



MAP Post-Acute Care and Long-Term Care Workgroup Off-Cycle Review Briefing Memo

Off-Cycle Review Process

HHS has asked MAP to perform “off-cycle” reviews of measures outside of the usual pre-rulemaking process in exceptional circumstances. As required under NQF’s contract with HHS, off-cycle reviews are on expedited timelines and must be accomplished within a 30 day period. HHS has asked MAP to perform an off-cycle review of four measures under consideration to implement provisions of the Improving Medicare Post-Acute Care Transformation Act (IMPACT) Act of 2014. The PAC/LTC Workgroup will meet via web meeting on February 9 to provide initial recommendations on the measures under consideration. There will be a nine-day public comment period on the measures and MAP’s initial recommendations. On February 27, the Coordinating Committee will convene to review the public comments and finalize MAP’s recommendations. The final recommendations will be submitted to HHS on March 6, 2015.

The Improving Medicare Post-Acute Care Transformation Act of 2014, “IMPACT Act of 2014”

The IMPACT Act is a bipartisan bill passed in September 2014. Under section 1899 (B) Title XVIII of the Social Security Act, post-acute care (PAC) providers are now required to report standardized patient assessment data as well as data on quality, resource use, and other measures. The IMPACT Act is an important step toward measurement alignment and shared accountability across the healthcare continuum, which MAP has emphasized over the past several years.

The IMPACT Act aims to enable CMS to compare quality across PAC settings, improve hospital and PAC discharge planning, and use standardized data to reform PAC payments, while ensuring beneficiaries have access to the most appropriate care. Recognizing that under the current system patients can receive post-acute care from four different settings, IMPACT requires standardized patient assessment data that will enable comparisons across skilled nursing facilities (SNFs), inpatient rehabilitation facilities (IRFs), long-term care hospitals (LTCHs), and home health agencies (HHAs).

The standardized quality measures will address several domains including functional status and changes in function, skin integrity and changes in skin integrity, medication reconciliation, incidence of major falls, and the accurate communication of health information and care preferences when a patient is transferred. The IMPACT Act also requires the implementation of measures to address resource use and efficiency such as total Medicare spending per beneficiary, discharge to community, and risk-adjusted hospitalization rates of potentially preventable admissions and readmissions.

Requested MAP Input

Through this off-cycle review, CMS has asked MAP to provide input on four measures under consideration to meet requirements of the IMPACT Act. While CMS will use the existing quality reporting programs to gather this data, MAP is asked to consider the requirements of the IMPACT Act

as an overlay to the existing programs. MAP is asked to provide input on four measures that could be potentially used across settings to provide standardized quality data.

Measures Under Consideration

Domain: Skin integrity and changes in skin integrity

Measure: E0678 Percent of Residents/Patients/Persons with Pressure Ulcers That Are New or Worsened

Preliminary analysis result: Support. The measure addresses an IMPACT domain and a MAP PAC/LTC core concept. The measure is NQF-endorsed for the SNF, IRF and LTCH settings (NQF #0678). The measure is currently in use in the IRF and LTCH quality reporting programs. In the 2015 MAP pre-rulemaking cycle, MAP conditionally supported X3704 Percent of Residents/Patients/Persons with Pressure Ulcers That Are New or Worsened for Home Health Quality Reporting.

| Program | Endorsed | In Use in CMS Program | Prior MAP Input |
|----------|----------|-----------------------|---|
| SNF QRP | X | | |
| LTCH QRP | X | X | Adopted for this program prior to MAP process |
| IRF QRP | X | X | Adopted for this program prior to MAP process |
| HHQRP | | | Conditionally support in 2014-2015 pre-rulemaking cycle |

Domain: Incidence of major falls

Measure: E0674 Percent of Residents/Patients/Persons Experiencing One or More Falls with Major Injury

Preliminary analysis result: Support. The measure addresses an IMPACT domain and a MAP PAC/LTC core concept. MAP provided a recommendation of conditional support for this measure for IRFs during the 2014 pre-rulemaking cycle. MAP recommended "support direction" for this measure for the LTCHQR program during the 2013 pre-rulemaking cycle. This measure is in use in the LTCHQR program.

| Program | Endorsed | In Use in CMS Program | Prior MAP Input |
|----------|----------|-----------------------|---|
| SNF QRP | X | | |
| LTCH QRP | | X | Support direction in 2012-2013 pre-rulemaking cycle. Measure should be specified and tested for the LTCH setting. |
| IRF QRP | | | |

| Program | Endorsed | In Use in CMS Program | Prior MAP Input |
|---------|----------|-----------------------|-----------------|
| HHQRP | | | |

Domain: All-condition risk-adjusted potentially preventable hospital readmission rates

Measure X4210: All-cause readmission to hospital from post-acute care

Preliminary analysis result: Support. The measure addresses an IMPACT domain and a MAP PAC/LTC core concept. NQF has recently endorsed these readmission measures for all four settings (IRF #2502; SNF #2510; LTCH #2512; HH #2380.) Skilled Nursing Facilities: In the 2015 pre-rulemaking cycle, MAP supported #2510 for the SNF Value-Based Purchasing Program. Measure #2510 was also recently finalized for use in MSSP in the 2015 PFS rule. The IRFQR, LTCHQR and HHQR programs currently include an all-cause unplanned readmission measure. The measures are all harmonized in the approach to capturing readmissions.

| Program | Endorsed | In Use in CMS Program | Prior MAP Input |
|----------|-------------------|-----------------------|---|
| SNF QRP | X (as NQF #2510) | | Support in 2014-2015 pre-rulemaking. This measure addresses a PAC/LTC Core Concept and is a required measure for the SNF value-based purchasing program under the Protecting Access to Medicare Act of 2014 (PAMA). MAP noted that this measure is well aligned with readmission measures used in other settings. |
| LTCH QRP | X (as NQF # 2512) | X | Support direction in 2012-2013 pre-rulemaking cycle. A consolidated, evidence-based readmission measure should be developed to promote alignment and shared responsibility across the care continuum and PAC/LTC settings. |
| IRF QRP | X (as NQF #2502) | X | Support direction in 2012-2013 pre-rulemaking cycle. A consolidated, evidence-based readmission measure should be developed to promote alignment and shared responsibility across the care continuum and PAC/LTC settings. |
| HHQRP | X (as NQF #2380) | X | Support in 2013-2014 pre-rulemaking cycle and support direction in 2012-2013 pre-rulemaking cycle. A consolidated, |

| Program | Endorsed | In Use in CMS Program | Prior MAP Input |
|---------|----------|-----------------------|---|
| | | | evidence-based readmission measure should be developed to promote alignment and shared responsibility across the care continuum and PAC/LTC settings. |

Domain: Functional status, cognitive function, and changing in function and cognitive function

Measure: S2631 Percent of Patients/Residents/Persons with an admission and discharge functional assessment and a care plan that addresses function

Preliminary analysis result: Conditional support. The measure addresses an IMPACT domain and a MAP PAC/LTC core concept. MAP reviewed this measure in its 2014 pre-rulemaking for LTCHQR program, and provided a recommendation of conditional support, pending NQF endorsement. This measure for LTCHs (2631) is currently under review by NQF by the Person and Family Centered Care Standing Committee. The Standing Committee has not reached consensus on recommending this measure due to concerns about the inclusion of the "plan of care" data elements for this measure. The Committee notes that the specifications indicate a discharge goal related to at least one of the assessment items rather than a plan. Concerns have also been raised about the evidence for a plan of care being related to outcomes. The Committee evaluation and recommendations will be posted for public comment very soon and NQF will make a final recommendation on endorsement in the Spring.

| Program | Endorsed | In Use in CMS Program | Prior MAP Input |
|----------|----------|-----------------------|--|
| SNF QRP | | | |
| LTCH QRP | | | Conditional support in 2014-2015 pre-rulemaking cycle. |
| IRF QRP | | | |
| HHQRP | | | |