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**CBE ID**

3728

**Title**

Skilled Nursing Facility Healthcare-Associated Infections Requiring Hospitalization (SNF HAI)

**Endorsement Status**

Endorsed

**Is Under Review**

No

**Next Maintenance Cycle**

Spring 2029

**Previous Endorsement Cycle**

Spring 2023

**Initial Endorsement**

Wed, 12/06/2023 - 12:00

**Steward**

Centers for Medicare & Medicaid Services

**1.0 New or Maintenance**

New

**1.1 Measure Structure**

Single Measure

**1.3 Electronic Clinical Quality Measure (eCQM)**

No

**1.6 Measure Description**

SNF HAI is a one-year outcome measure that estimates the risk-standardized rate of healthcare-associated infections (HAIs) that are acquired during SNF care and result in hospitalization.

**1.7 Measure Type**

Outcome

**1.8 Level of Analysis**

Facility

**1.14 Numerator**

The measure numerator is the number of stays with an HAI acquired during SNF care and

resulting in an inpatient hospitalization. The hospitalization must occur during the period beginning on day four after SNF admission and within three days of SNF discharge.

### **1.15 Denominator**

The study population includes Medicare Part A fee-for-service (FFS) SNF stays that were admitted during the measure time period (one year) and that meet the inclusion criteria during the measurement period.

### **1.20 Types of Data Sources**

Claims Data

### **6.1.2 Current or Planned Use(s)**

Public Reporting, Public Health/Disease Surveillance, Payment Program, Quality Improvement with Benchmarking (external benchmarking to multiple organizations), Quality Improvement (Internal to the specific organization)

### **6.1.3 Current Use(s)**

Public Reporting, Public Health/Disease Surveillance, Payment Program, Quality Improvement with Benchmarking (external benchmarking to multiple organizations), Quality Improvement (Internal to the specific organization)

### **Exclusions**

SNF stays are excluded from the denominator if they meet one or more of the following criteria: (i) residents who are less than 18 years of age at the time of admission; (ii) the SNF length of stay was shorter than four days; (iii) residents who were not continuously enrolled in Part A FFS Medicare during the SNF stay, 12 months prior to the measure period, and three days after the end of the SNF stay; (iv) residents who did not have a Part A short-term acute care hospital stay within 30 days prior to the SNF admission date (the short-term stay must have positive payment and positive length of stay); (v) residents who were transferred to a federal hospital from the SNF as determined by the discharge status code on the SNF claim, (vi) residents who received care from a provider located outside of the United States, Puerto Rico, or a United States territory as determined from the first two characters of the SNF CCN; (vii) SNF stays in which data were missing on any variable used in the measure construction or risk adjustment, (viii) stays where Medicare did not pay for the stay resulting in a non-positive payment on the SNF claim, and (xi) swing bed stays in critical access hospitals.

### **Risk Adjustment**

Statistical risk model

### **The measure developer is different from the measure steward**

No

### **Steward Organization**

Centers for Medicare & Medicaid Services

### **Steward POC email**

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