



COVID-19 Public Reporting Tip Sheet

The purpose of the tip sheet is to help providers understand the Centers for Medicare & Medicaid Services’ (CMS) public reporting strategy for the SNF QRP to account for CMS quality data submissions that were optional and excepted from public reporting due to the COVID-19 public health emergency (PHE). The impact on CMS’ Nursing Home Compare website refreshes will also be outlined. This tip sheet serves as a companion document to the [SNF COVID-19 PHE Tip Sheet](#) published in July 2020, which provided practical guidance to address SNF quality data submissions after July 1, 2020, once the temporary SNF QRP exceptions from the COVID-19 PHE ended.



SNF QRP and Public Reporting on Nursing Home Compare

The SNF QRP was established under the Improving Medicare Post-Acute Care Transformation Act of 2014, which requires the Secretary to publicly report, on a CMS website, quality measures that relate to the care provided by SNFs across the country. The data for the quality of patient care measures is derived from two sources:

- Minimum Data Set (MDS)/Resident Assessment Instrument (RAI).
- Medicare fee-for-service claims.

Temporary SNF QRP Exceptions Due to the COVID-19 PHE

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

Figure 1. Quarters for Which Data Are Optional or Excepted

Quarter	MDS Data Submission
October 1, 2019–December 31, 2019 (Q4 2019)	Optional
January 1, 2020–March 31, 2020 (Q1 2020)	Excepted
April 1, 2020–June 30, 2020 (Q2 2020)	Excepted

These changes to the SNF QRP data submission requirements ended **on June 30, 2020**.

Impact of Data Exceptions on Public Reporting

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

The missing data for Q1 2020 and Q2 2020 will impact what is displayed on Nursing Home Compare; therefore, CMS developed a strategy to accommodate these excepted quarters of data.

CMS Strategy for Excepted Data

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

- January 2021
- April 2021
- July 2021
- October 2021

After the October 2020 refresh, CMS will hold the October 2020 data constant until we resume SNF Compare site refreshes in January 2022. Refreshes will then return to normal by the April 2022 refresh of the SNF Compare site. Figure 2 provides a summary.

Figure 2. Summary of Data Refreshes

Quarter Refresh	Nursing Home Compare (SNF QRP) MDS Assessment-Based Measures
October 2020	Normal refresh (includes Q4 2019 data) (inaugural posting of 6 new quality measures)
January 2021	Freeze
April 2021	Freeze
July 2021	Freeze
October 2021	Freeze
January 2022	Public reporting resumes*
April 2022	Normal refresh

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



The October 2020 refresh of Nursing Home Compare will include the inaugural release of six new quality measures (Changes in Skin Integrity Post-Acute Care: Pressure Ulcer/Injury, Drug Regimen Review Conducted with Follow-Up for Identified Issues – PAC SNF QRP, Application of IRF Functional Outcome Measure: Change in Self-Care (NQF #2633), Application of IRF Functional Outcome Measure: Change in Mobility (NQF #2634), Application of IRF Functional Outcome Measure: Discharge Self-Care Score (NQF #2635), and Application of IRF Functional Outcome Measure: Discharge Mobility Score (NQF #2636)).

Provider Reports

How will the data freeze affect provider reports?

- **Provider Preview Reports:**
 - The purpose of these reports is to give providers the opportunity to preview their MDS quality measure results prior to public display on Nursing Home Compare.
 - Subsequent to the October 2020 refresh, CMS will not issue provider preview reports for those refreshes that continue to display the constant data.
- **Review and Correct Report:**
 - The purpose of this report is for providers have access to quality measure data prior to the data correction deadline for public reporting. It includes data from the most current quarter “open” for data correction and data from the previous three quarters “closed” for data correction (frozen data).
 - There will be no data available (open) to correct for Q1 2020 and Q2 2020.
- **Quality Measure (QM) Reports:**
 - These reports give you confidential feedback on your agency’s performance. You can run these for any reporting period of your choice and they can include a full year of data if you request. They include both the patient-level data and the facility-level data.
 - Providers will be able to confidentially review any data from Q1 and Q2 2020 that they chose to submit.

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

When will the data return to normal?

The SNF QRP data on NH Compare site data will go back to its expected quarters of data displayed in April 2022.



Data Submission On or After July 1, 2020

Since the temporary exception for SNF quality reporting requirements ended on June 30, 2020, **starting on July 1, 2020**, SNFs are expected to resume timely quality data collection and submission of measure and patient assessment data for the MDS/RAI. There are no submission requirements for Medicare claims data.

How will MDS submissions after July 1, 2020, be impacted by data that was excepted due to the COVID-19 PHE?

- CMS is aware that discharges submitted on or after July 1, 2020, may not have a matching MDS admission record, providing the admission occurred in Q1 or Q2 2020, as CMS excepted quality data submissions during this timeframe. This may cause a warning error during the submission process.

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

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

- CMS will make adjustments on its end to accommodate any records with missing admissions.
- These mismatched sets of records will not be counted or included in your SNF data calculations for Nursing Home Compare.

Resources

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



- **For more information about public reporting for SNFs, visit:**
<https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/NursingHomeQualityInits/Skilled-Nursing-Facility-Quality-Reporting-Program/SNF-Quality-Reporting-Program-Overview>.
- **For FY 20201 SNF QRP reporting year requirements:**
<https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/NursingHomeQualityInits/Downloads/SNF-QRP-Requirements-for-the-Fiscal-Year-FY2021-Program-Year+.pdf>.

Email questions to the SNF Help Desk:
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