## Home Health Quality Measures – Process

Notes:

- 1. **Risk Adjustment:** Process measures are not risk adjusted to compensate for differences in the patient population. This is because the processes of care in the measures apply to all of the patients in the denominator (except for those patients that are identified in the denominator exclusions).
- 2. "Quality Episode" Definition: Quality episodes are used in the calculation of the quality measures. Quality episodes are not the same as payment episodes. A quality episode begins with either a SOC or ROC and ends with a transfer, death, or discharge for a patient regardless of the length of time between the start and ending events.
- 3. Generic Exclusions: For OASIS-based measures, in addition to the denominator criteria listed on this table, the denominator excludes patients who 1) have a home care payment source other than Medicare (traditional fee-for-service, Medicare (HMO/managed care/Advantage plan), Medicaid (traditional fee-for-service), or Medicaid (HMO/managed care), 2) are less than 18 years, 3) are receiving pre- and/or post-partum maternity services, or 4) are receiving personal care only.
- 4. Quality of Patient Care star rating: An asterisk (\*) next to the measure name indicates the measure is included in the Quality of Patient Care star rating algorithm.

Туре	Measure Title	HH Compare	NQF Status	Risk Adjusted	Measure Description	Numerator	Denominator	Measure-specific Exclusions	OASIS-D Item(s) Used
Process - Timely Care	Timely Initiation of Care*	Yes	Not endorsed	No	Percentage of home health quality episodes in which the start or resumption of care date was on the physician-ordered SOC/ROC date (if provided), otherwise was within 2 days of the referral date or inpatient discharge date, whichever is later.	Number of home health quality episodes in which the start or resumption of care date was on the physician-ordered SOC/ROC date (if provided), otherwise was within 2 days of the referral date or inpatient discharge date.	Number of home health quality episodes ending with discharge, death, or transfer to inpatient facility during the reporting period, other than those covered by generic or measure-specific exclusions.	None	(M0102) Date of Physician-ordered Start of Care (M0104) Date of Referral (M0030) Start of Care Date (M0032) Resumption of Care Date (M0100) Reason for Assessment (M1000) Inpatient Facility discharge (M1005) Inpatient Discharge Date
Process - Assessment	Depression Assessment Conducted <sup>1</sup>	Yes <sup>1</sup>	Not Endorsed	No	Percentage of home health quality episodes in which patients were screened for depression (using a standardized depression screening tool) at start/resumption of care.	Number of home health quality episodes in which patients were screened for depression (using a standardized depression screening tool) at start/resumption of care.	Number of home health quality episodes ending with discharge, death, or transfer to inpatient facility during the reporting period, other than those covered by generic or measure-specific exclusions.	Home health quality episodes for which the patient is nonresponsive.	(M1700) Cognitive Functioning (M1710) When Confused (M1720) When Anxious (M1730) Depression Screening
Process - Assessment	Multifactor Fall Risk Assessment Conducted for All Patients who Can Ambulate <sup>1</sup>	Yes <sup>1</sup>	Endorsed (0537)	No	Percentage of home health quality episodes in which patients had a multi-factor fall risk assessment at start/resumption of care.	Number of home health quality episodes in which patients had a multi-factor fall risk assessment at start/resumption of care.	Number of home health quality episodes ending with discharge, death, or transfer to inpatient facility during the reporting period, other than those covered by generic or measure-specific exclusions.	Home health quality episodes for which the patient is bed-fast or chair-fast.	(M1910) Multi-factor Fall Risk Assessment (M1860) Ambulation/Locomotion

<sup>2</sup> This measure will be removed from the Process Measures Report in January 2020.

<sup>&</sup>lt;sup>1</sup> This measure will be removed from the Process Measures Report and Process Tally Report in January 2020, the Review and Correct Report in June 2020, and Home Health Compare in January 2021.

Туре	Measure Title	HH	NQF	Risk	Measure Description	Numerator	Denominator	Measure-specific Exclusions	OASIS-D Item(s) Used
Process - Assessment	Percent of Patients with an Admission and Discharge Functional Assessment and a Care Plan that Addresses Function	Compare January 2021	Status Not endorsed for HH	Adjusted No	Percentage of home health quality episodes in which patients' mobility and self-care functional status was documented and at least one discharge goal was recorded.	Number of home health quality episodes with functional assessment data for each self-care and mobility activity and at least one self-care or mobility goal.	Number home health quality episodes ending with discharge, death, or transfer to inpatient facility during the reporting period, other than those covered by generic exclusions.	None	(GG0130A) Eating (GG0130B) Oral Hygiene (GG0130C) Toileting Hygiene (GG0170B) Sit to Lying (GG0170C) Lying to sitting on the side of the bed (GG0170D) Sit to Stand (GG0170E) Chair/bed-to-chair transfer (GG0170F) Toilet transfer (GG0170F) Toilet transfer (GG0170J) Walk 50 feet with 2 turns (GG0170R) Wheel 50 feet with 2 turns (GG0170S) Wheel 150 feet
Process - Care Plan Implementation	Diabetic Foot Care and Patient / Caregiver Education Implemented during All Episodes of Care <sup>1</sup>	Yes <sup>1</sup>	Not Endorsed	No	Percentage of home health quality episodes in which diabetic foot care and patient/caregiver education were included in the physician- ordered plan of care and implemented (at the time of or at any time since the most recent SOC/ROC assessment).	Number home health quality episodes during which diabetic foot care and patient/caregiver education were included in the physician-ordered plan of care and implemented (at the time of or at any time since the most recent SOC/ROC assessment).	Number of home health quality episodes ending with a discharge or transfer to inpatient facility during the reporting period, other than those covered by generic or measure-specific exclusions.	Home health quality episodes for which the discharge/transfer assessment indicates the patient is not diabetic or is a bilateral amputee, OR patient died.	(M0100) Reason for Assessment (M2401) a. Diabetic foot care intervention(s)
Process - Education	Drug Education on All Medications Provided to Patient/Caregiver during All Episodes of Care	Yes	Not endorsed	No	Percentage of home health quality episodes during which patient/caregiver was instructed on how to monitor the effectiveness of drug therapy, how to recognize potential adverse effects, and how and when to report problems (at the time of or at any time since the most recent SOC/ROC assessment).	Number of home health quality episodes during which patient/caregiver was instructed on how to monitor the effectiveness of drug therapy, how to recognize potential adverse effects, and how and when to report problems (at the time of or at any time since the most recent SOC/ROC assessment).	Number of home health quality episodes ending with a discharge or transfer to inpatient facility during the reporting period, other than those covered by generic or measure-specific exclusions.	Home health quality episodes for which the patient was not taking any drugs OR the patient died.	(M0100) Reason for Assessment (M2016) Patient/Caregiver Drug Education Intervention
Process - Prevention	Influenza Immunization Received for Current Flu Season	Yes	Not Endorsed	No	Percentage of home health quality episodes during which patients received influenza immunization for the current flu season.	Number of home health quality episodes during which the patient a) received vaccination from the HHA or b) had received vaccination from HHA during earlier episode of care, or c) was determined to have received vaccination from another provider.	Number of home health quality episodes ending with a discharge or transfer to inpatient facility during the reporting period, other than those covered by generic or measure-specific exclusions.	Home health quality episodes for which no care was provided during October 1–March 31, OR the patient died, or the patient does not meet age/condition guidelines for influenza vaccine.	(M0030) Start of Care Date (M0032) Resumption of Care Date (M0906) Discharge/Transfer/Death Date (M1041) Influenza Vaccine Data Collection Period: (M1046) Influenza Vaccine Received

<sup>1</sup> This measure will be removed from the Process Measures Report and Process Tally Report in January 2020, the Review and Correct Report in June 2020, and Home Health Compare in January 2021. <sup>2</sup> This measure will be removed from the Process Measures Report in January 2020.

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Туре	Measure Title	HH Compare	NQF Status	Risk Adjusted	Measure Description	Numerator	Denominator	Measure-specific Exclusions	OASIS-D Item(s) Used
Process - Prevention	Influenza Immunization Offered and Refused for Current Flu Season	No	Not endorsed	No	Percentage of home health quality episodes during which patients were offered and refused influenza immunization for the current flu season.	Number of home health quality episodes during which patients were offered and refused influenza immunization for the current flu season.	Number of home health quality episodes ending with a discharge or transfer to inpatient facility during the reporting period, other than those covered by generic or measure-specific exclusions.	Home health quality episodes for which no care was provided during October 1–March 31, OR the patient died, or the patient does not meet age/condition guidelines for influenza vaccine.	(M0030) Start of Care Date (M0032) Resumption of Care Date (M0906) Discharge/Transfer/Death Date (M1041) Influenza Vaccine Data Collection Period: (M1046) Influenza Vaccine Received
Process - Prevention	Influenza Immunization Contraindicated	No	Not endorsed	No	Percentage of home health quality episodes during which patients were determined to have medical contraindication(s) to receiving influenza immunization.	Number of home health quality episodes during which patients were determined to have medical contraindication(s) to receiving influenza vaccination.	Number of home health quality episodes ending with a discharge or transfer to inpatient facility during the reporting period, other than those covered by generic or measure-specific exclusions.	Home health quality episodes for which no care was provided during October 1–March 31, OR the patient died, or the patient does not meet age/condition guidelines for influenza vaccine.	(M0030) Start of Care Date (M0032) Resumption of Care Date (M0906) Discharge/Transfer/Death Date (M1041) Influenza Vaccine Data Collection Period: (M1046) Influenza Vaccine Received
Process - Prevention	Pneumococcal Polysaccharide Vaccine Ever Received <sup>1</sup>	Yes <sup>1</sup>	Not Endorsed	No	Percentage of home health quality episodes during which patients were determined to have ever received Pneumococcal Polysaccharide Vaccine.	Number of home health quality episodes during which patients were determined to have ever received Pneumococcal Polysaccharide Vaccine.	Number of home health quality episodes ending with a discharge or transfer to inpatient facility during the reporting period, other than those covered by generic or measure-specific exclusions.	Home health quality episodes during which patient died, OR patient does not meet age/condition guidelines for Pneumococcal Polysaccharide Vaccine.	(M1051) Pneumococcal Vaccine: (M1056) Reason Pneumococcal Vaccine not received
Process - Prevention	Pneumococcal Polysaccharide Vaccine Offered and Refused <sup>2</sup>	No	Not endorsed	No	Percentage of home health quality episodes during which patients were offered and refused Pneumococcal Polysaccharide Vaccine.	Number of home health quality episodes during which patients were offered and refused Pneumococcal Polysaccharide Vaccine.	Number of home health quality episodes ending with a discharge or transfer to inpatient facility during the reporting period, other than those covered by generic or measure-specific exclusions.	Home health quality episodes during which patient died, OR patient does not meet age/condition guidelines for Pneumococcal Polysaccharide Vaccine.	(M1051) Pneumococcal Vaccine: (M1056) Reason Pneumococcal Vaccine not received
Process - Prevention	Pneumococcal Polysaccharide Vaccine Contraindicated <sup>2</sup>	No	Not endorsed	No	Percentage of home health quality episodes during which patients were determined to have medical contraindication(s) to receiving Pneumococcal Polysaccharide Vaccine.	Number of home health quality episodes during which patients were determined to have medical contraindication(s) to receiving Pneumococcal Polysaccharide Vaccine.	Number of home health quality episodes ending with a discharge or transfer to inpatient facility during the reporting period, other than those covered by generic or measure-specific exclusions.	Home health quality episodes during which patient died, OR patient does not meet age/condition guidelines for Pneumococcal Polysaccharide Vaccine.	(M1051) Pneumococcal Vaccine: (M1056) Reason Pneumococcal Vaccine not received

<sup>1</sup> This measure will be removed from the Process Measures Report and Process Tally Report in January 2020, the Review and Correct Report in June 2020, and Home Health Compare in January 2021. <sup>2</sup> This measure will be removed from the Process Measures Report in January 2020.

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Type Measure Title	HH Compare	NQF Status	Risk Adjusted	Measure Description	Numerator	Denominator	Measure-specific Exclusions	OASIS-D Item(s) Used
Process- Prevention Drug Regimen Review Conducted with Follow-Up for Identified Issues	Yes	Not Endorsed	No	The percentage of home health quality episodes in which a drug regimen review was conducted at the start of care or resumption of care and completion of recommended actions from timely follow-up with a physician occurred each time potential clinically significant medication issues were identified throughout that quality episode.	Number of quality episodes in which: 1) The agency conducted a drug regimen review at the start of care or resumption of care or the patient is not taking any medications and 2) If potential clinically significant medication issues were identified at any time during the quality episode, then the HHA contacted a physician (or physician-designee) and completed prescribed/recommended actions by midnight of the next calendar day in response to all the identified issues throughout the quality episode.	Number of quality episodes ending with a discharge or, transfer to an inpatient facility, or death at home during the reporting period.	This measure has no denominator exclusions.	M2001 (Drug Regimen Review) M2003 (Medication Follow-up) M2005 (Medication Intervention)

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