

Publication of the Discharge to Community—Post Acute Care Measures for the Inpatient Rehabilitation Facility, Long-Term Care Hospital, and Skilled Nursing Facility Quality Reporting Programs

The Centers for Medicare & Medicaid Services (CMS) has changed the methodology for assigning providers to performance categories for the publicly displayed Discharge to Community—Post Acute Care (DTC-PAC) measures in the Inpatient Rehabilitation Facility (IRF), Long-Term Care Hospital (LTCH) and Skilled Nursing Facility (SNF) Quality Reporting Programs (QRPs). This refinement better aligns the DTC-PAC measures with other inpatient quality measures and CMS' Meaningful Measures initiative to improve health outcomes while minimizing clinician and provider burden.

Summary

The DTC-PAC measures were first displayed on the IRF, LTCH, and Nursing Home Compare websites in fall 2018 and will be refreshed in fall 2019. CMS has refined the statistical methodology for assigning providers to performance categories for public display to align with the Potentially Preventable Readmissions measures in the PAC QRPs and the Hospital-Wide Readmission measure in the Inpatient QRP. This refinement results in greater variation in provider performance categories, allowing better discernment of providers that underperform or overperform considerably compared with the national rate. The refinement will be reflected in the fall 2019 Quarterly Refresh for the IRF, LTCH, and Nursing Home Compare websites and the June/July 2019 Provider Preview Reports and future years. The DTC-PAC measure for home health (HH) agencies was displayed for the first time on HH Compare in May 2019 using this updated methodology.

Background

The Improving Medicare Post-Acute Care Transformation Act of 2014 (IMPACT Act) directed the Secretary to specify and publicly report measures reflecting successful discharge to community for use in the PAC QRPs. The DTC-PAC measures were finalized in the Fiscal Year 2017 final rules for the IRF Prospective Payment System (PPS), Inpatient/LTCH PPS, and SNF PPS. Confidential feedback reports were distributed to providers in fall 2017 and the measures were first displayed on the IRF, LTCH, and Nursing Home Compare websites in fall 2018. For the fall 2019 public display refresh and in future years, CMS has refined the "bootstrapping" method for assigning providers to performance categories to align with the claims-based Potentially Preventable Readmissions measures in the PAC QRPs and the Hospital-Wide Readmission measure in the Inpatient QRP. Our revised methodology results in greater variation in performance categories, allowing better discernment of provider performance, including those that underperform or overperform considerably compared with the national rate. This refinement will be reflected in the fall 2019 Quarterly Refresh of the IRF, LTCH, and Nursing Home Compare websites, the June/July 2019 Provider Preview Reports, and future years. The DTC-PAC measure for home

health (HH) agencies was be displayed for the first time on HH Compare in May 2019 using the updated methodology.

For more information, please visit:

- <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/IRF-Quality-Reporting/Spotlights-Announcements.html> for the IRF QRP;
- <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/LTCH-Quality-Reporting/LTCH-Quality-Reporting-Spotlight-Announcements.html> for the LTCH QRP; and
- <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/NursingHomeQualityInits/Skilled-Nursing-Facility-Quality-Reporting-Program/SNF-Quality-Reporting-Program-Spotlights-and-Announcements.html> for the SNF QRP.