

QUALITY MEASURES AND MDS

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OBJECTIVES

At the end of this presentation, you should be able to answer the following:

Do you know how your facility ranks with other facilities in the state and nationally?

Do you know what is “The Five Star Rating System?”

Do you know what are Quality Measures?

Do you know how MDS data is used other than for reporting clinical data on residents?



NATIONAL NURSING HOME QUALITY INITIATIVE

In 2002, CMS began a national Nursing Home Quality Initiative (NHQI) to improve the quality of care in nursing homes. NHQI includes quality measures that are shown at the Nursing Home Compare website,

<http://www.medicare.gov/NursingHomeCompare>

These quality measures are based on residents' conditions, abilities, and care provided in a facility. The information on the website is updated quarterly.

They are categorized as short stay QMs and long stay QMs.

FIVE STAR RATING AND QUALITY MEASURES

Each nursing home administrator can compare their facility with others in the area. Quality measures are a component of the Five-Star Quality Rating System . This system gives each nursing facility a rating of one to five stars measuring levels of quality. This information is found at the website <http://www.medicare.gov/NursingHomeCompare>

Consumers can obtain information on how a nursing facility compares with other facilities in the state.

QMS, MDS, AND OBRA

The nursing home quality measures are derived from resident assessment data that nursing homes routinely collect on the MDS (Minimum Data Set) as part of OBRA Assessments which are completed at specific intervals. The comprehensive assessments include Admission, Annual, Significant Change in Status, and Significant Change in Prior Assessment. The reason for the assessment is coded on the MDS in items A0310A, Federal OBRA reason for assessment, in CMS's RAI Version 3.0 Manual found on the CMS website, <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/NursingHomeQualityInits/Downloads/MDS-30-RAI-Manual-V113.pdf>

QM REPORTS

QM reports are available to nursing facilities through the Certification and Surveyor Enhanced Reporting system (CASPER) via the MDS link that is used in transmission of MDS data. They provide resident-specific information and comparison data of all facilities statewide and nationally. These reports can be utilized to identify areas for improvement. A report viewed by a provider typically covers the most recent six-month period. In the comparison group national percentile, the percentile rank represents the percentage of facilities scoring better on the QM. The system also adjusts health conditions that affect quality measures that are not controlled by the facilities.

THE FOUR QM REPORTS ARE:

- Facility Characteristics Report (demographic information about the resident population and comparative data)
- Facility Quality Measure Report (displays each QM and comparative data)
- Resident Level Quality Measure Report
- Monthly Comparison Report

A reference for more information on the quality measures: MDS 3.0 Quality Measures User's Manual (v9.0 08-15-2015) found at:

<https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/NursingHomeQualityInits/Downloads/MDS-30-QM-Users-Manual-V90.pdf>

QM: % OF RESIDENTS WHO SELF-REPORT MODERATE TO SEVERE PAIN

This measure identifies long-stay residents who have self-reported a moderate to high level of pain based on intensity /frequency.

Calculation is based on the MDS items:

J0400 Pain Frequency

J0600A & B Pain Intensity



QM: % OF RESIDENTS WITH PRESSURE ULCERS

This measure identifies residents that have Stage 2-4 pressure ulcers coded on their latest qualifying assessment . This QM also looks at high-risk residents based on bed mobility, transfer self-performance, and who are comatose or malnourished.

Calculation is based on the MDS items:

B0100 Comatose

M0300B Stage 2, M0300C Stage 3, M0300D Stage 4

G0110 ADL's

M0800 Worsening in Pressure Ulcer Status

I5600 Malnutrition

QM'S RELATED TO THE SEASONAL INFLUENZA VACCINE AND THE PNEUMOCOCCAL VACCINE

These QMs are based on MDS items:

00250, Pneumococcal vaccine

00300 Influenza vaccine

QM: % OF RESIDENTS WHO RECEIVED AN ANTIPSYCHOTIC MEDICATION

This QM measures residents receiving antipsychotic medication. Certain diagnoses are excluded.

Calculation is based on the MDS items:

N0410A Medication received in the last 7 days: Antipsychotic



QM: % OF RESIDENTS EXPERIENCING ONE OR MORE FALLS WITH MAJOR INJURY

This QM measures residents who have had at least one fall with an injury classified as major.

Calculation is based on the MDS items:

J1900C Number of falls since Admission/Entry or Reentry or Prior Assessment(OBRA or Scheduled PPS) Major Injury

QM: % OF RESIDENTS WITH A URINARY TRACT INFECTION

This measure reports residents with a urinary tract infection on their last qualifying assessment.

Calculation is based on I2300 (UTI last 30 days)



QM: % OF LOW-RISK RESIDENTS WHO LOSE CONTROL OF THEIR BOWELS OR BLADDER

This measures low-risk residents who have reported frequent or always incontinent coded on the last qualifying assessment.

Calculation is based on MDS items:

Section C- Cognitive Patterns

G0110 ADLs

H0100 Appliances

H0300 Urinary Continence

H0400 Bowel Continence



QM: % OF RESIDENTS WHO HAVE/HAD A CATHETER INSERTED AND LEFT IN THEIR BLADDER

This QM measures residents with indwelling catheters.

Calculation is based on MDS items:

H0100A Indwelling Catheter

I1550 Neurogenic Bladder

I1650 Obstructive Uropathy



QM: % OF RESIDENTS WHO WERE PHYSICALLY RESTRAINED

This QM measures residents who have been restrained on a daily basis.

Calculation is based on MDS items:

P0100 Physical Restraints



QM: % OF RESIDENTS WHOSE NEED FOR HELP WITH ACTIVITIES OF DAILY LIVING HAS INCREASED

This QM measures residents who have declined in the late-loss ADLs. (bed mobility, eating , transfers, toilet use) Certain diagnoses are excluded such as those residents on hospice or are comatose.

Calculation is based on MDS items:

G0110A Bed Mobility

G0110B Transfer

G0110H Eating

G0110I Toilet Use



QM: % OF RESIDENTS WHO LOSE TOO MUCH WEIGHT

This QM reports residents who have lost 5% of their weight during the last month or 10% over the past 6 months when not on a prescribed weight loss program.

Calculation is based on MDS item:

K0300 Weight Loss



QM: % OF RESIDENTS WHO HAVE DEPRESSIVE SYMPTOMS

Calculation is based on MDS item:

D0200 Resident Mood Interview (PHQ-9)

D0300 Total Severity Score

D0500 Staff Assessment of Resident Mood

D0600 Total Severity Score



SUMMARY

Facilities should ensure that MDS assessments are done accurately and completely. These assessments assist in planning the care for residents. Care plans should regularly be assessed to ensure they match each resident's current condition as well as physician orders and documentation in the medical record. QMs are also used to report how well care has been delivered through the reporting of quality measures.

REFERENCES

Each facility should use the latest MDS manual:

<https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/NursingHomeQualityInits/Downloads/MDS-30-RAI-Manual-V113.pdf>

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