



## CMS.GOV NEWSROOM

### FACT SHEET

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**Skilled Nursing Facility (SNF) Quality Reporting Program (QRP) Data on Nursing Home Compare** *This fact sheet contains information about the inaugural release of the SNF QRP data on the [Nursing Home Compare](#) website that occurred on October 24, 2018.*

#### **Why is this information being released?**

In accordance with Section 1899B(g)(1) of the Social Security Act, which requires CMS to provide for the public reporting of SNF provider performance on the quality measures, CMS is announcing the inaugural release of the Skilled Nursing Facility (SNF) Quality Reporting Program (QRP) quality data on Nursing Home (NH) Compare. The law requires certain post-acute care (PAC) providers, including SNFs, to report provider performance data on quality. The Improving Medicare Post-Acute Care Transformation (IMPACT) Act also requires CMS to publicly report quality measure data submitted by SNFs on certain quality measures specified in the Act.

#### **Why is the SNF QRP data being posted on Nursing Home Compare?**

Nursing Home Compare allows you to find and compare SNFs that are certified by Medicare and nursing facilities that are certified by Medicaid collectively referred to as nursing homes. This website contains quality of resident care and staffing information for more than 15,000 nursing homes around the country, and will now include SNF QRP quality data that can be used to help compare SNF providers by their performance on important indicators of quality, such as the percentage of a SNF's residents that develop pressure ulcers, or how many residents fall and are injured as a result of the fall.

#### **What can I learn from reviewing this data?**

These data can demonstrate how a SNF's performance on SNF QRP quality measures compares to that of other SNFs, as well as to the national average. These data can showcase a SNF's ongoing commitment to quality, improving engagement and confidence among staff, residents, caregivers, families, and stakeholders.

**What is the source of this publicly reported data?** The SNF QRP data used for calculating measures include claims data for some measures and for others the data are collected and submitted to CMS via the Minimum Data Set (MDS), which is a core set of screening, clinical, and functional status elements, including common definitions and coding categories, which form the foundation of a comprehensive assessment for all residents of nursing homes certified to participate in Medicare or Medicaid. SNFs must complete a MDS admission record and discharge record on each resident that enters that SNF for care. The SNF QRP measures are calculated based on the admission and discharge data submitted for each SNF resident.

### **What are the SNF QRP quality measures that have been added to Nursing Home Compare?**

CMS has added the following five SNF QRP measures to Nursing Home Compare:

Assessment-based measures:

1. Percent of Residents or Patients in a SNF that develop new or worsened pressure ulcers (National Quality Forum #0678)
2. Percentage of residents or patients whose activities of daily living and thinking skills were assessed and related goals were included in their treatment plan (NQF #2631)
3. Percentage of SNF patients who experience one or more falls with major injury during their SNF stay (NQF #0674)

Claims-based measures:

1. Medicare Spending Per Beneficiary (MSPB) for patients in SNFs
2. Rate of successful return to home or community from an SNF

CMS has decided not to publish a 6th quality measure, Potentially Preventable 30-Day Post-Discharge Readmissions, at this time. Additional time would allow for more testing to determine if there are modifications that may be needed both to the measure and to the method for displaying the measure. This additional testing will ensure that the future publicly reported measure is thoroughly evaluated so that Compare users can depend upon an accurate picture of provider quality. While we conduct this additional testing, CMS will not post reportable data for this measure, including each SNF's performance, as well as the national rate.

**Summary of Findings** – The following table lists the new SNF QRP measures that are included on Nursing Home Compare and displays the national average rate of performance on the measures.

Skilled Nursing Facility (SNF) Quality Reporting Program (QRP) Measure Name and Description	National Rate of Quality Measure Performance
<b>Minimum Data Set (MDS)-based Measures</b>	
<p><i>Percent of Residents or Patients in a SNF that develop new or worsened pressure ulcers (National Quality Forum #0678)</i></p> <ul style="list-style-type: none"> <li>Percent of patients that developed new or worsening pressure ulcers during their stay in an SNF</li> </ul>	1.7%
<p><i>Percentage of residents or patients whose activities of daily living and thinking skills were assessed and related goals were included in their treatment plan (NQF #2631)</i></p> <ul style="list-style-type: none"> <li>Percentage of patients whose activities of daily living and thinking skills were assessed and related goals were included in their treatment plan</li> </ul>	95.8%
<p>Percentage of SNF patients who experience one or more falls with major injury during their SNF stay (NQF #0674)</p> <ul style="list-style-type: none"> <li>Percentage of patients that experienced a fall that resulted in a major injury during their stay in a SNF</li> </ul>	0.9%
<b>SNF Claims-based Measures</b>	
<p>Medicare Spending Per Beneficiary (MSPB) for patients in SNFs</p> <ul style="list-style-type: none"> <li>Shows whether Medicare spends more, less, or about the same on an episode of care for a Medicare patient treated in a specific SNF compared to how much Medicare spends on an episode of care across all SNFs nationally</li> </ul>	1.01
<p>Rate of successful return to home or community from an SNF</p> <p>The rate at which patients returned to home or community from the SNF and remained alive without any unplanned hospitalizations in the 31 days following discharge from the SNF.LTCHThe rate at which patients returned to home or community from the SNF and remained alive without any unplanned hospitalizations in the 31 days following discharge from the SNF</p>	48.57%

### Resources Available to Skilled Nursing Facilities

- Visit the [Skilled Nursing Facility \(SNF\) Quality Reporting Program \(QRP\)](#) webpage for more information on Hospice Compare.
- Visit the [SNF QRP Measures and Technical Information](#) webpage for more information on submitting data to CMS.

## Help Desks

- **For questions related to the SNF Quality Reporting Program including:**
  - SNF Quality Reporting Program requirements
  - General quality reporting requirements and reporting deadlines
  - SNF Quality Reporting Program quality measures
  - MDS 3.0 coding instructions for Part A PPS Discharge assessment and Section GG
  - Data reported in the SNF QRP CASPER Review and Correct reports
  - Data reported in the SNF QRP CASPER Quality Measure reports
    - Email: [SNFQualityQuestions@cms.hhs.gov](mailto:SNFQualityQuestions@cms.hhs.gov)
- **For questions related to Public Reporting of quality data including:**
  - Questions related to SNF Provider Preview reports
  - Requests for the CMS review of the data contained within the Provider Preview Report that a SNF may believe to be erroneous
  - Questions related to SNF Public Reporting, including SNF QRP Public Reporting on Nursing Home Compare and/or SNF QRP data on data.medicare.gov
- Email: [SNFQRPQuestions@cms.hhs.gov](mailto:SNFQRPQuestions@cms.hhs.gov)

[Subscribe](#) to the PAC QRP listserv for the latest SNF quality reporting and IMPACT Act program information including but not limited to training, stakeholder engagement opportunities, and general updates about reporting requirements, quality measures, and reporting deadlines.

## Additional Compare Sites

- [Dialysis Compare](#)
- [Home Health Compare](#)
- [Hospital Compare](#)
- [Inpatient Rehabilitation Facility \(IRF\) Compare](#)
- [Long-Term Care Hospital \(LTCH\) Compare](#)
- [Medicare Plan Finder](#)
- [Hospice Compare](#)
- [Physician Compare](#)

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