

December 14, 2016

Long-Term Care Hospital Compare Website Now Available

Today, as part of our continuing commitment to greater data transparency, CMS unveiled the new *Compare* website for Long-Term Care Hospitals (LTCHs).

This new tool takes reported data and puts it into a format that can be used more readily by the public to get a snapshot of the quality of care each facility provides. For instance, this tool will help families compare some key quality metrics, such as pressure ulcers and readmissions, for over 1,420 LTCHs across the nation.

Specifically, the following quality measures will be reported on the new *Compare* site:

- Percent of Residents or Patients with Pressure Ulcers that are New or Worsened (Short Stay) (National Quality Forum #0678)
- All-Cause Unplanned Readmission Measure for 30 Days Post-Discharge From Inpatient Rehabilitation Facilities (National Quality Forum #2502)

This website reflects current industry best practices for consumer-facing websites and will be optimized for mobile use. Visit <https://www.medicare.gov/longtermcarehospitalcompare> to view the new Compare site.

For more information, visit the [LTCH Quality Public Reporting](#) webpage and the [CMS Newsroom](#).

December 14, 2016

IRF and LTCH Quality Reporting Program Call: Audio Recording and Transcript Now Available

An [audio recording](#) and [transcript](#) are available for the [December 1](#) call on Inpatient Rehabilitation Facility (IRF) and Long-Term Care Hospital (LTCH) Quality Measure Reports. Find out how to get aggregate performance for the current quarter or past three quarters; find reporting errors that may affect your performance; and interpret the information.

December 12, 2016

LTCH QRP Provider Preview Reports Now Available

LTCHs now have the opportunity to review their performance data on each quality measure based on Quarter 2 -2015 to Quarter 1 - 2016 data prior to public display on IRF Compare in spring 2017.

Providers have 30 days (December 11, 2016 through January 10, 2017) to review their performance data. As finalized in the FY 2017 IPPS/LTCH PPS final rule, corrections to the underlying data will not be permitted during this time; however, LTCHs may request CMS review of the data contained within their Preview Report, should they believe it to be inaccurate. For more information and directions on how to retrieve these reports, visit the [LTCH Quality Public Reporting](#) webpage.

November 30, 2016

Written Transcript and Audio Recording from NHSN - Transition to the 2015 Rebaseline Guidance for IRF and LTCHs Now Available

The written transcript & audio file from the Wednesday, November 16, 2016 webinar has been posted. This webinar explained the new healthcare-associated infection (HAI) models, as they relate to Long-Term Care Hospitals (LTCHs) and Inpatient Rehabilitation Facilities (IRFs), and discussed the reason HAI data contained within IRF and LTCH Preview Reports may not align with the data in NHSN for the same target period.

Visit the [IRF Quality Public Reporting](#) and [LTCH Quality Public Reporting](#) webpages for the written transcript and audio recording.

November 18, 2016

IMPACT Act Cross-Setting Quality Measure: Transfer of Health Information and Care Preferences Comments Due December 11

Public comments are due December 11 on a cross-setting post-acute care measure under the Improving Medicare Post-Acute Care Transformation Act of 2014 ([IMPACT Act](#)). In alignment with the CMS and National Quality Strategy (NQS) objectives and goals, the purpose of this project is to develop, maintain, re-evaluate, and implement measures reflective of quality care for PAC settings to support CMS quality missions including the LTCH QRP, IRF QRP, SNF QRP and HH QRP.

CMS seeks to obtain input on the development of the following cross-setting quality measures for use in post-acute care settings:

1. Transfer of Information at Post-Acute Care Admission, Start, or Resumption of Care from Other Providers/Settings
2. Transfer of Information at Post-Acute Care Discharge or End of Care to Other Providers/Settings

Visit the [Public Comment](#) webpage for more information.

November 16, 2016

Extraordinary Circumstances Extension / Exception (ECE) due to Hurricane Matthew

CMS intends to grant quality reporting data submission exceptions to LTCH Medicare providers adversely affected by the devastating impact of Hurricane Matthew. CMS is exercising its authority to grant exceptions for data submission requirements for the LTCH Quality Reporting Programs for providers located within the Federal Emergency Management Agency (FEMA)-designated "major disaster" counties of Georgia, Florida, North Carolina, and South Carolina. For further information, visit the [LTCH QR Reconsiderations and Exceptions and Extensions](#) webpage.

November 15, 2016

The presentation for the Wednesday, November 16, 2016 NHSN: Transition to the 2015 Rebaseline Guidance for IRF and LTCHs Webinar has been [posted](#). During this webinar, CDC explains the new HAI models, as they relate to LTCHs and Inpatient Rehabilitation Facilities IRFs, and will discuss the reason HAI data contained within IRF and LTCH Preview Reports may not align with the data in NHSN for the same target period.

November 03, 2016

Report Retention Change for LTCH Provider Reports

The retention time period for the LTCH Provider reports will change from 730 days to 60 days. Effective December 1, 2016, the reports requested from the LTCH Provider report category in the CASPER Reporting application will only be stored 60 days. Any LTCH Provider reports requested 60 days or more prior to December 1, 2016 will be permanently deleted from your CASPER folder. If you wish to retain these reports, you may print or save a copy prior to the report retention time period change. Any reports not printed or saved prior to the retention period time change will be permanently deleted. If you lose a copy that you'd wished to retain, you may recreate these reports on demand from the LTCH Provider report category in the CASPER Reporting application.

For a list of affected reports in the LTCH Provider report category or for detailed instructions on printing or saving CASPER reports, please refer to the CASPER Reporting User's Guide. The CASPER Reporting User's Guide is available on the 'Welcome to the CMS QIES Systems for Providers' web page and on the LTCH User Guides and Training page on the QTSO website (<https://www.qtsso.com/lchtrain.html>).

November 03, 2016

IRF and LTCH Quality Measure Report MLN Connects® Call

Thursday, December 1 from 1:30 to 3 pm ET

To register or for more information, visit [MLN Connects Event Registration](#).

CMS experts present on the soon to be released Certification and Survey Provider Enhanced Reports (CASPER) Quality Measure (QM) reports for the Inpatient Rehabilitation Facility (IRF) and Long-Term Care Hospital (LTCH) Quality Reporting Programs. Find out how to get aggregate performance for the current quarter or past three quarters, find reporting errors that may affect your performance, and interpret the information.

October 28, 2016

Webinar: NHSN - Transition to the 2015 Rebaseline Guidance for IRF and LTCHs

When: Wednesday, November 16, 2016

Time: 1:00 PM- 2:00 PM Eastern Time

Click [here](#) to register.

During this webinar, the CDC explains the new healthcare-associated infection (HAI) models, as they relate to Long-Term Care Hospitals (LTCHs) and Inpatient Rehabilitation Facilities (IRFs), and discuss the reason HAI data contained within IRF and LTCH Preview Reports may not align with the data in NHSN for the same target period.

For more information and materials for this webinar, visit the [IRF Quality Public Reporting](#) and [LTCH Quality Public Reporting](#) webpages.

October 26, 2016

CMS 2016 Quality Conference- Baltimore, MD

December 13-15

Join more than nearly 2,000 thought leaders in American health care quality improvement at the CMS 2016 Quality Conference. This conference will explore how patients, advocates, providers, researchers, and the many leaders in health care quality improvement can develop and spread solutions to some of America's

most pervasive health system challenges. The 2016 CMS Quality Conference will be the most expansive yet, with both new and existing participants from programs across CMS, HHS, and community stakeholders. The collaborative format of the conference, and strong focus on data-proven outcomes is underscored by this year's conference theme, Aligning for Innovation and Outcomes.

For more information and to register, visit the [CMS Quality Conference](#) webpage.

October 25, 2016

LTCH QRP APU FY 2017: Successful Facilities

As stated in the [FY 2016 IPPS/LTCH PPS Final Rule](#), CMS has published a list of LTCHs who successfully met the reporting requirements after all reconsideration requests have been processed. This report will be updated on an annual basis. View the list on the [LTCH Quality Reporting Data Submission Deadlines](#) webpage.

October 25, 2016

LTCH Quality Reporting Program Data Submission Deadline: November 15

The submission deadline for the Long-Term Care Hospital (LTCH) Quality Reporting Program (QRP) is approaching. LTCH CARE Data set assessment data, as well as data submitted via the Center for Disease Control and Prevention's (CDC's) NHSN for April-June (Q2) of calendar year (CY) 2016 are due with this submission deadline. **All data must be submitted no later than 11:59 p.m. Pacific Standard Time on November 15, 2016.**

The list of measures required for this deadline can be found under "What are the measures & deadlines for the FY 2018 payment determination?" on the [LTCH Quality Reporting Data Submission Deadlines page](#) on the CMS LTCH QRP website. **Please note: four new measures are due with the November 15, 2016 deadline.** These include:

- NQF #0674 – Application of Percent of Residents Experiencing One or More Falls with Major Injury (Long Stay)
- NQF #2631 – Percent of Long-Term Care Hospital Patients with an Admission and Discharge Functional Assessment and a Care Plan That Addresses Function
- NQF #2631 – Application of Percent of Long-Term Care Hospital Patients with an Admission and Discharge Functional Assessment and a Care Plan That Addresses Function

- NQF #2632 – Functional Outcome Measure: Change in Mobility Among Long-Term Care Hospital Patients Requiring Ventilator Support

As a reminder, it is recommended that providers run the applicable [CMS CASPER validation reports](#) and [NHSN output reports](#) prior to each quarterly reporting deadline to ensure that all required data has been submitted. Providers are also encouraged to verify all facility information prior to submission, including their CCN and facility name. Only successful submissions will count toward your Annual Increase Factor requirement.

For information on training resources available to assist with successful submission, visit the [LTCH Quality Reporting Training website](#).

October 20, 2016

LTCH Question and Answer (Q+A) Document from August 2016 Training Now Available

The question and answer (Q+A) document is now available in the “Downloads” portion of the [LTCH Quality Reporting Training](#) webpage. The Q+A document contains participant questions from the August 11, 2016, Chicago in-person training.

October 20, 2016

LTCH Public Reporting Update - CDC & NHSN Rebaseline Guidance

As noted in the Rebaseline Timeline posted in the [June 2016 NHSN Newsletter](#), the CDC submitted standardized infection ratios (SIRs) to CMS using the new 2015 baseline starting with 2016 Q1 data. The LTCH QRP Preview Reports provided on September 1, 2016 contained CY2015 healthcare-associated infection (HAI) SIRs in accordance with the new NHSN baselines based on nationally collected data from 2015. However, providers were unable to use NHSN to verify the accuracy of the HAI data contained within their preview reports for the Compare sites during the 30-day preview period established for this purpose. Consequently, CMS will begin publically displaying the NHSN HAI data on the Compare sites for IRFs and LTCHs in the next quarterly refresh in spring 2017 instead of in fall 2016.

For further information and to assist LTCHs in understanding the use of the rebaselined data and how to monitor their quality data using the new baseline, we have posted a document titled **IRF and LTCH Public Reporting Update - CDC & NHSN Rebaseline Guidance**. This document is accessible by selecting the link with this title under the **Downloads** section of the [LTCH Quality Public Reporting webpage](#).

September 30, 2016

August 11 LTCH Quality Reporting Program Provider Training: Post-Training Materials Available

Post-training materials from the August 11, 2016, LTCH QRP Provider Training in Chicago, IL, are now available under the download section of the [LTCH QRP Training webpage](#).

Materials Available:

- PowerPoint presentations
- Answers to polling scenarios
- Material used to facilitate the integrated case study and other classroom activities.

A playlist with recordings of each presentation is posted on [YouTube](#). Also included in the download section is the IMPACT Act and Assessment Data Element Standardization and Interoperability presentation. Click [HERE](#) to access the video.

September 1, 2016

LTCH Data Specs Effective April 1, 2017

An updated version of the LTCH data submission specifications (v2.01.0) is now available. This final version of the specifications will go into effect on April 1, 2017. Note that there were no changes from the previously posted draft version of these specifications. These files are available in the Downloads section of the [LTCH Quality Reporting Technical Information](#) webpage.

September 1, 2016

LTCH QRP Public Reporting Preview Reports Now Available

LTCH Preview Reports are now available until September 30, 2016. Each LTCH has the opportunity to review their performance data on each quality measure prior to public display on LTCH Compare. Directions on how to retrieve these reports can be found in the Download section of the [LTCH Quality Public Reporting](#) webpage.

LTCHs have 30 days to review their performance data. As finalized in the FY 2017 LTCH PPS final rule, corrections to the underlying data will not be permitted during this time; however, LTCHs may request CMS review of the data contained within their Preview Report, should they believe it to be inaccurate. All such requests must be made during the 30-day preview period.

August 25, 2016

Preview Reports – Available September 1, 2016

Prior to the release of data on LTCH Compare, LTCHs will be given the opportunity to review data during a 30-day preview period using their provider Preview Reports, which CMS will auto-generate and issue to providers via the CMS CASPER reporting application. The reports are available from September 1- September 30, 2016.

Instructions on how to access the reports are available in the Download section of the [LTCH Quality Public Reporting](#) webpage.

August 19, 2016

Presentation for August 23 IRF/LTCH Quality Public Reporting Webinar Available

The presentation for the upcoming IRF/LTCH Quality Public Reporting webinar on August 23 is now available under the download section of the [LTCH Quality Public Reporting](#) webpage.

Visit the [LTCH Quality Public Reporting](#) webpage for more information and to register.

August 12, 2016

IRF & LTCH Quality Reporting Program: Public Reporting Webinar

When: Tuesday, August 23, 2016

Time: 1:30 PM - 3:00 PM Eastern Time

Click [here](#) to register

During this webinar, CMS will discuss the Preview Reports for IRFs and LTCHs that will be available to providers in the near future. Participants will gain an understanding of how to access these reports, how to interpret the contents of these reports, and what to do if they believe their report contains an error.

For more information:

- [LTCH Quality Reporting Training](#) webpage
- LTCH Public Reporting helpdesk: LTCHPRquestions@cms.hhs.gov

August 05, 2016

August 11 LTCH QRP Provider Training: Training Materials Available

Training materials for the 1-day LTCH QRP Provider Training event on August 11, 2016, in Chicago, IL, are now available under the download section of the [LTCH Quality Reporting Training](#) webpage. The URL to access the webcast of next week's training is as follows: <http://breasiaproductions.com/bptv/>. Programming will start at 8:00 a.m. CDT and end at 5:00 p.m. CDT. Please note: The title of the event on the page hosting the webcast will not be updated until the day of the event.

Visit the [LTCH Quality Reporting Training](#) webpage for more information and to register and/or find out how to participate electronically.

July 29, 2016

Specifications for the measures finalized for adoption into the LTCH QRP through the FY 2017 IPPS/LTCH PPS Final Rule are posted. The specifications provide detailed information on the following adopted measures: Medicare Spending per Beneficiary-Post Acute Care LTCH Quality Reporting Program, Discharge to Community-Post Acute Care LTCH Quality Reporting Program, Potentially Preventable 30-Day Post Discharge Readmission Measure for LTCH Quality Reporting Program, and Drug Regimen Review Conducted with Follow-Up for Identified Issues-Post Acute Care LTCH Quality Reporting Program.

The measure specifications can be found in the [Downloads](#) section.

July 20, 2016

LTCH Quality Reporting Program: Non-Compliance Letters

Long-Term Care Hospitals (LTCHs) have been notified if they were determined to be non-compliant with LTCH Quality Reporting Program (QRP) requirements for CY 2015, which will affect their FY 2017 APU. Non-compliance notifications were placed into provider's CASPER folders in QIES on July 20, 2016. Providers that receive a letter of non-compliance may submit a request for reconsideration to CMS via email no later than 11:59pm PST, August 19, 2016. If you receive a notice of non-compliance and would like to request a reconsideration, see the instructions in your notification letter and on the [LTCH Quality Reporting Reconsideration and Exception & Extension](#) webpage. This webpage also lists contact information for those provider that have questions about their reports.

July 19, 2016

LTCH Quality Reporting Program Provider Training: Registration Open

CMS is hosting a 1-day training event on Thursday, August 11, 2016 on Long-Term Care Hospital (LTCH) Quality Reporting Program (QRP) in addition to offering opportunities to register for an IMPACT Act and Assessment Data Element Standardization and Interoperability presentation on the afternoon of Wednesday, August 10, and participate in a Meet and Greet with presenters and CMS staff that evening following the IMPACT Act presentation. These events will be held in Chicago, Illinois.

Visit the [LTCH Quality Reporting Training](#) webpage for more information and to register for both the IMPACT Act and Assessment Data Element Standardization and Interoperability presentation and the LTCH QRP Provider Training.

July 15, 2016

LTCH Quality Reporting Program Data Submission Deadline: August 15

Long-Term Care Hospital (LTCH) Quality Reporting Program (QRP) NHSN data for Q1 of calendar year (CY) 2016 and LTCH CARE data for Q1 of CY 2016, including NQF #0680 – Percent of Residents or Patients Who Were Assessed and Appropriately Given the Seasonal Influenza Vaccine (Short Stay), must be submitted on August 15, 2016. For additional information, including a list of quality measure data that is due, visit the [LTCH Quality Reporting Data Submissions Deadlines](#) webpage.