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National Provider Call

Quality Measures and the IMPACT Act

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Agenda

- Health Care Quality and the Measure Lifecycle
- Stakeholders and the Measure Lifecycle
- The IMPACT Act: Quality Measures
- Question & Answer Session
- General Resources

Health Care Quality and Measure Lifecycle

National Quality Strategy

- **Aims**

- Better Care
- Healthier People and Communities
- Smarter spending

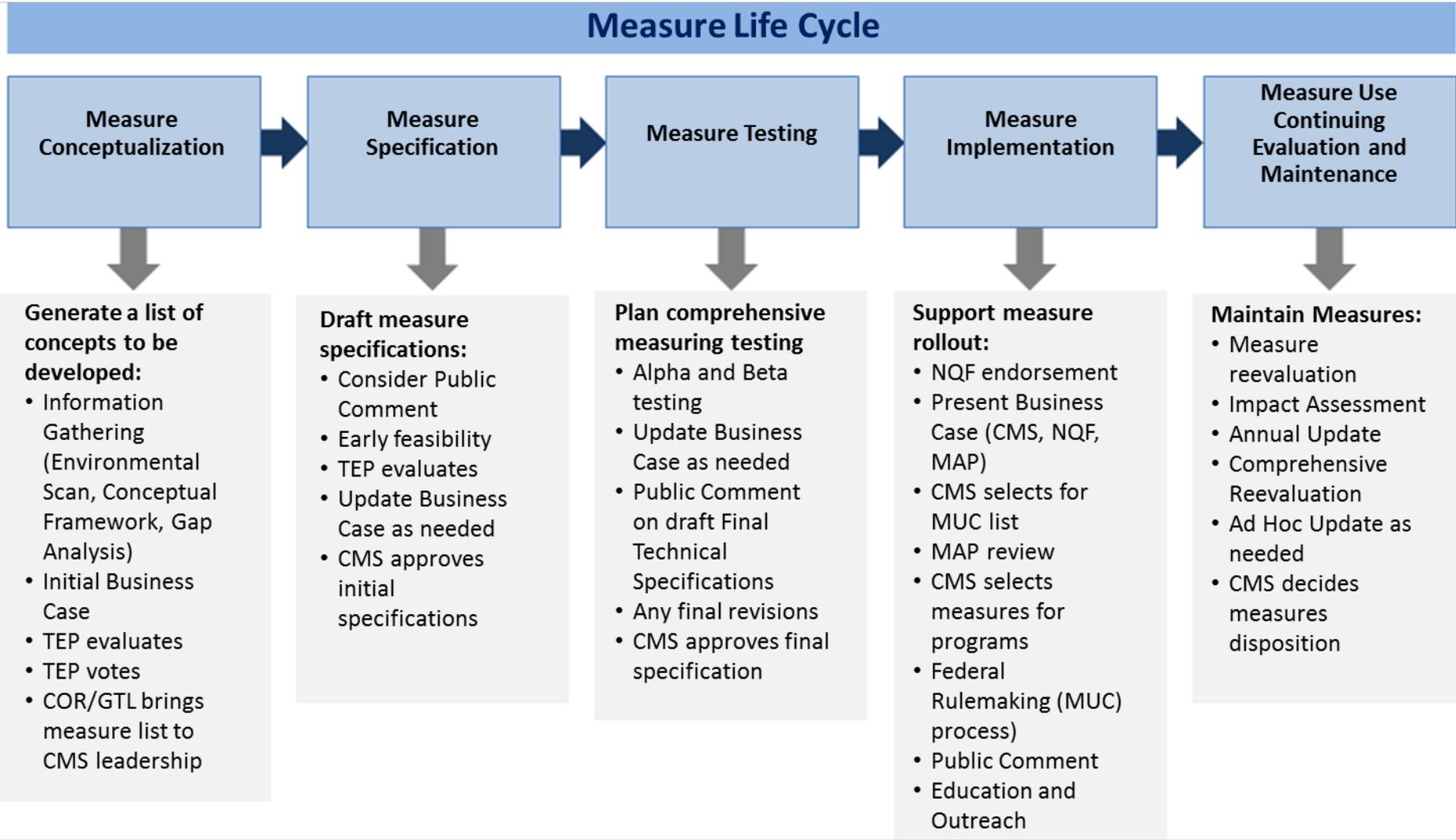
- **Priorities**

- Making care safer by **reducing harm** caused in the delivery of care
- Ensuring that each person and his or her family members are **engaged** in their care
- Promoting **effective communication and coordination** of care
- Promoting the most **effective prevention and treatment practices** for leading causes of mortality, starting with cardiovascular disease
- Working with **communities** to promote wide use of best practices to enable healthy living
- Making quality care more **affordable for individuals, families, employers, and governments** by developing and spreading new healthcare delivery models.

CMS Quality Strategy

- **Reduce Harm**
 - Culture of safety
 - Inappropriate and unnecessary care
- **Effective communication and coordination**
 - Admissions and readmissions
 - Transitions
 - Healthcare system navigation
- **Promote Healthy Living**
 - Partnership with various government levels
 - Access improvement
 - Evidence-based interventions
 - Social Services support
- **Person and Family Engagement**
 - Preferences for care
 - Improved experience
- **Prevention and Treatment of Chronic Disease**
 - Screening and prevention services
 - Prevention of heart attacks and strokes
 - Multiple chronic conditions
 - Behavioral health
 - Perinatal outcomes
- **Affordable care**
 - Payment systems
 - Cost analysis

Measure Life Cycle



Stakeholders and the Measure Lifecycle

Stakeholder Input

Key for accountability, quality improvement, and usefulness to consumers

- Adds evidence to scientific applicability
- Helps guide NQS Quality Measure (QM) planning
- Act as subject matter experts for QM and program work
- Develop measures that matter

Established many posting processes to solicit input from the public and stakeholders throughout the measure development, selection, implementation, and maintenance cycle:

- Calls for nominations for Technical Expert Panels (TEP)
- Proposed or candidate measures for public comment
- Candidate measures by the National Quality Forum (NQF) on their website
- Measures under consideration (MUC) for public comment as part of the Measure Applications Partnership (MAP)

Patient Engagement and Participation

Assess the quality of healthcare in ways that are meaningful and that focus on the patient

- Proactively engage patients in measure development
- Patients and caregivers, not representative organizations
 - Identify important issues and opportunities

Distinguish between a patient's engagement in their care vs. engagement in quality measure development

- Use the Patient Activation Measure to evaluate engagement vs. design of the measure

Consider steps to involve patient fully in the TEP

- Pre-meeting
- Education sessions
- Experienced moderator

Stakeholder Engagement Opportunities

Activity	Date
Home Health, Hospice & DME Open Door Forum (ODF)	7/13/2016
Skilled Nursing Facilities/Long Term Care ODF	7/14/2016
Hospital/LTCH/Quality Initiative ODF	7/19/2016
IRF Quality Measure Provider Training	8/9/2016 - 8/10/2016
LTCH Quality Measure Provider Training	8/11/2016
SNF Quality Reporting Program Training	8/24/2016
Home Health, Hospice & DME ODF	8/24/2016
Skilled Nursing Facilities/Long Term Care ODF	8/25/2016
Hospital/Quality Initiative ODF	8/30/2016
IMPACT Act National Provider Call - 1 Hour	8/31/2016
IMPACT Act and Coordinated/Improved Care Delivery Special Open Door Forum	9/15/2016
Home Health, Hospice & DME ODF	10/5/2016
Skilled Nursing Facilities/Long Term Care ODF	10/6/2016
Hospital/Quality Initiative	10/18/2016
IMPACT Act National Provider Call - 1.5 Hour	10/13/2016
Home Health, Hospice & DME ODF	11/16/2016
Skilled Nursing Facilities/Long Term Care ODF	11/17/2016
IMPACT Act National Provider Call - 1 Hour	12/08/2016

The IMPACT Act: Quality Measures

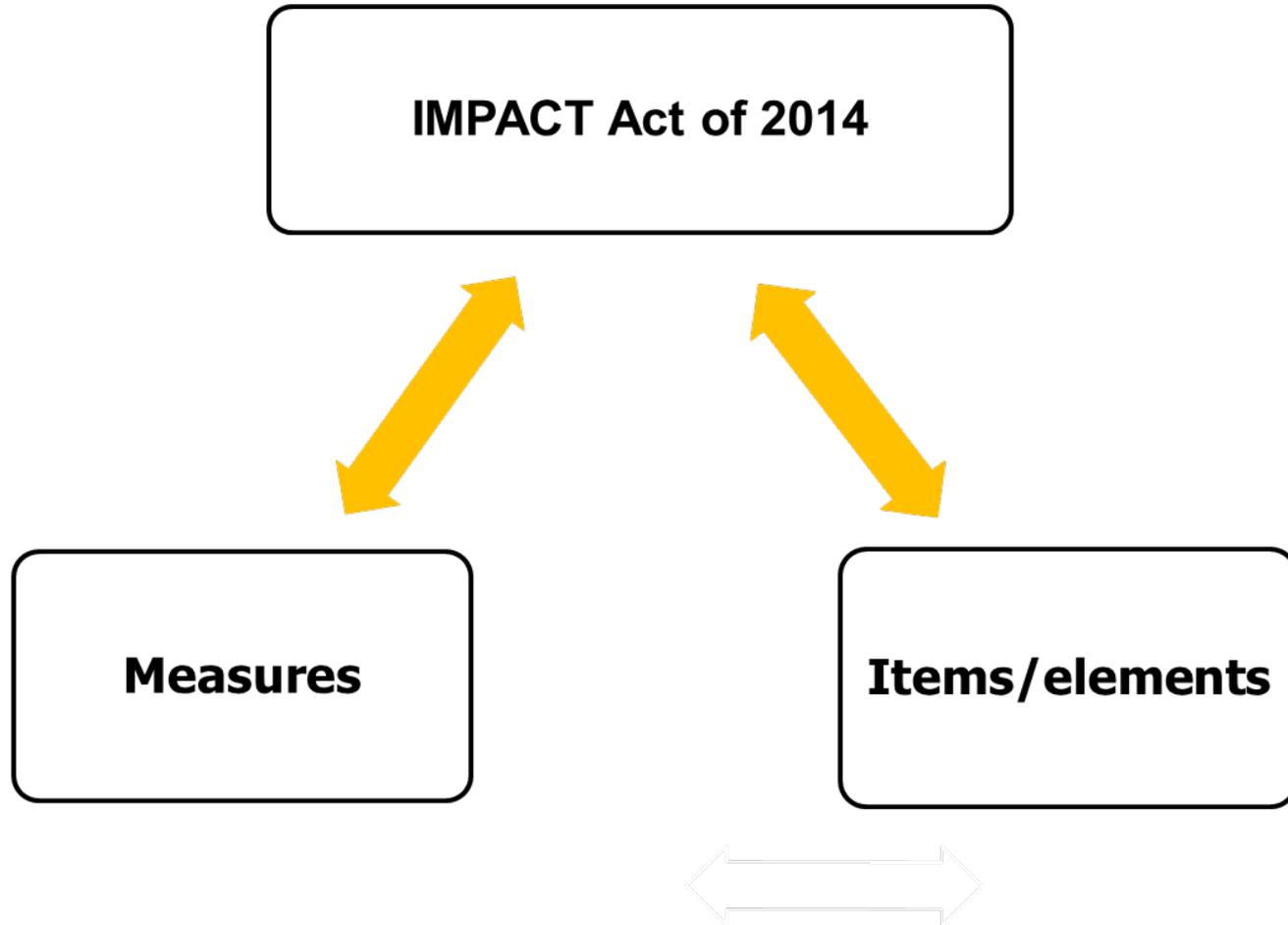
Improving Medicare Post-Acute Care Transformation (IMPACT) Act of 2014

Bipartisan bill passed on September 18, 2014 and signed into law by President Obama on October 6, 2014

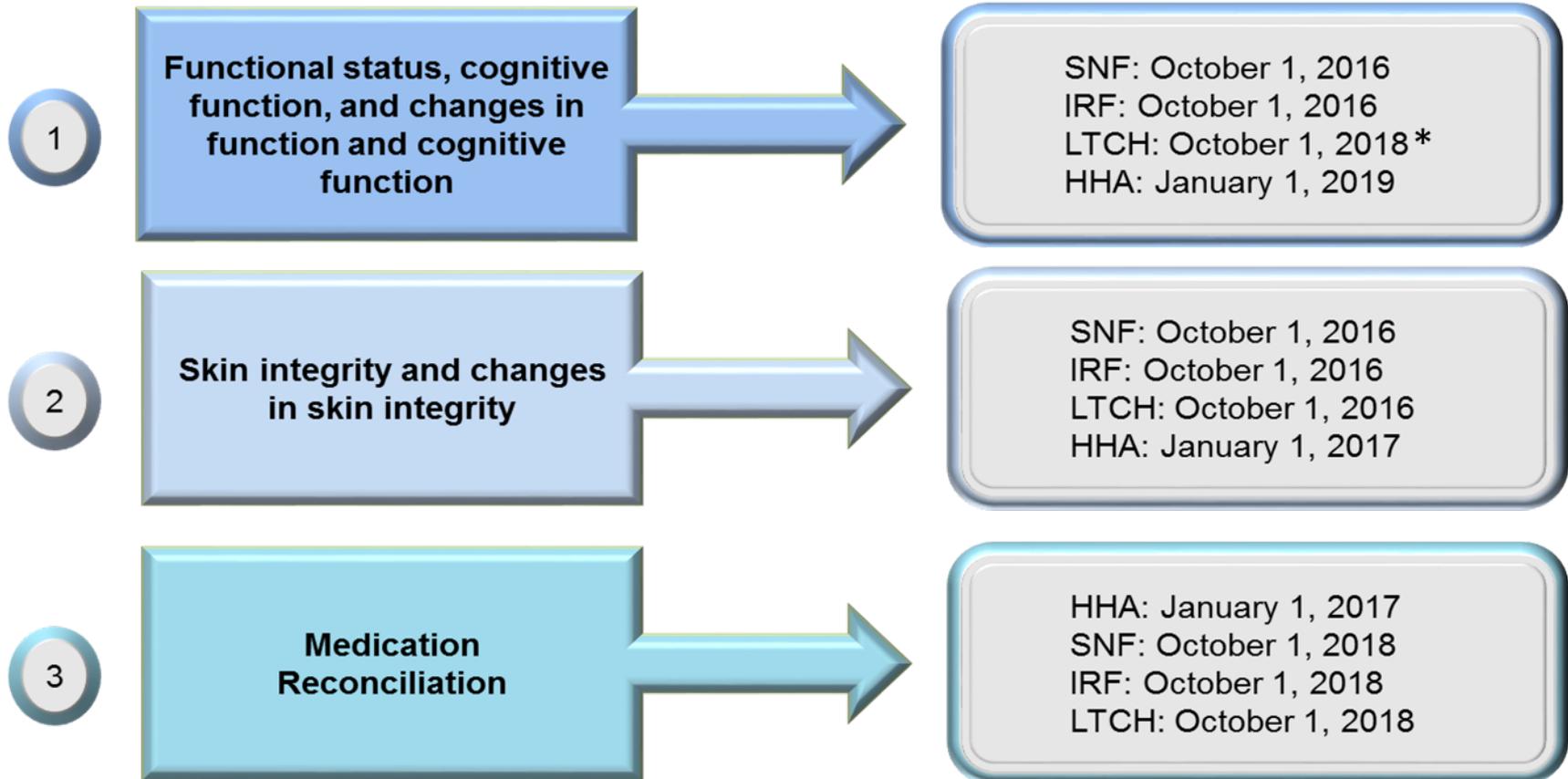
Requires Standardized and Interoperable Patient Assessment Data that will enable:

- Data Element uniformity
- Quality care and improved outcomes
- Comparison of quality and data across post-acute care settings
- Improved discharge planning
- Exchangeability of data
- Coordinated care

IMPACT Act: Standardizing

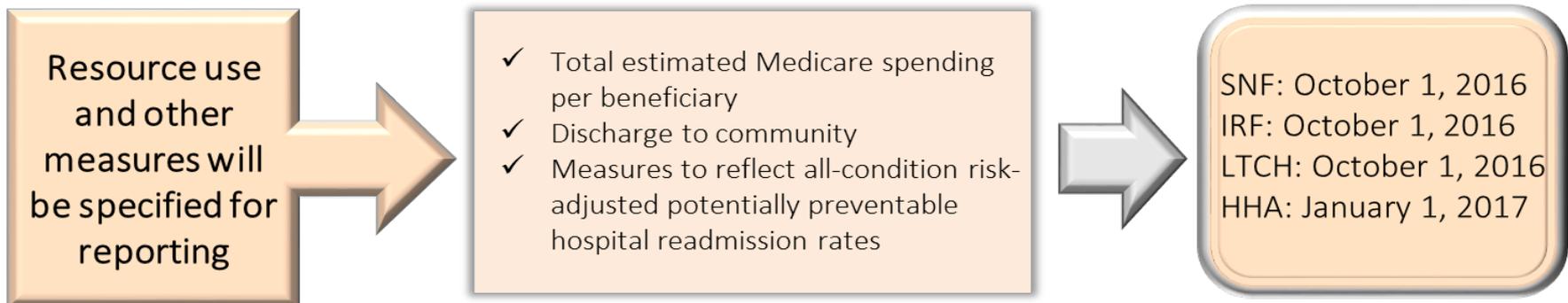
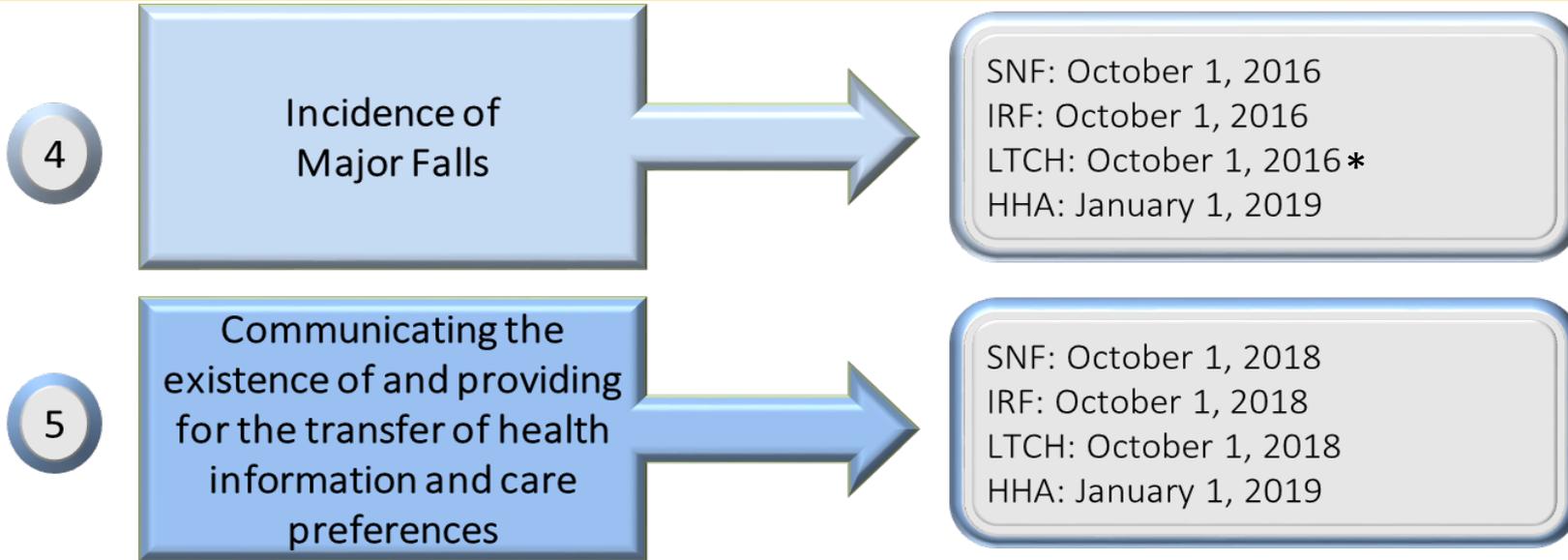


IMPACT Act: Quality Measure Domains and Timelines



*The IMPACT Act requires reporting on quality measures 'not later than the specified application dates' listed above. Data collection for the LTCH QRP measures addressing functional status began in April 1, 2016, concurrent with the LTCH CARE Data Set V 3.00 release.

IMPACT Act: Quality Measure Domains and Timelines



*The IMPACT Act requires reporting on quality measures 'not later than the specified application dates' listed above. Data collection for the LTCH QRP measures addressing incidence of major falls began in April 1, 2016, concurrent with the LTCH CARE Data Set V 3.00 release.

IMPACT Act:

Measurement Implementation Phases

1) Measurement Implementation Phases

(A) Initial Implementation Phase –

(i) Measure specification

(ii) Data collection

(B) Second Implementation Phase –

Feedback reports to PAC providers

(C) Third Implementation Phase –

Public reporting of PAC providers' performance

2) Consensus-based Entity Endorsement Evaluation

3) Treatment of Application of Pre-Rulemaking Process

FY/CY 2017 Notice of Proposed Rule Making (NPRM)

FY 2017 Notice of Proposed Rule Making: Quality Reporting Program (QRP)	Public Inspection Display Date	Federal Register Publication Date	60-day Comment Period Ends
LTCH QRP	04-18-2016 FY 2017 LTCH QRP NPRM	04-27-2016 FY 2017 LTCH QRP NPRM FR Version	06-17-2016
IRF QRP	04-21-2016 FY 2017 IRF QRP NPRM	04-25-2016 FY 2017 IRF QRP NPRM FR Version	06-20-2016
SNF QRP	04-21-2016 FY 2017 SNF QRP NPRM	04-25-2016 FY 2017 SNF QRP NPRM FR version	06-20-2016
HH QRP	06-27-2016 FY 2017 HH QRP NPRM	07-05-2016	08-26-2016

Measures Mapped to IMPACT Act Domains for LTCH QRP- Adopted Measures (FY 2016 IPPS LTCH Final Rule)

Domain	NQF ID	Measure Title	Reporting and Payment Timelines	Confidential Feedback Reports & Public Reporting
Skin Integrity	#0678	Percent of Residents with Pressure Ulcers That are New or Worsened (Short-Stay)	Initial Reporting January–December 2016 for fiscal year (FY) 2018 payment adjustment followed by CY reporting for that of subsequent FYs	Performance data will inform confidential feedback reports one year after the specified application date of assessment based measures. Public reporting must begin NLT two years after the specified application date of such measures
Incidence of Major Falls	Application of #0674	Percent of Residents Experiencing One or More Falls with Major Injury (Long Stay)	Initial Reporting April–December 2016 for fiscal year (FY) 2018 payment adjustment followed by CY reporting for that of subsequent FYs	
Function	Application of #2631	Percent of LTCH Patients with an Admission and Discharge Functional Assessment & a Care Plan That Addresses Function		

Measures Mapped to IMPACT Act Domains for LTCH QRP- Proposed Measures (FY 2017 IPPS LTCH Published NPRM)

Domain	NQF ID	Measure Title	Reporting and Payment Timelines	Confidential Feedback Reports & Public Reporting
Resource Use and other Measures	Not Submitted for Endorsement	<ul style="list-style-type: none"> Total Estimated Medicare Spending Per Beneficiary (MSPB)-PAC LTCH QRP Discharge to Community-PAC LTCH QRP Potentially Preventable 30-Day Post-Discharge Readmission Measure for LTCH QRP 	Claims-based data will be used for payment adjustments for fiscal year (FY) 2018 payment adjustment and subsequent years	Two years of claims-based data will be used to inform confidential feedback reports beginning with CY 2015 and CY 2016, and public reporting beginning with CYs 2016 and 2017
Medication Reconciliation	Not Submitted for Endorsement	Drug Regimen Review Conducted with Follow-Up for Identified Issues- Post Acute Care LTCH QRP	Initial Reporting April–December 2018 for fiscal year (FY) 2020 payment adjustment followed by CY reporting for that of subsequent FYs	Performance data will inform confidential feedback reports one year after the specified application date of assessment based measures. Public reporting must begin NLT two years after the specified application date of such measures

IMPACT Act of 2014: Skilled Nursing Facilities

Reporting of Assessment and Quality Data

“...beginning with fiscal year 2018, in the case of a skilled nursing facility that does not submit data, as applicable,... the Secretary shall reduce such percentage for payment rates during such fiscal year by 2 percentage points.”

Measures Mapped to IMPACT Act Domains for SNF QRP- Adopted Measures (FY 2016 SNF PPS Final Rule)

Domain	NQF ID	Measure Title	Reporting and Payment Timelines
Skin Integrity	#0678	Percent of Residents with Pressure Ulcers That are New or Worsened (Short-Stay)	<i>Initial</i> Reporting October – December 2016 for fiscal year (FY) 2018 payment adjustment followed by CY reporting for that of subsequent FYs
Incidence of Major Falls	Application of #0674	Percent of Residents Experiencing One or More Falls with Major Injury (Long Stay)	
Function	Application of #2631	Percent of LTCH Patients with an Admission and Discharge Functional Assessment & a Care Plan That Addresses Function	

Measures Mapped to IMPACT Act Domains for SNF QRP- Proposed Measures (FY 2017 SNF PPS Published NPRM)

Domain	NQF ID	Measure Title	Reporting and Payment Timelines	Confidential Feedback Reports & Public Reporting
Resource Use and other Measures	Not Submitted for Endorsement	<ul style="list-style-type: none"> Total Estimated Medicare Spending Per Beneficiary (MSPB)-PAC SNF QRP Discharge to Community-PAC SNF QRP Potentially Preventable 30-Day Post-Discharge Readmission Measure for SNF QRP 	Claims-based data will be used for payment adjustments for fiscal year (FY) 2018 payment adjustment and subsequent years	One year of claims-based data will be used to inform confidential feedback reports beginning with CY 2016 and public reporting beginning with CY 2017
Medication Reconciliation	Not Submitted for Endorsement	Drug Regimen Review Conducted with Follow-Up for Identified Issues- Post Acute Care SNF QRP	Initial Reporting October– December 2018 for fiscal year (FY) 2020 payment adjustment followed by CY reporting for that of subsequent FYs	Performance data will inform confidential feedback reports one year after the specified application date of assessment based measures. Public reporting must begin NLT two years after the specified application date of such measures

Measures Mapped to IMPACT Act Domains for IRF QRP- Adopted Measures (FY 2016 IRF PPS Final Rule)

Domain	NQF ID	Measure Title	Reporting and Payment Timelines
Skin Integrity	#0678	Percent of Residents with Pressure Ulcers That are New or Worsened (Short-Stay)	<i>Initial</i> Reporting October 2015 for fiscal year (FY) 2018 payment adjustment followed by CY reporting for that of subsequent FYs
Incidence of Major Falls	Application of #0674	Percent of Residents Experiencing One or More Falls with Major Injury (Long Stay)	<i>Initial</i> Reporting October – December 2016 for fiscal year (FY) 2018 payment adjustment followed by CY reporting for that of subsequent FYs
Function	Application of #2631	Percent of LTCH Patients with an Admission and Discharge Functional Assessment & a Care Plan That Addresses Function	
<i>Function</i>	#2633	<i>Change in Self-Care Score for Medical Rehabilitation Patients</i>	
<i>Function</i>	#2634	<i>Change in Mobility Score for Medical Rehabilitation Patients</i>	
<i>Function</i>	#2635	<i>Discharge Self-Care Score for Medical Rehabilitation Patients</i>	
<i>Function</i>	#2636	<i>Discharge Mobility Score for Medical Rehabilitation Patients</i>	

Measures Mapped to IMPACT Act Domains for IRF QRP- Proposed Measures (FY 2017 IRF PPS Published NPRM)

Domain	NQF ID	Measure Title	Reporting and Payment Timelines	Confidential Feedback Reports & Public Reporting
Resource Use and other Measures	Not Submitted for Endorsement	<ul style="list-style-type: none"> Total Estimated Medicare Spending Per Beneficiary (MSPB)-PAC IRF QRP Discharge to Community-PAC IRF QRP Potentially Preventable 30-Day Post-Discharge Readmission Measure for IRF QRP 	Claims-based data will be used for payment adjustments for fiscal year (FY) 2018 payment adjustment and subsequent years	Two years of claims-based data will be used to inform confidential feedback reports beginning with CY 2015 and CY 2016, and public reporting beginning with CYs 2016 and 2017
Medication Reconciliation	Not Submitted for Endorsement	Drug Regimen Review Conducted with Follow-Up for Identified Issues-Post Acute Care IRF QRP	Initial Reporting October–December 2018 for fiscal year (FY) 2020 payment adjustment followed by CY reporting for that of subsequent FYs	Performance data will inform confidential feedback reports one year after the specified application date of assessment based measures. Public reporting must begin NLT two years after the specified application date of such measures

Measures Mapped to IMPACT Act Domains for HH QRP- Adopted Measure (CY 2016 HH PPS Final Rule)

Domain	NQF ID	Measure Title	Reporting and Payment Timelines	Confidential Feedback Reports & Public Reporting
Skin Integrity	#0678	Percent of Residents or Patients with Pressure Ulcers that are New or Worsened (Short Stay)	Initial reporting begins January 2017 for calendar year (CY) 2018 payment adjustment and that of subsequent CYs	Performance data will inform confidential feedback reports one year after the specified application date of assessment based measures. Public reporting must begin NLT two years after the specified application date of such measures

Measures Mapped to IMPACT Act Domains for HH QRP- Proposed Measures (CY 2017 HH PPS Published NPRM)

Domain	NQF ID	Measure Title	Reporting and Payment Timelines	Confidential Feedback Reports & Public Reporting
Resource Use and other Measures	Not Submitted for Endorsement	Total Estimated Medicare Spending Per Beneficiary (MSPB)-PAC HH QRP	Claims-based data will be used for payment adjustments beginning with calendar year (CY) 2018 payment adjustment and subsequent years	One year of claims data will be used to inform confidential feedback reports beginning with CY 2016 claims , and public reporting beginning with CY 2017
	Not Submitted for Endorsement	Discharge to Community-PAC HH QRP		Two years of claims data will be used to inform confidential feedback reports beginning with CYs 2015 and 2016 and public reporting beginning with CYs 2016 and 2017
	Not Submitted for Endorsement	Potentially Preventable 30-Day Post-Discharge Readmission Measure for HH QRP		Three years of claims data will be used to inform confidential feedback reports beginning with CY 2014, 2015 and 2016, and public reporting beginning with CYs 2015, 2016, and 2017
Medication Reconciliation	Not Submitted for Endorsement	Drug Regimen Review Conducted with Follow-Up for Identified Issues-Post Acute Care HH QRP	Initial Reporting January 2017 for calendar year (CY) 2018 payment adjustment followed by CY reporting for that of subsequent FYs	Performance data will inform confidential feedback reports one year after the specified application date of assessment based measures. Public reporting must begin NLT two years after the specified application date of such measures

Question & Answer Session

General Resources

- CMS IMPACT Act Website:
<https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/Post-Acute-Care-Quality-Initiatives/IMPACT-Act-of-2014/IMPACT-Act-of-2014-Data-Standardization-and-Cross-Setting-MeasuresMeasures.html>
- For questions or comments, please submit them to:
PACQualityInitiative@cms.hhs.gov.

Acronyms in this Presentation

- COR – Contracting Officer’s Representative
- CY – Calendar Year
- FY – Fiscal Year
- GTL – Government Task Lead
- HH – Home Health
- HHA – Home Health Agency
- IMPACT Act – Improving Medicare Post-Acute Care Transformation Act
- IPPS – Inpatient Prospective Payment System
- IRF – Inpatient Rehabilitation Facility
- LTCH – Long-term Care Hospital
- MAP – Measure Application Partnership
- MUC – Measures Under Consideration
- NPRM – Notice of Proposed Rule-making
- NQF – National Quality Forum
- NQS – National Quality Strategy
- ODF – Open Door Forum
- PPS – Prospective Payment System
- QM – Quality Measures
- QRP – Quality Reporting Programs
- SME – Subject Matter Expert
- SNF – Skilled Nursing Facility
- TEP – Technical Expert Panel

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