

CBE ID

2635

Title

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

Endorsement Status

Endorsed by Extension

Is Under Review

No

Next Maintenance Cycle

Spring 2027

Previous Endorsement Cycle

Spring 2019

Initial Endorsement

Thu, 07/23/2015 - 08:26

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 percentage of IRF patients who meet or exceed an expected discharge self-care score.

1.7 Measure Type

Outcome

1.8 Level of Analysis

Facility

1.14 Numerator

The numerator is the number of patients in an IRF with an observed discharge self-care score that is equal to or higher than the calculated expected discharge self-care score.

1.15 Denominator

Inpatient Rehabilitation Facility patients included in this measure are at least 21 years of age, Medicare Part A and Medicare Advantage beneficiaries, and have complete stays.

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 five 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 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.

3) Patients younger than age 21.

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

4) 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.

5) Patients not covered by the Medicare Part A and Medicare Advantage program.

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

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