
CBE ID

2633

Title

Inpatient Rehabilitation Facility (IRF) Functional Outcome Measure: Change in Self-Care Score for Medical Rehabilitation Patients

Endorsement Status

Endorsement Removed

E&M Committee Rationale/Justification

Steward no longer seeking to maintain endorsement

Is Under Review

No

Previous Endorsement Cycle

Spring 2019

Removal Date

Tue, 08/27/2024 - 10:07

Initial Endorsement

Tue, 11/03/2015 - 19:00

Steward

Centers for Medicare & Medicaid Services

1.0 New or Maintenance

Maintenance

1.1 Measure Structure

Single Measure

1.3 Electronic Clinical Quality Measure (eCQM)

No

1.6 Measure Description

This measure estimates the risk-adjusted mean change in self-care score between admission and discharge for Inpatient Rehabilitation Facility (IRF) Medicare Part A and Medicare Advantage patients.

1.7 Measure Type

Outcome

1.8 Level of Analysis

Facility

1.13 Data Dictionary

Not attached. I attest that all information will be provided where codes and/or value sets are needed (1.14a - 1.15c).

1.14 Numerator

The measure does not have a simple form for the numerator and denominator. This measure estimates the risk-adjusted change in self-care score between admission and discharge among Inpatient Rehabilitation Facility (IRF) Medicare Part A and Medicare Advantage patients age 21 or older. The change in self-care score is calculated as the difference between the discharge self-care score and the admission self-care score.

1.15 Denominator

The denominator is the number of Inpatient Rehabilitation Facility Medicare patient stays, except those that meet the exclusion criteria.

6.1.2 Current or Planned Use(s)

Public Reporting, Quality Improvement with Benchmarking (external benchmarking to multiple organizations), Quality Improvement (Internal to the specific organization)

6.1.3 Current Use(s)

Public Reporting, Quality Improvement with Benchmarking (external benchmarking to multiple organizations), Quality Improvement (Internal to the specific organization)

Exclusions

This quality measure has six patient-level exclusion criteria:

1) Patients with incomplete stays.

Rationale: When a patient has an incomplete stay, for example, the patients leave urgently due to a medical emergency, it can be challenging to gather accurate discharge functional status data. Patients with incomplete stays include patients who are unexpectedly discharged to an acute care setting (Short-stay Acute Hospital, Critical Access Hospital, Inpatient Psychiatric Facility, or Long-term Care Hospital); patients who die or leave an Inpatient Rehabilitation Facility (IRF) against medical advice; and patients with a length of stay less than 3 days.

2) Patients who are independent with all self-care activities at the time of admission.

Rationale: Patients who are independent with all the self-care items at the time of admission are assigned the highest score on all the self-care items, and thus, would not be able to show functional improvement on this same set of items at discharge.

3) Patients with the following medical conditions on admission: coma; persistent vegetative state; complete quadriplegia; locked-in syndrome; or severe anoxic brain damage, cerebral edema or

compression of the brain.

Rationale: These patients are excluded because they may have limited or less predictable self-care improvement with the selected self-care items.

4) Patients younger than age 21.

Rationale: There is only limited evidence published about functional outcomes for individuals with Medicare who are younger than 21.

5) Patients discharged to Hospice.

Rationale: Patient goals may change during the IRF stay, and functional improvement may no longer be a goal for a patient discharged to hospice.

6) Patients who are not Medicare Part A and Medicare Advantage beneficiaries.

Rationale: IRF-PAI data for patients not covered by the Medicare program are not submitted to the Centers for Medicare and Medicaid Services.

Facility-level quality measure exclusion: For IRFs with fewer than 20 patient stays, data for this quality measure are not publicly reported.

Measure Disclaimer

Not applicable

Planned Use

Public Reporting

Risk Adjustment

Statistical risk model

Target Population

Individuals with multiple chronic conditions

Use In Federal Program

Inpatient Rehabilitation Facility Quality Reporting

The measure developer is different from the measure steward

No

Steward Organization

Centers for Medicare & Medicaid Services

Steward POC email

Helen.Dollar-Maples@cms.hhs.gov