

## APPENDIX E: REFERENCES

- Arroll B, Goodyear-Smith F, Crengle S, et al. Validation of PHQ-2 and PHQ-9 to screen for major depression in the primary care population. *Ann Fam Med*. 2010;8(4):348-353. doi: 10.1370/afm.1139.
- Baker DW, Cameron KA, Feinglass J, et al. Patients' attitudes toward health care providers collecting information about their race and ethnicity. *J Gen Intern Med*. 2005;20(10):895-900. doi: 10.1111/j.1525-1497.2005.0195.x.
- Centers for Medicare & Medicaid Services. Glossary. Available from: <https://www.cms.gov/apps/glossary>
- Centers for Medicare & Medicaid Services. LTCH CARE Data Submission Specifications. Available from: <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/LTCH-Quality-Reporting/LTCH-Technical-Information.html>
- Centers for Medicare & Medicaid Services. LTCH CARE Data Set. Available from: <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/LTCH-Quality-Reporting/LTCH-CARE-Data-Set-and-LTCH-QRP-Manual.html>
- Health Research & Educational Trust. Social determinants of health series: Transportation and the role of hospitals. Chicago, IL: November 2017. Available from: <https://www.aha.org/system/files/hpoe/Reports-HPOE/2017/sdoh-transportation-role-of-hospitals.pdf>
- Inouye SK, van Dyck CH, Alessi CA, Balkin S, Siegel AP, Horwitz RI. Clarifying confusion: the confusion assessment method. A new method for detection of delirium. *Ann Intern Med*. 1990;113(12):941-948. doi: 10.7326/0003-4819-113-12-941.
- Inouye SK. The Confusion Assessment Method (CAM): Training Manual and Guide. Boston: Hospital Elder Life Program; 2003.
- Kim D, Riley LE, Harriman KH, Hunter P, Bridges CB. Advisory Committee on Immunization Practices Recommended Immunization Schedule for Adults Aged 19 Years or Older – United States, 2017. *MMWR Morb Mortal Wkly Rep*. 2017;66(5):136-138. doi: 10.15585/mmwr.mm6605e2.
- Li C, Friedman B, Conwell Y, Fiscella K. Validity of the Patient Health Questionnaire 2 (PHQ-2) in identifying major depression in older people. *J Am Geriatr Soc*. 2007;55(4):596-602. doi: 10.1111/j.1532-5415.2007.01103.x.
- Löwe B, Kroenke K, Gräfe K. Detecting and monitoring depression with a two-item questionnaire (PHQ-2). *J Psychosom Res*. 2005 Feb;58(2):163-171. doi: 10.1016/j.jpsychores.2004.09.006.

- Morris NS, MacLean CD, Chew LD, Littenberg B. The Single Item Literacy Screener: evaluation of a brief instrument to identify limited reading ability. *BMC Fam Pract*. 2006;7:21. doi:10.1186/1471-2296-7-21.
- National Association of Community Health Centers. PRAPARE Implementation and Action Toolkit. March 2019. Available from: [http://www.nachc.org/wp-content/uploads/2019/04/NACHC\\_PRAPARE\\_Full-Toolkit.pdf](http://www.nachc.org/wp-content/uploads/2019/04/NACHC_PRAPARE_Full-Toolkit.pdf)
- National Pressure Injury Advisory Panel. Pressure Injury Stages. Available from: <https://npiap.com/page/PressureInjuryStages>
- Patient Protection and Affordable Care Act. Pub. L. 111-148. Stat. 124-119. March 23, 2010. Available from: <http://www.gpo.gov/fdsys/pkg/PLAW-111publ148/pdf/PLAW-111publ148.pdf>
- Spitzer RL, Kroenke K, Williams JB, Patient Health Questionnaire Primary Care Study Group. Validation and utility of a self-report version of PRIME-MD: the PHQ Primary Care Study. *JAMA*. 1999;282(18):1737-1744. doi: 10.1001/jama.282.18.1737.
- U.S. Department of Health and Human Services, Centers for Medicare & Medicaid Services: Medicare Program: Hospital Inpatient Prospective Payment Systems for Acute Care Hospitals and the Long-Term Care Hospital Prospective Payment System and FY 2012 Rates; Hospitals' FTE Resident Caps for Graduate Medical Education Payment; Final Rule, Federal Register/Vol. 76, No. 120, Aug. 18, 2011. Available from: <http://www.gpo.gov/fdsys/pkg/FR-2011-08-18/pdf/2011-19719.pdf>
- U.S. Department of Health and Human Services, Centers for Medicare & Medicaid Services: Medicare Program: Hospital Inpatient Prospective Payment Systems for Acute Care Hospitals and the Long-Term Care Hospital Prospective Payment System and Fiscal Year 2013 Rates; Hospitals' Resident Caps for Graduate Medical Education Payment Purposes; Quality Reporting Requirements for Specific Providers and for Ambulatory Surgical Centers; Final Rule, Federal Register/Vol. 77, No. 170, Aug. 31, 2012. Available from: <http://www.gpo.gov/fdsys/pkg/FR-2012-08-31/pdf/2012-19079.pdf>
- U.S. Department of Health and Human Services, Centers for Medicare & Medicaid Services: Medicare Program: Hospital Inpatient Prospective Payment Systems for Acute Care Hospitals and the Long-Term Care Hospital Prospective Payment System and Fiscal Year 2014 Rates; Quality Reporting Requirements for Specific Providers; Hospital Conditions of Participation; Final Rule, Aug. 19, 2013. Available from: <http://www.gpo.gov/fdsys/pkg/FR-2013-08-19/pdf/2013-18956.pdf>  
Corrections (October 3, 2013) available from: <http://www.gpo.gov/fdsys/pkg/FR-2013-10-03/pdf/2013-24211.pdf>

- U.S. Department of Health and Human Services, Centers for Medicare & Medicaid Services: Medicare Program; Hospital Inpatient Prospective Payment Systems for Acute Care Hospitals and the Long-Term Care Hospital Prospective Payment System and Fiscal Year 2015 Rates; Quality Reporting Requirements for Specific Providers; Reasonable Compensation Equivalents for Physician Services in Excluded Hospitals and Certain Teaching Hospitals; Provider Administrative Appeals and Judicial Review; Enforcement Provisions for Organ Transplant Centers; and Electronic Health Record (EHR) Incentive Program; Final Rule, Aug. 22, 2014. Available from: <http://www.gpo.gov/fdsys/pkg/FR-2014-08-22/pdf/2014-18545.pdf>
- U.S. Department of Health and Human Services, Centers for Medicare & Medicaid Services: Medicare Program; Hospital Inpatient Prospective Payment Systems for Acute Care Hospitals and the Long-Term Care Hospital Prospective Payment System Policy Changes and Fiscal Year 2016 Rates; Revisions of Quality Reporting Requirements for Specific Providers, Including Changes Related to the Electronic Health Record Incentive Program; Extensions of the Medicare-Dependent, Small Rural Hospital Program and the Low-Volume Payment Adjustment for Hospitals; Final Rule, Aug. 17, 2015. Available from: <http://www.gpo.gov/fdsys/pkg/FR-2015-08-17/pdf/2015-19049.pdf>
- U.S. Department of Health and Human Services, Centers for Medicare & Medicaid Services: Medicare Program; Hospital Inpatient Prospective Payment Systems for Acute Care Hospitals and the Long-Term Care Hospital Prospective Payment System and Policy Changes and Fiscal Year 2017 Rates; Quality Reporting Requirements for Specific Providers; Graduate Medical Education; Hospital Notification Procedures Applicable to Beneficiaries Receiving Observation Services; Technical Changes Relating to Costs to Organizations and Medicare Cost Reports; Finalization of Interim Final Rules With Comment Period on LTCH PPS Payments for Severe Wounds, Modifications of Limitations on Redesignation by the Medicare Geographic Classification Review Board, and Extensions of Payments to MDHs and Low-Volume Hospitals; Final Rule, Aug. 22, 2016. Available from: <https://www.gpo.gov/fdsys/pkg/FR-2016-08-22/pdf/2016-18476.pdf>
- U.S. Department of Health and Human Services, Centers for Medicare & Medicaid Services: Medicare Program; Hospital Inpatient Prospective Payment Systems for Acute Care Hospitals and the Long-Term Care Hospital Prospective Payment System and Policy Changes and Fiscal Year 2018 Rates; Quality Reporting Requirements for Specific Providers; Medicare and Medicaid Electronic Health Record (EHR) Incentive Program Requirements for Eligible Hospitals, Critical Access Hospitals, and Eligible Professionals; Provider-Based Status of Indian Health Service and Tribal Facilities and Organizations; Costs Reporting and Provider Requirements; Agreement Termination Notices; Final Rule, Aug 14, 2017. Available from: <https://www.gpo.gov/fdsys/pkg/FR-2017-08-14/pdf/2017-16434.pdf>
- U.S. Department of Health and Human Services, Centers for Medicare & Medicaid Services: Medicare Program; Hospital Inpatient Prospective Payment Systems for Acute Care Hospitals and the Long-Term Care Hospital Prospective Payment System and Policy Changes and Fiscal Year 2019 Rates; Quality Reporting Requirements for Specific Providers; Medicare and Medicaid Electronic Health Record (EHR) Incentive Programs

(Promoting Interoperability Programs) Requirements for Eligible Hospitals, Critical Access Hospitals, and Eligible Professionals; Medicare Cost Reporting Requirements; and Physician Certification and Recertification of Claims; Final Rule, Aug. 17, 2018. Available from: <https://www.govinfo.gov/content/pkg/FR-2018-08-17/pdf/2018-16766.pdf>

U.S. Department of Health and Human Services, Centers for Medicare & Medicaid Services: Medicare Program; Hospital Inpatient Prospective Payment Systems for Acute Care Hospitals and the Long-Term Care Hospital Prospective Payment System and Policy Changes and Fiscal Year 2020 Rates; Quality Reporting Requirements for Specific Providers; Medicare and Medicaid Promoting Interoperability Programs Requirements for Eligible Hospitals and Critical Access Hospitals; Final Rule, Aug. 16, 2019. Available from: <https://www.govinfo.gov/content/pkg/FR-2019-08-16/pdf/2019-16762.pdf>

U.S. Department of Health and Human Services, Centers for Medicare & Medicaid Services: Medicare Program; Hospital Inpatient Prospective Payment Systems for Acute Care Hospitals and the Long-Term Care Hospital Prospective Payment System and Proposed Policy Changes and Fiscal Year 2021 Rates; Quality Reporting and Medicare and Medicaid Promoting Interoperability Programs Requirements for Eligible Hospitals and Critical Access Hospitals; Final Rule, May 29, 2020. Available from: <https://www.govinfo.gov/content/pkg/FR-2020-05-29/pdf/2020-10122.pdf>

U.S. Department of Health and Human Services, Centers for Medicare & Medicaid Services: Medicare Program; Hospital Inpatient Prospective Payment Systems for Acute Care Hospitals and the Long-Term Care Hospital Prospective Payment System and Policy Changes and Fiscal Year 2022 Rates; Quality Programs and Medicare Promoting Interoperability Program Requirements for Eligible Hospitals and Critical Access Hospitals; Changes to Medicaid Provider Enrollment; and Changes to the Medicare Shared Savings Program; Final Rule, Aug. 13, 2021. Available from: <https://www.govinfo.gov/content/pkg/FR-2021-08-13/pdf/2021-16519.pdf>

U.S. Department of Health and Human Services, Centers for Medicare & Medicaid Services: Medicare and Medicaid Programs; CY 2022 Home Health Prospective Payment System Rate Update; Home Health Value-Based Purchasing Model Requirements and Model Expansion; Home Health and Other quality Reporting Program Requirements; Home Infusion Therapy Services Requirements; Survey and Enforcement Requirements for Hospice Programs; Medicare Provider Enrollment Requirements; and COVID-19 Reporting Requirements for Long-Term Care Facilities; Final Rule, November 9, 2021. Available from: <https://www.govinfo.gov/content/pkg/FR-2021-11-09/pdf/2021-23993.pdf>