



COVID-19 Public Reporting Tip Sheet

The second edition of the Inpatient Rehabilitation Facility (IRF) Public Reporting Tip Sheet is to help providers understand the Centers for Medicare & Medicaid Services' (CMS) public reporting approach to the IRF Quality Reporting Program (QRP) to account for CMS quality data submissions that were either optional or excepted from public reporting due to the COVID-19 public health emergency (PHE). The impact on CMS' Care Compare website refreshes are also outlined. This tip sheet serves as a companion document to the first edition [IRF COVID-19 Public Reporting Tip Sheet](#) published in July 2020.



Background The IRF QRP

The IRF QRP was established under Section 3004(b) of the Patient Protection and Affordable Care Act of 2010 and expanded with the Improving Medicare Post-Acute Care Transformation Act of 2014. Both require the reporting of quality measures (QMs) that relate to the care provided by IRFs across the country. Currently, Care Compare for IRFs reports on several quality-of-care measures for the IRF QRP that are derived from the following sources:

- Inpatient Rehabilitation Facility Patient Assessment Instrument (IRF-PAI).
- The Centers for Disease Control and Prevention's (CDC) National Healthcare Safety Network (NHSN).
- Medicare Fee-For Service claims.

Current Quality Measures for the IRF QRP

IRF-PAI Assessment-Based QMs

1. Application of Percent of Residents Experiencing One or More Falls with Major Injury (Long Stay) (National Quality Forum [NQF] #0674).
2. Application of Percent of Long-Term Care Hospital Patients with an Admission and Discharge Functional Assessment and a Care Plan That Addresses Function (NQF #2631).
3. IRF Functional Outcome Measure: Change in Self-Care Score for Medical Rehabilitation Patients (NQF #2633).

4. IRF Functional Outcome Measure: Change in Mobility Score for Medical Rehabilitation Patients (NQF #2634).
5. IRF Functional Outcome Measure: Discharge Self-Care Score for Medical Rehabilitation Patients (NQF #2635).
6. IRF Functional Outcome Measure: Discharge Mobility Score for Medical Rehabilitation Patients (NQF #2636).
7. Drug Regimen Review Conducted with Follow-Up for Identified Issues – Post-Acute Care (PAC) IRF QRP.
8. Changes in Skin Integrity PAC: Pressure Ulcer/Injury.
9. Transfer of Health Information to the Provider PAC.*
10. Transfer of Health Information to the Patient PAC.*

** Note: While finalized, these measures have not yet been implemented.*

CDC NHSN QMs

1. NHSN Catheter Associated Urinary Tract Infection (CAUTI) Outcome Measure (NQF #0138).
2. NHSN Influenza Vaccination among Healthcare Personnel (NQF #0431).
3. NHSN Facility-wide Inpatient Hospital-onset *Clostridium difficile* Infection (CDI) Outcome Measure (NQF #1717).

Medicare Fee-For-Service Claims-Based QMs

1. Medicare Spending per Beneficiary (MSPB) – PAC IRF QRP.
2. Discharge to Community – PAC IRF QRP (NQF #3479).
3. Potentially Preventable 30-Day Post-Discharge Readmission Measure for IRF QRP.
4. Potentially Preventable Within Stay Readmission Measure.

Note: Public reporting of claims-based measures is being delayed by 6 months. CMS is targeting resumption of reporting for these measures in June 2022.

New QM Finalized in the IRF PPS Fiscal Year (FY) 2022 Rule

- COVID–19 Vaccination Coverage among Healthcare Personnel (HCP) (CDC/NHSN).

Review the [IRF PPS FY 2022 Final Rule](#) for more detail about this new measure.



Temporary IRF QRP Exceptions Due to the COVID-19 PHE

The CMS [March 27, 2020, Medicare Learning Network \(MLN\) memo](#) outlined temporary changes to the IRF QRP data submission requirements, due to the COVID-19 PHE, to assist IRFs while they directed resources toward caring for patients, and ensuring the health and safety of patients and staff. CMS made optional and temporarily excepted providers from the submission of NHSN and IRF-PAI assessment data for the quarters detailed in Table 1.

Table 1. Quarters for Which Data Are Optional or Excepted

| Quarter | NHSN and IRF-PAI Data Submission |
|---|----------------------------------|
| October 1, 2019–December 31, 2019 (Q4 2019) | Optional |
| January 1, 2020–March 31, 2020 (Q1 2020) | Excepted |
| April 1, 2020–June 30, 2020 (Q2 2020) | Excepted |

These changes to the IRF QRP data submission requirements ended **on June 30, 2020**.

Current Data Submission for the IRF QRP

The requirement for timely quality data collection and submission resumed **July 1, 2020**, with new IRF-PAI record and NHSN data submission occurring on or after that date.

Timely submission and acceptance requirements of IRF-PAI data to meet the 95-percent compliance threshold to avoid the two-percentage point (2%) reduction in the annual increase factor are unchanged. The compliance threshold calculation is based on the number of IRF-PAI assessments submitted for use in the calculation of the IRF QRP QMs. To be compliant, at least 95 percent of these assessments must contain complete data (i.e., have all data elements used to calculate the IRF QRP QMs).

There are no submission requirements for Medicare claims data outside of the submission of the Medicare bill.

Public Reporting and Care Compare

Impact of Data Exceptions on Public Reporting

Since the IRF QRP is a pay-for-reporting program, CMS is statutorily required to publicly report the data. In the March 27, 2020, announcement, CMS indicated that data submission for Q4 2019 was optional, and that any data submitted would be used for reporting purposes. Since data submission for Q4 2019 was strong, these data were included in measure calculations for public reporting.

The excepted data for Q1 2020 and Q2 2020 impacts what is displayed on Care Compare; therefore, CMS developed an approach to accommodate these excepted quarters of data.

CMS Approach to Excepted Data

For Q1 2020 and Q2 2020, providers were excepted from data submissions. Because the exceptions created missing data, CMS made a decision to hold the data constant (i.e., froze the data) following the December 2020 refresh for IRFs, as these subsequent refreshes were



originally scheduled to include the missing data (Q1 and Q2 2020). The affected Care Compare site refreshes that were scheduled to contain calendar year (CY) 2020 COVID-19 data (Q1 and Q2 2020) included December 2020, and March, June, September, and December 2021.

The December 2020 assessment-based data will continue to display on Care Compare until IRF QRP public reporting resumes for these and NHSN measures with the December 2021 refresh. For claims-based measures, CMS has made the decision to delay public reporting these measures by 6 months. This delay will allow CMS more time to analyze the calculation of these measures, given the exclusion of claims-based data from Q1 and Q2 2020, and the effect of this exclusion on certain aspects of measure calculation such as look-back periods and risk adjustment. CMS is targeting the public reporting of claims-based measures for the June 2022 refresh.

In the quarter in which public reporting resumes, CMS will use less than the standard number of quarters of data for assessment- and claims-based measures. Figure 1 shows the quarters used for reporting the IRF-PAI-based measures and Figure 2 shows the quarters used for reporting claims-based measures.

Figure 1. Quarters Used in Reporting of IRF-PAI-Based Measures

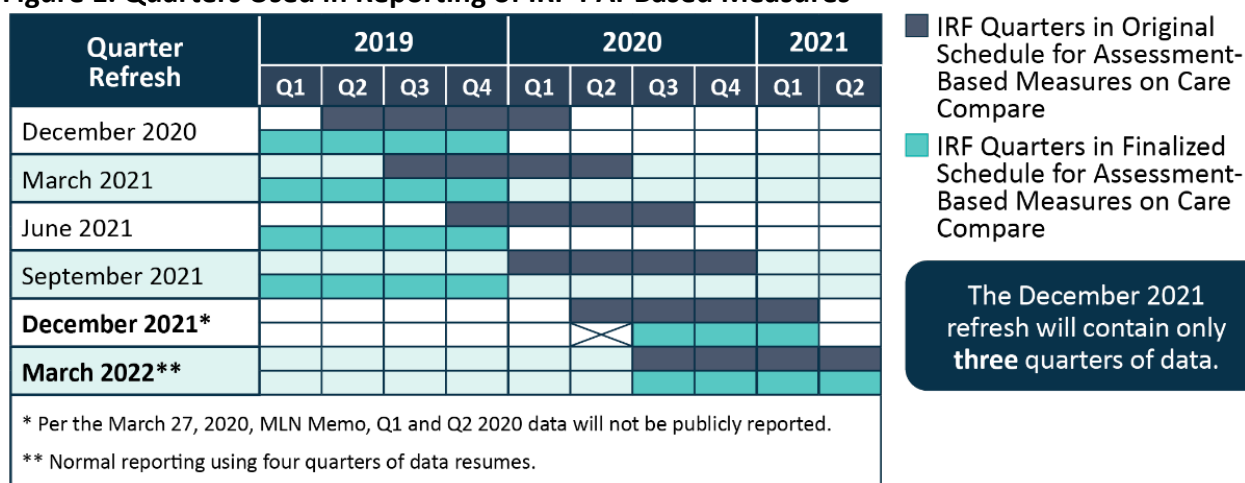
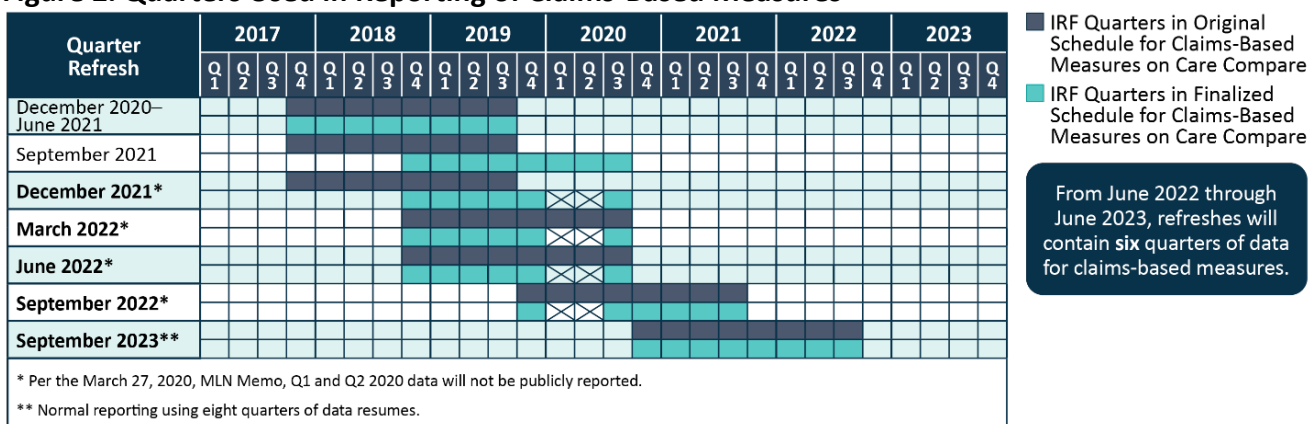


Figure 2. Quarters Used in Reporting of Claims-Based Measures



Note: The periods of performance within the table above are subject to change, dependent upon CMS final decisions regarding the methodology used for the calculation of claims-based quality measures, and the exclusion of Q1/Q2 2020 data.



All CDC NHSN data (e.g., CAUTI, CLABSI, CDI, and HCP Influenza) QMs were frozen beginning with the March 2021 refresh. CMS will continue to report CDC NHSN infection data to IRFs via their confidential provider feedback reports during this time. Refreshes of NHSN data will resume on Care Compare in December of 2021.

When will the data return to expected quarters of data displayed?

The IRF QRP QM data on Care Compare will go back to displaying its expected quarters of data in March 2022 for all assessment-based measures, December 2022 for all NHSN measures, and September 2023 for all claims-based measures. Table 2 provides a summary.

Table 2. Summary of Care Compare Data Refreshes for the IRF QRP

| Quarter Refresh | IRF-PAI Assessment-Based Measures* | NHSN-Based Measures* | Claims-Based Measures |
|---|--|--|---|
| September 2020 | Continue to display June 2020 refresh data | Continue to display June 2020 refresh data | Continue to display June 2020 refresh data |
| December 2020 | Normal refresh | Normal refresh | Normal refresh |
| March 2021 | Freeze | Freeze | Freeze |
| June 2021 | Freeze | Freeze | Freeze |
| September 2021 | Freeze | Freeze | Freeze |
| December 2021 | Public reporting resumes, using three quarters of data | Public reporting resumes for CDI and CAUTI (using Q1 2019 to Q4 2019 data) and HCP Influenza (using Q4 2018 to Q1 2019 data) | Freeze |
| March 2022 | Normal refresh | Refresh for CDI and CAUTI (using Q2 2019 to Q4 2019, Q3 2020 data). HCP Influenza** | Freeze |
| June 2022 | Normal refresh | Normal reporting resumes for CDI and CAUTI using four contiguous quarters of data (Q3 2020 to Q2 2021). HCP Influenza** | Public reporting resumes using six quarters of data |
| September 2022 | Normal refresh | Normal refresh for CDI and CAUTI. HCP Influenza** | Refresh using six quarters of data |
| December 2022 | Normal reporting resumes for all IRF-PAI Measures | Normal reporting resumes for all NHSN measures** | Refresh using six quarters of data |
| March 2023 | Normal refresh | Normal refresh | Refresh using six quarters of data |
| June 2023 | Normal refresh | Normal refresh | Refresh using six quarters of data |
| September 2023 | Normal refresh | Normal refresh | Normal reporting resumes using eight consecutive quarters of data |
| <p>* Methodology used for measure calculation for refreshes to account for the missing CY 2020 COVID-excepted data was detailed in the FY 2022 Final Rule (see resources below).</p> <p>** HCP Influenza data holds constant using Q4 2018 to Q1 2019 data until December 2022 when normal reporting resumes using Q4 2020 to Q1 2021 data.</p> | | | |

Note: The periods of performance within the table above are subject to change, dependent upon CMS final decisions regarding the methodology used for the calculation of claims-based quality measures, and the exclusion of Q1/Q2 2020 data.



When will the new IRF QRP measure be publicly reported and what quarters of data will be used to calculate it?

- **COVID-19 Vaccination Coverage among HCP** – CMS is targeting the September 2022 refresh for the inaugural display of this measure. Data collection for this measure begins with a shortened reporting period from October 1, 2021, through December 31, 2021, affecting the CY 2021 reporting period/FY 2023 payment determination. Following the data submission quarter for the FY 2023 IRF QRP, subsequent compliance for the IRF QRP will be based on four quarters of such data submission each CY, beginning in CY 2022 affecting FY 2024 payment determination.

Provider Reports

- **Provider Preview Report (PPR):** The purpose of the PPR is to give providers the opportunity to preview their IRF-PAI, NHSN, and claims-based QM results prior to public display on Care Compare.
 - **How does the data freeze affect the PPR?**
 - Subsequent to the December 2020 refresh, no new PPR will be issued until public reporting resumes with the December 2021 refresh.
 - Release of the PPR in October 2021 was for the December 2021 refresh.
- **Review and Correct (R&C) Report:** The purpose of the R&C report is for providers to access QM data prior to the data correction deadline for public reporting. It includes data from the most current quarter and data from the previous three quarters. The report notes which quarters of data are “open” for correction, and which are “closed,” no longer allowing correction.
 - **How did the data freeze affect the R&C Report?**
 - Providers had the opportunity to correct any data they submitted during Q1 and Q2 2020 even though these data were excepted from public reporting. At the time of the publication of this document, there are no Q1 or Q2 2020 data available (open) to correct, as all data correction deadlines for 2020 have now passed.
- **IRF QM Reports:** These reports give providers confidential feedback on the facility’s performance. Providers can run a QM report for any reporting period of their choice; they can include a full year of data if requested. The QM report can include both facility-level and patient-level data.
 - **How does the data freeze affect the QM Report?**
 - Providers will be able to confidentially review any data from Q1 and Q2 2020 that they chose to submit when those quarters are selected for their reports.

Resources

- **For a fact sheet about FY 2022 IRF PPS Final Rule (CMS-1748-F):** [Fiscal Year \(FY\) 2022 Inpatient Rehabilitation Facility \(IRF\) Prospective Payment System \(PPS\) Final Rule \(CMS-1748-F\) | CMS.](#)
- **The final rule (CMS-1748-F) can be downloaded from the Federal Register at:** [https://www.federalregister.gov/documents/2021/08/04/2021-16310/medicare-program-inpatient-rehabilitation-facility-prospective-payment-system-for-federal-fiscal.](https://www.federalregister.gov/documents/2021/08/04/2021-16310/medicare-program-inpatient-rehabilitation-facility-prospective-payment-system-for-federal-fiscal)
- **For information related to IRF QRP data submission deadlines:** [Inpatient Rehabilitation Facility \(IRF\) Quality Reporting Program \(QRP\) Data Submission Deadlines | CMS.](#)
- **For the CMS Medicare Learning Network memo released March 27, 2020:** [https://www.cms.gov/files/document/guidance-memo-exceptions-and-extensions-quality-reporting-and-value-based-purchasing-programs.pdf.](https://www.cms.gov/files/document/guidance-memo-exceptions-and-extensions-quality-reporting-and-value-based-purchasing-programs.pdf)
- **For program guidance and information about the CMS response to COVID-19:** [https://www.cms.gov/About-CMS/Agency-Information/Emergency/EPRO/Current-Emergencies/Current-Emergencies-page.](https://www.cms.gov/About-CMS/Agency-Information/Emergency/EPRO/Current-Emergencies/Current-Emergencies-page)
- **For program guidance, updates, and announcements regarding the IRF QRP, visit the Spotlight & Announcements web page:** [https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/IRF-Quality-Reporting/Spotlights-Announcements.](https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/IRF-Quality-Reporting/Spotlights-Announcements)
- **For more information about public reporting for IRFs, visit:** [https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/IRF-Quality-Reporting.](https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/IRF-Quality-Reporting)
- **For the IRF QRP Quick Reference Guide:** [https://www.cms.gov/files/document/pac-irf-fy2022-quickreferenceguide-v11.pdf.](https://www.cms.gov/files/document/pac-irf-fy2022-quickreferenceguide-v11.pdf)

Email questions to the IRF Help Desk:

IRF.Questions@cms.hhs.gov

