

Skilled Nursing Facility Measures

Quality Measures										
Measure Name	Data Source	Measure Type	NQF#	Effective Date	Data Collection Period	CASPER	NHC	Five Star	Provider Preview	
Short Stay – Target Period is most recent 6 months, unless otherwise specified; NHC/Five Star updated every 6 months										
Percent of Residents Who Self-Report Moderate to Severe Pain	MDS	Outcome	0676	10/2010	Per Calendar Quarter	Yes	Yes	Yes	Yes	
Percent of Residents Who Were Assessed and Appropriately Given the Seasonal Influenza Vaccine	MDS	Process	0680	10/2012	October 1 March 31	No	Yes	No	Yes	
Residents Who Received the Seasonal Influenza Vaccine	MDS	Process	0680A	10/2012	October 1 March 31	No	No	No	Yes	
Residents Who Were Offered and Declined the Seasonal Influenza Vaccine	MDS	Process	0680B	10/2012	October 1 March 31	No	No	No	Yes	
Residents Who Did Not Receive, Due to Medical Contraindication, the Seasonal Influenza Vaccine	MDS	Process	0680C	10/2012	October 1 March 31	No	No	No	Yes	
Percent of Resident's Assessed and Appropriately Given the Pneumococcal Vaccine	MDS	Process	0682	10/2012	12 month period	No	Yes	No	Yes	
Residents Who Received the Pneumococcal Vaccine	MDS	Process	0682A	10/2012	12 month period	No	No	No	Yes	
Residents Who Were Offered and Declined the Pneumococcal Vaccine	MDS	Process	0682B	10/2012	12 month period	No	No	No	Yes	
Residents Who Did Not Receive, Due to Medical Contraindication, the Pneumococcal Vaccine	MDS	Process	0682C	10/2012	12 month period	No	No	No	Yes	
Percent of Short-Stay Residents, Who Newly Received an Antipsychotic Medication	MDS	Outcome	N/A	04/2012	Per Calendar Quarter	No	Yes	Yes	No	
Percent of Residents Who Made Improvements in Function from Admission to Discharge	MDS	Outcome	N/A	04/2016	Per Calendar Quarter	Yes	Yes	Yes*	Yes	
Percent of Residents on a Scheduled Pain Medication Regimen on Admission Who Self-Report a Decrease in Pain Intensity or Frequency	MDS	Outcome	0675	10/2010	5-day compared to 14-day or Discharge	No	No	No	Yes	
Percentage of Residents Who Were Re-hospitalized After a Nursing Home Admission	Claim/MDS	Outcome	N/A	04/2016	12 month period	Yes	Yes	Yes*	Yes	
Percentage of Residents Who Have Had an Outpatient Emergency Department Visit	Claim/MDS	Outcome	N/A	04/2016	12 month period	Yes	Yes	Yes*	Yes	
Percentage of Residents Who Were Successfully Discharged to the Community	Claim/MDS	Outcome	N/A	04/2016	12 month period	Yes	Yes	Yes*	Yes	
Long Stay – Target Period is most recent 3 months, unless otherwise specified; NHC/Five Star updated every 6 months										
Percent of Residents who Self-Report Moderate to Severe Pain	MDS	Outcome	0677*	10/2010	Per Calendar Quarter	Yes	Yes	Yes*	Yes	
Percent of High-Risk Residents with Pressure Ulcers	MDS	Outcome	0679*	10/2010	Per Calendar Quarter	Yes	Yes	Yes*	Yes	
Percent of Residents Assessed and Appropriately Given the Seasonal Influenza Vaccine	MDS	Process	0681	10/2010	October 1 March 31	No	Yes	No	Yes	
Residents Who Received the Seasonal Influenza Vaccine	MDS	Process	0681A	10/2010	October 1 March 31	No	No	No	Yes	
Residents Who Were Offered and Declined the Seasonal Influenza Vaccine	MDS	Process	0681B	10/2010	October 1 March 31	No	No	No	Yes	
Residents Who Did Not Receive, Due to Medical Contraindications, the Seasonal Influenza Vaccine	MDS	Process	0681C	10/2010	October 1 March 31	No	No	No	Yes	
Percent of Residents Assessed and Appropriately Given the Pneumococcal Vaccine	MDS	Process	0683	10/2010	12 month period	No	Yes	No	Yes	
Residents Who Received the Pneumococcal Vaccine	MDS	Process	0683A	10/2010	12 month period	No	No	No	Yes	
Residents Who Were Offered and Declined the Pneumococcal Vaccine	MDS	Process	0683B	10/2010	12 month period	No	No	No	Yes	
Residents Who Did Not Receive, Due to Medical Contraindication, the Pneumococcal Vaccine	MDS	Process	0683C	10/2010	12 month period	No	No	No	Yes	
Percent of Residents with a Urinary Tract Infection	MDS	Outcome	0684	10/2010	Per Calendar Quarter	Yes	Yes	Yes	Yes	
Percent of Low Risk Residents Who Lose Control of Their Bowels or Bladder (de-endorsed)	MDS	Outcome	0685	10/2010	Per Calendar Quarter	Yes	Yes	No	Yes	
Percent of Residents Who Have/Had a Catheter Inserted and Left in Their Bladder	MDS	Outcome	0686	10/2010	Per Calendar Quarter	Yes	Yes	Yes*	Yes	
Percent of Residents Who Were Physically Restrained	MDS	Outcome	0687	10/2010	Per Calendar Quarter	Yes	Yes	Yes	Yes	
Percent of Residents Whose Need for Help with Activities of Daily Living Has Increased	MDS	Outcome	0688	10/2010	Per Calendar Quarter	Yes	Yes	Yes	Yes	
Percent of Residents Whose Ability to Move (locomotion) Independently Worsened	MDS	Outcome	N/A	04/2016	Per Calendar Quarter	Yes	Yes	Yes*	Yes	
Percent of Residents Who Lose Too Much Weight	MDS	Outcome	0689	10/2010	Per Calendar Quarter	Yes	Yes	No	Yes	
Percent of Residents Who Have Depressive Symptoms	MDS	Outcome	0690	10/2010	Per Calendar Quarter	Yes	Yes	No	Yes	
Percent of Residents Who Received an Antipsychotic Medication	MDS	Outcome	N/A	04/2016	Per Calendar Quarter	Yes	Yes	Yes	No	
Percent of Residents Who Received Antianxiety or Hypnotic Medication	MDS	Outcome	N/A	04/2016	Per Calendar Quarter	Yes	Yes	No	No	

Skilled Nursing Facility Measures

Quality Measures impacting the Quality Reporting Program (QRP) – Potential 2% reduction on Annual Percentage Update (APU) if data is not submitted for at least 80% of all MDS assessments; CY – Calendar Year (1/1 to 12/31); FY – Fiscal Year (10/1 to 9/30); Payment impacts the FY preceding the CY (i.e., data collected from CY 2018, which ends 12/31/2018, impacts FY 2020, which starts 10/1/2019)											
Measure Name	Data Source	Measure Type	NQF#	Effective Date	Data Collection Period	Initial Date Payment Affected (FY)	CASPER	NHC	Five Star	Provider Preview	
Percent of Residents Experiencing One or More Falls with Major Injury (long stay)	MDS	Outcome	0674	10/01/2010	1/1/2017	10/1/2018	Yes	Yes	Yes	Yes	
Percent of Residents or Patients with Pressure Ulcers That Are New or Worsened	MDS	Outcome	0678	10/01/2012	CY	10/1/2018	Yes	Yes	Yes*	Yes	
Changes in Skin Integrity Post-Acute Care: Pressure Ulcer/Injury	MDS	Outcome	To replace 0678	10/01/2017	CY	10/1/2019	N/A	N/A	N/A	N/A	
Patient with an Admission and Discharge Functional Assessment and a Care Plan That Addresses Function	MDS	Process	2631	10/3/2017	CY	10/1/2018	Yes	Yes	No	Yes	
Change in Mobility Score for Medical Rehabilitation Patients (Section GG)	MDS	Outcome	2634*	10/1/2017	CY	10/1/2019	N/A	N/A	N/A	N/A	
Discharge Mobility Score for Medical Rehabilitation Patients (Section GG)	MDS	Outcome	2636*	10/1/2017	CY	10/1/2019	N/A	N/A	N/A	N/A	
Change in Self-Care Score for Medical Rehabilitation Patients (Section GG)	MDS	Outcome	2633*	1/11/2017	CY	10/1/2019	N/A	N/A	N/A	N/A	
Discharge Self-Care Score for Medical Rehabilitation Score (Section GG)	MDS	Outcome	2635*	10/3/2017	CY	10/1/2019	N/A	N/A	N/A	N/A	
Drug Regimen Review (DRR) Conducted with Follow-Up for Identified Issues	MDS	Process	N/A	10/1/2016	CY	10/1/2019	N/A	N/A	N/A	N/A	
Medicare Spending Per Beneficiary (MSPB) (Possible increase to 2 years of data)	Claim	Cost/Resource	N/A	1/1/2017	CY	10/1/2018-	Yes	Yes	No	Yes	
Discharge to Community (DTC) (Possible increase to 2 years of data)	Claim	Outcome	N/A	1/1/2017	CY	10/1/2018-	Yes	Yes	No	Yes	
Potentially Preventable (PPR) 30-day Post-Discharge readmission Measure	Claim	Outcome	N/A	1/1/2017	CY	10/1/2018-	Yes	Yes	No	Yes	
Transfer of Health Information and Care Preferences when an Individual Transitions	In Development										

Value Based Purchasing (VBP): +/- 2% withheld to fund incentive payments with 60% distributed back during impacted FY based on Performance Score; Performance Score is the higher of the Achievement Score (facility's rate compared with national scores for all facilities during the baseline period) and the Improvement Score (facility's performance versus baseline period); Bottom 40% receive less; Change to FY from CY									
Measure Name	Data Source	Measure Type	NQF#	Baseline Period		Performance Period		Fiscal Year (FY) Impacted	CASPER
				Start Date	End Date	Start Date	End Date		
SNF 30-Day All-Cause Readmission Measure (SNFRM)	Claim	Outcome	2510*	1/1/2015	12/31/2015	1/1/2017	12/31/2017	10/1/2018	Yes
				10/1/2015	9/20/2016	10/1/2017	9/30/2018	10/1/2019	Yes
SNF 30-Day Potentially Preventable Readmission Measure (SNFPPR)	Claim	Outcome	To replace 2510	N/A	N/A	N/A	N/A	N/A	N/A

Resource Measure – 2% reduction of payment if not reported or reported with significant discrepancies between hours reported and hours verified (including 7 or more days in a quarter without RN staffing); + 1 star in staffing domain with 1 star drop overall per quarter									
Measure Name	Data Source	Measure Type	Effective Date	Data Collection	Submission Due	CASPER	NHC	Five Star	Provider Preview
Payroll Based Journal (PBJ)	Provider Submission	Resource	7/2016	FY Quarter	45 days from end of quarter	Yes	Yes	Yes	Yes

*Risk Adjusted

2% Sequestration – Initiated as part of the Budget Control Act of 2011; Extended by Bipartisan Budget Act of 2015 (Effective 4/1/2013 and continued through 3/31/2025)

To search for further information regarding the National Quality Forum (NQF) and specific measures, please go to: http://www.qualityforum.org/Measures_Reports_Tools.aspx and cmit.cms.gov