Data Set & LTCH QRP Manual](#)

[LTCH Quality Reporting Technical Information](#)

[LTCH Quality Reporting Training](#)

[LTCH Quality Public Reporting](#)

[LTCH Quality Reporting FAQs](#)

[LTCH Patient Experience of Care](#)

[LTCH Quality Reporting Data Submission Deadlines](#)

[LTCH Quality Reporting Reconsideration and Exception & Extension](#)

LTCH Quality Reporting Spotlight Announcements

What's new with Long-Term Care Hospitals (LTCHs)

The purpose of this page is to provide users with important announcements and updates regarding the LTCH QRP. This page is updated periodically whenever an important update needs to be communicated to LTCH providers regarding the LTCH QRP. Please refer to this page when seeking information on upcoming trainings, approaching data submission deadlines, updates to training materials or measures, reminders, and other useful communications.

Visit the [LTCH QRP Reconsideration and Exception & Extension](#) webpage for Hurricane Protocol

Updates

September 19, 2017

August 22 LTCH QRP Refresher Webinar Video Recording & Post-Training Materials Are Now Available

A video recording of the August 22, 2017, Long-Term Care Hospital (LTCH) Quality Reporting Program (QRP) Refresher Webinar is now available along with post-training materials (with answers to knowledge checks revealed) and the question and answer (Q&A) document. See the [LTCH Quality Reporting Training](#) webpage for details.

September 14, 2017

Hurricane Irma - Disaster Exceptions/Exemptions for Medicare Certified Providers Affected by Severe Storms and Flooding

- News.
- Announcements.
- Updates.

<https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/LTCH-Quality-Reporting/LTCH-Quality-Reporting-Spotlight-Announcements.html>

LTCH QRP Website: Measures Information

The screenshot shows the CMS.gov website with the following elements:

- Header:** CMS.gov logo, "Centers for Medicare & Medicaid Services", navigation links (Home, About CMS, Newsroom, FAQs, Archive, Share, Help, Print), and a search bar.
- Navigation Bar:** Buttons for Medicare, Medicaid/CHIP, Medicare-Medicaid Coordination, Private Insurance, Innovation Center, Regulations & Guidance, Research, Statistics, Data & Systems, and Outreach & Education.
- Breadcrumbs:** Home > Medicare > Long Term Care Hospital Quality Reporting Program > LTCH Quality Reporting Measures Information.
- Left Sidebar:**
 - Long Term Care Hospital Quality Reporting Program**
 - [LTCH Quality Reporting Spotlight Announcements](#)
 - LTCH Quality Reporting Measures Information**
 - [LTCH CARE Data Set & LTCH QRP Manual](#)
 - [LTCH Quality Reporting Technical Information](#)
 - [LTCH Quality Reporting Training](#)
 - [LTCH Quality Public Reporting](#)
 - [LTCH Quality Reporting FAQs](#)
 - [LTCH Patient Experience of Care](#)
 - [LTCH Quality Reporting Data Submission Deadlines](#)
 - [LTCH Quality Reporting Reconsideration and Exception & Extension](#)
- Main Content:**
 - LTCH Quality Reporting Measures Information**
 - The purpose of this page is to provide information on the measures that are to be reported by LTCHs in accordance with the LTCH QRP. On this page, you will find descriptions for each measure, measure specifications, and updates to the measures and data sets. This page is updated as measure updates become available.
 - For more detailed information on data collection and submission deadlines, please refer to the LTCH Quality Reporting Data Submission Deadlines webpage. For more information on the data sets and quality reporting requirements, please reference the LTCH CARE Data set V 3.00 and the [LTCH QRP Manual V 3.0](#), located on the [LTCH CARE Data Set and LTCH QRP Manual webpage](#).
 - July 05, 2017**

An updated version of the LTCH Quality Reporting Program User's Manual has been added to the Downloads section. The LTCH Quality Reporting Program User's Manual 2.0 for the patient assessment based measures using the LTCH Data Set contains information regarding record selection and measure calculation for the quality measures and the logical specifications for the LTCH CARE Data Set Quality Measures. The manual also includes information on quality measures for public reporting in late fall 2017.
 - What are the Long-Term Care Hospital (LTCH) quality reporting measures?**

For quality measures Currently adopted for the LTCH QRP, please see document in the downloads section below.

Collection periods and submission deadlines for the data are located on the [LTCH Quality Reporting Data Submission](#)

- Measure specifications. National Quality Forum measure identification numbers and titles.
- List of LTCH QRP currently adopted measures.

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

LTCH QRP Website: Measures Information (cont.)

Downloads

[LTCH QRP Technical Specifications for Reporting Assessment-Based Measure...pdf \[PDF, 223KB\]](#) 

[Final Specifications for LTCH QRP Quality Measures and Standardized Patient Assessment Data Elements-Effective July 1 2018.pdf \[PDF, 597KB\]](#) 

[Quality Measures Currently Adopted for the LTCH QRP.pdf \[PDF, 92KB\]](#) 

[LTCH Quality Measures User's Manual V 2.0 - June 2017- Final.pdf \[PDF, 661KB\]](#) 

[Finalized Item Set Specifications for FY17 LTCH QRP Final Rule \[ZIP, 647KB\]](#) 

[Measure Specifications for FY17 LTCH QRP Final Rule \[PDF, 1MB\]](#) 

[2016_07_20_mspb_pac_ltch_irf_snf_measure_specs \[PDF, 822KB\]](#) 

[Copy of 2016_04_06_mspb_pac_ltch_service_exclusions \[XLSX, 63KB\]](#)

[LTCH QM User Manual V1.1 April 2016 \[PDF, 190KB\]](#) 

[Ventilator Weaning QM Public Comment Summary Report 2016.pdf \[PDF, 392KB\]](#) 

[Ventilator Weaning QM Pilot Summary Report 2016.pdf \[PDF, 578KB\]](#) 

[Ventilator Weaning QM TEP Summary Report 2016.pdf \[PDF, 525KB\]](#) 

[LTCH QRP Measure Specifications_August 2015 \[PDF, 303KB\]](#) 

- Technical specifications for reporting assessment-based measures.
- Final measure specifications from final rules.
- LTCH Quality Measures (QM) User's Manual.
- Ventilator Weaning Measures Technical Reports.

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

LTCH QRP Website:

LTCH CARE Data Set and LTCH QRP Manual

The screenshot shows the CMS.gov website with the following elements:

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- Navigation Bar:** Yellow buttons for Medicare, Medicaid/CHIP, Medicare-Medicaid Coordination, Private Insurance, Innovation Center, Regulations & Guidance, Research, Statistics, Data & Systems, and Outreach & Education.
- Breadcrumbs:** Home > Medicare > Long Term Care Hospital Quality Reporting Program > LTCH CARE Data Set & LTCH QRP Manual
- Left Sidebar:**
 - Long Term Care Hospital Quality Reporting Program**
 - [LTCH Quality Reporting Spotlight Announcements](#)
 - [LTCH Quality Reporting Measures Information](#)
 - LTCH CARE Data Set & LTCH QRP Manual**
 - [LTCH Quality Reporting Technical Information](#)
 - [LTCH Quality Reporting Training](#)
 - [LTCH Quality Public Reporting](#)
 - [LTCH Quality Reporting FAQs](#)
 - [LTCH Patient Experience of Care](#)
 - [LTCH Quality Reporting Data Submission Deadlines](#)
 - [LTCH Quality Reporting Reconsideration and Exception & Extension](#)
- Main Content Area:**
 - LTCH CARE Data Set & LTCH QRP Manual**
 - This page includes the current versions of LTCH CARE Data Set and LTCH QRP Manual and associated documents. This page will be updated whenever an update is made to either of these resources, a newer version becomes available, or when important information regarding these tools needs to be communicated. Once the Data Set and Manual are updated, the older versions are available for reference in the archives section.
 - The Long-Term Care Hospital (LTCH) Continuity Assessment Record and Evaluation (CARE) Data Set**
 - The Long-Term Care Hospital (LTCH) Continuity Assessment Record and Evaluation (CARE) Data Set is the assessment instrument LTCH providers use to collect patient assessment data for quality measure calculation and payment determination in accordance with LTCH QRP. Patient assessment data is collected on admission, discharge (planned and unplanned), and for expired patients. The LTCH CARE Data Set V 2.01 is currently in use through March 31, 2016. The LTCH CARE Data Set V 3.00 will go into effect April 1, 2016. For more information about data collection and submission, please refer to the LTCH Quality Reporting Data Submission Deadlines webpage.
 - The Long-Term Care Hospital (LTCH) Quality Reporting Program (QRP) Manual**
 - The purpose of the LTCH QRP Manual is to offer continuing guidance to LTCHs regarding the collection, submission, and reporting of quality data to CMS for compliance with the LTCH QRP. The LTCH QRP Manual provides a historical and contextual overview of the LTCH QRP, item-by-item coding instructions for the LTCH CARE Data Set, and coding examples for each item to provide LTCH staff with the rationale and guidance to optimize the accurate completion of the LTCH CARE Data Set. The most recent version of the LTCH QRP Manual is available in the download section below.

- LTCH CARE Data Set, LTCH QRP Manual, and associated documents.
- Change table(s).

<https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/LTCH-Quality-Reporting/LTCH-CARE-Data-Set-and-LTCH-QRP-Manual.html>



LTCH QRP Website: Technical Information



The screenshot shows the CMS.gov website with the following elements:

- Header:** CMS.gov logo, "Centers for Medicare & Medicaid Services", navigation links (Home, About CMS, Newsroom, FAQs, Archive, Share, Help, Print), and a search bar.
- Navigation Bar:** Yellow buttons for Medicare, Medicaid/CHIP, Medicare-Medicaid Coordination, Private Insurance, Innovation Center, Regulations & Guidance, Research, Statistics, Data & Systems, and Outreach & Education.
- Breadcrumbs:** Home > Medicare > Long Term Care Hospital Quality Reporting Program > LTCH Quality Reporting Technical Information
- Left Sidebar:** A list of links including "Long Term Care Hospital Quality Reporting Program", "LTCH Quality Reporting Spotlight Announcements", "LTCH Quality Reporting Measures Information", "LTCH CARE Data Set & LTCH QRP Manual", "LTCH Quality Reporting Technical Information" (highlighted), "LTCH Quality Reporting Training", "LTCH Quality Public Reporting", "LTCH Quality Reporting FAQs", "LTCH Patient Experience of Care", "LTCH Quality Reporting Data Submission Deadlines", "LTCH Quality Reporting Reconsideration and Exception & Extension", "LTCH Quality Reporting Help", and "LTCH Quality Reporting Archives".
- Main Content Area:**
 - Section Header:** "LTCH Quality Reporting Technical Information"
 - Text:** "The purpose of this web page is to provide technical updates and resources related to LTCH data collection, submission of quality data, information regarding the CDC's National Healthcare Safety Network (NHSN), and the LTCH Continuity Assessment Record and Evaluation (CARE) Data Set. Links to these resources can be found at the bottom of this webpage. Users may also find contact information on this page for where to direct questions related to technical issues."
 - Text:** "This page is updated periodically as updates to technical information, LTCH CARE Data Set Submission Specifications, and reporting tools related to data submission become available."
 - Section Header:** "Comments and Questions:"
 - Text:** "For questions related to technical issues: LTCHTechIssues@cms.hhs.gov"
 - Text:** "For the Quality Improvement and Evaluation Systems (QIES) Technical Support Office: help@qtso.com"
 - Section Header:** "Centers for Disease Control and Prevention's National Healthcare Safety Network Website"
 - Text:** "Information related to the procedures using the NHSN for data submission for CLABSI, CAUTI, MRSA, CDI, VAE, and the Influenza Vaccination Coverage Among Healthcare Personnel measures can be found at: <http://www.cdc.gov/nhsn>"
 - Text:** "For NHSN questions: NHSN@cdc.gov"
 - Section Header:** "Updates"
 - Text:** "July 17, 2017"
 - Text:** "Version 2.02.1 of the LTCH Data Specifications, scheduled for implementation on December 17, 2017, are now FINAL. The changes documented in Errata V2.02.1 have been incorporated. The files within the .zip in the Downloads section below are:"

- Technical updates and resources.
- LTCH CARE Data submission specifications.

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

LTCH QRP Website: Training

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Medicare Medicaid/CHIP Medicare-Medicaid Coordination Private Insurance Innovation Center Regulations & Guidance Research, Statistics, Data & Systems Outreach & Education

Home > Medicare > Long Term Care Hospital Quality Reporting Program > LTCH Quality Reporting Training

Long Term Care Hospital Quality Reporting Program

- [LTCH Quality Reporting Spotlight Announcements](#)
- [LTCH Quality Reporting Measures Information](#)
- [LTCH CARE Data Set & LTCH QRP Manual](#)
- [LTCH Quality Reporting Technical Information](#)
- LTCH Quality Reporting Training**
- [LTCH Quality Public Reporting](#)
- [LTCH Quality Reporting FAQs](#)
- [LTCH Patient Experience of Care](#)
- [LTCH Quality Reporting Data Submission Deadlines](#)
- [LTCH Quality Reporting Reconsideration and Exception & Extension](#)

LTCH Quality Reporting Training

The purpose of this page is to provide information about LTCH QRP training for LTCHs including Special Open Door Forum (SODF) Presentations, provider training materials, and other resources. Training announcements, reminders, and other updates are organized by date and added to this webpage as new materials become available.

CDC and CMS Issue Joint Reminder on NHSN Reporting

CDC's National Healthcare Safety Network (NHSN) is the nation's most comprehensive medical event tracking system that is currently utilized by more than 16,000 U.S. healthcare facilities. NHSN provides critical data to guide prevention efforts aimed at protecting patients

In response to anecdotal reports of intentional non-reporting of infection data, CDC and CMS are jointly issuing a reminder that addresses concerns about healthcare facility non-reporting of healthcare-associated infections events. While there is no evidence of a widespread issue, CDC and CMS want to emphasize that accurate reporting to NHSN through strict adherence to the NHSN definitions is critical.

CDC and CMS are committed to ensuring data accuracy and reliability for guiding prevention priorities and protecting patients. Identifying infections and making sure that patients receive the highest quality of care is our top priority.

To read the full reminder, visit: <http://www.cdc.gov/nhsn/pdfs/cms/nhsn-reporting-signed.pdf>

Updates

September 19, 2017

- Training updates.
- Training registration.
- Training presentations and collateral materials.
- Training Q&As.

<https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/LTCH-Quality-Reporting/LTCH-Quality-Reporting-Training.html>



LTCH QRP Website: Training Downloads

Downloads

[August 2017 LTCH QRP Refresher Webinar Q and A.pdf \[PDF, 198KB\]](#) 

[August 2017 LTCH QRP Refresher Webinar with answers.pdf \[PDF, 8MB\]](#) 

[August 2017 LTCH QRP Refresher Webinar without answers.pdf \[PDF, 8MB\]](#) 

[May 2017 Review and Correct Reports Provider Post Training Materials.zip \[ZIP, 2MB\]](#) 

[May 2 Review Correct Webcast QA- May 2017.pdf \[PDF, 388KB\]](#) 

[May 2017 Review and Correct Reports Provider Training \(1\).zip \[ZIP, 2MB\]](#) 

[LTCH CollateralMaterials_Chicago_August2016.zip \[ZIP, 1MB\]](#) 

[LTCH_SlidePresentationsExceptSectionGG_Chicago_August2016.zip \[ZIP, 6MB\]](#) 

[LTCH_SlidesPresentationSectionGG_Chicago_August2016.zip \[ZIP, 5MB\]](#) 

[August LTCH Training Part 1 \[ZIP, 1021KB\]](#) 

[August LTCH Training Part 2 \[ZIP, 5MB\]](#) 

[August LTCH Training Part 3 \[ZIP, 4MB\]](#) 

[LTCH Compliant Packet \[ZIP, 1MB\]](#) 

[IMPACT Act and Assessment Data Element Standardization and Interoperabil... \[ZIP, 6MB\]](#) 

[02032016LTCHWebinar_masterslidedeck_4 \[PDF, 3MB\]](#) 

[LTCH Provider Training November 2015 Day 1 \[ZIP, 13MB\]](#) 

[LTCH Provider Training November 2015 Day 2 \[ZIP, 20MB\]](#) 

[LTCH QR Program Manual version 2.0 \[ZIP, 3MB\]](#) 

[LTCH SODF Presentation – November 5, 2014 \[PDF, 16MB\]](#) 

[LTCH SODF Presentation - June 12, 2014 \[PDF, 461KB\]](#) 

[LTCH SODF June 12, 2014 Announcement \[PDF, 273KB\]](#) 

[MAY 2014 SODF Final Documents \[ZIP, 3MB\]](#) 

- December 2017 LTCH QRP Provider Training materials, videos, and Q&A.
- May 2017 Review and Correct Reports webcast recording, and Q&A.
- August 2016 LTCH QRP Provider Training materials, videos, and Q&A.
- November 2015 LTCH QRP Provider Training materials, videos, and Q&A.
- Improving Medicare Post-Acute Care Transformation Act, and Interoperability Training presentation.

<https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/LTCH-Quality-Reporting/LTCH-Quality-Reporting-Training.html>

LTCH QRP Website: Public Reporting

The screenshot shows the CMS.gov website with the 'Long Term Care Hospital Quality Reporting Program' page. The page includes a navigation bar with links like Home, About CMS, Newsroom, FAQs, Archive, Share, Help, and Print. Below the navigation bar is a search bar and a row of category buttons: Medicare, Medicaid/CHIP, Medicare/Medicaid Coordination, Private Insurance, Innovation Center, Regulations & Guidance, Research, Statistics, Data & Systems, and Outreach & Education. The main content area is titled 'LTCH Quality Public Reporting' and includes a 'Background' section explaining the program's purpose under the Affordable Care Act and the IMPACT Act. It also lists specific quality measures being reported, such as pressure ulcers, CAUTI, CLABSI, and unplanned readmissions. A sidebar on the left contains links to various resources like 'LTCH Quality Reporting Spotlight Announcements', 'LTCH Quality Reporting Measures Information', 'LTCH CARE Data Set & LTCH QRP Manual', 'LTCH Quality Reporting Technical Information', 'LTCH Quality Reporting Training', 'LTCH Quality Public Reporting', 'LTCH Quality Reporting FAQs', 'LTCH Patient Experience of Care', 'LTCH Quality Reporting Data Submission Deadlines', 'LTCH Quality Reporting Reconsideration and Exception & Extension', and 'LTCH Compare Quarterly Refresh'.

- Public reporting updates.
- Public reporting resources and education materials.
- Downloads:
 - LTCH Compare factsheet.
 - National Healthcare Safety Network (NHSN) rebaseline guidance.

<https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/LTCH-Quality-Reporting/LTCH-Quality-Public-Reporting.html>



LTCH QRP Website: Data Submission Deadlines

The screenshot shows the CMS.gov website with the following structure:

- Header:** CMS.gov logo, navigation links (Home, About CMS, Newsroom, FAQs, Archive, Share, Help, Print), and a search bar.
- Menu:** Medicare, Medicaid/CHIP, Medicare-Medicaid Coordination, Private Insurance, Innovation Center, Regulations & Guidance, Research, Statistics, Data & Systems, Outreach & Education.
- Breadcrumbs:** Home > Medicare > Long Term Care Hospital Quality Reporting Program > LTCH Quality Reporting Data Submission Deadlines.
- Left Sidebar:** Long Term Care Hospital Quality Reporting Program, with links to LTCH Quality Reporting Spotlight Announcements, LTCH Quality Reporting Measures Information, LTCH CARE Data Set & LTCH QRP Manual, LTCH Quality Reporting Technical Information, LTCH Quality Reporting Training, LTCH Quality Public Reporting, LTCH Quality Reporting FAQs, LTCH Patient Experience of Care, LTCH Quality Reporting Data Submission Deadlines, and LTCH Quality Reporting Reconsideration and Exception & Extension.
- Main Content:**
 - LTCH Quality Reporting Data Submission Deadlines**
 - Introduction:** The purpose of this page is to provide data collection timelines and submission deadlines for the quality measures required through the LTCH QRP. LTCHs must submit data no later than 11:59 p.m. Pacific Standard Time by the deadlines listed below. The LTCH CARE Data Set must be transmitted to CMS through the Assessment Submission and Processing (ASAP) system to the Quality Improvement Evaluation System (QIES). Data for the National Healthcare Safety Network (NHSN) measures must be submitted to the Centers for Disease Control (CDC). The data collection and submission deadlines for each APU determination are summarized in the tables below.
 - Updates:**
 - August 22, 2017**

Measure and Data Submission Deadlines for Fiscal Year (FY) 2019 are available in the Downloads section below. The [LTCH QRP Submission Deadlines FY 2019 Payment Determination](#) includes the measures, the data collection timeframe, and submission deadlines for the FY 2019 LTCH QRP.
 - February 14, 2017**

NHSN Data Submission Deadline Extended to May 15th for LTCH QRP

CMS is extending the February 15th submission deadline for the Long-Term Care Hospital (LTCH) Quality Reporting Program (QRP) for data submitted via the Centers for Disease Control and Prevention's (CDC) National Health and

- Data submission updates.
- Data collection and final submission deadlines for Annual Payment Update (APU) determination.
- Downloads.

<https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/LTCH-Quality-Reporting/LTCH-Quality-Reporting-Data-Submission-Deadlines.html>

Rulemaking

- Proposed rules and final rules are published in the Federal Register and typically released each year in April and August.
- Proposed and final rules are posted on both of these web pages:
 - <https://www.federalregister.gov/>.
 - <https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/LongTermCareHospitalPPS/LTCHPPS-Regulations-and-Notices.html>.

Stay Connected

- To receive mailing list notices and announcements about the LTCH QRP, sign up at:
<https://public.govdelivery.com/accounts/USCMS/subscriber/new>.
- To receive notices about Centers for Medicare & Medicaid Services (CMS) Open Door Forums related to the LTCH QRP:
<https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/LTCH-Quality-Reporting/LTCH-Quality-Reporting-Spotlight-Announcements.html>.

LTCH Help Desks

- Please note that CMS QRP Help Desk email systems are not secured to receive protected health information or patient-level data with direct identifiers.
- Submitting patient-level data or protected health information may be a violation of your facilities' policies and procedures as well as a violation of Federal regulations, such as the Health Insurance Portability and Accountability Act of 1996.
- **Do NOT submit patient-identifiable information** (e.g., date of birth, Social Security number, and health insurance claim number) to these addresses.
- If you are unsure of whether the information you are submitting is identifiable, please contact your institution's Privacy Officer.



LTCH Help Desks (cont. 1)

LTCH Help Desks

LTCH Provider, with a question about:

LTCH Quality Reporting Program (QRP)

- LTCH QRP requirements.
- Data submission timelines.
- LTCH CARE Data Set items.
- Quality Measure Calculations.
- LTCH QRP provider training materials.
- General quality reporting questions.

Email:

LTCHQualityQuestions
@cms.hhs.gov

LTCH QRP Reconsideration Process

- How to file a request if you receive a letter of non-compliance.
- Request for Reconsideration deadline.
- How to dispute finding of QRP non-compliance.
- LTCH QRP payment reduction for failure to report required quality data.

Email:

LTCHQRPReconsiderations
@cms.hhs.gov

CDC National Healthcare Safety Network (NHSN)

- Centers for Disease Control and Prevention (CDC) Quality Measures:
 - E.g., Catheter-Associated Urinary Tract Infections (CAUTIs).
- NHSN enrollment, reporting & data analysis.

Email:

NHSN@cdc.gov

Data Submission & Data Validation

- Accessing QIES (username & password).
- Data/record submissions.
- Submission/validation reports.
- Accessing CASPER.
- LASER.

Email:

Help@qtso.com
Phone: (800) 339-9313

LTCH Public Reporting

- Provider Preview reports.
- LTCH Compare website.
- LTCH data on Data.Medicare.gov.

Email:

LTCHPRQuestions
@cms.hhs.gov

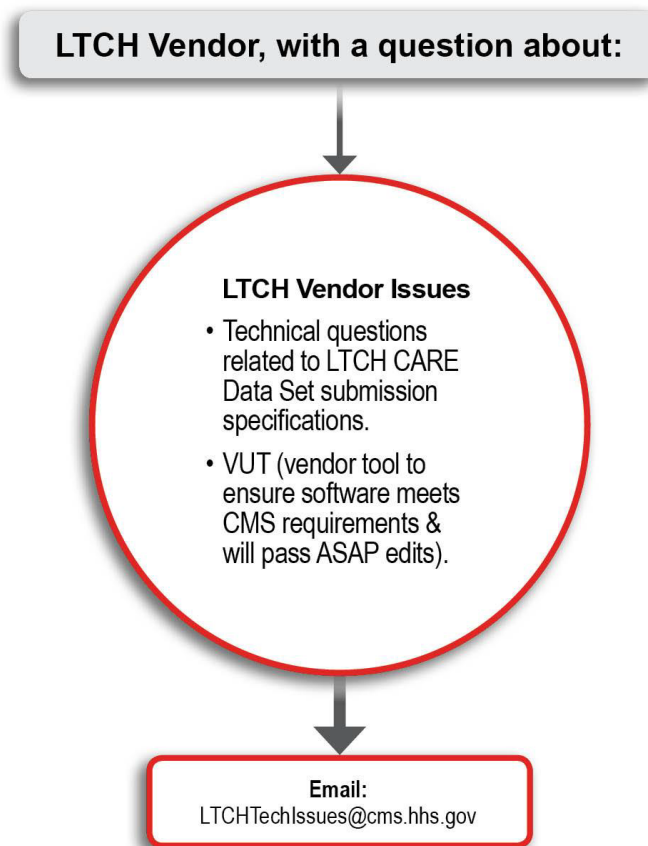
LTCH Payment Policy

- LTCH payment inquiries.
- Claims/billing.
- Eligibility & coverage requirements.

Email:

LTCHPPS@cms.hhs.gov

LTCH Help Desks (cont. 2)



LTCH QRP Help Desk

LTCH QRP

Email: LTCHQualityQuestions@cms.hhs.gov

Examples of issues:

- LTCH QRP requirements, including data collection and data submission timelines.
- LTCH CARE Data Set items.
- Calculation of QMs.
- LTCH QRP provider training materials.
- General QRP questions.

If you are unsure which Help Desk to use, email your question to the LTCH Quality Questions Help Desk, noted above, for triage.



CDC/NHSN Help Desk

Centers for Disease Control and Prevention (CDC) National Healthcare Safety Network (NHSN)

Email: NHSN@cdc.gov

Examples of issues:

- CDC QMs:
 - Catheter-Associated Urinary Tract Infection (CAUTI).
 - Central Line-Associated Blood Stream Infection.
 - Methicillin-resistant *Staphylococcus aureus* bacteremia.
 - *Clostridium difficile* infection.
 - Influenza Vaccination Coverage Among Healthcare Personnel.
 - Ventilator-Associated Event.
- NHSN enrollment, reporting, and data analysis.

LTCH QRP Reconsideration Process

Help Desk

LTCH QRP Reconsideration Process

Email: LTCHQRPreconsiderations@cms.hhs.gov

Examples of issues:

- How to file a request if you receive a letter of noncompliance from CMS.
- Deadline for filing a Request for Reconsideration.
- How to dispute a finding of noncompliance with the QRP reporting requirements that can lead to a 2-percent payment reduction.
- Requesting information about the LTCH QRP payment reduction for failure to report required quality data.



Data Submission and Data Validation Help Desk

Data Submission and Data Validation

Email: Help@qtso.com

Phone: (800) 339-9313

Examples of issues:

- Accessing Quality Improvement and Evaluation System (QIES) (username and password).
- Data/record submissions.
- Submission/validation reports.
- Accessing Certification And Survey Provider Enhanced Reports (CASPER).
- LASER (LTCH Assessment Submission Entry and Reporting).

LTCH Public Reporting Help Desk

LTCH Public Reporting Help Desk

Email: LTCHPRQuestions@cms.hhs.gov

Examples of issues:

- Measure data included in the Provider Preview Reports.
- LTCH Compare website:
<https://www.medicare.gov/longtermcarehospitalcompare/>.
- LTCH data available on <https://data.medicare.gov/>.

LTCH Payment Policy Help Desk

LTCH Payment Policy

Email: LTCHPPS@cms.hhs.gov

Examples of issues:

- LTCH payment inquiries.
- Claims/billing.
- Eligibility and coverage requirements.



LTCH Technical Issues Help Desk

LTCH Vendor Issues

Email: LTCHTechIssues@cms.hhs.gov

Examples of issues:

- Technical questions related to LTCH CARE Data Set data submission specifications.
- Validation Utility Tool: Vendor tool used to ensure software meets CMS requirements and will pass QIES Assessment Submission and Processing (ASAP) system edits.

MAC Contact Information

- Contact your Medicare Administrative Contractor (MAC) to correct or update your facility information.
 - MAC contact information is available at the following link:
<https://www.cms.gov/Research-Statistics-Data-and-Systems/Monitoring-Programs/Medicare-FFS-Compliance-Programs/Review-Contractor-Directory-Interactive-Map>.
 - Once on the website, select your State on the map or from the drop-down list below the map. Contact information for your State will then be displayed below the map.
- You can find your Regional Office (RO) at the following link:
<https://www.cms.gov/About-CMS/Agency-Information/RegionalOffices/index.html>.
 - PDFs of contact information for each RO are available.

LTCH QRP Data Collection and Submission Requirements

- For information about collection and submission of LTCH QM data using the LTCH CARE Data Set, please visit:
 - LTCH Quality Data Submission Deadlines web page:
<https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/LTCH-Quality-Reporting/LTCH-Quality-Reporting-Data-Submission-Deadlines.html>.



LTCH QRP Data Collection and Submission Requirements (cont.)

- For information about collection and submission of LTCH QM data using CDC's NHSN, please visit:
 - <http://www.cdc.gov/nhsn/LTACH/>.



LTCH QRP Compliance Information

- LTCH QRP requires that LTCHs submit QM data to CMS.
- Failure to submit the required quality data may result in a 2 percentage-point reduction in the LTCH's APU.



LTCH QRP Compliance Information (cont. 1)

- LTCHs must meet or exceed two separate data completeness thresholds:

1

- **80-percent threshold** for completion of quality measures data collected using the LTCH CARE Data Set and submitted through the QIES ASAP system.

2

- **100-percent threshold** for quality measures data collected and submitted using CDC's NHSN.

LTCH QRP Compliance Information (cont. 2)

- Technical Specifications for Reporting Assessment-Based Measures for the LTCH CARE Data Set.
 - Available on the LTCH Quality Reporting Measures Information web page: <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/LTCH-Quality-Reporting/LTCH-Quality-Reporting-Measures-Information.html>.
 - Also available in the LTCH QRP Manual as Appendix D.



LTCH QRP Compliance Information (cont. 3)

- The purpose of the tables is to list items necessary to calculate the LTCH QRP assessment-based measures, which will be used for compliance determination, and items used only for risk adjustment, which will not be used for compliance determination.
 - For detailed measure specifications, please refer to the LTCH Quality Measures User's Manual:
<https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/LTCH-Quality-Reporting/LTCH-Quality-Reporting-Measures-Information.html>.



LTCH QRP Compliance Information (cont. 4)

- Table 1 includes items that are necessary to calculate measures, including exclusion criteria, and items used for validation of the measures.
 - These items will be used for compliance determination.

Table 1. Items Necessary to Calculate the Measures, Including Exclusion Criteria, and Validation Items

LTCH CARE Data Set Item	Item Name	Assessment Type				Coding		LTCH QRP Assessment-Based Quality Measures					
		Admission	Planned Discharge	Unplanned Discharge	Expired	Allowable item values (all possible values accepted according to the item specifications)	Item values that may count against APU	Falls with Major Injury #0674	Pressure Ulcers New or Worsened #0678	Patient Influenza Vaccination #0680	Change in Mobility Vent Patients #2632	Application of Functional Assessment and Care Plan #2631	Functional Assessment and Care Plan #2631
B0100	Comatose	x	x			0,1 and dash "-"	dash "-"				x		x
BB0700	Expression of Ideas and Wants	x RA	x			4, 3, 2, 1, "A" (skip pattern) and dash "-"	dash "-"				RA (admission)		x
BB0800	Understanding Verbal Content	x RA	x			4, 3, 2, 1, "A" (skip pattern) and dash "-"	dash "-"				RA (admission)		x
C1610A	Signs and Symptoms of Delirium (from CAM ©): Acute Onset	x	x	x		0, 1, "A" (skip pattern) and dash "-"	dash "-"						x
C1610B	Signs and Symptoms of Delirium (from CAM ©): Fluctuating Course	x	x	x		0, 1, "A" (skip pattern) and dash "-"	dash "-"						x
C1610C	Signs and Symptoms of Delirium (from CAM ©): Inattention	x	x	x		0, 1, "A" (skip pattern) and dash "-"	dash "-"						x

LTCH QRP Compliance Information

(cont. 5)

- Table 2 includes only the items used for risk adjustment that are **not** included in Table 1.
- The items in this table are used in QM calculations as risk adjustors. Not reporting risk adjustor data means that the complexity of the LTCH's patients is not accounted for in the QM scores.

Table 2. Items Used as Risk Adjustors for One or More Quality Measures Not Included in Table 1

LTCH CARE Data Set Item	Item Name	Assessment Type				Coding		LTCH QRP Assessment-Based Quality Measures					
		Admission	Planned Discharge	Unplanned Discharge	Expired	Allowable item values (all possible values accepted according to the item specifications)	Item values that may count against APU	Falls with Major Injury #0674	Pressure Ulcers New or Worsened #0678	Patient Influenza Vaccination #0680	Change in Mobility Vent Patients #2632	Application of Functional Assessment and Care Plan #2631	Functional Assessment and Care Plan #2631
GG0100B	Prior Functioning: Everyday Activities – Indoor Mobility (Ambulation)	x				3, 2, 1, 8, 9 and dash "-"	Not applicable, item is not used for APU Determination				x		
GG0110A	Prior Device Use: Manual wheelchair	x				0,1 and dash "-"	Not applicable, item is not used for APU Determination				x		
GG0110B	Prior Device Use: Motorized wheelchair or scooter	x				0,1 and dash "-"	Not applicable, item is not used for APU Determination				x		
GG0110C	Prior Device Use: Mechanical Lift	x				0,1 and dash "-"	Not applicable, item is not used for APU Determination				x		
H0400	Bowel Continence	x				0, 1, 2, 3, 9 and dash "-"	Not applicable, item is not used for APU Determination		x				