

# Long-Term Care Hospital (LTCH) Quality Reporting Program (QRP) Public Reporting Archive

June 21, 2023

## Care Compare June Refresh of LTCH QRP Data – Now Available

The June 2023 Refresh of the Long-Term Care Hospital (LTCH) Quality Reporting Program (QRP) data is now available on [Care Compare](#) and [Provider Data Catalog \(PDC\)](#).

The data are based on quality assessment data submitted by LTCHs to the Centers for Medicare & Medicaid Services (CMS) from **Quarter 4, 2021 through Quarter 3, 2022, and for the LTCH Change in Mobility measure, Quarter 4, 2020 through Quarter 3, 2022**. Additionally, the Centers for Disease Control and Prevention (CDC) measures reflect data from **Quarter 3, 2021 through Quarter 2, 2022 for the Clostridium Difficile Infection (CDI), Catheter-Associated Urinary Tract Infections (CAUTI), and Central Line-Associated Bloodstream Infections (CLABSI) measures, Quarter 4, 2021 through Quarter 1, 2022** for the Healthcare Personnel (HCP) Influenza measure, and **Quarter 3, 2022** for the HCP COVID-19 Vaccine measure. The data for the claims-based measures will display data from **Quarter 3, 2019 through Quarter 4, 2019 and Quarter 3, 2020 through Quarter 2, 2021**.

In summary, the following LTCH QRP measures will be displayed on Care Compare and PDC during the June 2023 Refresh:

- Application of Percent of Residents Experiencing One or More Falls with Major Injury (Long Stay) [CMIT Measure ID #00520 (CBE-endorsed)]
  - Q4 2021 – Q3 2022 (10/1/2021-9/30/2022)
- Percent of Long-Term Care Hospital Patients with an Admission and Discharge Functional Assessment and a Care Plan That Addresses Function [CMIT Measure ID #00513 (not endorsed)]
  - Q4 2021 – Q3 2022 (10/1/2021-9/30/2022)

- Application of Percent of Long-Term Care Hospital Patients with an Admission and Discharge Functional Assessment and a Care Plan That Addresses Function [CMIT Measure ID #00513 (not endorsed)]
  - Q4 2021 – Q3 2022 (10/1/2021-9/30/2022)
- Functional Outcome Measure: Change in Mobility Among Long-Term Care Hospital Patients Requiring Ventilator Support [CMIT Measure ID #00275 (CBE-endorsed)]
  - Q4 2020 – Q3 2022 (10/1/2020-9/30/2022)
- Drug Regimen Review Conducted with Follow-Up for Identified Issues – Post-Acute Care (PAC) Long-Term Care Hospital (LTCH) Quality Reporting Program (QRP) [CMIT Measure ID #00225 (not endorsed)]
  - Q4 2021 – Q3 2022 (10/1/2021-9/30/2022)
- Changes in Skin Integrity Post-Acute Care: Pressure Ulcer/Injury [CMIT Measure ID #000121 (not endorsed)]
  - Q4 2021 – Q3 2022 (10/1/2021-9/30/2022)
- Compliance with Spontaneous Breathing Trial (SBT) by Day 2 of the LTCH Stay [CMIT Measure ID #00143 (not endorsed)]
  - Q4 2021 – Q3 2022 (10/1/2021-9/30/2022)
- Ventilator Liberation Rate [CMIT Measure ID #00759 (not endorsed)]
  - Q4 2021 – Q3 2022 (10/1/2021-9/30/2022)
- National Healthcare Safety Network (NHSN) Catheter-Associated Urinary Tract Infection (CAUTI) Outcome Measure [CMIT Measure ID #00459 (CBE-endorsed)]
  - Q3 2021 – Q2 2022 (7/1/2021-6/30/2022)
- National Healthcare Safety Network (NHSN) Central Line-Associated Bloodstream Infection (CLABSI) Outcome Measure [CMIT Measure ID #00460 (CBE-endorsed)]
  - Q3 2021 – Q2 2022 (7/1/2021-6/30/2022)
- National Healthcare Safety Network (NHSN) Facility-Wide Inpatient Hospital-onset Clostridium difficile Infection (CDI) Outcome Measure [CMIT Measure ID #00462 (CBE-endorsed)]
  - Q3 2021 – Q2 2022 (7/1/2021-6/30/2022)
- Influenza Vaccination Coverage Among Healthcare Personnel [CMIT Measure ID #00390 (CBE-endorsed)]
  - Q4 2021 – Q1 2022 (10/1/2021 – 3/31/2022)
- COVID-19 Vaccination Coverage among Healthcare Personnel [CMIT Measure ID #00180 (not endorsed)]
  - Q3 2022 (7/1/2022 – 9/30/2022)

- Discharge to Community – Post-Acute Care (PAC) Long-Term Care Hospital (LTCH) Quality Reporting Program (QRP) [CMIT Measure ID #00210 (CBE-endorsed)]
  - Q3 2019 – Q4 2019 and Q3 2020 – Q2 2021 (7/1/2019-12/31/2019; 7/1/2020-6/30/2021)
- Medicare Spending Per Beneficiary – Post-Acute Care (PAC) Long-Term Care Hospital (LTCH) Quality Reporting Program (QRP) [CMIT Measure ID #00434 (CBE-endorsed)]
  - Q3 2019 – Q4 2019 and Q3 2020 – Q2 2021 (7/1/2019-12/31/2019; 7/1/2020-6/30/2021)
- Potentially Preventable 30-Days Post-Discharge Readmission Measure for Long-Term Care Hospital (LTCH) Quality Reporting Program (QRP) [CMIT Measure ID #00575 (not endorsed)]
  - Q3 2019 – Q4 2019 and Q3 2020 – Q2 2021 (7/1/2019-12/31/2019; 7/1/2020-6/30/2021)

Please visit [Care Compare](#) and [PDC](#) to view the updated quality data. For questions about LTCH QRP Public Reporting, please email [LTCHPRquestions@cms.hhs.gov](mailto:LTCHPRquestions@cms.hhs.gov).

**June 15, 2023**

### **LTCH Provider Preview Reports – Now Available**

The Long-Term Care Hospital (LTCH) Provider Preview Reports have been updated and are now available. These reports contain provider performance scores for quality measures, which will be published on [Care Compare](#) and [Provider Data Catalog \(PDC\)](#) during the **September 2023** refresh.

The data contained within the Preview Reports are based on quality assessment data submitted by LTCHs from **Quarter 1, 2022 through Quarter 4, 2022, and for the LTCH Change in Mobility measure, Quarter 1, 2021 through Quarter 4, 2022**. Additionally, the Centers for Disease Control and Prevention (CDC) measures reflect data from **Quarter 4, 2021 through Quarter 3, 2022 for the Clostridium Difficile Infection (CDI), Catheter-Associated Urinary Tract Infections (CAUTI), and Central Line-Associated Bloodstream Infections (CLABSI) measures, Quarter 4, 2021 through Quarter 1, 2022** for the Healthcare Personnel (HCP) Influenza measure, and **Quarter 4, 2022** for the COVID-19 Vaccination Coverage among Healthcare Personnel (HCP) measure. The data for the claims-based measures will display data from **Quarter 4, 2020 through Quarter 3, 2022** for this refresh.

Providers had until **July 17, 2023** to review their performance data. Only updates/corrections to the underlying assessment data before the final data submission deadline will be reflected in the publicly reported data on Care Compare. If a provider updates assessment data after the final data submission deadline, the updated data will only be reflected in the Facility-Level Quality Measure (QM) report and Patient-Level QM report. Updates submitted after the final data submission deadline will not be reflected in the Provider Preview Reports or on the Care Compare website. However, providers can request Centers for Medicare & Medicaid Services (CMS) review of their data during the preview period if they believe the quality measure scores that are displayed within their Preview Reports are inaccurate.

For more information, please visit the [CMS LTCH QRP Public Reporting](#) website.